

2019 HANDBOOK BIOMEDICAL & CLINICAL TECHNOLOGY

# HANDBOOK FOR 2019

# FACULTY OF HEALTH SCIENCES

# DEPARTMENT of BIOMEDICAL and CLINICAL TECHNOLOGY

The above department offers two programmes: Biomedical Technology/Medical Laboratory Science & Clinical Technology

This handbook offers information on both programmes.

#### WHAT IS A UNIVERSITY OF TECHNOLOGY?

A university of technology is characterized by being research informed rather than research driven where the focus is on strategic and applied research that can be translated into professional practice. Furthermore, research output is commercialized thus providing a source of income for the institution. Learning programmes, in which the emphasis on technological capability is as important as cognitive skills, are developed around graduate profiles as defined by industry and the professions.

#### NOTE TO ALL REGISTERED STUDENTS

Your registration is in accordance with all current rules of the Institution. If, for whatever reason, you do not register consecutively for every year/semester of your programme, your existing registration contract with the Institution will cease. Your re-registration anytime thereafter will be at the discretion of the institution and, if permitted, will be in accordance with the rules applicable at that time.

#### **IMPORTANT NOTICES**

The rules in this departmental handbook must be read in conjunction with the General Rules (G Rules) contained in the DUT General Handbook for Students as well as the relevant subject Study Guides.

Your attention is specifically drawn to Rule G1 (8), and to the process of dealing with students issues

# FACULTY of HEALTH SCIENCES FACULTY VISION, MISSION, GOALS & VALUES

(November 2012 for 2013-2017)

#### Vision:

# "Leading Transformative and Innovative Health Sciences Education" Mission Statement:

"Developing Holistic Professionals responsive to Healthcare needs" through Excellence in:

- Teaching and Learning
- Research, Innovation and Engagement
- Fostering Entrepreneurship

#### **Values**

#### **Professionalism**

(To work within regulatory frameworks of professional conduct. To maintain and develop professional expertise and good work ethic.)

## Integrity

(To conduct ourselves with strong moral principles. To be honest and authentic. To do what is ethical and just.)

#### Ubuntu

(To treat people with respect, fairness, courtesy, politeness and kindness.)

# **Transparency**

(To conduct ourselves with openness and honesty through shared governance.)

#### **Accountability**

(To accept responsibility for one's actions.)

#### Goals

The Faculty aims to:

- I. Respond to the National health human resource and industry needs within the health sector.
- 2. Ensure the offering of entrepreneurial and leadership skills as a core component of all programmes within the Faculty of Health Sciences.
- 3. Continue to develop community-based projects to foster social responsibility through collaborative projects between programmes.
- 4. Enhance established quality management frameworks to support teaching and learning.
- 5. Develop applied research responsive to community and industry needs.
- 6. Develop mechanisms for the dissemination and application of research outcomes to inform teaching and learning, assessment, community engagement and further research.
- 7. Improve research participation and output through increased post-graduate student enrolment, publications and establishment of research groups.
- 8. Enable the generation of third-stream income through research and innovation (patents / artifacts) in order to supplement existing sources of income for the next five years.
- 9. Attract and retain diverse quality staff, while promoting advancement of individual potential.
- 10. Position DUT Health Sciences nationally

#### **Values**

The Faculty is guided by the following core values:

- I Transparency, openness, honesty, and shared governance
- 2 Professional and personal respect for others
- 3 Educational relevance, equity and transformation (curriculum, access and success)
- 4 Loyalty, accountability, dignity and trust

#### **DEPARTMENTAL MISSION & GOALS**

The above department offers two programmes:

## **Biomedical Technology and Clinical Technology**

## Vision:

Globally recognized for Medical Laboratory and Clinical Technology Science Education

#### Mission:

"Develop Critical, Investigative Professionals for Diagnosis and Disease Management"

#### Through

- Teaching and Learning
- Research
- Community and Industry Engagement
- Entrepreneurship

#### **Values**

### **Professionalism**

(To conduct oneself within established standards and norms. To demonstrate professional skills and behaviours.)

#### Integrity

(To be honest and trustworthy. To be ethical and fair in critical analysis and reporting.)

# Accountability

(To be answerable for one's actions. To be accountable to our society. To be committed)

Patients' Lives Matter

#### **Graduate attributes:**

- Use a range of information technologies to identify, gather and disseminate information.
- Engage in the generation of new knowledge in their specialist professional disciplines and academic fields which will be investigated and recorded scientifically.
- Work independently, identify, critically analyse and solve problems in their professional, individual and societal environments
- 4. Lead and effectively manage team members in an organisation and within their communities.
- Be aware of cultural diversity and show respect to indigenous knowledge, cultures and values
- 6. Think critically and have excellent decision making skills including awareness of personal strengths and limitations.
- Communicate effectively within the health care and educational environment, using visual, mathematical and/or language skills in the modes of oral and or written presentation
- 8. Use science and technology effectively and critically, showing responsibility towards the environment and health of others
- Participate as responsible citizens in the life of local, national and global communities

#### Goals

The department aims to:

- 1. Provide quality teaching, learning and support to students
- 2. Respond to national human resource and industry needs
- 3. Provide excellent professional value-driven education, promote entrepreneurship and leadership skills.
- 4. Produce graduates that are independent thinkers functioning within a team
- 5. Foster professional and ethical conduct
- 6. Keep abreast with current and future technological trends
- Enhance the quality management frameworks to support teaching, learning, assessment and research.
- 8. Encourage research responsive to community and health needs
- 9. Position the Department of Biomedical and Clinical Technology nationally and internationally.
- 10. Attract and retain diverse quality staff while promoting advancement of individual potential
- 11. Maintain relationships within the institution, relevant professional bodies, industry, educational institutions, alumni and other stakeholders.
- 12. Foster national and international collaboration and partnerships
- 13. Strive for excellence and success
- 14. Embrace an attitude of life-long learning with the aim to improve professional clinical practice through research

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# I. DEPARTMENTAL & FACULTY CONTACT DETAILS

All departmental enquiries to:

 Secretary:
 Mrs Bongi Nene

 Tel No:
 (031) 373 5411

 Fax No:
 (031) 373 5295

 Email:
 nenebg@dut.ac.za

Location of Department: MB 2-9 ML Sultan Campus

All Faculty enquiries to:

Acting Faculty Officer:

Tel No:

(031) 373 2446

Fax No:

(031) 373 2407

Email:

thembim@dut.ac.za

Location: Health Faculty Office, Gate 8,

Steve Biko Road, Mansfield Site

Area, Ritson Campus

Executive Dean: Prof N Sibiya
Executive Dean's Secretary Mrs Bilkish K

Executive Dean's Secretary
Tel No:
(031) 373 2704
Fax No:
(031) 373 2620
Email:
bilkishk@dut.ac.za

Location: Executive Dean's Office, Gate 8,

Steve Biko Road, Mansfield Site

Area, Ritson Campus



### 2. DEPARTMENTAL STAFF

**Staff** 

**Head of Department** 

NAME AND QUALIFICATION

Dr D R Prakaschandra, PhD (Cardiology)

(UKZN)

Senior Lecturers

Mrs B T Mkhize, MTech: Biomed Tech

(DUT)

Dr M J Mohapi, PhD (Health Sciences);

MED (Higher Education) Dr P Pillay, PhD (UKZN)

Dr S Benjamin<sup>1</sup> DTech: Clin Tech (DUT)

Dr JN Mbatha PhD: Medical Micro

(UKZN)

Lecturer

Mr M E Memela, MTech: Clin Tech (DUT)

Miss T S Ndlovu, MTech: Biomed Tech

(DUT)

Mr D Govender, NHD: Med Tech (MLST)

Mr C Sydney, M Med Sc (UKZN)

Mr DC Mdluli (MSc Med; BTech: Clin

Tech)

Senior Lab Technician Laboratory Technicians

Mrs Y Pillay, Comp Prog (MLST)

Mr J Mbuyazi, ND: Pharmaceutical

Marketing (MLST)

Ms T C Qangule, ND: Med Tech Micro

(Pen Tech)

Mr D Reddy, Cytotechnician,

(CTCMIAC)

Laboratory Assistant
Departmental Secretary

Miss H Ramphal, ND: OMT (DUT) Mrs B G Nene, BTech: OMT (DUT)

Head of Programme: Clinical Technology

<sup>&</sup>lt;sup>2</sup> Head of Programme : Biomedical Technology and Medical Laboratory Science

#### 3. DEPARTMENTAL INFORMATION & RULES

## 3.1 Programmes offered by the department

This department offers two programmes, namely:

- Biomedical Technology
- Clinical Technology

## 3.2. Qualifications offered by the department

Learning programmes are offered in this Department which will, upon successful completion, lead to the award of the following qualifications:

Qualification Important Dates	Qual Code	SAQA NLRD Number	Important Dates
Biomedical	Technology Programme	•	•
ND: Biomedical Technology	NDBMTI	1895	Teach- out date: 2021
ND: Biomedical Technology (ECP)	NDBMFI		
BTech: Biomedical Technology	BTBMT1/BTBMT2	1899	Phasing out date 2019
Master of Health Sciences in Medical Laboratory Science	MHMLSI		
Doctor of Medical Laboratory Science	DRMLSI		
BHSc in Medical Laboratory Science			First offered in 2018
Clinical To	echnology Programme	•	•
ND: Clinical Technology	NDCLTI	1879	Teach- out date: 2021
ND: Clinical Technology (ECP)	NDCLF2		Phasing out date: 2017
BTech: Clinical Technology	BTCLT1/BTCLT2	1889	Phasing out date: 2019
Masters of Health Sciences in Clinical Technology	MHCLTI		
Doctor of Medical Clinical Sciences	DRMCSI		
BHSc in Clinical Technology			2017

### 3.3. Departmental Information

### 3.3.1. Academic Integrity

Please refer to the General Rules pertaining to the academic integrity G13 (1)(o). These will be enforced wherever necessary to safeguard the worthiness of our qualifications, and the integrity of the Faculty of Health Sciences at the DUT.

# 3.3.2. Code of Conduct for Students

In addition to the General Rules pertaining to Student Conduct SR3 (3), a professional code of conduct pertaining to behaviour, appearance, personal hygiene and dress shall apply to all students registered sessions with the Faculty of Health Sciences, at all times.



## 3.3.3. Uniforms

Students must adhere to instructions regarding specific dress code required during practical sessions and/ hospital visits. All students are required to wear laboratory coats on top of their own clothing and closed shoes during practical and some practical sessions may also need students to wear masks or goggles and gloves.

#### 3.3.4. Attendance

Students are encouraged to achieve 100% attendance for all planned academic activities as these are designed to provide optimal support for the required competency. Where absence is unavoidable, the student must timeously advise the department of the reason. Only exceptional reasons will be accepted for absence from guest lectures, industry or field trips. Poor attendance records may lead to penalties as per programme rules. Where absence impacts on assessment, please refer to Section 3.4. (Departmental Rules) below.

### 3.3.5. Health and Safety

Students must adhere to all Health and Safety regulations both while at DUT and in Work Integrated Learning (WIL) placements. Failure to do so will be treated as a breach of discipline.

## 3.3.6. Registration with the Professional Board

As a Student: Within two weeks of registration with the Department, students are required to register as Student Medical Technologists / Medical Laboratory Scientist or Student Clinical Technologists with the Health Professions Council of South Africa as determined in the regulations set out in the Allied Health Service Professions Act, 1982 (Act 63 of 1982) (Regulation R629, Government Gazette No 11221 of 31 March 1988).

# **As a Graduate** (Biomedical Technology/Medical Laboratory Science)

A graduate, on successful completion of the qualification and the required internship, and after passing a competency assessment to satisfy the requirements of the Professional Board for Medical Technology, may register as a qualified Biomedical Technologist or Medical Laboratory Scientist (as applicable) with the Health Professionals Council of South Africa (HPCSA). After registration with the HPCSA, graduates may work in government, private health care laboratories and research laboratories. Unregistered Biomedical Technologists/Medical Laboratory Science may work in non-diagnostic laboratories. To practice independently as a Biomedical Technologist/Medical Laboratory Scientist, two years post-registration experience is required.

As a Graduate (Clinical Technology):

A graduate, on successful completion of the qualification and after having satisfied the requirements of the Professional Board for Radiography and Clinical Technology, may register as a qualified Clinical Technologist (as applicable) with the HPCSA.



## 3.3.7. Student appeals:

Rule G1 (8) in the DUT General Handbook apply.

#### 3.4. DEPARTMENTAL RULES

## 3.4.1 Special Tests and condonement

No summative assessments will be condoned. Summative means all assessment marks that contribute to the final mark of a subject, but not including examinations for the purpose of this rule.

- If a student misses a summative written or oral or practical test, for
  reasons of illness, a special test may be granted if the student provides a
  valid medical certificate specifying the nature and duration of the illness,
  and a declaration that for health reasons it was impossible for the student
  to sit for the test. This certificate must be submitted to the lecturer or
  head of programme, no later than one week after the date of the missed
  test.
- If a student misses a summative written or oral or practical test, for
  reasons other than illness, a special test may be granted if the student
  provides a valid declaration that for unavoidable reasons it was impossible
  for the student to sit for the test. This declaration must be submitted to
  the programme coordinator, no later than one week after the date of the
  missed test
- In addition, a special test may be granted to students with borderline academic results. The special test which may take the form of an oral test, may be set at the end of the period of registration, and may include a wider scope of work than the original test.
- Any student who misses an assessment and who does not qualify for a special test, and any student who qualifies for a special test but fails to write it, shall be allocated a zero mark for the missed assessment. A student who qualifies for a special test granted for borderline academic results, but fails to write it, or achieves lower than their original results, shall be allocated their original results.

# 3.4.2 Student Appeals

Rule G1 (8) applies.



# SECTION A: BIOMEDICAL TECHNOLOGY PROGRAMME 4. NATIONAL DIPLOMA: BIOMEDICAL TECHNOLOGY (NDBMTI)

## 4.1. Programme Information

Biomedical Technology is a profession of highly knowledgeable and skilled individuals who perform clinical laboratory tests on patient samples. The services offered by Biomedical Technologists are an important component of patient health care, as the results obtained from these laboratory tests are a vital tool in the diagnosis, treatment and prevention of disease. The qualifying student will be able to organize and perform laboratory operations in clinical diagnostic laboratories and related fields in compliance with statutory requirements for ethics, safety and quality assurance. Supervisory, management and research skills are developed.

## 4.1.1 Duration of the programme

Students in Biomedical Technology/Medical Laboratory Science must attend formal lectures and practical sessions at the Durban University of Technology in all modules for the duration of their studies. The minimum study period is three years, including a six (6) months experiential learning component which occurs in the sixth semester.

Successful applicants for study towards a ND: Biomedical Technology will be accepted into a three-year minimum or an extended, four-year programme of study which comprises of theoretical and practical learning.

#### 4.1.2 Assessment and Moderation

Most subjects in this programme have main and supplementary final examinations. Certain subjects in this programme do not have a final examination. The results for these subjects are determined through a weighted combination of assessments. As such, there are no supplementary examinations. Students are encouraged to work steadily through the period of registration in order to achieve the highest results possible. Assessment details are listed under each subject at the back of this handbook. Moderation follows the DUT requirements.

## 4.1.3 Registration with the Professional Board

As a Student: Within two weeks of registration with the Department, students are required to register as Student Medical Technologist with the Health Professions Council of South Africa as determined in the regulations set out in the Allied Health Service Professions Act, 1982 (Act 63 of 1982) (Regulation R629, Government Gazette No 11221 of 31 March 1988).



#### As a Graduate

A graduate, upon successful completion of the qualification and the required internship, and having passed all assessment to satisfy the requirements of the Professional Board for Medical Technology, may register as a qualified Biomedical Technologist (will be phased out in 2019) or a Medical Laboratory Scientist (as applicable) with the HPCSA. After registration with the HPCSA, graduates may work in government, private health care laboratories and research laboratories. Unregistered Biomedical Technologists may work in non-diagnostic laboratories. To practice independently as a Biomedical Technologist, two years post-registration experience is required.

### 4.1.4 Work Integrated Learning Rules

The WIL component includes a six (6) months placement which occurs in the sixth semester. This is a compulsory component of the programme. The student must be registered at the Durban University of Technology for the duration of this period. The student must comply with the rules and regulations as set out in the Medical Technology laboratory where placed.

## 4.2 Learning Programme Structure

Code	Subjects	Year of Study	NQF Level	Nated Credits	Pre-req Code
IMET 101	Introduction to Medical Technology	July	5	0.050	None
CSTA101	Calculation and Statistics	la	5	0.100	None
CHMB102	Chemistry	la	5	0.125	None
PYSC105	Physics	la	5	0.100	None
BIOA202	Biochemistry2	Ib	5	0.125	None
IMMU202	Immunology2	Ib	5	0.125	None
ANPHI14	Anatomy & Physiology(Module A)	la	5	0.125	None
ANPH124	Anatomy & Physiology(Module B)	Ib	5	0.125	None
PAPH201	Pathophysiology 2	Ib	5	0.125	None
BLTT201	Blood Transfusion Technology 2	2a	6	0.125	IMMU202
CEPA 101	Cellular Pathology I	2a	6	0.125	ANPH114, ANPH124,
CPATI0I	Chemical Pathology I	2a	6	0.125	BIOA202, CHMB102
MCGYI0I	Microbiology I	2a	6	0.125	
HAEM203	Haematology 2	2b	6	0.125	BLTT201, PAPH201
CEPA201	Cellular Pathology 2	2b	6	0.125	CEPA101 PAPH201
CPAT202	Chemical Pathology 2	2b	6	0.125	CPATI01 PAPH201
MCGY203	Microbiology 2	2b	6	0.125	MCGYI0I PAPH20I
HAEM 303	Haematology 3	3a	6	0.125	HAEM203
CEPA 301	Cellular Pathology 3	3a	6	0.125	CEPA201
CPAT303	Chemical Pathology 3	3a	6	0.125	CPAT202
MCGY301	Microbiology 3	3a	6	0.125	MCGY203
LABP301	Laboratory Practice 3	3b	6	0.500	

<sup>\*</sup>A pre-req means this subject must be passed prior to registration (prerequisite)



a denotes first semester, b denotes second semester

## 4.3 Programme Rules

## 4.3.1 Minimum admission requirements.

In addition to Rule G7, the minimum admission requirement for a student who registers for the Bachelor are:

National Senior Certificate (NSC) with a Bachelor Degree endorsement and must include the following subjects at the stated ratings.

Compulsory Subjects	NSC Rating
English	3
Life Orientation	4
Mathematics	4
Life Science	4
Physical Science	4
And one 20 credit subject	3

Senior Certificate (SC) with matriculation exemption and must include the following subjects at the stated ratings:

COMPULSORY SUBJECTS	HG	SG
Mathematics	D	С
Physical Sciences	D	С
Biology / Life Sciences / Physiology	D	С

# Admission requirements based upon Work Experience, Age and Maturity and RPL

The DUT general rules G7 (3) and G7 (8) respectively, will apply.

#### Admission of International students

The DUT's Admission's Policy for International Students and general rules G4 and G7 (5), apply.

#### 4.3.2 Selection Criteria

In accordance with Rule G5, acceptance into the programme is limited to 30 places. As more qualifying applications are received than can be accommodated, the following selection process will determine placement in the programme:

- All applicants must apply through the Central Applications Office (CAO).
- Initial shortlisting for selection is based on the applicant's academic performance in Grade 12 (Grade 11, or Grade 12 trial marks, will be used for current matriculants).
- Shortlisted students will be invited to undergo placement testing.
- Applicants who pass the placement tests are invited for an interview.
- Provisional acceptance is given to selected applicants awaiting National Senior Certificate (NSC) results. If the final Grade 12 NSC results do not meet the minimum entrance requirements, this provisional acceptance will be withdrawn.



Final selection for placement will be based on results in the SC / NSC and DUT placement tests as well as on recommendations from the interview panel.

Assessment	Weighting (%)
Results of the Senior Certificate or National Senior Certificate	30%
Placement Testing	35%
Interview Score	35%

## 4.3.3 Pass Requirements

Notwithstanding the DUT pass requirements (G14 and G15), and those detailed as follows, students are encouraged to apply themselves to their learning, and strive for the best academic results possible in order to adequately prepare themselves for their future careers, and to maximize possible employment opportunities.

- A first year student who fails four or more subjects with a final mark of less than 40% will not be allowed to re-register for the programme: ND Biomedical Technology.
- Promotion to semester 3 of study requires a pass in at least 50% of the
  previous level subjects, i.e. year 1 subjects; notwithstanding
  prerequisites and co-requisites. Students who have passed less than 50%
  of their subjects in a level are considered to be not making satisfactory
  academic progress.
- Promotion to semester 4 of study requires a pass in at least 50% of semester 3 subjects; notwithstanding prerequisites. Students who have passed less than 50% of their subjects in a level are considered to be not making satisfactory academic progress.
- Promotion to semester 5 of study requires a pass in at least 50% of the
  previous level subjects, i.e. semester 4 subjects; notwithstanding prerequisites.
   Students who have passed less than 50% of their subjects in a level are
  considered to be not making satisfactory academic progress.
- Prior to commencing with Laboratory Practice 3, a student must have passed all Semester 1 to Semester 4 subjects, and must have obtained a sub minimum of 40 % for: Chemical pathology 3, Cellular pathology 3, Haematology 3 and Microbiology 3.

# 4.3.4 Re-registration Rules Rule G16 applies

#### 4.3.5 Exclusion Rules

In addition to Rule G17 the following departmental rule applies:

A first year student who fails four or more subjects with a final mark of less than 40% will not be allowed to re-register for the programme: ND Biomedical Technology. Deregistration from any subject is subject to the provisions of Rule G6 (2).



## 4.3.6 Interruption of Studies

In accordance with Rule G21A (b), the minimum duration for this programme will be three (3) years of registered study and the maximum duration will be five (5) years of registered study, including any periods of work-integrated learning (WIL). Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration.

# 5. NATIONAL DIPLOMA: BIOMEDICAL TECHNOLOGY: EXTENDED CURRICULUM PROGRAMME (NDBMFI) [Phasing out]

## 5.1. Programme Information

Biomedical Technology is a profession of highly knowledgeable and skilled individuals who perform clinical laboratory tests on patient samples. The service offered by Biomedical Technologists is an important component of patient health care, as the results obtained from these laboratory tests are a vital tool in the diagnosis, treatment and prevention of disease. The qualifying student will be able to organize and perform laboratory operations in clinical diagnostic laboratories and related fields in compliance with statutory requirements for ethics, safety and quality assurance. Supervisory, management and research skills are developed.

### 5.1.1 Duration of the Programme

Successful applicants for study towards a ND: Biomedical Technology will be accepted into an extended, four-year minimum programme of study. This extended curriculum has been designed in order to enhance student development and to improve the student's chances of successful completion. Students in Biomedical Technology must attend formal lectures and practical sessions at the Durban University of Technology in all subjects for the duration of their studies. The minimum study period for the ND: Biomedical Technology (ECP) is four years, including a six (6) months experiential learning component.

#### 5.1.3 Assessment and Moderation

Most subjects in this programme have main and supplementary final examinations. Certain subjects in this programme do not have a final examination. The results for these subjects are determined through a weighted combination of assessments. As such, there are no supplementary examinations. Students are encouraged to work steadily through the period of registration in order to achieve the highest results possible. Assessment details are listed under each subject at the back of this handbook. Moderation follows the DUT requirements.

# 5.1.4 Registration with the Professional Board

As a Student: Within two weeks of registration with the Department, students are required to register as Student Medical Technologists with the Health Professions Council of South Africa as determined in the regulations set out in the Allied Health Service Professions Act, 1982 (Act 63 of 1982) (Regulation R629, Government Gazette No 11221 of 31 March 1988).

#### As a Graduate

A graduate, upon successful completion of the qualification and the required internship, and having passed a competency assessment to satisfy the requirements of the Professional Board for Medical Technology, may register as a qualified Biomedical Technologist (as applicable) with the HPCSA. After registration with the HPCSA, graduates may work in government, private health

care laboratories and research laboratories. Unregistered Biomedical Technologists may work in non-diagnostic laboratories. To practice independently as a Biomedical Technologist, two years post-registration experience is required.

# **5.1.5 Work Integrated Learning Rules**

The WIL component includes a six (6) months placement which occurs in the eighth semester. This is a compulsory component of the programme. The student must be registered at the Durban University of Technology for the duration of this period. The student must comply with the rules and regulations as set out in the Medical Technology laboratory where placed.

## 5.2 Learning Programme Structure

Code	Subjects	Year of Study	NQF Level	Nated Credits	Pre-req Code
FCMR101	Foundation Chemistry	la	5	0.100	none
FPHY101	Foundation Physics	la	5	0.100	none
FLBT101	Laboratory Techniques	2a	5	0.175	none
FBIO202	Foundation Biochemistry	2a	5	0.063	none
FIMM202	Foundation Immunology	2a	5	0.062	none
IMET101	Introduction to Medical Technology	I	5	0.050	none
CSTA101	Calculation and Statistics	Ιb	5	0.100	none
CHMY101	Chemistry	Ιb	5	0.125	FCMR101
PYSC105	Physics	lb	5	0.100	FPHY101
BIOA202	Biochemistry2	2b	5	0.062	FBIO202
IMMU202	Immunology2	2b	5	0.063	FIMM202
ANPH114	Anatomy & Physiology(Mod ule A)	2a	5	0.125	none
ANPH124	Anatomy & Physiology(Mod ule B)	2b	5	0.125	none
PAPH201	Pathophysiology 2	2b	5	0.075	none
BLTT201	Blood Transfusion Technology 2	3a	6	0.100	IMMU202
CEPA101	Cellular Pathology I	3a	6	0.100	ANPH114, ANPH124,
CPATI01	Chemical Pathology I	3a	6	0.100	BIOA202, CHMB102
MCGY101	Microbiology I	3a	6	0.100	
HAEM203	Haematology 2	3b	6	0.100	BLTT201, PAPH201
CEPA201	Cellular Pathology 2	3b	6	0.100	CEPA 101 PAPH20 I
CPAT202	Chemical Pathology 2	3b	6	0.100	CPATI01 PAPH20 I
MCGY203	Microbiology 2	3b	6	0.100	MCGYI0I PAPH20 I
HAEM303	Haematology 3	4a	6	0.100	HAEM203
CEPA301	Cellular Pathology 3	<b>4</b> a	6	0.100	CEPA201
CPAT303	Chemical Pathology 3	<b>4</b> a	6	0.100	CPAT202
MCGY301	Microbiology 3	4a	6	0.100	MCGY203
LABP301	Laboratory Practice 3	4b	6	0.475	nil

<sup>\*</sup>A pre-req means this subject must be passed prior to registration (prerequisite)



a denotes first semester, b denotes second semester

## 5.2 Programme Rules

## 5.2.1 Minimum Admission Requirements

In addition to Rule G7, the minimum admission requirement for a student who registers for the National Diploma: Biomedical Technology are:

National Senior Certificate (NSC) with a Bachelor Degree endorsement and must include the following subjects at the stated ratings.

Compulsory Subjects	NSC Rating
English	3
Life Orientation	4
Mathematics	4
Life Science	4
Physical Science	4
And one 20 Credit Subject	3

Senior Certificate (SC) with matriculation exemption and must include the following subjects at the stated ratings:

Compulsory Subjects	HG	SG
Mathematics	D	С
Physical Sciences	D	С
Biology / Life Sciences / Physiology	D	С

# Admission requirements based on work experience, age & maturity; and recognition of prior earning (RPL).

The DUT general rules G7 (3) and G7 (8) respectively, will apply.

### Admission of international students

The DUT's Admission's Policy for International Students and general rules G4 and G7 (5), apply.

#### 5.2.2 Selection Criteria

In accordance with Rule G5, acceptance into the ECP programme is limited to 15 places.

As more qualifying applications are received than can be accommodated, the following selection process will determine placement in the programme:

- All applicants must apply through the Central Applications Office (CAO).
- Initial shortlisting for selection is based on the applicant's academic performance in Grade 12 (Grade 11, or Grade 12 trial marks, will be used for current matriculants).
- Shortlisted students will be invited to undergo placement testing.
- Applicants who pass the placement tests are invited for an interview.
- Provisional acceptance is given to selected applicants awaiting National Senior Certificate (NSC) results. If the final Grade 12 NSC results do not meet the minimum entrance requirements, this provisional acceptance will be withdrawn.
- Final selection for placement will be based on results in the SC / NSC and DUT placement tests as well as on recommendations from the interview panel.

Assessment	Weighting (%)
Results of the Senior Certificate or National Senior Certificate	30%
Placement Testing	35%
Interview Score	35%

### 5.2.3 Pass Requirements

Notwithstanding the DUT pass requirements (G14 and G15), and those detailed as follows, students are encouraged to apply themselves to their learning, and strive for the best academic results possible in order to adequately prepare themselves for their future careers, and to maximize possible employment opportunities.

- A first year student who fails four or more subjects with a final mark of less than 40% will not be allowed to re-register for the programme: ND Biomedical Technology.
- Promotion to semester 3 of study requires a pass in Foundation Chemistry and Foundation Physics and at least 1 mainstream subject of the previous level, i.e. Introduction to Medical Technology, Calculations and Statistics, Physics 1 or Chemistry 1. Students who have passed less than 50% of their subjects in a level are considered not to be making satisfactory academic progress.
- Promotion to semester 4 of study requires a pass in Foundation Immunology, Foundation Biochemistry and Laboratory Techniques, and all year 1 subjects.
   Students who have passed less than 50% of their subjects in a level are considered not to be making satisfactory academic progress.
- Promotion to semester 5 of study requires a pass in at least 50% of the previous level subjects, i.e. semester 4 subjects. (Prerequisites have to be satisfied). Students who have passed less than 50 % of their subjects in a level are considered not to be making satisfactory academic progress.
- Promotion to semester 6 of study requires a pass in at least 50% of the previous level subjects, i.e. semester 5 subjects; notwithstanding prerequisites. Students who have passed less than 50% of their subjects in a level are considered to be not making satisfactory academic progress.
- Promotion to semester 7 of study requires a pass in at least 50% of the previous level subjects, i.e. semester 6 subjects; notwithstanding prerequisites. Students who have passed less than 50% of their subjects in a level are considered to be not making satisfactory academic progress.
- Prior to commencing with Laboratory Practice 3, a student must have passed all Semester 1 to Semester 4 subjects, and must have obtained a sub minimum of 40% for: Chemical pathology 3, Cellular pathology 3, Haematology 3 and Microbiology 3.

## 5.2.4 Re-registration Rules

Rule G16 applies

#### 5.2.5 Exclusion Rules

In addition to Rule G17, the following departmental rule applies:

- A first year student who fails four or more subjects with a final mark of less than 40% will not be allowed to re-register for the programme: ND Biomedical Technology.
- Deregistration from any subject is subject to the provisions of Rule G6 (2).

## **5.2.6** Interruption of Studies

In accordance with Rule G21A (b), the minimum duration for this programme will be four (4) years of registered study and the maximum duration will be five (5) years of registered study, including any periods of WIL. Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration.

## 6. BACHELOR OF TECHNOLOGY: BIOMEDICAL TECHNOLOGY (BTBMT2)

## 6.1 Programme Information

The qualifying Student will be able to organize and perform laboratory operations in clinical diagnostic laboratories and related fields in compliance with statutory requirements for ethics, safety and quality assurance.

Supervisory, management and research skills are developed. They will be able to integrate laboratory tests and results with pathophysiological conditions. Students will be able to conduct research grounded in a deep knowledge of their area of specialization. Management skills are developed with a view to encouraging entrepreneurial development and business management.

After registration with the HPCSA, they may work in government, private and research laboratories. To practice independently as a Medical Technologist, two (2) years post-registration experience is required. Unregistered Biomedical Technologists may work in non-diagnostic laboratories.

#### Assessment and Moderation

Most subjects in this programme have main and supplementary final examinations. Certain subjects in this programme do not have a final examination. The results for these subjects are determined through a weighted combination of assessments. As such, there are no supplementary examinations. Students are encouraged to work steadily through the period of registration in order to achieve the highest results possible. Assessment details are listed under each subject at the back of this handbook. Moderation follows the DUT requirements.

## 6.2. Learning Programme Structure

Code	Subjects	Year of Study	NOF Level	NATED Credits
RMTQ 201	Research Methods and Techniques	I	7	0.125
MOLE401	Molecular Biology IV	I	7	0.250
LABM 201	Laboratory Management	2	7	0.125
IPAT401	Integrated Pathophysiology IV	2	7	0.250
RPBM101	Research Project	2	7	0.250

## 6.3 Programme Rules

# 6.3.1 Minimum Admission Requirements & Selection Criteria

In addition to Rule G23(1), G3, G4 and G7, students applying for this qualification must be in possession of a ND: Biomedical Technology or National Diploma: Medical Technology and proof of registration with the HPCSA in the Medical Technology category or have granted status or advanced standing according to rule G10. Applicants with a ND: Medical Technology have to demonstrate competence in the fundamentals of Biochemistry to the satisfaction of the department. Additional credits may have to be taken if this competence is not demonstrated.

In accordance with Rule G5, acceptance into the programme is limited to 20 places and entry to the BTech programme is not automatic. As more qualifying applications are received than can be accommodated, the following selection criteria will determine entry into the programme, with the 20 highest ranking candidates gaining entry into the programme:

- Submission of BTech application forms by due date.
- Applicant's academic performance in the ND: Biomedical Technology see ranking criteria below.
- Workplace experience (post National Diploma)

#### THE RANKING CRITERIA

Average marks of the final year of the National Diploma							
2. Years to complete the National Diploma qualification							
Minimum duration Minimum duration Minimum duration Minimum duration							
+ 3yrs	+ 2 yrs	+ l yr					
0	I	3	5				
3. Workplace experience post National Diploma							
0-1 year	I-3 years	3-5years	> 5years				
0	1	3	5				

An applicant's ranking criteria is determined by the total points score obtained by the addition of the scores obtained in the individual ranking criteria, as shown in the **example** in the table below

Criteria	Ranking score (points)
Average marks of the final year	60
National Diploma completed in minimum duration	5
Workplace experience (Diploma just completed)	0
Total	65

To gain access into the BTech programme, a student must have a minimum of 60 points. (w.e.f. 28/08/2014)

## 6.3.2 Pass Requirements

In addition to Rule G14 and G15, the following rules apply. Students are encouraged to apply themselves to their studies, and strive for the best academic results possible in order to adequately prepare themselves for their future careers.

# **6.3.3** Re-registration Rules

Rule G16 applies.

#### 6.3.4 Exclusion Rules

Rule G17 applies.

# **6.3.5** Interruption of Studies

In accordance with Rule G23A, the minimum duration for this programme will be one (1) year of registered study and the maximum duration will be two (2) years of registered study. Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration.

#### 7. BACHELOR OF HEALTH SCIENCES IN MEDICAL LABORATORY SCIENCE

## 7.1. Programme Information

Medical laboratory Science is a profession of highly knowledgeable and skilled individuals who perform diagnostic tests on patient samples in a clinical laboratory and are skilled to conduct research. The service offered by Medical Laboratory Scientists is an important component of patient health care, as the results obtained from these laboratory tests are a vital tool in the diagnosis, treatment and prevention of disease. The qualifying student will be able to organize and perform laboratory operations in clinical diagnostic laboratories and related fields in compliance with statutory requirements for ethics, safety and quality assurance. Supervisory, management and research skills are developed.

## 7.1.1 Duration of the Programme

Successful applicants for study towards a BHSc: Medical Laboratory Science will be accepted into a four-year minimum programme of study. This four year degree level 8 curriculum has been designed in order to enhance student development produce a holistic, diagnostic and research grounded graduate who will directly articulate to the Master's degree.

Students in Medical Laboratory Science must attend formal lectures and practical sessions at the Durban University of Technology in all modules for the duration of their studies. The minimum study period for the BHSc: Medical Laboratory Sciences is four years, including a six (6) months of work integrated learning component and one year clinical training in a Clinical Diagnostic Laboratory.

#### 7.1.3 Assessment and Moderation

Most modules in this programme have main and supplementary final examinations. Certain modules in this programme do not have a final examination. The results for these modules are determined through a weighted combination of assessments. As such, there are no supplementary examinations. Students are encouraged to work steadily through the period of registration in order to achieve the highest results possible. Assessment details are listed under each module at the back of this handbook. Moderation follows the DUT requirements.

# 7.1.4 Registration with the Professional Board

As a Student: Within two weeks of registration with the Department, students are required to register as Student Medical Laboratory Scientist with the Health Professions Council of South Africa as determined in the regulations set out in the Allied Health Service Professions Act, 1982 (Act 63 of 1982) (Regulation R629, Government Gazette No 11221 of 31 March 1988).

#### As a Graduate

A graduate, upon successful completion of the qualification and the required industry exposure, and having passed a final competency assessment in the fourth year to satisfy the requirements of the Professional Board for Medical Laboratory Science, may register as a qualified Medical Laboratory Scientist (as applicable) with the HPCSA. After registration with the HPCSA, graduates may work in government, private health care laboratories and research laboratories. Unregistered Medical Laboratory Scientist may work in non-diagnostic laboratories. To practice independently as a Medical Laboratory scientist, two years post-registration experience is required.

## 7.1.5 Work Integrated Learning Rules

The WIL component includes a six (6) months placement which occurs in the sixth semester and a one year placement which occurs in the seventh and eighth semesters. This is a compulsory component of the programme. The student must be registered at the Durban University of Technology for the duration of this period. The student must comply with the rules and regulations as set out in the diagnostic laboratory where placed.

# 7.2 Learning Programme Structure

Module code	Module Title	Year of Study	HEQSF level	HEQSF Credit	Period of Study	HEMIS credits	Pre-requisite
CMTR101	Chemistry	ı,	5	16	SPI <sup>a</sup>	0.111	
PHISTI	Physics (Module 1)	- 1	5	8	SPI <sup>a</sup>	0.057	
PHIS121	Physics (Module 2)	- 1	5	8	SP2 b	0.057	
FMLS101 Fundamentals of Medical		-	5	12	SPI a	0.086	
Laboratory							
CTTCIOI	Science		-	0	CD2 b	0.051	
STTS101	Statistics	- !	5	8 12	SP2 b SP1 a	0.05 I 0.086	
ANPA101 ANPB102	Anatomy and Physiology 1A	I	5	12	SP1 <sup>a</sup>	0.086	
CBIO101	Anatomy and Physiology 1B		5	16	SP2 a	0.086	
IMLG101	Cell Biology	I	5	16	SP2 a	0.112	
CHCRIOI	Immunology Cornerstone 101	i	5	12	SPI a	0.094	
VWKP101	Values in the workplace	i	3	12	SPI a	0.067	
CLDVI0I	Cultural Diversity	li	5	8	31 1 "	0.007	
PFDVI01	Personal and Professional	i	5	12	SPI a	0.082	
1157101	Development I		3	12	51 1	0.002	
CLCM101	Clinical Chemistry I	2	6	16	SP3 a	0.107	Cell Biology
MMCR101	Medical Microbiology I	2	6	8	SP3 a	0.053	Anatomy &
							Physiology
MDMA201	Medical Microbiology IIA	2	7	16	SP4 b	0.106	Medical Microbiology I
HMTLI0I	Haematology I	2	6	16	SP4 b	0.107	Immunology
IMHTI01	Immunohaematology I	2	6	16	SP3	0.106	Immunology
HPTH101	HPTH101 Histopathology I		6	16	SP4 b	0.106	Anatomy & Physiology
CYTL101	- / 6/		6	16	SP4 b	0.106	Anatomy & Physiology
MLCB101	Molecular Biology	2	6	8	SP3 a	0.053	Cell Biology
SYSP101	Fundamentals of	2	6	8	SP3	0.054	Anatomy &
	Pathology						Physiology
FPTH101	Systemic Pathophysiology	2	6	8	SP4 b	0.054	Anatomy & Physiology
TENEI01 GENVI01	The entrepreneurial edge The global environment Equality and diversity	2	6	8	SP3 <sup>a</sup>	0.067	
EQDVI0I							
CLCM201	Clinical Chemistry II	3	7	16	SP5 a	0.138	Clinical Chemistry I
MDMB201	Medical Microbiology IIB	3	7	16	SP5 a	0.138	Medical Microbiology 2A
HMTL201	Haematology II	3	7	16	SP5 a	0.138	Haematology I
CYTL201	Cytology II	3	7	16	SP5 a	0.138	Cytology I
CLLP101	Clinical Laboratory Practice I	3	7	16	SP5 <sup>a</sup>	0.139	All year I and year 2
PMTG101	Principles of management	3	7	8	SP6 b	0.068	
RSJS101	Restorative justice	3	7	8	SP5 a	0.069	
EDÚT101	Educational Techniques	3	7	12	SP5 a	0.103	
EMDL101	Ethics and Medical Law						
PRRS101	Principles of Research	3	7	8	SP6 b	0.069	
RPJA101	Research Project Module A	4	8	20	SP7 a	0.167	Principles of Research
RPJB101	Research Project Module B	4	8	16	SP8 b	0.139	Principles of Research
IPPA101	Integrated Pathophysiology Module A	4	8	12	SP7 a	0.089	Clinical Chemistry 2 Medical Microbiology 2 Haematology 2 Cytology 2
IPPB102	Integrated	4	8	8	SP8 b	0.086	Clinical Chemistry, 2

	Pathophysiology Module B						Cytology 2 Haematology 2 Medical Microbiology 2
LBTM101	Laboratory Management	4	8	12	SP7 a	0.106	Principles of management
	Clinical Laboratory Practice 2: includes the following specialisation options from I — 10 below (the student will have to select one of these advanced specialization modules at 52 credits):	4	8			0.433	All Year 3 modules
CPHA101	Clinical Pathology Module A	4	8	28	SP7 a		
CPHB101	Clinical Pathology Module B	4	8	24	SP8 b		
CLCA301	Clinical Chemistry IIIA	4	8	28	SP7 a		
CLCB301	Clinical Chemistry IIIB	4	8	24	SP8 b		
MDMA301	Medical Microbiology IIIA	4	8	28	SP7 a		
MDMB301	Medical Microbiology IIIB	4	8	24	SP8 b		
CYTA301	Cytology IIIA	4	8	28	SP7 a		
CYTB301	Cytology IIIB	4	8	24	SP8 b		
HMTA301	Haematology IIIA	4	8	28	SP7 a		
HMTB301	Haematology IIB	4	8	24	SP8 b		
HISA201	Histopathology IIA	4	8	28	SP7 a		
HISB201	Histopathology IIB	4	8	24	SP8 b		
IHMA201	Immunohaematology IIA	4	8	28	SP7a		
IHMB201	Immunohaematology IIB	4	8	24	SP8b		

<sup>\*</sup>A pre-req means this subject must be passed prior to registration (prerequisite) a denotes first semester, b denotes second semester

## 7.3 Programme Rules

## 7.3.1 Minimum Admission Requirements

In addition to Rule G7, the minimum entrance requirement is a National Senior Certificate (NSC) valid for entry into a Bachelor's Degree endorsement and must include the following at the stated minimum ratings below:

	0	Tillillillillillillillillillillillillill			
NSC REQUIREMENTS	S	SENIOR CERTIFICATE			
		REQUIREMENTS			
Compulsory subjects	NSC Rating	Compulsory subjects	SC Symbol		
English (Home language)	4	English HG	D		
OR					
English (1st additional					
language)					
Mathematics	4	Mathematics HG	D		
Life Sciences	4	Biology HG	D		
Physical Sciences	4	Physical Science HG	D		
And two other 20 credit	3		•		
subjects of which only					
one may be a language					

In addition to Rule G7, the minimum entrance requirement for a holder of a valid National Certificate (Vocational) for entry into a Bachelor's Degree must include the following subjects as the stated minimum ratings below:

Compulsory Subjects	NC (V)
English	60%
Mathematics	60%
Physical Sciences	70%
Life sciences	70%
Four other subjects, only one of which	60%
may be a language	

# Minimum Admission Requirements in respect of Work Experience, Age, Maturity, RPL and International Students

The DUT general rules G7(3) and G7(8) respectively will apply.

The DUT's Admissions Policy for International Students and General Rules G4 and G7 (5) will apply.

#### 7.3.2 Selection Criteria

All applicants must apply through the Central Applications Office (CAO). In accordance with Rule G5, acceptance into the programme is limited. Since more applications are received than can be accommodated, the following selection process will apply:

Initial shortlisting for selection is based on the applicant's academic performance in Grade 12 (Grade 11, or Grade 12 trial marks, will be used for current grade 12 learners).

- Applicants obtaining more than 23 points in their matriculation examination stand a better chance of selection.
- The point scores for each National Senior Certificate (NSC) subject or the Senior Certificate (SC) results is obtained by using the table below:

# Senior Certificate (SC)

Symbol	Α	В	С	D	Е	F
Higher Grade	8	7	6	5	4	3
Standard Grade	6	5	4	3	2	I

National Senior Certificate

# (NSC)

8	=	90 – 99%
7	=	80 – 89%
6	=	70 – 79%
5	=	60 – 69%
4	=	50 – 59%
3	=	40 – 49%
2	=	30 – 39%
_	=	0 –29%

No points are allocated for ten (10) credit subjects.

Applicants who meet the minimum departmental admission requirements for the Bachelor of Health Sciences in Medical Laboratory Science will be ranked according to the points scored in Grade 11 and Grade 12 and may be invited to participate in the selection process.

Assessment	Weighting
Results of the Senior Certificate or National Senior Certificate	60%
Interview Score	40%

The percentage weighting assigned to each of these scores will be as follows:

- Selected applicants will be placed into either the four-year degree or an Extended Curriculum Programme.
- Provisional acceptance is given to selected applicants awaiting (NSC) and National Certificate (Vocational) results. If the final Grade 12 NSC/ National Certificate (Vocational) results do not meet the minimum entrance requirements, this provisional acceptance will be withdrawn.

## 7.3.3 Pass Requirements

## **Pass Requirements**

Notwithstanding the DUT pass requirements (G14 and G15), and those detailed as follows, students are encouraged to apply themselves to their learning, and strive for the best academic results possible in order to adequately prepare themselves for their future careers, and to maximize possible employment opportunities.

- In addition to the DUT General Rule G17\*, a first year student who fails six or more of the modules with an average of less than 40% in the failed modules during that year is not permitted to re-register for the Bachelor of Health Sciences in Medical Laboratory Science programme. A student who fails 6 modules with an average of 40% in the failed modules, is not precluded from proceeding to the second semester. De-registration from any module is subject to the provisions of Rule G6 (2)\*.
- Promotion to semester 3 of study requires a pass in at least 50% of the previous level subjects, i.e. year 1 subjects; notwithstanding prerequisites and co-requisites. Students who have passed less than 50% of their modules in a level are considered to be not making satisfactory academic progress.
- Promotion to semester 4 of study requires a pass in at least 50% of semester 3 modules; notwithstanding prerequisites. Students who have passed less than 50% of their modules in a level are considered to be not making satisfactory academic progress.
- Promotion to semester 5 of study requires a pass in at least 50% of the
  previous level subjects, i.e. semester 4 subjects; notwithstanding prerequisites.
  Students who have passed less than 50% of their subjects in a level are
  considered to be not making satisfactory academic progress.
- Prior to commencing with Clinical Laboratory Practice I, a student must have passed all Semester I to Semester 4 subjects, and must have obtained a sub minimum of 40% for any of the following modules: Chemical pathology 2, Cytology 2, Haematology 2, Medical Microbiology 2B, Histopathology 2 and Immunohematology 2.
- Promotion to semester 7 and 8 requires successful completion of all semester
   I to 6 modules.

# 7.3.4 Re-registration Rules

Rule G16 applies

#### 7.3.5 Exclusion Rules

In addition to Rule G17, the following departmental rule applies:

- A first year student who fails six or more subjects with a final mark of less than 40% will not be allowed to re-register for the programme: BHSc: Medical Laboratory Science.
- Deregistration from any subject is subject to the provisions of Rule G6 (2).

## **7.3.6 Interruption of Studies**

In accordance with Rule G21A (b), the minimum duration for this programme will be four (4) years of registered study and the maximum duration will be five (5) years of registered study, including any periods of WIL. Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration.

# 8 MASTER OF HEALTH SCIENCES IN MEDICAL LABORATORY SCIENCE (MHMLSI)

## 8.1 Programme Information

This full research qualification is aligned to Rule G24 and the guidelines in the Post Graduate Student Handbook.

- The Student who successfully completes this qualification will be able to apply advanced problem solving skills and critical, reflective thinking to perform independent research in a chosen field and report their findings in a dissertation that meets the accepted criteria and ethical principles for the profession. In this way they will make a contribution to the existing body of knowledge and initiate change that will help develop and advance the profession of medical technology.
- The qualifying Student will be able to conduct independent research under minimal guidance in a chosen field, and contribute to knowledge production in that field. The research problem, its justification, process and outcome is reported in a dissertation which complies with the generally accepted norms for research at that level.

#### **Assessment and Moderation**

In addition to Rule G24 (4), postgraduate assessment of dissertations will be aligned to Postgraduate policies and guidelines. Please refer to the General Student Handbook and the Postgraduate Student Handbook.

# 8.2 Learning Programme Structure

Code		Year of Study	Assessment Type	NATED Credits	•	Co-requisites
MHMLSI	Dissertation	2	External Examination	1.0	None	none

## 8.3 Programme Rules

# 8.3.1 Minimum Admission Requirements

In addition to the General Handbook for Students Rule G24 (I), candidates must be possession of a Bachelor's Degree in Biomedical Technology (NQF Level 8), or must have been granted conferment of status according to Rule G10A.

Candidates may also apply for admittance via Recognition of Learning (RPL) in accordance with Rule G7 (8) and / or G10B.

#### 8.3.2. Selection Criteria

In accordance with Rule G5, acceptance into the programme is limited, and entry into the Master of Health Sciences in Medical Laboratory Practice is not automatic. Students are selected into the programme once they have completed an intention to study and the department has discussed the viability of the proposed topic for the Masters Qualification. The intention to study/ concept page must include the following: Problem statement or Title of the intended study, Objectives / sub-problems / Research Questions, Rationale/motivation to do the study, Brief literature review, Brief methodology.

#### 8.3.3 Pass Requirements

Rule G24 and the Postgraduate Student Handbook apply. Students are encouraged to apply themselves to their research, and strive for the best academic results possible in order to adequately prepare themselves for their future careers.

### 8.3.4 Re-registration Rules

Rule G24 (2), Rule G26 (5) and the Postgraduate Student Handbook apply.

#### 8.3.4 Exclusion Rules

Rule G24 (1) (d); Rule G24 (2), and the Postgraduate Student Handbook apply.

## 8.3.5 Interruption of Studies

In accordance with Rule G24, the minimum duration for this programme will be one (I) year of registered study and the maximum duration will be three (3) years of registered study. Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration.

# 9. DOCTOR OF MEDICAL LABORATORY SCIENCE (DRMLSI)

## 9.1 Programme Information

This full research qualification is aligned to Rule G25 and G26 and the guidelines in the Post Graduate Student Handbook. The purpose of this qualification is to ensure that the student who successfully completes this qualification will be able to apply advanced problem-solving skills and critical, reflective thinking to perform independent research in a chosen field and report their findings in a dissertation that meets the accepted criteria and ethical principles for the profession. In this way they will make a contribution to the existing body of knowledge and initiate change that will help develop and advance the profession of medical technology.

#### Assessment and Moderation

Post graduate assessment will be aligned to Postgraduate policies and guidelines. Rule G25 (4) and the Postgraduate Student Handbook apply.

## 9.2 Programme learning structure

Code	Module	Year of Study	Assessment Type	NATED Credits	Pre-requisites	Co-requisites
DRMLSI	Dissertation	3	External Examination	2.0	None	none

## 9.3. Programme Rules

# 9.3.1 Minimum Admission Requirements

In addition to Rule G25 (1), persons must be in possession of a Master's degree in Biomedical Technology (NQF 9), or have been granted status or advanced standing according to Rule G10. Please also refer to the Postgraduate Student Handbook.

Students are selected into the programme once they have completed an intention to study and the department has discussed the viability of the proposed topic for the qualification. A sound knowledge of the fundamental principles and concepts of research and statistical methods is required.

# 9.3.2 Re-registration Rules

Rule G26 (5) and the Postgraduate Student Handbook apply.

#### 9.3.3 Exclusion Rules

Rules G25 (2)(b; c(ii)) in the General Student Handbook; and the Postgraduate Student Handbook apply.

# 9.3.4 Interruption of Studies

In accordance with Rule G25 (2), the minimum duration for this programme will be two (2) years of registered study and the maximum duration will be four (4) years of registered study. Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration. Please refer to the Postgraduate Student Handbook.

#### SECTION B: CLINICAL TECHNOLOGY PROGRAMMES

# 10 NATIONAL DIPLOMA: CLINICAL TECHNOLOGY (NDCLT1)

(This programme is being phased out from 2017-2021)

#### 10.1 Programme Information

This qualification will enable the Students to acquire the necessary knowledge, skills, attitudes and values to practice as a Clinical Technologist in one of the following specialist categories: Cardiology, Cardiovascular Perfusion, Critical Care, Nephrology, Neurology, Pulmonology or Reproductive Biology. They will be able to perform procedures in one of the above seven specialist categories in order to contribute in the diagnosis and treatment of various patho-physiological conditions in conjunction with other designated health care professionals. They also perform organ system support, diagnostic, therapeutic and corrective procedures on patients using specialized health technology and techniques for the treatment of physiological dysfunction.

#### 10.1.1 Duration of the programme

The programme consists of three years full-time study at the Durban University of Technology. The third year is composed of the Work Integrated learning (WIL) component, where a student will choose one of seven categories and study the major specialist subjects appropriate to the chosen category. The categories are as follows: Cardiology, Cardio-Vascular Perfusion, Critical Care, Nephrology, Pulmonology, Reproductive Biology and Neurophysiology.

The latter must be done at a training unit approved by the Health Professions Council of South Africa.

#### 10.1.2 Assessment and Moderation

Some subjects in this programme do not have a final examination. The results for these subjects are determined through a weighted combination of assessments. As such, there are no supplementary examinations. Other subjects do have final examinations. Students are encouraged to work steadily through the period of registration in order to achieve the highest results possible. Assessment details are listed under each subject at the back of this handbook. Moderation follows the DUT requirements.

# 10.1.3 Registration with the Professional Board

**As a Student:** On enrolment, it is mandatory that a student register as a student Clinical Technologist with the Health Professions Council of South Africa as determined in the regulations set out in the Government Gazette (No. R.1608 dated 24 July 1987).

As a Graduate: A graduate who has completed the qualification successfully, and has complied with all the conditions as set out by the HPCSA, may register as a qualified Clinical Technologist with the Health Professions Council of South Africa in terms of the current rules for registration.

# 10.1.4 Work-Integrated Learning Period (WIL)

WIL will run concurrently with the specialist subjects in the third year of study, at a training unit approved by the Health Professions Council of South Africa (HPCSA). During WIL, students would be required to pass the Competency Based Test (CBT) with a minimum mark of 70%, as a Board requirement.

# 10.2. Programme Learning Structure

Code	Subjects	Year of Study	NQF Level	Nated Credits	SAQA credits	Pre-req Code
ANAYI0I	Anatomy I	I	5	0.250	30	None
CHMB102	Chemistry I	I	5	0.125	15	None
CAPP101	Computer Appl I	I	5	0.125	15	None
PSIO 102	Physiology I	I	5	0.250	30	None
CSTA101	Calculations & Stats	I	5	0.125	15	None
PYSC 105	Physics I	I	5	0.125	15	None
ANPH202	Anatomy & Physio 2	2	6	0.250	30	PSIO 102, ANAY 10 I
BAPO201	Biomedical Apparatus	2	6	0.250	30	None
OSPP201	Org & Systems Pathophysiology	2	6	0.250	30	PSIO102, ANAY101
PHAR201	Pharmacology 2	2	5	0.125	15	None
PYDNI0I	Psychodynamics	2	5	0.125	15	None
CPAB301	*Cardiology: Biomedical Apparatus 3	3	6	0.350	42	All level 1 & 2 subjects
CACP310	*Cardiology: Clinical Practice 3	3	6	0.350	42	All level 1 & 2 subjects
CCTP310	*Cardiology: Clinical Tech Practice 3	3	6	0.300	36	All level I & 2 subjects
CCBA301	*Critical Care: Biomedical Apparatus 3	3	6	0.350	42	All level 1 & 2 subjects
CCC301	*Critical Care: Clinical Practice 3	3	6	0.350	42	All level 1 & 2 subjects
CTPR301	*Critical Care: Clinical Tech. Prac. 3	3	6	0.300	36	All level I & 2 subjects
NEAP301	*Nephrology: Biomedical Apparatus 3	3	6	0.350	42	All level I & 2 subjects
NCLI301	*Nephrology: Clinical Practice 3	3	6	0.350	42	All level I & 2 subjects
NCTP301	*Nephrology: Clinical Tech. Prac. 3	3	6	0.300	36	All level I & 2 subjects
NBMA301	*Neurophysiology: Biomedical Apparatus 3	3	6	0.350	42	All level I & 2 subjects
NCLP301	*Neurophysiology: Clinical Practice 3	3	6	0.350	42	All level I & 2 subjects
NTPR301	*Neurophysiology: Clinical Tech. Prac. 3	3	6	0.300	36	All level I & 2 subjects
FBAP301	*Perfusion: Biomedical Apparatus 3	3	6	0.350	42	All level I & 2 subjects
PCTP301	*Perfusion: Clinical Practice 3	3	6	0.350	42	All level I & 2 subjects
PCTP301	*Perfusion: Clinical Tech Prac 3	3	6	0.300	36	All level 1 & 2 subjects
PBAP301	*Pulmonology: Biomedical Apparatus 3	3	6	0.350	42	All level I & 2 subjects
PCLP301	*Pulmonology: Clinical Practice 3	3	6	0.350	42	All level I & 2 subjects
PTPR301	*Pulmonology: Clinical Tech Prac 3	3	6	0.300	36	All level I & 2 subjects
RBAP301	*Reproduction: Biomedical Apparatus 3	3	6	0.350	42	All level I & 2 subjects
RCPR301	*Reproduction: Clinical Practice 3		6	0.350	42	All level I & 2 subjects
RTPR301	*Reproduction: Clinical Tech Prac 3	3	6	0.300	36	All level I & 2 subjects

<sup>\*</sup> Elective Specialist Category Subjects

# 10.3 Programme Rules

#### 10.3.1 Minimum Admission Requirements

In addition to Rule G7, the minimum admission requirement for a student who registers for the National Diploma: Biomedical Technology are:

National Senior Certificate (NSC) with a Bachelor Degree endorsement and must include the following subjects at the stated ratings.

Compulsory Subjects	NSC Rating
English	3
Life Orientation	4
Mathematics	4
Life Science	4
Physical Science	4
And one 20 Credit Subject	3

Senior Certificate (SC) with matriculation exemption and must include the following subjects at the stated ratings.

Compulsory Subjects	HG	SG
Mathematics	D	С
Physical Sciences	D	С
Biology / Life Sciences / Physiology	D	С

Admission requirements based on work experience, age & maturity; and recognition of prior earning (RPL).

Rules G7 (3) and G7 (8) respectively, will apply.

#### Admission of international students

The DUT's Admission's Policy for International Students and general rules G4 and G7 (5), apply.

#### 10.3.2 Selection Criteria

In accordance with Rule G5, acceptance into the programme is limited to 30 places. As more qualifying applications are received than can be accommodated, the following selection process will determine placement in the programme:

- All applicants must apply through the Central Applications Office (CAO).
- Initial shortlisting for selection is based on the applicant's academic performance in Grade 12 (Grade 11, or Grade 12 trial marks, will be used for current matriculants).
- Shortlisted students will be invited to undergo placement testing.
- Applicants who pass the placement tests are invited for an interview.
- Provisional acceptance is given to selected applicants awaiting National Senior
  Certificate (NSC) results. If the final Grade 12 NSC results do not meet the minimum
  entrance requirements, this provisional acceptance will be withdrawn.

Final selection for placement will be based on results in the SC / NSC and DUT placement tests as well as on recommendations from the interview panel.

Assessment	Weighting (%)
Results of the Senior Certificate or National Senior Certificate	30%
Placement Testing	35%
Interview Score	35%

#### 10.3.3 Pass Requirements

Notwithstanding the DUT pass requirements (G14 and G15), and those detailed as follows, students are encouraged to apply themselves to their learning, and strive for the best academic results possible in order to adequately prepare themselves for their future careers, and to maximize possible employment opportunities. The General rules (G5) and in terms of Rule G7 apply to the National Diploma: Clinical technology.

# 10.3.4 Re-registration Rules

Rule G16 applies.

#### 10.3.5 Exclusion Rules

In addition to Rule G17, the following programme rule applies:

A first year student who fails four or more subjects with a final mark of less than 40% will not be allowed to re-register for the programme: ND Clinical Technology. Deregistration from any subject is subject to the provisions of Rule G6 (2).

#### 10.3.6 Interruption of Studies

In accordance with Rule G21A (b), the minimum duration for this programme will be three (3) years of registered study and the maximum duration will be five (5) years of registered study, including any periods of WIL. Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration.

# 10.3.7 Work Integrated Learning Rules (WIL)

In addition to Rule G28, the following programme rules apply:

The student must comply with the rules and regulations as set out in the Industrial Environment where placed.

Students who have not passed all first and second year subjects will not be placed for Work Integrated Learning (WIL).

(wef November 2015)

# 11 NATIONAL DIPLOMA: CLINICAL TECHNOLOGY: EXTENDED CURRICULUM PROGRAMME (NDCLF2)

(This programme is being phased out from 2017-2021)

# 11.1 Programme Information

Successful applicants for study towards a ND: Clinical Technology will be accepted into either a three-year minimum or an extended, four-year minimum programme of study. This extended curriculum has been designed in order to enhance student development and to improve the student's chances of successful completion.

This qualification will enable the Students to acquire the necessary knowledge, skills, attitudes and values to practice as a Clinical Technologist in one of the following specialist categories: Cardiology, Cardiovascular Perfusion, Critical Care, Nephrology, Neurology, Pulmonology or Reproductive Biology. They will

be able to perform procedures in one of the above seven specialist categories in order to contribute in the diagnosis and treatment of various pathophysiological conditions in conjunction with other designated health care professionals. They also perform organ system support, diagnostic, therapeutic and corrective procedures on patients using specialized health technology and techniques for the treatment of physiological dysfunction.

Students in Clinical Technology must attend formal lectures and practical sessions at the Durban University of Technology in all subjects for the duration of their studies.

#### II.I.I Duration of the programme

The programme consists of four (4) years full-time study at the Durban University of Technology. The fourth year comprises the Work Integrated learning [WIL] component, where a student will choose one of seven categories and study the major specialist subjects appropriate to the chosen category. The categories are as follows: Cardiology, Cardio-Vascular Perfusion, Critical Care, Nephrology, Pulmonology, Reproductive Biology and Neurophysiology.

The latter must be done at a training unit approved by the Health Professions Council of South Africa.

#### 11.1.2 Assessment and Moderation

Some subjects in this programme do not have a final examination. The results for these subjects are determined through a weighted combination of assessments. As such, there are no supplementary examinations. Other subjects do have final examinations. Students are encouraged to work steadily through the period of registration in order to achieve the highest results possible. Assessment details are listed under each subject at the back of this handbook. Moderation follows the DUT requirements.

# 11.1.3 Registration with the Professional Board

As a Student: On enrolment, it is mandatory that a student register as a student Clinical Technologist with the Health Professions Council of South Africa as determined in the regulations set out in the Government Gazette (No. R.1608 dated 24 July 1987).

As a Graduate: A graduate who has completed the qualification successfully and has complied with all the conditions as set out by the HPCSA may register as a qualified Clinical Technologist with the Health Professions Council of South Africa in terms of the current rules for registration.

# II.I.4 Work-Integrated Learning Period (WIL)

The Work-Integrated Learning period will run concurrently with the specialist subjects, in the fourth year of study, at a training unit approved by the Health Professions Council of South Africa (HPCSA). During WIL students would be required to pass the Competency Based Test (CBT) with a minimum mark of 70%, as a Board requirement.

# 11.2. Programme Learning Structure + Assessment column

Code	Subjects	Year of	NQF	Nated	Pre-req
Code	Subjects	Study	Level	Credits	Code
	Foundation Chemistry		5	0.100	
	Foundation Physics	I	5	0.100	
ICLT101	Introduction to Clinical Technology	I	5	0.250	
CAPP101	Computer Applications I	I	5	0.135	
CHMB10	Chemistry I	I	5	0.08	FCMY101
PYSC105	Physics I	I	5	0.08	FPYC101
CSTA101	Calculation & Statistics	1	5	0.135	
ANAYI0	Anatomy I	2	5	0.200	
FBAP101	Foundation Biomedical Apparatus	2	5	0.2	
FOSP101	Foundation Organs & Systems Pathophysiology	2	5	0.135	
	Pharmacology I	2	5	0.035	
PSIO I 02	Physiology I	2	5	0.200	
DVDNIIA	Psychodynamics	2	5	0.135	
ANPH20	Anatomy & Physiology 2	3	6	0.200	PSIO102, ANAY101
BAPO201	Biomedical Apparatus & Procedures II	3	6	0.07	FBAP101
OSPP201	Organs & Systems Pathophysiology II	3	6	0.10	PSIO102, ANAY101 & FSOP101
PHAR201	Pharmacology II	3	5	0.100	PCLY101
CPAB301	*Cardiology: Biomedical Apparatus 3	4	6	0.350	All level 1,2 & 3 subjects
CACP310	*Cardiology: Clinical Practice 3	4	6	0.350	All level 1,2 & 3 subjects
CCTP310	*Cardiology: Clinical Tech Practice 3	4	6	0.300	All level 1,2 & 3 subjects
CCBA30	*Critical Care: Biomedical Apparatus 3	4	6	0.350	All level 1,2 & 3 subjects
CCC301	*Critical Care: Clinical Practice 3	4	6	0.350	All level 1,2 & 3 subjects
CTPR301	*Critical Care: Clinical Tech. Prac. 3	4	6	0.300	All level 1,2 & 3 subjects
NEAP301	*Nephrology: Biomedical Apparatus 3	4	6	0.350	All level 1,2 & 3 subjects
NCLI301	*Nephrology: Clinical Practice 3	4	6	0.350	All level 1,2 & 3 subjects
NCTP301	*Nephrology: Clinical Tech. Prac. 3	4	6	0.300	All level 1,2 & 3 subjects
NBMA30	*Neurophysiology: Biomedical Apparatus 3	4	6	0.350	All level1,2 & 3 subjects
NCLP301	*Neurophysiology: Clinical Practice 3	4	6	0.350	All level 1,2 & 3 subjects
NTPR301	*Neurophysiology: Clinical Tech. Prac. 3	4	6	0.300	All level 1,2 & 3 subjects
FBAP301	*Perfusion: Biomedical Apparatus 3	4	6	0.350	All level 1,2 & 3 subjects
PCTP301	*Perfusion: Clinical Practice 3	4	6	0.350	All level 1,2 & 3 subjects
PCTP301	*Perfusion: Clinical Tech Prac 3	4	6	0.300	All level 1,2 & 3 subjects
PBAP301	*Pulmonology: Biomedical Apparatus 3	4	6	0.350	All level 1,2 & 3 subjects
PCLP301	*Pulmonology: Clinical Practice 3	4	6	0.350	All level 1,2 & 3 subjects
PTPR301	*Pulmonology: Clinical Tech Prac 3	4	6	0.300	All level 1,2 & 3 subjects
	*Reproduction: Biomedical Apparatus 3	4	6	0.350	All level 1,2 & 3 subjects
	*Reproduction: Clinical Practice 3	4	6	0.350	All level 1,2 & 3 subjects
RTPR301	*Reproduction: Clinical Tech Prac 3	4	6	0.300	All level 1,2 & 3 subjects

# 11.3 Programme Rules

#### 11.3.1 Minimum Admission Requirements

In addition to Rule G7 the minimum entrance requirement for entry into the programme of study is a National Senior Certificate (NSC) with endorsement for diploma entry with the following subjects:

Compulsory subjects	NSC Rating
English	3
Life Orientation	4
Mathematics	4
Life Science	4
Physical Science	4
And one 20-credit subject	3

The minimum requirement for holders of the Senior Certificate is a matriculation exemption with the following subjects at the stated ratings:

Compulsory Subjects	HG	SG
English	E	D
Mathematics	D	С
Physical Sciences	D	С
Biology/Life Sciences	D	С

The DUT general rules G7 (3) and G7 (8) respectively, will apply for admission requirements based on work experience, age & maturity; and recognition of prior learning (RPL).

The DUT Admission's Policy for International Students and general rules G4 and G7 (5), apply for admission of international students.

#### 11.3.2 Selection Criteria

In accordance with Rule G5, placement into the ECP programme is limited to 10 places. The following selection process will determine placement in the programme:

Successful applicants for study towards a ND: Clinical Technology will be accepted into either a three-year minimum or an extended curriculum programme (four-year minimum) of study. An extended curriculum is devised in order to enhance student development and to improve the student's chances of successful completion. As more qualifying applications are received than can be accommodated, the following selection process will determine placement in the programme:

- All applicants must apply through the Central Applications Office (CAO).
- o Initial shortlisting for selection is based on the applicant's academic performance in Grade 12 (Grade 11, or Grade12 June marks, will be used for current matriculating students).
- Shortlisted students will be invited to undergo placement testing.
- O Applicants who pass the placement tests may be invited for an interview.

- Provisional acceptance may be given to selected applicants awaiting National Senior Certificate (NSC) results. If the final Grade 12 NSC results do not meet the minimum entrance requirements, then provisional acceptance will be withdrawn.
- Final selection for placement will be based on results in the SC/ NSC and DUT placement tests, as well as on recommendations from the interview panel.
- Students will be ranked according to the following criteria:

Assessment	Weighting (%)
Results of the Senior Certificate or National Senior Certificate	30%
Placement Testing	35%
Interview Score	35%

# 11.3.3 Pass Requirements

- 1. Promotion to year 2: First year students registered in the extended curriculum program will only be eligible for subsequent registration provided that a student passes the following subjects:
- All four Foundation subjects, i.e., Introduction to Clinical Technology, Foundation Biomedical Apparatus, Foundation Chemistry and Foundation Physics
- Two out of the three mainstream subjects, i.e., Chemistry I, Physics I, Computer Applications I
- 2. Promotion to year 3 will only be allowed if the student passes the following subjects:
- Anatomy I, Physiology I and Calculation and Statistics I
- Foundation Organs and Systems Pathophysiology and Foundation Pharmacology
- 3. Promotion to year 4 will only be allowed if the student passes all 3<sup>rd</sup> year subjects
- 4. The minimum duration to complete the N Dip: Clinical Technology (Extended Curriculum Programme) is 4 years and the maximum duration is 5 years of consecutive study.
- Students who do not comply with any of the rules outlined in points I to 4 above may need to apply for re-registration in the ECP Programme to the Department of Biomedical and Clinical Technology.

#### 11.3.4 Re-registration Rules

Rule G16 applies

#### 11.3.5 Exclusion Rules

In addition to Rule G17, the following departmental rule applies:

A first year student who fails four or more subjects with a final mark of less than 40% will not be allowed to re-register for the programme: ND Clinical Technology (ECP). Deregistration from any subject is subject to the provisions of Rule G6 (2).

# 11.3.6 Interruption of Studies

In accordance with Rule G21A(b), the minimum duration for this programme will be four (4) years of registered study and the maximum duration will be five (5) years of registered study, including any periods of WIL. Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration.

# 12. BACHELOR of TECHNOLOGY: CLINICAL TECHNOLOGY (BTCLT 2)

## 12.1 Programme Information

Completion of the qualification will enable the student to independently conduct advanced diagnostic, therapeutic, corrective procedures and organ system support on patients using specialised equipment and techniques for the treatment and/or interpretation of a diagnosis of abnormalities and disease. The individual is able to strategically manage clinical technology practice, maintain QA, perform research and train members of the health care team. The individual may be self-employed or employed by a recognised health care facility.

# Registration with the Professional Board

A candidate who has completed the course successfully and has satisfied the requirements of the Professional Board for Clinical Technology may register as a Graduate Clinical Technologist with the Health Professions Council of South African (HPCSA).

#### **Assessment**

Some subjects in this programme do not have a final examination viz: Research Methodology Clinical Technology Research Project , as well as the advanced specialist subject . The results for these subjects are determined through a weighted combination of assessments. As such, there are no supplementary examinations. One subject (Principles of Management I) has a final examination. Students are encouraged to work steadily through the period of registration in order to achieve the highest results possible. Assessment details are listed under each subject at the back of this handbook. Moderation follows the DUT requirements.

**12.2 Programme Learning Structure** 

Code	Subjects	Year of St ud y	NQF L e v e I	Nated Cr edi ts	Compulsory, elect ive or WIL
RMNC201	Research Methodology	4	7	0.250	Compulsory
PRMG101	Principles of Management	4	7	0.250	Compulsory
CLRP101	Clinical Technology Research Project	4	7	0.200	Compulsory
ACDT401	Advanced Cardiac Technology	4	7	0.300	Elective
ACRT401	Advanced Critical Care Technology	4	7	0.300	Elective
ARNT401	Advanced Renal Technology	4	7	0.300	Elective
ANPT401	Advanced Neurophysiologic Technology	4	7	0.300	Elective
APFT401	Advanced Perfusion Technology	4	7	0.300	Elective
ARST401	Advanced Respiratory Technology	4	7	0.300	Elective
ARPT401	Advanced Reproductive Technology	4	7	0.300	Elective

<sup>\*</sup>Elective subject

#### 12.3 Programme Rules

# 12.3.1 Minimum Admission Requirements & Selection Criteria

In accordance with Rule G5, acceptance into the programme is limited to 30 places, and entry to the BTech programme is not automatic. As more qualifying applications are received than can be accommodated, the following selection criteria will determine entry into the programme, with the 30 highest ranking candidates gaining entry into the programme:

- Applicants must have completed the ND: Clinical Technology.
- Applicants are required to formally apply to the department, by the due date, to be considered for the B Tech: Clinical Technology programme.
- Applicants must submit proof of placement in a Clinical Technology training unit under the supervision of a Graduate Clinical Technologist
- Applicant's academic performance in the ND: Clinical Technology using the ranking criteria below:

#### THE RANKING CRITERIA

I.Average marks of the final year of the National Diploma							
2.Years to complete ND: Clinical Technology							
Minimum duration Minimum duration Minimum duration Minimum duration							
+ 3 years	+ 2 years	+ I year					
0	I	3	5				
3. Workplace experience post National Diploma in an accredited training unit							
0-1 year I-3 years 3-5 years > 5 years							
0	5	10	15				

 An applicant's ranking is determined by the total points score obtained by the addition of the scores obtained in the individual ranking criteria, as shown in the example in the table below:

Criteria	Ranking Sco	re
Criteria	(points)	
Average final year mark in year 3 of the ND: Clinical Technology is 70%	70	
ND: Clinical Technology completed in minimum duration (3 years)	5	
Workplace experience (Diploma just completed)	0	
Total	75	

(w.e.f. 28/08/2014)

# 12.3.2 Pass Requirements

In addition to Rule G14 and G15, the following rules apply. Students are encouraged to apply themselves to their studies, and strive for the best academic results possible in order to adequately prepare themselves for their future careers.

# 12.3.3 Re-registration Rules

Rule G16 applies.

# 12.3.4 Exclusion Rules

Rule G17applies.

## 12.3.5 Interruption of Studies

In accordance with Rule G23A, the minimum duration for this programme will be one (I) year of registered study and the maximum duration will be two (2) years of registered study. Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration.

#### 13 BACHELOR OF HEALTH SCIENCES IN CLINICAL TECHNOLOGY

# 13.1 Programme information

This qualification develops a learner to possess the necessary knowledge, skills, attitudes and values to practice as a Clinical Technologist, as a part of a multi-disciplinary team, in one of the following specialist categories: Cardiology, Cardiovascular Perfusion, Critical Care, Nephrology, Neurology, Pulmonology or Reproductive Biology. The qualifying learner will be able to independently perform diagnostic, therapeutic and corrective procedures on patients using specialised health technology and techniques for the treatment of patho-physiological conditions in a hospital-based or in a private practice setting.

This qualification will enable the learner to engage in research and contribute to the creation of new knowledge within the field. Lastly the qualification is designed to provide learners with specific clinical technology skills and competencies that are included in management and research.

#### 13.1.1 Duration of the programme (4 years)

In accordance with the DUT Rule G23B (2)\* and Rule G23B (3)\*, the minimum duration of study is four years, including any periods of clinical practice, and the maximum duration will be six years of registered study, including any periods of clinical practice. The minimum duration of the ECP will be five years and the maximum will be six years of registered study, including any periods of clinical practice.

The programme will be delivered full-time at DUT, with exposure to the clinical environment from first year to fourth year. The grounding for basic medical and clinical sciences will be provided in the first year, comprising of both theoretical and practical components. The theoretical component will be integrated with the practical component in the Skills Laboratory and through clinical rotational observations in the specialist categories of Clinical Technology. These clinical rotations will be undertaken at HPCSA and DUT accredited training units, and will take place on a fort-nightly basis.

The second level of study will equip the student with more complex knowledge by applying introductory concepts to understand the anatomical and physiological systems, as well as pathogenesis and progression of diseases and conditions, related to Clinical Technology.

In the  $3^{rd}$  level of study, the student is place in the specific specialist category and rotates through various accredited training units up to the  $4^{th}$  level. Both these levels (i.e. III and IV) will employ an integrated teaching and learning approach where the student will be able to apply scientific and technological knowledge to perform diagnostic, therapeutic and life support procedures, and the evaluation thereof. The delivery of the  $3^{rd}$  and  $4^{th}$  level will be offered in both block lectures and block practical in a 50:50 ratio. The practical block will be facilitated by DUT-appointed clinical instructors and specialist lecturers in an integrated teaching and learning approach (using e-learning, case studies, journaling, for example) to ensure that the learning outcomes are achieved, and that the quality of the delivery is maintained.

#### 13.1.2 Assessment and Moderation

Some subjects in this programme do not have a final examination. The results for these subjects are determined through a weighted combination of assessments. As such, there are no supplementary examinations. Other subjects do have final examinations. Students are encouraged to work steadily through the period of registration in order to achieve the highest results possible. Assessment details are listed under each subject at the back of this handbook. Moderation follows the DUT requirements.

#### 13.1.3 Registration with the Professional Board

As a Student: On enrolment, it is mandatory that a student register as a student Clinical Technologist with the Health Professions Council of South Africa as determined in the regulations set out in the Government Gazette (No. R.1608 dated 24 July 1987).

**As a Graduate**: A graduate who has completed the qualification successfully and has complied with all the conditions as set out may register as a qualified Clinical Technologist with the Health Professions Council of South Africa in terms of the current rules for registration.

# 13.1.4Work-Integrated Learning Period (WIL)

WIL will run concurrently with the specialist subjects, in the third year of study, at a training unit approved by the Health Professions Council of South Africa (HPCSA). During WIL students would be required to pass the Competency Based Test (CBT) with 70%, as a Board requirement.

#### 13.2. Programme Learning Structure

Module	Module Title	HEQSF	HEQSF	Period	Block	Pre-requisite	DOE
code		level	Credit	of Study	Code	module/s	
ICLT101	Introduction to Clinical	5	8	1	21	N	0.0645
	Technology						
CMTR101	Chemistry	5	16	1	21	N	0.129
PHISTI	Physics 101	5	8	I	22	N	0.065
PHIS121	Physics 201	5	8	I	22	N	0.065
AAMY101	Anatomy	5	16	I	21	N	0.129
PYSLI01	Physiology	5	16	I	21	N	0.129
PTPY101	Pathophysiology I	5	8	1	22	N	0.0645
ITCT101	Instrumentation and Techniques for Clinical Technology	5	12	I	22	N	0.0968
CSTN101	Cornerstone module	5	12	I	22	N	0.0968
ITCH101	Introduction to	5	8	I	22	N	0.0645
	Technopreneurship						
VNVLI0I	Violence and non-violence*	5	8	I	22	N	0.0645
IGSH101	Issues of Gender and Society	5	12	1	21	N	0.0968
PPDVI0I	Personal and Professional Development I	5	12	I	21	N	0.0968
AAPA101	Applied Anatomy and Physiology I a	6	12	2	21	Anatomy Physiology	0.094
AAPBI0I	Applied Anatomy and Physiology I b	6	12	2	22	Anatomy Physiology	0.094
CLTP101	Clinical Technology Practice	6	12	2	22	Introduction to Clinical Technology	0.094
ITCT201	Instrumentation and Techniques for Clinical Technology II	6	16	2	21	Instrumentation and Techniques for Clinical	0.125

						Technology I	1
PTPY201	Pathophysiology II	6	16	2	22		0.125
PRCLI0I	Pharmacology	6	16	2	21	Anatomy & Physiology	0.125
. ACLIVI	Research Methodology I	6	16	2	22	N	0.125
HCDK101	HIV and communicable diseases in KZN	6	8	2	21	N	0.062
PPRM101	Equality and Diversity	6	8	2	21	N	0.062
PRPMI0I		6	12	2	22	N	0.094
	Management						
PPDV102	Personal and Professional Development II	6	12	2	22	Community Healthcare and ResearchI	0.094
RMTD201	Research Methodology II	7	16	3	21	Research Methodology I	0.129
HLCMI01	Health care management I	7	8	3	22	N	0.0645
RSISTOT	Restorative Justice	7	8	3	21	N	0.0645
EMDLI01	Ethics & Medical Law	7	12	3	22	N	0.096
PPDV103	Personal and Professional	7	12	3	22	N	0.096
	Development III						
	ELECTIVES						
	Specialisation in Cardiology						
PTCD101	Pathophysiology for Cardiology	7	16	3	21	Pathophysiology II	0.129
PMCD101	Pharmacology for Cardiology	7	8	3	22	All Level 2 subjects	0.0645
CTCA101	Clinical Technology Practice in Cardiology Ia		12	3	21	All Level 2 subjects	0.096
CTCB101	Clinical Technology Practice in Cardiology Ib	7	16	3	22	All Level 2 subjects	0.129
ITCA101	Instrumentation and Techniques for Clinical Technology in Cardiology la	7	12	3	21	All Level 2 subjects	0.096
ITCB101	Instrumentation and Techniques for Clinical Technology in Cardiology Ib	7	16	3	22	All Level 2 subjects	0.129
	Specialisation in Critical care						
PPCC101	Pathophysiology for Critical Care	7	16	3	21	All Level 2 subjects	0.129
PHCC101	Pharmacology for Critical Care	7	8	3	22	All Level 2 subjects	0.0645
CCCA101	Clinical Technology Practice in Critical Care la	7	12	3	21	All Level 2 subjects	0.096
CCCB101	Clinical Technology Practice in Critical Care Ib	7	16	3	22	All Level 2 subjects	0.129
ICRA101	Instrumentation and Techniques for Clinical Technology in Critical Care la	7	12	3	21	All Level 2 subjects	0.096
ICRB101	Instrumentation and Techniques for Clinical Technology in Critical Care Ib		16	3	22	All Level 2 subjects	0.129
	Specialisation in Neurophysiology						
PTNP101	Pathophysiology for Neurophysiology	7	16	3	21	All Level 2 subjects	0.129
PHNP101	Pharmacology for Neurophysiology	7	8	3	22	All Level 2 subjects	0.0645
CTNA101	Clinical Technology Practice in Neurophysiology la	7	12	3	21	All Level 2 subjects	0.096
CTNB101	Clinical Technology Practice in Neurophysiology lb	7	16	3	22	All Level 2 subjects	0.129
ITNA101	Instrumentation and Techniques for Clinical Technology in Neurophysiology la		12	3	21	All Level 2 subjects	0.096



ITNB101	Instrumentation and Techniques		16	3	22	All Level 2 subjects	0.129
	for Clinical Technology in						
	Neurophysiology Ib						
	Specialisation in Nephrology						
PTNR101	Pathophysiology for	7	16	3	21	All Level 2 subjects	0.129
	Nephrology						
PHNR101	Pharmacology for Nephrology	7	8	3	22	All Level 2 subjects	0.0645
CTPA101	Clinical Technology Practice in	7	12	3	21	All Level 2 subjects	0.096
	Nephrology Ia	_					
CTPB101	Clinical Technology Practice in	/	16	3	22	All Level 2 subjects	0.129
ITDA LOL	Nephrology Ib	-	10	2	2.1	AU. 10 1.	0.007
ITPA101	Instrumentation and Techniques		12	3	21	All Level 2 subjects	0.096
	for Clinical Technology in						
ITPB101	Nephrology Ia  Instrumentation and Techniques	7	16	3	22	All Lavel 2 audio etc	0.129
IIPBIUI	for Clinical Technology in		16	3	22	All Level 2 subjects	0.129
	Nephrology Ib						
	Specialisation in Perfusion						
PTPFI0I	Pathophysiology for Perfusion	7	16	3	21	All Level 2 subjects	0.129
PHPF101	Pharmacology for Perfusion	7	8	3	22	All Level 2 subjects	0.0645
CPPA I 0 I	Clinical Technology Practice in	7	12	3	21	All Level 2 subjects	0.096
CFFAIUI	Perfusion la	/	12	3	21	All Level 2 subjects	0.076
CPPB101	Clinical Technology Practice in	7	16	3	22	All Level 2 subjects	0.129
CITBIOI	Perfusion lb	,	10	3	22	All Level 2 subjects	0.127
ITFA101	Instrumentation and Techniques	7	12	3	21	All Level 2 subjects	0.096
IIIAIOI	for Clinical Technology in		12	3	21	All Level 2 subjects	0.070
	Perfusion la						
ITFB101	Instrumentation and Techniques	7	16	3	22	All Level 2 subjects	0.129
	for Clinical Technology in					, an zevel z subjects	0.1.27
	Perfusion Ib						
	Specialisation in						
	Pulmonology						
PTPLI01	Pathophysiology for	7	16	3	21	All Level 2 subjects	0.129
	Pulmonology						
PHPL101	Pharmacology for Pulmonology	7	8	3	22	All Level 2 subjects	0.0645
CTLA101	Clinical Technology Practice in	7	12	3	21	All Level 2 subjects	0.096
	Pulmonology Ia						
CTLB101	Clinical Technology Practice in	7	16	3	22	All Level 2 subjects	0.129
	Pulmonology Ib						
ITLA101	Instrumentation and Techniques		12	3	21	All Level 2 subjects	0.096
	for Clinical Technology in						
	Pulmonology Ia						
ITLB101	Instrumentation and Techniques		16	3	22	All Level 2 subjects	0.129
	for Clinical Technology in						
	Pulmonology Ib						
	Specialisation in						
DEDDIAL	Reproductive biology	7	17	_	21	All I I 2 I I I	0.129
PTRB101	Pathophysiology for	/	16	3	21	All Level 2 subjects	0.129
PHRB101	Reproductive Biology	7	8	3	22	All I amal 2 ambia ata	0.0645
PHRBIUI	Pharmacology for Reproductive	/	8	3	22	All Level 2 subjects	0.0645
CTRA101	Biology  Clinical Technology Practice in	7	12	3	21	All Level 2 subjects	0.096
CIRAIUI	Reproductive Biology la	′	12	3	21	All Level 2 Subjects	0.076
CTRBI01	Clinical Technology Practice in	7	16	3	22	All Level 2 subjects	0.129
CINDIUI	Reproductive Biology Ib	′	10	3	22	All Level 2 Subjects	0.127
ITBA101	Instrumentation and Techniques	7	12	3	21	All Level 2 subjects	0.096
110/101	for Clinical Technology in		12	3	21	All Level 2 Subjects	0.076
	Reproductive Biology la						
ITBB101	Instrumentation and Techniques	7	16	3	22	All Level 2 subjects	0.129
	for Clinical Technology in			Ĭ		. III Level 2 subjects	0.127
	Reproductive Biology Ib						
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						

HCMP101	Healthcare Management Practice	8	12	4	22	All Level 3 subjects	0.091
PPDV 104	Personal and Professional Development IV	8	12	4	22	Community Healthcare and Research III	0.091
RPJA101	Research Project a	8	12	4	21	All Level 3 subjects	0.091
RPIB101	Research Project b	8	16	4	22	All Level 3 subjects	0.12
HLCM201	Health care management II	8	16	4	21	All Level 3 subjects	0.12
CLINIOI	Clinical Instruction	8	16	4	21	All Level 3 subjects	0.12
						·	
SBSM101	Small Business Management	8	16	4	21	All Level 3 subjects	0.12
	Specialisation in Cardiology						
CTCA201	Clinical Technology Practice in Cardiology IIa		16	4	21	All Level 3 subjects	0.12
CTCB201	Clinical Technology Practice in Cardiology IIb		16	4	22	All Level 3 subjects	0.12
ITCA201	Instrumentation and Techniques for Clinical Technology in Cardiology IIa		12	4	21	All Level 3 subjects	0.091
ITCB201	Instrumentation and Techniques for Clinical Technology in Cardiology IIb		16	4	22	All Level 3 subjects	0.12
	Specialisation in Critical care						
CCCA201	Clinical Technology Practice in Critical Care IIa		16	4	21	All Level 3 subjects	0.12
CCCB201	Clinical Technology Practice in Critical Care IIb	8	16	4	22	All Level 3 subjects	0.12
ICRA201	Instrumentation and Techniques for Clinical Technology in Critical Care IIa		12	4	21	All Level 3 subjects	0.091
ICRB201	Instrumentation and Techniques for Clinical Technology in Critical Care IIb		16	4	22	All Level 3 subjects	0.12
	Specialisation in Neurophysiology						
CTNA201	Clinical Technology Practice in Neurophysiology IIa		16	4	21	All Level 3 subjects	0.12
CTNB201	Clinical Technology Practice in Neurophysiology IIb	8	16	4	22	All Level 3 subjects	0.12
ITNA201	Instrumentation and Techniques for Clinical Technology in Neurophysiology Ila		12	4	21	All Level 3 subjects	0.091
ITNB201	Instrumentation and Techniques for Clinical Technology in Neurophysiology IIb		16	4	22	All Level 3 subjects	0.12
CTD 4 C C :	Specialisation in Nephrology		1.4	4	2.1	AH 1 12 11	0.10
CTPA201	Clinical Technology Practice in Nephrology IIa	8	16	4	21	All Level 3 subjects	0.12
CTPB201	Clinical Technology Practice in Nephrology Ilb	8	16	4	22	All Level 3 subjects	0.12
ITPA201	Instrumentation and Techniques for Clinical Technology in Nephrology Ila		12	4	21	All Level 3 subjects	0.091
ITPB201	Instrumentation and Techniques for Clinical Technology in Nephrology IIb		16	4	22	All Level 3 subjects	0.12
	Specialisation in Perfusion		1				
CPPA201	Clinical Technology Practice in Perfusion IIa		16	4	21	All Level 3 subjects	0.12
CPPB201	Clinical Technology Practice in Perfusion IIb	8	16	4	22	All Level 3 subjects	0.12
ITFA201	Instrumentation and Techniques	8	12	4	21	All Level 3 subjects	0.091

	for Clinical Technology in Perfusion IIa						
ITFB201	Instrumentation and Techniques for Clinical Technology in Perfusion IIb		16	4	22	All Level 3 subjects	0.12
	Specialisation in Pulmonology						
CTLA201	Clinical Technology Practice in Pulmonology IIa	8	16	4	21	All Level 3 subjects	0.12
CTLB201	Clinical Technology Practice in Pulmonology IIb	8	16	4	22	All Level 3 subjects	0.12
ITLA201	Instrumentation and Techniques for Clinical Technology in Pulmonology IIa		12	4	21	All Level 3 subjects	0.091
ITLB201	Instrumentation and Techniques for Clinical Technology in Pulmonology IIb		16	4	22	All Level 3 subjects	0.12
	Specialisation in Reproductive Biology						
CTRA201	Clinical Technology Practice in Reproductive Biology IIa	8	16	4	21	All Level 3 subjects	0.12
CTRB201	Clinical Technology Practice in Reproductive Biology IIb	8	16	4	22	All Level 3 subjects	0.12
ITBA201	Instrumentation and Techniques for Clinical Technology in Reproductive Biology IIa		12	4	21	All Level 3 subjects	0.091
ITBB201	Instrumentation and Techniques for Clinical Technology in Reproductive Biology IIb		16	4	22	All Level 3 subjects	0.12

# 13.3 Programme rules

(Approved by SENATE August 2014)

# 13.3.1.MINIMUM ADMISSION REQUIREMENTS

In addition to Rule G7\*, the minimum entrance requirements for the holder of a valid National Senior Certificate (NSC) or a Senior Certificate or National certificate (Vocational) for entry into a Bachelor's Degree and must include the following subjects at the stated minimum ratings in Table I

**Table I: Minimum Admission Requirements** 

NSC REQUIREMENTS		ERTIFI ATE	NC (V)	
Compulsory subjects	NSC Rating	SC Symbo HG SG	ol	
English (Home language) OR English (1st additional language)	4	D	В	70%
Mathematics	4	D	В	70%
Life Sciences	4	D	В	70%
Physical Sciences	4	D	В	70%
And two other 20 credit subjects of which only one may be a language	3			Four other subjects, only one of which may be a language



# Minimum Admission Requirements in respect of Work Experience, Age, Maturity, RPL and International Students:

The DUT General Rules G7 (3)\* and G7 (8)\* respectively will apply. The DUT's Admission Policy for International Students and General Rules G4\* and G7 (5)\* will apply.

#### 12.3.2 SELECTION PROCEDURES

All applicants must apply to the Central Applications Office (CAO). In accordance with Rule G5\*, acceptance into the programme is limited. Since more applications are received than can be accommodated, the following selection processes will apply:

- Initial short listing for selection is based on the applicant's academic performance in Grade 11 and/or 12.
- Applicants obtaining more than 25 points increase their chance of selection into the programme.
- The point scores for the **NSC** or the **SC** or the **NC(V)** results is obtained by using the table 2.

**Table 2: Point Scores** 

	NSC	SC		NC(V)
RESULTS		HG	SG	
90 – 99%	8	8	6	4
80 – 89%	7	7	5	4
70 – 79%	6	6	4	4
60 – 69%	5	5	3	3
50 – 59%	4	4	2	
40 – 49%	3	3	I	
30 – 39%	2	2		
0 – 29%	I	I		

# NOTE: No points are allocated for ten (10) credit subjects.

- Applicants who meet the minimum departmental admission requirements for the Bachelor of Health Sciences in Clinical Technology will be ranked according to the points scored in Grade 12, and may be invited to participate in the selection process.
- The selection is based on the criteria and weightings in the Table 3:

Table 3: Weighting of assessments

0 0	
Assessment	Weighting (%)
Results of the Senior certificate/National Senior Certificate	60
Interview scores	40

- Applicants invited to the selection process should have a sound knowledge of the Clinical Technology profession.
- Successful applicants will be placed into either the four-year degree or the five-year Extended Curriculum Programme.

- Provisional acceptance is given to selected applicants awaiting National Senior Certificate (NSC) and National Certificate (Vocational) results. If the final Grade 12 NSC/ NC (V) results do not meet the minimum entrance requirements, the provisional acceptance will be automatically withdrawn.
- Applicants whose application has been declined due to poor academic achievement in grade 11 may reapply to the programme should they be able to show improved academic performance in the final grade 12 examinations. Those applicants who wish to reapply should immediately notify the programme of their intention to reapply. In order for the application to be reconsidered, the applicant must submit the final grade 12 results to the Department as soon as these results are available.

#### 13.3.2 PROGRESSION RULES

In addition to Rules G16\*, students must pass all prerequisite modules as per Table I before progressing to a higher level.

#### 13.3.3 EXCLUSION RULE

In addition to the DUT General Rules G17\*, a first year student who fails three or more modules with an average of less than 40% in the failed modules during that year, is not permitted to re-register for the Programme. De-registration from any module is subject to the provisions of rule G6 (2)\*.

#### 13.3.4RE-REGISTRATION

Rule G17\* of the General Handbook for Students applies.

#### 13.3.5 INTERRUPTION OF STUDIES

Should a student interrupt their studies for a period or more than three consecutive years, the student will need to apply to the department for permission to re-register and will need to prove currency of appropriate knowledge prior to being granted permission to continue with registration.

# 13.3.6 CLINICAL TECHNOLOGY PRACTICE (CTP)

In addition to Rule G28\*, the following should be noted:

- Students must achieve clinical competencies in a Health Professions Council of South Africa (HPCSA)-accredited unit.
- The department will endeavour to assist all students for placement for clinical practice in level III & IV.
- 3. Students will not be allowed to change specialist categories in the third and the fourth registered level.
- 4. Disciplinary matters occurring in the unit will, in the first instance, be subject to the disciplinary code of conduct of that specific unit, and then be referred to DUT for student disciplinary action.

# 13.3.7REGISTRATION WITH THE HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA (PROFESSIONAL BOARD OF RADIOGRAPHY AND CLINICAL TECHNOLOGY)

Students are required to register as a student Clinical Technologist with the Health Professions Council of South Africa (Board of Radiography and Clinical Technology) in their first year of study. Registration fees and submission of registration documents will be for the responsibility of the student.

# 14. MASTERS OF HEALTH SCIENCES IN CLINICAL TECHNOLOGY (MHCLTI)

# 14.1 Programme Information

This full research qualification is aligned to Rule G24 and the guidelines in the Post Graduate Student Handbook.

- The Student who successfully completes this qualification will be able to apply advanced problem solving skills and critical, reflective thinking to perform independent research in a chosen field and report their findings in a dissertation that meets the accepted criteria and ethical principles for the profession. In this way they will make a contribution to the existing body of knowledge and initiate change that will help develop and advance the profession of medical technology.
- The qualifying Student will be able to conduct independent research under minimal guidance in a chosen field, and contribute to knowledge production in that field. The research problem, its justification, process and outcome is reported in a dissertation which complies with the generally accepted norms for research at that level.

#### Assessment and Moderation

In addition to Rule G24 (4), postgraduate assessment of dissertations will be aligned to Postgraduate policies and guidelines. Please refer to the General Student Handbook and the Postgraduate Student Handbook.

### 14.2 Programme learning structure

Code		Year of Study	Assessment Type	NATED Credits	Pre-requisites	Co-requisites
MHCLTI	Dissertation	2	External Examination	1.0	None	none

# **14.3. Programme Rules** (Approved by SENATE August 2014)

# 14.3. I Minimum Admission Requirements

In addition to the General Handbook for Students Rule G24 (I), candidates must be possession of a Bachelor's Degree in Clinical Technology (NQF Level 8), or must have been granted conferment of status according to Rule G10A. Candidates may also apply for admittance via Recognition of Learning (RPL) in accordance with Rule G7 (8) and / or G10B.

#### Selection Criteria

In accordance with Rule G5, acceptance into the Masters of Health Sciences programme is limited, and not automatic. Students are selected into the programme once they have completed an intention to study and the department has discussed the viability of the proposed topic for the Masters Qualification. The intention to study/ concept page must include the following: Problem statement or Title of the intended study, Objectives / sub-problems / Research Questions, Rationale/motivation to do the study, Brief literature review, Brief methodology.

Applicants must have an aggregate of 60% overall for the B Tech Degree.

#### **14.3.2 Pass Requirements**

Rule G24 and the Postgraduate Student Handbook apply.

Students are encouraged to apply themselves to their research, and strive for the best academic results possible in order to adequately prepare themselves for their future careers.

# 14.3.3 Re-registration Rules

Rule G24 (2), Rule G26 (5) and the Postgraduate Student Handbook apply.

#### 14.3.4 Exclusion Rules

Rule G24 (1)(d); Rule G24 (2), and the Postgraduate Student Handbook apply.

#### 14.3.5 Minimum and maximum duration

The minimum duration for this programme shall be one (1) year of registered study and the maximum duration shall be three (3) years of registered study.

# 14.3.6. Interruption of Studies

Should there be bona fide reasons for the interruption of studies for a period of one (I) year or more once the candidate is formally registered, the student may apply for an interruption of registration. Registration may be interrupted under exceptional circumstances only and is not done retrospectively.

## 15. DOCTOR OF MEDICAL CLINICAL SCIENCES (DRMCS1)

# 15.1 Programme Information

This full research qualification is aligned to Rule G25 and G26 and the guidelines in the Post Graduate Student Handbook. The purpose of this qualification is to ensure that the student who successfully completes this qualification will be able to apply advanced problem-solving skills and critical, reflective thinking to perform independent research in a chosen field and report their findings in a dissertation that meets the accepted criteria and ethical principles for the profession. In this way they will make a contribution to the existing body of knowledge and initiate change that will help develop and advance the profession of Clinical Technology.

#### **Assessment and Moderation**

Post graduate assessment will be aligned to Postgraduate policies and guidelines. Rule G25 (4) and the Postgraduate Student Handbook apply.

### 15.2 Learning Programme Structure

Code		Year of Study	Assessment Type			Co- requisites
DRMCSI	Dissertation	2	External	2.0	None	none
			Examination			

# 15.3 Programme Rules

#### 15.3.1 Minimum Admission Requirements

In addition to the General Handbook for Students Rule G24 (I), candidates must be possession of a Master's Degree in Clinical Technology (NQF Level 9), or must have been granted conferment of status according to Rule G10A.

Candidates may also apply for admittance via Recognition of Learning (RPL) in accordance with Rule G7 (8) and / or G10B. Students are selected into the programme once they have completed an intention to study and the department has discussed the viability of the proposed topic for the qualification. A sound knowledge of the fundamental principles and concepts of research and statistical methods is required.

# 15.3.2 Re-registration Rules

Please refer to Rule G26 (5) and the Postgraduate Student Handbook.

### 15.3.3 Exclusion Rules

Please refer to Rules G25 (2)(b; c(ii)) in the General Student Handbook; and the Postgraduate Student Handbook.

#### 15.3.4 Minimum and maximum duration

In accordance with Rule G25 (2), the minimum duration for this programme will be two (2) years of registered study and the maximum duration will be four (4) years of registered study.

# 15.3.5. Interruption of Studies

Should a student interrupt their studies by more than three (3) years, the student will need to apply to the department for permission to reregister and will need to prove currency of appropriate knowledge prior to being given permission to continue with registration. Please refer to the Postgraduate Student Handbook.

# 16 SUBJECT CONTENT

**NB:** Students are to read this section in conjunction with the relevant study guide.

# 16.1.1 National Diploma: Biomedical Technology

Module Name	Learning Content	Assessment
		The CONTINUOUS ASSESSMENT
FOUNDATION	Atomic structure, Periodic table, molecular elements	mark shall be made up of
	& compounds, Composition and	Theory tests: 50%
CHEMISTRY	stoichiometry	Practical tests: 30%
(FCMRI0I)	Amines and amides	Practical reports: 5%
		Assignments: 15%
		The CONTINUOUS ASSESSMENT
<b>FOUNDATION PHYSICS</b>	Basic Mathematics, vectors, Problem solving skills in	mark shall be made up of
(FPHYI0I)	Physics, Conceptual physics	Theory tests: 60%
,		Practical tests: 40%
		The CONTINUOUS ASSESSMENT
		mark shall be made up of
FOUNDATION	Antibody structure, Complement, HLA,	Theory tests: 50%
IMMUNOLOGY	Structures in general	Practical tests: 30%
(FIMM101)	g	Practical reports: 5%
		Assignment /s: 15%
		The CONTINUOUS ASSESSMENT
		mark shall be made up of
FOUNDATION	Amino acids, Physiological buffers, Structures	Theory tests: 50%
BIOCHEMISTRY	in general, denaturation of proteins/DNA	Practical tests: 40%
(FBIO101)	Ionisation of amino acids	Practical reports: 5%
		Assignment /s: 5%
		The CONTINUOUS ASSESSMENT
		mark shall be made up of
LABORATORY	Solutions, Laboratory Mathematics,	Theory tests: 50%
TECHNIQUES	Laboratory ware, Safety, Microscopy	Practical tests: 40%
(FLBT101)	Laboratory ware, Jaiety, Filer Oscopy	Practical reports: 5%
		Assignment /s: 5%
	Communication strategies, Personal	7 to 5 g 10 10 7 5 1
	management skills, accessing and processing	The CONTINUOUS ASSESSMENT
	information	mark shall be made up of
ACADEMIC	Language practices and conventions	(a)Tests
LITERACY*	*This is not a subject on its own but will be	(b) oral presentation
	incorporated in all the foundation subjects	(c) individual class exercises
	as a tool to help the Students.	(c) marriadar ciass exercises
	Medical Technology the profession and the	The CONTINUOUS ASSESSMENT
INTRODUCTON TO	professional, Legal and Ethical aspects,	mark shall be made up of
MEDICAL	Laboratory safety	Theory Tests: 25%
TECHNOLOGY	Laboratory glassware and plastics, Laboratory	Practical Tests: 25%
(IMETIOI)	techniques and apparatus, Laboratory	Communication skills: 25%
( )	organization	Computer skills: 25%
	General arrangement of the body, The cell	F
	and tissues, haematology, cardiovascular	Theory Tests: 24%
ANATOMY &	system	Practical Tests: 12%
PHYSIOLOGY I	Lymphatic system, Respiratory system,	Practical reports: 2%
(ANPHI04)	Nervous system, Endocrine system,	Project: 2%
	Reproductive system	Examination 60%
	Renal system, Gastrointestinal system	3555
	Mathematical calculations: Algebra, Graphs,	
CALCULATION &	Trigonometry	
STATISTICS	Statistical calculations: Descriptive Statistics,	Theory tests: 40%
(CSTAIOI)	Elementary probability, Probability	Examination: 60%
(55.7101)	distributions, Correlation Analysis	
	distributions, Correlation Analysis	

PHYSICS I	Mechanics, thermal physics, wave motion, electricity and magnetism, light	Theory Tests: Practical Tests:	24% 12%
(PYSCI05)	and optics, Introduction to atomic and nuclear Physics	Practical reports: Project: Examination	2% 2% 60%
CHEMISTRY I (CHMB102)	Matter and Energy, Chemical Equations and Stoichiometry, solution Chemistry, Rates of Reactions and Chemical Equilibrium, Organic Chemistry	Theory Tests: Practical Tests: Practical reports: Project: Examination	24% 12% 2% 2% 60%
PATHOPHYSIOLOGY II (PAPH201)	The normal and the adapted cell, Cell injury and cell death, Inflammation and repair, Neoplasia, Clinical aspects of neoplasia, Genetic disorders, Respiratory system disorders, Circulatory system disorders, Urinary system disorders, Digestive system disorders, Nervous system and sensory organs disorders, Endocrine system disorders	Theory Tests: Project: Examination	32% 8% 60%
BIOCHEMISTRY II (BIOA202)	Bio-elements and biomolecules, Carbohydrates, Nucleic acids, Proteins and amino acids Lipids, Enzymes, ph and buffers, Introduction to metabolism, Metabolism of carbohydrates	Theory Tests: Practical Tests: Practical reports: Project: Examination	24% 12% 2% 2% 60%
IMMUNOLOGY II (IMMU202)	Introduction to Cytology, Specimen collection & fixation, Specimen preparation, Staining & mounting Special techniques in Cytology, Biological behaviour of cells and tissues, Evaluation of the cellular sample, Histology & cytology of the FGT, Hormonal Cytology, Agents of infection, Inflammatory, degenerative and regenerative changes, Premalignant changes, Malignant changes, Bare tumours	Theory Tests: Practical Tests: Practical reports: Project: Examination	24% 12% 2% 2% 60%
BLOOD TRANSFUSION TECHNOLOGY (BLTT201)	Government regulations, General aspects of blood transfusion, The blood group systems Transmission of disease, Pretransfusion testing, Untoward transfusion reactions, quality Assurance	Theory Tests: Practical Tests: Practical reports: Project: Examination	24% 12% 2% 2% 60%
CELLULAR PATHOLOGY I (CEPA101)	Introduction to Histology, Fixation, Tissue processing, Dehydration &dealcoholization, Impregnation & embedding, Decalcification, Microtomy, Staining, artefacts & pigments, Immunohistochemistry	Theory Tests: Practical Tests: Assignment: Examination	24% 13% 3% 60%
CHEMICAL PATHOLOGY I (CPATI0I)	Basic principles, Water balance, osmolality, electrolytes, pH and blood gases, Kidney and tests of renal function, Amino acids and proteins	Theory Tests: Practical Tests: Practical reports: Project: Examination	24% 11% 3% 2% 60%
MICROBIOLOGY I (MCGY101)	History and development, Survey of Microorganisms and classification, Microscopy and staining. Bacterial structure, reproduction and growth, Bacterial cultivation, Microbial metabolism, Bacterial genetics, Host parasite relationships, Control of microorganisms	Theory Tests: Practical Tests: Practical reports: Project: Examination	24% 12% 2% 2% 60%
CHEMICAL PATHOLOGY II (CPAT202)	Enzymes, Liver and tests of hepatic function, Disorders of carbohydrate metabolism, Lipid metabolism Pharmacology,	Theory Tests: Practical Tests: Practical reports: Project: Examination	24% 11% 3% 2% 60%
HAEMATOLOGY II (HAEM203)	Origin and normal development of haematopoietic elements, the erythrocyte, The leucocytes	Theory Tests: Practical Tests:	24% 12%

	in the circulation	Practical reports:		2%
	The platelet/megakaryocytic system, Haemostasis,	Project:	2%	
	Basic haematological values	Examination		60%
		Theory Tests:		24%
MICROBIOLOGY II	Parasitalani mayaalani yiyalani intuadyatian ta	Practical Tests:		12%
(MCGY203)	Parasitology, mycology, virology, introduction to bacteriology	Practical reports:		2%
(14031203)	bacteriology	Project:	2%	
		Examination		60%
		Theory Tests:	24%	
CELLULAR	Respiratory tract, Serious effusions, Urinary	Practical Tests:	12%	
PATHOLOGY III	tract, Gastrointestinal tract, Central nervous	Practical reports/Assign	ment:	2%
(CEPA301)	system	Project: 2%		
		Examination	60%	
		Theory Tests:	24%	
CHEMICAL	Mineral metabolism, CSF and other body fluids,	Practical Tests:	11%	
PATHOLOGY III	Immunochemical techniques, Endocrinology	Practical reports:	3%	
(CPAT303)	Pharmacology	Project: 2%		
		Examination	60%	
	Red cell morphology; The anaemias; The leucocytes,	Theory Tests:	24%	
	The myeloproliferative;syndromes; The	Practical Tests:	12%	
HAEMATOLOGY III	acute leukaemias, The myelodysplastic	Practical reports:	2%	
(HAEM303)	syndromes, The lymphoproliferative	Project: 2%		
	disorders, Platelets, Haemostasis, Parasites,	Examination	60%	
	Quality Assurance Specimen collection, transport and processing, gram	Theory Tests:	24%	
	positive bacteria, gram negative bacteria,	Practical Tests:	12%	
MICROBIOLOGY III	mycobacteria, Atypical bacteria,	Practical reports:	2%	
(MCGY301)	spirochaetes, serology, antimicrobial agents,		2/0	
	nosocomial infection	Examination	60%	
LABORATORY	Performing, interpretation and integration of		0070	
PRACTICE 3 (WORK	laboratory tests in the following disciplines	\A/	400	
INTEGRATED	Medical Microbiology, Virology, Chemical Pathology,	Workplace assessment		
LEARNING)	Cytology, Histology, Haematology and	Integrated learning proj	ect 40	1%
(LABP 301)	Blood Transfusion.			

# 16.1.2BTECH: BIOMEDICAL TECHNOLOGY

Module Name	Learning Content	ASSESSMENT	
RESEARCH METHOD & TECHNIQUES (RMTQ201)	Biostatistics, Research methods and applications	Article critique: 20% Proposal: 50% Poster: 10% Statistics assignment: 20%	
RESEARCH PROJECT (RPBM101)	Preparation and submission of a research dissertation	Oral presentation 10% Chapter I draft 5% Chapter2 draft 5% Thesis 80%	
INTEGRATED PATHOPHYSIOLOGY IV (IPAT401)	Clinical diagnosis and laboratory diagnosis of disorders in Integument, Skeletal, Muscular, nervous, Endocrine, Cardiovascular, lymphatic, Respiratory, Digestive, Urinary, Reproductive	Theory tests: 32% Assignment: 8% Examination 60%	

LABORATORY MANAGEMENT (LABM201)	Principles of Management, Laboratory organization, Hunam resourses management, Physical resources management, Financial Management, Quality Assurance and Safety, , Entrepreneurship	Theory tests: 24% Project: 16% Examination 60%
MOLECULAR BIOLOGY IV (MOLE401)	DNA structure and gene expression, Bacterial genetics, Regulation of gene function in bacterial and eukaryotic cells, Cancer at genetic level, molecular biology applications	The CONTINUOUS ASSESSMENT mark shall be made up of Theory tests: 60% Practical tests: 40%

# 16.1.3 BACHELOR OF HEALTH SCIENCES IN MEDICAL LABORATORY SCIENCE

CHEMISTRY	Apply knowledge and principles of general and	Theory tests (average of all):
	organic chemistry.	24%
	Explain with examples the role of chemistry in	Practical tests
	everyday life.	10%
	Perform calculations required for solution	Practical reports
	chemistry.	2%
	Prepare solutions following accurate procedures.	Assignments/oral presentation:
	Demonstrate understanding of the periodic table	2%
	of elements and apply knowledge to	Tutorials, class/homework
	general principles of chemistry.	7%
	Draw up balanced chemical reaction equations.	Examination:
	Draw up balanced chemical reaction equations.	60%
PHYSICS (MODULE I)	MECHANICS	
	Fundamental Units & Dimensional Analysis	
	Vectors and Scalars	
	One Dimension Kinematics	
	Newton's Laws of Motion	
	Work, Energy & Power	
	Impulse and Momentum	
	Rotational Dynamics	Theory tests (average of all):
	PROPERTIES OF MATTER	26%
	Phases of Matter	Practical tests
	Elasticity	14%
	Density and Specific Gravity	Examination:
	Pressure in Fluids	60%
	Atmospheric Pressure and Gauge Pressure	
	Pascal's Principle	
	Buoyancy and Archimedes' Principle	
	Surface Tension	
	Capillary Action	
	Viscosity	
	Poiseuille's Law	
PHYSICS (MODULE 2)	THERMAL PHYSICS	
	Temperature	
	Heat and Temperature Change	
	Thermal Expansion of Solids	Theory tests (average of all):
	Heat and Phase Change	26%
	Calorimetry	Practical tests
	Heat Transfer Mechanisms	14%
	WAVES & SOUND	Examination:
	Oscillatory Motion	60%
	Wave Motion & Types of Waves	00/6
	Frequency, Amplitude and Wavelength	
	Speed of Waves on Strings	
	Reflection of Waves	
		ED.

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	Sound Waves	
	Energy and Intensity of Sound Waves	
	Doppler Effect	
	GEOMETRICAL OPTICS	
	Reflection	
	Refraction & Snell's Law	
	Dispersion	
	Critical Angles & Total Internal Reflection	
	Images Formed by Plane Mirrors	
	Images Formed by Spherical Mirrors	
	Images Formed by Refraction: Thin Lenses	
	ELECTRICITY& MAGNETISM	
	Electric Charge	
	Insulators and Conductors	
	Charging by Friction, Conduction and Induction	
	Coulomb's Law	
	Electric Field & Electric Field Lines	
	Electric Current & Potential Difference	
	Resistance & Ohm's Law	
	Series & Parallel Circuits	
	Fundamentals of Magnetism	
	RADIOACTIVITY & RADIATION	
	Properties of Nuclei	
	Binding Energy	
	Decay Processes (Alpha, Beta & Gamma)	
	Decay Constant & Half-Life	
	,	
	Activity	
	Medical Applications of Radioactivity	
	Biological Effects of Ionizing Radiation	
	OLIANITUM BUIVCICC	
	QUANTUM PHYSICS	
	Blackbody Radiation and Plank's Hypothesis	
	Photoelectric Effect	
	Photons & Electromagnetic Waves	
	Wave Properties of Particles C	
FUNDAMENTALS OF	Pipetting.	
MEDICAL	Use of balances.	
LABORATORY SCIENCE	Units, measurements and calculations related to	
	solution preparation.	
	Operate specified equipment in accordance with	
	standard operating procedures, using	
	different equipment including	
	spectrophotometers, pH meters,	
	weighing of chemicals.	
	Laboratory equipment made of glass and plastic	
	appropriately	
	Sterilization procedures applicable to different	CONTINUOUS ASEESSMENT
	medical laboratory equipment, reagent	Theory test: 50%
	and surfaces.	Practical Tests: 20%
	Apply and uphold safety procedures and correct	Practical Reports: 10%
	disposal of waste in accordance with	Assignment/project: 10%
	safety regulations acknowledging	Lab maths +tuts: 10%
	occupational health and safety principles.	
	Quality Assurance procedures and principles of	
	maintenance of equipment & test	
	analysis.	
	Role and function of the medical laboratory	
	scientist.	
	Apply ethical, professional, and medico-legal	
	principles and rules in the laboratory as	
	applied when dealing with different	1
	laboratory specimen testing	
	laboratory specimen testing Stock control procedures in the laboratory.	
	laboratory specimen testing	

	and electronic means of communication.	
	Fundamental knowledge of statistical techniques	
	TOPICS	
	HPCSA	
	SMLTSA	
	OHS act	
	Hierarchy	
	Course structure	
	CPD	
	Bathopele principles	
	Specimen types	
	Transportation	
	Anticoagulants	
	Storage	
	Decontamination	
	Disinfection	
	Biological, physical and chemical hazards	
	Evacuation drills	
	General laboratory safety rules	
	Centrifuges and centrifugation	
	Balances and weighing	
	Spectrophotometer and photometry	
	pH meter and pH measurement	
	Laboratory glassware and plastic ware	
	Autoclaving	
	Microscopes	
	Water purification (distillation and deionisation)	
	Refrigeration	
	Use of quality control (QC)	
	Terminology used in QC	
	Record books	
STATISTICS	Filing	
STATISTICS	Introduction to Statistics (The learners will be	
	exposed to the differences between	
	descriptive and inferential statistics and	
	its use in the Applied Sciences and the	
	use of computers in statistics)	
	Collection of Data (The different types data and its	TI ( 10
	method of collection will be discussed)	Theory tests (average of all):
	Presentation of Data (The presentation of data in	24%
	the form of frequency distributions,	Practical tests
	graphs and charts will be discussed)	10%
	Measures of Location and Variation (The learners	Practical reports
	will be taught the various calculation	2%
	methods on the data collected and	Assignments/oral presentation:
	presented)	2%
	Correlation and Regression Analysis (An	Tutorials, class/homework
	understanding of the relationships	2%
	between variables will be accomplished	Examination:
	through these analyses and its use in the	60%
	Applied Sciences)	
	Basic Probability and its distributions (The learners	
	will be exposed to the basic probability	
	concepts and its various distributions	
	that exist and its relevance to Applied	
	Sciences)	
ANATOMY AND	The human body. The cell: Fluids and electrolytes,	- 1
PHYSIOLOGY IA	Histology	2 X two hour theory test
	Describe the language relating to anatomy and	A supplementary test will be
	physiology.	made available.
	p/5.0.05/.	
	Describe the organisation of the body, metabolism,	Each theory test will carry a
	and the structure and function of the cell	weighting of 50%
	and the structure and rancastr of the cen	
	1	

	Identify, describe, label & draw tissue types	
	Explain homeostasis at cellular level	
	Explain the importance and role of electrolytes and fluids in cells and tissues.	
	Skeletal system. Joints. Skin. Thermoregulatory system	
	Describe the integumentary system is in terms of structure and function	
	Classify & describe the anatomy of the skeleton	
	Describe the anatomy and physiology of the voluntary muscles.	
	Explain the structure of the skin & its components.	
	Consider the role of the skeletal system muscle &	
	skin as it relates to issues that may occur in the environmental health scenario .e.g.	
	ergonomics	
	Nervous and endocrine systems. Senses.	
	Describe the nervous system in terms of organization, structure and function.	
	Explain the four special senses and their	
	relationship to each other (taste, smell,	
	hearing and sight) Describe the endocrine system terms of	
ANATOMY AND	hormones and their effects.	
ANATOMY AND PHYSIOLOGY IB	Heart and circulatory system. Lymphatic system. Respiratory system. Immunology	
	Explain the composition of blood is identified and essential functions are explained.	
	Describe anatomy and physiology of the heart and	
	vascular systems.	
	Describe anatomy and physiology of the lungs and respiratory tree.	
	Explain gas exchange in the lungs and body tissues.	2 X two hour theory test
	Explain mechanism of breathing.	A supplementary test will be made available.
	Urinary system & reproductive system Describe he anatomy and physiology of the urinary system.	Each theory test will carry a weighting of 50%
	Explain the anatomy of the male and female reproductive systems is described.	
	Discuss the essential functions of the male and female reproductive systems	
	Digestive system & nutrition.  Describe the anatomy and physiology of the digestive tract and associated organs.	
	Explain the process of digestion.	

	Io	I
	Consider the effects of food and nutrition on the human body as it relates to digestion.	
	E.g. Food poisoning/ chemicals.	
	Describe the role of good nutrition in terms of macro & micro nutrients and the importance of	
	good diet.	
	Discuss the effects of poor nutrition on the human body e.g. malnutrition.	
CELL BIOLOGY		Theory tests (average of all):
	pH and buffers biomolecules and bio elements	24% Practical tests
	carbohydrates	10%
	nucleic acids	Practical reports
	amino acids	2%
	proteins	Assignments/oral presentation:
	enzymes	2%
	lipids metabolism	Tutorials, class/homework 2%
	introduction to Polymerase Chain Reaction (PCR)	Examination:
	and obtained to rolymerase chain reaction (reft)	60%
IMMUNOLOGY	Development if immunology as a science; specific	
	immune response; non-specific immune	
	response; adaptive and innate immune response; antigen; antibody; self and non	
	self; primary and secondary immune	
	response; lymphoid organs; cells;	
	functions and structure	Theory tests (average of all):
	Structure of antigen and antigen receptor; growth	24%
	factors; relationship between growth	Practical tests
	factors and immune response Structure of the antibody; functions; induction of	10% Practical reports
	antibody; effector functions; switch	2%
	between classes; classification and	Assignments/oral presentation:
	function of classes	2%
	Humoural immunity; cell mediated immunity;	Tutorials, class/homework
	human lymphocytic antigens;	2%
	Histocompatibility	Examination: 60%
	Shielding of antigen – recognition as self; disorders of compliment deficiencies;	60%
	hypersensitivity autoimmune disorders;	
	immune deficiencies; human	
	immunodeficiency virus	
	Properties of complement; nomenclature;	
	complement cascade; amplification loop;	
CORNERSTONE 101	tick over; regulation The module content will be developed around the	
00111121101 0112 101	concept of journeys, across time, across	A weekly blog written by each
	space, and across human relationships;	student
	the first use of the concept will take the	20%
	journey of the Umgeni River (which is	Tutorial attendance (forfeited if
	close to all DUT campuses) as a	student attends less
	metaphor. The module will bring different disciplinary perspectives to this	than 80% of tutorials)
	content.	Visual artefact
		15%
	The module will start with the analysis of a	Written report
	particular issue or metaphor (one critical	30%
	event or development will be and	Oral presentation 15%
	analysed; the event in focus will be selected on the basis of its connections	Peer assessment
	to the theme of journeys and its	10%
	relevance to the issues of ethics,	
	. c.c.aco to a.e issues of curics,	

	diversity and critical citizenry).	
	The final section of the module will identify and	
	integrate learning from earlier sections,	
	and examine implications for further	
	learning. At each stage of the module,	
	students will be required to engage in	
	activities that involve reflection and build	
	communicative practices. There will be a	
	concluding section in which students will	
	identify their learning and examine the	
	implications for their roles as students	
	and as citizens.	
VALUES IN THE	The module will begin with a reflection on	
WORKPLACE	personal values and move to a discussion	
	on how they intersect with values in the	
	workplace. Small group discussions will	
	be formed around how to build positive	
	values in the workplace and the vital	
	themes of ethics, respect,	40.0/
	interconnectedness, honesty, creativity	Assignments 40 %
	and human diversity will form the basis	Presentation 20% Reflection 20%
	for building "sacred spaces at work." This will set the tone to unpack issues	Reflection 20% Peer assessment. 20%
	around leadership values and ethics and	reer assessment. 20%
	ethical decision making. The final section	
	of the module will integrate all these	
	aspects and students will be required to	
	identify the implications of what they	
	have learnt to develop social	
	responsibility and their roles as citizens.	
LAW FOR LIFE	Introduction	Assistante
	Civil and criminal law	Assignment 60%
	Law of insurance	Poster
	Road accident fund	20%
	Law of contract	Will document
	Marriage	20%
WORLD OF WORK	Succession	
WORLD OF WORK	Traditional and Modern CV Writing;	
	Who Am I?; (DISC, MBTI etc) Job Searching;	
	Job Applications;	
	Networking;	
	Interviewing;	
	Body Language;	
	Verbal Communication;	
	Visual/Graphical Presentation;	
	What Is "Business"?	
	Career Path Options;	Tests (average of all)
	Work Readiness Expectations	60%
	Business Processes and Goals;	Assignment
	Organisational Aspects;	30%
	Stress;	Classwork
	Business Ethics	10%
	Etiquette - Telephone; Social Media, General	
	Goal Setting & Time Management; Personal Finance	
	Numeracy Project Management;	
	Meetings	
	Technical Report Writing;	
	Productivity in the Workplace	
	Quality in the Workplace	
	Health & Safety in the Workplace;	
L	· · · · · · · · · · · · · · · · · · ·	

	II	
	Housekeeping;	
	Computer and Technology Applications	
	Problem Identification & Solving;	
	Creativity, innovation and questioning	
	Interpersonal Skills;	
	Power & Conflict Management, (Johari)	
	Planning; Organising; Motivation; Leadership and	
	Teamwork	
COMMUNITY HEALTH CARE		Theory
AND RESEARCH I	Brief overview of health systems in South Africa	20%
PERSONAL AND	Brief overview of problem identification in	Assignment
PROFESSIONAL	communities	10%
DEVELOPMENT I	Brief overview of project development,	Proposal
	implementation and evaluation	50%
	Communication	Presesntation
		20%
CLINICAL CHEMISTRY I	Anticoagulants and preservatives	
	Collection and handling of specimens	
	Spectrophotometry	Theory tests (average of all):
	Quality Assurance	24%
	Reference ranges	Practical tests
	Automation principles and methods	10%
	Amino acids, Plasma protein and albumin	Practical reports
	Principles of electrophoresis	2%
	Kidney function tests including urinalysis,	Assignments/oral presentation:
	osmolality, urine tests, calculi	2%
	Liver metabolites	Tutorials, class/homework
	Use and maintain lab equipment	2%
	Electrochemical techniques	Examination:
	Electrolytes.	60%
	Uric acid	
	Acid/base balance	
	Laboratory mathematics/calculations	
MEDICAL MICROBIOLOGY I	Introduction to medical microbiology	
	Good laboratory practices in the microbiology	Theory tests (average of all):
	laboratory	24%
	Instrumentation and its application in the	Practical tests
	laboratory	10%
	Development of microbiological techniques and	Practical reports
	application	2%
	Taxonomy and nomenclature of microorganisms	Assignments/oral presentation:
	Microscopy and staining	2%
	Bacterial cultivation and measurement	Tutorials, class/homework
	Microbial metabolism (biochemical tests)	2%
	Symbiotic relationship and establishment of disease	Examination:
	Control of microorganisms Microbial genetics and recombinant DNA	60%
	technology	
MEDICAL MICROBIOLOGY	BACTERIOLOGY	
2A	Microbiology terminology and personnel	
28	responsibilities	Theory tests (average of all):
	Collection, transport, processing of biological	24%
	specimens	Practical tests
	Storage and disposal of biological specimen and	10%
	waste	Practical reports
	Classification of medically important bacteria	2%
	Laboratory identification of microorganisms	Assignments/oral presentation:
	Microbiological tests and techniques(routine and	2%
	specialised)	Tutorials, class/homework
	/	2%
	PARASITOLOGY	Examination:
	Classification of medically important parasites	60%
	Life cycles of medically important parasites	
	,	l .

	Parasites pathogenesis	
	Epidemiology	
	Laboratory identification	
	VIROLOGY	
	Classification of medically important viruses	
	Epidemiology	
	Replication cycles	
	Cell culture preparation and identification of	
	medically important viruses	
	MYCOLOGY	
	Classification of medically important fungi	
	Fungal structures and reproduction	
	Classification of mycoses	
HAEMATOLOGY I	Blood formation, Cell development: Red cells,	
	white cells, platelets	
	Structure and function of the bone marrow, cells,	
	haemoglobin	
	Growth factors and their effects: erythropoietin,	
	thrombopoietin, Interleukins, cytokines,	
	other growth factors	
	Factors affecting release of mature cells from the	
	marrow	
	Nutritional requirements in cell development: iron,	
	vitamin B <sub>12</sub> , folate	
	Metabolic requirements of cells: Hexose	
	monophosphate shunt;	
	Rapaport-Leubering pathway; Glycolytic pathway;	
	Methaemoglobin reduction pathway;	
	Glutathione metabolism pathway	Theory tests (average of all):
	Processes leading to red cell destruction, features	24%
	of haemolysis	Practical tests
	Structure and function of organs involved in	10%
	haematopoiesis: spleen, thymus, lymph	Practical reports
	nodes, liver	2%
	The immune system: types of immune mechanisms,	Assignments/oral presentation:
	immune responses	Ζ%
	The process of haemostasis including the	Tutorials, class/homework
	coagulation cascade and fibrinolysis	_ 2%
	Properties of a good anticoagulant and their effects	Examination:
	on specimens, good quality samples	60%
	Sites of blood and bone marrow collection,	
	principles and methods of tests and	
	techniques: full blood count, differential	
	count, reticulocyte count, coagulation	
	studies, polymerase chain reaction,	
	diagnostic usefulness of bone marrow	
	specimens	
	Storage protocol and the effects of storage on	
	haematological specimens	
	Protocols on reporting of laboratory results	
	Good laboratory practice including ethics, safety	
	principles	
	Principles Principles of quality control programmes in	
	haematology	

IMMUNOHAEMATOLOGY I	Blood donation criteria and testing.	
	Procedures for the collection, processing and	
	testing.	
	Storage and issuing of blood and blood products.	
	Clinical indications for the use of blood and blood	
	products	Theory tests (average of all):
	l '	24%
	Haemovigilance and biovigilance Apheresis.	Practical tests
	l '	10%
	Clinical significance of blood group system antigens	Practical reports
	and antibodies.	2%
	Basic serological techniques.	Assignments/oral presentation:
	Blood group interpretation	2%
	Causes of false results in laboratory testing	Tutorials, class/homework
	Blood group reaction patterns and interpretation	2%
	Compatibility and transfusion testing.	Examination:
	Selection of blood for cross-match	60%
	Risks and benefits associated with blood	
	transfusion.	
	Transfusion transmitted diseases.	
	Haemolytic disease of the foetus and new-born (HDFN)	
	Quality management systems.	
HISTOPATHOLOGY I	Laboratory administration - collection, logging,	
	distribution,	
	data recording, reporting, accession and retrieval	
	of data.	
	Safety in the histopathology laboratory – recognize	
	dangers by fresh,	
	unfixed tissue biopsies. Storage and safe handling	
	of chemical and dyes.	Theory tests (average of all):
	Light and electron microscopy - behaviour of light	24%
	and electrons.	Practical tests
	Fixation and fixatives – effects of specific fixatives	10%
	on tissue and organs.	
	Poor fixation and fixation artefacts and corrective	Practical reports 2%
	action.	Assignments/oral presentation:
	Tissue processing - familiar with the handling of	2%
	the tissue processor and	Tutorials, class/homework
	reagents used. Recognize processing artefacts	2%
	and take corrective action.	Examination:
	Tissue embedding – embedding techniques of	60%
	various tissue biopsies.	60%
	Microtomy - familiar with the safety features and	
	how to use a microtome	
	for sectioning of various tissue types.	
	Staining - preparation and use of reagents used to	
	stain specific tissue	
	components and structures to contribute to	
	diagnosis.	
CYTOLOGY I	The origins and role of Cytology as a discipline as	
	well as outline the professional and	
	ethical role of a cytotechnologist	Theory tests (average of all):
	functioning in a Cytology laboratory.	24%
	Quality Assurance programme in a Cytopathology	Practical tests
	LaboratoryThe role of automation in a	10%
	cytology laboratory, including Liquid-	Practical reports
	based Cytology and Automated	2%
	Screening Systems.	Assignments/oral presentation:
	Growth and differentiation of cells and tissues.	2%
	The normal cells and tissues found lining the	Tutorials, class/homework
	female genital tract (FGT).	2%
	Collection and processing of cytological samples	Examination:
	specimens from the FGT.	60%
	Cytological evaluation of specimens of the FGT	00/0
i		
	including normal constituents of the	

	cervical smear, infective agents (bacteria,	
	fungi, parasitic and viral agents), inflammatory, degenerative and	
	regenerative changes and other non-	
	neoplastic changes, (Acute inflammation,	
	chronic inflammation, Tissue repair,	
	follicular cervicitis, atrophic vaginitis,	
	metaplasia, parakeratosis and	
	hyperkeratosis)	
	The effects of the reproductive hormones on the	
	cells of the FGT	
	The morphogenesis and cytological presentation of	
	premalignant and malignant conditions of	
	the FGT (Natural history of cervical	
	cancer, Pathogenesis of cervical cancer,	
	LSIL, HSIL, Squamous carcinoma,	
	,Adenocarcinoma, Rare Tumours	
	(Clear cell carcinoma, Hydatidiform	
	mole; Choriocarcinoma;	
	Adenosquamous carcinoma, Lymphomas; Melanoma; Sarcomas/ Mixed	
	Mesodermal Tumours, Extrauterine	
	malignancies (ovary/ vulva); Metastatic	
	tumours)	
	Treatment of pre-malignant lesions, cytologic	
	effects of radiation and chemotherapy.	
	General diagnostic application of	
	immunocytochemical techniques and	
	molecular biology to cytological samples	
MOLECULAR BIOLOGY	including PCR of HPV and genotyping.  Basic overview of DNA and RNA, the history and	
MOLECULAR BIOLOGI	their structure	
	Prokaryotic and Eukaryotic Genomes and DNA	Theory tests (average of all):
	replication DNA extraction; PCR	24%
	Working with RNA; RNA extraction;	Practical tests 10%
	Reverse Transcription and RT-PCR	Practical reports
	Gel Electrophoresis	2%
	DNA Sequencing	Assignments/oral presentation:
	Restriction enzymes, Restriction mapping	2%
	Cloning Vectors: plasmids, bacteriophages, cosmids	Tutorials, class/homework
	Cloning: Ligation, transformation; construction of	2%
	Gene (genomic)	Examination:
	libraries Cloning of cDNA libraries; Screening for	60%
	recombinant DNA	
FUNDAMENTALS OF		Theory tests (average of all):
PATHOLOGY	Medical terminology and internationally recognised	32%
	acronyms	Assignments/oral presentation:
	Cell adaptation and injury	5%
	Inflammation and healing.	Tutorials, class/homework 3%
	Classification, types and nomenclature of neoplasia Body fluid regulation and disturbances	Examination:
	1009 India regulation and disturbances	60%
SYSTEMIC	Classification of body organs and systems	
PATHOPHYSIOLOGY	Disorders and diseases in the following systems:	Theory tests (average of all):
	- Cardiovascular system	32%
	- Respiratory system	Assignments/oral presentation:
	- Lymphatic system	5%
	- Digestive system	Tutorials, class/homework
	- Endocrine system - Renal system	3%
	- Skeletal system	Examination:
	The physiological effects of each disorder.	60%
	The effects of the disorders on other body	
	, , , , , , , , , , , , , , , , , , , ,	- 64 -

	systems	
COMMUNITY HEALTH CARE	Health systems in South Africa in comparison with	
AND RESEARCH II	other successful third world countries like Brazil	Theory
		20%
	Brief overview of problem identification in communities and identification of sector	Assignment
	in which primary problem is embedded	10%
	' ''	Proposal
	Brief overview of project development, implementation and evaluation	50%
	Communication and consultation to academic	Presesntation
	community	20%
	Communication to receivers of care	
THE ENTREPRENEURIAL	BECOMING AN ENTREPRENEUR	
EDGE	Understanding yourself	
	What kind of business will suite me best	
	A vision for the business	
	Why become an entrepreneur	
	Who are entrepreneurs	
	Entrepreneurial Resources	
	Entrepreneurial myths	
	Entrepreneurial transition	
	,	
	ADDRESSING RISK	
	Risks the banks are concerned with	
	From the perspective of the bank	
	Risks and interest rates	
	Researching to reduce my risks	
	Understanding my risks and prospects	
	Problem solving	
	Competitive advantage	
	Business successes and failures	
	LINID EDGTANIDING NAVAMARIZET	
	UNDERSTANDING MY MARKET	
	What does my market look like	
	Sharing the market	
	Competitors	two tests and one assignment.
	Suppliers	The weighting of all
	Customer Relations Management	three assessments are
	PLANNING	equal. These three
	The environment	marks need to exceed
	Strategic planning	50% for a pass.
	Operation al planning	
	Types of plans	
	Setting the business vision	
	Determining the business mission	
	Setting business objectives	
	Finding and evaluating suppliers	
	0 0	
	FINANCIAL OBJECTIVES	
	Costing a product / service	
	Funding the business	
	_	
	MARKETING	
	What you should now about products and services	
	Considering the price	
	Finding the proper location	
	What to consider when advertising and doing	
	promotions	
	ethics and social responsibility	
	Considering ethical issues to address	
	Drawing up an ethics standard	
	Being held ethically responsible	

	Being responsible to your stakeholders	
THE GLOBAL	The module content will include the following	
ENVIRONMENT	themes:	
	Environmental Pollution (Air, water and soil)	
	Differences between air, water and soil pollution	
	in terms of cause and effect.	
	Social, economic and personal impact on	
	environmental pollution.	
	Pollution control strategies.	
	Local case studies.	
	Population growth vs. natural resources	
	Population growth trends in developed vs	
	developing countries.	
	Social, economic and environmental impacts of	
	human population growth in the global	
	context.	
	Strategies to curb population growth	
	Climate change and global warming	
	Causes of increased global mean temperatures.	
	Impact of climate change on extreme weather	
	conditions. Consequences of climate change on human health,	
	natural resources and biodiversity.	
	Sustainable development	
	Concept of sustainable development within the	
	South African and global context	
	Inter-relationships between sustainable	
	development, social responsibility,	
	economic development and	
EQUALITY AND DIVERSITY	environmental protection.	
EQUALITY AND DIVERSITY	Concepts and terminology – e.g. diversity, equality, inclusion, power, oppression	Theory
	Parameters of diversity as listed in section 9 of the	33%
	SA Constitution	Reflective writing assignment
	Prejudice, discrimination and inequality	17%
	The diversity competence continuum	Group presentation 17%
	Steps to develop competence/sensitivity in relation	Diversity festival
	to diverse others	33%
	Selected topics	

CLINICAL CHEMISTRY 2	Endocrinology	
CENTIONE OFFICE HOTHER	Secretion and regulation, hormones of	
	hypothalamus, pituitary, pineal, thyroid,	
	adrenal, gonads, pancreas, GIT	
	Carbohydrate metabolism	
	Intermediary carbohydrate metabolism, hormonal	
	regulation, disorders [glucose, lactate],	
	ketogenesis, glycosylated Hb, fructosamine, xylose	
	ii uctosairiirie, xyiose	
	Lipid metabolism	
	Lipid constituents, lipoproteins and disorders,	
	serum lipid and lipoprotein analyses,	
	total fecal fat/steatocrit/oral fat loading	
	test	
	D 1 (1:1 1:	Theory tests (average of all):
	Body fluid analysis	24% Practical tests
	CSF [glucose, proteins], amniotic fluid [congenital disease, neural tube defects, hemolytic	10%
	disease, gestational age, fetal pulmonary	Practical reports
	development], sweat [inc sweat analysis],	2%
	synovial fluid, serous fluid [pleural,	Assignments/oral presentation:
	pericardial, peritoneal], transudates and	2%
	exudates	Tutorials, class/homework
	- ·	2%
	Tumour markers Properties, classification, markers: PSA, AFP, CEA,	Examination: 60%
	CA 125, 153, 199	60%
	C/(123, 133, 177	
	Pharmacology	
	Introduction [classification, routes of	
	administration, terminology], receptor	
	theory, elementary pharmakokinetics,	
	drugs subjected to TDM [Digoxin, Phenytoin, Phenobarbitol,	
	Carbamazapine, Theophylline, Valproic	
	acid, Lithium, Paracetamol, Salicylates,	
	Tricyclic Antidepressants, Cyclosporin,	
	Amikacin, Gentamycin and Vancomycin],	
	techniques of drug analysis [EMIT, ELISA,	
	EI, HPLC, GLC, TLC], toxicology	
	[ethanol, salicylates, paracetamol, barbiturates]	
MEDICAL MICROBIOLOGY	Laboratory administration – collection, logging,	
2B	distribution,	
	data recording, reporting, accession and retrieval	
	of data.	
	Safety in the histopathology laboratory – recognize	, , , , , , , , , , , , , , , , , , , ,
	dangers by fresh,	24%
	unfixed tissue biopsies. Storage and safe handling of chemical and dyes.	10%
	Light and electron microscopy – behaviour of light	
	and electrons.	2%
	Fixation and fixatives – effects of specific fixatives	Assignments/oral presentation:
	on tissue and organs.	2%
	Poor fixation and fixation artefacts and corrective	Tutorials, class/homework
	action.  Tissue processing – familiar with the handling of	2% Examination:
	the tissue processor and	Examination: 60%
	reagents used. Recognize processing artefacts and	30/3
	take corrective action.	
	Tissue embedding – embedding techniques of	
	various tissue biopsies.	
		- 67 -

	Take a district a district and	I
PERSONAL AND PROFESSIONAL DEVELOPMENT II	Microtomy – familiar with the safety features and how to use a microtome for sectioning of various tissue types.  Staining – preparation and use of reagents used to stain specific tissue components and structures to contribute to diagnosis.  Revision of the basic elements of Writing.  Intermediate elements of Writing.  Effective communication and self-expression.  Community: Experience other communities; a variety of social contexts, identify the problems and see if they can play a role in addressing them.  8 Experiences: E.g. Soup kitchen, Children's home, Playhouse (4 disadvantaged settings, I western traditional experience, I Indian cultural experience, I African traditional experience, I outdoor experience)  The student would be required to choose to attend at least 4 of these	Write critically reflective pieces on each experience, guided by a series of questions (e.g. a SWOT analysis), identifying the role players in the community and seeing their roles.
HAEMATOLOGY 2	Classification and clinical features, causes, laboratory features and management of anaemias, leukaemias, malignancies, platelet and haemostatic disorders and disorders associated with systemic nonhaematological disorders  Principles of quality control and quality assurance and troubleshooting  Assessment of specimen suitability  Correct terminology when reporting results  The clinical significance of laboratory results, including reticulocyte counts,  full blood counts, coagulation tests, screening tests, confirmatory tests	Theory tests (average of all): 24% Practical tests 10% Practical reports 2% Assignments/oral presentation: 2% Tutorials, class/homework 2% Examination: 60%
CYTOLOGY 2	Collection and preparation of cytological specimens and the normal cells and tissues found lining the following sites in the body: - respiratory tract -serous effusions -urinary tract -central nervous system -gastro intestinal tract. Cytological evaluation of specimens including normal constituents , infective agents (bacteria, fungi, parasitic and viral agents), inflammatory, degenerative and regenerative changes and other non-neoplastic changes of the respiratory tract , serous effusions, urinary tract, central nervous system and gastro intestinal tract.  1. The morphogenesis and cytological presentation of premalignant and malignant conditions of the respiratory tract, serous effusions, urinary tract, central nervous system and gastro intestinal tract.  General diagnostic application of immunocytochemical techniques and molecular biology to cytological samples including PCR as applicable.	Theory tests (average of all): 24% Practical tests 10% Practical reports 2% Assignments/oral presentation: 2% Tutorials, class/homework 2% Examination: 60%

Respiratory Tract: collection and microscopic features in sputa and bronchial brushings/ lavages and FNAB.

Inflammation: Non-specific inflammation, Tuberculosis, Eosinophilia

Common infective agents and characteristic cytopathic effect for each agent, including Entamoeba sp, Actinomyces sp, Candida sp, Blastomyces sp, Cryptococcus sp, Aspergillus sp, Histoplasmosis sp, Coccidioides sp, Cryptococcus sp, Pneumocystis sp, Echinococcus sp, Entamoeba sp.

Other elements: Ferruginous bodies, Curshmann's spirals, Vegetable cells, Charcot-Leyden crystals.

Benign reactive: Bronchial hyperplasia and bronchial metaplasia, without/ with atypia.

Lung cancer and its pathogenesis, including known carcinogens

Malignant: Squamous carcinoma, Bronchogenic adenocarcinoma, and Bronchoalveolar car ,Small cell (neuroendocrine) carcinoma, L: undifferentiated carcinoma, Outline other metastatic tumours

The effects of radiation and chemotherapeutic agents on benign and malignant cells

Urinary tract: Collection techniques,

Cytological changes that occur with different inflammatory processes, including those associated with pathogens (esp. Schistosoma haematobium) Casts (e.g. hyaline, granular, cellular) and pathologically significant crystals. Potential sources of diagnostic error in evaluating urinary tract specimens including ileal bladder urine, lithiasis, malakoplakia, etc Malignancies of kidney and urinary tract: (urine/ FNAB): Epithelial tumours of renal pelvis, ureter and urinary bladder: Transitional cell carcinoma. Adenocarcinoma, Squamous carcinoma, Renal cell carcinoma, Wilms' tumour, Other, Metastases.

Effects of radiation and chemotherapeutic agents on benign/ malignant cells, transplant rejection. atypia and its causes, including lithiasis and malakoplakia. latrogenic changes (incl. ileal conduits) and potential pitfalls. Transplant rejection changes.

Central nervous system: Anatomy of brain and spinal cord Macroscopic presentation and significance, fixation, preparatory techniques. "Normal" cells (shunt picture). Meningitis: Bacterial, Viral, TB, Cryptococcal; Parasites. Primary tumours of the CNS; Neural crest tumours; Lymphoma/ leukaemia, midline tumours and miscellaneous 1º tumours, metastatic malignancy.

Gastro intestinal tract

Anatomy of brain and spinal cord. Macroscopic	_
presentation and significance, fixation,	
preparatory techniques. "Normal" cells	
(shunt picture). Meningitis: Bacterial,	
Viral, TB, Cryptococcal; Parasites	
Primary tumours of the CNS; Neural crest	
tumours; Lymphoma/ leukaemia.	
Miscellaneous 10 tumours.	
Metastatic malignancy	

### CLINICAL LABORATORY

#### PRACTICE I

#### Clinical Chemistry

Specimen / chemical safety procedures.

Quality control and workflow.

Laboratory calculations and preparation of

Description of the automated instrument.

Compulsory analytes: Sodium, potassium, chloride, total C02, urea, creatinine and glucose.

All laboratory tests / profiles in chemical pathology.

Selection of the following topics: -

Atomic absorption

Blood gases

Chromatography

Drugs Electrophoresis

**Endocrinology** 

Nephelometry

Urinalysis

#### **Medical Microbiology**

Biosafety protocols applicable to the Microbiology laboratory.

Explain the principles of automated instruments used in the laboratory (where applicable).

Process the following specimens in the laboratory:

Faeces

Swabs and Pus

CSF

Sputum

Urine

(Range Statement: Includes staining, microscopy, culture, antibiotic susceptibility and identification of organism/s).

Culture media preparation

(Range Statement: Basic principles of selective, enriched and differential media including antibiotic containing media).

Quality assurance systems.

#### Virology

Safety

Processing of viral specimens:

Culture and identify viruses in specimens

Media preparation and cell cultures

Serology (HIV, Hepatitis other)

PCR

#### **Blood Transfusion discipline**

Donor selection

ABO and Rh Crossmatching ABO and Rh blood typing

#### Cytology

Set up microscope incl. Köhler illumination Female genital tract

Inflammation; Benign proliferative reactions

Reactive cellular changes; Microorganisms/ agents of infection

Squamous abnormalities: ASCUS, LSIL, HSIL, SCC

Average mark obtained from discipline based assessments 60%

30% Portfolio 10% Learning logs

Glandular abnormalities: AGUS (outline), adenocarcinomas

Urinary tract

Normal, Agents of infection (esp Schistosoma)

Malignancy: transitional cell carcinoma, squamous ca, adenocarcinoma

Respiratory tract

Normal; Non-cellular findings (incl. ferruginous bodies); Agents of infection

Inflammation (incl. asthma); Bronchial metaplasia and hyperplasia;

Malignancy: adenocarcinoma, squamous carcinoma, undifferentiated

Serous effusion

Normal; Inflammatory/ non-malignant disease states:

Malignancy 10 / 20 tumours, incl. carcinoma, lymphoma, melanoma

Serous effusion: prepare and stain two samples (Pap; MGG stain)

Complete assignment on filter preparations independent

#### Histopathology

Embedding; Microtomy; Routine H&E staining and mounting

Trim blocks and cut 8 sections of kidney tissue biopsies for special staining techniques.

Special staining techniques:

PAS; PAS/D; Alcian blue; Verhoeff's; Methanamine silver, Toluidine blue;

Reticulin, Masson's Trichrome Special techniques: Transmission electron

microscope; Immunohistochemistry

Frozen sections Stain two sections: one by rapid H&E method and the other for far

Electron Microscopy.

Molecular laboratory.

#### Haematology

Specimen processing, handling, safety procedures and ethics.

Quality control principles.

Perform tests and techniques, following standard operating procedures.

Interpretation of laboratory results, correlation of FBC with the findings of

the peripheral blood film.

Professional conduct, principles of good laboratory practice including ward visits for BM, finger-prick and/or blood collection

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PRINCIPLES OF	Management Principles ( Planning, leading	
MANAGEMENT	organizing and control, problem	Theory tests (average of all):
MANAGEMENT	identification & solving, decision making,	32%
	communication, negotiation, conflict	Assignments/oral presentation:
	resolution, leadership, motivation)	5%
	Organisational Development	Tutorials, class/homework
	Change Management	3%
	Resource Management	Examination:
	Industrial Relations	60%
	Quality Assurance and Safety including Legislation	00%
RESTORATIVE JUSTICE	Relevance of a restorative approach in the SA	
RESTORATIVE JOSTICE	context.	Lectures
	Aspects of legislation and policy.	20%
	Restorative philosophy and practice in indigenous	Group work
	communities.	10%
	Factors in crime, violence and conflict in modern	Practicum Case studies
	societies.	10%
	The social control window.	Independent study
	Restoration versus retribution.	40%
	Shaming, integration, healing and forgiveness.	Presentations
	The restorative practices continuum.	10%
	Informal and informal restorative conferencing.	
COMMUNITY HEALTH CARE	Transformation of Health systems in South Africa	
AND RESEARCH III	in comparison with other successful	
	third world countries like Brazil	
	Brief overview of project evaluation in	Theory
	communities and identification of and	20%
	evaluation of performance of sector in	Assignment
	which primary problem is embedded	10%
	Continue project development, implementation	Proposal 50%
	and evaluation	
	Communication and consultation to academic	Presesntation 20%
	community	20%
	Communication to receivers of care	
	Communication to high level stakeholders	
PERSONAL AND	In groups of four students, Identify a sustainable	
PROFESSIONAL	community upliftment project	
DEVELOPMENT III	Term I – Formulate a proposal for the project,	
	including funding proposals, project plan	
	and business plan	
	Writing a proposal, a project plan, and a business	
	plan.	Portfolio of evidence: Proposal,
	Terms 2 and 3 – Implement the project and submit	monthly progress
	monthly progress report	reports and Final
	Gimme 5 Units: Environmental Awareness and Professionalism & Work Ethics.	report
	Responsibilities and effects of change from each	
	stage of development: social adjustments.	
	Term 4 – Write a full report on the project,	
	including outcomes and plans to ensure	
	its sustainability	
	Writing a report	
PRINCIPLES OF RESEARCH	- 0	Theory tests (average of all)
		15%
	The use of the library	Journal article
	Referencing	10%
	Plagiarism	Poster
	Writing up of research findings; posters,	10%
	publication, dissertation thesis	Research Proposal
		10%
RESEARCH PROJECT	Statistics reinforce	This module will remain
MODULE A	Literature review	incomplete in Semester
	Research methods	I of the fourth year of

	Research ethics Plagiarism Writing of research report: introduction, literature review and methodology	study. The module is linked to the Research Project Module B offered in Semester 2.
RESEARCH PROJECT MODULE B	Research methods Literature review Writing up of research findings: posters, publication, dissertation thesis	Research project Mod A mark 30% Draft chapters 20% Complete light bound dissertation50%
	General aspects of disease Chromosomal disorders Pathophysiology of the following systems and integrating these with other systems and laboratory results Central nervous system Endocrine system Cardiovascular Respiratory Immunology	No exam, mark contributes to course mark calculation in Module B
INTEGRATED PATHOPHYSIOLOGY MODULE B	Pathophysiology of the following systems and integrating these with other systems and laboratory results Gastrointestinal Renal Blood and bone marrow Reproductive systems Integumentary	Theory test (average of all) 24% Assignemnt/oral presentation 8% Case studies (tuts) 4% Online tuts 4% Examination 60%
LABORATORY MANAGEMENT	Legal and social aspects of Healthcare Resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Relevant legislation pertaining to private practice Laboratory accreditation	Theory tests 24% Oral Presentation 8% Reflective journal 8% Examination 60%
CLINICAL LABORATORY PRACTICE 2: INCLUDES THE FOLLOWING SPECIALISATION OPTIONS FROM I – 10 BELOW (THE STUDENT WILL HAVE TO SELECT ONE OF THESE ADVANCED SPECIALIZATION MODULES AT 52 CREDITS): CLINICAL PATHOLOGY MODULE A	Statutory regulations and ethics Specimen requirements and suitability including	As per the chosen elective below
MODULE A	Specimen requirements and suitability including storage for all laboratory analysis Laboratory equipment (all types of equipment Laboratory reagents Total Quality management; Quality control Personnel (personnel documents and records) Stock control (storage, receipt, procurement, expiry date) Documentation Laboratory safety	

	Tr	ı
	Laboratory related mathematics	
	Molecular biology techniques	
	Special tests and specimens related to the	
	following specific disciplines:	
	Clinical Chemistry	
	Safety and GLP	
	Workflow, collection and processing of routine	
	samples in a Chemical Pathology	
	laboratory.	
	Knowledge of quantitative, semi-qualitative and	
	qualitative tests (automated or manual)	
	for analytes on either blood, serum,	
	plasma, urine (timed and random), CSF,	
	aspirates/ fluids with particular reference	
	to:	
	Reagent, controls and calibrators preparation;	
	Calibration and Q.C procedure;	
	Operation of instrument/ method procedure.	
	Medical Microbiology	
	Specimen collection, transport, processing and	
	disposal of specimen with pathogenic	
	microorganisms	
	Identification of pathogenic microorganisms from	
	clinical specimens.	
	Quality assurance system	
	TB/HIV management system	
	Haematology:	
	The full blood count including all calculations and	
	interpretation of scatter grams; manual	
	and automated cell counts Preparation of all types of smears and the	
	calculation of absolute counts;	
	Collection and handling of blood samples	
	pathogenesis,	
	laboratory diagnosis and interpretation of	
	morphology of peripheral blood and	
	bone marrow smears of normal red cell	
	and red cell disorders	
	Tests used in the diagnosis and monitoring of red	
	cell disorders haemolytic anaemias the	
	pathogenesis, the interpretation and	
	correlation of the tests with the clinical	
	presentation.	
	Basic blood transfusion techniques including blood	
	grouping and direct antiglobulin test	
	(Coombs test).	
CLINICAL PATHOLOGY	Clinical Chemistry	
MODULE B	Workflow, transportation and processing of	
	specialised tests in a Chemical Pathology laboratory.	
	Knowledge of quantitative, semi-qualitative and	Theory tests (average of all):
	qualitative tests (automated or manual) for	15%
	analytes on faeces and amniotic fluid with	Practical tests + workbook
	particular reference to:	30%
	Operation of instrument/ method procedure	Assignment 5%
	Safety and GLP.	5% Examination:
	Madical Microbiology	50%
	Medical Microbiology Infection control	30/6
	Laboratory accreditation and administration Water examination	
	Tracer Charmination	
		- 75 -

	Milk examination	
	Haematology:	
	The full blood count including all calculations and interpretation of scatter grams; manual and automated cell counts  Collection and handling of blood samples	
	pathogenesis, laboratory diagnosis and interpretation of morphology of peripheral blood and bone marrow smears of normal white cell and	
	haematological malignancies Tests used in the diagnosis and monitoring of white cell disorders, the interpretation and correlation of the tests with the clinical presentation.	
	Understanding the current classifications including both WHO and FAB.	
	CD4 counting with all gating strategies Cytochemistry, immunophenotyping (principles, application and interpretation of flow cytochemistry)	
CLINICAL CHEMISTRY 3A	Knowledge of quantitative, semi-qualitative and	
	qualitative tests (automated or manual) for the following analytes on either blood, serum, plasma, urine (timed and random), CSF, aspirates/ fluids, faeces and amniotic fluid with particular	
	reference to: Reagent, controls and calibrators preparation;	
	Calibration and Q.C procedure; Operation of instrument/ method procedure;	
	Sodium, Potassium, Chloride, Bicarbonate (TCO <sub>2</sub> ), Urea, Creatinine, Cystatin C, Uric Acid,	
	Calcium, Ionized Calcium, Magnesium and Inorganic Phosphorous.	
	Glucose, Ketones, Hb A1c (Glycated Haemoglobin), Fructosamine and	
	MAU (Microalbumin). Cholesterol, High Density Lipoprotein (HDL), Low	
	Density Lipoprotein (LDL), Triglyceride,	
	Lipoprotein (a) and Apolipoprotein A&B. Total Protein, Albumin, Globulin, Total Bilirubin,	contribute to course
	Conjugated and Unconjugated Bilirubin, ALP, GGT, AST, ALT and LDH.	mark.
	Amylase, Lipase & Cholinesterase (serum & red cell).	
	CK, CKMB (mass/Activity), Troponin (T/I), Myoglobin, Pro-BNP/ BNP and	
	Homocysteine. Iron Studies: Ferritin, Iron and Transferrin	
	Lactate, Ammonia. Digoxin, Phenytoin, Phenobarbitol,	
	Carbamazapine, Theophylline, Valproic acid, Lithium, Paracetamol, Salicylates,	
	Tricyclic Antidepressants, Cyclosporin, Amikacin, Gentamycin	
	and Vancomycin, Benzodiazepine, Cannabis, Amphetamine, Barbiturate,	
	Cocaine, Methadone, Methaqualone, Opiate and PCP	
	TSH, T3, T4 (Free and Total), Qualitative and Quantitative bHCG, FSH, LH,	

	Estradiol (E2), Growth Hormone,	
	Testosterone, Progesterone,	
	Prolactin, Aldosterone, Cortisol,	
	Gastrin, Histamine, Insulin, Renin,	
	Vitamin B12, Folate, PTH and ACTH	
	PSA, AFP, CEA, CA markers 125, 153 & 199.	
	CRP, Ultra-sensitive CRP, PCT (procalcitonin).	
	IgE, IgM, IgG, IgA, b2 Microglobulin, C3 and C4,	
	Haptoglobins, SACE,	
	Caeruloplasmin.	
	Xylose, Phenylalanine, Ascorbic acid	
	Osmolality	
	Blood Gases and Co-oximetry	
	Neonatal bilirubin	
	Catecholamines, 5HIAA, 17	
	Hydroxycorticosteroids.	
	Total Faecal Fat/ Steotocrit/ Oral Fat Loading Test.	
CLINICAL CHEMISTRY 3B	Knowledge of quantitative, semi-qualitative and	<u> </u>
CENTIONE CHIEF HOTHER 3B	qualitative tests (automated or manual)	
	for the following analytes on either	
	blood, serum, plasma, urine (timed and	
	random), CSF, aspirates/ fluids, faeces	
	and amniotic fluid with particular	
	reference to:	
	Reagent, controls and calibrators preparation;	
	Calibration and Q.C procedure;	
	Operation of instrument/ method procedure;	
	Serum and urine Protein Electrophoresis, IFE /	
	Kappa and Lambda free light chains.	
	Urine bHCG and Dry Chemistry (dipstick and	
	ketostix).	
	Faecal & urine reducing substances,	
	Porphobilinogen,	
	Porphyrin.	TI (
	Occult Blood/ Faecal Haemoglobin/ Colon	Theory tests (average of all):
	Albumin.	15%
	Calculus analysis	Practical tests + workbook
	Knowledge of the following laboratory function	30%
	tests or profiles with reference to:	Assignment
	Association/ relevanc to the specific organ,	5%
	Association/ correlation between the tests,	Examination:
	The significance and interpretation of abnormal	50%
	results,	
	Procedure when results do not concur with	
	clinical picture	
	Renal: Sodium, Potassium, Urea and Creatinine	
	including Creatinine Clearance, pH and	
	Base Excess.	
	Liver: ALT, AST, GGT, ALP, LDH, Total Protein,	
	Total and Conjugated Bilirubin.	
	Cardiac: CK, CKMB, Troponin and Myoglobin.	
	Lungs: pH, PCO2, PO2, TCO2 and O <sub>2</sub> Saturation;	
	Actual and Standard Bicarbonate, and	
	Base excess.	
	Thyroid: TSH, Free T3 & T4.	
	Pancreas: Amylase (Total and Pancreatic), Lipase.	
	Toxicology: Organophosphate and Salicylate	
	poisoning.	
	Menopausal Screen: LH, FSH and E2 (Estradial)	
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MEDICAL MICROPIOLOGY		
MEDICAL MICROBIOLOGY 3A	Specimen collection, transport, processing and disposal of specimen with rare / unusual microorganisms  Identification of rare / unusual microorganisms	
	from clinical specimens. TB/HIV management system	
	Genotyping characterisation of microorganisms	
MEDICAL MICROBIOLOGY		Theory tests (average of all):
3B		15%
	Infection control and epidemiology Laboratory accreditation and administration	Practical tests + workbook 20%
	Quality management system	Assignment
	Public Health	5%
		Examination: 50%
CYTOLOGY 3A	Anatomy, histology, cytology, applications and techniques, benign lesions and malignant	30%
	lesions from the following sites:	
	breast and nipple secretions, thyroid, lymph nodes, salivary glands, liver,	
	pancreas, testes, ovaries, prostate.	
	Principles of specialised sample collection	
	techniques from the sites of the organs listed above including fine needle	
	aspiration biopsies (FNAB).	
	Tests and techniques for the interpretation and	No exam
	distinction between normal and	
	abnormal cytology results.  Correlation of results with clinical information.	
	Safety, ethics and quality control principles	
	General diagnostic application of	
	immunocytochemical techniques and molecular biology to cytological samples	
	including PCR as applicable including	
	PCR of HPV and genotyping.	
CYTOLOGY 3B	Anatomy, histology, cytology, applications and techniques, benign lesions and malignant	
	lesions from the following sites:	
	Rare Tumours of the female genital tract (Clear	
	cell carcinoma, Hydatidiform mole; Choriocarcinoma; Adenosquamous	
	carcinoma, Lymphomas; Melanoma;	
	Sarcomas/ Mixed Mesodermal Tumours,	Theory tests (average of all):
	Extrauterine malignancies (ovary/ vulva); Metastatic tumours).	24%
	Principles of specialised sample collection	Practical tests
	techniques from the sites of the organs	20% Practical reports
	listed above including fine needle aspiration biopsies (FNAB).	2%
	Tests and techniques for the interpretation and	Assignments/oral presentation:
	distinction between normal and	2% Tutorials, class/homework
	abnormal cytology results.	2%
	Correlation of results with clinical information. Safety, ethics and quality control principles.	Examination:
	Treatment of pre-malignant gynaecologic lesions	50%
	and cytologic effects of radiation and	
	chemotherapy. General diagnostic application of	
	immunocytochemical techniques and	
	molecular biology to cytological samples	
	including PCR as applicable including PCR of HPV and genotyping.	
HAEMATOLOGY 3A	Routine and specialised haematology investigations:	
	1	l

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	the full blood count including all calculations and interpretation of scatter	
	grams; manual and automated	
	reticulocyte counts; differential counts	
	including the preparation of all types of	
	smears and the calculation of absolute	
	counts; erythrocyte sedimentation rate;	
	collection and handling of blood samples;	
	CD4 counting with all gating strategies.	
	Pathogenesis, laboratory diagnosis and	
	interpretation of morphology of smears	
	of peripheral blood and bone marrow of	
	normal; all anaemias; inclusion bodies in	
	red cells; blood parasites; haemolysis and	
	haemolytic anaemias.	
	Basic blood transfusion techniques including blood	
	grouping and direct antiglobulin test	
	(Coombs test).	
	Good laboratory practice including laboratory	
	safety and ethics	
HAEMATOLOGY 3B	Routine and specialised haematology investigations:	
	the full blood count including all	
	calculations and interpretation of scatter	
	grams; differential counts and the	
	calculation of absolute counts; CD4	
	counting with all gating strategies.	
	Pathogenesis, laboratory diagnosis and	
	interpretation of morphology of smears	
	of peripheral blood and bone marrow of	
	normal; benign white cell disorders;	
	myeloproliferative disorders;	
	myelodysplasia; lymphoproliferative	
	disorders; acute leukaemias; platelet	
	disorders; inclusion bodies in white cells;	
	the effects of HIV on blood smears and	Theory tests (average of all):
	the theoretical knowledge of bone	24%
	marrow features of disorders;	Practical tests
	tests used in the diagnosis and monitoring of	20%
	haemostatic disorders including	Practical reports
	thrombosis and anticoagulant therapy;	2%
	vascular disorders; factor inhibitors;	Assignments/oral presentation:
	theoretical knowledge of haemophilia	2%
	factor V Leiden and other inherited	Tutorials, class/homework
	thrombophilia disorders and PK assay.	2%
	The pathogenesis and laboratory diagnosis of all	Examination:
	haematological malignancies, the	50%
	interpretation and correlation of the	
	tests with the clinical presentation,	
	understanding the current classifications	
	including both WHO and FAB including	
	cytochemistry, immunophenotyping	
	(principles, application and interpretation	
	of flow cytochemistry), principle of	
	ISHAGE gating strategy of the	
	enumeration of CD34+ stem cells,	
	cytogenetic techniques, FISH and	
	molecular diagnostic techniques in	
	haematopathology.	
	Good laboratory practice including laboratory	
	safety and ethics	
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HISTOPATHOLOGY 2A	Embedding of various tissue biopsies according	
	to their structural features.	
	Microtomy – thorough knowledge of	
	microtomes and microtome knives.	
	Able to section various tissue biopsies and	
	recognise cutting artefacts and	
	employ corrective measures.	
	Frozen sections – assist in the diagnosis of	
	urgent biopsies that require	
	the use of a cryostat to produce frozen sections.	
	Staining of specific elements – deduce which	
	stain to use for a specific	
	component / structure. Recognise staining	
	artefacts and use corrective	
	measures. 'Trouble-shoot' out of the ordinary	
	staining reactions.	
	Histology of tissues – Identify and describe the	
	tissue types as well as the	
	structure of each organ system. Identify the	
	structures specific to each	
LUCTORATUO: CCCCC	organ or system.	
HISTOPATHOLOGY 2B	Molecular Biology – have a thorough knowledge	
	of the tests required in	
	Molecular biology to diagnose tumours and	
	bacteria.	
	Knowledge of in situ hybridisation (DISH)	
	Enzyme histochemistry – Simultaneous	Theory tests (average of all):
	capture, post-incubation coupling,	24%
	self coloured substrate and intramolecular	Practical tests
		20%
	rearrangement.	Practical reports
	Metal precipitation for enzyme detection.	2%
	Immunocytochemistry – able to distinguish	Assignments/oral presentation:
	between the various	
	antibodies used to aid in the diagnosis of	2%
	complicated cases that cannot be	Tutorials, class/homework
	assessed with special staining procedures.	2%
	Electron microscopy – fixation and processing	Examination:
		50%
	of specimens for analyses	
	under an electron microscope. Recognise	
	ultrastructural organelles and	
	components of the cells using an electron	
	microscope.	
<b>IMMUNOHAEMATOLOGY 2A</b>	Ethics	
	Health and Safety	
	Transfusion transmitted diseases	
	Blood donation	
	Blood Processing and component therapy	
	Donation testing	
	Storage and issue of blood and blood products	
	Blood cold chain	
	Clinical indications for the use of blood and blood	
	products	
	Introduction to risks and benefits associated with	
	transfusion.	
	Introduction to the haemolytic disease of the	
	foetus and new-born (HDFN)	
	Haemovigilance and biovigilance	
	Apheresis.	
	Clinical significance of blood group system antigens	
	and antibodies.	
	Basic serological techniques	
	Causes of false results in laboratory testing	
	Antigen antibody reactions in transfusion testing	
	Blood group reaction patterns and interpretation	
	2.002 61 out 1 cacaon patterns and interpretation	

	Selection of blood for crossmatch	
	Compatibility and transfusion testing.	
	Quality management systems.	
IMMUNOHAEMATOLOGY 2B	Risks and benefits associated with transfusion.	
	Haemolytic disease of the foetus and new-born (HDFN)	Theory tests (average of all): 24%
	Reagent preparation and standardization	Practical tests
	Paternity testing	20%
	HLA testing	Practical reports
	Transfusion reaction investigations	2%
	Antenatal Investigations	Assignments/oral presentation:
	Postnatal (Cord and Maternal) Cases	2%
	Transfusion reaction investigations	Tutorials, class/homework
	Antenatal Investigations	2%
	Postnatal (Cord and Maternal) Cases	Examination:
	Quality management systems.	50%

# 16.2.1 SUBJECT CONTENT: ND: CLINICAL TECHNOLOGY

# NB: Students to read this section in conjunction with the relevant Student guides

Module Name	Learning Content	ASSESSMENT
		The CONTINUOUS ASSESSMENT
FOUNDATION PHYSICS	Basic Mathematics, vectors, Problem solving	mark shall be made up of
(FPYCI0I)	skills in Physics, Conceptual physics	Theory tests: 60%
		Practical tests: 40%
	Introduction to biomedical instrumentation,	The CONTINUOUS ASSESSMENT
FOUNDATION BIOMEDICAL	Medical terminology and physiological	mark shall be made up of
APPARATUS	measurements, Bio-signals and noise,	Theory tests 60%
(FBAPI0I)	Bio-medical electronics — Analog and digital, and SI metric units and	Practical tests 30%
	equivalencies.	Assignment 10%
	Introduction to specialist categories, Infection	
	control, Sterilisation and disinfection	
	techniques, Medical and surgical	
INTRODUCTION TO	asepsis, Communicable disease patient	Theory tests 50%
CLINICAL	control, Laboratory techniques	Practical tests 30%
TECHNOLOGY	(microscopes, incubators,	Assignments 20%
(ICLTI0I)	refrigerators and autoclaves), Safety,	
	and Language practices and	
	conventions	
	Introduction to inflammation, Diseases caused	
	by inflammation and associated	
FOUNDATION ORGANS &	changes to tissue architecture,	The CONTINUOUS ASSESSMENT
SYSTEMS	Introduction to genetics and diseases,	mark shall be made up of
PATHOPHYSIOLOGY	Introduction to compensatory	Theory tests 70%
(FOSPI0I)	mechanisms related to pathogenesis,	Assignments 30%
	and Introduction to cell injury and cell	
	death	
	Introduction, Nervous system, Endocrine	TI T : 200/
DUNGLOLO GIV L (DGLIGG)	system, Cardiovascular system,	Theory Tests 30%
PHYSIOLOGY I (PSI102)	Immunology	Practical Tests 10%
	Respiratory system, Gastrointestinal system, Renal system, Reproductive system	Examination Mark 60%
	Kenai system, Kepi oductive system	Theory Tests 20%
		Practical Work 16%
	Introduction to Anatomy, Thorax, Abdomen	Attendance 4%
ANATOMY I (ANAYI0I)	and Pelvis, Limbs, Neuroanatomy,	Examination Mark 60%
	Head and Neck	PAPER I: Theory (75% of Exam Mark)
		and
		PAPER II: Spotter (25% of Exam Mark).
	Atomic structure, Periodic table, Molecular	Assessment Plan
CHEMISTRY (CHEMI0I)	elements and compounds	Theory tests 20%
(311211101)	Composition and stoichiometry, Amines and	Practical tests 20%
	amides	Examination 60%
	Introduction to computing, Hardware, software,	The CONTINUOUS ASSESSMENT
COMPUTER APPLICATIONS	communication Microsoft Word,	mark shall be made up of
I(CAPPIOI)	Excel & PowerPoint (Beginner to	Theory tests 20% Practical tests 70%
	intermediate)	Practical tests 70% Assignment 10%
	Introduction & Mathematical Concepts,	Ususilinent 10%
	Kinematics in One Dimension, Forces	
	and Newton's Laws of Motion	
	Dynamics of Uniform Circular Motion, Work	Theory Tests 26%
PHYSICS I (PYSC105)	and Energy, Rotational Dynamics,	Practical test 10%
111131031 (1130103)	Fluids Heat and the transfer of heat.	Practical book 4%
	Simple Harmonic Motion and	Examination 60%
	Elasticity, Waves and Sound, Electric	
	Circuits	
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	The Deflection of Links N4:	ı	
	The Reflection of Light: Mirrors, Lenses and Optical Instruments		
	Quadratics, Exponents, Logarithms, Graphs,		
	Equations of a straight line,		
	Conversion of experimental data to		
CALCULATIONS &	linear form, Linear programming,	Theory tests	40%
STATISTICS (CSTAI0)	Collection & presentation of data,	Examination	60%
•	Sampling techniques, Measures of		
	tendency / dispersion for raw &		
	grouped data, The normal curve		
	The Nervous System inclusive of the Central &		
	Peripheral Nervous System and		
	Sensory Physiology		
	The Cardiovascular System including Blood		
	Vessels Hemodynamics		
	The Respiratory System including Physical	T. T.	200/
ANATOMY AND PHYSIOLOGY	Aspects and Mechanics of Ventilation	Theory Tests	30% 10%
2 (ANAPH202)	and Acid-Base Balance	Practical Tests Examination Mark	60%
	The Urinary System inclusive of Urine Production and Renal Control of	⊾∧aiiiiiauOii i`lai K	JU/0
	Electrolyte and Acid-Base Balance		
	The Reproductive System inclusive of the		
	endocrine regulation of both the male		
	and females systems as well as		
	fertilization, pregnancy and parturition		
	Diseases of Immunity, Fluid and haemodynamic		
	derangements, Nutritional disorders,		
	Systemic diseases, and Infectious		
ORGAN AND SYSTEM	diseases		
PATHOPHYSIOLOGY 2	Introductory Concepts with reference to the	Theory Tests - 40%	20%
(OSPP201)	following systems:	Examination Mark	60%
	Respiratory system, Circulatory system, Urinary		
	system, Digestive system, Nervous system and sense organs, Endocrine		
	system, Reproductive system		
	General Aspects of Drug Therapy,		
	Pharmacokinetics and		
	Pharmacodynamics, Administration of		
	drugs to patients, Adverse effects of		
	drugs, Drugs affecting the autonomic,		
	somatic and sensory nervous system,		
	Drugs affecting the central nervous		
PHARMACOLOGY II	system, Analgesics and anti-	Theory Tests	40%
(PHAR201)	inflammatory drugs, Antihistamines,	Examination Mark	60%
` ′	Hormones and hormone antagonists,		
	Antimicrobial and other anti-infective drugs, Cardiovascular drugs, Drugs		
	affecting the haemopoietic system,		
	Drugs that affect the respiratory		
	system, Drugs that affect the digestive		
	tract, and Poisoning and drug		
	treatment in emergencies		
	Introduction to Biomedical		
	Instrumentation Systems		
	Biometrics, Introduction to the Man-Instrument		
	System and Problems Encountered in		
BIOMEDICAL APPARATUS	Measuring a Living System	Theory tests - 30%	26%
AND PROCEDURES II	Basic Transducer Principle	Practical tests – 10%	14%
(BAPO201)	The Transducer and Transducer Principle, Active Transducers. Passive	Examination - 60%	60%
	Active Transducers, Passive Transducers and Transducer for		
	Biomedical Applications		
	Electrodes		
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	Terror to the state of	
	Electrodes Theory, Bio-potential Electrodes,	
	Biochemical Transducers and Blood gas analyser	
	Overview Of Biomedical	
	Instrumentation Systems for the	
	following:	
	Cardiology, Respiratory System, Cardiovascular	
	Perfusion, Neurophysiology, Renal	
	System and Reproductive Biology	
	Personality, learning, memory and	
	adjustivebehaviour	
	Basic Principles of human development and the	
	biological basis of behaviour	
	Attachment theory and psychoanalytic concepts	
	of development	
	Psychological, cognitive and social learning	Theory tests 24%
PSYCHODYNAMICS II	theories of development	Assignments 16%
(PYDNI0I)	Psychological, cognitive and social	Examination 60%
	learning theories of development.	
	Emotions, motivation and perception	
	Legal and ethical responsibilities, patient's right	
	charter, Batho Pele principle, National	
	Health Act and Health Professions	
	Act, 1974.	
	Electrocardiography, Exercise stress testing,	The CONTINUOUS ASSESSMENT
	Arrhythmia monitoring, Cardiac	
CARDIOLOGY: BIOMEDICAL	catheterization, Pacemakers,	mark shall be made up of Theory test
	Echocardiography, Intra-aortic balloon	70%
APPARATUS 3 (CPA301)	pump, Intra	Assignments
	vascular ultrasound system, Defibrillator, Blood	30%
	gas analyzer, Electrical Safety	30%
	Electrocardiography, Exercise stress testing,	
	Arrhythmia monitoring, Cardiac	The CONTINUOUS ASSESSMENT
CARDIOLOGY: CLINICAL	catheterization, Pacemakers,	mark shall be made up of
PRACTICE 3	Echocardiography, Intra-aortic balloon	Theory
(CACP310)	pump, Intra vascular ultrasound	test 70%
	system, Defibrillator	Assignments 30%
	Blood gas analyzer, Electrical Safety	
	Left and right heart catheterization; Coronary	
	angiography;	TI CONTINUINO IS ASSESSMENT
CARDIOLOGY: CLINICAL	Percutaneous coronary intervention;	The CONTINUOUS ASSESSMENT
TECHNOLOGY	Pacemakers Intra-aortic balloon pump;	
PRACTICE 3	Intravascular ultrasound;	Proficiency based practical
(CCTP310)	Defibrillation; Exercise stress testing;	tests 80%
, , ,	Holter monitoring; Head-up tilt test;	Process portfolio 20%
	Pacemaker check-ups; Programming of pacemakers; Echocardiography;	
	Embryology of cardiovascular system, Anatomy	
	and physiology of the heart, Anatomy	
	and physiology of the lungs	
	Oxygenators, Gas exchange, Heat exchangers,	
	Blood gas analyser, Arterial and	
CARDIOVASCULAR	venous cannulae, Coagulation	The CONTINUOUS ASSESSMENT
PERFUSION:	Anatomy and physiology of the kidney,	mark shall be made up of
BIOMEDICAL	Ultrasonic scanning, Blood pressure	Theory
APPARATUS 3	monitoring equipments, Pumps	test 70%
(CCBA301)	Cardiotomy reservoir, Cell saver,	Assignments 30%
(222.301)	Filters, Cardioplegia,	30/0
	Thermoregulators, Ultrafiltration,	
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1	Electrocardiography	
	Electrocardiography Transesophageal echocardiography, Pacemakers.	
	Transesophageal echocardiography, Pacemakers, Pulse oximeter	
CARDIOVASCULAR	Transesophageal echocardiography, Pacemakers,	The CONTINUOUS ASSESSMENT

DEBELISION: CLINICAL	Congulation discussions Effects of	mant shall be made f
PERFUSION: CLINICAL PRACTICE 3 (CCC301)	Coagulation disorders, Effects of oxygenatorsConstrains on rate of heat	mark shall be made up of Theory test 70%
TRACTICES (CCCSVI)	transfer, Functions of CPB, Renal	Assignments 30%
	Failure, Cannulation	
	Blood pressure measurements, Pumps, Heat	
	exchangers, Venting, Ultrafiltration	
	Cardiovascular disorders, Myocardial injuries, Anticoagulation, Electrocardiography	
	Hemodynamic monitoring, Thermoregulation,	
	Cardioplegia, Neurological monitoring	
	Blood gas analyses, Diuretics,	
	benzodiazepine, antiarrhythmics and	
	inotropes	
	Calculation of blood flow rate, selection of bypass circuitry and cannulae Aseptic	
	setting-up of bypass circuitry, priming,	
	and debubbling	
	Calibration and zeroing of pressure transducers	The CONTINUOUS ASSESSMENT
CARDIOVASCULAR	and troubleshooting	mark shall be made up of
PERFUSION: CLINICAL	Placement of reliable and rapidly sensing safety devices and monitors	Theory test 70%
TECHNOLOGY	Monitoring of urinary output	Assignments 30%
PRACTICE 3 (CTPR301)	Analysis of blood gas and electrolytes	Proficiency based practical tests 80% Process portfolio 20%
	Monitoring of anticoagulation	1 Tocess por dollo 20%
	Supervised conduct of cardiopulmonary bypass procedure	
	Monitoring of electrocardiography and	
	hemodynamic parameters	
	Cardiovascular anatomy & physiology	
	Blood Pressure monitoring equipments, Pulse	
	oximeter& co-oximeter, Venous flow measurement	
	Electrocardiography, Cardioversion and	
	defibrillation, Blood flow meters	
	Respiratory system anatomy and	The CONTINUOUS ASSESSMENT
CRITICAL CARE: BIOMEDICAL	physiology, Respiratory therapy	mark shall be made up of
APPARATUS 3	equipments Gastrointestinal tract anatomy and physiology	Theory test 70% Assignments 30%
(NEAP301)	History of anaesthesia ,Anaesthetic equipment,	Theory test 70%
	Drugs used in anaesthesia	Assignments 30%
	Oxygen sensors, Medical gas cylinders and their	
	associated components Thermo-	
	regulatory device, Neurological disorders	
	Hematological measurements including activated	
	clotting time [ACT], Infections	
	Topics covered: Blood Pressure monitoring equipments, Pulse	
	oximeter& co-oximeter, Venous flow	
	measurement	
	Cardiovascular disorders, Acute renal failure,	
	Electrocardiography, Cardioversion	
	and defibrillation	The CONTINUOUS ASSESSMENT
CRITICAL CARE: CLINICAL	Blood flow meters, Respiratory therapy equipments, Respiratory disorders,	mark shall be made up of
PRACTICE 3 (NCLI301)	GIT disorders, Endocrine disorders	Theory test 70%
	History of anaesthesia ,Anaesthetic equipment,	Assignments 30%
	Drugs used in anaesthesia	
	Oxygen sensors, Medical gas cylinders and their associated components	
	Thermo-regulatory device, Neurological	
	disorders	
	Hematological measurements including activated	
	clotting time [ACT], Infections	

CRITICAL CARE: CLINICAL TECHNOLOGY PRACTICE 3 (NCTP301)	12 Lead ECG; Measurement of hemodynamic parameters i.e. BP, Pulse, and RR; Blood gas analysis; Patient care before, during and after the procedure; Thermoregulation Patient transport, oxygen therapy, pulse oximetry and capnography. Prepare anaesthetic and ventilation equipment Effectively assist with bronchoscopy, performance of CPR and during anaesthesia. Intubation and intravenous cannulation. Measure an interpret ACT, glucose, Hct, ESR and SG; Maintenance of the prescribed theatre and ICU equipments.	The CONTINUOUS ASSESSMENT mark shall be made up of Proficiency based practical tests 80% Process portfolio 20%
NEPHROLOGY: BIOMEDICAL APPARATUS 3 (NBAMA301)	History of Dialysis, Principles of Dialysis, Sterility and safety, Dialysis Apparatus, Dialysis Reprocessing Water Treatment, Dialysis Facility Design	The CONTINUOUS ASSESSMENT mark shall be made up of Theory test 70% Assignments 30%
NEPHROLOGY: CLINICAL PRACTICE 3 (NCLP301)	Anatomy & Physiology of the Excretory system Pathophysiology of Renal Disease Blood result analysis & Clinical Invasive and Non-invasive investigation Initiation of Dialysis, Patient observation and Cardio-Pulmonary Resuscitation Anticoagulation, Vascular Access, Peritoneal Dialysis, Hypertension, Diabetis Mellitus Complications during dialysis Drugs used in Dialysis and Transplantation Blood Transfusions and Universal Precautions, Haemoperfusion, Plasmapheresis Continuous Renal Replacement Therapies, Acute and Chronic Dialysis Prescription Nutrition, Pediatric Dialysis	The CONTINUOUS ASSESSMENT mark shall be made up of Theory test 70% Assignments 30%
NEPHROLOGY: CLINICAL TECHNOLOGY PRACTICE 3 (NTPR301)	Observe patient's vital signs [i.e. heart rate, blood pressure, temperature]; physical appearance of a patient and interpretation of blood results.  Apply aseptic techniques and follow safety procedures.  Set up disposables / equipment for following procedures:- Chronic Hemodialysis, Acute Hemodialysis, Continuous therapies, Apheresis, Haemoperfusion  Paediatric procedures.	The CONTINUOUS ASSESSMENT mark shall be made up of Proficiency based practical tests 80% Process portfolio 20%
NEUROPHYSIOLOGY: BIOMEDICAL APPARATUS 3 (FBAP301)	Electroencephalography Modes of Operation of an EEG Components: Selection of recording systems, Pre and main amplifiers, Simulators, Electrode Terminals, Ohmeter Types of Electrode, Sensors and Cables, Control Functions effect and Calibrations. Preparation, use and maintenance  Electromyography and Nerve Conduction Studies Principle utilised in EMG/ENG Recordings. Modes of Operation of EMG/ENG components:	The CONTINUOUS ASSESSMENT mark shall be made up of Theory test 70% Assignments 30%

	Composition, Accessories, Power supply, Earth; Display and Recording Systems, Control functions, effect and Calibration. Audio Monitor, Signal Delay and Storage unit, Theory of a Strain Gauge Amplifier.	
	Evoked Potential Systems  Modes of operation of Evoked Potential Recording systems component: Pre and main Amplifiers, Recording and Display systems, Stimulators, Electrode Terminals Earth (Patient as well as equipment), Control Functions effect and Calibration Averager and other Computer facilities, Memory Storage Facilities, Cursors.	
	TranscranialDopplers  Mode of operation, Recording and Display systems, Probes, Hydrocephalus and SAH	
	Polysomnography Instrumentation Principle of Polysomnography, Modes of Operation of Polysomnograph components: Recording Systems, Pre and Main Amplifiers. Electrode Terminals, Earth (Patient as well as equipment) Electrodes, Sensors and Cables, Modules for Recording of Additional Parameters.	
	Epilepsy Monitoring	
NEUROPHYSIOLOGY: CLINICAL PRACTICE 3 (PCTP301)	Principles of Epilepsy monitoring: Recording Electroencephalography, Electromyography And Nerve Conduction Studies, Evoked Potential Systems, Transcranial Dopplers, Polysomnography Instrumentation and Epilepsy Monitoring	The CONTINUOUS ASSESSMENT mark shall be made up of Theory test 70% Assignments 30%
NEUROPHYSIOLOGY: CLINICAL TECHNOLOGY PRACTICE 3 (PCTP301)	Perform Electroencephalography Perform Nerve Conduction Studies Perform Evoked Potential Testing Perform Trans-cranial Dopplers Assist in Sleep studies and In Long Term Epilepsy Monitoring Perform Polysomnography Practice electrical and laboratory safety	The CONTINUOUS ASSESSMENT mark shall be made up of Proficiency based practical tests 80% Process portfolio 20%
PULMONOLOGY: BIOMEDICAL APPARATUS 3 (PBAP301)	Anatomy and physiology of the airways Heart and lung circulation Basic lung function equipment Spirometer, Flow measuring devices,	The CONTINUOUS ASSESSMENT mark shall be made up of Theory test 70% Assignments 30%
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PULMONOLOGY: CLINICAL PRACTICE 3 (PCLP301)	Lung injury, Respiratory diseases, Infectious diseases, Immunological disorders, Cardiovascular disorders, Pulmonary function laboratory safety, Pulmonary function measurement, Lung volume evaluation  Ventilation tests and artificial ventilation, Basic flow-volume curves, Gas distribution evaluations  Diffusion tests, Bronchial provocation, Bronchodilators, Diagnostic bronchoscopy, Allergy investigations	The CONTINUOUS ASSESSMENT mark shall be made up of Theory test 70% Assignments 30%
PULMONOLOGY: CLINICAL TECHNOLOGY PRACTICE 3 (PTPR301)	Spirometry tests, Plethysmography and a diffusion measurement; Histamine challenge; Pulse oximetry& blood gas analysis; MIP and MEP; Vital signs monitoring; Assist with bronchoscopy.	The CONTINUOUS ASSESSMENT mark shall be made up of Proficiency based practical tests 80% Process portfolio 20%
REPRODUCTIVE BIOLOGY: BIOMEDICAL APPARATUS 3 (RBAP301)	Applied Embryology, Pituitary and Hypothalamus, Anatomy& Physiology of Male and Female Reproductive Organs & System, Spermatogenesis, Oogenesis, Physiology of Cervical mucus Apparatus for semen analysis, Preparation of media, ART Laboratory Equipment, Aspiration, Identification, Evaluation and Manipulation of Ova, Fertilization and transfer of ova, Embryo transfer and artificial insemination, Cryopreservation of semen, ova, and embryos Reproductive Imaging (Hysterosalphingography) and Contraception	The CONTINUOUS ASSESSMENT mark shall be made up of Theory test 70% Assignments 30%
REPRODUCTIVE BIOLOGY: CLINICAL PRACTICE 3 (RCPR301	Congenital Anomalies of Male and Female Reproductive tract. Pathophysiology of Male and Female Reproductive organs & Systems Semen analysis, Cervical mucus Examinations, Semen (Spermatosoa) - Cervical mucus-interaction tests Extended antispermatosoa antibody tests in semen, cervical mucus and blood serum Sexual transmitted infections and blood borne viruses in ART Identification, judgement and manipulation of ova, Fertilization and transfer of ova and embryos Cryopreservation of semen, ova and embryos, Embryo scoring for transfer/cryopreservation, Infertility and Persistent Pregnancy Failure, Quality Assurance, Risk management and Laboratory organization, and Patient-Technologist-Relationship	The CONTINUOUS ASSESSMENT mark shall be made up of Theory test 70% Assignments 30%
REPRODUCTIVE BIOLOGY: CLINICAL TECHNOLOGY PRACTICE (RTPR301)	Sterility and Washing Procedures, Sperm counts, Preparation of culture media and dishes, Blood/Serum concentration and processing, Diagnostic semen analyses, Oocyte retrieval: Screening and Grading TSE/MSA/PESA aspiration, Testicular Biopsy processing, Removal of granulosa cells,	The CONTINUOUS ASSESSMENT mark shall be made up of Proficiency based practical tests 80% Process portfolio 20%

Fertilization evaluation Embryo transfer in sterile room and at patient, Cryopreservation, Sperm processing for corrective procedures and	
Insemination procedures	

## **16.2.2BTECH CLINICAL TECHNOLOGY**

Module Name	Learning Content	Assessment
	A. Biostatistics	The CONTINUOUS ASSESSMENT
RESEARCH METHODOLOGY (RMDY101)	Statistics: general introduction, Measures of location and dispersion, Ordering of multi-variable data, Probability theory, Probability distributions, Confidence intervals Hypothesis testing, Correlation, The chisquare statistic, Analysis of variance B. Research Methodology The aim of research, Steps in the research process, Measurements of incidence, Study structures in research, Causality; Risk; Bias; Measurement, The research protocol	mark shall be made up of Proposal 50% Assignments 50%
	C. Application Foundations of management, Management theory	The CONTINUOUS ASSESSMENT
PRINCIPLES OF MANAGEMENT (PRMGI0	and perspectives, The complete organisational environment, Social responsibility and ethics,  Plan, Organise, Lead & Control, Quality, productivity and consumer satisfaction	mark shall be made up of Theory test 24% Assignments 16%
	Electroencephalography, Polysomnography,	The CONTINUOUS ASSESSMENT
ADVANCED NEUROPHYSIOLOGIC (ANPT401)	Evoked potentials, and Electromyography/neurography	mark shall be made up of Clinical competency – 50% 10% Assignment – 10% Portfolio 40%
ADVANCED REPRODUCTIVE TRECHNOLOGY (ARPT401)	Micro-manipulation, Cell culturing, Bio-assays, Sperm function tests, Computer assisted sperm motility, Fluorescence microscopy, Electron microscopy, Biochemical separation techniques, Sperm quality controls	mark shall be made up of
ADVANCED PERFUSION TECHNOLOGY (APFT401)	Physiology calculations of flow rates and cannulas, Physiological fluids, Effects of temperature changes, Monitoring pre- intra- post, Cardiac drugs —anaesthetic, Cardioplegia, Perfusion organs, Tissue changes, Blood physiology, Pathology of cardio-pulmonary bypass on different organs, Flow dynamics, Blood conservations, Differential perfusion, and paediatric perfusion	mark shall be made up of Clinical competency – 50% 10% Assignment – 10% Portfolio 40%
ADVANCED CARDIAC TECHNOLOGY (ACDT401	Specialised Echocardiography     Current technological advances, Specialised procedures, Doppler estimation of volume flow, Complex congenital defects, Foetal echocardiography, Extensive ventricular assessment, Pericardial disease, Cardiac tumours and masses, Prosthetic heart valves, and Cardiac transplantation     Mechanisms Of Arrythmogenesis     Disorders of impulse formation, Disorders of impulse conduction, and Combined disorders     Advanced Electrophysiological Studies     Aberrant conduction, Newer approaches in the investigation of sinus-node disorders, Atrioventricular conduction delays and	Clinical competency – 50% 10% Assignment – 10% Portfolio 40%

	blocks burestiessies of technicality	1
	blocks, Investigation of tachycardias,	
	Mechanisms of tachycardias, and Drug	
	studies	
	D. Interventional Management Of	
	Arrythmias	
	E. Cardiac Pharmacology	
	Arrhythmias, Cardiac Failure, and Ischaemic	Į.
	Heart Failure	
	Anatomy of the Renal System, Functions of the	The CONTINUOUS ASSESSMENT
	Kidney, The Three Basic Mechanisms	mark shall be made up of
ADVANCED RENAL	Underlying the Excretory Function Of	Clinical competency –
TECHNOLOGY	The Kidney, Renal Processing Of	50% 10%
(ARNT401)	Individual Substances, Water Balance,	Assignment – 10%
,	Micturition and Renal Function Tests and	
	Abnormalities.	
	All sections to include detail studies on: Equipment,	The CONTINUOUS ASSESSMENT
	Techniques and procedures, Patient	
	evaluation	Clinical competency –
	Evaluation of results obtained:	50% 10%
	Exercise Studies - Cardiopulmonary evaluation,	
	Athletes, Metabolic studies	Portfolio 40%
	Sleep Studies - Sleep Apnoea, Diagnostics, CPAP	10/10/10
	titrations, other respiratory	
	abnormalities during sleep	
	Advanced Body Plethismographic Studies	
ADVANCED DECDIDATORY	—RAW, ITGV, IMP's, MEP's, Compliance	
ADVANCED RESPIRATORY	Control of Ventillation (CO <sub>2</sub> Response) Studies	
TECHNOLOGY	Industrial Respiratory Disease	
(ARST401)	Allergies - Skin testing, Bronchial and other	
	provocation techniques, IgE mediated	
	reactions	
	Clinical trials and procedures	
	Bronchoscopic procedures including laser	
	techniques	
	Nebulisation, and pharmacology of nebulised	
	medications	
	Pulmonary related procedures, with diagnostic	
	radiology, cat scanning	
	Ventilation/perfusion studies with radioactive	
	materials	
		The CONTINUOUS ASSESSMENT
ADVANCED CRITICAL CARE	Ventilation, resuscitation, induction, cell	
TECHNOLOGY	saver and continuous renal replacement	' '
(ACRT401)	therapies (CRRT)	50% 10%
(1011111)		Assignment – 10%
		Portfolio 40%
	Preparation and submission of a research thesis	The CONTINUOUS ASSESSMENT
CLINICAL TECHNOLOGY		mark shall be made up of
RESEARCH PROJECT		Thesis 50%
(CLRPI0I		Presentation – 30%
	İ	Poster – 20%

# 16.2.3. Bachelor of Health Sciences in Clinical Technology (BHCLTI)

Module	Content	Assessment plan
Introduction to Clinical Technology	Introduction and overview of the seven specialist categories in Clinical Technology     Role of the Clinical technologist in each category	Continuous assessment  Oral presentations (20%)  Reflective journal (20%)  Written theory
		assessment (60%)

	3. Laboratory techniques (microscopes, incubators, refrigerators and autoclaves  4. Health care system (clinical health governance structure and Health legislative acts & policy).  5. Organizational structure of the hospital (human resource and sectors)  6. Basic principles of health-care ethics (applied ethics, biomedical ethics, Batho Pele principles)  National Health Act, Basic conditions of Employment, Health Professions Act	
Chemistry		THEORY TESTS
	<ul> <li>introduction to chemistry</li> <li>measurements</li> <li>energy and matter</li> <li>atoms and elements</li> <li>compounds and their bonds</li> <li>chemical reactions and quantities</li> <li>gases</li> <li>solutions</li> <li>acids &amp; bases</li> <li>nuclear radiation</li> <li>alkanes and cycloalkanes</li> <li>unsaturated hydrocarbons</li> <li>organic compounds with oxygen and</li> <li>sulphur</li> <li>carboxylic acid and esters</li> <li>amines and amides</li> </ul>	Two Tests on General Inorganic and Physical Chemistry and Two Tests on Organic Chemistry).  PRACTICAL ASSESSMENT FINAL EXAM MARK  = CM x 0,4 + EM x 0,6
Physics 101	MECHANICS	Continuous Assessment
,	PROPERTIES OF MATTER	70 % of the average of the 2 Theory Tests 30 % of the Practical Mark, where [Practical Mark = 35% practical book + 65% practical test]
Physics 201	<ul><li>thermal physics</li><li>waves &amp; sound</li></ul>	Continuous Assessment
	geometrical optics	70 % of the average of the 2
	electricity& magnetism	Theory Tests 30 % of the Practical Mark,
	<ul><li>radioactivity &amp; radiation</li><li>quantum physics</li></ul>	where
	wave properties of particles	[Practical Mark = 35% practical book + 65% practical test]

Anatomy I		Unit I	Continuous assessment
, maconiy i	0	Introduction	unit I- theory (20%) and
	0	Respiratory Anatomy	practical (15%)
	0	Cardiovascular anatomy	practical (13/6)
	0	Genitourinary Anatomy	unit 2- theory (20%) and
	•	Unit 2	practical (15%)
	-	Neuroanatomy	practical (13/6)
	0	Head and neck	unit 3- practical (15%) and
	0	Head and neck	assignment (15%)
	_	Unit 3	assignment (1976)
	•		Internally moderated
Dhysiology I	0	Limbs	Continous Assessement
Physiology I	•	Anatomy and physiology are defined.	Each of the three units will be
			assessed as follows:
	•	The relationships between	
		anatomy and physiology are	A two hour theory test
	LINIT	explained.	at the end of the
	UNIT I		unit (Minimum of
	•	Cells and tissues,	120 marks)
	•	Integumentary system,	One practical test at the end of the course
	•	Muscular system	end of the course
	•	Skeletal system	
	UNIT 2		
	OINII 2		
	•	Nervous system	
	•	Endocrine system,	
	•	Cardiovascular system,	
	•	Immunity and the Lymphatic	
		system,	
	•	Blood	
	UNIT 3		
	•	Respiratory system,	
	•	Reproductive system	
Pathophysiology I	•	Basic Immunology:	Semester mark calculations:
i actiophysiology i	•	introductory concepts	- Two written theory
	_	Cells of the immune system	assessment (20%
	•	,	each)
	•	Innate and adaptive immune responses (humoural and	- Assignments (Essay 15%;
		cellular)	Presentation 30%)
		Antigen-antibody interactions	- Reflective journaling: (15%)
		Immunological tolerance and	exam=60%; semester mark =
	•	memory	40%]
		Autoimmunity	_
		Basic microbiology	
	_	- Introduction to Medical	
		microbiology (micobacterium	
		bacilli, streptococcus,	
		staphylococcus, HI virus)	
		Infection control, medical and	
		surgical asepsis	
		Communicable disease patient	
		control	
	l .	COTICI OI	

Instrumentation for	1 . 1	Composton manula calquilet:
Instrumentation for Clinical	Introduction to Man- instrumentation systems:	Semester mark calculations: - Two written theory
Technology I	instrumentation systems;  O Biometrics	assessment (20%
recimology i	o Introduction to the Man-	each)
	Instrument System	- Assignments (Essay 15%;
	o Problems Encountered in	Presentation 15%)
	Measuring a Living System	- Practical assessment (30%)
	<ul> <li>Basic physiological parameters;</li> </ul>	- Moderation: Internally
	2.1. Heart rate / pulse rate	moderated.
	<ul> <li>2.2. Blood pressure</li> </ul>	
	2.3. Stroke volume / Cardiac	Final marks:
	output	Course mark 40%
	2.4. Respiratory rate	Exam mark 60%
	• 2.5. Tidal volume / minute	
	volume	
	<ul> <li>Basic Physiological transducers;</li> </ul>	
	o The Transducer and	
	Transducer Principle	
	<ul> <li>Active Transducers</li> </ul>	
	<ul> <li>Passive Transducers</li> </ul>	
	<ul> <li>Electrodes</li> </ul>	
	Electrode theory	
	o Biopotential electrodes	
	o Biochemical electrodes	
	Medical terminology	
Second level	Electrical safety.	
Second level		
Applied Anatomy and	Unit 1: The Cardiovascular System	Continuous assessment:
Physiology	Blood & Heart	A two and half hour test
/=:==6/	Unit 2: The Respiratory Physiology	at the end of a unit
	Functions of the Respiratory System	(including theory and
	Pulmonary Diseases	applied practical
	Unit 3: Nervous system	components).
	Unit 4: Endocrine System	Minimum of 150 marks
	Unit 5: Reproductive systems	of which a minimum
		of 10% will comprise
		the practical
		component.
Clinical Tank I	6	C
Clinical Technology Practice	Setting-up of equipment:	Continuous assessment as follows:
Fractice	Basic haemodynamic	Proficiency assessment (60%)
	monitoring	Hospital Visit Reports (20%)
	Basic Electrophysiological	Presentations (20%)
	procedures:	
	<ul> <li>Other basic diagnostic and therapeutic procedures:</li> </ul>	
	<ul> <li>Spirometry measurement.</li> </ul>	
	<ul> <li>Spirometry measurement.</li> <li>Anthropometric measurement.</li> </ul>	
	<ul> <li>Anthropometric measurement.</li> <li>Activating clotting time testing.</li> </ul>	
	<ul> <li>Activating clotting time testing.</li> <li>Oral and axillary temperature</li> </ul>	
	measurement.	
i		
	<ul> <li>Non- provocative nebulisers.</li> </ul>	

	•	Oxygen therapy (mask and nasal cannula).	
Instrumentation for Clinical Technology II	•	BIOMEDICAL INSTRUMENTATION SYSTEMS FOR CARDIOLOGY  BIOMEDICAL INSTRUMENTATION SYSTEM FOR RESPIRATORY SYSTEM BIOMEDICAL INSTRUMENTATION SYSTEM FOR CRITICAL CARE BIOMEDICAL INSTRUMENTATION FOR CARDIOVASCULAR PERFUSION BIOMEDICAL INSTRUMENTATION SYSTEM FOR NEUROPHYSIOLOGY. BIOMEDICAL INSTRUMENTATION FOR RENAL SYSTEM BIOMEDICAL INSTRUMENTATION FOR RENAL SYSTEM BIOMEDICAL INSTRUMENTATION SYSTEM FOR REPRODUCTIVE BIOLOGY	Examination  Semester mark 40%; exam mark 60 %;  Semester mark calculations: 3 theory tests (60%)  Assignments and presentations (40%)
Clinical Pathophysiolog y I	•	Epidemiology and related medical terminology Overview of Blood disorders Selected Infectious diseases Neoplasia Cardiovascular system Neurological system Respiratory system Pathophysiology of selected disorders of Calcium Metabolism Pathophysiology of selected Hypothalamic and pituitary diseases and overview of Thyroid disease Diabetes Mellitus Liver Disease Selected Pancreatic disorders	Examination Semester 40%; exam mark 60% semester mark calculation: 3 written theory tests (60%) 2 x assignments [presentation and written] (40%) Moderation: Internal according to DUT policies

Basic Pharmacology	<ul> <li>Digestive system and Skin disorders</li> <li>Selected disorders of the Renal system</li> <li>Selected disorders of the male and female Reproductive system</li> <li>This module is divided into 3 Units:</li> </ul>	Assessment will be
	<ul> <li>UNIT I</li> <li>General aspects of drug therapy</li> <li>Pharmacokinetics</li> <li>Pharmacodynamics</li> <li>Administration of drugs to patients</li> <li>Adverse effects of drugs</li> <li>Autonomic, Somatic and Sensory Nervous systems</li> </ul>	continuous.  A two hour theory test at the end of each unit.  Each theory test will be weighted as follows –  Theory test 1 – 30%  Theory test 2 – 35%  Theory test 3 – 35%
	<ul> <li>UNIT 2</li> <li>Antimicrobials and other anti- infectives</li> <li>Drugs affecting the CNS</li> <li>Drugs affecting the CVS</li> <li>Haemopoetic drugs</li> <li>Analgesics and anti- inflammatories</li> </ul>	
	UNIT 3      Hormones and Hormone antagonists     Antihistamines     Respiratory Drugs     GIT Drugs     Poisoning and emergency drug treatment	
Research Methodology	<ul> <li>Research Paradigms         <ul> <li>The 3 basic research paradigms (positivism, interprets and critical theory)</li> </ul> </li> <li>Research study design (Longitudinal, cross-sectional, bi-directional; Quantitative, qualitative, mixed-method; reliability, validity and ethics)</li> <li>Research methods and methodology</li> <li>Sampling methods (observations, questionnaire, interviews, surveys, case studies, laboratory experiments)</li> <li>Data analysis techniques</li> </ul>	Continuous assessment Each assessment has a specific weighting i.e. counts a certain % towards the final mark: Article critique (20%) 2 x assignments (80%)
	(descriptive statistics)	

	•	Introduction to the review of	I
	•	the Literature	
		Referencing styles and	
	•	plagiarism	
Research Methodology	•	The steps and stages in the	Continuous assessment
II		research process.	The final marks:
	•	The research purpose based on	<ul> <li>Submission of a</li> </ul>
		a problem.	research proposal
	•	The literature review	(70%)
	•	Selecting an appropriate	<ul> <li>I x assignment (30%)</li> </ul>
		research design	
	•	Developing an appropriate	Moderation will be conducted
		sampling plan for a hypothetical	in accordance with
		study in terms of feasibility,	DUT rules.
		representativeness and available	
		resources.	
	•	Developing an appropriate data	
	] _	collection plan	
	•	Statistical analysis for the data	
		analysis process.  Ethical issues relating to the	
	•	conduct of research	
Health Care	•	Basic concepts of Healthcare	Continuous assessment
Management I	•	management (managers and	the final mark:
		management)	I written theory test (60%)
	•	Basic principles of Healthcare	, , , , , , , , , , , , , , , , , , , ,
		management (organizational	I x assignment [presentation
		culture, quality management,	and written] (40%)
		time management, Teamwork)	
	•	Basic Healthcare information	
		systems	
		CARDIOLOGY	
Pathophysiology for	•	Congenital Heart disease	Continuous assessment
Cardiology	•	Arrhythmias	The final mark:
	•	Valvular Heart disease	2 written theory tests (60%) 2 x assignments [presentation
	•	Coronary artery disease	and written] (40%)
	•	Pericardial disease	
	•	Hypertension Heart Failure	
	•	Oedema	
		Peripheral vascular disease	
Pharmacology for	•	Understand the application for	Examination
Cardiology	-	the following therapeutic	Examination
		classes: Anti-arrhythmia	Final mark = 40% course mark
		therapy, Anti-anginals,	+ 60% exam mark
		Antihypertensives, Diuretic,	
		Pressins, cardiostimulatories	Course mark calculated as
		and inhibitors, thrombolytics,	follows:
		vasoconstrictors and	2 written theory tests (60%)
		vasodilators	I x assignment [presentation
	•	Understand the	and written] (40%)
		pharmacological applications for	
		the following cardiovascular	
1		disorders:	

	- Ai	T
	Angina	
	Arrhythmia	
	Oedema	
	Heart failure	
	Systemic and pulmonary	
	hypertension	
	Hypotension	
	Myocardial infarction	
Clinical Technology	Perform the following procedures and	Continuous assessment
Practice in	explain the indications, contra- indications, advantages and	The final mark: Continuous Proficiency
Cardiology Ia	indications, advantages and disadvantages or limitations and	Continuous Proficiency Assessment based
	complications of the following	on the application
	procedures:	and performance of
	Exercise stress testing	the procedures or
	<ul> <li>Arrhythmia monitoring (Holter)</li> </ul>	techniques as
	Cardiac catheterization left and	outlined in module
	right heart procedures	content (80%)
	Intra-aortic balloon pumping	` ´
	Single and dual chamber pacing	Compilation of a logbook of
	Basic electrophysiology studies	procedures (20%)
	Echocardiography	
Clinical Technology	Describe the haemodynamics related to	Continuous assessment
Practice in	angiography and	The final mark:
Cardiology Ib	echocardiography for the	Continuous Proficiency
	following conditions:	Assessment based
	<ul> <li>pericardial disease</li> </ul>	on the application
	<ul> <li>Congestive heart failure</li> </ul>	and performance of
	<ul> <li>Coronary artery disease</li> </ul>	the procedures or
	<ul> <li>Valvular heart disease</li> </ul>	techniques as
	<ul> <li>Congenital heart disease</li> </ul>	outlined in module content (80%)
	<ul> <li>Cardiac resynchronization</li> </ul>	Content (80%)
	therapy	Compilation of a logbook of
	Describe the underlying pathophysiology	procedures (20%)
	of symptom production in the	procedures (2070)
	conditions in (2) above. Infection control	
	Cardio-version.	
	Defibrillation.	
	General equipment management.	
	Assist with ICU/Trauma/Theatre clinical	
	procedures.	
	<ul> <li>Physiological data management.</li> </ul>	
Instrumentations and	Electrocardiography Telemetry	Continuous assessment
Techniques for	<ul> <li>Basic terminology relating to</li> </ul>	The final mark:
Clinical	Biomedical instrumentation and	2 written theory tests (60%)
Technology in	transduction	2 x assignments [presentation
Cardiology I	<ul> <li>Instrumentation used and</li> </ul>	and written] (40%)
	procedures for arrhythmia	
	monitoring or	
	termination(non-invasive):	
	<ul> <li>Exercise stress testing laboratory equipment</li> </ul>	
	Holter	
	- Holter	

	•	Internal and external	
Instrumentations and		defibrillation	Continuous assessment
Techniques for	•	Invasive monitoring and diagnostic instrumentation and	The final mark:
Clinical		procedures:	2 written theory tests (60%)
Technology in	١.	Monitoring and blood gas	2 x assignments [presentation
Cardiology Ib	Ĭ	equipment in the cardiac	and written] (40%)
		catheterization laboratory	1 ( 11)
	•	Catheters used and procedures	
		in the cardiac catheterization	
		laboratory on adult patients	
		(diagnostic angiography and	
		intervention, cardiac output,	
		IVUS, IABP, pericardiocentesis,	
		electrophysiology and pacing)	
	•	Resonance and damping;	
	•	Cardiac output measurements	
	•	Blood gas machine	
	•	Coagulation instrumentation;	
	•	Equipment bench testing,	
		diagnostics and quality control;	
	•	Simulators;	
	•	Left ventricular assist devices	
Pathophysiology for		Muses adia Linfo metrican	Continuous assessment
Pathophysiology for Critical Care	•	Myocardial infarction;	The final mark:
Critical Care	•	Heart failure (left & right);	2 written theory tests (60%)
	•	Compensatory mechanisms for a falling CO;	2 x assignments [presentation
		Shock;	and written] (40%)
		Abdominal compartment	,
		syndrome;	
	•	Liver failure;	
	•	Pancreatic failure;	
	•	Coagulopathies, DIC;	
	•	Endocrine disorders;	
	•	COPD, Asthma, Pneumonia	
		and Aspiration;	
	•	Pulmonary embolism,	
		pneumothorax;	
	•	Respiratory failure;	
	•	Gaseous exchange	
		abnormalities;	
	•	ARDS;	
	•	Neurological assessment for	
Pharmacology for		altered levels of consciousness	Examination
Pharmacology for Critical Care	•	Understand the application for	LAAIIIIIAUOII
Ci idicai Care	١.	the following:  Drugs used in Hypertension	Final mark = 40% course mark
	•	and Angina	+ 60% exam mark
	•	Drugs used in Heart failure.	
		Resuscitation drugs	Course mark calculated as
	•	Local Anaesthetics, Anesthetic	follows:
		agents (Inhalational and	2 written theory tests (60%)
		intravenous),	I x assignment [presentation
	•		- 99 -

Clinical Technology Practice in Critical Care la		Drugs acting at Neuromuscular Junction and Autonomic Nervous System. Antibiotics, Antimicrobial, Antifungal and Antiviral Drugs. Understand the pharmacological applications for the following disorders: Myocardial infarction; Heart failure (left & right); Compensatory mechanisms for a falling CO; Shock; Abdominal compartment syndrome; Liver failure; Pancreatic failure; Coagulopathies, DIC; Endocrine disorders; COPD, Asthma, Pneumonia and Aspiration; Pulmonary embolism, pneumothorax; Respiratory failure; Gaseous exchange abnormalities; ARDS; Infection control Quality Control of life Support equipment. Statistical analysis and patient scoring. Blood gas sampling, measurement and interpretation Invasive heamodynamic monitoring procedures. Set up equipment for Intrahospital transportation of critically ill patients, noninvasive heamodynamic monitoring, monitoring of an	Continuous assessment The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)
	•	critically ill patients, non- invasive heamodynamic monitoring, monitoring of an anesthetized patient. Preparation of ICU drugs. Handling of Infusion devices and	procedures (20%)
	•	drugs. Capnography.	
Clinical Technology	•	Assists with bronchoscopy and	Continuous assessment
Practice in		right heart catheterization.	The final mark:
Critical Care Ib		Advanced Cardiac Life Support	Continuous Proficiency
C. R. Car Gar G ID		(ACLS).	Assessment based
		CPR.	on the application
		CI IX.	and performance of
			the procedures or

	1 . 1	4
Instrumentations and Techniques for Clinical	<ul> <li>Intubation, intravenous cannulation, emergency drug therapy.</li> <li>Ventilation therapy: monitoring and resuscitation.</li> <li>Determine blood flow (Doppler).</li> <li>Cardio-version.</li> <li>Defibrillation.</li> <li>Electrolyte determination.</li> <li>General equipment management.</li> <li>Assist with ICU/Trauma/Theatre clinical procedures.</li> <li>Physiological data management.</li> <li>Electrocardiography Telemetry Invasive pressure monitoring equipment;</li> </ul>	techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: 2 written theory tests (60%)
Technology in	• •	2 x assignments [presentation
Critical Care la	<ul><li>Resonance and damping;</li><li>Cardiac output measurements</li></ul>	and written] (40%)
	Blood gas machine	<u>1</u> ( -/•)
	Ventilators and ventilation	
	modes	
	Anesthetic machine and	
	accessories	
	Hemofiltration  The arrange of the second desired.	
	Thermoregulatory devices	
	Coagulation instrumentation;	
	<ul> <li>Arterio- venous flow measurements</li> </ul>	
	Infusion devices     Gas and vapour analysers	
	<ul><li>Gas and vapour analysers</li><li>Transcutanous gas</li></ul>	
	measurements	
	Autologous cell recovery	
	Thromboelastograms	
	Point of care analysers	
	(Glucose, Hb, Bilirubin)	
Instrumentations and	Endoscopes;	Continuous assessment
Techniques for	<ul> <li>Equipment bench testing,</li> </ul>	The final mark:
Clinical	diagnostics and quality control;	2 written theory tests (60%)
Technology in Critical Care Ib	• Simulators;	2 x assignments [presentation and written] (40%)
Critical Care ID	Left ventricular assist devices	and written] (40%)
	Therapeutic gas delivery	
	systems	
	<ul> <li>Peripheral nerve stimulators;</li> <li>Level of consciousness monitors</li> </ul>	
	reset of consciousness monitors	
	NEUROPHYSIOLOGY	
Pathophysiology for	Abnormalities of	Continuous assessment
Neurophysiolo	Consciousness	The final mark:
gy	<ul> <li>Abnormalities of the brain</li> </ul>	2 written theory tests (60%)
		- 101

	_	F-iloney	2 x assignments [presentation
	•	Epilepsy	and written] (40%)
	•	Stroke	and written (40%)
	•	Dementia	
	•	Parkinson	
	•	Multiple Sclerosis	
	•	Encephalopathies	
	•	Meningitis	
	•	Headaches	
	•	Hydrocephalus	
	•	Haemorrhage	
	•	Aneurysm	
	•	Coma	
	•	Brain death	
	0	Abnormalities of Hearing and	
		Vision	
	0	Myasthenia gravis	
	0	Peripheral nerve disorders	
	•	Entrapment neuropathies	
	•	Guillain Barre syndrome/CIDP	
	•	Diabetic and HIV neuropathy	
	•	Brachial plexopathies	
	•	Drug related neuropathies	
	•	Critical illness neuropathy	
	0	Abnormalities of sleep	
	•	General neurological	
		abnormalities	
Pharmacology for	•	Understand the	Examination
Neurophysiolo		pharmacological application for	
gy		the following:	Final mark = 40% course mark
	•	Neurotransmitters	+ 60% exam mark
	•	Blood-brain barrier	
	•	Cholinergic pharmacology	Course mark calculated as
	•	Adrenergic Pharmacology	follows:
	•	Local anaesthetic pharmacology	2 written theory tests (60%)
	•	Understand the	I x assignment [presentation
		pharmacological applications	and written] (40%)
		for the following disorders:	
	•	Abnormalities of consciousness	
	•	Abnormalities of Hearing and	
		Vision	
	•	Myasthenia gravis	
	•	Peripheral nerve disorders	
	•	Abnormalities of sleep	
	•	General neurological	
		abnormalities	
			1

Clinical Technology		Duein manning	Continuous assessment
Practice in		Brain mapping Assist in Electromyography	The final mark:
Neurophysiolo		Nerve conduction studies	Continuous Proficiency
gy la	•	iverve conduction studies	Assessment based
8/			on the application
			and performance of
			the procedures or
			techniques as
			outlined in module
			content (80%)
			Compilation of a logbook of
			procedures (20%)
Clinical Technology	•	Evoked potentials	Continuous assessment
Practice in	•	Polysomnography	The final mark:
Neurophysiolo	•	Long-term epilepsy monitoring	Continuous Proficiency
gy lb		video studies	Assessment based
	•	Memory testing and WADA	on the application and performance of
		testing	the procedures or
			techniques as
			outlined in module
			content (80%)
			(50.00
			Compilation of a logbook of
			procedures (20%)
Instrumentation and	•	ELECTROENCEPHALOGRAP	Continuous assessment
Techniques for		HY	The final mark:
Clinical	•	ELECTROMYOGRAPHY AND	2 written theory tests (60%)
Technology in		NERVE CONDUCTION	2 x assignments [presentation
Neurophysiolo		STUDIES	and written] (40%)
gy la	•	Principle utilised in EMG/ENG	
		Recordings.	
	•	MEDICAL TERMINOLOGY	
	•	ELECTRICAL SAFETY	
Instrumentation and	•	EVOKED POTENTIAL	Continuous assessment
Techniques for		SYSTEMS	The final mark:
Clinical Technology in	•	TRANSCRANIAL DOPPLERS	2 written theory tests (60%) 2 x assignments [presentation
Neurophysiolo	•	POLYSOMNOGRAPHY	and written] (40%)
gy lb		INSTRUMENTATION	and written] (40%)
6/ .0	Nonh	rology	
Pathophysiology for	•	Clinical Manifestations of Renal	Continuous assessment
Nephrology	-	Diseases	The final mark:
1.108/		Major Clinical Renal Syndromes	2 written theory tests (60%)
		(renal failure, tubular defects,	2 x assignments [presentation
		urinary tract infections, calculi)	and written] (40%)
	•	Diagnosis of Renal Disease	
		(biopsy, microscopy)	
	•	Congenital abnormalities of the	
		kidney	
	•	Glomerular disease	
	•	Nephrotic syndrome	
		Diabetes mellitus	
	l -	aocteo memeas	

	•	Renal hypertension	
	•	Anaemia	
Pharmacology for	•	Understand the application for	Examination
Nephrology		the following:	
	•	Drug dosing methods and	Final mark = 40% course mark + 60% exam mark
		influencing factors	+ 60% exam mark
	•	Anti-hypertensives ACE-Inhibitors, Angiotensin-	Course mark calculated as
	•	receptor blockers,	follows:
	•	Diuretics	2 written theory tests (60%)
	•	Beta Adrenergic Blocking	I x assignment [presentation
		Drugs	and written] (40%)
	•	Calcium Channel Blockers	
	•	Dyslipidaemia management	
	•	Anaemia management	
	•	Understand the	
		pharmacological applications	
		for the following disorders:  Major Clinical Renal Syndromes	
	•	(renal failure, tubular defects,	
		urinary tract infections, calculi)	
	•	Diagnosis of Renal Disease	
		(biopsy, microscopy)	
	•	Congenital abnormalities of the	
		kidney	
	•	Glomerular disease	
	•	Nephrotic syndrome	
	•	Diabetes mellitus	
Clinical Technology	•	Renal hypertension  Handwashing technique and	Continuous assessment
Practice in		infection control;	The final mark:
Nephrology la	•	Setting up of equipments for	Continuous Proficiency
		HD and PD therapies;	Assessment based
	•	Organise equipments for	on the application
		emergencies;	and performance of the procedures or
	•	Priming and disinfection;	techniques as
	•	Preparation of access sites (PD & HD);	outlined in module
	•	Subcutanous administration;	content (80%)
	•	Intravenous administration;	
	•	Water sampling testing;	Compilation of a logbook of
	•	Preassement of patient	procedures (20%)
	•	Monitoring of hemodynamics of HD	
	١.	and PD; Phlebotomy;	
		Commencement and	
		discontinuation techniques of	
		HD and PD.	
	•	Post hemodynamic monitoring of	
Clinian T 1		HD and PD	
Clinical Technology Practice in	•	Cannulation using sterile	Continuous assessment The final mark:
Nephrology Ib		techniques of arteriovenous fistula;	Continuous Proficiency
	•	Sterile techniques for	Assessment based
	L	totililiques 101	

			4J Provi
		connection of catheters;	on the application
	•	Perform chronic hemodialysis	and performance of the procedures or
		therapy;	
	•	Perform chronic peritoneal	techniques as outlined in module
		dialysis therapy;	content (80%)
	•	Hemodynamic monitoring of	content (60%)
		both above procedures;	Compilation of a logbook of
	•	Management of acute	procedures (20%)
		complications during HD and	procedures (2070)
		PD;	
	•	Management of chronic	
		complications of HD and PD;	
	•	Setting up of equipments for	
		acute HD/PD and CRRT;	
	•	Hemodynamic monitoring	
		acute HD/PD.	
Instrumentation and	•	Development of dialysis	Continuous assessment
Techniques for		equipment	The final mark:
Clinical	•	Theory of haemo-dialysis and	2 written theory tests (60%)
Technology in		PD.	2 x assignments [presentation
Nephrology Ia	•	Method of solute transport and	and written] (40%)
		ultrafiltration.	
	•	Types Dialyzers	
	•	Blood and dialysate	
		compartments	
	•	Monitoring devices	
	•	Calibration, servicing and	
		disinfection of equipments	
	•	Design, operation and SOP of	
		Hemodialysis equipments;	
	•	Design, operation and SOP of	
		Peritoneal equipments	
Instrumentation and	•	Optimization of dialysis with	Continuous assessment
Techniques for		regards to acute- and chronic	The final mark:
Clinical Tachnology in		dialysis therapy.	2 written theory tests (60%)
Technology in	•	Dialysate used in haemodialysis,	2 x assignments [presentation
Nephrology Ib		peritoneal dialysis and	and written] (40%)
		continuous therapies.	
	•	Water treatment for	
	١.	haemodialysis	
		Emergency equipment;	
	•	General and health and safety in the renal unit.	
	١.	Design, operation and SOP of	
	•	acute dialysis and CRRT	
		equipments;	
	١.	Blood gas analysis	
		Diood gas allalysis	
		PERFUSION	
Pathophysiology for	•	Ischemic Heart Disease	Continuous assessment
Perfusion	•	Myocardial Infarction	The final mark:
	•	Valvular Heart Disease	2 written theory tests (60%)
		(Acquired and Congenital),	2 x assignments [presentation
		Congestive Heart Failure	and written] (40%)
	I	0 11 11 11	

	1	D: (1 D :	
	•	Diseases of the Great Arteries	
		(Dissection, Aneurysm,	
		Pulmonary Embolism)	
	•	Pulmonary Hypertension	
	•	Bacterial Endicarditis and	
		Rheumatic Fever	
	•	Cardiomyopathy and Heart &	
		Lung Transplant	
	•	Congenital Heart Disease.	
Pharmacology for	•	Understand the application for	Examination
Perfusion		the following therapeutic	Final mark = 40% course mark
		classes: ACE Inhibitors,	+ 60% exam mark
		Angiotensin II Receptor	+ 60% exam mark
		Blockers, Antisarrhythmic	Course mark calculated as
		Agents, Anticoagulants,	follows:
		Anticoagulants Antagonist, Antiplatelet Agents,	2 written theory tests (60%)
		Antihistamine, Beta Blockers,	I x assignment [presentation
		Bronchodilators, Calcium	and written] (40%)
		Channel Blockers, Cardiac	and writtenj (10%)
		Glycosides, Diuretics, Inotropic	
		Effectors Positive, Local	
		Anaesthetic, Narcotic	
		Analgesia, Narcotic	
		Antagonists, Oxytocic Agents,	
		Steroids, Thrombolytic,	
		Vasoconstrictor, Vasodilators,	
		Nitrates.	
	•	Understand the	
		pharmacological applications	
		for the following cardiovascular	
		disorders:	
	•	Angina	
	•	Arrhythmia	
	•	Oedema	
	•	Heart failure	
	•	Systemic and pulmonary	
		hypertension	
	•	Hypotension	
	•	Myocardial infarction	
Clinical Technology	•	Assessing the Physiological	Continuous assessment
Practice in		Health of Patient; Use Various	The final mark:
Perfusion la		Cardioulmonary Components;	Continuous Proficiency
	•	Electrocardiography (ECG)	Assessment based
		Measurement;	on the application
	•	Perform Advanced Cardiac	and performance of
		Life Support;	the procedures or
	•	Spirometry Measurement,	techniques as
	•	Anthropometric Measurement;	outlined in module
	•	Anticoagulation Testing (ACT),	content (80%)
	•	Blood Pressure Measurement,	
	•	Temperature Monitoring,	Compilation of a logbook of
	•	Pulse Measurement;	procedures (20%)
	•	Perform Bloodgas Analysis;	
[	-	i ci ioi iii bioodgas Alialysis,	

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	•	Oximetry Measurement;	
	•	Blenders, Vaporizers,	
	•	Perform Capnography;	
	•	Use of Non-provocative	
		Nebulizers;	
	•	Administer Oxygen Therapy,	
	•	Calibrate the Transducers;	
	•	Use of Ventilators;	
	•	Use of Infusion Devices;	
	•	Perform Phlebotomy;	
		Utilize Intra-Aortic Balloon	
	, and the second	Pumps;	
		Perform Autologous Blood	
	ŭ	Salvage;	
		9	
	•		
		Parameters;	
Clinical Tachnola-	•	Operate Flowmeters;	Continuous assessment
Clinical Technology	•	Perform Cardiopulmonary	Continuous assessment
Practice in Perfusion lb		Resuscitation (CPR); Utilize the	The final mark: Continuous Proficiency
Perfusion ib		Left Ventricular Assist Devices	· · · · · · · · · · · · · · · · · · ·
		(LVAD);	Assessment based
	•	Administer Drugs;	on the application
	•	Perform Basic	and performance of
		Echocardiography (ECHO);	the procedures or techniques as
	•	Perform Vascular Sonography;	techniques as outlined in module
	•	Interpretation and Analysis of	
		Diagnostic Data;	content (80%)
	•	Perform External	Compilation of a logbook of
		Counterpulsation (ECP),	procedures (20%)
	•	3-Dimensional Cardiography	procedures (20%)
		(3DVG) Measurement,	
	•	Perform Stress Test,	
	•	Monitor the Basic	
		Electroencephalography (EEG);	
	•	Application of Defibrillator and	
		Cardioversion;	
	•	Integrate Hemodialyzer;	
	•	Interpret Magnetic Resonance	
		Imaging (MRI);	
	•	Perform Extracorporeal	
		Membrane Oxygenation	
		(ECMO);	
Instrumentations and	•	Electrocardiography (ECG);	Continuous assessment
Techniques for	•	Advanced Cardiac Life Support;	The final mark:
Clinical	•	Measurement of Spirometry,	2 written theory tests (60%)
Technology in	•	Anthropometric,	2 x assignments [presentation
Perfusion la	•	Anti Coagulation Testing	and written] (40%)
		(ACT),	
	•	Blood Pressure.	
	•	Temperature, Pulse;	
		Bloodgas Analysis;	
		Blenders; Vaporizers;	
		•	
	•	Oximetry;	

			T
	•	Capnography;	
	•	Non-provocative Nebulizers;	
	•	Oxygen Therapy,	
	•	Calibration of Transducers;	
	•	Ventilators;	
	•	Infusion Devices,	
	•	Phlebotomy,	
Instrumentations and	•	Intra-Aortic Balloon Pumps;	Continuous assessment
Techniques for	•	Autologous Blood Salvage;	The final mark:
Clinical	•	Cardiovascular Monitoring;	2 written theory tests (60%)
Technology in	•	Cardiopulmonary Resuscitation	2 x assignments [presentation
Perfusion Ib		(CPR);	and written] (40%)
	•	Left Ventricular Assist Devices	
		(LVAD);	
	•	Drug Administration,	
		Echocardiography (ECHO);	
	•	Vascular Sonography;	
	•	Interpretation and Analysis of	
		Diagnostic Data. External	
		Counterpulsation (ECP),	
	•	3-Dimensional Cardiography	
		(3DVG),	
	•	Stress Test,	
	•	Basic Electroencephalography	
		(EEG);	
	•	Defibrillators.	
	•	Cardioverters,	
	•	Transducers.	
		Cell Savers;	
	•	Flowmeters;	
		PULMONOLOGY	
Pathophysiology for	•	Lung injury	Continuous assessment
Pulmonology		Respiratory diseases	The final mark:
3,	•	Infectious diseases	2 written theory tests (60%)
		Immunological disorders	2 x assignments [presentation
	•	Cardiovascular disorders	and written] (40%)
Pharmacology for	•	Understand the	Examination
Pulmonology	•	pharmacological application for	Examination
1 dimonology		the following classes:	Final mark = 40% course mark
		Pressins	+ 60% exam mark
		cardiostimulatories and	oo, oo oo aan aa aa
	•	inhibitors	Course mark calculated as
			follows:
		thrombolytics vasoconstrictors and	2 written theory tests (60%)
	•	vasoconstrictors and vasodilators	I x assignment [presentation
		Understand the	and written] (40%)
		pharmacological applications	
		for the following disorders:	
	0	Lung injury	
	0	Respiratory diseases	
	0	Infectious diseases	
	0	Immunological disorders	
	0	Cardiovascular disorders	
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Clinical Technology Practice in Pulmonology IA  Clinical Technology	Pulmonary function laboratory safety Pulmonary function measurement Lung volume evaluation Ventilation tests and artificial ventilation Basic flow-volume curves Gas distribution evaluations  Diffusion tests  Diffusion tests	Continuous assessment The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment
Practice in Pulmonology IB	<ul> <li>Bronchial provocation</li> <li>Bronchodilators</li> <li>Diagnostic bronchoscopy</li> <li>Allergy investigations</li> </ul>	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)
Instrumentations and Procedures for Clinical Technology in Pulmonology Ia	Basic lung function equipment     Spirometer     Flow measuring devices     Transcutaneous monitoring devices     W. Gas chromatography     V. Mass spectrometer     Vi. Oxygen analysers     Vii. Nitrogen analysers     viii. Blood gas analysers     ix. Lung mechanics	Continuous assessment The final mark: 2 written theory tests (60%) 2 x assignments [presentation and written] (40%)
Instrumentations and Procedures for Clinical Technology in Pulmonology Ib	Systems for the determination of lung function     i. Spirometry and flow-volume systems     ii. Computerised lung function systems     iii. Whole body plethysmograph iv. Diffusion capacity systems     v. Exercise study equipment     Bronchoscopy	Continuous assessment The final mark: 2 written theory tests (60%) 2 x assignments [presentation and written] (40%)
Pathophysiology for Reproductive Biology	Congenital Anomalies of Male and Female Reproductive tract.     Pathophysiology of Male and Female Reproductive organs & Systems	Continuous assessment The final mark: 2 written theory tests (60%) 2 x assignments [presentation and written] (40%)

	1	1.6 (1)	T
	•	Infertility and Persistent	
		Pregnancy Failure	
	•	Microbiology	
	•	Ectopic pregnancy , placenta	
		previa , sacrococcygeal	
		teratoma	
	•	Genetic disorders (eg	
		Klinefelter syndrome, Turner's	
		syndrome, Down's syndrome)	
Pharmacology for	•	Understand the	Examination
Reproductive		pharmacological application for	
Biology		the following classes:	Final mark = 40% course mark
	•	Ovulation induction drugs	+ 60% exam mark
	•	Contraception	
	•	Understand the	Course mark calculated as
		pharmacological applications	follows:
		for the following disorders:	2 written theory tests (60%)
	•	Congenital Anomalies of Male	I x assignment [presentation
		and Female Reproductive tract.	and written] (40%)
	•	Infertility and Persistent	
		Pregnancy Failure	
	•	Microbiology	
	•	Ectopic pregnancy , placenta	
		previa , sacrococcygeal	
		teratoma	
	•	Genetic disorders (eg	
		Klinefelter syndrome, Turner's	
		syndrome, Down's	
		syndrome)Cardiovascular	
		disorders	
Clinical Technology	•	Fundamentals of Clinical	Continuous assessment
Practice in		Embryology	The final mark:
Reproductive	•	Introduction to In Vitro	Continuous Proficiency
Biology Ia		Fertilisation and Embryo	Assessment based
		Culture	on the application
	•	Congenital Anomalies of Male	and performance of
		and Female Reproductive tract.	the procedures or
	•	Pathophysiology of Male and	techniques as
		Female Reproductive organs &	outlined in module
		Systems	content (80%)
	•	Semen analysis	Compilation of a logbook of
	•	Cervical mucus Examinations	procedures (20%)
	•	Semen (Spermatosoa) - Cervical	pi ocedui es (20%)
		mucus-interaction tests	
	•	Extended antispermatosoa	
		antibody tests in semen, cervical	
		mucus and blood serum	
Clinical Technology	0	Sexual transmitted infections	Continuous assessment
Practice in		and blood borne viruses in ART	The final mark:
Reproductive	0	Identification, judgement and	Continuous Proficiency
Biology Ib		manipulation of ova.	Assessment based
	0	Fertilization of ova and embryos	on the application
	0	Cryopreservation of semen, ova	and performance of
		and embryos	the procedures or

	1	I C attract I D to a	
	0	Infertility and Persistent	techniques as
		Pregnancy Failure	outlined in module
	(a).	Fertility Preservation in Cancer Patients	content (80%)
	(b).	Infections and Infertility	Compilation of a logbook of
	(c).	Male and Female Infertility	procedures (20%)
	(d).	Artificial Insemination	1
	(e).	Induction of Ovulation	
	0	Quality Assurance, Risk	
		management and Laboratory	
		organisation	
	0	Patient-Technologist-	
	O	Relationship	
Instrumentations and	0	Apparatus for the following	Continuous assessment
	O		
Techniques for		procedures:	The final mark:
Clinical	•	Semen analysis	2 written theory tests (60%)
Technology in	•	Preparation of media	2 x assignments [presentation
Reproductive	•	ART Laboratory Equipment	and written] (40%)
Biology Ia	•	Maintenance of Apparatus	
	•	Quality control	
Instrumentations and	•	Reproductive Imaging	Continuous assessment
Techniques for		(Hysterosalphingography,	The final mark:
Clinical		Laparoscopy)	2 written theory tests (60%)
Technology in	•	Contraception	2 x assignments [presentation
Reproductive	•	Hormonal Contraception	and written] (40%)
Biology Ib	•	Modern Concepts in	
		Intrauterine Devices	
	Surgica	l Sterilization	
		Fourth level	
Health Care	•		Continuous assessment
Health Care Management II	•	Legal and social aspects of	Continuous assessment The final mark:
Health Care Management II	•	Legal and social aspects of Healthcare	The final mark:
	•	Legal and social aspects of Healthcare Human resource management	
	•	Legal and social aspects of Healthcare Human resource management in healthcare settings	The final mark:
	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial	The final mark: 2 x written theory tests (60%)
	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare	The final mark: 2 x written theory tests (60%) 1 x assignment [presentation
	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare	The final mark: 2 x written theory tests (60%) 1 x assignment [presentation
	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings	The final mark: 2 x written theory tests (60%) 1 x assignment [presentation
	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in	The final mark: 2 x written theory tests (60%) 1 x assignment [presentation
Management II	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings	The final mark: 2 x written theory tests (60%) 1 x assignment [presentation and written] (40%)
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project	The final mark: 2 x written theory tests (60%)  1 x assignment [presentation and written] (40%)  Continuous assessment
Management II	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark:
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70%
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology.	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research =
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology. Perform data analysis using	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research = 30%
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology. Perform data analysis using appropriate statistical tests and	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research =
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology. Perform data analysis using appropriate statistical tests and packages.	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research = 30%
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology. Perform data analysis using appropriate statistical tests and packages. Interpret findings and present	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research = 30%
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology. Perform data analysis using appropriate statistical tests and packages. Interpret findings and present these according to set criteria	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research = 30%
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology. Perform data analysis using appropriate statistical tests and packages. Interpret findings and present these according to set criteria and formatting requirements in	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research = 30%
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology. Perform data analysis using appropriate statistical tests and packages. Interpret findings and present these according to set criteria and formatting requirements in the form of a dissertation.	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research = 30%
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology. Perform data analysis using appropriate statistical tests and packages. Interpret findings and present these according to set criteria and formatting requirements in the form of a dissertation. Demonstrate an ability to act	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research = 30%
Management II  Research Methodology	•	Legal and social aspects of Healthcare Human resource management in healthcare settings Budgeting and financial management in Healthcare Leadership in Healthcare Leadership in Healthcare settings Community relations in Healthcare settings Conduct a research project and collect data using appropriate research methodology. Perform data analysis using appropriate statistical tests and packages. Interpret findings and present these according to set criteria and formatting requirements in the form of a dissertation.	The final mark: 2 x written theory tests (60%)  I x assignment [presentation and written] (40%)  Continuous assessment The final mark: Research project =70% Presentation of research = 30%

Clinical Instruction	_	Learning Process and Madels of	Continuous assessment with
Clinical Instruction (Elective I)			Continuous assessment with external moderation
(Elective I)		Teaching and Learning Styles	external moderation
	0	Teaching Learning Styles Teaching, Learning, Assessment,	Theory tests (60%)
	U	and Study Skills Strategies	Assignments (40%)
	0	Curriculum Development and	Assignments (40%)
	0	Classroom Management	
	0	Academic Writing and	
		Presentation	
	0	Mentorship	
Small business	•	Introduction to	Continuous assessment with
management		Entrepreneurship Theory	external moderation
(Elective 2)	•	Self-awareness and	:
		development of personal	- Theory Tests –
		attributes	Open or closed
	•	Industry and business	Book
		classification	70%
	•	Business Plan development	- Individual
	•	Marketing for Entrepreneurs	Participation/Gradua
	•	Finance, business calculations	te Attributes
		and financial record keeping for	10%
		Entrepreneurs	Business Plan (group work)
	•	Operations Management for	20%
		Entrepreneurs	
	•	Human Resources for	
		Entrepreneurs	
	•	Presentation Skills	
		CARDIOLOGY	
Clinical Technology	•	Setting up and monitoring of the	Continuous assessment
Practice in		following invasive procedures:	The final mark:
Cardiology IIa	•	Intra-aortic balloon pumping	Continuous Proficiency
			Assessment based
	•	Intravascular ultrasound and	Assessment based
	•	Intravascular ultrasound and fractional flow reserve	on the application
	•		on the application and performance of
		fractional flow reserve	on the application and performance of the procedures or
		fractional flow reserve Right and left heart	on the application and performance of the procedures or techniques as
		fractional flow reserve Right and left heart catheterisation on paediatrics	on the application and performance of the procedures or techniques as outlined in module
		fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation	on the application and performance of the procedures or techniques as
	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing	on the application and performance of the procedures or techniques as outlined in module content (80%)
	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators	on the application and performance of the procedures or techniques as outlined in module content (80%)
	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)
Clinical Technology	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment
Practice in	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark:
	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac defibrillation	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency
Practice in	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac defibrillation Advanced cardiopulmonary	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency Assessment based
Practice in	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac defibrillation Advanced cardiopulmonary resuscitation	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency Assessment based on the application
Practice in	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac defibrillation Advanced cardiopulmonary resuscitation Perform echocardiography and	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency Assessment based on the application and performance of
Practice in	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac defibrillation Advanced cardiopulmonary resuscitation Perform echocardiography and correctly report on the	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or
Practice in	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac defibrillation Advanced cardiopulmonary resuscitation Perform echocardiography and correctly report on the following:	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as
Practice in	•	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac defibrillation Advanced cardiopulmonary resuscitation Perform echocardiography and correctly report on the following: and paediatric congenital heart	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module
Practice in	• • • • adult a	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac defibrillation Advanced cardiopulmonary resuscitation Perform echocardiography and correctly report on the following: and paediatric congenital heart disease	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as
Practice in	• • • • adult a	fractional flow reserve Right and left heart catheterisation on paediatrics Electrophysiology and ablation Bi-ventricular pacing Implantable cardiac defibrillators Setting up and monitoring of the following invasive procedures:  Head-up tilt testing External synchronised cardiac defibrillation Advanced cardiopulmonary resuscitation Perform echocardiography and correctly report on the following: and paediatric congenital heart	on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module

	Pericardial disease	procedures (20%)	
	• Dobutamine stress	p. 55553. 55 (2070)	
	echocardiography		
Instrumentations and	Intra-Aortic Balloon Pump.	Continuous assessment	
Techniques for Clinical	Intra-aortic balloon pump	The final mark:  2 written theory tests (60%)	
Technology in	<ul> <li>Intravascular ultrasound and fractional flow reserve</li> </ul>	2 x assignments [presentation	
Cardiology IIa	equipment	and written] (40%)	
	<ul> <li>Right and left heart</li> </ul>		
	catheterisation on paediatrics:		
	<ul><li>wires, catheters</li><li>Electrophysiology and ablation</li></ul>		
	equipment and catheters		
Instrumentations and	Bi-ventricular pacing: leads,	Continuous assessment The final mark:	
Techniques for Clinical	<ul><li>wires and generators</li><li>Implantable cardiac</li></ul>	2 written theory tests (60%)	
Technology in	defibrillators: leads, wires,	2 x assignments [presentation	
Cardiology IIb	defibrillator	and written] (40%)	
	Echocardiography:		
	transoesophageal echocardiography and		
	Dobutamine stress		
	echocardiography;		
	pericardiocentesis		
	<ul> <li>Drug Administration and management of side effects.</li> </ul>		
	CRITICAL CARE		
Clinical Technology	Intubation.	Continuous assessment	
Practice in	<ul> <li>Assist with acute haemodialysis</li> </ul>	The final mark:	
Critical Care	and continuous renal	Continuous Proficiency Assessment based	
ii a	<ul><li>replacement therapy (CRRT).</li><li>Autologous blood recovery.</li></ul>	on the application	
	• Cell saving.	and performance of	
	Monitor Intra-Aortic Balloon	the procedures or	
	Pump	techniques as outlined in module	
	<ul><li>Metabolic studies.</li><li>Left ventricle assist therapy.</li></ul>	content (80%)	
	<ul> <li>Coagulation studies.</li> </ul>		
	Endoscopy.	Compilation of a logbook of	
		procedures (20%)	
Clinical Technology Practice in	Ultrasonography.	Continuous assessment The final mark:	
Critical Care	Drug Administration and     management of side effects		
Critical Care	management of side effects.		
	management of side effects.	Continuous Proficiency Assessment based on the application	
	management of side effects.  • Advanced patient transport (inter-hospital and international transport).	Continuous Proficiency Assessment based on the application and performance of	
	management of side effects.  Advanced patient transport (inter-hospital and international transport).  General equipment	Continuous Proficiency Assessment based on the application	
	management of side effects.  Advanced patient transport (inter-hospital and international transport).  General equipment management.	Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module	
	management of side effects.  Advanced patient transport (inter-hospital and international transport).  General equipment	Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as	
	management of side effects.  Advanced patient transport (inter-hospital and international transport).  General equipment management.  Physiological data management.  Neonatal: Set up, apply and maintain the	Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)	
	management of side effects.  Advanced patient transport (inter-hospital and international transport).  General equipment management.  Physiological data management.  Neonatal:	Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module	

		Lumidifians	
	•	Humidifiers;	
	•	Phototherapy;	
	•	Neonatal therapeutic gas	
		administration;	
	•	Respiratory support devices.	
	•	Invasive and non-invasive	
In the second of the second		monitoring	6 .:
Instrumentations and Techniques for	•	Intra-Aortic Balloon Pump.	Continuous assessment The final mark:
Clinical	•	haemodialysis machine	2 written theory tests (60%)
Technology in	•	Continuous renal replacement	2 x assignments [presentation
Critical care IIa		therapy equipments (CRRT).	and written] (40%)
Gricical care na	•	Autologous blood recovery.	and written] (1070)
	•	Cell saving.	
	•	Ultrasonography.	
	•	Neonatal: Incubators;	
		Humidifiers and Phototherapy;	
	•	Acute renal failure;	
	•	Chronic renal failure;	
	•	Hepatic failure;	
	•	Gullian-Barre syndrome, status	
		epilepticus, meningitis, and	
		myasthenia gravis;	
	•	Brain herniation, intracranial	
		pressure changes;	
	•	Drug Administration and	
		management of side effects.	
Instrumentations and	•	Intra-Aortic Balloon Pump.	Continuous assessment
Techniques for	•	haemodialysis machine	The final mark:
Clinical			
	•	Continuous renal replacement	2 written theory tests (60%)
Technology in	•	Continuous renal replacement therapy equipments (CRRT).	2 x assignments [presentation
	•	•	l _ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
Technology in	•	therapy equipments (CRRT).	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery.	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving.	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography.	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure;	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure;	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure;	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis;	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes;	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes; Drug Administration and	2 x assignments [presentation
Technology in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes; Drug Administration and management of side effects.	2 x assignments [presentation
Technology in Critical care IIb	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes; Drug Administration and management of side effects.  NEUROPHYSIOLOGY	2 x assignments [presentation and written] (40%)
Technology in Critical care IIb	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes; Drug Administration and management of side effects.  NEUROPHYSIOLOGY Paediatric	2 x assignments [presentation and written] (40%)  Continuous assessment
Technology in Critical care IIb  Clinical Technology Practice in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes; Drug Administration and management of side effects.  NEUROPHYSIOLOGY Paediatric electroencephalography (EEG)	2 x assignments [presentation and written] (40%)  Continuous assessment The final mark:
Technology in Critical care IIb  Critical care IIb  Clinical Technology Practice in Neurophysiolo	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes; Drug Administration and management of side effects.  NEUROPHYSIOLOGY  Paediatric electroencephalography (EEG) The electroencephalogram in	2 x assignments [presentation and written] (40%)  Continuous assessment The final mark:
Technology in Critical care IIb  Clinical Technology Practice in	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes; Drug Administration and management of side effects.  NEUROPHYSIOLOGY Paediatric electroencephalography (EEG)	2 x assignments [presentation and written] (40%)  Continuous assessment The final mark: Continuous Proficiency
Clinical Technology Practice in Neurophysiolo	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes; Drug Administration and management of side effects.  NEUROPHYSIOLOGY  Paediatric electroencephalography (EEG) The electroencephalogram in the unconscious patient in the intensive care	Continuous assessment The final mark: Continuous Proficiency Assessment based
Technology in Critical care IIb  Critical care IIb  Clinical Technology Practice in Neurophysiolo	•	therapy equipments (CRRT). Autologous blood recovery. Cell saving. Ultrasonography. Neonatal: Incubators; Humidifiers and Phototherapy; Acute renal failure; Chronic renal failure; Hepatic failure; Gullian-Barre syndrome, status epilepticus, meningitis, and myasthenia gravis; Brain herniation, intracranial pressure changes; Drug Administration and management of side effects.  NEUROPHYSIOLOGY  Paediatric electroencephalography (EEG) The electroencephalogram in the unconscious patient in the intensive care	Continuous assessment The final mark: Continuous Proficiency Assessment based on the application

Clinical Technology Practice in Neurophysiolo gy IIb	Multiple sleep latency testing      Intra-operative monitoring     Trans-cranial Doppler's     Sub-dural monitoring     Drug administration and management of side-effects	techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)  Continuous assessment The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Instrumentation and Techniques for Clinical Technology in Neurophysiolo gy IIa	Calibration procedures on neurophysiological equipment Design, operation and trouble-shooting skills on the equipment for the following procedures: Paediatric electroencephalography (EEG) The electroencephalogram in the unconscious patient in the intensive care Sleep and long term electroencephalography Multiple sleep latency testing	Confination of a logobok of procedures (20%)  Continuous assessment The final mark: 2 written theory tests (60%) 2 x assignments [presentation and written] (40%)
Instrumentation and Techniques for Clinical Technology in Neurophysiolo gy Ilb	Intra-operative monitoring     Sub-dural monitoring     Selection of clinical instrumentation and stock control  NEPHROLOGY	Continuous assessment The final mark: 2 written theory tests (60%) 2 x assignments [presentation and written] (40%)
Clinical Technology	Acute Hemodialysis;	Continuous assessment
Practice in Nephrology Ila	<ul> <li>Acute peritoneal dialysis;</li> <li>Paediatric dialysis;</li> <li>Management of transplant patients (pre and post);</li> <li>CRRT therapies:</li> <li>Plasma exchange;</li> <li>CVVHD;</li> <li>Hemoperfusion</li> </ul>	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)
Clinical Technology Practice in	<ul><li>CRRT therapies:</li><li>CVVH;</li></ul>	Continuous assessment The final mark:
	,,	

Nephrology lib	o CAVVH;	Continuous Proficiency
i debiii ology iib	o SCUF, CVVHD, CVVHDF	Assessment based
	0	on the application
	Cell saver;	and performance of
	Join Saver,	the procedures or
		techniques as
		outlined in module
		content (80%)
		, ,
		Compilation of a logbook of
		procedures (20%)
Instrumentation and	Equipments for Acute	Continuous assessment
Techniques for	Hemodialysis;	The final mark:
Clinical	Acute peritoneal dialysis;	2 written theory tests (60%)
Technology in	o Paediatric dialysis;	2 x assignments [presentation
Nephrology IIa	Management of transplant	and written] (40%)
	patients (pre and post);	
	Equipments for CRRT	
	therapies:  O Plasma exchange;	
	o CVVHD;	
	O Hemoperfusion	
Instrumentation and	Equipments for CRRT	Continuous assessment
Techniques for	therapies:	The final mark:
Clinical	o CVVH;	2 written theory tests (60%)
Technology in	o CAVVH;	2 x assignments [presentation
Nephrology IIb	o SCUF, CVVHD, CVVHDF	and written] (40%)
1	0	Ī
1		
	Cell saver;	
	Cell saver;     PERFUSION	
Clinical Technology	Cell saver;     PERFUSION  Assessing the Physiological Health of	Continuous assessment
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various	The final mark:
	Cell saver;     PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components;	The final mark: Continuous Proficiency
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG)	The final mark: Continuous Proficiency Assessment based
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform	The final mark: Continuous Proficiency Assessment based on the application
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support;	The final mark: Continuous Proficiency Assessment based on the application and performance of
Practice in	Cell saver;     PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement,	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support;	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement;	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement; Anticoagulation Testing (ACT),	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement; Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement; Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)
Practice in	Cell saver;      PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement; Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders,	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement, Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders, Vaporizers, Perform	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement, Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders, Vaporizers, Perform Capnography; Use of Non-	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement; Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders, Vaporizers, Perform Capnography; Use of Non-provocative Nebulizers;	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement; Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders, Vaporizers, Perform Capnography; Use of Nonprovocative Nebulizers; Administer Oxygen Therapy,	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement, Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders, Vaporizers, Perform Capnography; Use of Nonprovocative Nebulizers; Administer Oxygen Therapy, Calibrate the Transducers; Use	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement, Anthropometric Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Perform Capnography; Use of Nonprovocative Nebulizers; Administer Oxygen Therapy, Calibrate the Transducers; Use of Ventilators; Use of Infusion	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement, Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders, Vaporizers, Perform Capnography; Use of Nonprovocative Nebulizers; Administer Oxygen Therapy, Calibrate the Transducers; Use of Ventilators; Use of Infusion Devices; Perform Phlebotomy;	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement; Anthropometric Measurement; Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders, Vaporizers, Perform Capnography; Use of Nonprovocative Nebulizers; Administer Oxygen Therapy, Calibrate the Transducers; Use of Ventilators; Use of Infusion Devices; Perform Phlebotomy; Utilize Intra-Aortic Balloon	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement, Anthropometric Measurement, Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders, Vaporizers, Perform Capnography; Use of Nonprovocative Nebulizers; Administer Oxygen Therapy, Calibrate the Transducers; Use of Ventilators; Use of Infusion Devices; Perform Phlebotomy;	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of
Practice in	PERFUSION  Assessing the Physiological Health of Patient; Use Various Cardioulmonary Components; Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Spirometry Measurement; Anthropometric Measurement; Anticoagulation Testing (ACT), Blood Pressure Measurement, Temperature Monitoring, Pulse Measurement; Perform Bloodgas Analysis; Oximetry Measurement; Blenders, Vaporizers, Perform Capnography; Use of Nonprovocative Nebulizers; Administer Oxygen Therapy, Calibrate the Transducers; Use of Ventilators; Use of Infusion Devices; Perform Phlebotomy; Utilize Intra-Aortic Balloon Pumps; Perform Autologous	The final mark: Continuous Proficiency Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of

	Operate Flowmeters; Perform	
	Cardiopulmonary Resuscitation	
	(CPR); Utilize the Left Ventricular Assist Devices	
	(LVAD); Administer Drugs	
Clinical Technology	Perform Basic Echocardiography	Continuous assessment
Practice in	(ECHO); Perform Vascular	The final mark:
Perfusion IIb	Sonography; Interpretation	Continuous Proficiency
	and Analysis of Diagnostic Data; Perform External	Assessment based on the application
	Counterpulsation (ECP), 3-	and performance of
	Dimensional Cardiography	the procedures or
	(3DVG) Measurement, Perform	techniques as
	Stress Test, Monitor the Basic	outlined in module
	Electroencephalography (EEG);	content (80%)
	Application of Defibrillator and Cardioversion; Integrate	Compilation of a logbook of
	Hemodialyzer; Interpret	procedures (20%)
	Magnetic Resonance Imaging	, ,
	(MRI); Perform Extracorporeal	
	Membrane Oxygenation (ECMO)	
Instrumentations and	12 Lead Electrocardiography (ECG);	Continuous assessment
Techniques for	Advanced Cardiac Life Support;	The final mark:
Clinical	Lung Dynamics and	2 written theory tests (60%)
Technology in Perfusion II	Measurement, Ventilation/Perfusion	2 x assignments [presentation and written] (40%)
i criusion n	Monitoring, Haemodynamic	and written] (40%)
	Monitoring, Blood Gas Analysis;	
	Blenders; Vaporizers;	
	Capnography; Provocative	
	Nebulizers; Ventilators; Infusion Devices, Phlebotomy, Intra-	
	Aortic Balloon Pumps;	
	Autologous Blood Salvage;	
	Cardiovascular Monitoring;	
	Cardiopulmonary Resuscitation	
	(CPR); Left Ventricular Assist Devices (LVAD); Drug	
	Devices (LVAD); Drug Administration,	
Instrumentations and	Echocardiography (ECHO); Vascular	Continuous assessment
Techniques for	Sonography; Interpretation and	The final mark:
Clinical Technology in	Analysis of Diagnostic Data. External Counterpulsation	2 written theory tests (60%)
Technology in Perfusion II	(ECP), 3-Dimensional	2 x assignments [presentation and written] (40%)
	Cardiography (3DVG), Stress	a
	Test, Basic	
	Electroencephalography (EEG);	
	Defibrillators, Cardioverters, Transducers, Cell Savers;	
	Flowmeters;	
	PULMONOLOGY	
Clinical Technology	Assessing the Physiological	Continuous assessment
Practice in Pulmonology	Health of Patient; Use Various	The final mark: Continuous Proficiency
i difficilology	Cardioulmonary Components;	Continuous Frontiericy

IIa	Electrocondiname by (ECC)	Assessment been
lla	Electrocardiography (ECG) Measurement; Perform Advanced Cardiac Life Support; Anthropometric Measurement; Anticoagulation Testing (ACT), Blood Pressure Measurement, Oximetry Measurement; Blenders, Vaporizers, Perform Capnography; Use of Non-provocative Nebulizers; Administer Oxygen Therapy, Calibrate the Transducers;	Assessment based on the application and performance of the procedures or techniques as outlined in module content (80%)  Compilation of a logbook of procedures (20%)
Clinical Technology	CEPT (cardio pulmonary	Continuous assessment
Practice in Pulmonology	exercise testing)	The final mark: Continuous Proficiency
IIb	<ul> <li>Skin allergy investigations using skin prick tests</li> </ul>	Assessment based
	Provocation tests	on the application
	Sleep studies	and performance of the procedures or
	Nitric oxide testing)	techniques as
		outlined in module
		content (80%)
		Compilation of a logbook of procedures (20%)
Instrumentations and Procedures for	Exercise study equipment	Continuous assessment The final mark:
Clinical	Sleep study equipment	2 written theory tests (60%)
Technology in		2 x assignments [presentation
Pulmonology IIa		and written] (40%)
Instrumentations and	Provocation testing equipment	Continuous assessment
Procedures for Clinical	Nitric oxide machine (NiOx)	The final mark: 2 written theory tests (60%)
Technology in		2 x assignments [presentation
Pulmonology		and written] (40%)
IIb	REPRODUCTIVE BIOLOGY	
Clinical Technology	Embryo scoring for	Continuous assessment
Practice in Reproductive	<ul><li>transfer/cryopreservation</li><li>IVF and Embryo Culture</li></ul>	The final mark: Continuous Proficiency
Biology IIa	Micromanipulation	Assessment based
	<ul> <li>Cryobiology and</li> </ul>	on the application
	Cryopreservation	and performance of the procedures or
		techniques as
		outlined in module content (80%)
		, ,
		Compilation of a logbook of procedures (20%)
Clinical Technology	Quality Assurance, Risk	Continuous assessment
Practice in Reproductive	management and Laboratory organisation	The final mark: Continuous Proficiency
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Biology IIb	<ul> <li>Pre-implantation disease</li> <li>Fluorescence in hybridization</li> <li>Ethics and Law Embryologists</li> </ul>	on the application and performance of the procedures or
		Compilation of a logbook of procedures (20%)
Instrumentations and Techniques for Clinical Technology in Reproductive Biology IIa	<ul><li>Ova.</li><li>Fertilization and</li></ul>	
Instrumentations and Techniques for Clinical Technology in Reproductive Biology IIb	<ul> <li>Cryopreservati ova, and embry</li> <li>Testicular biop</li> <li>Genetic screen</li> <li>Quality control</li> </ul>	The final mark: 2 written theory tests (60%) 2 x assignments [presentation]

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