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**Ibn Sina National College for Medical Studies**

**Jeddah – Kingdom of Saudi Arabia**

**Laboratory Infrastructure Need Analysis Report**

**(Based on Need Analysis Checklists)**

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| **Academic Year** | 2016 - 17 | **Program** |  | Medicine |  | Dentistry |  | Clinical Pharmacy |  | Nursing | |
| **Classification** |  | | | | | | | | | | |
| **Name of the Lab** |  | | **Lab No (Male)** | | |  | **Lab No (Female)** | |  | | |
| **Department Chairman**  **Details** | Name of Department | | | | | Mobile |  | | Ext | |  |
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| Name of Chairman | | | | |
|  | | | | |
| Address | | | | |
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| **Head of the Division**  **Details** | Name of Division | | | | | Mobile |  | | Ext | |  |
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| Name of the Head | | | | |
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| Address | | | | |
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| **Laboratory**  **Supervisor**  **Details** | Name of Laboratory Supervisor | | | | | Mobile |  | | Ext | |  |
|  | | | | |
| Address | | | | |
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| **Laboratory Technician**  **Details** | Name of Technician | | | | | Mobile |  | | Ext | |  |
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| Name of Technician | | | | | Mobile |  | | Ext | |  |
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| Name of Technician | | | | | Mobile |  | | Ext | |  |
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| **Purpose of Laboratory (Brief notes on the routine activities of laboratory)** | | | | |
| 1. Learning & Teaching | | | | |
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| 1. Assessment | | | | |
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| 1. Research | | | | |
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| **Details on the contribution in programs** | | | | |
| 1. Medicine Program | | | | |
| Module / Course Name | Year | Number of  Lab Sessions | Number of Student Groups | Total Number of Students |
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| Module / Course Name | Year | Number of  Lab Sessions | Number of Student Groups | Total Number of Students |
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| 1. Dentistry Program | | | | |
| Module / Course Name | Year | Number of  Lab Sessions | Number of Student Groups | Total Number of Students |
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| 1. Clinical Pharmacy Program | | | | |
| Module / Course Name | Year | Number of  Lab Sessions | Number of Student Groups | Total Number of Students |
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| 1. Nursing Program | | | | |
| Module / Course Name | Year | Number of  Lab Sessions | Number of Student Groups | Total Number of Students |
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| **Details on the requirement (With respect to curriculum & syllabus)** | | | | |
| 1. Laboratory Safety Equipments & Personal Protective Equipments such as Fume hoods, Gloves, etc.. | | | | |
| Serial  No | Name of  Equipments | Number at present | Number  needed | Reasons for the requirement |
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| 1. Consumables such as chemicals, reagents, stains, etc.. | | | | |
| Serial  No | Name of  Consumables | Number at present | Number  needed | Reasons for the requirement |
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| 1. Learning & Teaching aids such as Equipments, Glass wares, Whiteboard, Projectors, Computers, etc.. | | | | |
| Serial  No | Name of  Learning & Teaching aids | Number at present | Number  needed | Reasons for the requirement |
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| 1. Infrastructure such as Chairs, Tables, Safety Disposable Sheets, Fridge, Cabinets, Exhaust Fan, etc.. | | | | |
| Serial  No | Name of  Infrastructure | Number at present | Number  needed | Reasons for the requirement |
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| 1. Learning Resources such as books, CD ROM, Applications, Software, etc… | | | | |
| Serial  No | Name of  Learning Resources | Needed for Students | Needed for Faculties | Reasons for the requirement |
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| **Details on the damage for repair or replacements** | | | | |
| 1. Learning & Teaching aids such as Equipments, Glass wares, Whiteboard, Projectors, Computers, etc.. | | | | |
| Serial  No | Name of  Equipment | Date of Purchase | Maintenance Details | Details on the  damage |
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| 1. Infrastructure such as Chairs, Tables, Safety Disposable Sheets, Fridge, Cabinets, Exhaust Fan, etc.. | | | | |
| Serial  No | Name of  Infrastructure | Date of Purchase | Maintenance Details | Details on the  damage |
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| **Details on the requirement for maintenance** | | | |
| Serial  No | Name of  Equipment | Present  maintenance details | Requirement of new or renewal of maintenance |
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| **Special Requirements for Research & Collaboration** | | | |
| Serial  No | Name of  Equipment | Research  Approval details | Brief explanation on the need for respective research |
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| **Special Requirements for Technology Enhanced Learning, Teaching & Assessment** | | | |
| Serial  No | Name of  Technology | Details on the Benchmark Institutes (attach documents) | Brief explanation on the need with respect to curriculum |
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| **Pending Requirement Details (Attach copy of previous request order form)** | | | | | | | |
| Serial  No | Details on the  Requirement | | Date of Request | | Follow up Date | Details on the Administration response | |
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| **Human Resource Requirements** | | | | | | | |
| Serial  No | Name of Designation &  Job Responsibility | | Present Number | | Required Number | Reasons for the  requirement | |
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| **Any Comments** | | | | | | | |
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| **Laboratory**  **Supervisor** | |  | |  | | |  |
| **Name** | | **Signature** | | | **Date** |
| **Head of the Division** | |  | |  | | |  |
| **Name** | | **Signature** | | | **Date** |
| **Department Chairman** | |  | |  | | |  |
| **Name** | | **Signature** | | | **Date** |
| **Date of Submission** | | | |  | | | |
| **Received by** | | | |  | | | |
| **Signature**  **(Receiving Person)** | | | |  | | | |
| **Date of Acceptance** | | | |  | | | |