

Kurdistan Region Government Ministry of Higher Education and Scientific Research Erbil Polytechnic University



Module (Course Syllabus) Catalogue 2023-2024

College/ Institute	Shaqlawa Technic	cal College
Department	Medical Laborato	ory Techniques- Evening
Module Name	Clinical Chemistr	y I
Module Code	CLC301	
Degree	Technical Diplom	a Bachelor
	High Diploma	Master PhD
Semester	3rd	
Qualification	MSc. Biochemistr	Ty
Scientific Title	Lecturer	
ECTS (Credits)	6	
Module type	Prerequisite	Core Assist.
Weekly hours	4	
Weekly hours (Theory)	(Two)hr Class	(80)Total hrs Workload
Weekly hours (Practical)	(Two)hr Class	(80)Total hrs Workload
Number of Weeks	15	
Lecturer (Theory)	Hardi Rafat Baqi	
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Lecturer (Practical)	Hardi Rafat Baqi	
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Websites		

Course Book

This course is an introductory course to Clinical Chemistry that includes the definitions, principles and procedures of multiple medical laboratory tests conducted in Clinical Chemistry.

The course represents the physiological basis, principle and procedure, and clinical significance of test results, including quality control and reference values.

It also includes basic chemical laboratory technique and safety, electrolytes, acid-base balance, proteins, carbohydrates, lipids, enzymes, endocrine function, and toxicology.

Clinical Chemistry Tests:

Common chemical pathology tests include:

Lipid Profile tests;

Total cholesterol;

Triglycerides;

HDL-C;

LDL-C;

VLDL-C;

-Electrolytes

Sodium;

Potassium:

Chloride:

Course Description

Bicarbonate;

-Renal (Kidney) Function Tests

Creatinine;

Blood urea nitrogen;

-Liver Function Tests

Total protein (serum);

Albumin;

Globulins;

A/G ratio (albumin/globulin)

Protein electrophoresis

Urine protein

Bilirubin; direct; indirect; total

Aspartate transaminase (AST);

Alanine transaminase (ALT);

Gamma-glutamyl transpeptidase (GGT);

Alkaline phosphatase (ALP);

-Cardiac Markers

Troponin

Myoglobin

Directorate of Quality Assurance and Accreditation

	CK-MB
	B-type natriuretic peptide (BNP)
	-Minerals
	Calcium;
	Magnesium;
	Phosphate;
	Potassium;
	-Blood Disorders
	Iron;
	· ·
	Transferrin; TIBC
	Vitamin B12
	Folic acid
	-Miscellaneous
	Glucose;
	C-reactive protein;
	Glycated hemoglobin (HbA1c);
	Uric acid;
	Arterial blood gases ();
	Adrenocorticotropic hormone (ACTH);
	Toxicological screening and forensic toxicology (drugs and toxins);
	Neuron specific enolase (NSE);
	Fecal occult blood test (FOBT)
	The main objective of the course is to make students gain sufficient expertise
	for working in medical laboratories through teaching them the basics of
Course objectives	laboratory work including safety protocols, quality control principles,
	contemporary knowledge, good attitude, medical ethics and professionalism
	basics during practice.
	- Students must attend weekly theoretical and practical lectures.
Student's obligation	- Students must take part in marked class discussions.
	Students must also attend all exams during the course.Students must gain sufficient marks (at least 50%) at the end of the
	course to pass.
Required Learning	- Printouts of weekly lectures taught at the college campus (Theoretical
Materials	and Practical).
Materials	- Reviewing of internet
	- Proper laboratory (Chemistry, Clinical Chemistry, or Biochemistry).
	- Proper instruments (Spectrophotometers, Chemical analyzers).
	- Specialized test kits Laboratory glassware, equipment
	- Laboratory glassware, equipment

		Task	Weight (Marks)	Due Week	Relevant Learning Outcome
	P	aper Review			
		Homework	5%		Encourages students to search for more detailed knowledge relevant to the topics taught at campus.
	\triangleright	Class Activity	2%		
	Assignments	Report			Report their weekly laboratory work
	ents	Seminar	10%		Enhances the preparation and presenting skills of the students
Evaluation		Essay			To make students engage more with their favorite topics
		Project			
	Qui	Z	8%		To encourage students study every week.
	Lab	. report	10%		To make students practice obeying the laboratory rules including scientific, safety, attitude, and ethics.
	Mid	term Exam	25%		To evaluate students and their achievements at the middle of the term.
	Fina	ıl Exam	40%		Final evaluation and assessment.
	Tota	al	100%		
Specific learning outcome:	_		ufficient skills b equipment i	in using Cli ncluding spe	
		and other chen	incai anaiyseis)•	

- 2- Demonstrate skills in performing tests and executing various procedures with considerations to standards and maintain quality.
- 3- Exhibit knowledge of body chemistry levels under healthy or abnormal conditions.
- 4- Properly evaluate the suitability of clinical chemistry specimens.
- 5- Properly prepare chemistry specimens for analysis.
- 6- Accurately record and report results, indicating normal and abnormal values.
- 7- Evaluate quality control results and note trends, shifts and invalid results.
- 8- Discuss recent trends in clinical chemistry.
- 9- Demonstrate speed and accuracy in the analysis of chemistry specimens for the following types of procedures utilizing only necessary supplies and within a predetermined/reasonable amount of time.

Course References:

Books:

1- Clinical Chemistry (A laboratory perspective) by: Wendy Arneson and Jean Brickell

2-Clinical Chemistry (principles, procedures, correlations) by: Michael L. Bishop and Larry Schoef

- 3-Practical Clinical chemistry by: Harold Varley
- 4-Biochemical methods by S. Sadasviam and A. Manickam

Journals and internet review

Course topics (Theory)	Week	Learning Outcome
Introduction to Clinical Chemistry, definitions, objectives, importance, and applications	1	To make students familiar with the science and its importance in practice.
Body fluids, blood, components of blood, collection of specimens, techniques of specimen managements	2	To teach students the basics of specimen collection and handling
Carbohydrates, definitions, classifications, metabolism	3	Introduction and classification of carbohydrates with their

		metabolic
		processes
Carbohydrate metabolism, regulation of glucose, disease	4,5	Details about
correlations		methods of
		glucose
		regulations and
		disease correlations
Lipids, Definitions, classifications, metabolism	6	Introduction and
Lipids, Definitions, classifications, metabolism	0	classification of
		lipids with their
		metabolic
		processes.
Cholesterol, triglycerides, lipoproteins, HDL-C, LDL-C, VLDL-	7,8,9	Understanding
C, disease correlations		cholesterol and
		lipid profile of
	10	human body
Mid-term exam	10	
Proteins, definitions, classifications, metabolism	11	Introduction and
		classification of
		proteins with their
		metabolic
	10.12	processes
Disease correlations of proteins	12,13	Disease correlations of
		proteins
Final exam 1 st trial	14	proteins
Final exam 2 nd trial	15	
Filiai exam 2 triai	13	
Practical Topics	Week	Learning
		Outcome
Introduction to Clinical Chemistry lab, lab safety rules and	1	Introduction to the
regulations		clinical chemistry
Quality control of biochemical testing, sources of errors, accuracy	2	lab Quality control
and precision, calculations	2	and detection of
and precision, calculations		sources of error in
		lab work
Basic principles of spectrophotometry	3,4	Basics for
		spectrophotometry
Collection of specimens	5	Collection of
		blood and urine
DI 11		specimens
Blood glucose test	6	Determination of
1	İ	blood glucose

		levels from blood specimens.
Lipid profile test: Total cholesterol, Triglycerides, HDL-C, LDL-C, and VLDL-C	7,8,9	Determination of lipid profile variables from blood specimens.
Mid-term exam	10	
Serum total protein, serum albumin test, serum globulins test	11,12	Determination of protein levels from blood specimens.
Urinalysis	13	Determination of different constituents from urine samples
Final exam 1 st trial	14	
Final exam 2 nd trial	15	

Questions Example Design (theoretical and practical exam): Q1/ What is the role of each of the following "compounds" in their specialized kit reagents or tests? 30 Marks

- 1- Polyvinylpyrrolidone (PVP) in calcium ion test reagent.
- 2- Creatine Kinase enzyme in serum creatinine test reagent.
- 3- Uricase enzyme in serum uric acid test reagent.
- 4- Alkaline medium in blood urea test reagent.
- 5- Ketone bodies and proteinuria in creatinine clearance test.
- 6- NAD+ in LDH test.

Q2/ Fill in the blanks with an appropriate word. 30 Marks

Q2/ Till ill the blanks with an appropriate word. 30 Marks
1- LDH-1 isoenzyme is higher in and, while LDH-5 isoenzyme is present mostly in
and
2- Serum creatinine's normal range is relatively low (0.6-1.3 mg/dL), because its readily
3- Alkaline phosphatase enzyme catalyzes the of at alkaline pH 9.0, hence the name
alkaline phosphatase.
4 results from the overproduction of bilirubin in newborn infants, and their limited
ability to it or excrete it.
5- Reabsorption of Ca2+ occurs in the proximal tubule linked to while in distal tubule depends
on
6- Very high concentration accompanied by renal failure is called uremia.
7- The modern terminology for GPT is
8- Increased are found in hemolytic disease and in defective liver cell function such as that seen
in hepatitis.
9- GOT-1 is present in, while GOT-2 is in of the cell.
10- When tubules secrete substances into the urine, GFR is clearance.
11 is synthesized in the kidneys and liver from some amino acids such as, and

12- The only biologically active form	of calcium is
Q3/ Answer the following A/ Write causes of abnormal levels o B/ Classify the types of hyperuricemic C/ Define Jaundice, write causes lead D/ What is clearance? How Creatinin	blood urea. a according to their origin and differentiate between them. ling to it.
Q1/ Choose the most correct answer	er from the given options (Only 15). 30 marks
1- Calibration of spectrophotometer i	s needed while
a. Selection of wavelength,	b. Measurement of unknown conc. solution, c. Blank, d. All of them
2- Urobilinogen is c	olored.
a. Yellow,	b. Pink, c. Colorless, d. Brown
3- Reverse cholesterol transport is the the liver by the role of	e process of up taking and transporting of cholesterol from tissues to
a. VLDL,	b. HDL, c. LDL, d. TG
4- Absence of albumin called	
a. Bisalbunimia,	b. Albonimia, c. Analbonimia, d. STP
5- Glucagon increases glucose in block	od, so it's a
a. Hyperglycaemic,	b. Hypoglycaemic, c. During fasting, d. During stress
6- The highest in concentration of pla	asma proteins is
a. Plasma cells,	b. Albumin, c. Globulins, d. Fibrinogin
7- In Beer-Lambert's law (A=Ebc), c	is
a. Cuvette's base length, b. Sam	ple concentration, c. Constant value, d.Std. concentration
8- Creatine Phosphate –	= Creatinine
	b. Bigger than, c. Equal to, d. none of them ough tubules are not reabsorbed, so they are
a. Partially cleared,b. 100911- Pre renal causes for high levels of	
a. Kidney stone,12- In viral hepatitis, immunoglobulin	b. Liver disease, c. Urinary tract obstruction, d. Renal failure

a. Decreased,	b. Increased, c. Doe	es not change, d. All	of them
13- High spgr urine is a symptom for .			
a. Hyperglycaemia,	b. Hypoglycaemia,	c. Hyperurecaemia,	d. Uremic syndrome
14 is the primary hor	mone responsible for	decreasing glucose in	the blood.
a. Insulin,	b- Glucagon,	c- Aldosterone,	d- ADH
15- Most plasma proteins are synthesi	zed in the liver and se	creted by the	in the circulation.
a. Bile,	b. Liver cells,	c. Intestine,	d. Glands
16- Hemolysis should be avoided in se a. False decreased results, them	b. Interferences to re	eagents, c. Falsely high	h results, d. all of
17 interferes the reaction	n of proteins with the	reagents in the serum	total protein test.
a. Wavelength,of them	b. Incubation time,	c. Lipemia,	d. All
18- In malabsorption, the level of imm	nunoglobulins in blood	d are	
a. Unchanged, cells	b. Increased,	c. Decreased,	d. Plasma
Q2/ Match the words/ statements in marks	n the column (A) to t	hose of column (B):	30

	COLUMN A	Your answer		COLUMN B
1	Insulin	G	A	GDM
2	Endogenous creatinine		В	Glycine, methionine, arginine
3	Pyruvate ←→ Lactate		С	Ketones in serum and urine
4	Classification of diabetes mellitus		D	4 isoenzymes
5	Blanks		Е	Mitochondrial isoenzyme
6	Hyperglycemia		F	Creatine kinase
7	Glycerophosphate		G	Entry of glucose in to
				the cell.
8	GPT		Н	Artery wall thickens
9	Visible spectrum		I	Dilution factor
10	Ammonia		J	Insoluble in water
11	Creatine		K	Pre-analytical error
12	Cholestenone		L	Absorbance
13	GOT ₂		M	Total muscle mass
14	0-2		N	Plasma cells

7 PCr 8 Specimen mislabeled R Eliminate or subtract the effects of reagent or specimen colors D Immunoglobulins S Deamination of amino acids T 380 − 750 nm Specimen + precipitant U ATP → ADP **Tanotes:**	7 PCr 8 Specimen mislabeled R Eliminate or subtract the effects of reagent or specimen colors D Immunoglobulins S Deamination of amino acids T 380 − 750 nm Specimen + precipitant U ATP → ADP **Tanotes:**	7 PCr 8 Specimen mislabeled R Eliminate or subtract the effects of reagent or specimen colors D Immunoglobulins S Deamination of amino acids Free bilirubin T 380 − 750 nm S Specimen + precipitant U ATP → ADP **Tranotes:**		ALP	0	Cholesterol oxidase
8 Specimen mislabeled R Eliminate or subtract the effects of reagent or specimen colors 9 Immunoglobulins C Free bilirubin T 380 − 750 nm U ATP → ADP Cxtra notes:	8 Specimen mislabeled R Eliminate or subtract the effects of reagent or specimen colors 9 Immunoglobulins C Free bilirubin T 380 − 750 nm U ATP → ADP Cxtra notes:	8 Specimen mislabeled R Eliminate or subtract the effects of reagent or specimen colors 9 Immunoglobulins S Deamination of amino acids 0 Free bilirubin T 380 − 750 nm 1 Specimen + precipitant U ATP → ADP Extra notes:	6	Atherosclerosis	P	ALT
reagent or specimen colors Precipitant Precipitant	reagent or specimen colors 19 Immunoglobulins S Deamination of amino acids 20 Free bilirubin T 380 – 750 nm	reagent or specimen colors Immunoglobulins S Deamination of amino acids T 380 − 750 nm Specimen + precipitant U ATP → ADP Extra notes:	17	PCr	Q	LDH
9 Immunoglobulins S Deamination of amino acids T 380 – 750 nm S Specimen + precipitant U ATP → ADP Extra notes:	Immunoglobulins S Deamination of amino acids	9 Immunoglobulins S Deamination of amino acids T 380 – 750 nm S Specimen + precipitant U ATP → ADP Extra notes:	18	Specimen mislabeled	R	Eliminate or subtract the effects of
T 380 – 750 nm Specimen + precipitant U ATP → ADP Extra notes:	T 380 – 750 nm Specimen + precipitant U ATP → ADP Extra notes:	T 380 – 750 nm Specimen + precipitant U ATP → ADP Extra notes:				reagent or specimen colors
Specimen + precipitant U ATP → ADP Extra notes:	Specimen + precipitant U ATP → ADP Extra notes:	Specimen + precipitant U ATP → ADP Extra notes:	19	Immunoglobulins	S	Deamination of amino acids
Extra notes:	Extra notes:	Extra notes:	20	Free bilirubin	T	380 – 750 nm
			21	Specimen + precipitant	U	ATP → ADP
			xt	ernal Evaluator		