

عبد الله السبيعي
مها أبو حليقة
مها عبد الله المري
سما أيوب
عبد الرحمن النملة
الجازي النعيمي
نور النعيمي
عبد العزيز الأنصاري
شهد إبراهيم
حسن ناصر النعيمي
يعقوب جاسم الجيدة
لولوة العبد الغني
علي عيسى علي جاسم محمود
علياء عيسى النعيمي الجميلة
لولوة شهيك
علي عبد الله محمد
عبد الله فخرو
سارة الكعبي



Weill Cornell Medicine-Qatar



FOUNDATION TIMES

فاونديشن تايمز

2021-2022



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INTRODUCTION



The faculty and staff are proud of the foundation students for their dedication and resilience. We wish our students success in the future."

I am delighted to welcome you to our latest issue of The Foundation Times. On behalf of the 2021-2022 Foundation class, I invite you to explore the vibrant content and creative contributions of our talented students. They are thrilled to share reflections on their learning experience, challenges, and accomplishments throughout this academic year.

Please join me in congratulating the 2022 Foundation students on their completion of the foundation program. The faculty and staff are proud of the foundation students for their dedication and resilience. We wish our students success in the future.

Best Regards,

Dr. Rachid Bendriss
*Associate Dean, Foundation, Outreach,
and Educational Development*
Professor, English as a Second Language
Assistant Professor of Education in Medicine



Meeting this class of Foundation students has been inspirational, and I look forward to seeing everyone on campus as you pursue your M.D. qualifications."

To this year's foundation students- It has been a pleasure meeting you and working with you throughout the academic year. During the course of the year, I was able to watch you develop from high school graduates into mature, pre-medical college students. At the same time, I think we were all able to share a few jokes and happy moments while studying together.

Your academic and analytical skills significantly improved over the year. Stand tall and be proud of your accomplishments. What you have learned in foundation will

serve you well in your academic career. I also want to thank you for sharing your creative sides with me. The creativity that you exhibited through writing and illustrating articles for this year's edition of the Foundation Times gave me a greater insight into each of your unique personalities. That very same creativity was exhibited in your paintings in the anatomy unit and throughout the design thinking project. Meeting this class of foundation students has been inspirational, and I look forward to seeing everyone on campus as you pursue your M.D. qualifications. I wish you all the best in your academic endeavors. Thank you for a great academic year!

Kind Regards,

Mr. Matthew Carey
Teaching Specialist

LESSONS LEARNT FROM THE CSSL EXPERIENCE

By Lolwa Shahbik and Abdulla Fakhroo

Don't forget to smile and don't give them a look – hostile
Always be attentive and look for verbal cues like a detective

Listen with your focused eyes for non-verbal signs
Listen with your ears for verbal and paraverbal leads

Listen with your nose because you smell smoke
To sense if the patient is telling the truth about quitting a habit that can cause stroke

Through the CSSL experience you were able to see things from your documented point of view
You also received feedback from the patient's documented point of view
And from the camera in the room a third person's point of view
But the **most important** of all is the patient's point of view

Listening will help you gather information with empathy
You'll never be able to really get inside your patient's head
So put yourself in the patient's shoes instead

You **MUST SHOW** empathy
Just because you think you are a nice person doesn't mean you have empathy
Just because you are a decent human being doesn't mean the patient feels empathy
You **MUST SHOW** empathy

Look them into the eye
And gently say - goodbye!



MEET THE BATCH

By Noor Alnaimi



Case 01: Noor Alnaimi

An 18-year-old female was admitted to Cornell due to her desire to change people's lives and at the same time challenge herself and gain knowledge. Her accomplishments are winning the gold medal in both The International Biology Olympiad and The Excellence Award. She is often referred to as the queen of Mars due to an inside joke that resulted in serious consequences.



Case 02: Sama Ayoub

A 19-year-old female was admitted to Cornell due to her desire to combine her academic strength in the sciences with her compassionate nature in hopes of contributing to the greater good. One of her biggest accomplishments is winning the national science fair and competing at (Intel ISEF), where her project on autism was the first in Qatar to win a special award. She is known for her tendency to arrive at Cornell before security does.



Case 03: Yaqoub Aljaidah

An 18-year-old male was admitted to Cornell due to his desire to learn more about the wonderful creation of Allah, the human body. One of his biggest accomplishments is that he memorized 1/3 of the Quran. Additionally, he would literally do anything to get a free large Oakberry smoothie.



Case 04: Abdulrahman AlNamla

A 17-year-old male was admitted to Cornell due to his love for complex challenges. He is known to be the youngest male in the class and gets his stickers from the dark web.



Case 05: Jane Manyama

An 18-year-old female was admitted to Cornell due to her curiosity and interest in human biological systems. Her biggest accomplishment is winning The Founder Education Award. Her name often changes to Jumana when she suddenly speaks Arabic.



Case 06: Abdulaziz Alansari

An 18-year-old male was admitted to Cornell because medicine runs through his veins. He is known as Dr. Sheila's favorite student.



Case 07: Ali Mohd

An 18-year-old male was admitted to Cornell due to his love for studying. His biggest accomplishment is that he once drove 251 km/h, and he is still alive. If there was a major that required car knowledge, Ali would be making billions.



Case 08: Al Jazi AlNaimi

An 18-year-old female was admitted to Cornell due to her desire to fulfill her dream of giving people the final string of hope. She is proud of who she is today and the hardships she overcame get here. She is known to be a spontaneous person and doesn't care what others think.



Case 09: Hassan AlNaimi

A 19-year-old male was admitted to Cornell due to his desire to make his parents proud. He aspires to make a positive difference in the world by helping those around him.



Case 12: Abdulla AlSubai

An 18-year-old male was admitted to Cornell due to his desire to save people's lives. His desire to help people stems from this verse in the Quran, "and he who saves a life shall be as if he had given life to all mankind." His biggest accomplishment is that he won The Best Goalkeeper Award at a school football tournament in eighth grade. He is known to be the Android guy, and he is proud of it.



Case 10: Maha Almarri

An 18-year-old female was admitted to Cornell due to her desire to be the first female doctor in her family. Something she is proud of is that she once witnessed a live baby delivery and held a placenta. She is known to have a timer set for her two-minute naps.



Case 13: Abdulla Fakhro

An 18-year-old male was admitted to Cornell due to his grandmother's influence on him and his desire to understand more about the human brain. His biggest accomplishment is completing high school and joining WCM-Q. He is known for his uncontrollable laughter.



Case 11: Shahad Ibrahim

A 20-year-old female was admitted to Cornell due to her desire to become a neurosurgeon since it is the most challenging yet equally rewarding career path, which she strives to follow. She is proud of all her small and big wins, and she is especially proud of being successful enough to draw a smile on her mother's face every day. Shahad is known in the class from the sound of her heels.



Case 14: Sara Alkaabi

A 17-year-old female was admitted to Cornell due to her desire to help people and improve their quality of life. She is known to be the pillow girl.



Case 15: Maha Abu-Holayqah

An 18-year-old female was admitted to Cornell due to her desire to save up to buy a pink Bentley. She is often referred to as Maha AB and known to be the class's meme. She has the most iconic laugh.



Case 18: Lolwa Shahbik

An 18-year-old female was admitted to Cornell due to her interest in the field of orthopedics. Her greatest accomplishments are winning international tournaments in Morocco, Malaysia, and Hungary and winning the Albairaq competition by designing a project that helps visually impaired people. She is known as "bulbul" because of her unexpected British accent that surprises you every time.



Case 16: Ali Mahmoud

A 20-year-old male was admitted to Cornell due to his desire to fulfill his dream by acquiring sufficient medical knowledge to be able to help others. One of his biggest accomplishments is fulfilling his duty at the national military academy. He is known by his occasional late arrival causing him to attend only the last five minutes of class.



Case 19: Noora Aljaber

An 18-year-old female was admitted to Cornell due to her desire to follow in her mother's footsteps and become a successful doctor. She is known as the special friend due to an inside joke that resulted in serious consequences.



Case 17: Alyaa Altamimi

An 18-year-old female was admitted to Cornell due to her desire to be a doctor and improve the health sector in Qatar. One of her biggest accomplishments is that she achieved first place in The Qatar National Research Competition. Additionally, she said she never lies, which is the biggest lie.



Case 20: Lolwa AlAbdulghani

An 18-year-old female was admitted to Cornell due to her desire to make her dreams of being a successful doctor come true. Her biggest accomplishment is being alive to this day. She is known to be the mom of the group.

REFLECTION ON THE PLAGUE

By **Abdulrahman Al-Namla**

Resilience is shown throughout *The Plague* by Camus, which significantly influences a doctor's job. As a current pre-medical student, a future doctor, and whatever type of health-related occupation I will take part in after that, I realize the importance of resilience and standing my ground throughout my professional life. This resilience is essential because the medical field is one of the most stressful jobs in society today; doctors and nurses have to deal with at least twenty different patients every day. Moreover, trying to help their patients is the least of their worries since they have to write their medical reports and prescriptions. They also have to keep up with medical literature whenever they have the chance and deal with their own personal issues as well. Even though I still have not started my medical school years, I feel like I have to go through studying and solving assignments every day and push through to the best of my ability. This trouble does not make me ungrateful for my place; it is simply more than what I have ever faced in school. However, realizing the problems I am currently facing and the troubles I will face in the future, I know that I have to ground myself and embed resilience deep in me.

Taking a much different path than Nietzsche's nihilism, Camus believes that we as humans should make up our own meaning for life. Although there is no inherent use for us, Albert Camus wants us to embrace our absurd existence and live every day for each other with each other. His humanist beliefs encouraging readers to be resilient are showcased clearly in his book, where many of the characters followed their roles until the end. For example, Dr. Rieux remained a resilient professional throughout the plague. Grand stood his ground and sacrificed himself to be the hero, and Cottard was resiliently crazy until the end.

References:

Brugel, P. (1562). *The Triumph of Death*. Retrieved from <http://hosted.lib.uiowa.edu/histmed/plague/plaguedoctor.jpg>



(Brugel, 1562)

FOUNDATION STUDENTS' QUOTES

By Maha Al-Marri



LOLWA AL-ABDULGHANI

“
Too busy to find a quote”



MAHA AL-MARRI

“
Doctor, I have a question:
explains the whole lecture
correct?”



SHAHAD IBRAHIM

“
Let's go get coffee.”



YAQOUB AL-JAIDAH

“
“Breathe in, breathe out.”



ABDULAZIZ ALANSARI

”
فنااااااان.



NOOR AL-NAIMI

“
The ceremony is in Mars.”



ABDULRAHMAN AL-NAMLA

“
Aslan 3adi.”



MAHA ABU-HOLAYQAH

”
يا دكتوووووورررر.



SAMA AYOUB

“
Wai2, wha2?”



SARA AL-KAABI

“
FOR YOU!”



HASSAN
AL-NAIMI

يعطيك العافية.”



NOORA
AL-JABER

“
I am soooo
tired.”



ALYAA
ALTAMIMI

“
I never lie.”



AL JAZI
AL-NAIMI

“
I’m already on
my 7th Redbull
today, and
doing this was
so takleef.”



ABDULLA
FAKHROO

“
God this is
painful.”



ALI MOHD

“
Nice 🍷”



LOLWA
SHAHBI

“
The quote
above is a lie.”



ALI
MAHMOUD

“
Tatakae.”



JANE
MANYAMA

“
Ms. girl, I
should’ve gone
to the mall.”



ABDULLA
AL-SUBAI

“
This is
madness!”

THE IMPORTANCE OF CLINICAL SIMULATION LABS IN MEDICAL SCHOOLS

By Jane Manyama and Maha Al Marri

Imagine visiting a doctor who interacts with patients with neither sympathy nor care. As a patient, you would feel uncomfortable sharing any of your health problems with the physician. This is where clinical simulations come into the picture. Clinical simulations are crucial for proficient clinical practice in medical education. Simulations are an innovative approach that allow medical students to learn from their mistakes to prevent any potential future debacles, as they provide a controlled environment whereby skills are developed and practiced to high standards. Medical schools are behooved to incorporate simulations into their curricula to train all medical students to possess four main skills -communication, cross-cultural communication, interpersonal communication, and professionalism- before becoming a physician.

Firstly, simulations in the medical curricula facilitate the improvement of communication skills with patients. This is fundamental for the development of meaningful and trustworthy relationships. Particularly, there is importance in verbal and non-verbal communication. Verbal communication in the medical sense refers to physicians utilizing the right words in a reassuring and formal manner when interacting with the patient. A common misconception is that people assume non-verbal communication is inferior to verbal communication; however, non-verbal communication is critical for influencing patient satisfaction because it encompasses the very first impression the patient perceives about the doctor through body language and facial expressions.



While non-verbal communication skills are important, para-verbal skills must also be taken into consideration, particularly in cases where doctors need to break bad news; therefore, physicians are obligated to pay attention to the tone and pitch of their voice when delivering messages. As we entered the clinical examination room during our CSSL experience, the woman's face was not florid; her distant eyes covered by her double furrowed brows suggested uneasiness as she appeared to be as delicate as a feather while she woefully chanted in a quivering voice, "I just want the pain to go away." Softly, we reassured her, "We'll do the best we can." Thus, throughout the encounter, we ensured that we made eye contact, listened attentively, communicated effectively, and asked relevant questions that would provide significant information about the patient's health concerns.

Communication is also comprised of cross-cultural communication. This is essential for medical students as they can incorporate ways to deliver operative healthcare services to patients from different cultural backgrounds. This is performed through the delivery of efficacious health care which will ensure the safety of multicultural patients. With records from the public critiquing unprofessional behavior from physicians or medical students, it is easy to see how a doctor's behavior or attitude could be perceived as unprofessional in cross-cultural doctor-patient interactions. Therefore, physicians should be culturally competent to avoid turmoil. Referring back to our clinical encounter, we observed that the standardized patient was in scathing pain. Her unfocused, glossy eyes manifested that she was about to break down at any moment. Her impuissant facial expression, hunched posture, and continuous rocking movements, like a toddler being swayed on a crib, evinced her agony. Witnessing

this alerted us to offer reassurance through contact; however, recalling the outlined points about cultural differences made us vigilant and considerate of the patient's bubble as she could have become more uncomfortable with our actions. Consequently, we took the spatial distance between us and the standardized patient into consideration.

Additionally, interpersonal communication is another significant component all medical students should acquire during their clinical experience. Interpersonal communication refers to the less tangible aspects of communication such as timing and tone as it is less verbal and deliberate than task-oriented communication. Furthermore, interpersonal communication is a spontaneous expression of inner feelings, for example, empathy, attitudes, and values; in fact, the doctor's response will be shaped by each of these skills during the clinical visit. For instance, during our encounter, we analyzed the susceptible state of the standardized patient and how she was on edge. As a result, Maha abruptly asked her, "How are you feeling?" We noticed that she flinched as if Maha's tone was sharp enough to pierce her heart; therefore, we made sure that our tone, pitch, and the way we approached the patient were appropriate to convey to her the image that she was in a safe and sheltered bubble. Ultimately, interpersonal communication is vital as it contributes to the patient-doctor relationship; hence, this decreases frustration and conflict.

Lastly, professionalism should be developed during simulations as it plays a role in eschewing unscrupulous behavior. Medical professionalism emphasizes a set of values, behaviors, and relationships that support the patient's trust in doctors. Prior to the patient encounter, we were professionally dressed

in formal, pitch-black attire. Anxiously, we knocked on the door. Our hands shivered as if we were in a cold storm. "How will we act professionally?" we inquired quietly. We strutted into the clinical examination room and addressed the patient professionally. "Good morning, how are you today?" The patient looked as fragile as a wilted flower, completely impotent. We made it clear in the beginning that all information would be confidential and not shared with anyone; however, that still did not ease her anxiety, as it was evident in her dubious eyes covered with a layer of tumult. Thus, we explicitly introduced our purpose as medical attendees covering for the physician. Hearing this slightly eased her mind and enabled her to share her health miseries.

In conclusion, the clinical simulation impacted both of our lives as it gave us a clear perspective in terms of difficulties and the balance that needs to be maintained when dealing with patients from distinct backgrounds. Consequently, prior to becoming a physician, medical schools should include simulations in their syllabus to teach four crucial skills: communication, cross-cultural communication, interpersonal communication, and professionalism. Medical schools should integrate these simulations as they evoke the importance of fundamental professional principles. Although a lot of people are unaware of this, medical students need to enhance these skills since they aid in creating a stable patient-to-doctor relationship.



MEET THE BATCH: BEYOND MED SCHOOL

By Lolwa Shahbik

Running away from our sometimes stressful reality



Hassan's favorite hobby is going camping in the desert. He made it bold and clear when he turned our English class into a Kshta (camping zone).



A med student who can also ride on horseback and bake, **Sama** can really do it all!



Yaqoub: very sporty and goes cycling
Also **Yaqoub:** stays at home glued to his PS4



Ali Mahmoud was supposed to express his emotions after the cadaver experience through painting; instead, he painted himself daydreaming in English.



Jazi has a beautiful artistic side... that only comes out during classes.



Although **Shahad** can draw a fantastic brain, her brain cannot function without three cups of coffee a day.



If you ask **Al-Namla** and **Subai** where they are anytime of the day, 9/10 of the time they'll say, "the gym."



Ask **Ali Mohd** anything about cars or football and he will give you a three-hour lecture without getting tired.



Med school stress can bring out unexpected hobbies. **Fakhroo** copes through repairing electronics and shooting.



Maha's favorite hobby is to cry over chemistry; however, she plays the piano from time to time.



Sara may enjoy a good pillow fight, but playing the oud is truly her cup of tea.



Lolwa Shahbik never takes her anger out on people; instead, she picks up a tennis racket.



Instead of building her future, **Alyaa** is building Legos.



Noor's stacks of books are only read in class.



Noora is a Picasso by day and a baker by night.



Jane and **Maha** claim that they love reading, but it's their excuse to avoid you.



Abdulaziz is at the top of the class, and he is also the best in padel.

BIOLOGY LAB

By Abdulaziz Alansari

Biology labs are critical components of our education because they assess our ability to apply lecture concepts to real-life contexts. Furthermore, biology labs allowed us to observe firsthand the corrections to misconceptions from the lectures and misleading diagrams. For example, in class, we are used to seeing a cross section of an embryo; therefore, most of the students thought of the embryo as three lines on top of each other. However, using something as simple as playdough enabled us to understand how the three layers transform into the three dimensional embryo.

Afterwards, we were exposed to the cat dissections, where each pair of students had a unique cat to dissect. Everyone had mixed feelings of joy, nervousness, and excitement, and thankfully, no one fainted in the first session of the cat dissection. As we progressed through the course, we were able to observe many fascinating structures during the lab sessions. The cat dissection gave us an opportunity to learn various dissection techniques, and it gave us a perfect example of what to expect in our future human dissections. This is evident in how we were able to identify numerous structures during our anatomy lab visit, as the human cadavers surprisingly had structures that were extremely similar to what we had observed in the cats. Overall, the biology labs created an environment where students were fully immersed in their education and were able to express their passion towards their medical careers.

Finally, we would like to thank our biology teachers and professors for all their kindness and guidance.



Maha treating Oreo (the cat) as her own baby



When Lolwa Shahbik, Jane Manyama, and Shahad Ibrahim realized that they are shorter than their cat



Sama delivers five kittens three months later



Sara Al Kaabi and Maha Al-Marri with their treasured heart



Dr. Clare introducing Pablo (the cat) to Hassan Al-Naimi and Abdulla Al-Subai



A team of future doctors discovering how to safely create a living fetus made of playdough

HOW THE REACTION STARTED

By *Yaqoub Jassim Al Jaidah*

When we first heard the word chemistry, we all thought about dry ice, liquid nitrogen, and elephant toothpaste. These are the typical fun chemistry experiments we occasionally see in real life and on online social media platforms. However, this was not the reality we experienced in the chemistry labs during the fall and spring semesters. Before being taught about how chemical reactions begin, we needed to understand why the chemical reactions occur.

In the last lab of the fall semester, we had a chance to perform the aspirin synthesis experiment. Apart from learning, a primary goal was for students to enjoy the labs. Rather than critiquing our technique, we were taught the proper way of handling the glassware. One of the most fun labs by far was the copper cycle. Through this lab, we observed the various copper compounds that could be differentiated by their unique colors.



Last but not least, we think that we were taught the most during the titration lab. Performing a titration required a lot of skill and technique. We were taught numerous lab techniques that range from how and when to use particular glassware to determining the endpoint and how it differs from an equivalence point. However, most importantly, we learned how to behave in a lab. Moving without caution was not tolerated as the lab has strict safety rules that must be followed. These rules came in handy as none of the 21 students were injured in the lab.

The situation was different for us when beginning the spring semester. Rather than covering the basic techniques of the lab, we were obliged to master them within the second week. We reinforced our titration, glassware handling, and cleaning skills weekly. The process was fun as it made us reflect on our basic techniques that we learned in the previous semester and helped us discover effective shortcuts in the method. Fundamentals aside, one of the more challenging labs in the spring semester was the thermodynamics lab. We used a calorimeter to calculate the enthalpy change for a chemical reaction. In this lab, we used most of our techniques to get the lowest percentage error for the enthalpy change.

In comparison, the spectroscopy lab was the best for most students. This lab taught us how excited electrons produce different wavelengths with multiple varying colors. In this experiment, we were able to use a spectroscope and a spectrometer and perform a flame test. While performing the flame test, we were lucky to observe the different colored flames that resulted from exciting the electrons in the outer shell of the cations.

In contrast to the fall semester, in the spring we had to occasionally submit reflective lab reports analyzing our percentage errors and techniques. This was beneficial to many students as the reflections enhanced their techniques on a weekly basis.

Finally, as the class of 2028, we would like to thank Drs. Majda, Sheila, Simeon, Ihor, and Ana for their substantial support during the lab sessions. We learned various techniques and got to perform multiple experiments. It was a pleasure studying under them for all of us.

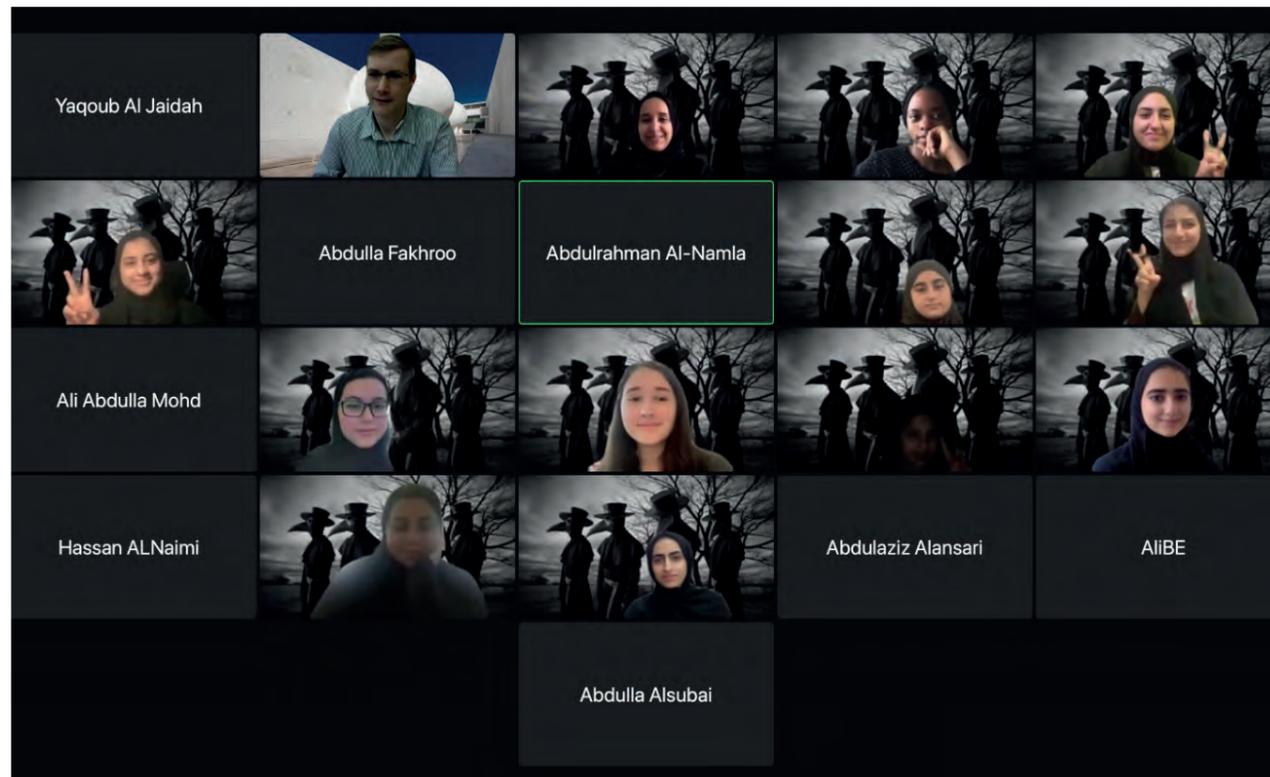


ENGLISH FOR ACADEMIC PURPOSES

By Maha Abu-Holayqah

Reading Lab

Reading Lab with Mr. Matthew Carey gave foundation students the chance to explore complex situations and ideas. Texts in the reading lab varied from texts that gave students a glimpse of the medical career by reading the words of doctors like Peri Klass, to texts that related to the COVID-19 situation with *The Plague*. The students not only improved their writings by reading, but they also enriched their knowledge by learning new vocabulary words each week. Students discussed the readings in a Harkness discussion, which often facilitated the exploration of concepts related to ethics and morals. The discussions gave the students opportunities to share their thoughts and discover others' ideas while demonstrating their understanding of the topics.



Writing

Writing with Dr. Rachid Bendriss was full of adventure. The course improved the students' writing and speech in English. The difference between their writing in the beginning of the course and the end is phenomenal! Furthermore, it taught students confidence in public speaking through somewhat infamous, yet instructive presentations. It also gave the students a sneak peak of what medical school has in store for them by visiting departments such as the Anatomy department and CSSL. Along with the visits, students

engaged in online discussions to explore the literature associated with each specialized activity, for example, the ethics involved in cadaver dissection. Finally, the Writing course facilitated the beginning of many new friendships through grouping and pairing students on multiple projects. Dr. Bendriss often took students on mini trips to lighten their spirits. The class had a picnic in the green spine and went to the "Far from Home: Arab Immigrants in the U.S." Exhibition in Qatar National Library.





Information Fluency

Information fluency with Ms. Reya Saliba taught students the most important part of writing, how to research and how to avoid plagiarism. Everything that was taught in IF class will be needed in future papers students write, from citing to annotated bibliographies, to writing a complete literature review! To make sure the material was understood by the students, Ms. Saliba usually had many activities at the end of each class which made the IF class more fun.



MOLE DAY

By Jane Manyama



Mole Day is an annual celebration in the chemistry world that observes and commemorates an essential unit in chemistry, Avogadro's number (6.022×10^{23}), which is a hypothesis that was proposed by Amadeo Avogadro known as Avogadro's Law.

On October 24th, Mole Day commenced with attending and observing a chemistry demonstration performed by Dr. Roach. Following the demonstration, most of the foundation students were involved in the organization and provision of food, each with a representation of Avogadro's number, which everyone was invited to share.

Finally, we concluded the event by running various competitions whereby team members answered numerous chemistry questions to win different prizes such as Cornell merch, chemistry stickers, and more.



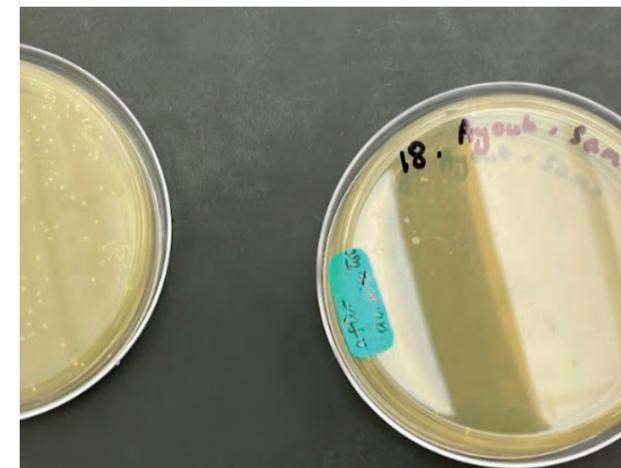
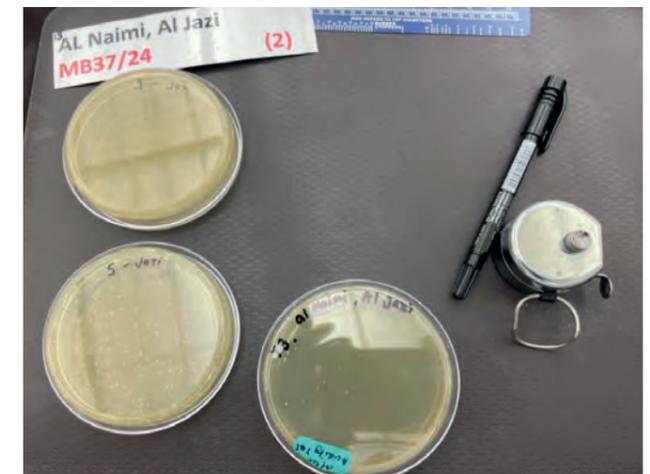
PROBIOTICS - YOGURT LAB

By AlJazi Al Naimi

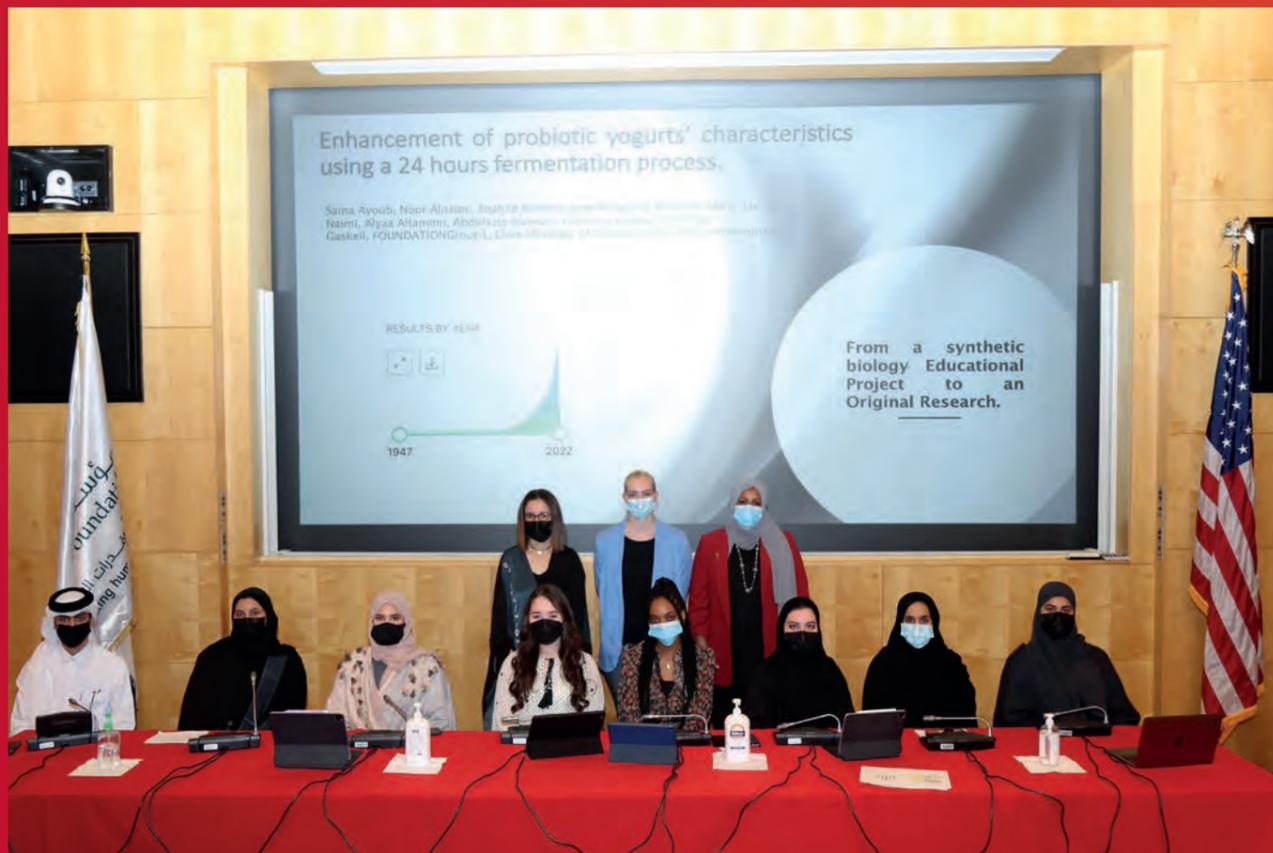
Are you considering making your own yogurt? The foundation class of 2022 was dedicated to experimenting with the best combinations of locally produced yogurts that would provide the most concentrated probiotics with the least resistance to antibiotics. Moreover, due to the developing diversity of the gut microbiota, it will be capable of combatting the majority of pathogens it encounters.

In Introduction to General Biology, students acquired an understanding of the structure and functions of cells as well as the diversity of microbiology. Towards the end of the course, students were asked to apply their knowledge of microbial growth, gut microbiota, and lab skills to develop a range of yogurts which would then be analyzed in an extensive study.

We worked with Dr. Ghizlane Bendriss, our biology professor, to develop the best probiotic product. In order to create the probiotic yogurt, several steps were necessary. It took several days to complete the process. Students were assigned a starter type (Baladna, Raw'aa, Maha, Activia, or Organic yogurt), a specific temperature (37°C or 42°C), and a specific time frame (8 hours or 24 hours). To begin, we created our yogurt and allowed it to incubate for the specified time period. Afterwards, we conducted an acidity test, counted bacterial colonies, and determined the type and shape of bacteria we had. Our research was able to identify the antimicrobial resistance of each strain, allowing us to select the best.



We examined numerous variables that make a probiotic yogurt more effective throughout the session, which was advantageous. In addition, many happy memories were formed in the lab, such as students burning their milk during pasteurization, under diluting their M17 broth, and the exhilarating feeling of peering under the microscope and guessing which species of bacteria our colony belonged to. These are the memories that will never leave our hearts and brains because we have gained valuable experience with laboratory equipment and skills and techniques that will be useful in the future. The findings revealed a general understanding of the optimal yogurt combination from a local source. At the same time that the author is writing this article, a group of students is currently working under the guidance of Dr. Ghizlane on a research paper based on the information gathered.





SLEEP PAGE

By Maha Abu-Holayqah

Part of being a university student is having a fixed sleep schedule. As a foundation student in a challenging pre-medical program this is extremely difficult to do! In fact, Maha Ab overslept three times and missed half her classes each time. Hard-working foundation students spend sleepless nights doing their assignments, and sometimes the only time they have for sleep is when they are in university. Our famous class sleepers are non-other than Jazi and Lulu Shahbik! They have the ability to sleep anywhere and anytime. The class's favorite place to sleep in is the grey area and LH4! The girls' favorite thing to do is take selfies with the sleeping person.

Trying to get 8 hours of sleep in 30 minutes



"I'll just rest my eyes for a minute."



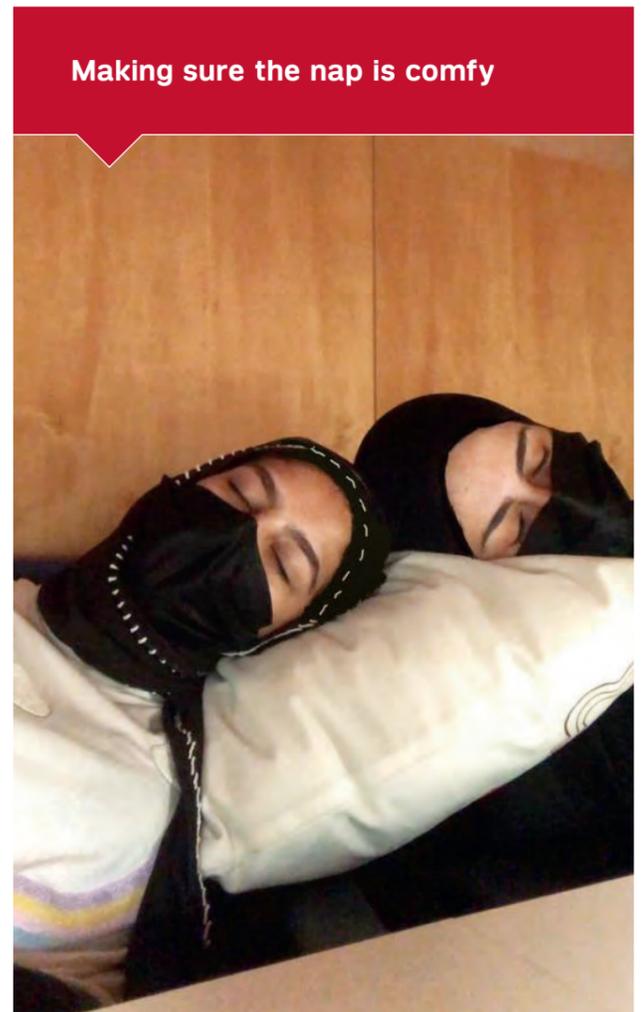
Lulu Shahbik's infamous sleeping pose



Sleeping like a baby knowing she has two post labs due Sunday



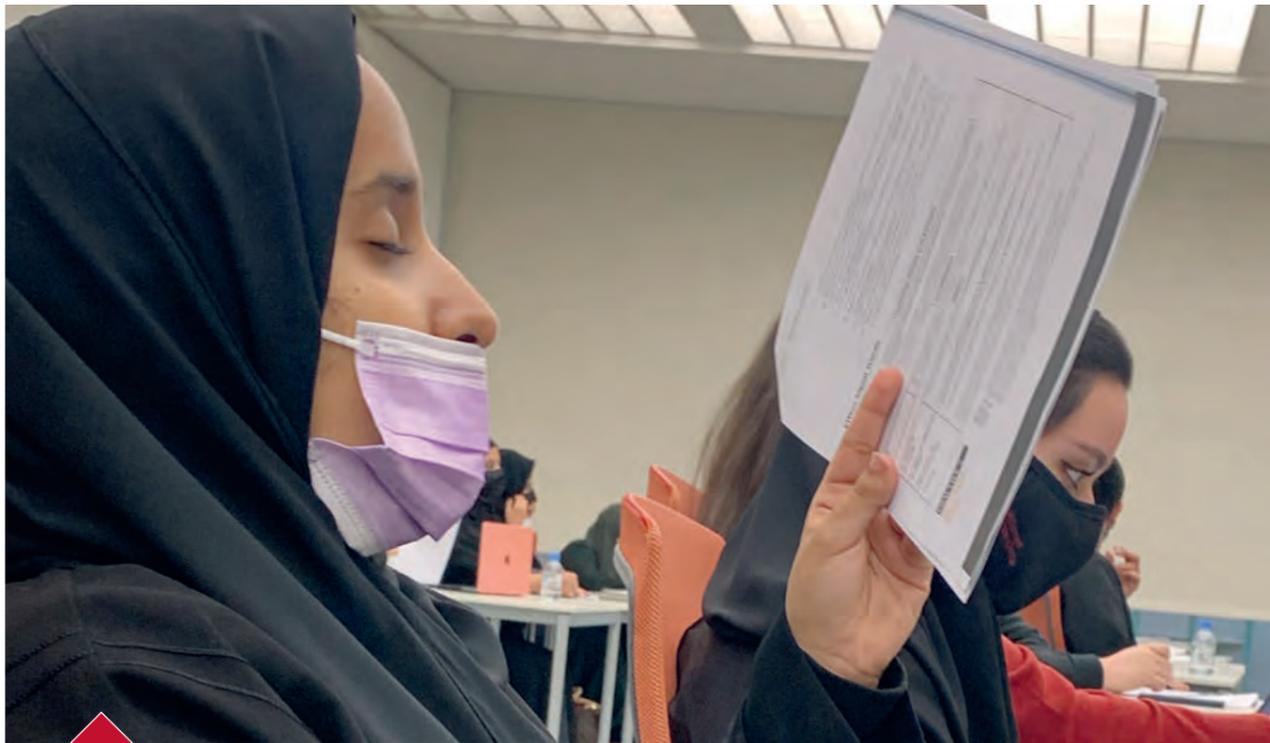
Sama goes to Cornell at 6 am to sleep.



Making sure the nap is comfy



They always say, "the front row gets an A," but they didn't specify what exactly is done in the front row.



Maha AlMarri trying to hide the fact that she slept for the first time.



LIFE- CHANGING EXPERIENCE

By Sara Alkaabi

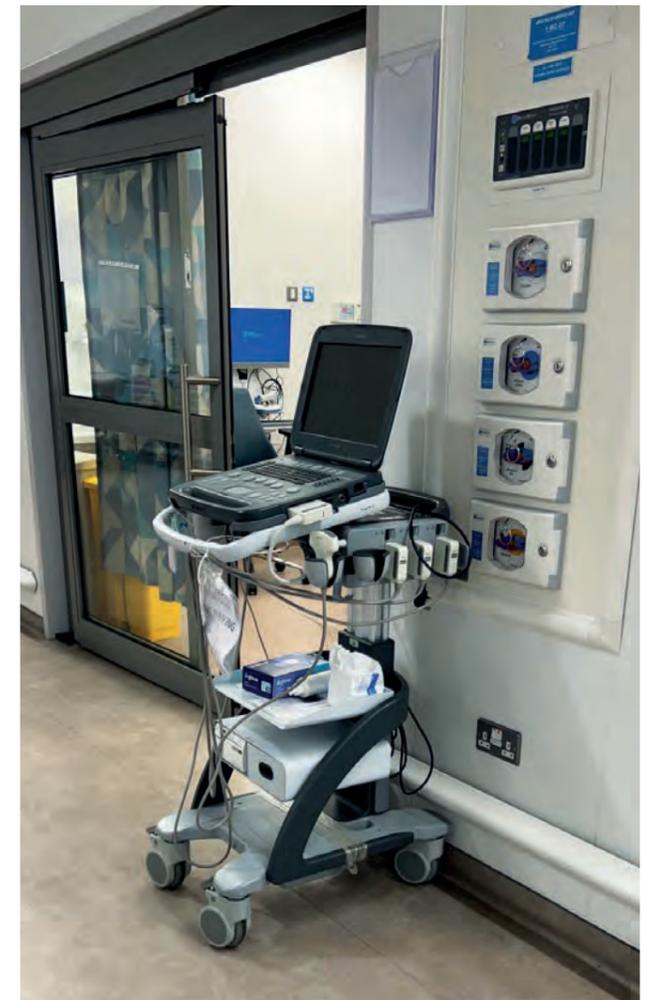
After the automatic door slowly opened, I entered the building wearing a white coat and entered the place that some people never leave and where their souls are lifted to the skies. A quiet waiting room filled with the breath of patients appeared before me. The beeping of the machines echoed through me as I walked the long hallways painted with the beautiful colors of the sky. That was when I decided to pursue medicine after being exposed to the emergency room, the pediatric respiratory unit, and shadowing doctors.

The first visit was an eye-opening experience. As I entered the hospital I was welcomed with open arms and a big smile by the doctors and nurses. As we were approaching the different rooms, one of the nurses turned and looked at me with a mischievous look and said, "Are you ready to commit to beginning a doctor?" I responded, "I came

here to see if I could do that." She chuckled and said, "I don't think you can after visiting the emergency room." I was confused and lost about what she meant, "Do I actually want a career as a doctor?" I thought to myself. Immediately upon entering, I was overwhelmed by chaos. Multiple beeps came from different directions, and there was a foul smell that I could not identify. As I continued into the room, I heard a woman hysterically crying and panicking. Her brother was breathless and had an abnormal heartbeat. She cried, "MY BROTHER DIED, MY BROTHER, DIED." From the corner of my eye, I saw his pulse become irregular. More information was not permitted. So many things happened at once that I was overwhelmed and confused. All through this time, I kept hearing the nurse's voice and her words over and over in my head. However, this did not sway me from becoming a doctor.

My next visit was to the pediatric respiratory unit. There was a significant difference between it and the emergency unit; it was much calmer and less chaotic. In contrast to the emergency room, the feelings I got were similar if not stronger because here I was able to relate to the kids since I am a kid myself. As soon as I entered the rooms, the doctor instructed me to use hand sanitizer after exiting each room and to wear a mask and gloves. Though it made sense to do so, I was confused as to why it had to be done after every room. Should it not be fine if I did it just once since I was wearing gloves? The doctors explained to me, the precaution was not just for my safety but also for the health of the patients since a virus would have the potential to be spread from one room to the next and disrupt or even end their lives. The thought of ending someone's life is already terrifying, but ending the life of a child would make me cry. Consequently, I always sanitized my hands and did not come into physical contact with any of the children.

While I was visiting the rooms, I saw kids who were intubated and had wires entering their throats and arms, tying them to the hospital bed and restricting their movements. Their eyes filled with tears, showing a pain that they could not express, as this had become their norm. A young beautiful girl named Doha was watching Peppa Pig on her iPad as she laid on her bed. I could feel my eyes filling with tears as I kept remembering how I used to run around and be free when I was her age. She was not able to speak due to the tubes in her throat, but her eyes could express millions of words. I felt it was my responsibility to help her and all these innocent children.



This work experience was what grounded my plans to be a doctor. By discovering different departments and observing what doctors must do every day, I gained a deeper understanding of medicine. It showed me what capabilities a doctor needs: diligence and mental strength. As a result of my visit to the pediatric department and emergency room, I learned many lessons about life. Despite the chaos in the emergency department that startled me, I learned how to remain calm and collected. I was able to gain a greater understanding of how strong-willed a doctor is when they look at people in pain. It was an experience I will never forget.

WHO'S WHO?

By Lolwa Al-Abdulghani



01



02



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34

- ANSWERS:
1. Sara Al Kaabi
 2. Shadid Ibrahim
 3. Abdulaziz Alansari
 4. Alyaa AlTamimi
 5. Abdulla Fakhroo
 6. Sama Ayoud
 7. Maha Abdulla Al-Marr
 8. Lolwa Al-Abdulghani
 9. Noora Al-Jaber
 10. Ali Abdulla Mohd
 11. Ali Mahmoud
 12. Jane Manyama
 13. Abdulla Al-Subai
 14. Maha Abu-Holayqah
 15. Noor AlNaimi
 16. Hassan Nasser Al-Naimi
 17. Abdurahman Al-Naimi
 18. Sara Al Kaabi
 19. Lolwa Shahdik
 20. Al Jazi Al Naimi
 21. Dr. Rachid Bendriss
 22. Mr. Matt Carey
 23. Ms. Reya Saliba
 24. Dr. Ghizlane Bendriss
 25. Mrs. Christine Gaskell
 26. Dr. James Roach
 27. Dr. Clare McVeigh
 28. Ms. Padma Sarada
 29. Dr. Sheila Qureshi
 30. Ms. Christina Esteban
 31. Dr. Anna Santos
 32. Dr. Ihor Kulai
 33. Dr. Majda Sebah
 34. Dr. Daniel Renzi



Weill Cornell

Medicine-Qatar

MEDICAL CAREER SEMINARS

A GUIDE TO OUR FUTURE FROM THE EXPERTS

By *Abdulla Fakhroo*

After a long Tuesday, the foundation students meet up with an expert from a specialized medical field. The seminars were a gateway for the foundation class to engage with experts ranging from WCM-Q alumni, post-foundation alumni, faculty, and the dean of WCM-Q. The experts discussed their stories and journeys through medicine which greatly inspired the foundation students to further pursue their medical careers.



Dean Prof. Dr. Javid Sheikh, MD, MBA

Dean of WCM-Q
Professor of Psychiatry



Dr. Aicha Hind Rifai

Assistant Professor of Clinical Psychiatry
Medical Education



Dr. Mohammed El-Debs

Former Foundation Student
Plastic Surgery Resident, HMC



Dr. Mason AlNouri

WCMQ Alumni
Pediatric Orthopedics
Pediatric Spine Surgeon
Assistant Professor at Hirosaki University



Dr. Amine Rakab

Assistant Professor of Clinical Medicine
Assistant Dean for Clinical Learning
Consultant in Internal Medicine, HMC
Consultant in Acute Care Medicine, Sidra Medicine



Dr. Shereen Darwish

WCM-Q Alumna
Pediatrics



Dr. Muneera Ali HH AIMuhannadi

Consultant in Family Medicine



Dr. Ahmad Al-Qahtani

Ophthalmology Resident, McGill University
Former Foundation Student



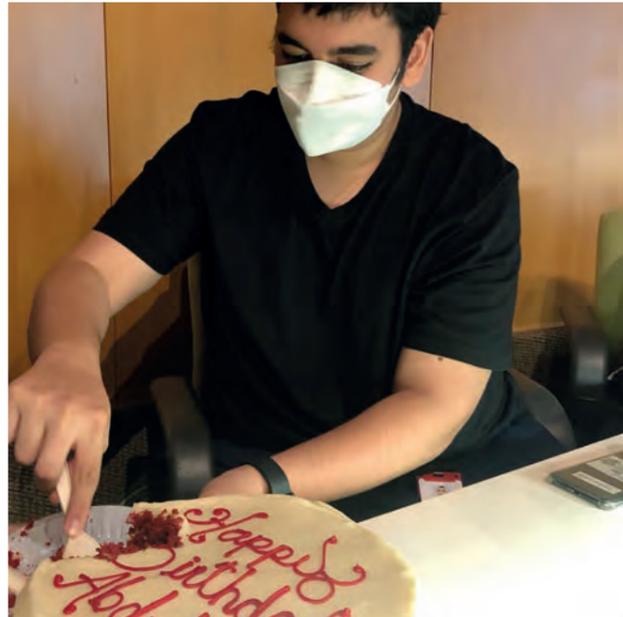
Dr. Mohamud A. Verjee

Assistant Dean
Associate Professor of Family Medicine in Clinical Medicine
Consultant - Family Physician

FOUNDATION BIRTHDAYS

By Maha Abu-Holayqah

The Foundation class had a tradition of cutting the cake with a spoon. The tradition started as an unfortunate event, but it eventually became very dear to their hearts.



Even though the class would sometimes be busy with work, they always found time to celebrate each other's birthdays. Sama's birthday was celebrated with a surprise picnic in winter break. Maha Ab and Shahad's birthdays were right before finals, whereas Ali Mohd and Abdulaziz's birthdays were in the middle of midterms.

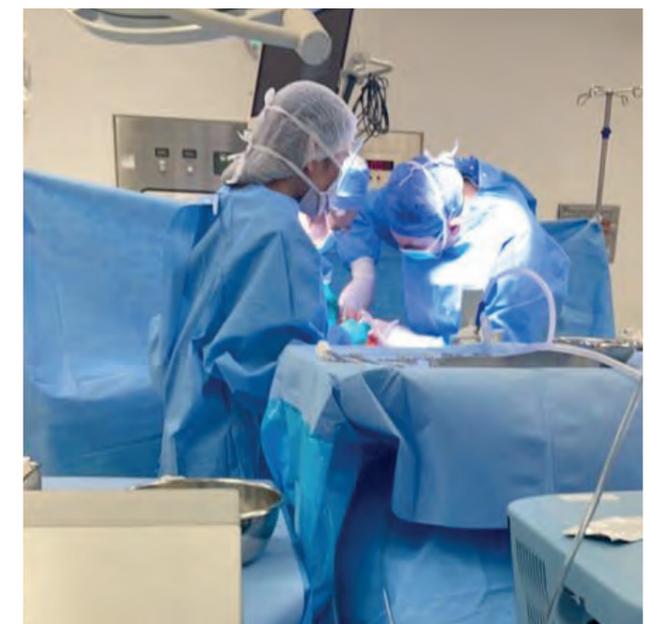


FROM TEXTBOOK TO REALITY

By Shahad Ibrahim



During the winter break, we lived the dream of shadowing within our field of interest, which was an eye-opening and enlightening experience. We were allowed to shadow physicians at Hamad Hospital and Sidra and explore our areas of interest. Although Covid-19 played a role in some restrictions, the Premedical Division's tremendous efforts granted us unrestricted observerships, and kept us from being limited to specific departments. The majority of the foundation class students were involved in the observerships and were intrigued by the opportunity to deepen their knowledge of their fields of interest. Being accepted into various departments, including but not limited to trauma, emergency, and neonatology, granted us an insight into other departments through the eyes of our classmates. This experience has not only allowed us to assess our future plans, but it has also piqued our interest in the other departments that our classmates explored. Every day, after the rounds were done with the physicians, we discussed the complexity of the observed medical cases. These discussions aided in the consolidation of our scientific understanding of the conditions as well as their implications. One of the key takeaways shared by the foundation class was the significance of developing a holistic approach to successfully diagnose patients. In addition, we learned the value of showing empathy, perceiving people as dynamic, and viewing a patient beyond their illness. Stepping into operating theatres, NICU wards, and even holding placentas caused us to contemplate and ponder the complexity and beauty of our future professions. This experience served as a motivator, encouraging us to overcome obstacles and persevere in the face of adversity to achieve our ultimate goal of benefiting humanity and becoming valuable contributors to our society.



OBSERVERSHIP IN PEDIATRIC SURGERY

By Al Jazi Al Naimi

Looking back at my experience in the pediatric surgery department of Sidra Medicine, I understand why surgeons have it so tough. During my time there, I experienced joy and embarked on paths I had not explored before. I hope that these paths become my daily routine.

"Your next patient is ready, Doctor," said the nurse in a high-pitched voice. Taking a look at me, he said, "Get up, I will explain this interesting case." This was the first time I observed a patient with a cloacal malformation, a rare congenital disability in which the rectum, vagina, and urinary tract fuse together. A doctor led me into the room, and I shuffled behind, eager to learn. We greeted the mother and placed her toddler onto the examining bed. Unable to move, as a bag hung from her lower abdomen, she was fitted with a colostomy. Standing in that room, I was utterly devastated. This woman's blood, the child she carried for nine months, will now remain disabled throughout the rest of her life. With a lot of contemplation and pacing through my mind, I realized that she needed professional assistance to escape this torture.

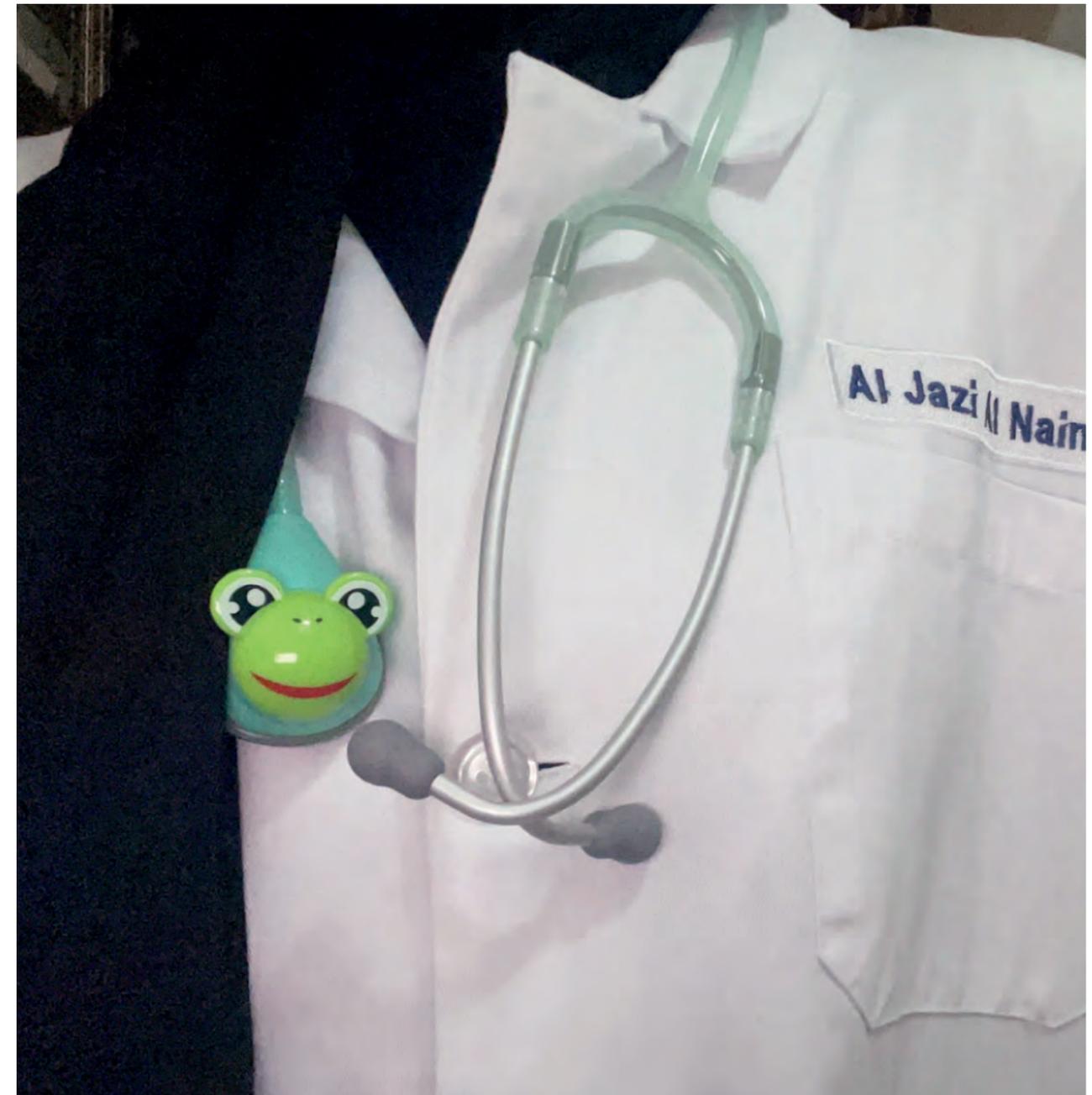
I gently distracted the child with my frog stethoscope during the doctor's examination. Her little giggles painted smiles on our faces. As I was caught up in the moment, I caught a snippet of what he was saying, "yes, she had surgery for her back tumor, and her legs do not function." My heart sank even further. "All right then. She no longer has to come and visit continuously; I'll make an appointment a year from today." A year?! I wondered.

How could a physician ignore a patient's suffering? Can he not see that she is unable to function normally? My thoughts raced through my mind, but I patiently waited for them to exit the room before inquiring. "Doctor? Doctor... Why are you not going to go through with the surgery?" My voice cracked as I asked. Well, because she'll be in a wheelchair all her life. That does her no good if she constantly gets up to use the toilet. A colostomy is cleaner and more efficient." My answer was clear as day. Still, it was evident that I had not accepted it as fact. "You know Jazi, sometimes we as surgeons have to weigh the advantages and disadvantages. Yes, she may never live a normal life, but she was not born to live one, and what is normal anyway?"

At that moment, I ignored any questions I had; all the questions I had vanished.

Nevertheless, this was only one of many encounters that included inguinal hernias, umbilical hernias, necrotizing bowel disease, pectus excavatum/carinatum, hymenectomy,

and undescended retractile testes. Additionally, I observed the surgeons perform anaplasty and watched the intricate details of the procedure as their hands moved in synchronized movements as if they were in an orchestra. However, the experience I had led me to realize that there are compromises that one must make for the sake of the patient.



Meme Page!

By Noora Al-Jaber



Me, an empath, sensing Dr. Majda's pop quiz



My brain: You have a chemistry post lab.

Me: Enjoying life.

Dr: SURPRISE, we have a pop quiz.
Me:



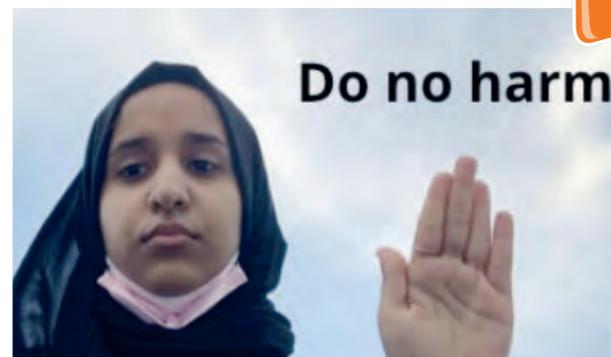
When you failed your chemistry midterm and you have bio midterm on Sunday

After one day in uni:

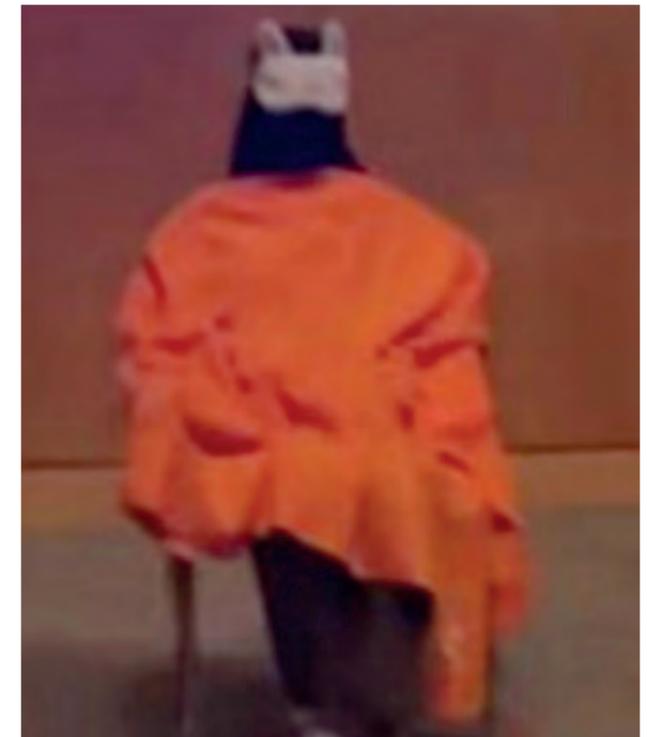


Me Outside

Me Inside



Do no harm



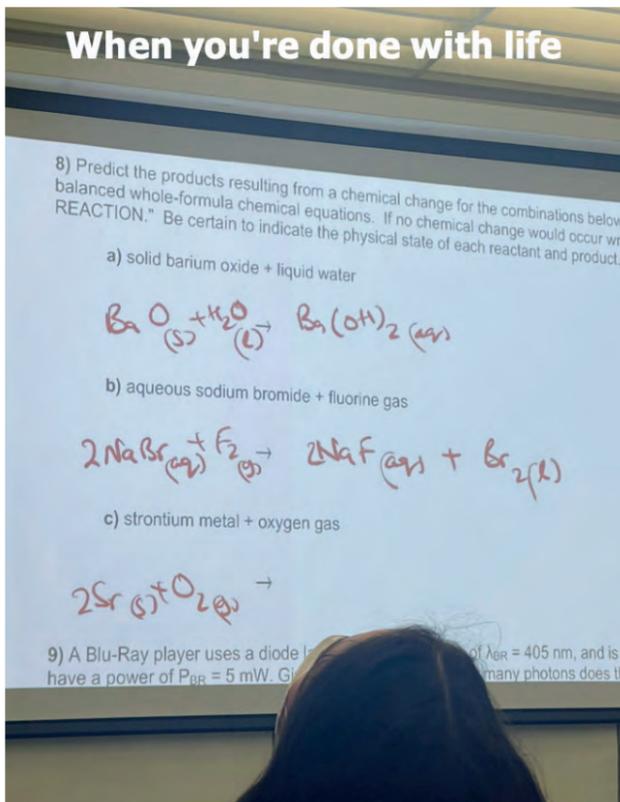
When someone asks for a volunteer



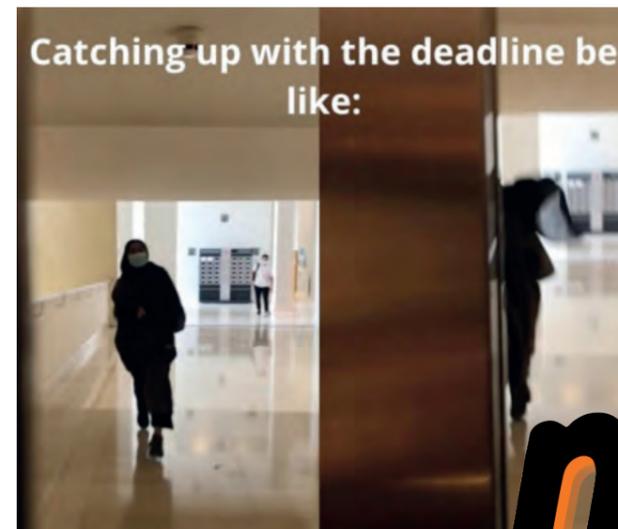
Get someone who looks at you the way Lulu looks at Alyaa



When you're the first one to present



Why would you think I'm angry?



More Memes

MOST LIKELY TO...

By Ali Mohd



- Most likely to mute the group chat and never open it

HASSAN AL-NAIMI



- Most likely to arrive late with a cup of coffee
- Most likely to set up an appointment with a professor and never show up

MAHA ABU-HOLAYQAH



- Most likely to become a plastic surgeon
- Most likely to be a makeup artist

AL JAZI AL-NAIMI



- Most likely to brighten up the mood in class

SARA AL-KAABI



- Most likely to become the foosball champion

LOLWA AL-ABDULGHANI



- Most likely to get everything done neatly in the last minute

NOORA AL-JABER



- Most likely to cure cancer

YAQOUB AL-JAIDAH



- Most likely to debate

ABDULRAHMAN AL-NAMLA



- Most likely to become an athlete

ABDULLA AL-SUBAI



- Most likely to own a chemistry lab

ABDULAZIZ ALANSARI



- Most likely to become the class's teacher
- Most likely to ask questions
- Most likely to scare the class before an exam

**MAHA
AL-MARRI**



- Most likely to become a stand-up comedian
- Most likely to laugh in serious situations

**NOOR
AL-NAIMI**



- Most likely to master a video game

**ALI
MAHMOUD**



- Most likely to live their life without drinking coffee
- Most likely to not be able to swim

**JANE
MANYAMA**



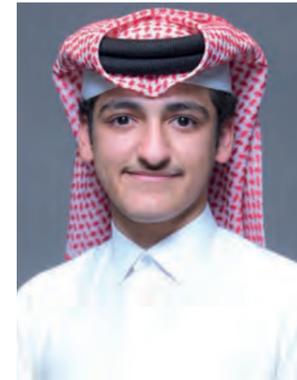
- Most likely to start a YouTube channel

**ALYAA
ALTAMIMI**



- Most likely to exceed the word limit by 50%
- Most likely to become a celebrity

**SAMA
AYOUB**



- Most likely to get married first
- Most likely to miss an exam

**ALI
MOHD**



- Most likely to drop out and become a poet
- Most likely to be the class's chef or baker

**LOLWA
SHAHBI**



- Most likely to own an anatomy lab

**ABDULLA
FAKHROO**



- Most likely to be a neurosurgeon
- Most likely to have a breakdown minutes before an exam

**SHAHAD
IBRAHIM**

HOW MISTAKES CAN CHANGE YOUR MINDSET

By Maha Al-Marri

Sabrina Peters, in the chapter on “Shaping Higher Education with Students,” states that “making mistakes aids both learning and mental resilience” (Peters, 2018). I agree that mistakes are inevitable in our lives. Therefore, we need to accept them and learn how to cope with mistakes rather than deny them. Individuals need to accept the fact that no one is perfect, not even doctors. In the medical setting, it is a known fact that errors are a severe public health issue (Rodziewicz, 2022). Therefore, as future doctors, we need to find a way to learn from our mistakes and limit them. Moreover, making mistakes does not always lead to a negative outcome, as they may have numerous benefits, such as helping one develop a more analytical approach. In addition, being confident and admitting when you have made a mistake is one of the most significant aspects of life.

Making mistakes aids in both learning and mental resilience. As people develop the ability to accept their mistakes and admit to making them, their confidence will be boosted. A study by Siedlecka et al. (2021) investigated the correlation between people’s actions and their confidence levels post-action. Moreover, A total of 54 volunteers took part in a “perceptual decision task,” and after each trial, they mentioned their confidence levels after making an accurate or incorrect decision. Regardless of the outcome, the results illustrated that their confidence level had increased. As a result, this suggests that confidence may be dependent on post-action processing (Siedlecka et al., 2021). Numerous people follow a systematic approach and neglect the most vital aspect of making mistakes: analyzing criticism from their professors and classmates (Peters, 2018). However, it is rare to find someone who accepts and admits their mistakes (Peters, 2018). During the fall semester when I entered Weill Cornell University, I did not accept that at this part of my journey as a future doctor I would still be making mistakes. This had an immense negative impact on my education and my mental health. It reached a point where I contemplated whether or not to drop out of the university. Nevertheless, I learned that accepting mistakes instead of being ashamed of them is more beneficial to general well-being. Moreover, some people would feel embarrassed about making mistakes. However, people should be embarrassed if they repeat the same mistake multiple times rather than making one. Making mistakes might not always result in a negative outcome, but learning from them leads to positive future outcomes.

It is a common misconception that mistakes have a negative connotation, as they have led to crucial discoveries and successes in the past (Peters, 2018). For instance, Greatbatch accidentally discovered the pacemaker, and Alexander Fleming created penicillin which is commonly used in our daily lives (Peters, 2018). These previous, “mistakes,” are now a vital component of our health system. Hence, when committing errors, people should not perceive them as inherently negative. Personally, throughout my university career, I have made multiple mistakes in labs, during lectures, and even when dealing with people. I have given myself a hard time when making mistakes. However, during the winter break, I have reflected and accepted that I will keep making mistakes. It is inevitable. “Why am I bothered?” I have explained my situation and asked the same question to my mother. She replied, “Why are you not accepting them? You will keep on making mistakes until your last breath. You have to accept them and learn from them.” My approach to life has changed since that moment; I started to have an optimistic mindset and approach to everything in life. As a result, this has immensely eased every situation where I have made mistakes, resulting in less stress. Fortunately, during the spring semester, I blossomed into a confident individual who accepted her mistakes and used them as an opportunity to be a better person and future doctor.

In addition to feeling confident in one’s abilities, developing one’s technique is an essential part of being a future doctor. Research has been conducted in the chapter which required students to repeat the steps until they master them so they can complete the task (Peters, 2018). In the chapter on “Shaping Higher Education with Students,” I agree with Peters’ emphasis on the fact that “not everything is perfect,” and students are required to repeat the steps until they master them (Peters, 2018). However, I do not fully agree with the method proposed to promote this ideology as it has severe

consequences. Repeating the same step until you master it is a systematic approach, and students may become too comfortable with making mistakes rather than critically learning from each one. Additionally, they may tend to neglect the outcomes as well as the importance of striving towards an errorless environment. Listening to and accepting criticism is a major technique to prevent mistakes. I was in a state of denial when making mistakes. As a result, whenever I made a mistake, it would lower my self-esteem and feed into my negative thoughts. Therefore, after I spoke with my parents, professors, and post foundation students, and listened to the advice they offered, I can say that I must make mistakes to be a better person. Consulting people when you are in a state of turmoil will make you discover a lot of things about yourself as they can see the issue from a third-person vantage point.

To conclude, from my viewpoint, it is fine to make mistakes and learn from them. Even though as future doctors people’s lives are in our hands, we cannot escape the reality of being imperfect as human beings. Realistically, no one is perfect, and no one can be perfect. A good doctor or a good human being is someone open to making mistakes, but we must strive to limit the prevalence of mistakes in our daily lives. Thus, when I make a mistake, I am more than happy to receive criticism as I know that after I learn from it, I will change myself to be a better person and, hopefully, a better future doctor.

Resources

Peters, S. J., & Shepherd, E. (2018). *Learning through mistakes: An important part of the learning and research process*. In V. C. H. Tong, A. Standen & M. Sotiriou (Eds.), *Shaping higher education with students: Ways to connect research and teaching* (pp. 115-124). UCL Press. <https://discovery.ucl.ac.uk/id/eprint/10044671/1/Shaping-Higher-Education-with-Students.pdf>

Siedlecka, M., Koculak, M., & Paulewicz, B. (2021). *Confidence in action: Differences between perceived accuracy of decision and motor response*. *Psychonomic Bulletin & Review*, 28(5), 1698–1706. doi: 10.3758/s13423-021-01913-0

Rodziewicz, T. L., Houseman, B., & Hipskind, J. E. (2022). *Medical Error Reduction and Prevention*. StatPearls Publishing. <https://pubmed.ncbi.nlm.nih.gov/29763131/>

MEDIA QUOTES

By Hassan ALNaimi



1) Name: Yaqoub AlJaidah TV Show

Quote: "Keep it together."
From: Grey's Anatomy

Source: <https://www.imdb.com/title/tt0413573/>



3) Name: Abdulrahman AlNamla Movie

Quote: "We are Groot."
From : Guardians of the Galaxy

Source: <https://www.theverge.com/2018/2/27/17059832/groot-is-dead-james-gunn-guardians-of-the-galaxy-does-it-matter>



2) Name: Abdulla Alsubai Video Game

Quote: "Keep your expectations low
and you will never be disappointed."
From: God of War

Source: [https://en.wikipedia.org/wiki/God_of_War_\(2018_video_game\)](https://en.wikipedia.org/wiki/God_of_War_(2018_video_game))



4) Name: AlJazi AlNaimi Band

Quote: "We all wanna die but
not today, NOT TODAY; maybe
tomorrow."
From: Kim Namjoon

Source: <https://www.bollywoodlife.com/hollywood/entertainment-news-bts-news-latest-bts-news-update-kpop-news-korean-entertainment-news-bts-did-you-know-rm-aka-kim-namjoon-had-run-away-6-month-before-his-debut-this-person-convinced-him-1831874/>



5) Name: Noora Aljaber Movie

Quote: "Why do we fall? So that we
can learn to pick ourselves up."
From: Batman Begins

Source: <https://www.imdb.com/title/tt0372784/>



7) Name: Ali Mohd TV Show

Quote: "I am running away
from my responsibilities,
and it feels good."
From: The Office

Source: <https://www.hola.com/us/entertainment/20211126315611/the-office-will-be-available-stream-spanish/>



6) Name: Maha Al Marri Mother

Quote: لا تؤجل عمل اليوم الى الغد

Source: <https://www.vectorstock.com/royalty-free-vector/dark-skinned-mother-and-baby-vector-23827061>



8) Name: Lolwa Al-Abdulghani TV Show

Quote: "Rules are made
to be broken."
From: Brooklyn Nine-Nine

Source: <https://www.imdb.com/title/tt2467372/>



**9) Name: Maha Abu-Holayqah
TV Show**

Quote: "I knew exactly what to do, but in a much more real sense I had no idea what to do."

From: The Office

Source: <https://www.hola.com/us/entertainment/20211126315611/the-office-will-be-available-stream-spanish/>



**11) Name: Jane Manyama
Author**

Quote: "I have lived a thousand lives and I've loved a thousand loves. I've walked on distant worlds and seen the end of time because I read."

From: George R.R. Martin

Source: https://en.wikipedia.org/wiki/George_R._R._Martin



**10) Name: Shahad Ibrahim
Twitter**

Quote: مؤمنة بأنني سأكون ما أريد وسأعيش ما أحلم به، وسأجد ذاتي التي تعبت حتى أصبحت وأشبهها و لك مني يا خالقي أصدق الشكر و الإيمان و التمني

Source: <https://twitter.com/>



**12) Name: Noor AlNaimi
TV Show**

Quote: "Who cares if I'm pretty if I fail my finals?"

**- Lorelai Gilmore
From: Gilmore Girls**

Source: <https://lanetechchampion.org/11419/a-e/falls-favorite-show-gilmore-girls-makes-its-way-to-autumn/>



**13) Name: Ali Essa
Movie**

**Quote: "Life finds a way."
From: Jurassic Park**

Source: https://en.wikipedia.org/wiki/Jurassic_Park



**15) Name: Hassan AL-Naimi
TV Show**

**Quote: "The North remembers."
From: Game of Thrones**

Source: https://en.wikipedia.org/wiki/Game_of_Thrones



**14) Name: Sara Alkaabi
TV Show**

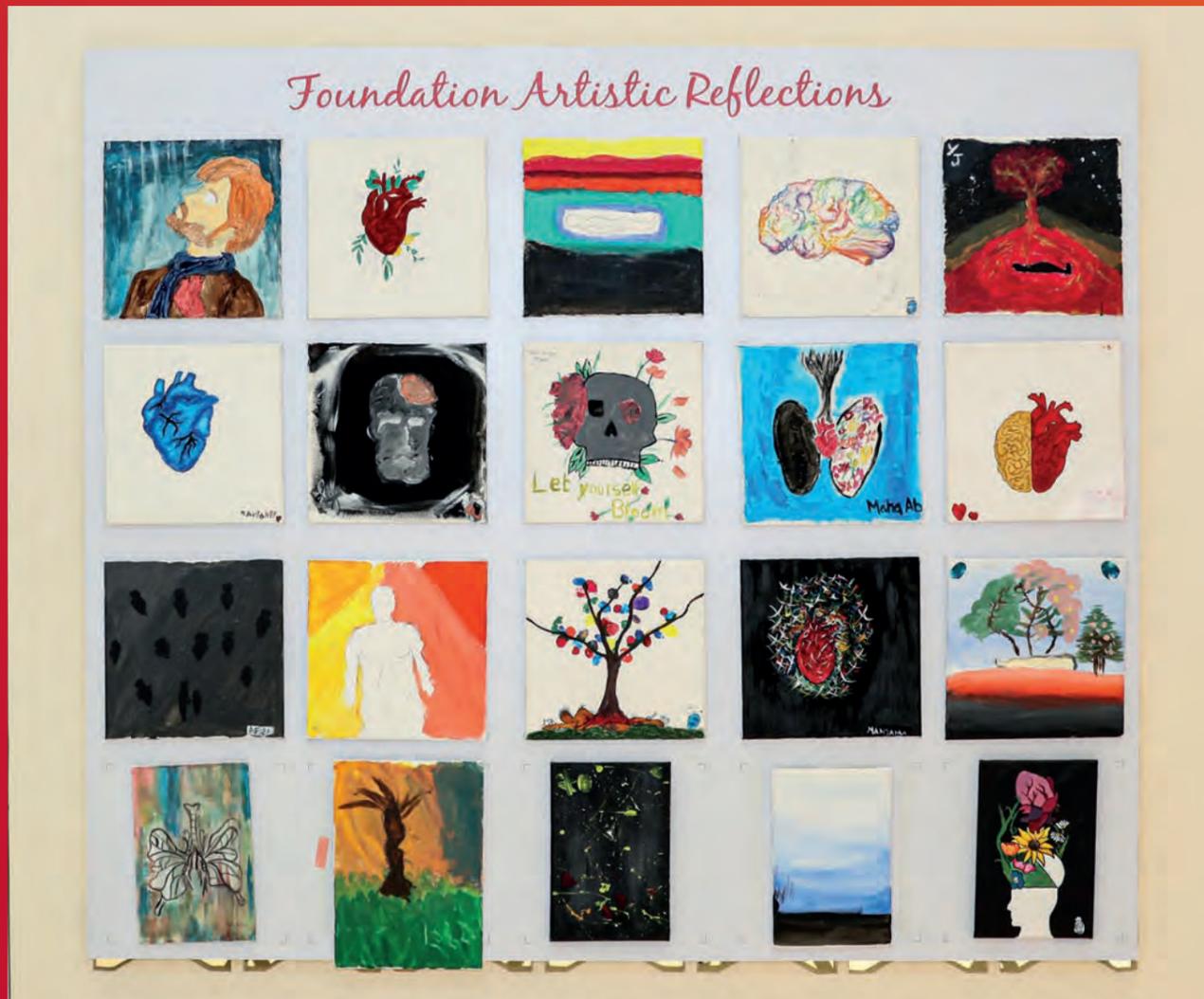
Quote: "My mind is going a mile an hour."

from: The Office

Source: <https://www.hola.com/us/entertainment/20211126315611/the-office-will-be-available-stream-spanish/>

ANATOMY LAB VISIT

By Abdulla Alsubai



The anatomy lab visit was an interesting experience that I am very grateful for. Knowing that we were the first foundation class to get this privilege makes me feel extremely lucky. Furthermore, I was highly intrigued throughout the overall experience from the panel discussion activity up until the moment we left the anatomy lab. Reading the articles we were assigned gave me ample background knowledge on anatomy and the use of cadavers in medical education. For instance, some of the critical skills I learned were ways to cope with stress and how to treat cadavers with respect.

In Romo-Barrientos et al.'s (2020) article, "Anxiety Levels Among Health Sciences Students," I was reassured knowing that feeling anxious when encountering cadavers is completely normal for medical students. In addition, Bockers (2020) mentions the term "detached concern" which means "the effort of medical professionals/students to 'care' for the patient/body donor, but yet 'not get too close'" (p. 237). This was also mentioned in the panel discussion activity by one of the guest speakers; we were advised that we do not necessarily need to dehumanize the cadaver in order to begin dissecting it. Rather, it is best to humanize it and fully respect it if we want to focus on specific dissection processes. To add, Dr. Clare made a good point regarding the fact that some students refuse to dissect the cadavers due to their emotions towards the donor, and how it is ultimately a waste of time and the donor's sacrifice if the cadaver is not used for its intended purpose.

The day of the visit arrived and we were all excited to finally visit the anatomy lab. Doctors Malyango, Manyama, Msuya and Nassir gave us a brief presentation where they instructed us on how to behave, what to wear, what to do, and what not to do. I felt anxious and uncomfortable before entering the anatomy lab, yet eager to see the cadavers. Although I had prior experience in the cat dissection lab and have seen corpses before, I still was not sure how I would really feel in the lab. Seeing a cold, dead human laid on a table with its body sliced open is something I never thought I would see. So, I repeatedly reminded myself of the cat dissection experience and how I was not shaken by it. The three instructors did a great job at slowly preparing us for the sight of the cadavers; they took us to two other rooms before showing us the cadavers. The first room had models of muscles of the human body. The next room had various body parts collected from cadavers such as the skull, brain, arms and torso. In these two rooms, my colleagues and I chatted and linked what we learned

in biology with what we were seeing. Even the instructors partook in our discussions as they explained the functions of the muscles and the organs.

It was time to move on to the cadaver room. We wore aprons and gloves upon entering the cold room. There were four tables, each with a cadaver. The first table I looked at was a full corpse that was fully dissected vertically. The sight of the dark-colored organs was not a pleasurable sight, and the feeling of uneasiness slowly started to emerge within me. I did not dare to poke or palpate anything yet as I was still processing what I was looking at. Fortunately though, the cat dissection experience had desensitized me to such sights, and I eventually felt better. Seeing my colleagues palpate the cadavers and their organs encouraged me to join them in this wonderful experience.

The more time passed in the anatomy lab, the more I was grateful for this rare privilege. In the end, I left the anatomy lab with a great feeling of honor knowing that these people volunteered to donate their bodies to aid me in my education. Consequently, I developed a greater sense of respect for those who donate their bodies for the sake of medical students' education, and for the faculty who strive to provide us with this amazing learning opportunity.

References:

- Böckers, A. (2020). Preparing students emotionally for the human dissection experience. *In Teaching Anatomy* (pp. 237-246). Springer, Cham.
- Romo-Barrientos, C., Criado-Álvarez, J. J., González-González, J., Ubeda-Bañon, I., Flores-Cuadrado, A., Saiz-Sánchez, D., ... & Mohedano-Moriano, A. (2020). Anxiety levels among health sciences students during their first visit to the dissection room. *BMC Medical Education*, 20(1), 1-7.



THE PRESENT ABSENTEE

By Sama Ayoub

It laid there on the cold metal table, covered by a simple white cloth that outlined the body's silhouette. Despite not seeing an inch of flesh or whether it was a female or male, old or young, my cheeks turned red as they burnt, and my chest rose up and down as I gasped for air. It was a panic attack — my very first one.

Cadaver dissection is part of medical curricula that aims to teach prospective physicians anatomy while exposing them to situations they will see in real-life patients throughout their careers. As students in the foundation program, the involuntary mechanisms of the human body fascinated us, and we were intrigued by the notion of dissecting other humans as a method of learning about the body's complexities. While McLachlan's article presented points against the integration of cadaver dissections in medical curricula, our class had a powerful desire to dissect cadavers and believed in their importance to our learning. This became evident in our Harkness discussions.

Arriving at the anatomy lab, we stood in front of the dissection room as my classmates helped each other wear the plastic aprons while the excitement, giggles, and loud conversations filled the room. Simultaneously, the cadavers laid still and cold while covered with a white cloth beyond the closed doors. The juxtaposition of atmospheres separated by a door was unsettling, and the thoughts that had caused the first panic attack came running back into my head. Death, the fragility of life, and the thought of bloody body parts weighed heavily on my chest like they did the first time I saw a cadaver. However, unlike the first time, I felt in control of my emotions; I recognized their root cause and recalled the coping mechanisms we read about in several articles. The gradual introduction to dissections and cadavers during our English class was evident in my composure as I stood amongst my classmates waiting to enter the anatomy lab.

I vividly remember the first steps I took into the room; my eyes quickly noticed the four metal tables, and my nose automatically caught the distinct chemical scent. An 88-year-old man lay in front of me, lifeless. A body with no soul, he was present and simultaneously absent. I watched my

classmates explore the cadaver, poking his hands and his face, as I slowly observed the details of his peeling dry skin and the freckles that covered his arms. Despite being surrounded by fingers that continually poked the cadaver, I did not feel the urge to touch him and was satisfied with retaining information visually, which is a notable change from my typical involved personality.

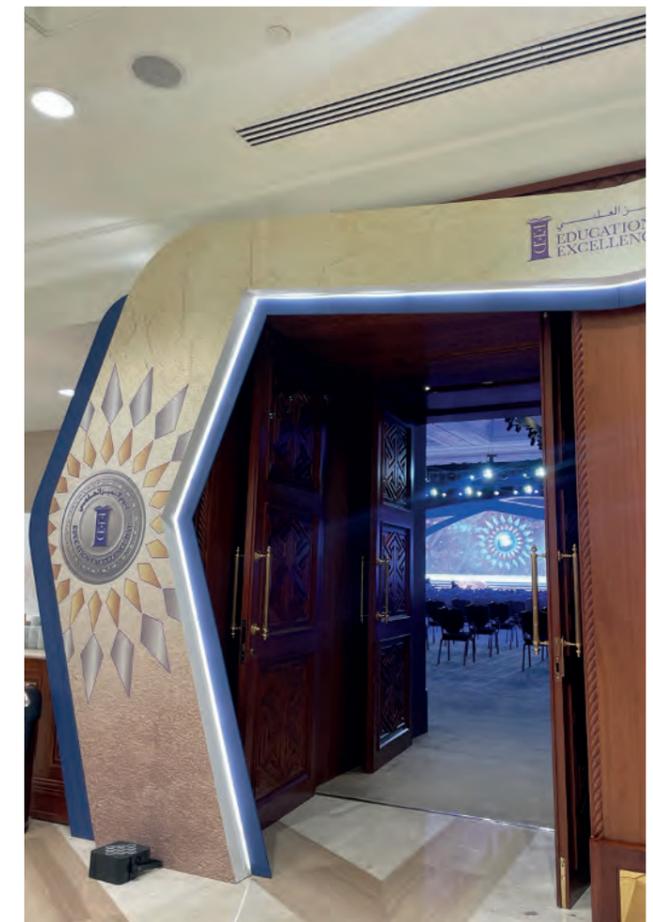
The 88-year-old's cadaver concluded my visit to the anatomy lab, and I walked out with a blank mind. After the visit, I began processing the experience and making meaning of my behavior in the lab. Considering my panic after seeing a cadaver for the first time, I expected to experience the same emotions and shock. Instead, I had stopped myself from forming thoughts beyond what my eyes could immediately see, thus blocking my feelings. Functioning as a coping mechanism, viewing the cadaver as an assignment while inside the lab helped regulate my emotions during the visit and let me absorb the experience's valuable details. My venture reminded me of the detached concern described in Bockers' article, where medical professionals care for their patients without getting too close, preventing strong emotional reactions. Although disassociating from my emotions eased the experience, it came with the cost of overthinking the minor details. I began to ponder how our bodies are only one factor of what makes us human and how it does not carry the same value once the soul has left it. I grew more appreciative of the trust that body donors grant members within the scientific field, and I felt grateful for the early exposure.

WALKING TOWARDS MY DREAM

By Noor AlNaimi

I walk confidently to the Emir as my name is called. Hearing the loud applause as I make my way to him fills me with nervousness and excitement. Every step I take towards the Emir to get my shiny certificate is worth the nights of hard work and diligent pursuit. I am still walking, and all I can think of is how short the three years that I spent preparing the dossier just for this moment were. I think of how all the moments of frustration and the sleepless nights that I had during this journey are truly paying off, and it is all finally worth it. I faced a lot of obstacles in my journey, and every time I felt like giving up, I reminded myself of the great award for all this hard work. I finally stop and stand beside the Emir proudly. When he handed me the shiny gold and purple certificate and congratulated me, I felt all of the nervousness leaving my body, and instead, feelings of joy and pride filled me. This moment is what I have waited for, and this moment is what I dreamed of as a persistent student. I still cannot process that one-minute encounter, and I keep repeating it in my head just to feel what I felt in that moment. After the ceremony, I went to my family who were watching me the whole time with pride and gratification. The look in my mother's eyes was enough to allow my tears of joy to run down my face. I was ecstatic at that moment and happily overwhelmed with all the congratulatory messages. All my hard work in putting together the dossier finally paid off on this night. In my dossier, I included diverse activities that made me stand out among my peers. One of the strong points in my dossier was my participation in the International Biology Olympiad and winning the gold medal, which was a great opportunity for me to express my love and passion for biology.

Additionally, I mentioned in my dossier how I obtained some important leadership positions as a high school student such as being a member of my school's student council. Furthermore, societal contributions were a great part of my dossier as I had multiple and varying volunteer experiences. After my dossier was approved, I had an interview that measured my general knowledge and awareness of current world issues, and I explained how -as a future doctor- I would help resolve some of the prominent issues. Getting the Excellence Award was a fruitful journey, and I encourage every student to apply for it and show Qatar the excellence of the young generations, and enjoy the fruits of your earned achievement in meeting the Emir.



THE 26TH CONFERENCE OF THE PARTIES (COP26)

By Sama Ayoub

"Nothing about us, without us!"

This was a slogan coined by a young female participant at the ECOSOC youth forum in 2018.

Expressed in moments of distress, these five words carry the frustration of youth globally towards the lack of climate action. Emphasizing our need for immediate change, this must begin by ensuring that policies are only passed and implemented with the direct participation of all affected group members.

To take care of our planet, there is no substitute for action.

In November of 2021, Qatar Foundation granted me the opportunity to attend the 2021 United Nations Climate Change Conference and speak on behalf of the youth in Qatar alongside two other students. Held in Glasgow, Scotland, the 26th Conference of the Parties (COP26) brought together world leaders, negotiators, government representatives, businesses, and citizens for 12 days of talk about climate action.

During my time at COP26, as a participant, I worked with three PhD students at the University of Edinburgh to speak on two panels that focused on the role of youth towards a sustainable future. Throughout our discussions, we raised a number of persuasive points about climate change education and emphasized that youth voices should have a seat at the decision-making table. These points stemmed from the belief that climate action must empower communities, while simultaneously holding governments and organizations accountable for the adverse impacts of their actions. Advocating for climate action from a student perspective, we recognize the deep rooted lack of accurate education and awareness within our society. Therefore, the move towards climate action must be systemic. Acknowledging that climate action can not be resolved in a single conference, we advocated for the creation of tailored school curriculums that integrate climate change education. The misconception of only associating climate change with

Antarctica's polar ice caps must change and students around the world have the right to understand the impact of climate change on their countries and the regions they live in. It is only then an understanding climate action's magnitude and the issues it can give rise to can be reached, including climate displacement, cultural identity, livelihood security and much more.

Furthermore, we attended various interesting presentations, including the Youth4Climate discussions and several presentations in the Qatar Pavilion. As students representing Qatar's youth, we met and had productive discussions with several environmental advocates, including the Qatar Environment Minister, H.E. Sheikh Faleh bin Nasser Al Thani. It was gratifying to see Qatar's effective sustainability plan and its successful implementation being represented at a central conference as we progress towards the 2022 FIFA World Cup and Qatar's 2030 Vision.





In addition, we also took part in the Doha Debates interviews that were conducted by Nelafor Hedayat and streamed virtually. My experience at COP26 was eye-opening. Seeing youth, like myself, from around the world unite for a cause they are passionate about was empowering. However, an important takeaway is that youth voices were loud and clear but not heard at COP26.

We can continue with all the projects and organizations we run representing the youth, but drastic change needs to come from governmental and international entities.

Perhaps it is time that youth voices are brought into focus, while governments and international entities are the audience.



DESIGN THINKING:

BUILDING CREATIVE CAPACITY IN THE FOUNDATION PROGRAM

By Sama Ayoub, Sara Al Kaabi, Yaqoub Al-Jaidah, and Lolwa Al-Abdulghani

Every year, Hamad Bin Khalifa University hosts a program aimed at the young generation to assist in the development of future entrepreneurs. During our English course in the Foundation Program, we were introduced to design thinking, a human-centered approach to innovation, and we were given the assignment of developing new projects within our groups. Our group consisted of four members (Sama Ayoub, Sara Al Kaabi, Yaqoub Al-Jaidah, and Lolwa Al-Abdulghani). The project's goal was to assist in developing the ability to solve complex problems in a creative and inventive manner. By participating in the design thinking process, students develop critical life-long learning skills such as coping with uncertainty and working in a collaborative team. In design thinking, considering and choosing a problem involves five phases: empathize, define, ideate, prototype, and test. After brainstorming as a group and looking within our community, we discovered that members of the disabled community were at a disadvantage when looking for job opportunities.

Accordingly, in the first step, we interviewed members of the disabled community alongside people who directly work with them to deepen our understanding of the issue and its scope. This process enabled

us to define the issue and its parameters precisely. We found out that a law to protect the employment rights of people with disabilities exists in the State of Qatar; however, there is a need for enhanced support to improve enforcement. Next, we worked as a group to create solutions for our defined problem. We decided that the best solution would be to create a governmental-based application to regulate the employment process. Because the problem was comprehensive, we added multiple features as subsolutions to the subproblems connected to the central issue in the final prototype. Correspondingly, we prototyped the app by creating a visual representation of the app's home screen with various features addressing the main issue. After completing our project, we presented it during our English class and sent a proposal to HBKU's Entrepreneurship Program in hopes of acquiring the necessary guidance and support to execute our proposed solution. After submitting our proposal, we were shortlisted for the program evaluations. As a group, we worked on creating a presentation to pitch our solution and highlight the business model for our solution. Following our presentation, we were shortlisted as part of the program winners and are currently working on the capacity-building funding evaluations.



Source: <https://innovation.hbku.edu.qa/entrepreneurship-program>



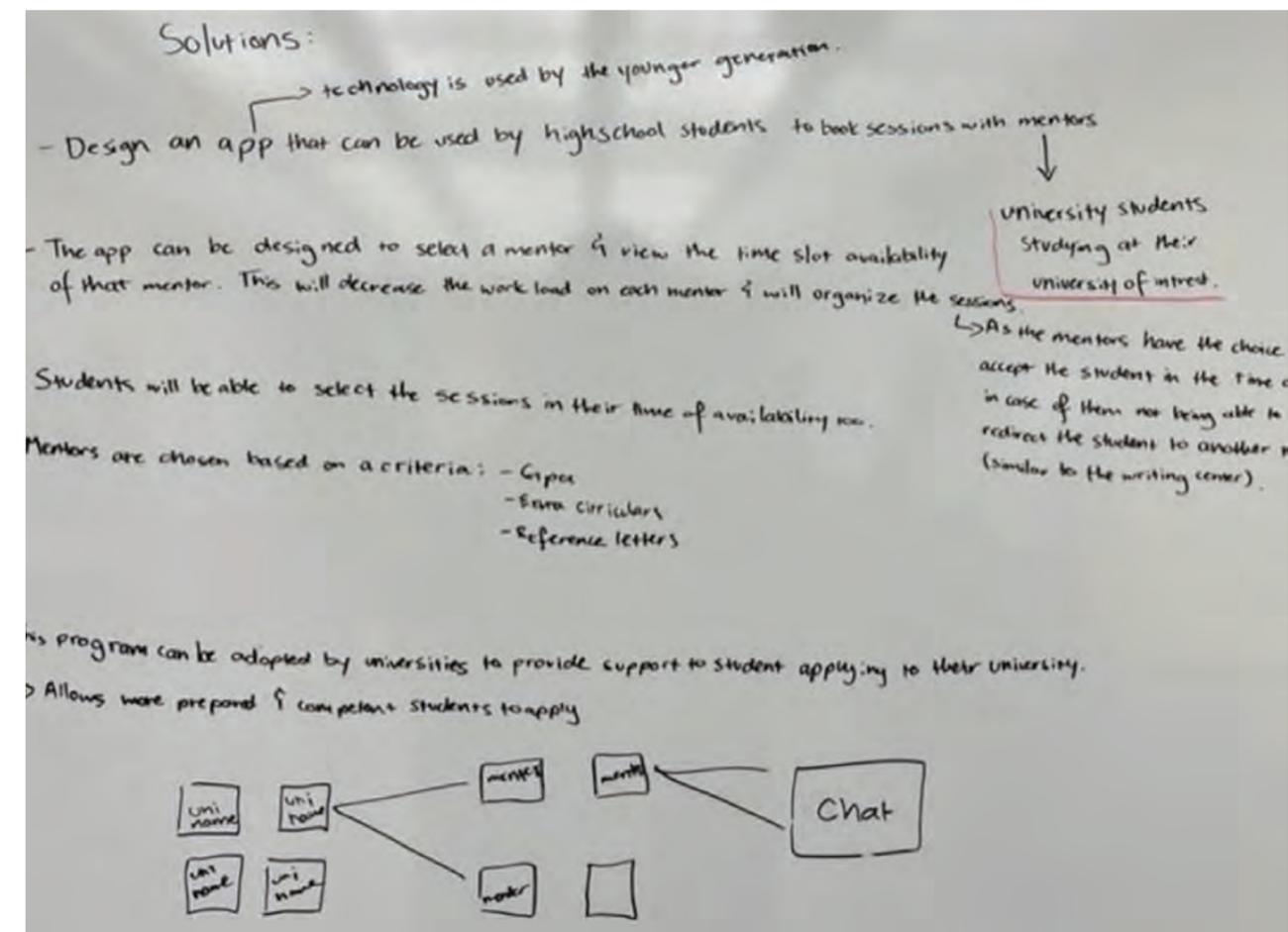
April 2022: Captured after officially submitting our proposal to the HBKU entrepreneurship program!

THE CREATION OF MENTORME

By *Shahad Ibrahim, Abdulrahman Al-Namla, and Maha Al-Marri*

Dr. Rachid Bendriss and Mr. Matthew Carey have guided us through an extraordinary experience revolving around design thinking during the spring semester English for Academic Purposes course. First, we experienced design thinking firsthand by discussing a societal issue in teams and designing a suitable solution. At this point, the three of us brainstormed to devise a plan that would aid high school students in choosing their dream university by bridging the gap between them and university students in Qatar. We surveyed university and high school students regarding the effectiveness of the mentorship they received during high school. After analyzing the survey results, we noticed many high school students lack the guidance they need, jeopardizing their future educational prospects. Realizing the impact our idea could have, we created a prototype of our solution called MentorMe.

Our solution impressed our classmates and mentors, prompting us to consider sending a proposal to HBKU's Entrepreneurship Program with the hope of delivering a positive and impactful change to Qatar's educational sector. Successful implementation of MentorMe could result in high school students gaining a deeper understanding of the various facets of university life and possible majors, increased productivity, and decreased drop-out rates. We are grateful to the Foundation Program for allowing us to let our ideas grow and hopefully aid multiple generations in the future.



Brainstorming possible solutions to be used in the prototype

