



YEDİTEPE UNIVERSITY

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

ACADEMIC PROGRAM BOOK

2013 - 2014

YEDİTEPE UNIVERSITY

FACULTY of MEDICINE

PHASE VI

ACADEMIC PROGRAM BOOK

2013 – 2014

Student's;

Name :

Nr :

**YEDİTEPE UNIVERSITY
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PHASE VI**

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YEDİTEPE UNIVERSITY FACULTY OF MEDICINE

AIM AND OUTCOMES OF MEDICAL EDUCATION PROGRAM**,**

*“Consensus Commission Report” based on draft compiled at “*Workshop for Revision of Aim and Outcomes of Medical Education Program at Yeditepe University Faculty of Medicine*”

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AIM

The aim of medical education program *is to graduate physicians* who

- **are aware of** the local and global health issues
- **have acquired competence** in knowledge, skills and attitudes to manage and provide primary health care service
- **know, apply** and **care** for ethical principles of the medical profession
- **keep up with** current knowledge at national and international level
- **are capable of** systematical thinking
- **are** investigative and questioning
- continually **renovate** and **improve** themselves
- **are capable of** teamwork
- **use** technology competently in medicine and related areas
- **have** effective communication skills
- **have** community leadership qualifications

OUTCOMES

Graduate should be able to:

7) **practice** as a physician,

- **oriented towards**
 - **individual and non-individual factors affecting health**
 - **sustainment and improvement of healthy condition**
 - **clinical conditions which**
 - **are frequent in community****and/or**
 - **pose high risk for individual or community health****and/or**
 - **life-threatening or constitute an emergency**
- **at a competency level appropriate to deliver primary health care services compatible with surrounding context of health determinants.**

- 1.1 **explain** normal structural components of human body, their functions and operational mechanisms at organismal, multisystem, system, organ, tissue, cellular and molecular levels.
- 1.2 **explain** healthy condition and factors affecting health.
- 1.3 **explain** and **relates** causes of clinical conditions, courses of effect and outcomes.
- 1.4 **explain** changes (*i.e. physiological and pathological*) in structural components of body, their functions and operational mechanisms under healthy and clinical conditions.

- 1.5 **explain** most frequently occurring or most important clinical complaints (*i.e. chief complaint*), symptoms, signs, laboratory and imaging findings and their emergence mechanisms in clinical conditions.
 - 1.6 **explain** current medical and surgical methods used in interventions directed towards health conditions.
 - 1.7 **use** contextually appropriate medical history taking method, out of different types (*e.g. comprehensive, focused or hypothetico-deductive*) and systematically, to gather medical information from healthy individual, patient or patient's companions (*i.e. heteroanamnesis*), in case of an encounter with a healthy person or a patient who seeks health care service for a health condition.
 - 1.8 **employ** physical examination methods for systems in case of an encounter with a healthy person or a patient who seeks health care service for a health condition.
 - 1.9 accurately **interpret** findings in medical history and physical examination, in case of an encounter with a healthy person or a patient who seeks health care service for a health condition.
 - 1.10 **implement** diagnostic procedures (*e.g. point of care testing, physician office testing*) required for primary health care, in case of an encounter with a healthy person or a patient who seeks health care service for a health condition.
 - 1.11 **select (utilize)** tests shown to be highly effective in clinical decision making by evidence-based medicine from the aspects of reliability, practicality and outcome measures, in case of an encounter with a healthy person or a patient who seeks health care service for a health condition, and **interpret** results.
 - 1.12 **make** clinical decisions (*e.g. benefit estimation, risk estimation, prevention, screening, test requisition, diagnosis, triage, staging, consultation, prognosis, watchful-waiting, intervention, monitoring, end of intervention, discharge, control, end of follow-up*) shown to be highly effective from the aspects of outcome measures by evidence-based medicine, in case of an encounter with a healthy person or a patient who seeks health care service for a health condition.
 - 1.13 accurately **perform** interventional procedures (*i.e. interventional clinical skills, competencies and proficiencies*) required for primary health care, in case of an encounter with a healthy person or a patient who seeks health care service for a clinical condition.
 - 1.14 **coordinate** referral or transport of patient, when necessary and with patient-centered approach, to secondary health care institution, without posing any risk to patient's health, security and confidentiality, in case of an encounter with a patient who seeks health care service for a clinical condition.
 - 1.15 **manage** request or symptom, healthy or clinical condition, and healthy individual or patient, with beneficiary-centered approach, and with clinical decisions made by analytical and critical thinking, clinical reasoning and problem solving methods, in case of an encounter with a patient who seeks health care service for a health condition.
 - 1.16 **execute** protective and therapeutic medical practices that are individual, family and community-oriented, easily accessible, integrated and coordinated, continuous, comprehensive, and based on the principles of confidentiality, in primary health care services.
 - 1.17 **identify** factors that pose a high risk to individual and community health, and **determine** individuals or populations at risk in advance or at an early stage and implement the necessary measures.
 - 1.18 **value** preventive health services, **offer** primary prevention (*i.e. prevention of diseases for the protection of health*), secondary prevention (*i.e. early diagnosis and treatment*) and tertiary prevention (*i.e. rehabilitation*) services, and **provide** consultancy on these issues.
 - 1.19 **provide** life-style consultancy and design services to sustain and improve individual and community health.
- 2) **manage** primary health care services.
- 2.1 **manage** health care team in primary health care organization.
 - 2.2. **lead** community with sense of responsibility, good behavior and manners in consideration of individual behaviors and social dynamics of community, and if there is a necessity, **develop** projects directed towards health care services.
 - 2.3 **define** health management and economics principles, models for organization and finance of health care services.

- 2.4 **use** health care resources with cost-effective manners.
- 3) advocate individual and community health under all circumstances.**
- 3.1. **provide** consultancy services to sustain and promote the health of individual and community.
- 3.2. **explain** epidemiology of clinical conditions, and **define** measures to reduce frequencies.
- 3.3. **describe** completely all high risk factors for the community health (e.g. *natural disasters, nuclear accidents, fire, war, bio-terrorism, etc.*), and **implement** necessary measures in order to prevent effects on health.
- 3.4. **explain** health determinants completely (e.g. *physical environment, social environment, genetic background, individual response –behavior, biology-, health care services, welfare, etc.*), including conditions that prevent access to health care.
- 4) perform medical practices according to regulatory and ethical principles and in consideration of behavioral sciences, social sciences, and humanities.**
- 4.1 **recognize** determinants affecting individual behaviors and attitudes, and social dynamics.
- 4.2 **recognize** basic ethical principles completely, and **distinguish** ethical and legal problems.
- 4.3 **recognize** regulations concerning national and international health systems.
- 4.4 **employ** safety, security and confidentiality principles completely for beneficiaries of health care services, companions and visitors, and health care workers.
- 4.5 **use** medical record and information systems according to regulations and ethical principles.
- 4.6 **value** informed consent taking in the framework of patients' rights, and **employ** fully.
- 4.7 **interpret** historical, anthropological and philosophical evolution of medicine, health and disease concepts, and **relate** to current medical practice
- 5) establish** correct and effective communication with all stakeholders of health care services and collaborate.
- 5.1. **communicate** by using problem solving abilities during all of professional life with health care beneficiaries, co-workers, accompanying persons, visitors, patient's relatives, care givers, colleagues, other individuals and organizations.
- 5.2. **collaborate** with related organizations and institutions, with other professionals and health care workers as a team member through using problem solving abilities.
- 5.3. **communicate** with all stakeholders with consideration of socio-cultural differences.
- 6) promote self-medical knowledge and skills in view of the current scientific developments throughout own career.**
- 6.1. **adopt** and **implement** the importance of lifelong self-learning.
- 6.2. **recognize** importance of updating knowledge and skills; **search** current advancements and improve own knowledge and skills.
- 6.3. **speak** at least one foreign language at advanced level to follow the international literature and communicate with colleagues.
- 6.4. **recognize** methods to reach current scientific knowledge, and **use** available technology.
- 6.5. **recognize** principles of evidence-based medicine, and **implement** in health care services.

6.6. **develop** and **present** research projects.

7) manage own postgraduate career.

7.1. **recognize** and **investigate** postgraduate work domains and job opportunities.

7.2. **determine** postgraduate work domains, job opportunities and requirements for application, **distinguish** and **plan** requirements for further training and work experience.

7.3. **prepare** a resume, and **recognize** job interview methods.

7.4. **recognize** health technologies expected to be implemented in near future and emerging work areas.

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**PHASE VI COORDINATION COMMITTEE
(TEACHING YEAR 2013 – 2014)**

Reha CENGİZLİER, MD. Prof. (Coordinator)

Selami SÖZÜBİR, MD. Prof. (Co-coordinator)

Faruk YENCİLEK, MD. Assoc. Prof. (Co-coordinator)

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DESCRIPTION OF THE PHASE VI

“Internship”; “performance under supervision”, “graduate equivalent competency performance/achievement”

CONTENT OF ACADEMIC YEAR

Internship Programs

EXECUTIVES OF ACADEMIC YEAR

Internal Medicine, Child Health and Pediatrics, Obstetrics and Gynecology, General Surgery /
Emergency Medicine, Psychiatry, Public Health, Family Medicine, Elective

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ACADEMIC CALENDAR 2013 – 2014

July 01, 2013 Monday	Beginning of Phase VI
August 8-10, 2013 (Thursday-Saturday)	Religious Holiday
August 30, 2013 Friday	National Holiday
October 14-20, 2013 (Monday-Monday)	Religious Holiday
October 28-29, 2013 (Monday-Tuesday)	Republic Day – National Holiday
November 8, 2013 (Friday, at 14:00-16:00)	Commemoration of Atatürk
January 01, 2014 Wednesday	New Year
January 02, 2014 Thursday	Coordination Committee Meeting
March 14, 2014 Friday	Physicians' Day
April 23, 2014 Wednesday	National Holiday
April 24, 2014 Thursday	Coordination Committee Meeting
May 01, 2014 Thursday	Labor's Day
May 19, 2014 Monday	National Holiday
June 30, 2014 Monday	End of Phase VI

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INTERNSHIP PROGRAMS

INTERNAL MEDICINE	(2 months)
CHILD HEALTH AND PEDIATRICS	(2 months)
OBSTETRICS AND GYNECOLOGY	(2 months)
GENERAL SURGERY / EMERGENCY MEDICINE	(2 months)
RURAL MEDICINE	(2 months)
PSYCHIATRY	(1 month)
ELECTIVE	(1 month)

ACADEMIC SCHEDULE 2013 – 2014

DATES	1	2	3	4	5	6
01.07.2013 / 30.07.2013	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (Z.K.H.)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (E.R.S.H.)
31.07.2013 HOSPITAL ORIENTATION PROGRAM/ YEDİTEPE UNIVERSITY HOSPITAL CONFERENCE HALL /13:30-18:00						
01.08.2013 / 29.08.2013	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (Z.K.H.)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Elective
02.09.2013 / 30.09.2013	Psychiatry (E.R.S.H.)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (Z.K.H.)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine
01.10.2013 / 31.10.2013	Elective					
01.11.2013 / 29.11.2013	Rural Medicine	Psychiatry (E.R.S.H.)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (Z.K.H.)	Child Health and Pediatrics (Y.Ü.H.)
02.12.2013 / 31.12.2013		Elective				
02.01.2014 / 31.01.2014	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (E.R.S.H.)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (Z.K.H.)
03.02.2014 / 28.02.2014			Elective			
03.03.2014 / 31.03.2014	Obstetrics and Gynecology (Y.Ü.H.) (Z.K.H.)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (E.R.S.H.)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)
01.04.2014 / 30.04.2014				Elective		
02.05.2014 / 30.05.2014	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (Z.K.H.)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (E.R.S.H.)	Internal Medicine (Y.Ü.H.)
02.06.2014 / 30.06.2014					Elective	

Y.Ü.H: YEDİTEPE UNIVERSITY HOSPITAL

E.R.S.H: ERENKÖY PSYCHIATRY and NEUROLOGY TRAINING and RESEARCH HOSPITAL

Z.K.H: ZEYNEP KAMİL GYNECOLOGY and PEDIATRICS TRAINING and RESEARCH HOSPITAL

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STUDENT GROUPS

GROUP 1 (10 students)

Betül Ercan
Ezgi Er
Gözde Balkaya
İpek Buse Güzelce
Yasemin Çınar
Leyla Zeynep Tigel
Simge Tektaş
Zeliha Başak Polat
Damla Eren
Cemil Alpak

GROUP 2 (10 students)

İhsan Ayhan
Ömür Görgülü
Emir Ünal
Berkay Bozkurt
Çağatay Büyükçelen
Kağan Utku Can
Aydın Talat Baydar
İdris Avcı
Araz Aliyev
Elvin Aliyev

GROUP 3 (11 students)

Yunus Emre Bulum
Gül Dilan Bostan
Betül Akbay
Pakize Cennetoğlu
Selim Turan
Kemal Uslu
Abdullah Taşçı
Mehmet Baki Şenyürek
Semih Öztürk
Emin Pala
Caner Köse

GROUP 4 (10 students)

Merve Dizdar
Gökçe Gün
Çağla Bahar Bülbül
Yaşar Can Altınışik
Onur Burak Çeğilli
Ece Gizem Çelikbaş
Baran Çalışgan
Zeynep Yılmaz
Ceyda Aydın
Berent Aldıkaçtı

GROUP 5 (11 students)

Kübra Yılmaz
Tuğba Şahin
Esra Odunkıran
Büşra Demirel
Belin Kamiloğlu
Can Oğuzhan Dursun
Zeynep Kaya
Mahmut Talha Kaner
Elif Çiğdem Şirazi
Mustafa Sencer Özkeçeci
Muhammed Emin Dağüstü

GROUP 6 (12 students)

Ece Gümüšoğlu
Ece Cansu Okur
Ruba İbrahim
Zeynep Nur Demirok
Şeyma Tuğçe Ünalı
Baran Erdik
Simge Faydalı
Merve Demir
Günişıl Yalçın
Hakan Ersöz
Mehmet Cerrah Kıran
Duygu Ersoy

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STUDENT COUNSELING

Student counseling is a structured development process established between the student and the consultant that aims to maximize student success by focusing the student to her/his target. Although the major component of this relationship is the student, the faculties also take part by bringing the requirements of this interaction to their systems. The targeted outcomes of the consultant-student interaction are success in the exams, success in the program, and preparation for the professional life. The aim of counseling is to help students to solve their problems, to give professional guidance, to provide coaching, to contribute to adopting the habit of lifelong learning, to provide information about the University and Faculty, to follow their success and failure and to help them select courses. The consultants selected among Basic Medical Sciences instructors for the first three years transfer the students to Clinical Sciences instructors for the following three years.

The topics that will be addressed by the consultants are as follows:

- a) Inform students about the university, faculty and surrounding facilities
- b) Inform students about the courses and help them select courses
- c) Inform students about the education and assessment regulations
- d) Follow student's attendance to lectures and success
- e) In case of failure, investigate the causes and cooperate with the students to overcome them
- f) Help students in career planning
- g) Contribute to students adapting the habit of lifelong learning
- h) Guide students to counseling services of the university
- i) Set a role model as long as the professional susceptibility, professional guidance, intellectual responsibility, interaction with peers, ethics, professional awareness are concerned
- j) Contribute to cultivation of professional and intellectual development in a rapidly changing world
- k) Inform the coordinator when there are unsolved problems of the students

Consultant -student relationship is a dynamic and mutual process carried out within the campus and the hospital. It is recommended that the consultant and the student meet at least twice during a semester.

The expectations from the student are as follows:

- a) Contribute to improvement of satisfaction level in the problem areas
- b) Report the social and economic conditions that require consultant's help
- c) Specify expectations from the education and the department from which this training is taken
- d) Give feedback on the counseling services regarding their satisfaction level

LIST OF STUDENT COUNSELING

NO	NAME	SURNAME	CONSULTANT	
1	270800045	BETÜL	AKBAY	DR. SÜLEYMAN SAMİ KARTI
2	270800066	ARAZ	ALİYEY	DR. SÜLEYMAN SAMİ KARTI
3	280800068	ELVİN	ALİYEY	DR. SÜLEYMAN SAMİ KARTI
4	270800028	CEMİL	ALPAK	DR. YAŞAR KUÇUKARDALI
5	250800092	YAŞAR CAN	ALTINIŞIK	DR. YAŞAR KUÇUKARDALI
6	290800074	BERENT	ALDIKAÇTI	DR. YAŞAR KUÇUKARDALI
7	280800064	İDRİS	AVCI	DR. HASAN AYDIN
8	280800056	CEYDA	AYDIN	DR. HASAN AYDIN
9	280800023	İHSAN	AYHAN	DR. HASAN AYDIN
10	270800050	GÖZDE	BALKAYA	DR. MÜGE BIÇAKCIGIL
11	270800030	AYDIN TALAT	BAYDAR	DR. MÜGE BIÇAKCIGIL
12	270800010	GÜL DİLAN	BOSTAN	DR. MÜGE BIÇAKCIGIL
13	280800059	BERKAY	BOZKURT	DR. ZEHRA EREN
14	270800070	YUNUS EMRE	BULUM	DR. ZEHRA EREN
15	20110800074	ÇAĞLA BAHAR	BÜLBÜL	DR. ZEHRA EREN
16	270800058	ÇAĞATAY	BÜYÜKÇELEN	DR. ÜMİT AKYÜZ
17	280800045	KAĞAN UTKU	CAN	DR. ÜMİT AKYÜZ
18	270800042	PAKİZE	CENNETOĞLU	DR. ÜMİT AKYÜZ
19	280800036	BARAN	ÇALIŞKAN	DR. ELİF EROĞLU BÜYÜKÖNER
20	250800093	ONUR BURAK	ÇEĞİLLİ	DR. ELİF EROĞLU BÜYÜKÖNER
21	280800022	ECE GİZEM	ÇELİKBAŞ	DR. ELİF EROĞLU BÜYÜKÖNER
22	280800062	YASEMİN	ÇINAR	DR. OLCAY ÖZVEREN
23	270800032	MUHAMMED EMİN	DAĞUSTU	DR. OLCAY ÖZVEREN
24	270800047	MERVE	DEMİR	DR. OLCAY ÖZVEREN
25	260800089	BUŞRA	DEMİREL	DR. BERRİN AKTEKİN
26	280800027	ZEYNEP NUR	DEMİROK	DR. BERRİN AKTEKİN
27	270800075	MERVE	DİZDAR	DR. BURCU UĞUREL
28	260800054	CAN OĞUZHAN	DURSUN	DR. BURCU UĞUREL
29	270800018	EZGİ	ER	DR. BURCU UĞUREL
30	270800053	BETÜL	ERCAN	DR. NALAN ALAN SELÇUK
31	290800073	BARAN	ERDİK	DR. NALAN ALAN SELÇUK
32	280800004	DAMLA	EREN	DR. NALAN ALAN SELÇUK
33	250800056	DUYGU	ERSOY	DR. HAKAN ATALAY
34	260800050	HAKAN	ERSÖZ	DR. HAKAN ATALAY
35	260800091	SİMGE	FAYDALI	DR. HAKAN ATALAY
36	270800041	ÖMÜR	GÖRGÜLÜ	DR. NAZ BERFU AKBAŞ
37	270800073	ECE	GÜMÜŞOĞLU	DR. NAZ BERFU AKBAŞ
38	280800006	EMİNE GÖKÇE	GÜN	DR. NAZ BERFU AKBAŞ
39	270800012	İPEK BUSE	GÜZELCE	DR. AYŞEGÜL SARSILMAZ OYGEN
40	280800065	RUBA	İBRAHİM	DR. AYŞEGÜL SARSILMAZ OYGEN
41	270800074	BELİN	KAMILOĞLU	DR. AYŞEGÜL SARSILMAZ OYGEN
42	280800021	MAHMUT TALHA	KANER	DR. BENGİ GÜRSES
43	260800086	ZEYNEP	KAYA	DR. BENGİ GÜRSES
44	280800073	MEHMET CERRAH	KIRAN	DR. BENGİ GÜRSES
45	270800031	CANER	KÖSE	DR. NESLİHAN TAŞDELEN
46	280800066	ESRA	ODUNKIRAN	DR. NESLİHAN TAŞDELEN
47	260800087	ECE CANSU	OKUR	DR. NESLİHAN TAŞDELEN
48	270800021	MUSTAFA SENCER	ÖZKEÇECİ	DR. SİBEL TEMÜR SARSILMAZ
49	260800088	SEMİH	ÖZTÜRK	DR. SİBEL TEMÜR SARSILMAZ
50	270800049	EMİN	PALA	DR. ÖZGE KÖNER
51	270800048	ZELİHA BAŞAK	POLAT	DR. ÖZGE KÖNER
52	270800039	TUĞBA	ŞAHİN	DR. ÖZGE KÖNER
53	270800036	MEHMET BAKİ	ŞENYÜREK	DR. FERDİ MENDA
54	270800037	ELİF ÇİĞDEM	ŞİRAZİ	DR. FERDİ MENDA
55	270800026	ABDULLAH	TAŞÇI	DR. FERDİ MENDA
56	260708032	SİMGE	TEKTAŞ	DR. SEVGİ BİLGİN
57	290800075	LEYLA ZEYNEP	TİGREL	DR. SEVGİ BİLGİN
58	270800007	SELİM	TURAN	DR. SEVGİ BİLGİN
59	280800049	KEMAL	USLU	DR. ÖZGÜL KESKİN
60	280800053	EMİR	ÜNAL	DR. ÖZGÜL KESKİN
61	280800014	ŞEYMA TUĞÇE	ÜNALDI	DR. ÖZGÜL KESKİN
62	260800085	GÜNİŞİL	YALÇIN	DR. UĞUR TURE
63	270800046	KÜBRA	YILMAZ	DR. UĞUR TURE
64	280800032	ZEYNEP	YILMAZ	DR. BAŞAR ATALAY

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AIM AND OBJECTIVES OF PHASE VI

The characteristic of the Phase 6 Program is its nature as a preparation period covering the entire medical faculty goals and objectives. The aim of the Phase 6 Program is to improve skills before medical licensing and under the condition of supervision such as clinical problem solving, evidence based approach in a framework of professional ethical principles and rules, as well as basic medical knowledge and skills.

At the end of this phase the student should be able to,

KNOWLEDGE

- determine medical problems accurately and develop solutions using his/her general medical knowledge

SKILLS

- obtain comprehensive medical history from the patient
- perform comprehensive physical examination
- prepare a seminar in accordance with the evidence based medicine principles and using the current scientific data
- use the presentation skills effectively
- evaluate scientific texts
- design scientific studies which can be conducted in primary care circumstances
- conduct scientific studies which can be carried out in primary care circumstances
- choose appropriate laboratory tests and imaging methods according to clinical condition and appropriate to primary care level
- develop laboratory results report
- interpret the results of the laboratory tests and imaging methods

ATTITUDE

- show effective communication skills in patient doctor relations
- show an attitude respectful to ethical principles
- adopt team work mentality in his/her relations with colleagues and other health staff
- show motivation and interest in profession
- participate the activities during internship in time and completely
- take responsibilities and fulfill them during internship

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SEMINAR PROGRAM

(The seminars are held in conference hall in Yeditepe University Hospital between 12.30-13.30 hours. Every student should attend these seminars.)

- | | |
|--|--|
| 1. Pediatrics: 08 June 2013 Monday | Emergency in Pediatrics |
| 2. Internal Medicine: 12 August 2013 Monday | Approach to Anemia |
| 3. Physical Rehabilitation: 02 September 2013 Monday | Neck and Back Pain |
| 4. Cardiology: 07 October 2013 Monday | ECG Practical Evaluation and Diagnosis
of Enfarctus |
| 5. Pulmonary: 04 November 2013 Monday..... | Respiratory Infections and Treatment |
| 6. Plastic surgery: 18 November 2013 Monday..... | Burns |
| 7. General Surgery: 02 December 2013 Monday | Acute Abdomen |
| 8. Orthopedics: 16 December 2013 Monday..... | Emergency in
Orthopedics |
| 9. Internal Medicine: 06 January 2014 Monday..... | Hypertension and Treatment |
| 10. Emergency Medicine: 03 February 2014 Monday..... | First Aid in Traffic Accidents |
| 11. Pediatrics: 03 March 2014 Monday..... | Vaccines |
| 12. Dermatology: 07 April 2014 Monday..... | Emergency in Dermatology |
| 13. Neurology: 05 May 2014 Monday..... | Convulsions and Treatment |
| 14. Psychiatry: 9 June 2014 Monday..... | Emergency in Psychiatry |

HOSPITAL ORIENTATION PROGRAM (The program is held in conference hall in Yeditepe University Hospital on the 31st of July 2013 between 13:30-18:00 hours. Every student should attend the orientation program.)

- | | |
|---|--|
| Prof. Dr. Selami Sözübir / Emine Kurt 45 min..... | Quality Improvement and Patient Safety |
| Prof. Dr. Selami Sözübir / Emine Kurt 60 min..... | International Patient Safety |
| Assoc.Prof.Dr. Meral Sönmezoğlu / Sevim Şen (Nurse) 60 min..... | Infection Control Program |
| Anıl Sönmez (Pharmacist) 45 min..... | Drug Safety |
| Mehmet Ünsal (Engineer) 60 min..... | Emergency Management |

**YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI**

INTERNAL MEDICINE

YEDİTEPE UNIVERSITY HOSPITAL

Head of the Department of Internal Medicine: Cengiz Pata, MD. Prof. of Gastroenterology

Gülçin Kantarcı, MD. Prof. of Nephrology

S. Sami Kartı, MD. Prof. of Hematology

Muzaffer Değertekin, MD. Prof. of Cardiology

Yaşar Küçükardalı, MD. Prof. of Internal Medicine

Sevda Özdoğan, MD. Prof. of Respiratory System

Başak Oyan Uluç, MD. Assoc. Prof. of Medical Oncology

Hasan Aydın, MD. Assoc. Prof. of Endocrinology

Ümit Akyüz, MD. Assoc. Prof. of Gastroenterology

Elif Büyüköner, MD. Assoc. Prof. Cardiology

Meral Sönmezoğlu, MD. Assoc. Prof. of Infectious Diseases

Müge Bıçakçıl, MD. Assoc. Prof. of Rheumatology

Zehra Eren, MD. Assist. Prof. of Nephrology

Olca Özveren, MD. Asist. Prof. of Cardiology

The interns are trained for 2 months periods under the responsibility of an instructor. All will work actively under the supervision of clinical department chiefs and instructors, like specialty trainees.

Theoretical and Practical Education Schedule:

Weekly day time work schedule of the students begins at 08:30. Training is conducted on a basis of a weekly scheduling. Students will be evaluating patients by taking their anamnesis, medical histories and performing physical examinations, along with laboratory investigations, and consultations. All their patient findings should be documented daily. During daily visits of the patients with a supervisor, all students should prepare and present their own patients. Students should attend to the meetings of their clinical departments.

Each student should attend to the weekly performed scientific seminar at Fridays and seminars of each subdisciplines.

At the end of their training, students will be evaluated and graded according to their inpatient, outpatient, laboratory, and patient-care skills along with their theoretical knowledge. The grading will be done as "passed" or "failed" with an overall evaluation score of 100.

AIM AND OBJECTIVES OF PHASE VI INTERNAL MEDICINE INTERNSHIP PROGRAM

AIM

The aim of the phase 6 Internal Medicine Program is to graduate medical doctors who have sufficient knowledge about the branches of internal medicine; cardiology, pulmonology, gastroenterology, infectious diseases, hematology, oncology and rheumatology; can manage internal medicine related health problems and perform the necessary preventive health care implementations in a primary care setting; display good communication skills, practice their profession following ethical principles, using up-to-date and evidence based scientific knowledge.

LEARNING OBJECTIVES

At the end of the Internal Medicine internship program the students should be able to;

KNOWLEDGE

- describe the complete physical examination of all organ systems
- analyze routine laboratory tests
- explain the characteristics of more specific tests (eg. PET CT, ERCP, Capsule endoscopy..) and their usages
- decide about when to give the patient a sick leave report and the appropriate report duration

SKILLS

- take an adequate patient history
- perform masterly physical examination
- guide the patient for diagnose, treatment and follow up according to history, physical examination and laboratory tests
- perform successfully minimal invasive procedures like venepuncture, taking blood, paracentesis etc. used in diagnosis and treatment
- fill the patient records
- go through procedures of admitting and discharging patients
- reach and use medical literature other than classical textbooks

ATTITUDE

- dress and look physically appropriate as a medical doctor
- work in cooperation with other doctors, assisting health personnel in the hospital within certain limits and ethical principles
- display sufficient social skills when forming a patient-doctor relationship
- adopt a symptom-focused approach in history taking
- adopt an organ system focused approach in physical examination

**YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI**

CHILD HEALTH and PEDIATRICS

YEDİTEPE UNIVERSITY HOSPITAL

Head of the Department of Child Health and Pediatrics: A. Ayça Vitrinel, MD. Prof.

Mehmet Reha Cengizlier, MD. Prof. of Pediatric Allergy

Filiz Bakar, MD. Prof. of Neonatology

Gülay Çiler Erdağ, MD. Assist. Prof.

**Meltem Uğraş, MD. Assist. Prof. of Gastroenterology,
Hepatology and Nutrition**

Suat Biçer, MD. Assist. Prof.

Öznur Küçük, MD. Assist. Prof.

Tuba Giray, MD. Lecturer

Defne Çöl, MD. Lecturer

The department defines the internship as a 2 months intensive clinical experience under the supervision and responsibility of a specialist. During the active clinical tasks, all interns will be working under the responsibility and supervision of the head of the department and the medical staff in charge. The head of the department is responsible for the attendance of the interns.

Practical and Theoretical Education

Working hours are from 08.30 to 16.30. Training of interns is carried out as shown in the schedule. Every intern is responsible to take part in each task of 3 or 5 of patients assigned to him/her. Obtaining an accurate history of the patient (anamnesis), physical examination, preparing the patient's file, organization of the laboratory and radiological examinations, preparing the schedule of treatment, presentation of the patients during case studies and lectures, and to summarize the important aspects of the history, physical exam and supporting lab tests and formulate a differential diagnosis as well as a plan of action that addresses both the diagnostic and therapeutic approach to the patient's problems are the important mile-stones of the daily tasks. Intern students of the pediatrics have to be on duty in clinics and/or emergency 3-days a week. The interns on duty, which are working under the responsibility and supervision of the physicians and specialist, are the first person in providing the medical aid and personal wishes of the inpatients. Intern medical students on duty are free in the following afternoon. The interns working in the outpatient clinics have clinical responsibilities, including medication and follow-up of the patients.

Each student should prepare and present at least one seminar during his/her internship.

Following the internship period, evaluation of the performance will be based on overall clinical performance both in outpatient clinics and in hospital, sharing clinical responsibilities, laboratory and field-work skills, the attitudes toward patients, interaction with other interns and physicians, regular attendance at medical meetings, lectures and case studies, performance of the basic administrative and organizational skills involved in day-to-day medical care. Rating of students recorded with required projects and will be performed as "passed" or "failed" with an overall evaluation score of 100.

AIM AND OBJECTIVES OF PHASE VI CHILD HEALTH AND PEDIATRICS INTERNSHIP PROGRAM

AIM

The aim of the phase 6 Pediatrics Program is to graduate medical doctors who are aware of the pediatric health priorities; can manage pediatric health problems and perform the necessary preventive health care implementations in a primary care setting; practice their profession following ethical principles, using up-to-date and evidence based scientific knowledge.

LEARNING OBJECTIVES

At the end of the pediatric internship program the students should be able to,

- plan the diagnostic process and treatment for childhood diseases
- treat the diseases that are commonly seen among children in primary health care
- refer the patients whose diagnosis, treatment and follow-up cannot be managed by primary health care
- ask for consultation from other medical specialties
- manage well child follow-up and vaccination
- counsel preventive health care issues
- keep up-to-date about the improvements in the field of Pediatrics
- work in accordance with the law and ethics
- communicate effectively with patients, patients relatives, colleagues and other healthcare personnel
- manage pediatric emergency cases
- take history from healthy and sick children
- perform physical examination
- make tests when necessary
- evaluate the results of laboratory and imaging tests make differential diagnosis and therapeutic approach
- follow-up growth and development in all age groups of pediatric patients
- perform anthropometric measures
- evaluate the results of the measurements comparing with the percentiles on growth charts
- counsel the family about nutrition and vaccination
- follow-up patients with chronic diseases
- guide the patients with chronic diseases
- perform resuscitation of newborn, infant and children
- keep records in regard to primary care according the official and legal requirements
- use the data processing system in the patient records
- follow up-to-date knowledge on Pediatrics
- search the literature
- use at least one foreign language to communicate with both the child and families that do not speak Turkish

- know at least one foreign language to follow medical literature
- make presentations to his/her colleagues about the patients he/she has followed
- contribute scientific studies on medical literature
- refer the patients that cannot be managed in a primary healthcare unit to an upper healthcare center
- communicate with the patients' parents during examination, laboratory testing, consultation and treatment steps of the sick child
- take informed consent from patients' parents and/or the patient
- communicate with his/her colleagues, patients and patients' parents
- counsel about all the preventive health services about children vaccination and nutrition being the utmost importance among them

ATTITUDE

- be conscious about importance of multidisciplinary working
- price the ethical and legal principles

YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI

OBSTETRICS AND GYNECOLOGY

YEDİTEPE UNIVERSITY HOSPITAL

Head of the Department of Obstetrics and Gynecology: N. Cem Fıçıcıođlu, MD. PhD. Prof.

Aslı Somunkıran, MD. Assoc. Prof.

Oluş Api, MD. Assoc. Prof.

Rukset Attar, MD. Assoc. Prof.

Gazi Yıldırım, MD. Assoc. Prof.

Pınar Cenksöy, MD.

ZEYNEP KAMİL GYNECOLOGY AND PEDIATRICS TRAINING AND RESEARCH HOSPITAL

Murat Api, MD. Assoc. Prof.

ROTATIONS:

1 month Yeditepe University Hospital

1 month Zeynep Kamil Gynecology and Pediatrics Training and Research Hospital

The students will build upon knowledge and abilities for the following skills acquired during the rotation; in addition to the general medical history, the student will demonstrate an ability to obtain and understand the basic elements of reproductive history taking, in addition to the general medical physical examination, the student will demonstrate the appropriate sensitivity and skills necessary to perform a physical examination in pregnant or non-pregnant patients. At the end of the program the students should be able to; coordinate normal delivery situation, and perform episiotomy, pre-, peri-, and post-natal care. Because of the importance of the sensitivity and intim nature of the gynecologic patient's history and physical examination, the students should gain specific skills at the end of the rotation.

Each student should attend to the weekly performed scientific seminars.

Daily work schedule of the students starts at 08:30. In this shift work, students should work with their designated supervisor during all the time. Students should evaluate pre-natal and post-natal patients by taking their anamnesis, medical histories and performing physical examinations, along with laboratory investigations, and consultations. During the training period each student is required to deliver at least 15 babies.

The attendance to the work time is strictly required for both in faculty and related hospitals.

Every student should obey the working conditions and rules of each related hospital. Students who do not obey these requirements and resist against the routine disciplinary order will be expelled from the program along with a report to the Dean of the Medical Faculty.

For each student "An Intern Evaluation Form" will be designed.

At the end of the training program students will be also evaluated as “successful / unsuccessful” according to their attendance.

At the end of their training the students will be evaluated and graded according to their antenatal, prenatal, delivery numbers, laboratory, and patient-care skills along with their theoretical knowledge. The grading will be done as “passed” or “failed” with an overall evaluation score of 100.

AIM AND OBJECTIVES OF PHASE VI OBSTETRICS AND GYNECOLOGY INTERNSHIP PROGRAM

AIM

The aim of the phase 6 Obstetrics and Gynecology Program is to graduate doctors who are aware of the obstetric and gynecological health priorities; can manage obstetric and gynecological health problems and perform the necessary preventive health care implementations in a primary care setting; practice their profession following ethical principles, using up-to-date and evidence based scientific knowledge, show good communication skills.

LEARNING OBJECTIVES

At the end of this program the student should be able to;

- list contraceptive methods, help the patient for appropriate method selection
- perform the right method in the direction of patient’s will and necessity
- diagnose pregnancy, follow-up until birth; in routine pregnancy controls order the right tests and evaluate the results
- perform Non-stress test (NST) and evaluate the result
- do differential diagnosis of Hyperemesis Gravidarum and diagnose
- diagnose the high-risk situations during pregnancy like gestational diabetes, multiple pregnancy, ectopic pregnancy; explain the emergency and importance of the situation to patients’ relatives; organize and refer the patient
- list the risk factors of obstetric emergencies like pre-eclampsia, eclampsia, antenatal bleeding, postpartum bleeding; in these situations he/she should be able to perform the first aid and transport the patient
- diagnose, list the causes and lead the patient for gynecological situations like amenorrhea, menopause, abnormal uterine bleeding, postmenopausal bleeding
- list the causes of sexually transmitted diseases (STD)
- inform the patient about protection and prophylaxis methods for STD’s, order diagnostic tests and perform the appropriate treatment
- list the risk factors of gynecological cancers
- perform cervical smear, evaluate the result and lead the patient for treatment
- communicate effectively with patients, patients’ relatives, colleagues and other health staff
- obtain informed consent when necessary

**YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI**

GENERAL SURGERY / EMERGENCY MEDICINE

YEDİTEPE UNIVERSITY HOSPITAL

Head of the Department of General Surgery:

Özcan Gökçe, MD. Prof.

Baki Ekçi, MD. Assoc. Prof.

Murat Kalaycı, MD. Assist. Prof.

Head of the Department of Emergency Medicine:

Mehmet Çağlı Külekçi, MD. Prof.

Sezgin Sarıkaya, MD. Assoc. Prof.

Didem Ay, MD. Assoc. Prof.

Can Aktaş, MD. Assoc. Prof.

Pınar Tura, MD. Emergency Med.Specialist

The students, who have been sent for 2 months rotation, work in outpatient, inpatient clinics, operation room and in other related services under the responsibility of a surgeon. They also take responsibility of patient care and work actively like the residents of the related clinic.

A training program has been given to the students at the beginning of each week and they are expected to work with and assist the residents. During the rotation the students should have performed the following skills under the supervision of a faculty member; taking history from the patient, analyzing laboratory tests, pre- and postoperative patient care, patient hospitalization/discharge, follow up. Each student should follow a definite number of beds. They are obligated to take care of their patients during the rotation.

Each intern doctor is expected to be on ward duty overnight periodically. It is aimed to teach the student how to approach to the poly-traumatized patient and to the patient with acute surgical problems.

The students should attend to case presentations, seminars which are held in clinic.

At the end of the clerkship, evaluation of student performance will be based on overall clinical performance both in hospital and outpatient clinics, case papers, the attitudes toward patients, interest in General Surgery, participation in seminars and overnight calls, regular attendance at scientific meetings, lectures and case conferences, the level of scientific and practical knowledge and consulting skills. Ratings of students recorded with required projects and will be performed as passed or failed with an overall evaluation score of 100.

AIM AND OBJECTIVES OF PHASE VI GENERAL SURGERY / EMERGENCY MEDICINE INTERNSHIP PROGRAM

AIM

The aim of the General Surgery and Emergency Medicine clerkship is to graduate doctors who can manage the diseases of digestive system, endocrine system, mammary and emergency surgery as well as wound care and organ transport cases in primary health care settings, when necessary can also consult the patient with other branches and organize the therapy and/or follow-up, can refer the patient to upper healthcare facilities providing appropriate transporting conditions.

LEARNING OBJECTIVES

In the end of the General Surgery and Emergency Medicine internship program the students should be able to;

KNOWLEDGE

- list the signs and symptoms, differential diagnoses and the treatments of the digestive system, hepatopancreaticobiliary system, mammary, thyroid, and emergency surgery diseases
- tell the reasons, the differential diagnoses and the treatments of acute abdomen
- evaluate existing signs and symptoms of the emergency patients and perform the necessary examination and laboratory studies and explain pre-diagnosis and the differential diagnosis and treatment steps
- explain the main concept of shock, blood transfusion, hemostasis and coagulation
- tell the conditions and indications of liver, kidney and pancreas transplantation and how to do follow-ups and treatment of these patients
- recognize abdominal hernias and conduct these patients for treatment
- analyze the routine laboratory studies
- how to arrange post-op treatments of patients operated by general surgery
- tell the diagnosis of the surgical diseases, treatment options at primary healthcare and appropriate transport conditions and criteria

SKILLS

- make all the basic general surgery examinations
- arrange and fill the patients' registration forms
- arrange the patients' admission procedures
- arrange the patients' discharge procedures
- diagnose acute abdomen with physical examination
- analyze, study and do the emergency treatment of the shock and/or digestive system hemorrhage at the primary healthcare
- perform the steps of the physical examination and the intervention to patients with acute abdomen
- manage multi-traumatized patients
- order preoperative tests according to the level of the surgical intervention in an adult patient and do the post-op follow-ups
- diagnose abdominal hernias
- do wound care and dressing
- diagnose and drain abscess and hematoma
- suture up the cuts
- perform biopsy

ATTITUDE

- respect patient-doctor communication and patient privacy
- take history with communication and behaving in a good manner towards the patient and the patient relatives
- know the importance of the informing patient and the patient relatives
- know the conditions of transporting patient to the further health care centers and the importance of the appropriate transporting in accordance with the rules

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

PSYCHIATRY

YEDİTEPE UNIVERSITY HOSPITAL

Department of Psychiatry:

Hakan Atalay, MD. Assist. Prof.

Naz Berfu Akbaş, MD. Assist. Prof.

Oğuzhan Zahmacıoğlu, MD. Assist. Prof.

ERENKÖY PSYCHIATRY AND CLINICAL NEUROLOGY TRAINING AND RESEARCH HOSPITAL

Serhat Çıtak, MD. Assoc. Prof.

Ümit Başar Semiz, MD. Assoc. Prof.

Students at their 6th year of medical schools are nearly considered as physicians, and they are expected to evaluate the patients based on the highest levels of personal skills and the most updated medical knowledge available worldwide. They should also be expected to make (differential) diagnose(s) among individuals with many different disorders, disturbances, as well as healthy ones. To do this, students should learn to view each of the patients as a whole person along with psychological, social and biological aspects. One-month clerkship training in psychiatry department is aimed at getting the interns these qualities together with a comprehensive approach toward not only psychiatric patients, but also all of the patients evaluated. In addition, the main goal of the psychiatry clerkship in practice is essentially to familiarize the student with the fundamentals of the psychiatric assessment and the diagnosis and treatment of psychiatric illnesses, including the common medical and neurological disorders related to the practice of psychiatry.

During Psychiatry Rotation students will have the opportunity to interact with and care for patients with a variety of psychiatric problems and in a variety of settings (inpatient units, outpatient clinics, emergency department and substance use disorders). In the outpatient clinic medical students will be expected to learn to assess ambulatory patients with new onset, as well as, chronic psychotic, substance use, mood and anxiety disorders, PTSD, somatoform disorders, and personality disorders. To gain the ability to make a differential diagnosis between psychiatric disorders proper and those disorders with psychiatric symptoms due to the various medical conditions such as trauma, substance use, medical diseases, etc. is of prime importance throughout their clinical practice.

The psychiatry clerkship is a 1 month rotation for the 6th year medical students with a goal of preparing intern doctors to enable to become interacting with a wide variety of patients with mental diseases in psychiatry ward and be able to respond appropriately to the psychiatric patients' problems. The rotation is mainly held in Erenköy Psychiatry and Clinical Neurology Training and Research Hospital.

At the first day of the course, students will be given an outline of psychiatric rotation and location of the orientation.

The 6th year training program begins with morning report between 09.00 and 09.30 a.m. held five days per week, provides an opportunity for residents to discuss challenging cases with the staff. At the end of this meeting, the first attendance of the day is made regularly. Intern medical students will attend outpatient clinics supervised by the psychiatrist in charge (specialists and senior assistant doctors) and are required for having a patient be examined and following patient evaluation to present the case they interviewed and examined by themselves in the teaching conferences. They also will be responsible to attend daily case presentations and daily review meetings, seminars, lectures, teaching rounds and case supervision submitted in the clinic.

At the end of the clerkship, evaluation of student performance will be based on overall clinical performance both in hospital and outpatient clinics, case papers, the attitudes toward patients, interest in psychiatry, participation in seminars, regular attendance at scientific meetings, lectures and case conferences, the level of scientific and practical knowledge.

AIM AND OBJECTIVES OF PHASE VI PSYCHIATRY INTERNSHIP PROGRAM

AIM

The aim of the Phase 6 Psychiatry Program is to graduate doctors who have knowledge about psychiatric disorders; can make diagnosis and differential diagnosis, initiate the treatment of diseases he/she is competent about and follow them up in primary health care settings; can inform the patients and their relatives about the disorder and refer them to the specialist in cases where he/she is not competent.

LEARNING OBJECTIVES

At the end of the Psychiatry internship program the students should be able to;

KNOWLEDGE

- have information on the neuroscientific and psychological bases of major psychiatric disorders, including schizophrenia, mood disorders, and anxiety disorders
- have information sufficient to make differential diagnoses between psychiatric and medical problems, and
- have a basic information on the psychopharmacology and psychotherapies

SKILLS

- evaluate psychiatric patients by assessing mental status, taking psychiatric history and performing psychiatric examination
- request the appropriate laboratory tests and consultations, when necessary
- stabilize the psychiatric emergency cases
- protect him/herself from a violent patient
- distinguish the symptoms, make diagnosis, and differential diagnosis, initiate the appropriate treatment and perform follow-ups of the diseases like depression, anxiety and panic attacks.
- distinguish the symptoms, make diagnosis, make the preliminary interventions and refer to the specialist in psychiatric diseases like schizophrenia, bipolar disorder, phobias, substance use disorders, psychosomatic disorders, attention deficit hyperactivity disorder
- give the necessary information and refer to the specialist in personality disorders
- make the necessary interventions in emergency conditions like suicide, conversion disorder, manic episode, and substance-related emergencies
- communicate effectively with the patients' relatives

ATTITUDE

- approach the patient in a neutral, extra-judicial and indiscriminate manner
- care about the privacy of patients, gives patients confidence
- establish empathy with the patient

**YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI**

RURAL MEDICINE

Head of Family Medicine Department: Ayça Vitrinel, MD. Prof of Pediatrics

LECTURERS:

Güldal İzbirak, MD. Assist. Prof. of Family Medicine

Hülya Akan, MD. Assoc. Prof. of Family Medicine

Özlem Tanrıöver, MD. Assist. Prof. of Family Medicine

Ayşe Arzu Akalın, MD. Assist. Prof. of Family Medicine

Pınar Ay, MD. Assoc. Prof. of Public Health

Gülderen Yanıkkaya Demirel, MD. PhD. Assoc. Prof. of Immunology

Çiğdem Kaspar, PhD. Assist. Prof. of Medical Education

ROTATIONS:

2 weeks Seminars

2 weeks Family Health Center

2 weeks Public Health Center

1 week Tuberculosis Center

Family Medicine Department Research Presentations

Each Friday Sessions on Critical Appraisal of Medical Manuscripts or Research Activities in Family Medicine Department

AIM AND OBJECTIVES OF PHASE VI RURAL MEDICINE INTERNSHIP PROGRAM

AIM

To understand the nature of the preventive, curative and promotive health care services as part of the primary health care system of the country and learn how to manage health and disease within natural settlements of the individuals.

LEARNING OBJECTIVES

At the end of this program the student should be able to;

KNOWLEDGE

- explain principles of preventive and promotive medicine
- explain health care delivery systems and facilities
- compare the primary health care system of the country with others
- tell types and methods of epidemiological studies
- tell biostatistically analyzing methods
- define meaning and importance of the health information systems for assessment of the public health status
- evaluate social, cultural and economic determinants of health and diseases

SKILLS

- evaluate and manage health and disease within the social and physical environmental conditions of the individuals
- organize and manage preventive and promotive health services within primary health care facilities
- conduct an epidemiological study under field conditions
- collect and analyze data and report the results
- produce information and make conclusions by using the health information systems of the community
- develop skills for delivery and management of primary health care services
- collaborate with other sectors for the success of various school health, occupational health and environmental health programs
- conduct in-service training and continuing education of the health personnel

ATTITUDE

- price the meaning and importance of teamwork for public health

PHASE VI RURAL MEDICINE ROTATIONS 2013 - 2014

Groups	Seminars 2 Weeks	Family Health Center 2 Weeks	Public Health Center 2 Weeks	Tuberculosis Center 1 Week	Family Medicine Department Research Presentations
5	July, 01-12, 2013	15.07.2013- 26.07.2013 5 /A	15.07.2013- 26.07.2013 5/B	August, 12-16, 2013	August, 19-29, 2013
		29.07.2013- 07.08.2013 5/B	29.07.2013- 07.08.2013 5/A		
6	September, 02-13, 2013	16.09.2013- 27.09.2013 6/A	16.09.2013- 27.09.2013 6/B	October, 14, 2013	October, 21-31, 2013
		30.09.2013- 11.10.2013 6/B	30.09.2013- 11.10.2013 6/A		
1	November, 01-15, 2013	18.11.2013- 29.11.2013 1/A	18.11.2013- 29.11.2013 1/B	December, 16-20, 2013	December, 23-31, 2013
		02.12.2013- 13.12.2013 1/B	02.12.2013- 13.12.2013 1/A		
2	January, 02-17, 2014	20.01.2014- 31.01.2014 2/A	20.01.2014- 31.01.2014 2/B	February, 17-21, 2014	February, 24-28, 2014
		03.02.2014- 14.02.2014 2/B	03.02.2014- 14.02.2014 2/A		
3	March, 03-14, 2014	17.03.2014- 28.03.2014 3/A	17.03.2014- 28.03.2014 3/B	April, 14-18, 2014	April, 21- 30, 2014
		31.03.2014- 11.04.2014 3/B	31.03.2014- 11.04.2014 3/A		
4	May, 02-16, 2014	20.05.2014- 30.05.2014 4/A	20.05.2014- 30.05.2014 4/B	June, 16-20, 2014	June, 23-30, 2014
		02.06.2014- 13.06.2014 4/B	02.06.2014- 13.06.2014 4/A		

*** FAMILY HEALTH CENTERS**

Kadıköy FHC Nr. 3:	Erhan Sayalı, MD
Kadıköy FHC Nr.19:	Meltem Yalçın Taşkın, MD
Kozyatağı FHC:	Kemal Murat Ünalmiş, MD
Altıntepe FHC:	Ata Deniz, MD
Beykoz FHC Nr. 5:	Emrah Kırımlı, MD
Bahçelievler Dr. Bülent Gök FHC:	Şenol Gümüşdere, MD
	İlker Böler, MD

**** PUBLIC HEALTH CENTER**

Maltepe PHC:	Esra Şahin, MD
Maltepe PH Directorate:	Fatih Önsöz, MD

***** TUBERCULOSIS CENTERS**

Kartal TC	Pendik TC
Maltepe TC	Kadıköy TC
Üsküdar TC	

For the details of groups please refer to the following pages.

**2013-2014 PHASE 6
RURAL MEDICINE INTERNSHIP PROGRAM GROUP LIST**

		15.07.2013-26.07.2013	29.07.2013-07.08.2013	
GROUP 5	Kübra Yılmaz	5/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER
	Tuğba Şahin			
	Büşra Demirel			
	Belin Kamiloğlu			
	Can Oğuzhan Dursun			
	İdris Taş			
			15.07.2013-26.07.2013	29.07.2013-07.08.2013
	Zeynep Kaya	5/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER
	Mahmut Talha Kaner			
	Elif Çiğdem Şirazi			
	Mustafa Sencer Özkeçeci			
Muhammed Emin Dağüstü				
Veronika Kutuyavina				

		16.09.2013-27.09.2013	30.09.2013-11.10.2013	
GROUP 6	Ece Gümüšoğlu	6/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER
	Ece Cansu Okur			
	Ruba İbrahim			
	Zeynep Nur Demirok			
	Şeyma Tuğçe Ünalı			
	Baran Erdik			
			16.09.2013-27.09.2013	30.09.2013-11.10.2013
	Simge Faydalı	6/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER
	Merve Demir			
	Günşıl Yalçın			
	Hakan Ersöz			
Mehmet Cerrah Kıran				
Duygu Ersoy				

			18.11.2013-29.11.2013	02.12.2013-13.12.2013
GROUP 1	Betül Ercan	1/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER
	Ezgi Er			
	Gözde Baklaya			
	İpek Buse Güzelce			
	Yasemin Çınar			
			18.11.2013-29.11.2013	02.12.2013-13.12.2013
	Leyla Zeynep Tigrel	1/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER
	Simge Tektaş			
	Zeliha Başak Polat			
	Damla Eren			
Cemil Alpak				

			20.01.2014-31.01.2014	03.02.2014-14.02.2014
GROUP 2	İhsan Ayhan	2/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER
	Ömür Görgülü			
	Emir Ünal			
	Berkay Bozkurt			
	Çağatay Büyükçelen			
			20.01.2014-31.01.2014	03.02.2014-14.02.2014
	Kağan Utku Can	2/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER
	Aydın Talat Baydar			
	İdris Avcı			
	Araz Aliyev			
Evlin Aliyev				

			17.03.2014-28.03.2014	31.03.2014-11.04.2014	
GROUP 3	Yunus Emre Bulum	3/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER	
	Gül Dilan Bostan				
	Betül Akbay				
	Pakize Cennetoğlu				
	Selim Turan				
	Ayşe Işıl Doğan				
				17.03.2014-28.03.2014	31.03.2014-11.04.2014
	Kemal Uslu	3/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER	
	Abdullah Taşçı				
	Mehmet Baki Şenyürek				
	Semih Öztürk				
	Emin Pala				
Caner Köse					

			20.05.2014-30.05.2014	02.06.2014-13.06.2014	
GROUP 4	Merve Dizdar	4/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER	
	Gökçe Gün				
	Çağla Bahar Bülbül				
	Yaşar Can Altınışık				
	Onur Burak Çeğilli				
				20.05.2014-30.05.2014	02.06.2014-13.06.2014
	Ece Gizem Çelikbaş	4/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER	
	Baran Çalışgan				
	Zeynep Yılmaz				
	Ceyda Aydın				
Berent Aldıkaçtı					

Seminars

Introduction to Public Health – *Özlem Tanrıöver*

Health, Illness and Health Services – *Pınar Ay*

Social and Behavioral Determinants of Health and Disease – *Pınar Ay*

Introduction to Epidemiology – *Pınar Ay*

Epidemiological Research Methods – *Pınar Ay*

Data Analysis and Biostatistics – *Çiğdem Kaspar*

Prevention and Control of Diseases (Workshop - 2 Days Program) – *Hülya Akan*

Health Care Systems and Policies – *Özlem Tanrıöver*

Health Care Organization in Turkey – *Güldal İzbrak*

Legal Responsibilities in Primary Care – *Arzu Akalın*

Writing a Study Proposal – *Gülderen Yanıkkaya Demirel*

Death Certificate – *Arzu Akalın*

Prevention and Control of Diseases

Assoc Prof Hülya Akan, MD

LEARNING OBJECTIVES

At the end of this course the student should be able to;

KNOWLEDGE

- explain principles of preventive and promotive medicine
- explain premordial, primary, secondary and tertiary prevention
- explain the concept of periodic examination
- explain the terms of eradication and elimination of diseases
- compare international and national guidelines of periodic examination
- explain validity of screening tests in primary care

SKILLS

- plan periodic examination regarding age, sex and health risks
- draw a family genogram
- account positive and negative predictive values of screening tests regarding national disease prevalence statistics

DAY 1

Hour	Title	Type	Duration
09:00- 09:10	Meeting and explaining the objectives of the work-shop	<i>Presentation</i>	10'
09:10- 10:00	Preventive medicine and health promotion concept The role of preventive medicine in primary care	<i>Presentation & Big group discussion</i>	50'
10:00-10:20	BREAK		20'
10:20- 11:00	Planning preventive medicine regarding age and sex	<i>Small group work</i>	40'
11:20-11:40	Discussion and presentations of small group works	<i>Big group work</i>	20'
11:40-12:30	Periodic examination and Validity of screening tests in primary care	<i>Lecture</i>	50'
12:30-13:30	LUNCH BREAK		60'
13:30 -15:00	Recommendations for Adults Cancer	Presentation by trainees and group discussion regarding international and national guidelines	90'
15:00-15:30	BREAK		30'
15:30-17:00	Recommendations for Heart, Vascular, and Respiratory Diseases	Presentation by trainees and group discussion regarding international and national guidelines	90'

DAY 2

Hour	Title	Type	Duration
09:00- 10:30	Recommendations for Infectious Diseases	<i>Presentation by trainees and group discussion regarding international and national guidelines</i>	90'
10:30-11:00	BREAK		30'
11:00-11:30	Recommendations for Injury and Violence	<i>Presentation by trainees and group discussion regarding international and national guidelines</i>	40'
11:30-12:00	Recommendations for Mental Health Conditions and Substance Abuse	<i>Presentation by trainees and group discussion regarding international and national guidelines</i>	30'
12:00-12:20	Recommendations for Obstetric and Gynecologic Conditions	<i>Presentation by trainees and group discussion regarding international and national guidelines</i>	20'
12:30-13:30	LUNCH BREAK		60'
13:30-15:00	Recommendations for Metabolic, Nutritional, and Endocrine Conditions	Presentation by trainees and group discussion regarding international and national guidelines	90'
15:00-15:15	BREAK		15'
15:15- 15:35	Recommendations for Musculoskeletal Conditions	Presentation by trainees and group discussion regarding international and national guidelines	20'
15:35-15:45	Recommendations for Vision Disorders	Presentation by trainees and group discussion regarding international and national guidelines	10'
15:45- 17:15	Recommendations for Children and Adolescents	Presentation by trainees and group discussion regarding international and national guidelines	90'

Expectations from students:

- Presentation one of the subjects according to international (USPSTF, AAFP) and national guidelines (Turkish Ministry of Health- provided by trainer) and also updated literature

<http://www.uspreventiveservicestaskforce.org/recommendations.htm>

<http://canadiantaskforce.ca/>

<http://www.aafp.org/home.html>

Draw one family genogram and give at the end of rural medicine internship with their research project files

- Pre-reading of guidelines (all students)
- Active listening and active participation to group works

Critical Appraisal of Medical Manuscripts

Assoc Prof Dr. Hülya Akan - Assist. Prof. Dr. Özlem Tanrıöver

LEARNING OBJECTIVES

At the end of this course the student should be able to;

KNOWLEDGE

- explain the major points of critical reading
- define major parts of a manuscript
- explain how to criticize a manuscript language
- explain about the aim and methodological concordance
- explain how to criticize graphs and table of a manuscript
- explain how to criticize references of a manuscript
- tell about the major common mistakes done when writing a manuscript

SKILLS

- critically read a manuscript
- report about a manuscript regarding checklist
- present a manuscript with positive and negative aspects and limitations

First week

Hour	Title	Type	Duration
09:00- 10:30	Writing and reviewing a manuscript	<i>Lecture Presentation</i>	90'
10:50- 11:20	Most common reasons why manuscripts are not accepted for publication	<i>Lecture Presentation</i>	30'
11:20- 12:10	Reviewing a manuscript regarding guidelines	<i>Small group work</i>	40'
12:10-12:30	Presentations of small groups	<i>Big group work</i>	20'

Second Week

Hour	Title	Type	Duration
09:00- 09:30	Criticizing methodology	<i>Lecture Presentation</i>	30'
09:30- 10:00	Criticizing methodology and presentations	<i>Small group work</i>	30'
10:00-10:20	BREAK		20'
10:20- 11:20	Criticizing findings, graphs	<i>Lecture Presentation</i>	60'
11:20-12:20	Criticizing tables and references	<i>Lecture Presentation</i>	60'
12:20-13:00	Choosing manuscripts for critical appraisal	<i>Search engines, databases</i>	40'

Third Week

Hour	Title	Type	Duration
09:00- 12:30	Presentations of students	<i>Each student has 15 minutes for presentation of critically appraisal of a medical manuscript and to answer questions</i>	210'

This course is done every two weeks on Friday morning sessions and includes theoretical presentations and group works and presentations of students.

Expectations from students:

- Read relevant literature before first day meeting:

- *A systematic guide to reviewing a manuscript*

James M Provenzale

Robert J Stanley

- *The top ten reasons why manuscripts are not accepted for publication*

David J Pearson

- Read a manuscript and criticize according to guideline provided by trainers
- Present the read manuscript
- Provide a report about the manuscript at the end of rural medicine internship with their research file
- Active listening and active participation to group works

Conducting and Writing a Medical Research

Assoc. Prof. Dr. Hülya Akan - Assist. Prof. Dr. Özlem Tanrıöver

Assoc. Prof. Dr. Gulderen Yanıkkaya Demirel - Assist. Prof. Dr. Çiğdem Kaspar

This task is a group medical research project work. First the students get acquainted on a given (or suggested by the student and approved by the instructor) research topic by reading literature that is related to the topic. After that the student makes the work that is related to it, making of measurements or other kinds of experiments, and comparing methods presented in the literature. The last and the most important phase is to report of the findings in scientific style in written form. The articles have a few evaluation cycles on which the student may have to change her/his output a lot. The article can be written in English or Turkish.

First Friday

Hour	Title	Type	Place
09:30- 12:30	Getting Started on Research	<i>Discussion about the steps in writing a research paper</i>	Yeditepe University Campus
		<i>Types of research projects Choosing a subject Conducting a literature review Developing a research question</i>	
Hour	Title	Type	Place
Free Time	Getting Started on Research	<i>Using University's Library Resources</i>	Yeditepe University Campus
		<i>Search techniques Evaluating sources Types of journals and journal articles</i>	

2nd Friday

Hour	Title	Type	Place
09:30- 12:30	Obtaining and Presenting Evidence and Methods	<i>Powerpoint presentation explaining students' proposal statement or early work.</i>	Yeditepe University Campus
	(Students are required to choose a topic to research, gather resources, take notes, and create an outline)	<i>Discussion on the nature of scientific evidence and how it is effectively used and presented.</i>	

Each student will work with 4 people and each group will have a mentor.

Data Analysis Plan: Students will work on their data using statistical methods.

Last Friday

Hour	Title	Type	Place
09:30- 12:30	Obtaining and Presenting Evidence and Methods	<i>Powerpoint presentation of Organizing and Presenting student's Work</i>	Yeditepe University Campus
	Discussion on the structure of a paper, how to organize it.	<i>Students should bring a current paper draft with an outline or a recently completed paper</i>	

The accomplishment of this course consists of two tasks, reviewing a scientific article, and a scientific project. Both tasks must be executed completely. The scales below show the essential items for the grading.

Yeditepe University Faculty of Medicine Phase VI

Rural Health Project Assessment Scale

	PROJECT NO	Name, Surname	Choosing a topic and its relevance to the subject	Understanding basic concepts and information relating to the project, and presenting	Project report layout, content, compliance with the spelling rules	Bring all the information together and using creativity in the presentation	Gathering information using different sources of information and data collection	Correct writing of resources	Bringing the project on time	TOTAL POINTS
			10 Points	20 Points	10 Points	30 Points	10 Points	10 Points	10 Points	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
PROJECT NO	1	Title of the Project :								
	2	Title of the Project :								
	3	Title of the Project :								
	4	Title of the Project :								

**YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI**

ELECTIVE

The elective clerkship is a 1 month rotation for the 6th year medical students which have been chosen by the students from the clerkship programs list of phase IV, V and VI.

Like the other rotations, evaluation of student performance will be based on overall clinical performance both in hospital and outpatient clinics, case papers, the attitudes toward patients, participation in seminars and overnight calls, regular attendance at scientific meetings, lectures and case conferences, the level of scientific and practical knowledge and consulting skills. Ratings of students recorded with required projects and will be performed as “passed “or “failed” with an overall evaluation score of 100.



**YEDİTEPE ÜNİVERSİTESİ TIP FAKÜLTESİ
İNTÖRN DEĞERLENDİRME FORMU**

Ders yılı:	
Öğrencinin Adı, Soyadı	
Öğrenci No	
Stajın Yapıldığı Anabilim Dalı	
Staj Döneminin Başlangıç ve Bitiş Tarihi	
Staj Sonu Başarı Notu	

- Lütfen öğrencinin başarısını, her kategori için yüz üzerinden ayrı ayrı değerlendiriniz.
- Öğrenci hakkında, aşağıda sıralanan kategoriler dışında kalan konulardaki olumlu ya da olumsuz gözlem ve değerlendirmelerinizi, son bölümdeki “Diğer Görüşleriniz” bölümünde belirtiniz.
- Her kategoriden verdiğiniz notların ortalamasını ve aşağıdaki derecelendirme ölçütlerine göre harf puanını verip başarılı veya başarısız olduğunu belirtiniz.

Değerlendirme Ölçütleri		
85-100	AA	
75-84	BA	
65-74	BB	
60-64	CB	
50-59	CC	
0-49	F	GEÇMEZ
	F2	DEVAMSIZ

Değerlendirme Kategorisi	RAKAMLA (100 üzerinden)
Genel görünüm	
Öykü alma ve fizik muayene becerileri	
Genel tıp bilgileri	
Hasta hekim ilişkilerindeki becerileri ve etik ilkelere saygılı tutumu	
Meslektaşları, diğer sağlık personeli ile ilişkisi ve ekip çalışması anlayışı	
Tıbbi sorunları doğru saptayabilme ve çözüm üretebilme becerileri	
Motivasyon ve mesleki ilgisi	
Staj süresince yürütülen etkinliklere zamanında ve tam olarak katılması	
Staj süresince sorumluluk alma ve bunları yerine getirme anlayışı	
Staj süresince hazırladığı seminer ve katıldığı bilimsel tartışmalardaki başarısı	
Laboratuvar çalışmalarındaki başarısı	
Diğer görüşleriniz	
TOPLAM	
ORTALAMA (HARF NOTU ile birlikte)	
SONUÇ	BAŞARILI <input type="checkbox"/> BAŞARISIZ <input type="checkbox"/>

ÖĞRETİM ÜYESİ/KLİNİK ŞEFİ:

TARİH:

Değerlendirme formunu mümkün olan en objektif biçimde ve titizlikle eksiksiz doldurduğunuz için teşekkür ederiz.

Contact

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