



YEDİTEPE UNIVERSITY

FACULTY of MEDICINE

PHASE VI

ACADEMIC PROGRAM BOOK

2014 – 2015

YEDİTEPE UNIVERSITY

FACULTY of MEDICINE

PHASE VI

ACADEMIC PROGRAM BOOK

2014 – 2015

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:

1) *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 2014 – 2015)

Yaşar Küçükardalı, MD. Prof. (Coordinator)
Hülya Akan, MD. Assoc. Prof. (Co-coordinator)
Oluş Api, MD. Assoc. Prof. (Co-coordinator)
Suat Biçer, MD. Assoc. Prof. (Co-coordinator)
Turhan Özler, MD. Assist. Prof. (Co-coordinator)

Contact Information of Coordinators		
	E-mail	Telephone
Yaşar Küçükardalı	yasar.kucukardali@yeditepe.edu.tr	0216 578 4112
Hülya Akan	hakan@yeditepe.edu.tr	0216 467 88 60
Oluş Api	olus.api@yeditepe.edu.tr	0532 434 15 82
Suat Biçer	suat.bicer@yeditepe.edu.tr	0216 5784910 0216 5784101-02 0505 4509336
Turhan Özler	turhan.ozler@yeditepe.edu.tr	0216 5784054

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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 CALENDER 2014 - 2015

July 01, 2014 (Tuesday)	Beginning of Phase VI
July 28-30, 2014 (Monday-Wednesday)	Religious Holiday
August 30, 2014 (Saturday)	National Holiday
September 29 , 2014 Time 10:00 (Monday)	Coordination Committee Meeting
October 3-7,2014 (Friday-Tuesday)	Religious Holiday
October 28-29, 2014 (Tuesday-Wednesday)	Republic Day- National Holiday
November 10, 2014 (Monday, at 9.00-12.00)	Commemoration of Atatürk
January 01, 2015 (Thursday)	New Year
January 05, 2015 Time 10:00 (Monday)	Coordination Committee Meeting
March 14, 2015 (Saturday)	Physicians' Day
April 23, 2015 (Thursday)	National Holiday
April 27, 2015 Time 10:00	Coordination Committee Meeting
May 01, 2015 (Friday)	Labor's Day
May 19, 2015 (Tuesday)	National Holiday
June 30, 2015 (Tuesday)	End of Phase VI
July 01, 2015 Time 10:00 (Wednesday)	Coordination Committee Meeting

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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)

TEACHING YEAR 2014-2015
PHASE VI.
ACADEMIC SCHEDULE

	1	2	3	4	5	6
01.07.2014 / 31.07.2014	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (İ.M.Ü.)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (E.RSH)
10.07.2014 HOSPITAL ORIENTATION PROGRAM/ YEDİTEPE UNIVERSITY HOSPITAL CONFERENCE HALL /14:00/17:00						
01.08.2014 / 29.08.2014	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (İ.M.Ü.)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Elective
01.09.2014 / 30.09.2014	Psychiatry (E.RSH)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (İ.M.Ü.)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine
01.10.2014 / 31.10.2014	Elective					
03.11.2014 / 28.11.2014	Rural Medicine	Psychiatry (E.RSH)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (İ.M.Ü.)	Child Health and Pediatrics (Y.Ü.H.)
01.12.2014 / 31.12.2014		Elective				
02.01.2015 / 30.01.2015	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (E.RSH)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (İ.M.Ü.)
02.02.2015 / 27.02.2015			Elective			
02.03.2015 / 31.03.2015	Obstetrics and Gynecology (Y.Ü.H.) (İ.M.Ü.)	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.)
01.04.2015 / 30.04.2015				Elective		
04.05.2015 / 29.05.2015	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (İ.M.Ü.)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (E.R.S.H.)	Internal Medicine (Y.Ü.H.)
01.06.2015 / 30.06.2015					Elective	

Y.Ü.H: YEDİTEPE UNIVERSITY HOSPITAL

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

İ.M.Ü: İSTANBUL MEDENİYET UNIVERSITY GÖZTEPE TRAINING and RESEARCH HOSPITAL

STUDENT GROUPS		
Group 1 (9 students)	Group 2 (9 students)	Group 3 (11 students)
Beylem Bengi Döğüş	Tuğçe Akgün	Derya Kaya
Özge Koç	Batu Batuge	Özgün Tolga Nazlıkul
Buse Sarıgül	Ayşenur Yaman	Birant Boldan
Gizem Çetinkaya	Ömer Faruk Bucak	Alkım Gizem Yılmaz
İbrahim Nahit Şendur	Işıl Kamberoğlu	Murat Ercin
Tevfik Giray Özkırım	Ece Kurtul	Hakan Akgün
Hüseyin Bülent Mermer	Sibel Taner	Emrah Tekin
Emine Şenkal	Gül Köksal	Emine Şahin
Kezban Burcu Avanoğlu	Ayfer Sun	Furgan Kasap
		Furkan Batuhan Davun
		Ahmet Tuğrul Yaralı
Group 4 (11 students)	Group 5 (10 students)	Group 6 (12 students)
Taner Tan	Utkucan Acar	Ece Birincioğlu
Mehmet Bekir Şen	Dilek Damla Saymazlar	Arsen Güngör
Ceren Sultan Altay	Deniz Uluçeçen	Elçin Bayık
Irmak Tekeli	Özge Selahi	Sevda Karakaya
Burçin Tuvana Us	Ozan Başkurt	Zeynep Karademir
Mehmet Deniz Kesimer	İlayda Uyat	Fatih Kaya
Ahmet Saç	Merve Deniz Tekin	Hüseyin Harmanda
Yiğit Moğol	Betülhan Sönmez	Sevim Didem Şeref
Gizem Onurel	Aylin İnaltekin	Umut Ulutaş
Aliye Sevdem Gülcan	Özlem Sevinç	Batuhan Kartal
Ayşegül Yöner		Onur Küçüközer
		Ödül Öntaş

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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 students 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
- f) Contribute to students adapting the habit of lifelong learning
- g) Guide students to counseling services of the university
- h) Set a role model as long as the professional susceptibility, professional guidance, intellectual responsibility, interaction with peers, ethics, physician awareness are concerned
- i) Contribute to cultivation of professional and intellectual development in a rapidly changing world
- j) Acknowledge the coordinator when there are unsolved problems of the students

Consultant -student relationship is a dynamic and mutual process carried out in 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 atisfaction 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

1	290800032	UTKUCAN	ACAR	DOÇ. DR. CAN ÇINAR
2	290800030	TUĞÇE	AKGÜN	DOÇ. DR. CAN ÇINAR
3	270800079	HAKAN	AKGÜN	DOÇ. DR. MELİH GÜVEN
4	280800010	CEREN SULTAN	ALTAY	DOÇ. DR. MELİH GÜVEN
5	290800045	KEZBAN BURCU	AVANOĞLU	DOÇ. DR. MELİH GÜVEN
6	270800080	A.BATU	BATUGE	DOÇ.DR ZEKERİYA KÜÇÜKDURMAZ
7	290800031	OZAN	BAŞKURT	DOÇ.DR ZEKERİYA KÜÇÜKDURMAZ
8	280800055	ELÇİN	BAYIK	DOÇ.DR ZEKERİYA KÜÇÜKDURMAZ
9	280800044	ECE	BİRİNCİOĞLU	YRD.DOÇ.DR.OĞUZHAN ZAHMACIOĞLU
10	270800084	BİRANT	BOLDAN	YRD. DOÇ. DR. ATILLA ÖZKAN
11	280800017	ÖMER FARUK	BUCAK	YRD. DOÇ. DR. ATILLA ÖZKAN
12	290800049	GİZEM	ÇETİNKAYA	YRD. DOÇ. DR. ATILLA ÖZKAN
13	20100800077	FURKAN BATUHAN	DAVUN	YRD.DOÇ.DR.OĞUZHAN ZAHMACIOĞLU
14	280800060	BEYLEM BENGİ	DÖĞÜŞ	DOÇ. DR. SEZGİN SARIKAYA
15	270800081	MURAT	ERÇİN	DOÇ. DR. SEZGİN SARIKAYA
16	280800074	ALİYE SEVDEM	GÜLCAN	DOÇ. DR. SEZGİN SARIKAYA
17	280800054	ARSEN	GÜNGÖR	YRD.DOÇ.DR.OĞUZHAN ZAHMACIOĞLU
18	280800024	HÜSEYİN	HARMANDA	PROF. DR. FİLİZ BAKAR
19	290800039	AYLİN	İNALTEKİN	PROF. DR. FİLİZ BAKAR
20	280800031	SALİH BATUHAN	KARTAL	PROF. DR. FİLİZ BAKAR
21	270800085	SEVDA	KARAKAYA	YRD.DOÇ.DR. HASBEY HAKAN KOYUNCU
22	280800076	IŞIL	KAMBEROĞLU	YRD.DOÇ.DR. HASBEY HAKAN KOYUNCU
23	280800052	FURGAN	KASAP	YRD. DOÇ. DR. GÜLAY ÇİLER ERDAĞ
24	270800083	DERYA	KAYA	YRD. DOÇ. DR. GÜLAY ÇİLER ERDAĞ
25	20110800082	FATİH	KAYA	YRD. DOÇ. DR. GÜLAY ÇİLER ERDAĞ
26	290800066	MEHMET DENİZ	KESİMER	DOÇ. DR. MELTEM UĞRAŞ
27	20130800083	ZEYNEP	KARADEMİR	PROF. DR. GÜLÇİN KANTARCI
28	290800042	ÖZGE	KOÇ	DOÇ. DR. MELTEM UĞRAŞ
29	290800043	GÜL	KÖKSAL	DOÇ. DR. MELTEM UĞRAŞ
30	280800039	ECE	KURTUL	DOÇ. DR. SUAT BİÇER
31	290800041	ONUR	KÜÇÜKÖZER	DOÇ. DR. SUAT BİÇER
32	290800056	HÜSEYİN BÜLENT	MERMER	DOÇ. DR. SUAT BİÇER
33	290800060	YİĞİT	MOĞOL	YRD. DOÇ. DR. ÖZNUR KÜÇÜK
34	270800067	ÖZGÜN TOLGA	NAZLIKUL	YRD. DOÇ. DR. ÖZNUR KÜÇÜK
35	280800028	GİZEM	ONUREL	YRD. DOÇ. DR. ÖZNUR KÜÇÜK
36	280800033	ÖDÜL	ÖNTAŞ	PROF. DR. MEHMET OKTAY TAŞKAPAN
37	290800014	TEVFİK GİRAY	ÖZKIRIM	PROF. DR. MEHMET OKTAY TAŞKAPAN

38	290800003	AHMET	SAÇ	YRD. DOÇ. DR. ASUMAN CÖMERT
39	290800029	BUSE	SARIGÜL	YRD. DOÇ. DR. ASUMAN CÖMERT
40	280800046	DİLEK DAMLA	SAYMAZLAR	YRD. DOÇ. DR. ASUMAN CÖMERT
41	290800002	ÖZGE	SELAHİ	YRD. DOÇ. DR. ÖZLEM AKIN
42	290800022	ÖZLEM	SEVİNÇ	YRD. DOÇ. DR. ÖZLEM AKIN
43	280800077	BETÜLHAN	SÖNMEZ	YRD. DOÇ. DR. ÖZLEM AKIN
44	270800076	AYFER	SUN	DOÇ. DR. MERAL SÖNMEZOĞLU
45	280800013	EMİNE	ŞAHİN	DOÇ. DR. MERAL SÖNMEZOĞLU
46	20120800079	SEVİM DİDEM	ŞEREF	DOÇ. DR. MERAL SÖNMEZOĞLU
47	280800009	MEHMET BEKİR	ŞEN	PROF. DR. ECE AYDOĞ
48	280800041	İBRAHİM NAHİT	ŞENDUR	PROF. DR. ECE AYDOĞ
49	270800086	EMİNE	ŞENKAL	PROF. DR. ECE AYDOĞ
50	270800078	TANER	TAN	PROF. DR. SELAMİ SÖZÜBİR
51	280800051	SİBEL	TANER	PROF. DR. EMİNE SEVDA ÖZDOĞAN
52	280800012	IRMAK	TEKELİ	PROF. DR. CENGİZ PATA
53	280800040	EMRAH	TEKİN	PROF. DR. EMİNE SEVDA ÖZDOĞAN
54	290800071	MERVE DENİZ	TEKİN	PROF. DR. EMİNE SEVDA ÖZDOĞAN
55	290800005	DENİZ	ULUÇEÇEN	PROF. DR. CENGİZ PATA
56	260800043	UMUT	ULUTAŞ	PROF. DR. CENGİZ PATA
57	290800018	BURÇİN TUVANA	US	PROF. DR. BAŞAK OYAN ULUÇ
58	290800052	İLAYDA	UYAT	PROF. DR. BAŞAK OYAN ULUÇ
59	270800082	AYŞENUR	YAMAN	PROF. DR. BAŞAK OYAN ULUÇ
60	280800038	AHMET TUĞRUL	YARALI	PROF. DR. GÜLÇİN KANTARCI
61	270800077	ALKİM GİZEM	YILMAZ	PROF. DR. GÜLÇİN KANTARCI
62	290800055	AYŞEGÜL	YÖNEM	PROF. DR. GÜLÇİN KANTARCI

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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

YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI

SEMINAR PROGRAM

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

1. Cardiology: 08 July 2014 Tuesday, Dr. Olcay Özveren ECG Practical Evaluation and Diagnosis of Myocardial Infarction
2. Internal Medicine: 22 July 2014 Tuesday, Dr. Hasan Atilla Özkan Approach to Anemia
3. Physical Rehabilitation: 05 August 2014 Tuesday, Dr. Ece Aydoğ Neck and Back Pain
4. Pediatrics : 19 August 2014 Tuesday, Dr. Suat Biçer Emergency in Pediatrics
5. Pulmonary: 02 Sept 2014 Tuesday, Dr. Sevda Özdoğan Respiratory Infections and Treatment
6. Plastic Surgery: 16 Sept 2014 Tuesday, Dr. Can Çınar Burns
7. General Surgery 21 Oct 2014 Tuesday, Dr. Murat Kalaycı Acute Abdomen
8. Orthopedics: 04 Nov 2014 Tuesday, Dr. Melih Güven Emergency in Ortopedics
9. Internal Medicine: 18 Nov 2014 Tuesday, Dr. Gülçin Kantarcı Hypertension and Treatment
10. Emergency Medicine: 02 Dec 2014 Tuesday, Dr. Sezgin Sarıkaya Trauma Management in ED
11. Internal Medicine: 16 Dec 2014 Tuesday, Dr. Yaşar Küçükardalı Manegement of Thyroid Diseasees with Case Presentations
12. Dermatology: 06 Jan 2015 Tuesday, Dr. Özlem Akın Emergency in Dermatology
13. Neurology: 20 Jan 2015 Tuesday, Dr. Berrin Aktekin Convulsions and Treatment
14. Psychiatry: 03 Feb 2015 Tuesday, Dr. Hakan Atalay Emergency in Psychiatry
15. Internal Medicine: 17 Feb 2015 Tuesday, Dr. Cengiz Pata Non-ulcer Dispepsia
16. Internal medicine 03 Mar 2015 Tueasday Dr. Hasan Aydın Diabetes and Treatment
17. Pediatrics: 17 Mar 2015 Tuesday, Dr. Ayça Vitrinel Vaccines
18. Internal Medicine: 07 Apr 2015 Tuesday, Dr. Yaşar Küçükardalı Emergency in Infection Patients
19. Internal Medicine: 21 Apr 2015 Tuesday, Dr. Yaşar Küçükardalı Case Reports: Internal Medicine Problems in Pregnancy.

HOSPITAL ORIENTATION PROGRAM (The program is held in conference hall in Yeditepe University Hospital on 10 July 2014 between 14:00-17:00 hours. Each student should attend the orientation program.)

Dr. Selami Sözübir / 30 min	Quality Improvement and Patient Safety
Dr. Selami Sözübir / 30 min	International Patient Safety
Dr. Meral Sönmezoğlu / Dr. Sevim Şen (Nurse) 30 min	Infection Control Program
Anıl Sönmez (Pharmacist) / 30 min	Drug Safety
Dr. Fadıl Sarıgüllü / 60 min	Emergency Management

**YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI**

INTERNAL MEDICINE

<p>YEDİTEPE UNIVERSITY HOSPITAL Head of the Department of Internal Medicine Cengiz Pata, MD. Prof</p>
<p>Responsible of course of training: Müge Bıçakçığıl, MD. Assoc. Prof E mail: mbicakcigil@yeditepe.edu.tr Phone :216 5784115</p>
<p>Phase VI coordinator Yaşar Küçükardalı, MD. Prof. E mail: yasar.kucukardali @yeditepe.edu.tr Phone : 216 578 4112-4104</p>

YEDİTEPE UNIVERSITY HOSPITAL Department of Internal Medicine

Cengiz Pata, MD. Prof. of Gastroenterology
Gülçin Kantarcı, MD. Prof. of Nephrology
Hasan Atilla Ozkan, MD. Assist. 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. Prof. of Medical Oncology
Hasan Aydın, MD. Assoc. Prof. of Endocrinology
Ümit Akyüz, MD. Assoc. Prof. of Gastroenterology
Meral Sönmezoğlu, MD. Prof. of Infectious Diseases
Müge Bıçakçığıl, MD. Assoc. Prof. of Rheumatology
Zehra Eren, MD. Assoc. Prof. of Nephrology
Olca Özveren, MD. Assist. Prof. of Cardiology,
Zekeriya Küçükdurmaz MD, Assoc Prof of Cardiology

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

Theoretical and Practical Education Schedule:

Weekly day time work schedule of the students begins at 08:30. Training is done 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 every Tuesday and “case discussions” and “literature time” at every Monday between at 12.30 and 13.15 hours.

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

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
- treat the diseases that are commonly seen among adult 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 adult follow-up and vaccination
- counsel preventive health care issues
- work in accordance with the law and ethics
- communicate effectively with patients, patients relatives, colleagues and other healthcare personnel
- manage adult emergency cases
- perform anthropometric measures
- follow-up patients with chronic diseases
- guide the patients with chronic diseases
- perform resuscitation of adult
- keep records in regard to primary care according the official and legal requirements
- use the data processing system in the patient records
- search the literature
- use at least one foreign language to communicate with both the adult 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 adult
- take informed consent from patients' parents and/or the patient
- communicate with his/her colleagues, patients and patients' parents

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

<u>STUDENT GROUPS</u>		
A Group 1 (9 students)	B Group 2 (9 students)	C Group 3 (11 students)
1 Beylem Bengi Döğüş	1 Tuğçe Akgün	1 Derya Kaya
2 Özge Koç	2 Batu Batuge	2 Özgün Tolga Nazlıkul
3 Buse Sarıgül	3 Ayşenur Yaman	3 B irant Boldan
4 Gizem Çetinkaya	4 Ömer Faruk Bucak	4 Alkım Gizem Yılmaz
5 İbrahim Nahit Şendur	5 Işıl Kamberoğlu	5 Murat Ercin
6 Tevfik Giray Özkırım	6 Ece Kurtul	6 Hakan Akgün
7 Hüseyin Bülent Mermer	7 Sibel Taner	7 Emrah Tekin
8 Emine Şenkal	8 Gül Köksal	8 Emine Şahin
9 Kezban Burcu Avanoğlu	9 Ayfer Sun	9 Furgan Kasap
		10 Furkan Batuhan Davun
		11 Ahmet Tuğrul Yaralı
D Group 4 (11 students)	E Group 5 (10 students)	F Group 6 (12 students)
1 Taner Tan	1 Utkucan Acar	1 Ece Birincioğlu
2 Mehmet Bekir Şen	2 Dilek Damla Saymazlar	2 Arsen Güngör
3 Ceren Sultan Altay	3 Deniz Uluçeçen	3 Elçin Bayık
4 Irmak Tekeli	4 Özge Selahi	4 Sevda Karakaya
5 Burçin Tuvana Us	5 Ozan Başkurt	5 Zeynep Karademir
6 Mehmet Deniz Kesimer	6 İlayda Uyat	6 Fatih Kaya
7 Ahmet Saç	7 Merve Deniz Tekin	7 Hüseyin Harmanda
8 Yiğit Moğol	8 Betülhan Sönmez	8 Sevim Didem Şeref
9 Gizem Onurel	9 Aylin İnaltekin	9 Umut Ulutaş
10 Aliye Sevdem Gülcan	10 Özlem Sevinç	10 Batuhan Kartal
11 Ayşegül Yöner		11 Onur Küçüközer
		12 Ödül Öntaş

INTERNAL MEDICINE INTERNSHIP PROGRAM FOR 2014-2015

01.07.2014 29.08.2014 July August	GP-IM	OP-G	OP-N1	OP-N2	OP-R	OP-E	OP-C	OP- O	OP- H	OP-I	OP-P	IMS
1,2.week	A1	A2	A3		A4		A9	A6	A7		A5	A8
3,4. week	A8	A9	A4		A5	A6	A2		A3	A7		A1
5,6.week	A6	A7	A8		A1		A4	A5	A9		A2	A3
7,8. week	A2	A3	A1	A6	A7	A8			A4	A7		A5
01.09.2014 31.10.2014 September October												
1,2.week	B1	B2	B3		B4	B5	B9	B6	B7			B8
3,4. week	B8	B9		B2	B5			B7	B3	B6	B4	B1
5,6.week	B6	B7	B8		B1	B2	B4	B5	B9			B3
7,8. week	B2	B3	B1		B7		B6		B4	B8	B9	B5
03.11.2014 31.12.2014 November December												
1,2.week	C1	C2	C3		C4	C5	C9	C6	C7	C10	C11	C8
3,4. week	C8	C9	C10	C7	C11	C6	C3	C5	C1		C4	C2
5,6.week	C2	C3	C4	C5	C8	C9	C7	C10	C11	C6		C1
7,8. week	C10	C7	C6	C2	C1	C4		C3	C9	C5	C8	C11

02.01.2015 28.02.2015 January February	GP-IM	OP-G	OP-N1	OP-N2	OP- R	OP-E	OP-C	OP- O	OP- H	OP-I	OP-P	IMS
1,2.week	D1	D2	D3	D11	D4	D5	D9	D6	D7		D10	D8
3,4. week	D8	D9	D10		D11	D6	D7	D5	D1	D3	D4	D2
5,6.week	D2	D3	D4	D5	D8	D9		D10	D11	D6	D7	D1
7,8. week	D10	D7	D6	D2	D1	D4	D5	D3	D9	D8		D11
01.03.2015 30.04.2015 March April												
1,2.week	E1	E2	E3	E10	E4	E5		E6	E7			E8
3,4. week	E8	E9	E10		E5		E4	E7	E6	E3		E12
5,6.week	E3	E7	E8	E6	E9	E10		E1	E2			E45
7,8. week	E5	E10	E6		E1		E9	E8	E4		E2	E73
02.05.2015 28.06.2015 May June												
1,2.week	F1	F2	F3	F4	F5	F6	F10	F7	F8	F11	F12	F9
3,4. week	F9	F10	F11	F12	F1	F2	F6	F3	F4	F7	F8	F5
5,6.week	F5	F6	F7	F8	F9	F10	F2	F11	F12	F3	F4	F1
7,8. week	F3	F7	F4	F11	F6	F5	F8	F9	F1	F2	F10	F12

GP – IM : General Outpatient Clinic Internal Medicine **OP-G:** Outpatient Clinic Gastroenterology
OP-N1: Outpatient Clinic Nephrology
OP-R: Outpatient Clinic Rheumatology
OP-E: Outpatient Clinic Endocrinology
OP-C: Outpatient Clinic Cardiology
OP-O : Outpatient Clinic Oncology
OP-H : Outpatient Clinic Haematology
OP-I : Outpatient Clinic Infectious Diseases
OP-P: Outpatient Clinic Pulmonary Diseases
IMS : Internal Medicine Service

Nephrology 1: Md. Prof. Dr. Gülçin Kantarcı Nephrology 2: Md. Assoc. Prof. Zehra Eren

If there is an assistant doctor near the academician at the same time with intern doctor in outpatient clinic, head of the department of internal medicine can change some positions.

**Internal Medicine Internship Program
Yeditepe University Hospital**

	GP-IM	OP-G	OP-N	OP-R	OP-E	OP-O	OP-H	IMS
08.30-09.00	Discussion of the interesting outpatient cases who came to yesterday , to visit inpatient with academic staff							Prepare the inpatients for presentation to academician.
09.00-12.00	Accept to patient as a outpatient with academician. Follow her / him during the taking the history, physical examination, making a differential diagnosis, planning to test and radiologic imagings, and discuss all of these.							After the visit they should stay the floor, observe the fellow according to all kind of diagnostic procedures (invasive or noninvasive)
12.00-12.30	Free time							
12.30-13.15	<p>Monday: to attend literature / case presentations / seminars programs for assistant doctors. (Hospital 2. Floor, conference hall)</p> <p>Tuesday, : to attend lecture that given by academician who Works internal medicine (2. And 4. Week) (Hospital 2. Floor meeting room)</p> <p>: To attend Phase VI seminar programs (1. and 3. week) (Hospital , 2. Floor , conference hall)</p> <p>Thursday: to attend intern presentation, Hospital 2. Floor meeting room. Every intern will make presentation in 20 minute duration. Topics of the prentation will be given initial period of the course. This presentations is mandotory.</p>							
13.15-16.00	Reading a literature , prepare presentation							To attend clinic activities , prepare to patient medical records who admitted to clinic
16.00-17.45	Free working time (reading , read apatient medical records, to attend the last visit for inpatients.							

Suggested Readings

Harrison's Principles of Internal Medicine
Semiyoloji ,Yeditepe Üniversitesi Tıp Fakültesi. Editör: Prof.Dr Yaşar Küçükardalı
2013. Nobel Tıp Kitabevleri
Üniversitemiz bilgi merkezi üzerinden erişim ile www.uptodate.com
Üniversitemiz bilgi merkezi üzerinden erişim ile www.accessmedicine.com

**YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI**

CHILD HEALTH and PEDIATRICS

<p>YEDİTEPE UNIVERSITY HOSPITAL</p> <p>Head of the Department of Department of Child Health and Pediatrics</p> <p>A. Ayça Vitrinel, MD. Prof.</p>
<p>Responsible of course of training :</p> <p>Meltem Uğraş, MD. Assoc. Prof</p> <p>E mail: meltem.ugras@yeditepe.edu.tr Phone :02165784101-02-03</p>
<p>Phase VI coordinator Yaşar Küçükardalı, MD. Prof.</p> <p>E mail: yasar.kucukardali @yeditepe.edu.tr Phone : 216 578 4112-4104</p>

YEDİTEPE UNIVERSITY HOSPITAL

Mehmet Reha Cengizlier, MD. Prof. of Pediatric Allergy

Filiz Bakar, MD. Prof. of Neonatology

Suat Biçer, MD. Assoc. Prof.

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

Gülay Çiler Erdağ, MD. Assist. Prof.

Öznur Küçük, MD. Assist. Prof.

Tuba Giray, MD. Lecturer

Defne Çöl, MD. Lecturer

The department defines the internship as an 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 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

Suggested Readings

Nelson Textbook of Pediatrics, 19th edition. Nobel Tıp Kitabevi
 Temel Pediatri. Milli Pediatri Derneği. Güneş Tıp Kitabevi
 Üniversitemiz bilgi merkezi üzerinden erişim ile www.uptodate.com
 Üniversitemiz bilgi merkezi üzerinden erişim ile www.accessmedicine.com

YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI

OBSTETRICS AND GYNECOLOGY

YEDİTEPE UNIVERSITY HOSPITAL	Affiliated Training Hospital İSTANBUL MEDENİYET UNIVERSITY GÖZTEPE GYNECOLOGY AND PEDIATRICS TRAINING AND RESEARCH HOSPITAL
Head of the Department of Department of Obstetrics and Gynecology N. Cem Fıçıcıoğlu, MD. PhD. Prof.	Chief of Department Ahmet Göçmen, MD. PhD. Prof. Kadir Güzin, MD. Assoc. Prof.
Responsible of course of training : Gazi Yıldırım, MD. Assoc. Prof E mail: gaziyildirim@yeditepe.edu.tr Phone :216 578 40 00-4202	
Phase VI coordinator Yaşar Küçükardalı, MD. Prof. E mail: yasar.kucukardali @yeditepe.edu.tr Phone : 216 578 4112-4104	

YEDİTEPE UNIVERSITY HOSPITAL

N. Cem Fıçıcıoğlu, MD. PhD. Prof.

Oluş Api, MD. Assoc. Prof.

Rukset Attar, MD. Assoc. Prof.

Gazi Yıldırım, MD. Assoc. Prof.

İSTANBUL MEDENİYET UNIVERSITY GÖZTEPE TRAINING AND RESEARCH HOSPITAL

Ahmet Göçmen, MD. PhD. Prof.

Kadir Güzin, MD. Assoc. Prof.

ROTATIONS:

1 month Yeditepe University Hospital

1 month İstanbul Medeniyet Üniversitesi Göztepe 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.

Each 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

<p>YEDİTEPE UNIVERSITY HOSPITAL</p> <p>Head of the Department of General Surgery</p> <p>Özcan Gökçe, MD. Prof.</p>
<p>Responsible of course of training :</p> <p>Baki Ekçi, MD. Assoc. Prof.</p> <p>E mail: bekci@yeditepe.edu.tr Phone : 216 5784748</p>
<p>Phase VI coordinator Yaşar Küçükardalı, MD. Prof.</p> <p>E mail: yasar.kucukardali@yeditepe.edu.tr Phone : 216 578 4112-4104</p>

YEDİTEPE UNIVERSITY HOSPITAL:

Özcan Gökçe, MD. Prof.

Baki Ekçi, MD. Assoc. Prof.

Murat Kalaycı, MD. Assist. Prof.

Head of the Department of Emergency Medicine:

Sezgin Sarıkaya, 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; 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 over night 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 psychiatry, 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 criterias

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	Affiliated Training Hospital ERENKÖY PSYCHIATRY AND CLINICAL NEUROSCIENCES TRAINING AND RESEARCH HOSPITAL
Head of the Department of Psychiatry Hakan Atalay, MD. Assoc. Prof.	Chief of Department Serhat Çıtak, Assoc. Prof.
Responsible of course of training : Hakan Atalay, MD. Assoc. Prof. E mail:hatalay@yeditepe.edu.tr Phone :-2165784946	
Phase VI coordinator Yaşar Küçükardalı, MD. Prof. E mail: yasar.kucukardali @yeditepe.edu.tr Phone : 216 578 4112-4104	

YEDİTEPE UNIVERSITY HOSPITAL
Department of Psychiatry:

Hakan Atalay, MD. Assoc. Prof.

Naz Berfu Akbaş, MD. Assist. Prof.

Oğuzhan Zahmacioğlu, MD. Assist. Prof.

ERENKÖY PSYCHIATRY AND CLINICAL NEUROSCIENCES TRAINING AND RESEARCH
HOSPITAL

Serhat Çıtak, 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 Psychiatric and Clinical Neurosciences 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

YEDİTEPE UNIVERSITY HOSPITAL	Affiliated Family Health Centers, Community Health Centers and Tuberculosis Centers
Head of Family Medicine Department and Head of Public Health Department: Recep Erol Sezer, MD. Prof of Public Health	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 COMMUNITY HEALTH CENTER Maltepe CHC: Esra Şahin, MD, TUBERCULOSIS CENTERS Kartal TC Pendik TC Maltepe TC Kadıköy TC Üsküdar TC
Responsible of course of training : Özlem Tanrıöver, MD. Assoc. Prof. E mail: otanriover@yeditepe.edu.tr Phone :216 578 37 42	
Phase VI coordinator : Phase VI coordinator Yaşar Küçükardalı, MD. Prof. E mail: yasar.kucukardali @yeditepe.edu.tr Phone : 216 578 4112-4104	

Recep Erol Sezer, MD. Prof of Public Health

Güldal İzbırak, MD. Assoc. Prof. of Family Medicine

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

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

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

Hale Arık Taşyikan, MD. Assist. Prof. of Public Health

ROTATIONS:

2 weeks Interactive Group Activities

2 weeks Family Health Center

2 weeks Public Health Center

1 week Tuberculosis Center

Independent study hours on Fridays and during the last week of the programme in order to work on research activities under supervision.

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

- value the meaning and importance of teamwork for public health

PHASE VI RURAL MEDICINE ROTATIONS 2014 - 2015

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, 01-11, 2014	14.07.2014- 25.07.2014 5 /A	14.07.2014- 25.07.2014 5/B	August, 11-15, 2014	August, 18-29, 2014
		31.07.2014- 08.08.2014 5/B	31.07.2014- 08.08.2014 5/A		
6	September, 01-12, 2014	15.09.2014- 26.09.2014 6/A	15.09.2014- 26.09.2014 6/B	October, 13-17, 2014	October, 20-31, 2014
		29.09.2014- 10.10.2014 6/B	29.09.2014- 10.10.2014 6/A		
1	November, 03-14, 2014	17.11.2014- 28.11.2014 1/A	17.11.2014- 28.11.2014 1/B	December, 15-19, 2014	December, 22-31, 2014
		01.12.2014- 12.12.2014 1/B	01.12.2014- 12.12.2014 1/A		
2	January, 02-16, 2015	19.01.2015- 30.01.2015 2/A	19.01.2015- 30.01.2015 2/B	February, 16-20, 2015	February, 23-28, 2015
		02.02.2015- 13.02.2015 2/B	02.02.2015- 13.02.2015 2/A		
3	March, 02-13, 2015	16.03.2015- 27.03.2015 3/A	16.03.2015- 27.03.2015 3/B	April, 13-17, 2015	April, 20-30, 2015
		30.03.2015- 10.04.2015 3/B	30.03.2015- 10.04.2015 3/A		
4	May, 04-15, 2015	18.05.2015- 29.05.2015 4/A	18.05.2015- 29.05.2015 4/B	June, 15-19, 2015	June, 22-30, 2015
		01.06.2015- 12.06.2015 4/B	01.06.2015- 12.06.2015 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

**** COMMUNITY HEALTH CENTER**

Maltepe PH Directorate:

Maltepe CHC:

Esra Şahin, MD,

***** TUBERCULOSIS CENTERS**

Kartal TC

Pendik TC

Maltepe TC

Kadıköy TC

Üsküdar TC

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

**2014-2015 PHASE 6
RURAL MEDICINE INTERNSHIP PROGRAM GROUP LIST**

			14.07.2014 - 25.07.2014	31.07.2014 - 08.08.2014	
GROUP 5	Utkucan Acar	5/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER	
	Dilek Damla Saymazlar				
	Deniz Uluçeçen				
	Özge Selahi				
	Ozan Başkurt				
				14.07.2014 - 25.07.2014	31.07.2014 - 08.08.2014
	İlayda Uyat	5/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER	
	Merve Deniz Tekin				
	Betülhan Sönmez				
Aylin İnaltekin					
Özlem Sevinç					

			15.09.2014 - 26.09.2014	29.09.2014 - 10.10.2014	
GROUP 6	Ece Birinciöglu	6/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER	
	Arsen Güngör				
	Elçin Bayık				
	Sevda Karakaya				
	Zeynep Karademir				
	Fatih Kaya				
				15.09.2014 - 26.09.2014	29.09.2014 - 10.10.2014
	Hüseyin Harmanda	6/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER	
	Sevim Didem Şeref				
	Umut Ulutaş				
Batuhan Kartal					
Onur Küçüközer					
Ödül Öntaş					

			17.11.2014-28.11.2014	01.12.2014-12.12.2014	
GROUP 1	Beylem Bengi Döğüş	1/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER	
	Özge Koç				
	Buse Sarıgül				
	Gizem Çetinkaya				
	İbrahim Nahit Şendur				
				17.11.2014-28.11.2014	01.12.2014-12.12.2014
	Tevfik Giray Özkırım	1/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER	
	Hüseyin Bülent Mermer				
	Emine Şenkal				
Kezban Burcu Avanoğlu					

			19.01.2015-30.01.2015	02.02.2015-13.02.2015	
GROUP 2	Tuğçe Akgün	2/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER	
	Batu Batuge				
	Ayşenur Yaman				
	Ömer Faruk Bucak				
	Işıl Kamberoğlu				
				19.01.2015-30.01.2015	02.02.2015-13.02.2015
	Ece Kurtul	2/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER	
	Sibel Taner				
	Gül Köksal				
Ayfer Sun					

			16.03.2015-27.03.2015	30.03.2015-10.04.2015
GROUP 3	Derya Kaya	3/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER
	Özgün Tolga Nazlıkul			
	Birant Boldan			
	Alkım Gizem Yılmaz			
	Murat Ercin			
	Hakan Akgün			
			16.03.2015-27.03.2015	30.03.2015-10.04.2015
	Emrah Tekin	3/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER
	Emine Şahin			
	Furgan Kasap			
Furkan Batuhan Davun				
Ahmet Tuğrul Yaralı				

			18.05.2015-29.05.2015	01.06.2015-12.06.2015
GROUP 4	Taner Tan	4/A	FAMILY HEALTH CENTER	PUBLIC HEALTH CENTER
	Mehmet Bekir Şen			
	Ceren Sultan Altay			
	Irmak Tekeli			
	Burçin Tuvana Us			
	Mehmet Deniz Kesimer			
			18.05.2015-29.05.2015	01.06.2015-12.06.2015
	Ahmet Saç	4/B	PUBLIC HEALTH CENTER	FAMILY HEALTH CENTER
	Yiğit Moğol			
	Gizem Onurel			
Aliye Sevdem Gülcan				
Ayşegül Yönem				

Interactive Group Activities

-Introduction to Rural Medicine Internship Program/ *R. Erol Sezer- Özlem Tanrıöver*

-Public Health, Family Medicine and Community Oriented Primary Care/ *R. Erol Sezer- Özlem Tanrıöver*

-Health Care Organization in Turkey/ *Güldal İzbirak*

-Research Methods in Epidemiology and Primary Care/
Özlem Tanrıöver- Hale Arık Taşyikan

-Critical Appraisal of Manuscripts/ *Özlem Tanrıöver-Hale Arık Taşyikan*

-Writing a Study Proposal/ *Özlem Tanrıöver- Hale Arık Taşyikan*

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

-Legal Responsibilities in Primary Care/ *Arzu Akalın*

-Death Certificate/ *Arzu Akalın*

-(Workshop - 2 Days Program)/ *R. Erol Sezer*

- I- Treating Tobacco Use and Dependence
- II- Tobacco Control

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 work

Critical Appraisal Of Medical Manuscripts

Prof Dr. R. Erol Sezer – Assoc. Prof. Dr. Güldal İzbirak - Assoc. Prof. Dr. Özlem Tanrıöver - Assoc Prof. Dr. Hülya Akan - Assist. Prof. Dr. Ayşe Arzu Akalin - Assist. Prof. Dr. Hale Arık Taşyikan

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

References:

- *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

Writing a Proposal of a Research Project

Prof. Dr. Recep Erol Sezer - Assoc. Prof. Dr. Güldal İzbirak, Assoc. Prof. Dr. Özlem Tanrıöver
Assoc. Prof. Dr. Hülya Akan - Assist. Prof. Dr. Ayşe Arzu Akalin – Assist. Prof. Dr. Hale Arık Taşyikan

TEN SLIDES-TWENTY MINUTES PRESENTATION

Rural Health Internship Program mandates the presentation of a research proposal relevant to family medicine. This task includes research ideas and the methodology that will be used. It aims to provide ample time for discussion of each presentation.

Ten slides-twenty minutes presentations are for interns suggesting an **IDEA** for research, raise a **QUESTION** concerning a research problem. The students are not required to present the preliminary results. Twenty minutes is allocated for the presentation, using only ten slides. Then there is twenty minutes for discussion.

FEEDBACK ON PRESENTATION SKILLS

The following aspects of the presentation skills will be important: structure, clarity, intonation, speed, volume, non-verbal communication, and use of audiovisuals.

INSTRUCTIONS FOR TEN SLIDES-TWENTY MINUTES PRESENTATIONS

· Use the following headings:

Background, Research question(s), Methods.

·Describe:

o Background: what is the problem domain your study is relevant for? (what is already known, what knowledge is needed, and what new knowledge will be provided by your study) [suggestion: ± 50 words]

o Research question(s): write down the exact question(s) your study will give the answer to (if >3 objectives you will score less points on this criterion; we prefer focused research) [suggestion: ± 20 words]

o Methods: mention at least study design, setting, participant selection, main variables measured (incl. reference standard in case of a diagnostic study or primary outcome measure in case of a cohort study or RCT) or qualitative methodology, analysis methods (quantitative, qualitative) and statistics (when appropriate) [suggestion: ± 100 words]

We expect that you clearly describe background, (idea for) research question and proposed methodology.

POINTS FOR DISCUSSION

· Write down 1-3 points you would like to discuss with your counselors.

SCORING CRITERIA AND GUIDELINES FOR PROPOSALS

1. Is the research question clear?
2. Is the research area original?
3. Is the method appropriate?
4. Is the presentation likely to provoke good discussion?
5. Does the work have implications for general practice (for example daily work, organisation or future research)?

EXAMPLE OF AN ABSTRACT

Background: In the western world peripheral arterial disease (PAD) is a major threat to the health of the elderly. Despite results of previous studies showing that the Ankle-Brachial Pressure Index (ABPI) is a meaningful indicator of the prognosis of patients with PAD, only 20-40% of the general practitioners centres in the Netherlands use the ABPI measurement.

Research question: Can ABPI measurements help in assessing the prognosis of subjects with and without PAD?

Method: The data set of the Limburg Peripheral Arterial Occlusive Disease Longitudinal Study (18 general practice centres, n=3649, mean age 59 years, mean follow-up time 7.2 years) was analysed for this purpose. Baseline and follow-up measurements included a self-administered questionnaire on signs and symptoms and a vascular physical examination. The ABPI was measured independently, using a handheld Doppler device. Outcome measures were progressive limb ischaemia, cardiovascular morbidity and (cardiovascular) mortality. Cox proportional hazard models were used to investigate the associations between ABPI categories and clinical outcome.

Results: Subjects with an ABPI between 0.90 and 1.00 were at higher risk to develop

Points for discussion (max. 3):

1. ...
2. ...
- 3.

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	Set up of the Project suitable to obtain aims	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	Correct writing of resources	Bringing the project on time	TOTAL POINTS
			10 Points	20 Points	10 Points	10 Points	20 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 :									

Reviewing an article

This task is a short review of an article. An original scientific publication is critically read and studied using given instructions, and reviewed how a scientific article/report is written. The task has two goals: learning how to avoid the most typical errors in the actual work of the course (making the research and reporting), and by the reviewed article it is possible to take a look to the topic of the actual project work.

YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
PHASE VI

ELECTIVE

The elective clerkship is a 1 month rotation for the 6th year medical students which has 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 Ana Bilim 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

Faculty Secretary :

Tel: +90 216 578 05 93

Dean Secretary:

Tel: +90 216 578 05 05 – 06

Fax: +90 216 578 05 75

Student Affairs :

Tel: 0216 578 06 86

Documents Affairs:

Tel: 0216 578 05 23

Coordinator/ Co-coordinator:

Yaşar Küçükardalı, MD. Prof. (Coordinator) 216 578 40 00 (4112) yasar.kucukardali@yeditepe.edu.tr;

Hülya Akan, MD. Assoc.Prof. (Co-coordinator) 0216 467 88 60 hakan@yeditepe.edu.tr;

Oluş Api, MD. Assoc. Prof. (Co-coordinator) 0532 434 15 82 olus.api@yeditepe.edu.tr;

Suat Biçer, MD. Assoc. Prof. (Co-coordinator) 0505 4509336 suat.bicer@yeditepe.edu.tr;

Turhan Özler, MD. Assist. Prof. (Co-coordinator) 0216 5784054 turhan.ozler@yeditepe.edu.tr;

Address:

Yeditepe University Faculty of Medicine
İnönü Mah. Kayışdağı Caddesi,
26Ağustos Yerleşimi,
34755 Ataşehir, İstanbul

Web: www.yeditepe.edu.tr

<http://www.yeditepe.edu.tr/fakulteler/tip-fakultesi>

e-mail: tipfakdek@yeditepe.edu.tr



YEDİTEPE UNIVERSITY
FACULTY of MEDICINE

İnönü Mah. Kayışdağı Caddesi,
26 Ağustos Yerleşimi,
34755 Ataşehir, İstanbul

+ 90 216 578 00 00

Student Affairs

+90 216 578 06 86

www.yeditepe.edu.tr

<http://www.yeditepe.edu.tr/fakulteler/tip-fakultesi>

tipfakdek@yeditepe.edu.tr

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