YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

ACADEMIC PROGRAM BOOK

2025 - 2026

Student's;
Name : .....
Nr : .....

YEDİTEPE UNIVERSITY
FACULTY OF MEDICINE
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"

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 qualificati

YEDİTEPE UNIVERSITY FACULTY OF MEDICINE

PROGRAM OUTCOMES OF MEDICAL EDUCATION

YUTF - Undergraduate Medical Education Program was designed to provide our graduates with the competencies that are specified in the National Competencies List of medical graduates (UYYB).

UYYB is a national document that indicates the expected/required competencies of the students who are at the stage of graduating from Medical Schools in Turkey.

You can find UYYB from the link:
https://www.yok.gov.tr/Documents/Kurumsal/egitim_ogretim_dairesi/Ulusal-cekirdek-egitimi-programlari/mezuniyet-oncesi-tip-egitimi-cekirdek-egitimi-programi.pdf

COMPETENCE AREA-1 / Professional Practices
COMPETENCE 1.1. Health Service Provider
Competency 1.1.1. Integrates knowledge, skills, and attitudes acquired from basic and clinical medical sciences, behavioral sciences, and social sciences to provide health services.
Competency 1.1.2. Demonstrates a biopsychosocial approach that considers the individual's sociodemographic and sociocultural background without discrimination based on language, religion, race, or gender in patient management.
Competency 1.1.3. Prioritizes the protection and improvement of individuals' and community's health in the delivery of healthcare services.
Competency 1.1.4. Performs the necessary actions in the direction of maintaining and improving the state of health as considering the individual, social, social and environmental factors affecting health.
Competency 1.1.5. Provides health education to healthy/ill individuals and their families, as well as to other healthcare professionals, by recognizing the characteristics, needs, and expectations of the target audience.
Competency 1.1.6. Demonstrates a safe, rational, and effective approach in the processes of protection, diagnosis, treatment, follow-up, and rehabilitation in health service delivery.
Competency 1.1.7. Performs interventional and/or non-interventional procedures safely and effectively for the patient in the processes of diagnosis, treatment, follow-up, and rehabilitation.
Competency 1.1.8. Provides healthcare services considering patient and employee health and safety.
Competency 1.1.9. Considers changes related to the physical and socio-economic environment at both regional and global scales that affect health, as well as changes in the individual characteristics and behaviors of those who seek healthcare services.

COMPETENCE AREA-2 / Professional Values and Approaches
COMPETENCE 2.1. Adopting Professional Ethics and Principles
Competency 2.1.1. Considers good medical practices while performing the profession.
Competency 2.1.2. Fulfills duties and obligations within the framework of ethical principles, rights, and legal responsibilities required by the profession.
Competency 2.1.3. Demonstrates determined behavior in providing high-quality healthcare while considering the patient's integrity.
Competency 2.1.4. Evaluates own performance in professional practices by considering own emotions and cognitive characteristics.
COMPETENCE 2.2. Health Advocate
Competency 2.2.1. Advocates for the improvement of healthcare service delivery by considering the concepts of social accountability and social responsibility in the protection and enhancement of community health.
Competency 2.2.2. Plans and implements service delivery, education, and counseling processes related to individual and community health, in collaboration with all stakeholders, for the protection and improvement of health.
Competency 2.2.3. Evaluates the impact of health policies and practices on individual and community health indicators and advocates for the improvement of healthcare quality.
Competency 2.2.4. Gives importance to protecting and improving own physical, mental, and social health and takes necessary actions for it.
COMPETENCE 2.3. Leader-Manager
Competency 2.3.1. Demonstrates exemplary behavior and leadership within the healthcare team during service delivery.
Competency 2.3.2. Utilizes resources in a cost-effective, socially beneficial, and compliant manner with regulations in the planning, implementation, and evaluation processes of healthcare services as the manager in the healthcare institution.
COMPETENCE 2.4. Team Member
Competency 2.4.1. Communicates effectively within the healthcare team and takes on different team roles as necessary.
Competency 2.4.2. Displays appropriate behaviors while being aware of the duties and responsibilities of healthcare workers within the healthcare team.
Competency 2.4.3. Works collaboratively and effectively with colleagues and other professional groups in professional practice.
COMPETENCE 2.5. Communicator

Competency 2.5.1. Communicates effectively with patients, their families, healthcare professionals, and other occupational groups, institutions and organizations.
Competency 2.5.2. Communicates effectively with individuals and groups who require a special approach and have different sociocultural characteristics.
Competency 2.5.3. Demonstrates a patient-centered approach that involves the patient in decision-making mechanisms during the diagnosis, treatment, follow-up, and rehabilitation processes.
COMPETENCE AREA-3 / Professional and Personal Development
COMPETENCE 3.1. Scientific and Analytical Approach
Competency 3.1.1. Plans and implements scientific research, as necessary, for the population it serves, and utilizes the results obtained, as well as those from other research, for the benefit of the community.
Competency 3.1.2. Accesses and critically evaluates current literature related to their profession.
Competency 3.1.3. Applies evidence-based medicine principles in the clinical decision-making process.
Competency 3.1.4. Uses information technologies to enhance the effectiveness of healthcare, research, and education activities.
COMPETENCE 3.2. Lifelong Learner
Competency 3.2.1. Manages effectively individual study processes and career development.
Competency 3.2.2. Demonstrates skills in acquiring, evaluating, integrating new information with existing knowledge, applying to professional situations, and adapting to changing conditions throughout professional career.
Competency 3.2.3. Selects the right learning resources to improve the quality of health care and organizes the learning process.

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PHASE VI COORDINATION COMMITTEE

(TEACHING YEAR 2025 – 2026)

Coşkun Saf, Assist. Prof.Dr. (Coordinator)

Rukset ATTAR, MD. Prof.Dr. (Co-coordinator)

Naz Berfu AKBAŞ, MD. Assoc. Prof.Dr. (Co-coordinator)

Kinyas Kartal, MD. Assoc. Prof.Dr. (Co-coordinator)

Cem Şimşek, MD. Assist. Prof. Dr. (Co-coordinator)

Mehmet Akif Öztürk, Assoc. Prof. Dr(Co-coordinator)

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DESCRIPTION OF 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

Family Medicine

Public Health

Elective

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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

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ACADEMIC CALENDAR

2025 – 2026

July 1, 2025 (Tuesday)	Beginning of Phase VI
July 1,2025, Tuesday 08.30-09.00	Introduction of Phase VI
July 15, 2025 (Tuesday)	Democrasy and National Day
August 30, 2025 (Saturday)	National Holiday
October 21, 2025	Coordination commitee meeting
October 28-29, 2025 (Tuesday½ - Wednesday)	Republic Day National Holiday
November 10, 2025 (Monday 09:00-12:00)	Commemaration of Atatürk
Will be announced later	1st Progress Test (Online)
January 1, 2026 (Thursday)	New year
January 13, 2026, Tuesday	Coordination commitee meeting (with student participation)
March 14, 2026 (Saturday)	Physicians' Day
March 19-22 2026 (Thursday-Sunday)	Ramadan Feast Holiday
April 23, 2026 (Thursday)	National Holiday
May1, 2026 (Friday)	Labor's day
Will be announced later	2nd Progress Test (Online)
May 19 2026 (Tuesday)	National Holiday
May 12, 2026 (Tuesday)	Coordination commitee meeting (with student participation)
May 26-30, 2026 (Tuesday½-Saturday)	Religious Holiday
June 30 , 2026 (Tuesday)	End of Phase
July 21, 2026 (Tuesday)	Coordination commitee meeting

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INTERNSHIP PROGRAMS

INTERNAL MEDICINE	(9 weeks)
CHILD HEALTH AND PEDIATRICS	(9 weeks)
OBSTETRICS AND GYNECOLOGY	(9 weeks)
GENERAL SURGERY / EMERGENCY MEDICINE	(8 weeks)
PSYCHIATRY	(4 weeks)
FAMILY MEDICINE	(4 weeks)
PUBLIC HEALTH	(5 weeks)
ELECTIVE	(4 weeks)
TOTAL	(52 weeks)

YEDİTEPE UNIVERSITY
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ACADEMIC SCHEDULE

2025-2026

<table>
<tr><th>2025-2026</th><th>GROUP 1</th><th>GROUP 2</th><th>GROUP 3</th><th>GROUP 4</th><th>GROUP 5</th><th>GROUP 6</th></tr>
<tr><td>01.07. 2025 - 31.07.2025</td><td rowspan="2">Internal Medicine (Y.Ü.H.)</td><td rowspan="2">General Surgery / Emergency Medicine (Y.Ü.H.)</td><td rowspan="2">Obstetrics and Gynecology (Y.Ü.H.) (S.E.A.H)</td><td rowspan="2">Child Health and Pediatrics (Y.Ü.H.)</td><td>Public Health</td><td>Psychiatry (Y.Ü.H.)</td></tr>
<tr><td>01.08.2025- 31.08.2025</td><td>Family Medicine</td><td>Elective</td></tr>
<tr><td>09.07.2025
23.07.2025
06.08.2025
20.08.2025
10.09.2025
24.09.2025</td><td colspan="6">Symptom Based learning session Conference Hall in Yeditepe University Hospital between 09.00- 16.00</td></tr>
<tr><td>01.09. 2025 - 30.09.2025</td><td>Psychiatry (Y.Ü.H.)</td><td rowspan="2">Internal Medicine (Y.Ü.H.)</td><td rowspan="2">General Surgery / Emergency Medicine (Y.Ü.H.)</td><td rowspan="2">Obstetrics and Gynecology (Y.Ü.H.)

(S.E.A.H)</td><td rowspan="2">Child Health and Pediatrics (Y.Ü.H.)</td><td>Public Health</td></tr>
<tr><td>01.10. 2025 - 31.10.2025</td><td>Elective</td><td>Family Medicine</td></tr>
<tr><td>01.11.2025- 30.11.2025</td><td>Public Health</td><td>Psychiatry (Y.Ü.H.)</td><td rowspan="2">Internal Medicine (Y.Ü.H.)</td><td rowspan="2">General Surgery / Emergency Medicine (Y.Ü.H.)</td><td rowspan="2">Obstetrics and Gynecology (Y.Ü.H.)

(S.E.A.H)</td><td rowspan="2">Child Health and Pediatrics (Y.Ü.H.)</td></tr>
<tr><td>01.12. 2025 - 31.12.2025</td><td>Family Medicine</td><td>Elective</td></tr>
<tr><td>01.01.2026- 31.01.2026</td><td rowspan="2">Child Health and Pediatrics (Y.Ü.H.)</td><td>Public Health</td><td>Psychiatry (Y.Ü.H.)</td><td rowspan="2">Internal Medicine (Y.Ü.H.)</td><td rowspan="2">General Surgery / Emergency Medicine (Y.Ü.H.)</td><td rowspan="2">Obstetrics and Gynecology (Y.Ü.H.)

(S.E.A.H)</td></tr>
<tr><td>01.02.2026- 28.02.2026</td><td>Family Medicine</td><td>Elective</td></tr>
<tr><td>01.03.2026- 31.03.2026</td><td rowspan="2">Obstetrics and Gynecology (Y.Ü.H.)

(S.E.A.H)</td><td rowspan="2">Child Health and Pediatrics (Y.Ü.H.)</td><td>Public Health</td><td>Psychiatry (Y.Ü.H.)</td><td rowspan="2">Internal Medicine (Y.Ü.H.)</td><td rowspan="2">General Surgery / Emergency Medicine (Y.Ü.H.)</td></tr>
<tr><td>01.04.2026- 30.04.2026</td><td>Family Medicine</td><td>Elective</td></tr>
<tr><td>01.05.2026- 31.05.2026</td><td rowspan="2">General Surgery / Emergency Medicine (Y.Ü.H.)</td><td rowspan="2">Obstetrics and Gynecology (Y.Ü.H.)

(S.E.A.H)</td><td rowspan="2">Child Health and Pediatrics (Y.Ü.H.)</td><td>Public Health</td><td>Psychiatry (Y.Ü.H.)</td><td rowspan="2">Internal Medicine (Y.Ü.H.)</td></tr>
<tr><td>01.06.2026- 30.06.2026</td><td>Family Medicine</td><td>Elective</td></tr>
</table>

S.E.A.H: SANCAKTEPE ŞEHİT PROF. DR. İLHAN VARANK TRAINING AND RESEARCH HOSPITAL
Y.Ü.H: YEDİTEPE UNIVERSITY HOSPITAL

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STUDENT-CENTRED, SYMPTOM-BASED LEARNING SESSIONS

The main aim of these sessions is to **practice an approach to differential diagnosis in a multidiscplinary manner**.

In each sessions a series of real cases presenting with the same symptom (usually 6-7 different cases for each symptom) will be discussed. The cases to be presented in each sessions will be from different departments (Internal Medicine, Surgery, Pediatrics, Obstetrics/Gynecology and others). Thus, the students will be able to see all possible causes/mechanisms for the related symptom in a multidisciplinary format.

The students are expected to find and present cases according to the yearly schedule. Each student will have to prepare and present at least one case during the whole course of the annual programme.

Students are expected to present the case with all relevant data, diagnostic tests, procedures and differential diagnosis. The students will be encouraged to see, take histores from, examine the patients and review the hospital files in preparation of the cases. The management/treatment of the cases will also be presented and discussed, although the main focus will be on differential diagnosis.

Each session will run for 3 hours (9.00-12.00) on the 4th Wednesday of each month .

The sessions will be presented in Kozyatagi Hospital, Conference Hall (2 nd. floor).

Each case will be presented and discussed in 20 minutes. The sesion will be concluded by a general discussion by participation of all students and faculty membrs from related departments.

Coordinator: Assoc.Prof.Dr M.Akif Öztürk

THE SCHEDULE OF STUDENT-CENTRED, SYMPTOM-BASED LEARNING SESSIONS

Symtoms	Time	DISEASES	DEPARTMENT	INTERN DOCTOR	FACULTY MEMBER
	09.00-09.05	Introduction			Asist.Prof.Dr. Cem Şimşek
change in consciousness 10 July, 2025 09.00-12.00	09.05-09.25	Sentral nerveus system infection	Infectious diseases	FARSIMA ABDIPOUR VOSTA	Asist.Prof.Dr. Cem Şimşek
	09.25-09.45	Hypoglycemia	Emergency department	HEDIEH SADATBAHREINI	Asist.Prof.Dr. Cem Şimşek
	09.45-10.05	Metabolic encephalopathie (Hepatic failure)	Emergency department	RAMISH MEHMOOD SHAIKH	Asist.Prof.Dr. Cem Şimşek
	10.05-10.25	Hypercapnic respiratory failure	Emergency department	MUHAMMAD RAYYAN MASOOD	Asist.Prof.Dr. Cem Şimşek
	10.25-10.45	Coffee break			
	10.45-11.05	Intoxication	Emergency department	SUDE ÇAPRAZ	Asist.Prof.Dr. Cem Şimşek
	11.05-11.25	Serebrovasculary event	Emergency department	TUANA AKSU	Asist.Prof.Dr. Cem Şimşek
	11-25 11.45	Sepsis	Emergency department	PINAR DÜNDAR	Asist.Prof.Dr. Cem Şimşek
	11.45-12.05	Discussion			Asist.Prof.Dr. Cem Şimşek
Acute Abdomen 10 July 2025 13.30- 16.35	13.30-13.35	Introduction			
	13.35-13.55	Acute appendicitis	General surgery	NEVZAT ANIL AKCAN	Assos.Prof.Dr Kinyas Kartal
	13.55-14.15	Acute Colesystitis	General surgery	HALİLCAN ARPACI	Assoc.Prof.Dr Kinyas Kartal
	14.15-14.35	Acute Pancreatitis	Gastroenterology	FARUK MAHMUT ALKAN	Assoc.Prof.Dr Kinyas Kartal
	14.35-14.55	Acute diverticulitis	Internal Medicine	EFE AKDENİZ	Assoc.Prof.Dr M.Akif Öztürk
	14.55-15.15	Coffee Break			
	15.15-15.35	Ileus	General surgery	İLAYDA NUR KILIÇ	Assoc.Prof.Dr Kinyas Kartal
	15.35-15.55	Familial mediteranian fever	Internal Medicine	GÖKTUĞ TERZİBAŞ	Prof.DR Yaşar Küçükardalı
	15.55-16.15	Rupture of ovarian cyst	Gynecology	EMRE ATALAY	Asist.Prof. Dr. Mert Yeşiladalı
	16.15-16.35	Discussion			

Obstetric Emercencies 24 July 2025 09.00-12.00	09.00-09.05	Introduction			
	09.05-09.25	Ectopic pregnancy	Gynecology	YAĞMUR NİSA DURSUN	Asist.Prof. Dr. Melis Gökçe Koçer Yazıcı
	09.25-09.45	Preeclampsi / Eclampsia	Gynecology	ZEYNEP ÇOLAKOĞLU	Asist.Prof. Dr. Melis Gökçe Koçer Yazıcı
	09.45-10.05	Post partum bleedind	Gynecology	BAHAR ALINEJAD	Asist.Prof. Dr. Mert Yeşiladalı
	10.05-10.25	Uterin Rupture	Gynecology	BUSENUR KARA	Asist.Prof. Dr. Melis Gökçe Koçer Yazıcı
	10.25-10.45	Coffee Break			
	10.45-11.05	Abortus	Gynecology	İREM NUR BELEVİ	Assoc.Prof Mert Yeşilada
	11.05-11.25	Fatty Liver in Pregnant Women	Gastroenterology	ERGE DOĞAN	Prof.Dr. Meltem Ergün
	11-25 11.45	Endocrynologic emergencies in Pregnant women	Endocriynology	BARTU KAYA BEYZADEOĞLU	Assoc Prof. Özlem Haliloğlu
	11.45-12.05	Discussion			
Fever (child, adult) 24 July 2025 13.30-16.35	13.30-13.35	Introduction			
	13.35-13.55	Sepsis	Internal Medicine	BERKE GÖKYAYLA	Prof.Dr. Yaşar Küçükardalı
	13.55-14.15	Urinary System infections	Internal Medicine	EYLÜL MUTLU	Prof.Dr. Yaşar Küçükardalı
	14.15-14.35	Divertikülit	Internal Medicine	GÜLSÜM BUSE DEMİR	Prof Dr Yaşar Küçükardalı
	14.35-14.55	Pneumonia	Internal Medicine	BEHİRE FEM ÇELİK	Prof.Dr. Yaşar Küçükardalı
	14.55-15.15	Fever of unknown origin	Internal Medicine	ALPEREN EDİŞ	Prof.Dr. Yaşar Küçükardalı
	15.15-15.35	Upper Respiratory system infections	Pediatry	ELİF ÇAPANOĞLU	Asist.Prof.Dr. Çoşkun Saf
	15.35-15.55	Lower Respiratory system infections	Pediatry	AYÇA KAHRAMAN	Asist.Prof.Dr. Çoşkun Saf

	15.55-16.15	Kawasaki Diseases	Pediatry	GÖRKEM ÇALIŞKAN	Asist.Prof.Dr. Çoşkun Saf
	16.15-16.35	Discussion			
GIS bleeding 07 August 2025 09.00-12.00	09.00-09.05	Introduction			
	09.05-09.25	Peptic ulcus	Gastroenterology	GÖKSU BALCI	Prof.Dr. Meltem Ergün
	09.25-09.45	Diverticulary bleeding	Gastroenterology	SUDE KARAKUŞ	Prof.Dr. Meltem Ergün
	09.45-10.05	Angiodisplasia	Gastroenterology	MÜCAHİT YILDIRA	Prof.Dr. Meltem Ergün
	10.05-10.25	Eozinophilic proctocolitis	Gastroenterology	KIVANÇ GÖKTÜRK	Prof.Dr Meltem Ergün
	10.25-10.45	Coffee Break			
	10.45-11.05	Gastric Malignancy	Gastroenterology	SELEN EYYUPOĞLU	Prof.Dr.Meltem Ergün
	11.05-11.25	Varriseal bleeding	Gastroenterology	ZEYNEP SELENE İSKİT	Prof.Dr.Meltem Ergün
	11-25 11.45	Colon carcinoma	Gastroenterology	BERKİN AKDAĞLI	Prof.Dr.Meltem Ergün
	11.45-12.05	Discussion			
Physchiatric Emercencies 07 August 2025 13.30-16.35	13.30-13.35	Introduction	Psychiatry		
	13.35-13.55	Suicide	Psychiatry	ZEYNEP BETÜL KİRAZ	Prof.Dr Okan Taycan
	13.55-14.15	Substance İntoxication	Psychiatry	DİLARA KARABULUT	Prof.Dr Okan Taycan
	14.15-14.35	Delirium	Psychiatry	BAHAR BAŞAK AYDIN	Prof.Dr Okan Taycan
	14.35-14.55	Panic Attack	Psychiatry	İLAYDA NUR KILIÇ	Prof.Dr Okan Taycan
	14.55-15.15	Coffee Break			
	15.15-15.35	Manic attack	Psychiatry	BERİN SÜEDA GENÇ	Prof.Dr Okan Taycan
	15.35-15.55	Grief Reaction	Psychiatry	ÖZGE GÜRBÜZ	Prof.Dr Okan Taycan

	15.55-16.15	Give Bad News	Psychiatry	CANSU ERLİK	Prof.Dr Okan Taycan
	16.15-16.35	Discussion			
Palliative Medicine 07 August 2025		Manegement of Sedation	Internal Medicine	CEREN ELİF ÜNALMIŞ	Prof.Dr.Yaşar Küçükardalı
		Prophylactic Treatments	Internal Medicine	İLDEM ÖYKÜ ATAŞ	Prof.Dr.Yaşar Küçükardalı
Hypertension (child, adult) 21 August 2025 09.00-12.00	09.00-09.05	Introduction			
	09.05-09.25	Esential Hypertansion	Internal Medicine	PETEK FETTAHLIOĞLU	Prof.Dr Yaşar Küçükardalı
	09.25-09.45	Hyperaldosteronizm	Endocrinology	ZEYNEP HACIKAMİLOĞLU	Assoc.Prof Özlem Haliloğlu
	09.45-10.05	Feokromasitoma	Endocrinology	ASLI ERKAN	Assoc.Prof Özlem Haliloğlu
	10.05-10.25	Renal artery stenosis	Nephrology	ECE ÖZTARHAN	Prof.Dr. Abdullah Özkök
	10.25-10.45	Coffee Break			
	10.45-11.05	Primary hypertension	Pediatry	YİĞİT ÇİLAN	Prof.Dr. Ruhan Düşünsel
	11.05-11.25	Renal Parancymal diseases related hypertension	Pediatry	EFE EKREN	Prof.Dr. Ruhan Düşünsel
	11-25 11.45	Renovascular Hypertension	Pediatry	DOĞA GÜNGÖR	Prof.Dr. Ruhan Düşünsel
	11.45-12.05	Discussion			
Palliative Medicine 21.August 2025		Manegement of comorbidities (Charlston risk index)	Internal Medicine	ZEYNEP EKİN KAYA	Assoc.Prof.Dr M.Akif Öztürk
		Manegement Constipation	Internal Medicine	ZEYNEP KIZMAZ	Assoc.Prof.Dr M.Akif Öztürk
Diarrea (child, adult)	13.30-13.35	Introduction			

21 August 2025 13.30-16.35	13.35-13.55	İrritabl bowel syndrome	Internal Medicine	ASLI NAZLI EKŞİ	Prof.Dr Yaşar Küçükardalı
	13.55-14.15	İnflamatuar bowel diseases	Gastroenterology	DEFNE SELMA ŞENGÜN	Prof.Dr Meltem Ergün
	14.15-14.35	Salmonellosis	Infectious Diseases	GÜLBEYAZ BETÜL ERSOY	Prof.Dr Özlem A lıcı
	14.35-14.55	Cl.Difficile İnfections	Gastroenterology	ATAKAN BABAGİRAY	Prof.Dr Özlem Alıcı
	14.55-15.15	Coffee Break			
	15.15-15.35	Rota virus associated	Pediatry	ELİF EZGİ KARAGÖZ	Asist.Prof.Dr Burçin Yorgancı Kale
	15.35-15.55	Giardiasis associated	Pediatry	ANIL NUMANOĞLU	Asist.Prof.Dr Burçin Yorgancı Kale
	15.55-16.15	Toddlers Diarrea	Pediatry	SEVİNÇ BURCU AYDIN	Asist.Prof.Dr Burçin Yorgancı Kale
	16.15-16.35	Discussion			
Comprehensive Geriatric Assessment 21 August 2025		İmmunoprofilaxi of elderly population	Internal Medicine	ALP SARANDÖL	Prof.Dr.Yaşar Küçükardalı
		Vertigo in elderly patients	Internal Medicine	MEHMET AYDIN BOYRAZ	Prof.Dr.Yaşar Küçükardalı
Dispnea 04 Sept 2025 09.00-12.00	09.00-09.05	Introduction			
	09.05-09.25	Pulmonary emboli	Pulmonology	BENGİSU BOYRAZ	Prof.Dr.Banu Salepçi
	09.25-09.45	Chronic obstructive Lung Diseases	Pulmonology	BARKIN KAHVECİGİL	Prof.Dr.Banu Salepçi
	09.45-10.05	Pnemonia	Pulmonology	ÖNAL EFEHAN ÖZKAN	Prof.Dr.Banu Salepçi
	10.05-10.25	Asthma bronciale	Pulmonology	EBRAR BEYZA AYDIN	Prof.Dr.Banu Salepçi
	10.25-10.45	Coffee Break			

	10.45-11.05	Pneumothrax	Pulmonology	İDİL KASAP	Prof.Dr.Banu Salepçi
	11.05-11.25	Pulmonary edema	Cardiology	NEHİR YARAMAN	Assoc. Prof. Dr. Ayca Türer Cabbar
	11-25 11.45	ARDS	Intensive care	ESRA GÜNEY	Prof.Dr Yaşar Küçükardalı
	11.45-12.05	Discussion			
Comprehensive Geriatric Assessment 04 Sept 2025		Atipical presentation of common disorders in elderly patients	Internal Medicine	ROJHAT ÇIRAK OLCAY	Assoc.Prof.Dr M.Akif Öztürk
		Evaluation of vision and hearing in the elderly	Internal Medicine	DOĞA TAŞ	Assoc.Prof.Dr M.Akif Öztürk
Diabetes (child,adult) 04 Sept 2025 13.30-16.35 Diabetes (child,adult) 04 Sept 2025 13.30-16.35	13.30-13.35	Introduction			
	13.35-13.55	Prediabetic patient	Endocrinology	BENSU YETİK	Assoc.Prof.Dr Özlem Haliloğlu
	13.55-14.15	New diagnosed Type II Diabetic patient	Endocrinology	YAĞMUR ÖZKAN	Assoc.Prof.Dr Özlem Haliloğlu
	14.15-14.35	Type 2 diabetic patient which oral therapy is insufficient	Endocrinology	MEHMET OĞULCAN GİRAY	Assoc.Prof.Dr Özlem Haliloğlu
	14.35-14.55	Gestasionel Diabetic patient	Endocrinology	ONGUN NOYAN TUNCER	Assoc.Prof.Dr Özlem Haliloğlu
	14.55-15.15	Coffee Break			
	15.15-15.35	Patient with diabetic ketoasidosis	Endocrinology	GÜL URAL	Assoc.Prof.Dr Özlem Haliloğlu
	15.35-15.55	Pediatric diabetic ketoasidosis	Pediatry	DOĞUKAN KURT	Assoc.Prof.Dr Elif Sağsak
	15.55-16.15	Type I Diabetes mellitus	Pediatry	DORUK SEÇKİNER	Assoc.Prpf.Dr Elif Sağsak

	13.30-13.35	Discussion			
General approach to neurologic symptoms 18 Sept 2025 09.00-12.00	09.00-09.05	Introduction			Asist.Prof.Dr. Rengin Bilgen Akdeniz
	09.05-09.25	convulsions	Neurology	IRMAK YILDIZ	Asist.Prof.Dr. Rengin Bilgen Akdeniz
	09.25-09.45	Brain Tumor (sec)	Neurology	BORA TEZER	Asist.Prof.Dr. Rengin Bilgen Akdeniz
	09.45-10.05	Head Trauma (sec)	Neurology	ZEYNEP SUDE ŞAHİN	Asist.Prof.Dr. Rengin Bilgen Akdeniz
	10.05-10.25	Neuropathic Pain	Neurology	ZEHRA ERASLAN	Asist.Prof.Dr. Rengin Bilgen Akdeniz
	10.25-10.45	Coffee Break			
	10.45-11.05	Demyelisane diseases	Neurology	ILGIN TOKBAY	Asist.Prof.Dr. Rengin Bilgen Akdeniz
	11.05-11.25	Paralysis	Neurology	AYKUT AKSAN	Asist.Prof.Dr. Rengin Bilgen Akdeniz
	11-25 11.45	Headache	Internal Medicine	ERDEM SAMANCI	Asist.Prof.Dr. Rengin Bilgen Akdeniz
	11.45-12.05	Discussion	Neurology		Asist.Prof.Dr. Rengin Bilgen Akdeniz
Chest pain, Palpitation 18 Sep 2025 13.30-16.35	13.30-13.35	Introduction			Assoc.Prof.Dr. Ayça Türer Cabbar
	13.35-13.55	Myocardial infarction	Cardiology	VENÜS ŞAHİN	Assoc.Prof.Dr. Ayça Türer Cabbar
	13.55-14.15	Aort dissection	Cardiology	SİMGE SU SÖZÜTEK	Assoc.Prof.Dr. Ayça Türer Cabbar
	14.15-14.35	Diffuse esophagial spasm	Gastroenterology	MUHAMMET SAATÇİ	Assoc.Prof.Dr. Ayça Türer Cabbar

	14.35-14.55	Reflux diseases	Gastroenterology	IRMAK ÖĞRETMEN	Prof.Dr Meltem Ergün
	14.55-15.15	Coffee Break			
	15.15-15.35	Pnemothrox	Pulmonology	BARIŞ SÖNMEZ	Prof.Dr. Banu Salepçi
	15.35-15.55	Pulmonary embolism	Pulmonology	EDA KOÇ	Prof.Dr. Banu Salepçi
	15.55-16.15	Tiets syndrome	Rheumotology	ELİF KESKİNEL	Prof.Dr. Müge Kalaycı
	16.15-16.35	Discussion			

SYMPTOM-BASED LEARNING SESSIONS

Learning Objectives

At the end of each session the intern will be able to;

Change in consciousness	Describe the Change in consciousness Describe inıtial symptomatology of patient Describe physical findings Describe gold standart and other diagnostic methods Explain X Ray and CT findings Interpret Lab abnormalities Explain risk factors Explain therapeutic aproachment in relation with severity of the diseases Define indications for admission to the hospital
Limitation of joint motion (ROM)	Define Limitation of joint motion Explain physical examinations of patients with ROM List the Causes of ROM Describe how to take the history of a patient with ROM Interpret the physical examination signs in a patient with ROM Explain differential diagnosis to the etiology of ROM Choose necessary follow-up tests Manage the ROM emergencies Evaluate in which patients with ROM are required to refer specialist
Fatique	Define fatique Explain the causes of fatigue Make differential diagnosis Interpret diagnostic studies and tests Explain the first medical intervention in life-threatening fatique Refer the patient in time to a specialist Recognize and take precaution in cases that require emergency treatment

Upper gastrointestinal system bleeding	List the causes of Upper gastrointestinal system bleeding Choose etiology oriented tests that should be performed Evaluate when to ask for further scanning (gastroscopy , kolonoscopy X-ray, CT, MR) Discriminate the cases in which history taking is enough Interpret the Pain Scale Diagnosis and recognizes the life-threatening GIS bleeding Explain the treatment options for GIS bleeding After the first assessment differentiate the patient who needs to be referred to a specialist for further investigation (Surgery, gastroenterology
Anorexia	Define Anorexia Explain the causes of anorexia Define differential diagnosis List diagnostic studies and tests Can make symptomatic and avidence based treatment of purititis Refer the patient to a specialist when necessary
Constipation	Define criterias of constipation Describe physical examination of constipated patient Explain causes of Constipatio Make differential diagnosis Perform and interpret the case –oriented tests Interpret a Chest X-ray Interpret a lab abnormalities Explain priorities of an emergency treatment Decide when to refer a patient to a specialist
Hemoragic diathesis	Define Hemoragic diathesis Describe physical examination of Hemoragic diathesis List diseases with present Hemoragic diathesis Make differential diagnosis List diagnostic tests Evaluate findings of the X Ray examinations Refer a patient to a specialist
Dispnea	Define criterias of Dispnea Explain the causes of Dispnea Make differential diagnosis Perform diagnostic studies and tests Recognize and manage life-threatening Dispnea Interpret an ECG Perform risk analysis of Dispnea Recognize and takes precaution in cases that require emergency treatment Refer a patient to a specialist in time
Splenomegaly	Define Splenomegaly Explain the causes of Splenomegaly Make differential diagnosis Perform the diagnostic tests and screenings Recognize the life-threatening Splenomegaly Ask for a surgery consultation in time Recognize and take precaution of the cases that require emergency treatment

Cyasosis	Define cyanosis Explain the causes of cyanosis Make differential diagnosis Evaluate the diagnostic tests and screenings Explain the first intervention in a life-threatening cyanosis Define a specific consultation in time Assess the physical examination of a patient
Chest pain	Define Chest pain Distinguish Types of Chest pain Explain causes of Chest pain Make differential diagnosis Perform diagnostic studies and tests Explain the first medical intervention in life-threatening Chest pain Refer the patient in time to a specialist Recognize and take precaution in cases that require emergency treatment

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

RECOMMENDED TEXTBOOKS FOR PHASE VI

NO	DEPARTMENT	TEXTBOOK/ SOURCE	EDITOR	PUBLISHER / ACCESS
1	**INTERNAL MEDICINE**	Harrison's Principles of Internal Medicine		
		Semiyoloji	Yaşar Küçükardalı, MD, Prof.	2013 Nobel Tıp Kitabevleri
		www.uptodate.com		University Knowledge Center
		www.accessmedicine.com		University Knowledge Center
2	**PEDIATRICS**	Nelson Textbook of Pediatrics		
3		Temel Pediatri		
4		www.uptodate.com		University Knowledge Center
5		ile www.accessmedicine.com		University Knowledge Center
6	**GENERAL SURGERY AND EMERGENCY MEDICINE**	Schwartz's Principles of Surgery, 10th edition		
		Sabiston Textbook of Surgery: The Biological Basis of Modern Surgical Practice, 19th edition Tintinalli's Emergency Medicine: A Comprehensive Study Guide, 8th Edition Rosen's Emergency Medicine: Concepts and Clinical Practice, 9th Edition www.uptodate.com www.clinicalkey.com		
7	**OBSTETRICS & GYNECOLOGY**	Current Obstetrics and Gynecology, Elsevier Publishing 2015		

GROUPS OF PHASE VI 2025-2026

GROUP 1

REPRESENTATIVE:

1	20200800146	FARSIMA	ABDIPOUR VOSTA	
2	20200800136	RIHAM	ABOU HEIT	
3	20200800129	HEDIEH SADAT	BAHREINI	
4	20190800123	RAMISH MEHMOOD	SHAIKH	
5	20200800139	MUHAMMAD RAYYAN	MASOOD	
6	20210800001	SUDE	ÇAPRAZ	
7	20200800121	TUANA	AKSU	
8	20200800059	PINAR	DÜNDAR	
9	20200800062	NEVZAT ANIL	AKCAN	
10	20190800029	HALİLCAN	ARPACI	
11	20190800033	FARUK MAHMUT	ALKAN	
12	20200800092	EFE	AKDENİZ	
13	20200800076	İLAYDA NUR	KILIÇ	g1 ile dahiliye, psikiyatri, seçmeli, halk sağlığı, aile hekimlii ,G6 kadın doğ. G2 Pediatri, g1 genel cer. Acil
14	20210800020	GÖKTUĞ	TERZİBAŞ	GRUP 1 İLE İÇ HASTALIKLARI VE PSİKİYATRİ STAJLARINI TAMAMLAYACAK
15	20190800028	EMRE	ATALAY	
16	20180800081	YAĞMUR NİSA	DURSUN	GRUP 1 İLE İÇ HASTALIKLARI VE PSİKİYATRİ STAJLARINI TAMAMLAYACAK
17	20190800015	ZEYNEP	ÇOLAKOĞLU	GRUP 1 İLE İÇ HASTALIKLARI VE PSİKİYATRİ STAJLARINI TAMAMLAYACAK

GROUP 2

REPRESENTATIVE:

1	20200800130	BAHAR	ALINEJAD	
2	20230800015	BUSENUR	KARA	
3	20200800097	İREM NUR	BELEVİ	
4	20200800073	ERGE	DOĞAN	
5	20200800074	BARTU KAYA	BEYZADEOĞLU	
6	20200800085	BERKE	GÖKYAYLA	

7	20210800028	EYLÜL	MUTLU	
8	20200800078	GÜLSÜM BUSE	DEMİR	
9	20200800065	BEHİRE FEM	ÇELİK	
10	20180800065	ALPEREN	EDİŞ	
11	20200800086	ELİF	ÇAPANOĞLU	
12	20200800049	AYÇA	KAHRAMAN	
13	20190800042	GÖRKEM	ÇALIŞKAN	
14	20200800047	GÖKSU	BALCI	
15	20190800065	SUDE	KARAKUŞ	
16	20190800091	MÜCAHİT	YILDIRA	
17	20200800060	KIVANÇ	GÖKTÜRK	
18	20200800112	SELEN	EYYUPOĞLU	GRUP 5 İLE AİLE HEKİMLİĞİ VE ACİL TIP STAJINI YAPACAK GENEL CERRAHİSİ KISMINI KENDİ GRUBUYLA
19	20190800056	ZEYNEP SELENE	İSKİT	
20	20200800123	BERKİN	AKDAĞLI	
21	20230800026	ZEYNEP BETÜL	KİRAZ	GRUP 2 İLE GENEL CERRAHİ, İÇ HASTALIKLARI, PSİKİYATRİ STAJLARINI YAPACAK
22	20230800024	DİLARA	KARABULUT	GRUP 2 İLE GENEL CERRAHİ, İÇ HASTALIKLARI, PSİKİYATRİ STAJLARINI YAPACAK
23	20230800016	BAHAR BAŞAK	AYDIN	GRUP 2 İLE GENEL CERRAHİ, İÇ HASTALIKLARI, PSİKİYATRİ STAJLARINI YAPACAK

GROUP 3

REPRESENTATIVE:

1	20230800020	BERİN SÜEDA	GENÇ	
2	20200800045	ÖZGE	GÜRBÜZ	
3	20200800103	CANSU	ERLİK	
4	20200800099	CEREN ELİF	ÜNALMIŞ	
5	20200800069	İLDEM ÖYKÜ	ATAŞ	
6	20200800028	PETEK	FETTAHLIOĞLU	
7	20200800080	ZEYNEP	HACIKAMİLOĞLU	
8	20210800035	ASLI	ERKAN	
9	20200800015	ECE	ÖZTARHAN	
10	20200800116	YİĞİT	ÇİLAN	
11	20200800104	EFE	EKREN	
12	20200800104	DOĞA	GÜNGÖR	
13	20200800055	ZEYNEP EKİN	KAYA	
14	20200800075	ZEYNEP	KIZMAZ	
15	20200800082	ASLI NAZLI	EKŞİ	
16	20200800020	DEFNE SELMA	ŞENGÜN	
17	20190800079	GÜLBEYAZ BETÜL	ERSOY	
18	20190800030	ATAKAN	BABAGİRAY	

GROUP 4

REPRESENTATIVE:

1	20220800043	ELİF EZGİ	KARAGÖZ	
2	20190800047	ANIL	NUMANOĞLU	
3	20200800091	SEVİNÇ BURCU	AYDIN	
4	20200800054	ALP	SARANDÖL	
5	20200800057	MEHMET AYDIN	BOYRAZ	
6	20220800141	BENGİSU	BOYRAZ	
7	20170800018	BARKIN	KAHVECİGİL	
8	20190800081	ÖNAL EFEHAN	ÖZKAN	
9	20200800051	EBRAR BEYZA	AYDIN	
10	20190800105	UMUT	KARADENİZ	2025 GÜZDE PEDİATRİ, KADIN DOĞUM STAJINI YAPACAK
11	20200800041	İDİL	KASAP	
12	20200800090	NEHİR	YARAMAN	
13	20210800036	ESRA	GÜNEY	
14	20190800026	ROJHAT ÇIRAK	OLCAY	
15	20200800098	DOĞA	TAŞ	
16	20200800084	BENSU	YETİK	
17	20190800074	YAĞMUR	ÖZKAN	
18	20190800053	MEHMET OĞULCAN	GİRAY	
19	20200800021	ONGUN NOYAN	TUNCER	
20	20200800088	GÜL	URAL	
21	20200800079	DOĞUKAN	KURT	

GROUP 5

REPRESENTATIVE:

1	20200800072	DORUK	SEÇKİNER	
2	20200800083	IRMAK	YILDIZ	
3	20200800052	BORA	TEZER	
4	20200800102	ZEYNEP SUDE	ŞAHİN	
5	20190800098	ZEHRA	ERASLAN	
6	20200800109	ILGIN	TOKBAY	
7	20200800040	AYKUT	AKSAN	
8	20230800028	ERDEM	SAMANCI	
9	20210800034	VENÜS	ŞAHİN	
10	20200800096	SİMGE SU	SÖZÜTEK	
11	20190800095	MUHAMMET	SAATÇİ	
12	20200800111	IRMAK	ÖĞRETMEN	
13	20190800089	BARIŞ	SÖNMEZ	
14	20200800117	EDA	KOÇ	
15	20200800071	ELİF	KESKİNEL	
16	20200800070	SERRA	TAŞÇI	
17	20200800044	MAYA	SARIOĞLU	

18	20170800121	MAHAMMAD	SHAHBAZOV	2025 GÜZDE GRUP 5 İLE HALK SAĞLIĞI STAJINI TAMAMLAYIM
19	20200800048	İREM NUR	ATİLLA	
20	20200800077	MURAT	YALÇIN	

GROUP 6

REPRESENTATIVE:

1	20200800110	DENİZ CAN	TEMEL	
2	20200800108	EGEMEN	YÜKSEL	
3	20200800095	ABİDİN EFE	ÖZGÜN	
4	20200800118	ENES EMRE	YILDIRIM	
5	20200800067	ECE	YAVUZ	
6	20200800063	GÜLCE	YALÇIN	
7	20190800059	HİLAL	YILMAZ	
8	20200800058	MELİSA	YILDIRIM	
9	20190800102	TUĞÇE	UĞUR	01.11.2025 TARİHİNDE İNTÖRN OLUYOR GRUP 6 İLE PEDİATRİ, KADIN DOĞUM, GENEL CERRAHİ ACİL TIP, İÇ HASTALIKLARI STAJLARINI TAMAMLAYACAK 2026 GÜZDE PSİKİYATRİ, SEÇMELİ, AİLE HEKİMLİĞ VE HALK SAĞLIĞI STAJLARINI YAPACAK
10	20200800093	ZEYNEP DOĞA	YAPICI	
11	20210800019	METİN	ÇİNÇİN	
12	20190800101	ÖMER ŞAMİL	YILMAZ	
13	20210800004	SELIN DZAHIT	YUKSEL	
14	20190800064	MERVE BENGÜSU	AKIN	
15	20230800018	ÖYKÜ	ALEMDAR	GRUP 6 İLE PSİKİYATRİ, SEÇMELİ, AİLE HEKİMLİĞİ, HALK SAĞLIĞI STAJLARINI YAPACAK
16	20200800076	İLAYDA NUR	KILIÇ	

PROGRESS TEST

Progress test (PT) is used to assess students on topics from all medical disciplines. As an assessment tool in medical education, the PT offers some distinctive characteristics that set it apart from other types of assessment. It is administered to all students in the medical program at the same time and at regular intervals (usually twice a year) throughout the entire academic program. The test samples the complete knowledge domain expected that a student to have on graduation, regardless of which grade the student is at. The scores provide beginning-to-end and curriculum-independent assessments of the objectives for the entire medical program. The purpose of the PT as a formative or summative test is variably used across institutions.

In YUTF, PT is applied according to the following principles and rules.

Purpose

- In YUTF, PT is used for formative purposes.
- PT is conducted to allow students to see their progress in knowledge levels throughout their medical education.

Obligation

- PT is mandatory for all students.

Frequency and Timing

- PT is performed twice a year.
- Each student will have received a total of 12 PTs by the end of the Phase 6.
- In a year; the first PT is done in the middle and the second PT is done at the end of the term.
- PT dates are announced by the Phase Coordinator.

Implementation

- PT is performed online via EYS.

Content

- PT consists of 200 multiple choice questions.
- 100 of them are related to the preclinical period and the rest 100 are related to the clinical period.
- The ratio of the questions to be asked according to the disciplines is announced to the students before PT.
- All students from 1st to 6th Phase are to answer the same questions.

Feedback

- A report is sent to each student after each PT.
- The report includes how many questions the student answered correctly in each discipline and their progress against the previous PT.
- Students can also view their ranking within their class and within the entire school.

Benefits

- PT gives students the opportunity to see their progress throughout their medical education.
- PT provides opportunities for students to prepare for other exams (Committee, Clerkship, TUS, USMLE, etc.).
- As questions are often enhanced with a real life problem, PT contributes to students' problem-solving skills. This question type is preferred in TUS, especially USMLE and other similar exams.

***Participation in the Progress Test (PT) is compulsory. Students who do not complete the PT will not be eligible to progress to the next phase.**

SPECIFIC SESSIONS

Introductory Session

Aim of the Session:

The session provides basic information about Yeditepe University Faculty of Medicine Undergraduate Medical Education Program (YUFM/UG-ME) and the educational phase relevant to the students. This session orients the students to the program and the phase.

Objectives of the Session:

1. To provide basic information about the YUFM/UG-ME
2. To provide basic information about the phase.
3. To provide essential information on social programs and facilities.

Rules of the Session:

1. The session will be held in two types, conducted by Phase Coordinator and Internship Coordinators, respectively.
2. The first type will be held once in the first week of the educational phase. The second type will be held at the beginning of each internship.
3. Students should attend the session.

Implementation of the Session:

In the first type, Phase Coordinator will present brief information on the following topics:

- Organizational Chart of Yeditepe University Faculty of Medicine Undergraduate Medical Education Program (YUFM/UG-ME), Work Descriptions and Introduction of Internship Members,
- Directives on YUFM/UG-ME,
- YUFM/UG-ME Program Outcomes
- Learning Objectives of the Phase
- Academic Program of the Phase
- Teaching and Learning Methods
- Learning Environments and Sources/Resources
- Attendance
- Assessment Criteria
- Pass/Fail Conditions
- Feedback of the Previous Years and Program Improvements
- Social Programs and Facilities

In the second type, Internship Coordinator will present brief information on the following topics:

- Learning Objectives of the Internship
- Academic Program of the Internship
- Teaching and Learning Methods
- Learning Environments and Sources/Resources, References
- Attendance
- Assessment Criteria
- Pass/Fail Conditions
- Feedback of the Previous Years and Program Improvements
- Social Programs and Facilities

Program Evaluation Session

Aim of the Session:

The aim of the session is to evaluate the internship educational program, with all its components, by the students and the internship coordinators. This session will contribute to the improvement of the curriculum in general by giving the opportunity to identify the strengths of the internship educational program and revealing the areas which need improvement.

Objectives of the Program Evaluation Session are to;

- establish a platform for oral feedbacks in addition to the systematically written feedback forms
- give the opportunity to the students and the coordinators to discuss the intership period face to face

Rules of the Program Evaluation Session:

1. The program evaluation session will be held on the last day of each internship program.

2. Students are required to attend the session.

3. The Internship coordinator will lead the session.

4. Students must comply with the feedback rules when they are giving verbal feedback and all participants shall abide by rules of professional ethics.

Program Improvement Session

Aim:

The aim of this session is sharing the program improvements based on the evaluation of the educational program data, with the students and the faculty members.

Objectives:

1. To share the improvements within educational program with the students and the faculty members.
2. To inform the students and the faculty members about the processes of the program improvement
3. To encourage student participation in the program improvement processes.

Rules:

1. Program improvements session will be implemented once a year. The implementation will be performed at the begining of the spring semester.
2. Students are required to attend the session.
3. The phase coordinator will monitor the session. If necessary the dean, vice deans and heads of the educational boards will attend to the session.
4. All faculty members will be invited to the session.

Implementation:

Before the Session

1. Phase coordinator will report the results of the improvements of the educational program.
2. The program improvements report has three parts. The first part of the report includes improvements that have been completed, and those that are currently in progress. The second part of the report includes, improvements that are planned in medium term, and the third part of the report includes, improvements that are planned in the long term.
3. The program improvements report also includes the program evaluation data (student feedbacks, faculty feedbacks, results of the educational boards meetings etc.) in use of improvements.

During the Session

4. The phase coordinator will present the program improvements report to the students and the faculty members.
5. Students can ask questions about, and discuss, the results of the program improvement.

Process

The total period of session is 30 minutes and has two parts. The first part (15 minutes) covers, presenting of the program improvement report. The second part (15 minutes) covers, students' questions and discussion.

After the Session

6. The program improvement brief will be published on the website of Yeditepe University Faculty of Medicine (http://med.yeditepe.edu.tr).

INDEPENDENT LEARNING

Description:

"Independent learning" is a process, a method and a philosophy of education in which a student acquires knowledge by his or her own efforts and develops the ability for inquiry and critical evaluation. It includes freedom of choice in determining one's learning objectives, within the limits of a given project or program and with the aid of a faculty adviser. It requires freedom of process to carry out the objectives, and it places increased educational responsibility on the student for the achieving of objectives and for the value of the goals (1).

Aim:

The aim of this instructional strategy is to develop the students' ability, to learn individually, so they are prepared for the classroom lessons, lectures, laboratory experiences and clinical practices, exams, professional life and have the abilities needed for lifelong learning.

Objectives:

With this instructional strategy, students will develop;

- the skills that will help them to learn independently.
- self-discipline in their work habits.
- their evidence based research skills by using reliable resources.
- their teamwork skills by studying together.
- their clinical skills as self-directed working in the clinical skills laboratory.

Rules:

1. All of the students will define independent learning process according to below algorithm.
2. All of the students will be required to fill out a form, which is a self-assessment form for the independent learning (methodology: timing, sources, strategy, etc.).
3. The students' academic performance and independent learning methodology will be analyzed comparatively, and feed-back on further improvements will be provided.

What a student should do for learning independently?

1. **Analyzing:** First you will need to analyze carefully, what your problems and weaknesses are. For example, if you are studying anatomy, is your weak area broadly upper limb, lower limb, or what?
2. **Addressing:** Once you've decided your specific problems, you can list them. Which one needs to be addressed urgently? Work out your priorities. Whatever your subject area is, don't be afraid to return to the basics if necessary. It may give you more confidence in the long run to ensure you have a proper understanding of basic concepts and techniques.
3. **Accessing:** If you need reliable information, or if you need to read about a subject and put it into context, a textbook may be the best place to start. However, the Internet may be helpful if you need very up-to-date information, specific facts, or an image or video etc. If you need an academic research article, reports or case studies for your topic, then a database (Pubmed etc.) would be the best option.
4. **Timing:** In the weekly syllabus you will see, a specific time called "independent learning hour" for your independent work. In addition to these hours, the students should also have their own time schedule for their study time at home.
5. **Planning:** Your next step will be to work out a realistic study-plan for your work. What goals could you literally set for yourself? Don't make them too ambitious but set minor goals or targets that you know you will be able to achieve without having to spend a very long time working on them. How many hours will you need to achieve them? How will you know when you've achieved them?
6. **Recording:** When you work independently, it's a good idea to keep a written record of the work you've done. This can help with further planning and also give a sense of achievement as well as provide something to include in a progress file. As time goes by you may surprise yourself with what you've been able to achieve. This could motivate you to keep going, as could increase your confidence, and even improve your results

7. **Reflecting:** Reflecting on what you've done can help you decide whether the activity was really effective, whether an alternative approach might be better on another occasion, whether you spent the right amount of time and whether you have achieved the target you'd set yourself.
8. **Improving:** Once you've achieved the target, the process of planning can start again. Your needs and priorities may have changed, so think about them and then set yourself to another target.

Reminder: For further information about the independent learning, please contact the Department of Medical Education.

Reference:

1. Candy, P. (1991) Self-direction for lifelong learning: a comprehensive guide to theory and practice. San Francisco: Jossey Bass.

For further reading useful resources to recommend to students:

- Burnapp, D. (2009). Getting Ahead as an International Student. London: Open University Press.
- Marshall, L. & Rowland, F. (1998) A Guide to learning independently. London: Open University Press.
- University of Southampton / UKCISA online resource 'Prepare for Success'

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

INTERNAL MEDICINE

Head of the Department of Internal Medicine: Müge Bıçakçıgil Kalaycı MD. Prof. Dr.

Responsible of Course of Training: Mehmet Akif Ozturk, MD. Assoc. Prof .Dr.

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Faculty

Fahrettin Keleştemur,MD.Prof Dr of Endocrinology

Gülçin Kantarcı, MD. Prof.Dr of Nephrology

Abdullah Özkök MD. Prof.Dr of Nephrology

Elif Birtaş Ateşoğlu MD Prof Dr of Heamatology

Olcay Ozveren, MD. Prof.Dr of Cardiology

Yaşar Küçükardalı, MD. Prof.Dr of Internal Medicine, İntensive care

Meltem Ergün, MD. Prof.Dr of Gastroenterology

Cengiz Pata, Prof.Dr of Gastroenterology

Meral Sönmezoğlu, MD. Prof.Dr of Infectious Diseases

Banu Salepçi, MD. Prof.Dr of Pulmonology

Müge Bıçakçıgil Kalaycı, MD. Prof Dr of Rheumatology

Gülderen Yanıkkaya Demirel MD. Prof.Dr of Internal Medicine,

Immunology Olcay Özveren, MD. Prof.Dr of Cardiology

Bala Başak Öven ,MD ProfDr of Oncology

Figen Atalay MD Prof. Dr Oncology

Ozlem Haliloğlu, MD Assoc.Prof.Dr of Endocrinology

Ozlem Alıcı, MD Prof. Dr of Infectious Diseases

Serkan Çelik MD ,Prof.Dr of Oncology

Seha Akduman MD Asist. Prof Dr. of Pulmonology

Ayça Türer Cabbar MD Assoc Prof.Dr.of Cardiology

Mehmet Akif Özturk Assoc Prof.Dr of Internal Medicine

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 charactheristics 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

NCC 2020 – Basic Medical Procedures INTERNAL MEDICINE	Performance Level
General and symptom-based history taking	4
Assessing mental status	4
Antropometric measurements	4
Head-Neck and ENT examination	4
Abdominal physical examination	4
Skin examination	3
General condition and vital signs assessment	4
Musculoskeletal system examination	3
Respiratory system examination	4
Cardiovascular system examination	4
Urologic examination	3
Preparing medical reports and notice	3
Preparing forensic report	4
Preparing epicrisis	4
Preparing patient file	4
Taking arterial blood gases	3
Ability to make geriatric evaluation	3
Obtaining informed consent	3
Writing prescription	4
Preparing treatment refusal form	3
Reading and evaluating direct radiographs	3
Taking and evaluating ECG	4

Measuring blood glucose level with glucometry	4
Measuring and assessing of bleeding time	3
Filling laboratory request form	4
Preperation and evaluation of peripheral blood smear	4
Performing full urine analysis (including microscopic examination) and evaluation	3
Interpretation of screening and diagnostic examination results	3
Rational drug use	3
Performing IM, IV, SC, ID injection	4
Urinary catheterization	3
Taking sample for culture	4
Nasogastric catheterization	4
Delivering oxygen and administering nebule-inhaler treatment	4
Performing gastric lavage	3
Enema administration	3
Evaluating pulmonary function tests	3
Establishing IV line	4
Measuring blood pressure	4
Performing paracentesis	1
Perfoming and assessing pulse oxymetry	4
Providing basic life support	4
Providing immunization services	3
Periodical examination, chek-up (Cardiac risc assessment, adolescence counseling, tobacco counselling, cancer screening etc.)	4
Using and evaluating peak-flow meter	3

Internal Medicine
Phase VI Week I
Introduction to Internal Medicine 1st Group: 01 July 2025, 2nd Group 01 Sep 2025, 3rd Group 01 Nov 2025, 4th Group 01Jan 2026,

5th Group 01 Mar 2026, 6th Group 01 May 2026

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	**Introductory Session Introduction to Phase VI Yaşar Küçükardalı Kozyatağı /Conference Hall**	Clinical Experience (Inpatient)	Multi-disciplinary Case Discussion Conference Hall Kozyatağı	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
09.30-10.00	**Introductory Session** (Introduction to Internal Medicine) *Mehmet Akif Ozturk*	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
10.00-12.00	Clinical Experience (Outpatient)				
12.00- 12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30-13.15	**Journal Club 2**	**Independent Learning**	**Independent Learning**	**Seminar Presentations (Student)**	**Independent Learning**
13.15- 16.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**
17.00-17.50					

Internal Medicine
Phase VI Week II-III

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	Ward Round	Ward Round	Multi-disciplinary Case Discussion Conference Hall Kozyatağı	Ward Round	Ward Round
09.00-12.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) II.WEEK	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) (Between July and October)	Clinical Experience (Outpatient)
12.00- 12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30-13.15	**Week II Case Report** / **Week III Seminary**			Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) (Between July and October)	
13.15- 16.00-	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) (Between July and October)	Clinical Experience (Outpatient)
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**

Internal Medicine
Phase VI Week IV

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	Ward Round	Ward Round	Multi-disciplinary Case Discussion Conference Hall Kozyatağı	Ward Round	Ward Round
09.00-12.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00- 12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30-13.15	**Journal Club**			**Seminar Presentations (Student)**	
13.15- 16.00-	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**
17.00-17.50					

Internal Medicine
Phase VI Week V-VII

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	Ward Round	Ward Round	Multi-disciplinary Case Discussion Conference Hall Kozyatağı	Ward Round	Ward Round
09.00-12.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) VI. week	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) (Between July and October)	Clinical Experience (Outpatient)
12.00- 12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30-13.15	**Week V Case Report** **Week VI Seminary** **Week VII Jounal Club**			Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) (Between July and October)	
13.15- 16.00-	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) (Between July and October)	Clinical Experience (Outpatient)
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**

Internal Medicine
Phase VI Week VIII

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	Ward Round	Ward round	Multi-disciplinary Case Discussion Conference Hall Kozyatağı	Ward Round	Ward Round
09.00-12.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00-12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30-13.15	**Journal Club**			**Seminar Presentations student**	
13.15-16.00-	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	**Program Evaluation Session** Review of the learning aims, Evaluation of the Course Program *Head of Internal Medicine*
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**

1 General seminar (all groups: All phase VI groups will attend Kozyatağı Hospital 2. Floor, conference hall. It is mandatory
2 Journal club: to attend literature discussion which will be presented by internal medicine residents working in internal medicine department Hospital 2. Floor, conference hall
3 Case report: to attend discussion which will present by asistant doctor working internal medicine department Hospital 2. Floor, conference hall
4 Seminary: to attend seminary which will present by asistant doctor working internal medicine department Hospital 2. Floor, conference hall
5 Lecture: to attend lectures given by the academician working at internal medicine, Hospital 2. Floor meeting room
6 Presentations Students will make a presentation which given them by academician on 20 minute duration. Kozyatağı Hospital 2nd Floor, conference hall, All internship groups should follow these presentations. It is Mandatory.

INTERNAL MEDICINE INTERNSHIP PROGRAM FOR 2025 - 2026

	KZ Da1	KZ Da2	KZ End	KZ Gst	KZ Rom	KZ Göğ	KZ İnf	KZ Ser	KŞ Onk1	KŞ Onk2	KŞ Hem	KŞ İnf	KŞ Nef	KŞ Da	KŞ Gst	KŞ Ser	KZ Kar
01.07. 2024 - 31.08. 2024																	
1-4 week	**A1**	**A2**	**A3**	**A4**	**A5**	**A6**	**A7**	**A8**	**A9**	**A11**	**A10**	**A12**	**A13**	**A14**	**A15**	**A16**	**A17**
13.7.2024 27.7.2024	Symtom based learning session Conference Hall in Yeditepe University Hospital between 09.00- 16.00																
5-8 week	**A17**	**A16**	**A15**	**A14**	**A13**	**A12**	**A11**	**A9**	**A10**	**A8**	**A7**	**A6**	**A5**	**A4**	**A3**	**A2**	**A1**
10.8.2024 24.8.2024	Symtom based learning session Conference Hall in Yeditepe University Hospital between 09.00- 16.00																
01.09. 2024- 31.10.2024																	
1-4 week	**B1**	**B2**	**B3**	**B4**	**B5**	**B6**	**B7**	**B8**	**B9**	**B11**	**B10**	**B12**	**B13**	**B14**	**B15**	**B16**	**A17**
14.9.2024 28.9.2024	Symtom based learning session Conference Hall in Yeditepe University Hospital between 09.00- 16.00																
5-8 week	**B17**	**B16**	**B15**	**B14**	**B13**	**B12**	**B11**	**B9**	**B10**	**B8**	**B7**	**B6**	**B5**	**B4**	**B3**	**B2**	**B1**
01.11.2024- 31.12.2024																	
1-4 week	**C1**	**C2**	**C3**	**C4**	**C5**	**C6**	**C7**	**C8**	**C9**	**C11**	**C10**	**C12**	**C13**	**C14**	**C15**	**C16**	**C17**
5-8 week	**C17**	**C16**	**C15**	**C14**	**C13**	**C12**	**C11**	**C9**	**C10**	**C8**	**C7**	**C6**	**C5**	**C4**	**C3**	**C2**	**C1**
01.01.2025 – 28.2.2025																	
1-4 week	**D1**	**D2**	**D3**	**D4**	**D5**	**D6**	**D7**	**D8**	**D9**	**D10**	**D11**	**D12**	**D13**	**D14**	**D15**		**D16**
5-8 week	**D16**	**D15**	**D14**	**D13**	**D12**	**D11**	**D10**	**D9**	**D8**	**D7**	**D6**	**D5**	**D4**	**D3**	**D2**		**D1**
01.03. 2025- 30.4.2025																	
1-4 week	**E1**	**E2**	**E3**	**E4**	**E5**	**E6**	**E7**	**E8**	**E9**	**E10**	**E11**	**E12**	**E13**	**E14**	**E**		**E16**
5-8 week	**E16**	**E15**	**E14**	**E13**	**E12**	**E11**	**E10**	**E9**	**E8**	**E7**	**E6**	**E5**	**E4**	**E3**	**E2**		**E1**
01.05. 2025 – 30.06.2025																	
1-4 week	**F1**	**F2**	**F3**	**F4**	**F5**	**F6**	**F7**	**F8**	**F9**	**F10**	**F11**	**F12**	**F13**	**F14**	**F15**		**F16**
5-8 week	**F16**	**F15**	**F14**	**F13**	**F12**	**F11**	**F10**	**F9**	**F8**	**F7**	**F6**	**F5**	**F4**	**F3**	**F2**		**F1**

Group members with more than 17 numbers will be assigned before the internship.

Da1	**KZ Kozyatağı Internal Medicine 1**
Da2	**KZ Kozyatağı Internal Medicine 2**
End	**KZ Kozyatağı Endocrinology**
Gst	**KZ Kozyatağı Gastroenterology**
Rom	**KZ Kozyatağı Romatology**
Göğ	**KZ Kozyatağı Pulmonology**
İnf	**KZ Kozyatağı Infectious Diseases**
ser	**KZ Kozyatağı inpatient / clinic**
Onk1	**KŞ Koşuyolu Oncology 1**
Onk2	**KŞ Koşuyolu Oncology 2**

Hem	**KŞ Koşuyolu Hematology**
İnf	**KŞ Koşuyolu Infectious Diseases**
Nef	**KŞ Koşuyolu Nephrology**
Da	**KŞ Koşuyolu Internal Medicine**
Gst	**KŞ Koşuyolu Gastroenterology**
Ser	**KŞ Koşuyolu Inpatient / clinic**
Kar	**KZ Kozyatağı cardiology**

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

CHILD HEALTH and PEDIATRICS

Head of the Department of Child Health and Pediatrics:

Hülya Ercan Sarıçoban, MD. Prof. Of Pediatric Allergy and Immunology

Responsible of Course of Training:

Responsible of Course of Training: E. Manolya Kara, MD. Assoc. Prof.

Faculty

Hülya Ercan Sarıçoban, MD, Prof.

Filiz Bakar, MD, Prof.

Ruhan Düşünsel, MD Prof,

Haluk Topaloğlu, MD, Prof.

Meltem Uğraş, MD, Prof.

Nevin Yalman, MD, Prof.

Sabri Kemahlı, MD, Prof.

Mustafa Berber, MD. Assist. Prof.

Elif Sağsak, MD Assoc. Prof.

Emine Manolya Kara, MD Assoc. Prof.

Seyhan Perihan Saf, MD, Assist. Prof.

Çiğdem Yanar Ayanoğlu, MD, Lecturer

Çetin Timur, MD, Lecturer

Asım Yörük, MD, Lecturer

Tülin Şimşek MD, Lecturer

Burçin Yorgancı Kale, MD, Assist. Prof

Coşkun Saf, MD, Assist. Prof.

Burak Ütük, MD, Lecturer

Büşra Çağlar, MD, Lecturer

İsmet Düşmez, MD, Lecturer

Ezgi Gökçe Özarslan, MD, Lecturer

İlksen Yalçınoğlu, MD, Lecturer

NCC 2020 – Basic Medical Procedures CHILD HEALTH and PEDIATRICS	Performance Level
General and symptom-based history taking	4
Antropometric measurements	4
Head-Neck and ENT examination	3
Abdominal physical examination	4
Consciousness assessment and mood state examination	4
Child and newborn examination	4
Skin examination	4
General condition and vital signs assessment	4
Cardiovascular system examination	4
Musculoskeletal system examination	3
Neurological examination	3
Respiratory system examination	4
Obtaining informed consent	3
Preparing epicrisis	4
Preparing patient file	4
Referring patient appropriately	3
Preparing death report	3
Preparing medical reports and notice	3
Writing prescription	4
Preparing treatment rejection paper	3
Application of principles of working with biologic material	4
Preparing stool smear and microscopic examination	3
Reading direct radiographs and assessment	4
Ability to take ECG and assessment	3
Fecal occult blood examination	2
Measuring blood glucose level with glucometry	4
Performing bleeding time measurement assessment	2
Filling laboratory request paper	4
Obtaining and transfer laboratory specimens in appropriate conditions	4
Using microscope	4
Health at different stages of life (pregnancy, birth,puerperium, newborn, childhood, adolescence, adulthood, puberty)	4
Performing peripheral smear and assessment	4
Performing full urine analysis (including microscopic examination) and assessment	3
Rational drug use	3

Following child growth and development (Percentile graphics, Tanner classification)	4
Establishing IV line	3
Hand washing	4
Obtaining biological samples from patient	4
Performing IM, IV, SC, ID injection	4
Urinary catheterization	3
Measuring blood pressure	4
Performing blood transfusion	3
Capillary blood sampling	4
Obtaining sample for culture	4
Performing lomber puncture	1
Nasogastric catheterization	2
Delivering oxygen and administering nebule-inhaler treatment	2
Administering oral, rectal, vaginal and topical medicines	4
Performing paracentesis	1
Performing PPD test	4
Perfoming and assessing pulse oxymetry	2
Providing appropriate cold chain protection and transportation	4
Assesing respiratory function tests	3
Drawing a family tree and referring the patient for genetic counseling when necessary	1
Performing suprapubic bladder aspiration	2
Providing basic life support	3
Taking heel blood sample	4

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

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.

CHILD HEALTH AND PEDIATRICS (CHP)
Phase VI Weekly Schedule

	Monday	Tuesday	Wednesday		Thursday	Friday
08.30- 09.50	**Morning round** *Clinic visit* *F. Bakar, H.Topaloğlu, R. Düşünsel , H. Sarıçoban, M. Berber, C.Saf, B.Çağlar,B.Ütük, G.Özarslan, İ.Yalçınoğlu, İ.Düşmez,B.Kale P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük,E.Kara,E.Sağsak T. Şimşek,*	**Morning round** *Clinic visit* *F. Bakar, H.Topaloğlu, R. Düşünsel , H. Sarıçoban, M. Berber, C.Saf, B.Çağlar,B.Ütük, G.Özarslan, İ.Yalçınoğlu, İ.Düşmez,B.Kale P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük,E.Kara,E.Sağsak T. Şimşek,*	**Morning round** *Clinic visit* *F. Bakar, H.Topaloğlu, R. Düşünsel , H. Sarıçoban, M. Berber, C.Saf, B.Çağlar,B.Ütük, G.Özarslan, İ.Yalçınoğlu, İ.Düşmez,B.Kale P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük,E.Kara,E.Sağsak T. Şimşek,*	08.30-09.00 Multi-disciplinary Case Discussion Conference Hall Kozyatağı 09.00-12.00 Only IV. and VIII. Week Student-Centred, Symptom-Based Learning Session All groups Conference Hall	**Morning round** *Clinic visit* *F. Bakar, H.Topaloğlu, R. Düşünsel , H. Sarıçoban, M. Berber, C.Saf, B.Çağlar,B.Ütük, G.Özarslan, İ.Yalçınoğlu, İ.Düşmez,B.Kale P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük,E.Kara,E.Sağsak T. Şimşek,*	**Morning round** *Clinic visit* *F. Bakar, H.Topaloğlu, R. Düşünsel , H. Sarıçoban, M. Berber, C.Saf, B.Çağlar,B.Ütük, G.Özarslan, İ.Yalçınoğlu, İ.Düşmez,B.Kale P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük,E.Kara,E.Sağsak T. Şimşek,*
10.00- 10.50	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation		**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation
11.00- 11.50	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation		**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation
12.00- 12.50	**Lunch**	**Lunch**	**Lunch**		**Lunch**	**Lunch**
13.00-15.50	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation	**Journal Club** Discussion of an Update Fulltext Article *Interns* **Lecture and Discussion** Update of Clinical Pediatrics		**Clinical Experience** Pediatric Allergy Learning Session,	**Clinical Experience** Policlinics in Rotation Pediatrics Ward in Rotation
16.00- 16.30	**Independent Learning**	**Independent Learning**	**Independent Learning**		**Independent Learning**	**Independent Learning**
18.00-24.00	**Night shift**	**Night shift**	**Night shift**		**Night shift**	**Night shift**

	5th floor (clinic)	NICU	Ped Neurol	Endoc	Ped GE	Plc1-2	Ped Allergy	NB	Ped Hematol.
1st Week	1	2	3	4	5-14	7-8	9-10	11	12
2nd Week	2	3	4	5-14	6-13	9-10	11	12	1
3rd Week	3	4	5-14	6-13	7-8	11	12	1	2
4th Week	4	5-14	6-13	7-8	9-10	12	1	2	3
5th Week	5-14	6-13	7-8	9-10	11	1	2	3	4
6th Week	6-13	7-8	9-10	11	12	2	3	4	5-14
7th Week	7-8	9-10	11	12	1	3	4	5-14	6-13
8th Week	9-10	11	12	1	2	4	5-14	6-13	7-8

Groups Ped GE: Pediatric Gastroenterology; NB: Neonatology, Plc: Polyclinic, Neurol: Neurology

2025 - 2026 Intern Working Schedule in Pediatrics

Weeks	Group 4	Group 5	Group 6	Group 1	Group 2	Group 3
1st - 2nd	01.07.2025-15.07.2025	01.09.2025-15.09.2025	01.11.2025-15.11.2025	01.01.2026-15.01.2026	01.03.2026-15.03.2026	01.05.2026-15.05.2026
3rd - 4th	16.07.2025-30.07.2025	16.09.2025-30.09.2025	16.11.2025-30.11.2025	16.01.2026-31.01.2026	16.03.2026-31.03.2026	16.05.2026-31.05.2026
5th - 6th	31.07.2025-17.08.2025	01.10.2025-15.10.2025	01.12.2025-15.12.2025	01.02.2026-15.02.2026	01.04.2026-15.04.2026	01.06.2026-15.06.2026
7th - 8th	18.08.2025-31.08.2025	16.10.2025-31.10.2025	16.12.2025-31.12.2025	16.02.2026-28.02.2026	16.04.2026-30.04.2026	16.06.2026-30.06.2026

- Intern doctors should be on time at 09:00 a.m in the morning in clincs and should prepare their own patient to present that who are in charge of on it.
- In the morning from 10:00 to 12:00 the Pediatric Trainers will organise a training inpatient visit or case-based learning session that is organised weekly.
- During the internship every evening one intern student will stay from 17.00 to 24.00 on duty.

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

OBSTETRICS and GYNECOLOGY

Head of the Obstetrics and Gynecology Department: Erkut Attar, MD., PhD, Prof.

Responsible of Course of Training: Rukset Attar, MD., PhD, Prof.

Faculty

Erkut Attar, MD., PhD, Prof.

Orhan Ünal, MD. Prof.

Rukset Attar, MD., PhD, Prof.

Mustafa Başbuğ, MD. Prof.

Mert Yeşiladalı, MD.

Melis Gökçe Koçer Yazıcı, MD.

Zeki Salar, MD

Zeynep Ece Utkan Korun, MD

SANCAKTEPE ŞEHİT PROFESÖR İLHAN VARANK TRAINING AND RESEARCH HOSPITAL
Head of Department of Obstetrics and Gynecology:

Ahmet Kale, MD. Prof.

Responsible of Course of Training: Ahmet Kale, MD. Prof.

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

ROTATIONS

One Month Yeditepe University Hospital, Department of Obstetrics and Gynecology

One Month Sancaktepe Şehit Profesör İlhan Varank Training And Research Hospital, Department of Obstetrics and Gynecology

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 / unsucecessful" 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.

NCC 2020 – Essential Medical Procedures (Obstetrics and Gynecology)	Performance Level
Examination of pregnant woman	3
Gynecologic examination	3
Obtaining informed consent	4
Preparing epicrisis	4
Preparing patient file	4
Writing prescription	4
Preparing treatment refusal form	4
Providing care to mother after delivery	3
Performing episiotomy and suturing	2
Following pregnant and puerperant woman	3
Managing spontaneous delivery	2
Obtaining servical and vaginal smear sample	3

ROTATIONS:

(for every groups)

One month (YUH) Yeditepe University Hospital, Department of Obstetrics and Gynecology

One month (SSPIVTRH) Sancaktepe Şehit Profesör İlhan Varank Training and Research Hospital

Obstetrics and Gynecology
Phase VI Week I

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	Introductory Session (Introduction Obstetrics and Gynecology	Clinical Experience (Inpatient)	Multi-disciplinary Case Discussion All Groups (I-VI) Conference Hall, Kozyatağı	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
09.00-12.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00-13.15	Lunch	Lunch	Lunch	Lunch	Lunch
13.15-16.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
16.00- 16.50	Independent Learning	Independent Learning	Independent Learning	Independent Learning	Independent Learning
17.00-17.50					

Obstetrics and Gynecology
Phase VI Week II - III

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Multi-Disciplinary Case Discussion All Groups (I-VI) Conference Hall, Kozyatağı	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
09.00-12.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00- 13.15	Lunch	Lunch	Lunch	Lunch	Lunch
13.15- 16.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
16.00- 16.50	Independent Learning	Independent Learning	Independent Learning	Independent Learning	Independent Learning
17.00-17.50					

Obstetrics and Gynecology
Phase VI Week IV

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	**Multi-Disciplinary Case Discussion All Groups (I-VI) Conference Hall, Kozyatağı**	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
09.00- 12.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00- 13.15	Lunch	Lunch	Lunch	Lunch	Lunch
13.15- 16.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	**Program Evaluation Session** Review of the learning aims , Evaluation of the Course Program ***Head of* Obstetrics and Gynecology**
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**
17.00- 17.50					

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

GENERAL SURGERY / EMERGENCY MEDICINE

Head of the Department of General Surgery: Özcan Gökçe, MD. Prof.

Responsible of Course of Training : Alper Kurt, MD. Assist.Prof.

Faculty:

Özcan Gökçe MD. Prof

Neşet Köksal MD. Prof

Erhan Ayşan MD. Prof

Kinyas Kartal MD. Assoc. Prof

Veysel Umman MD. Assoc. Prof

Alper Kurt MD. Assist. Prof

Ali Ediz Kıvanç MD. General Surgery Sepcialist

İnan Yılmaz MD. General Surgery Specialist

Head of the Department of Emergency Medicine: Sezgin Sarıkaya, MD. Prof.

Feridun Çelikmen, MD. Assist. Prof.

Mustafa Yazıcıoğlu, MD. Assist. Prof.

Cem Şimşek, MD. Assist. Prof.

Emin Gökhan Gencer, MD. Assist. Prof.

Merve Ekşioğlu, MD. Assist. Prof.

Deniz Algedik Gürsoy, MD, Emergency Med. Specialist

Eren Gökdağ, MD. Emergency Med. Specialist

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 theraphy and/or follow-up, can refer the patient to upper healthcare facilities providing appropriate transporting conditions.And also who can manage with all types of critical patients including arrest patients and who have chest pain, shortness of breath , any kind of trauma and hypotension .

LEARNING OBJECTIVES

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

KNOWLEDGE

- consider the expectations of those who provide or receive care in the ED and use communication methods that minimize the potential for stress, conflict, and miscommunication
- synthesize chief complaint, history, physical examination, and available medical information to develop a differential diagnosis
- based on all of the available data, narrow and prioritize the list of weighted differential diagnoses to determine appropriate management
- demonstrate clear and concise documentation that describes medical decision- making, ED course, and supports the development of the clinical impression and management plan
- use diagnostic testing based on the pre-test probability of disease and the likelihood of test results altering management

SKILLS

- perform basic and advanced airway procedures, basic life support
- perform advanced cardiac and trauma life support for adults and children
- approach to a patient with chest pain/ abdominal pain /shortness of breath
- manage with a polytrauma patient
- differentiate the reasons of chest pain and treat acute coronary syndromes
- explain the types of shock, manage with a shock patient, define the differentials, select the proper treatment
- define the rythm on ECG, approach to a patint with tachycardia/bradycardia
- explain the toxidromes and approach to an intoxicated patient
- explain the basic principles of disaster management
- arrange necessary consultation with physicians and other professionals when needed

ATTITUDE

- consider the expectations of those who provide or receive care in the ED and use communication methods that minimize the potential for stress, conflict, and miscommunication
- establish rapport with and demonstrate empathy toward patients and their families
- recognize and resolve interpersonal conflict in the emergency department including conflicts with patients and family
- rommunicate information to patients and families using verbal, nonverbal, written, and technological skills, and confirm understanding
- communicate risks, benefits, and alternatives to therapeutic interventions to patients and/or appropriate surrogates, and obtain consent when indicated

DESCRIPTION OF THE PROGRAM

The students who have been sent for 2 months rotation, work in outpatient, impatient clinics. Operation room and in other related services under the responsibilitiy 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 preformance 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.

NCC 2020 – Basic Medical Procedures (General Surgery)	Performance Level
General and symptom-based patient interview	4
Assessing mental status	4
Abdominal physical examination	4
Digital rectal examination	3
General condition and vital signs assessment	4
Breast and axillar region examination	3
Urological examination	3
Preparing forensic report	3
Obtaining informed consent	4
Preparing epicrisis	4
Preparing patient file	4
Preparing death certificate	3
Preparing medical reports and notice	3
Writing prescription	4
Preparing treatment refusal form	4
Reading direct radiographs and assessment	3
Measuring and assessing bleeding time	3
Filling laboratory request form	4
Interpretation of screening and diagnostic examination results	3
Definition and management of forensic cases	3
Bandaging and tourniquet application	4
Establishing IV line	3
Incision and drainage of skin and soft tissue abscess	4
Restriction and stopping external bleeding	3
Hand washing	4
Appropriate patient transportation	4
Performing IM, IV, SC, ID injection	3
Urinary catheterization	3
Assessing disease / trauma severity score	4
Measuring blood pressure	4
Performing blood transfusion	2
Obtaing sample for cultre	3
Enema administration	3
Nasogastric catheterization	3
Oral, rectal, vaginal and topical drug administration	3
Providing basic life support	4
Transfering amputated limb appropriate	4
Care for burns	3
Superficial suturing and removal of sutures	3

General Surgery
Phase VI Week I

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	**Introductory Session** Introduction to General Surgery	Clinical Experience (Inpatient)	Multi-disciplinary Case Discussion Conference Hall Kozyatağı	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
09.00-12.00	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)
12.00- 12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30-13.15	Clinical Experience (Out patient)	Clinical Experience (Out patient)	**Independent Learning**	Clinical Experience (Out patient)	**Independent Learning**
13.15- 16.00-	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**
17.00-17.50					

General Surgery
Phase VI Week II-III

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Multi-disciplinary Case Discussion Conference Hall Kozyatağ	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
09.00-12.00	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)
12.00- 12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30-13.15	Clinical Experience (Out patient)	Clinical Experience (Out patient)	**Independent Learning**	Clinical Experience (Out patient)	**Independent Learning**
13.15- 16.00-	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**
17.00-17.50					

General Surgery
Phase VI Week IV

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Multi-disciplinary Case Discussion Conference Hall Kozyatağı	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
09.00-12.00	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Student-Centred, Symptom-Based Learning Session Conferens Hall All Groups (I-VI)	Clinical Experience (Out patient)	Clinical Experience (Out patient)
12.00- 12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30-13.15	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)			
13.15- 16.00-	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)	**Program Evaluation Session** Review of the learning aims, Evaluation of the Course Program *Head of General Surgery*
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**
17.00- 17.00					

1 Seminar (all groups: All phase VI groups will attend Hospital 2nd Floor, Conference Hall
2. During Clinical experience all interns may attend to the operations (scrubbed, as a first assistant). And they must obey the all of the rules of operating theatre.
3. All interns may attend the patient visits of surgeons.

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

EMERGENCY MEDICINE

Head of the Department of Emergency Medicine: Sezgin Sarıkaya, MD. Prof.

Faculty:

Mustafa Feridun Çelikmen, MD. Assist. Prof.

Mustafa Yazıcıoğlu, MD. Assist. Prof.

Emin Gökhan Gencer, MD. Assist. Prof.

Cem Şimşek, MD. Assist. Prof.

Hande Candemir Ercan, MD. Assist. Prof.

Erman Uygun, MD. Lecturer

Özkan Erarslan, MD. Lecturer

Alev Eceviz, MD. Lecturer

Dijan Tav Şimşek, MD. Lecturer

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 theraphy and/or follow-up, can refer the patient to upper healthcare facilities providing appropriate transporting conditions.And also who can manage with all types of critical patients including arrest patients and who have chest pain, shortness of breath , any kind of trauma and hypotension .

LEARNING OBJECTIVES

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

KNOWLEDGE

- consider the expectations of those who provide or receive care in the ED and use communication methods that minimize the potential for stress, conflict, and miscommunication
- synthesize chief complaint, history, physical examination, and available medical information to develop a differential diagnosis
- based on all of the available data, narrow and prioritize the list of weighted differential diagnoses to determine appropriate management
- demonstrate clear and concise documentation that describes medical decision- making, ED course, and supports the development of the clinical impression and management plan
- use diagnostic testing based on the pre-test probability of disease and the likelihood of test results altering management

SKILLS

- perform basic and advanced airway procedures, basic life support
- perform advanced cardiac and trauma life support for adults and children
- approach to a patient with chest pain/ abdominal pain /shortness of breath
- manage with a polytrauma patient
- differentiate the reasons of chest pain and treat acute coronary syndromes
- explain the types of shock, manage with a shock patient, define the differentials, select the proper treatment
- define the rythm on ECG, approach to a patint with tachycardia/bradycardia
- explain the toxidromes and approach to an intoxicated patient
- explain the basic principles of disaster management

- arrange necessary consultation with physicians and other professionals when needed

ATTITUDE

- consider the expectations of those who provide or receive care in the ED and use communication methods that minimize the potential for stress, conflict, and miscommunication
- establish rapport with and demonstrate empathy toward patients and their families
- recognize and resolve interpersonal conflict in the emergency department including conflicts with patients and family
- rommunicate information to patients and families using verbal, nonverbal, written, and technological skills, and confirm understanding
- communicate risks, benefits, and alternatives to therapeutic interventions to patients and/or appropriate surrogates, and obtain consent when indicated

DESCRIPTION OF THE PROGRAM

During the two-month General Surgery/Emergency Medicine clerkship, students will spend one month working in the emergency department. In emergency medicine intornship program intorn is expected to participate in periodic overnight shifts in the emergency department. The primary goal of the emergency medicine clerkship is to equip students with the skills necessary to assess and manage patients with polytrauma and acute medical or surgical emergencies. Interns are required to attend all clinical case presentations, departmental seminars, and educational sessions organized within the emergency medicine department.

At the end of the rotation, students will be evaluated based on their overall clinical performance in the emergency department, the quality and completeness of case reports, professional attitude toward patients and colleagues, level of engagement in emergency medicine, participation in seminars and night shifts, regular attendance at scientific meetings, lectures, and case discussions, as well as their clinical reasoning, decision-making, and consulting skills. Final evaluation will be based on a 100-point scale and recorded as “Pass” or “Fail,” taking into account completion of all required assignments and projects.

NCC-2020 BASIC MEDICAL PROCEDURES (Emergency Medicine)	Performance Level
General and symptom-based history taking	3
Mental status evaluation	4
Abdominal physical examination	4
Consciousness assessment and mood state examination	4
General condition and vital signs assessment	4
Cardiovascular system examination	3
Musculoskeletal system examination	2
Respiratory system examination	2
Taking and assessing ECG	4
‘’Airway’’ manipulation	4
Bandaging and tourniquet application	2
Defibrillation	4
Restriction and stopping external bleeding	3
Intubation	4
Glascow-coma-scale assessment	4
Appropriate patient transportation	2
Giving patient recovery position	4
Removal of foreign body with appropriate maneuver	3
Providing advanced life support	4
Cervical collar application	2
Providing basic life support	4
Transporting detached limb after trauma	3

Emergency Department
Phase VI Week I

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	**Introductory Session** Introduction to *Emergency Medicine* S. Sarıkaya	Ward Round	Ward Round	Ward Round	Ward Round
09.00- 12.00	**Resuscitation** Approach to Multitrauma Patient S. Sarıkaya Basic and Difficult Airway Management M. Yazıcıoğlu	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00- 12.30	**Lunch**	Lunch	Lunch	Lunch	Lunch
12.30- 16.00	Basic and Advanced Life Support for Adults/children (ICP lab/Emergency Room) All Lecturer	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
17.00- 00.00	Night Shift	Night Shift	Night Shift	Night Shift	Night Shift

∗The days and times of the classes may be subject to change depending on the instructor's schedule

Emergency Department
Phase VI Week II

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	Ward Round	Ward Round	Ward Round	Ward Round	Ward Round
09.00- 12.00	**Cardiac and Respiratory Emergencies** Aproach To Chest Pain And ACS Emin Gökhan Gencer Aproach to Dyspnea Özkan Erarslan	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00- 12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30- 16.00	ECG and Basic Pathologies Cem Şimşek Rythm Disturbances and Treatment Cem Şimşek	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
17.00- 00.00	**Night Shift**	**Night Shift**	**Night Shift**	**Night Shift**	**Night Shift**

∗The days and times of the classes may be subject to change depending on the instructor's schedule

Emergency Department
Phase VI Week III

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	Ward Round	Ward Round	Ward Round	Ward Round	Ward Round
9.00-12.00	**Neurological Emergencies** Ischemic/hemorrhagic Stroke/ TIA Dijan Tav Şimşek Approach to Seizure Hande Candemir Ercan	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00- 12.30	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
12.30-16.00	Approach to Abdominal Pain Alev Eceviz	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
17.00-00.00	**Night Shift**	**Night Shift**	**Night Shift**	**Night Shift**	**Night Shift**

∗The days and times of the classes may be subject to change depending on the instructor's schedule

Emergency Department
Phase VI Week IV

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	Ward Round	Ward Round	Ward Round	Ward Round	Ward Round
09.00-12.00	Disaster Medicine/KBRN M. Ferudun Çelikmen Approach to Intoxicated Patient Erman Uygun	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00- 13.15	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
13.15- 16.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	**Program Evaluation Session** Review of the learning aims, Evaluation of the Course Program Head of Emergency Departmant
17.00-00.00	**Night Shift**	**Night Shift**	**Night Shift**	**Night Shift**	**Night Shift**

∗The days and times of the classes may be subject to change depending on the instructor's schedule

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

PSYCHIATRY

YEDİTEPE UNIVERSITY HOSPITAL

Head of the Department of Psychiatry : Okan Taycan, MD. Prof.

Responsible of Course of Training : Okan Taycan MD. Prof.

Faculty:

Naz Berfu Akbaş, MD. Assoc. Prof.

Hakan Atalay, MD. Assoc. Prof.

MOODİST PSYCHIATRY TRAINING AND RESEARCH HOSPITAL

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 patients

DESCRIPTION OF THE PROGRAM

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 pscyhiatry ward and be able to respond appropriately to the pscyhiatric patients' problems.The rotation is mainly held in Moodist Psychiatric and Training Hospital.

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 attendence at scientific meetings, lectures and case conferences, the level of scientific and practical knowledge.

NCC 2020 – Essential Medical Procedures (Psychiatry)	Performance Level
General and symptom-based patient interview	4
Assessing mental status	3
Psychiatric history taking	3
Consciousness assessment and mood state examination	3
General condition and vital signs assessment	4
Preparing forensic report	3
Obtaining informed consent	4
Preparing epicrisis	3
Preparing patient file	3
Referring patient appropriately	3
Preparing medical reports and notice	3
Writing prescription	3
Preparing treatment refusal form	3
Filling laboratory recuse form	4
Interpretation of screening and diagnostic examination results	3
Stabilization of psychiatric emergency patient	3
Suicide intervention	2
Minimental state examination	3
Defining concent capacity	3

Psychiatry
Phase VI Week I

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	**Introductory Session** (Introduction to Psychiatry)	Discussions (small groups)	Discussions (small groups)	Discussions (small groups)	Discussions (small groups)
09.00-12.00	Ward Round	Clinical Experience (History taking)	Clinical Experience (History taking)	Clinical Experience (Out patient)	Grand Round
12.00- 13.00	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
13.00- 15.00-	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
15.00- 17.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**

Psychiatry
Phase VI Week II-III

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	Discussions (small groups)	Discussions (small groups)	Discussions (small groups)	Discussions (small groups)	Discussions (small groups)
09.00-12.00	Ward Round	Clinical Experience (History taking)	Clinical Experience (History taking)	Clinical Experience (Out patient)	Grand Round
12.00- 13.00	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
13.00- 15.00-	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
15.00- 17.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**

Psychiatry
Phase VI Week IV

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	Discussions (small groups)	Discussions (small groups)	Multi-disciplinary Case Discussion Conference Hall Kozyatağı	Discussions (small groups)	Discussions (small groups)
09.00-12.00	Ward Round	Clinical Experience (History taking)	**Student-Centred, Symptom-Based Learning Session All Groups Conference Hall**	Clinical Experience (Out patient)	Clinical Experience (Out patient)
12.00- 13.00	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
13.00- 15.00-	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience) (Inpatient)	Clinical Experience (Inpatient)	**Program Evaluation Session** Review of the learning aims, Evaluation of the Course Program ***Head of* Psychiatry**
15.00- 16.30	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**

A Typical Weekly Program for Phase 6 Student During Their Training Period in Moodist RSH

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

FAMILY MEDICINE

Head of the Department of Family Medicine

Tümay Sadıkoğlu, MD, Asst. Prof.

Faculty

Tümay Sadıkoğlu, MD, Asst. Prof.

Duygu Altıparmak, MD, Specialist of Family Medicine

Barış Erman, J.D., Asst. Prof. of Law

FAMILY HEALTH CENTERS

Ataşehir Region

Kadıköy Region

STUDENT HEALTH CENTER

Yeditepe University Campus Student Health Center: Duygu Altıparmak, MD

AIM AND LEARNING OBJECTIVES OF PHASE VI FAMILY MEDICINE INTERNSHIP PROGRAM

AIM

To enhance the competency of medical students in primary care and to provide an exceptional learning experience.

LEARNING OBJECTIVES

At the end of the family medicine internship, the student will be able to;

KNOWLEDGE

- discuss the principles of family medicine

- explain the structure of primary health care delivery systems and facilities

- discuss the critical role and legal responsibilities of family physicians in primary care

- collect data, develop potential diagnoses, and suggest strategies for the first assessment and treatment of individuals with typical symptoms

- develop evidence-based disease prevention and screening plans for patients of any age or gender

- identify risks for specific illnesses that affect screening and treatment strategies

- apply the current guidelines for adult and child immunizations

- explain the legal responsibilities of a family physcian

SKILLS

- manage follow-up visits with patients having chronic diseases

- demonstrate competency in patient-centered communication, history taking, physical examination, and critical thinking skills

- gain expertise in the delivery and management of primary healthcare services

- demonstrate interpersonal and communication skills that result in effective information exchange between patients of all ages and their families.

ATTITUDE

- describe the value of teamwork in the care of patients

- participate as an effective member of a clinical care team

- discuss the the value of primary care and compare medical outcomes between countries with and without a primary care base

NCC-2020 BASIC MEDICAL PROCEDURES (FAMILY MEDICINE)	PERFORMANCE LEVEL
Taking general and symptom-based history	4
Assessment of mental status	4
Assessment of general condition and vital signs	4
Child and newborn examination	4
Pregnancy examination	3
Gynecological examination	3
Cardiovascular system examination	4
Abdominal examination	4
Musculoskeletal system examination	3
Ear - nose - throat and head - neck examination	3
Breast examination	3
Neurological and psychological examination	3
Respiratory system examination	4
Ability to prepare health reports in accordance with current legislation	3
Ability to prepare prescriptions	4
Reporting the diseases and conditions legally required to be reported	4
ECG recording and evaluation	3
Measuring blood sugar with a glucometer	4
Ordering lab tests	4
Ability to interprit the screening and diagnostic test results	3
Taking vaginal discharge sample	3
Ability to apply the principles of rational drug use	4
Ability to request rational laboratory and imaging tests	4
Ability to apply bandages and tourniquets	4
Ability to manage nose bleeding	2
Ability to monitor growth and development in children	3
IV cannulation	3
Postpartum maternal care	3
Hand washing	4
Follow-up during pregnancy and postpartum	3
IM, IV, SC, ID injection ability	4
Ability to insert a urinary catheter	3
Suicide intervention	2
Ability to measure blood pressure	4
Mini-mental status examination	3
Ability to apply nasogastric tube	3
Ability to apply oxygen and nebul-inhaler therapy	4
Ability to administer oral, rectal, vaginal and topical medications	3
Ability to apply and evaluate pulse oximetry	4
Ability to provide protection and transportation suitable for the cold chain	4
Ability to care for wounds and burns	3

Ability to place and remove superficial sutures	**4**
Ability to provide family planning counseling	**4**
Providing immunization counseling	**4**
Ability to teach correct breastfeeding methods	**4**
Geriatric assessment	**3**
Ability to teach breast self-examination	**4**
Ability to apply contraception methods	**3**
Periodic health examination	**4**
Providing health education to the society	**3**
Premarital screening program	**4**
Newborn metabolic and endocrine disease screening program	**4**

ECTS ALLOCATED BASED ON STUDENT WORKLOAD BY THE COURSE DESCRIPTION			
Activities	Quantity	Duration (Hour)	Total Workload (Hour)
Course Duration (4 weeks)	4	12	48
Course Duration (Including the exam week: 4x Total course hours/week)	4	12	48
Hours for off-the-classroom study (Pre-study, practice, review/week)	4	7	28
Homework	-	-	-
Term Paper	-	-	-
Total Work Load			124
Total Work Load / 25 (h)			4.9
ECTS Credit of the Course			5

DESCRIPTION OF THE PROGRAM

The Family Medicine Internship is a 4-week program that consists of seminars and rotations at the Student Health Center during the first and fourth weeks, as well as rotations at the Family Health Center during the second and third weeks. Upon program completion, student evaluation will be determined by assessing their overall clinical performance, consistent attendance at lectures and small group discussions, as well as their degree of scientific and practical knowledge. The overall score of the students will be graded as either "Pass" or "Fail."

Family Medicine (FM) Phase VI Internship Program (1 month)

Groups	Orientation & Seminars + Student Health Center Rotation (1st week)	Family Health Center Rotation (2nd and 3rd week)	Seminars& Program Evaluation Sessions + Student Health Center Rotation (4th week)
Group 5 1-31 August 2025	(1-8 August 2025) SHC	(11-22 August 2025) FHC	(25-30 August 2025) SHC
Group 6 1-31 October 2025	(1-10 October 2025) SHC	(13-24 October 2025) FHC	(27-31 October 2025) SHC
Group 1 1-31 December 2025	(1-5 December 2025) SHC	(8-19 December 2025) FHC	(22-31 December 2025) SHC
Group 2 1-28 February 2026	(2-6 February 2026) SHC	(9-20 February 2026) FHC	(23-28 February 2026) SHC
Group 3 1-30 April 2026	(1-10 April 2026) SHC	(13-24 April 2026) FHC	(27-30 April 2026) SHC
Group 4 1-30 June 2026	(1-12 June 2026) SHC	(15-26 June 2026) FHC	(29-30 June 2026) SHC

FHC: Family Health Center, **SHC**: Student Health Center

Family Medicine (FM)- Week I Seminars

WEEK I	Day 1	Day 2	Day 3	Day 4	Day 5
09.00- 09.50					
10.00- 11.50	Orientation and program improvement session Tumay Sadıkoglu/ Duygu Altıparmak	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**
11.00- 11.50	**Lecture** The principles of family medicine Duygu Altıparmak		**Lecture** Preventive care in family medicine Duygu Altıparmak		
12.00- 12.50	**Lunch Break**	**Lunch Break**	**Lunch Break**	**Lunch Break**	**Lunch Break**
13.00- 13.50	**Lecture** Primary healthcare organization in Turkey Duygu Altıparmak	**Independent Learning**	**Lecture** Chronic disease management by family physician Tumay Sadıkoglu	**Independent Learning**	**Independent Learning**
14.00- 14.50	**Independent Learning**		**Case Discussion** Patient-centered communication skills Tumay Sadıkoglu		
15.00- 15.50					
16.00- 16.50					

Family Medicine (FM)- Week IV Seminars

WEEK IV	Day 1	Day 2	Day 3	Day 4	Day 5
09.00- 09.50					
10.00- 11.50	**Lecture** Legal responsibilities in primary care Barış Erman	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Small group discussion** Tumay Sadıkoglu/ Duygu Altıparmak
11.00- 11.50	**Lecture** Legal responsibilities in primary care Barış Erman				**Program evaluation session** Tumay Sadıkoglu/ Duygu Altıparmak
12.00- 12.50	**Lunch Break**	**Lunch Break**	**Lunch Break**	**Lunch Break**	**Lunch Break**
13.00- 13.50	**Lecture** Violence against healthcare workers Barış Erman	**Independent Learning**	**Independent Learning**	**Independent Learning**	
14.00- 14.50	**Independent Learning**				
15.00- 15.50					
16.00- 16.50					

YEDİTEPE UNIVERSITY

FACULTY OF MEDICINE

PHASE VI

PUBLIC HEALTH

Sebahat Dilek TORUN MD, PhD, Prof. of Public Health

Head of the Department of Public Health

Faculty

Sebahat Dilek TORUN MD, PhD, Prof. of Public Health

M.Ferudun Çelikmen, MD, Assoc. Prof of Emergency Medicine

COMMUNITY HEALTH CENTERS

Ataşehir CHC - Kadıköy CHC

TUBERCULOSIS CENTERS

Kartal TC - Üsküdar TC

AIM AND OBJECTIVES OF PHASE VI PUBLIC HEALTH INTERNSHIP PROGRAM

AIM

The aim of the Public Health Internship is to equip medical students with the knowledge, skills, and professional attitudes necessary to understand and apply public health approaches in the prevention, diagnosis, treatment, and management of community health problems. The program also aims to help students comprehend the nature of preventive, curative, and promotive health care services within the primary health care system of the country and to observe how health and disease are managed within individuals' natural living environments. Through active engagement in the organization, implementation, and evaluation of community-based health services, students are expected to gain practical experience and contribute to the promotion of individual and population health.

LEARNING OBJECTIVES

By the end of the internship, the student will be able to:

KNOWLEDGE

1. Explain the fundamental principles, aims, and scope of public health.

2. Explain the organizational structure and functions of the Turkish health system, including the District Health Directorate (DHD), Community Health Centers (CHCs), and Tuberculosis Dispensaries (TBD).

3. Describe the roles of different professionals within public health institutions.

4. Identify key social determinants of health and their impact on individual and population health.

5. Summarize the epidemiology, control measures, and health system responses to major public health problems, including tuberculosis and non-communicable diseases.

6. Understand the structure and content of national programs such as immunization, maternal and child health, chronic disease control, and school health.

7. Explain the principles of disaster preparedness and the role of health systems in emergencies.

8. Review and interpret epidemiological data and evidence-based strategies related to public health topics.

SKILLS

1. Conduct field observations and interpret data at DHDs, CHCs, and TBDs.

2. Participate in preventive and promotive health services, including contact tracing, case notifications, school screenings, and DOT (Directly Observed Therapy).

3. Collaborate effectively within a multidisciplinary health team.

4. Analyze and synthesize scientific literature to prepare and present a seminar.on main public health issues.

5. Communicate complex health topics clearly and effectively in both written and oral formats.

6. Use evidence-based approaches to assess, plan, and discuss public health interventions.

7. Demonstrate appropriate use of visual aids and presentation tools in academic settings.

8. Engage in academic discussion and respond to peer and mentor feedback during seminars.

ATTITUDES

1. Show responsibility and professionalism during all components of the internship.

2. Exhibit a proactive attitude towards learning, including asking questions, seeking feedback, and contributing to team tasks.

3. Respect the roles of other health professionals and promote collaborative practice.

4. Demonstrate empathy and sensitivity when engaging with vulnerable groups or discussing health inequities.

5. Uphold ethical standards in field observations, data handling, and reporting.

6. Value the physician's role in public health advocacy and the promotion of preventive medicine.

7. Develop a holistic view of community health that integrates clinical, social, and environmental perspectives.

NCC 2020 – Essential Medical Procedures (Public Health)	NCC 2020 Performance Level
To be able to prepare forensic reports	3
To be able to issue forensic case notifications	4
To be able to take water sample	3
To be able to determine and evaluate chlorine level in water	3
To be able to make the organization of emergency aid	3
To be able to provide family planning counseling	4
To be able to provide immunization counseling	4
To be able to conduct immunization services	4
Ability to provide healthcare services during extraordinary situations	2
To be able to take precautions related to the protection of the health of health workers	4
To be able to take preventive measures against healthcare-associated infections	3
To be able to provide health education to the community	3
To be able to fight against infectious diseases in society	3
To be able to identify health problems in the community by using epidemiological methods and to be able to put forward solutions	3
To be able to compile scientific data and summarize them in tables and graphs	3

To be able to analyze scientific data with appropriate methods and interpret the results	2
To be able to access current literature and read it critically	3
To be able to interpret the health level of the service area by using health level indicators	3
Immunization in childhood and adults	4
Infant Health Monitoring	4
Healthy nutrition	4
Pre-marital screening program	4

PHASE VI PUBLIC HEALTH ROTATIONS 2025 – 2026

Groups	Public Health Department Dates	Public Health Center Dates	Tuberculosis Center Dates	Public Health Department (Seminar Presentations) Dates
5	**July,** **01- 04, 2025**	**07.07.2025** **18.07.2025**	**July,** **21-25, 2025**	**July,** **28 - 31, 2025**
6	September, 01- 05, 2025	08.09.2025 19.09.2025	September, 22 - 26, 2025	September, 29-30, 2025
1	November, 03 - 07, 2025	10.11.2025 21.11.2025	November, **24 - 26**, 2025	November, **27-28** , 2025
2	January, **02-09**, 2026	12.01.2026 23.01.2026	January, **26 - 28**, 2026	January, **29-30,** 2026
3	March, 02 - 06, 2026	09.03.2026 20.03.2026	March, 23 - 27, 2026	March, **30-31**, 2026
4	May, **05.05, 2026**	**05.05.2026** **15.05.2026**	May, **18-21**, 2026	May, **22, 2026**

Public Health
Phase VI Week I

	Day 1	Day 2	Day 3	Day 4	Day 5
09.00- 09.50	**Introductory Session** (Introduction Public Health Internship Program) Sebahat Dilek TORUN	**Interactive Case Discussions** Social Determinants of Health Case Discussion Sebahat Dilek TORUN	**Independent Learning** Study time for seminar preparation	**Independent Learning** Study time for seminar preparation	**Lecture** Disaster Preparedness and Disaster Medicine Basics* Ferudun Çelikmen
10.00- 10.50	**Interactive Lecture** What is Public Health? Who works for Public Health Sebahat Dilek TORUN	**Interactive Case Discussions** Social Determinants of Health Case Discussion Sebahat Dilek TORUN			
11.00- 11.50	**Lecture Social Determinants of Health** Sebahat Dilek TORUN	**Independent Learning** Literature search for seminar presentation			
12.00- 12.50	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
13.00- 13.50	**Independent Learning** Literature search for seminar presentation	**Independent Learning** Literature search for seminar presentation	**Independent Learning** Study time for seminar preparation	**Independent Learning** Study time for seminar preparation	**Lecture** Disaster Preparedness and Disaster Medicine Basics* Ferudun Çelikmen
14.00- 14.50					
15.00- 15.50					
16.00- 16.50					
17.00-17:50					

Public Health
Phase VI Week II

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15.50</td></tr>
<tr><td>16.00-
16.50</td><td colspan="2" rowspan="2">Independent Learning</td><td colspan="2" rowspan="2">Independent Learning</td><td colspan="2" rowspan="2">Independent Learning</td><td colspan="2" rowspan="2">Independent Learning</td></tr>
<tr><td>17.00-
17:50</td></tr>
</table>

Public Health
Phase VI Week III

<table>
<tr><th></th><th colspan="2">Day 1</th><th colspan="2">Day 2</th><th colspan="2">Day 3</th><th colspan="2">Day 4</th><th>Day 5</th></tr>
<tr><td>09.00- 09.50</td><td colspan="2">Field-Based Public Health Rotations</td><td colspan="2">Field-Based Public Health Rotations</td><td colspan="2">Field-Based Public Health Rotations</td><td colspan="2">Field-Based Public Health Rotations</td><td rowspan="3">Reflection Session
Moderator:
Sebahat Dilek TORUN</td></tr>
<tr><td>10.00- 10.50</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td></tr>
<tr><td>11.00- 11.50</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td></tr>
<tr><td>12.00- 12.50</td><td colspan="2">Lunch</td><td colspan="2">Lunch</td><td colspan="2">Lunch</td><td colspan="2">Lunch</td><td>Lunch</td></tr>
<tr><td>13.00- 13.50</td><td colspan="2">Field-Based Public Health Rotations</td><td colspan="2">Field-Based Public Health Rotations</td><td colspan="2">Field-Based Public Health Rotations</td><td colspan="2">Field-Based Public Health Rotations</td><td rowspan="4">Independent Learning</td></tr>
<tr><td>14.00- 14.50</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td></tr>
<tr><td>15.00- 15.50</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td><td>Groups A Public Health Center</td><td>Groups B Public Health Center</td></tr>
<tr><td>16.00- 16.50</td><td colspan="2" rowspan="2">Independent Learning</td><td colspan="2" rowspan="2">Independent Learning</td><td colspan="2" rowspan="2">Independent Learning</td><td colspan="2" rowspan="2">Independent Learning</td></tr>
<tr><td>17.00-17:50</td></tr>
</table>

Public Health
Phase VI Week IV

	Day 1	Day 2	Day 3	Day 4	Day 5
09.00- 11.50	**Clinical Experience (Ambulatory)** *Tuberculosis Centers Whole Group*	**Clinical Experience (Ambulatory)** *Tuberculosis Centers Whole Group*	**Clinical Experience (Ambulatory)** *Tuberculosis Centers Whole Group*	**Clinical Experience (Ambulatory)** *Tuberculosis Centers Whole Group*	**Independent Learning**
12.00- 12.50	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
13.00- 15.50	**Clinical Experience (Ambulatory)** *Tuberculosis Centers Whole Group*	**Clinical Experience (Ambulatory)** *Tuberculosis Centers Whole Group*	**Clinical Experience (Ambulatory)** *Tuberculosis Centers Whole Group*	**Clinical Experience (Ambulatory)** *Tuberculosis Centers Whole Group*	**Independent Learning**
16.00- 16.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Independent Learning**
17.00-17:50					

Public Health
Phase VI Week V

	Day 1	Day 2	Day 3	Day 4	Day 5
09.00- 11.50	**Independent Learning** Seminar presentation working with consultant Sebahat Dilek TORUN	**Independent Learning** Seminar presentation working with consultant Sebahat Dilek TORUN	***Student-Centred, Symptom-Based Learning Session*** ***All Groups*** ***Conference Hall***	**Presentations (students)** Group Seminars Sebahat Dilek TORUN	**Presentations (students)** Group Seminars Sebahat Dilek TORUN
12.00- 12.50	**Lunch**	**Lunch**	**Lunch**	**Lunch**	**Lunch**
13.00- 17.50	**Independent Learning**	**Independent Learning**	**Independent Learning**	**Presentations (students)** Group Seminars Sebahat Dilek TORUN	**Program Evaluation Session** Review of the rotations, Evaluation of the Public Health Program Sebahat Dilek TORUN

DISASTER PREPAREDNESS AND DISASTER MEDICINE BASICS

I-PRINCIPLES

A- Surge Capacity
B- Definitions
C- Potential Injury-Creating Event Nomenclature
D- Critical Substrates for Hospital Operations
  1. Physical plant
  2. Personnel
  3. Supplies and equipment
  4. Communication
  5. Transportation
  6. Supervisory managerial support
E- Hazard Vulnerability Analysis

II-SPECIFIC ISSUES IN DISASTER MANAGEMENT

A- TRIAGE
1. Routine Multiple-Casualty Triage
2. Catastrophic Casualty Management
3. Vulnerable Triage Populations
4. Special Triage Categories
B- CARE OF POPULATIONS WITH FUNCTIONAL OR ACCESS NEEDS
C- OUT-OF-HOSPITAL RESPONSE
1. Emergency Medical Services System Protocols
2. Incident Command System
a. Incident Command
b. Operations Section
c. Planning Section
d. Logistics Section
e. Finance Section
3. Organization of the Out-of-Hospital Disaster Scene
D- PLANNING AND HOSPITAL RESPONSE
1. Comprehensive Emergency Management
2. Hospital Disaster Response Plan
3. Basic Components of a Hospital Comprehensive Disaster Response Planning Process
a. Interdepartmental Planning Group
b. Resource Management
c. Command Structure
d. Media
e. Communication
f. Personnel
g. Patient Management
h. Training Exercises
E- REVIEW OF HOSPITAL AND COMMUNITY DISASTER RESPONSE EXPERIENCE
1. Focal Disasters
2. Catastrophic Disasters
3. Toxic Disasters (Hazardous Material)

F- CHEMICAL, BIOLOGIC, RADIOLOGIC, NUCLEAR AND EXPLOSIVE TERRORISM
G- DISASTER STRESS MANAGEMENT
I- DISASTER MANAGE. AND RESPONSE ORGS. WITHIN GOVERNMENT
J- FUTURE DIRECTIONS

III-FUNDEMENTALS OF DISASTER MEDICINE

A- THREATS

1. Earthquake

Medical issues;

a. Crush syndrome
b. Multi trauma management
c. Compartment syndrome / Fasciotomy
d. Hemodialysis principles

2. Landslides
3. Floods
4. CBRNE
5. Terror attacks
6. Tornados
7. Volcanic eruptions

B- BEING A PART OF A TEAM

C- BASICS OF SAR

D- ETHICS, END OF LIFE

E- DVI DEFINITIONS

Yeditepe University Faculty of Medicine
Department of Publıc Health
Group Seminar Presentations Assessment Sheet

Seminar Title:: _____ **Date : ___/___/ ___**

Presenting Student Name-Surname: _____

EVALUATION CRITERIA	**Scoring Scale (points)**
Visual Design of the Presentation	**10**
Color Use: Are background and text colors appropriate for visibility? Is the background clean and non-distracting?	2.5
Text Use: Is the text concise and easy to read? Is font size large enough for the audience?	2.5
Visuals : Are visuals (charts, tables, images) relevant, clear, properly sized, not distorted, and labeled with sources?	2.5
Text–Visual Balance & Number of Slides: Is there a balanced use of text and visuals across slides, and is the number of slides appropriate for the presentation time?	2.5
Content of the Presentation	**45**
Title Slide: Is the title clear, concise, and attention-grabbing? Does it reflect the topic and include the presenter's name(s)?	5
Introduction: Does the presentation begin with a clear and engaging opening that presents the topic's purpose, goals, and relevance, helping the audience understand why it matters?	8
Presentation Flow: Is the overall structure logical and easy to follow, with smooth transitions between sections and a clear conclusion that ties everything together?	8
Key Messages : Are the main points effectively communicated and easy for the audience to recall afterward?	8
Originality: Does the presentation show creativity and original thinking beyond standard content?	8
References : Are statements and data supported by relevant, recent, and clearly cited sources?	8
Presentation Delivery & Preparedness	**30**
Knowledge & Preparation: Does the presenter demonstrate a strong understanding of the topic, respond confidently to questions, validate students' comments, present without relying on notes, and show clear effort in preparation?	15
Delivery & Expression : Does the presenter speak clearly and expressively, engage the audience, and deliver the content in an effective and dynamic manner?	10
Time management: Is the allotted time used efficiently, without going over or finishing too early?	5
Teamwork	**15**
Collaborative Preparation: Is it evident that the group worked together during preparation, with clear coordination and shared responsibility?	5
Role Distribution & Transitions: Did all group members contribute meaningfully, and were speaker transitions smooth and well-organized?	5
Message & Style Consistency: Did the group maintain a unified tone, message, and presentation style throughout?	5
Total Score (out of 100)	

Faculty Member
Name and signature

Group Seminar Presentation

TWENTY-MINUTE PRESENTATION – TEAMWORK

As part of the Public Health Internship Program, students are required to prepare and deliver a 20-minute group seminar on a selected topic related to public health. Each group will consist of 3–4 students and will work under the guidance of an assigned mentor. Seminar topics are determined at the beginning of the internship, and mentors are introduced during the orientation meeting.

The primary aim of the group seminar is to strengthen students' abilities in teamwork, literature review, analytical thinking, public speaking, and health education. Presentations must be grounded in up-to-date scientific evidence and demonstrate a comprehensive understanding of the topic's significance for individual, community, and population health.

Structure of The Presentatıon

Each seminar should be organized around the following structure:

- **Introduction**: Define the topic and explain its relevance in the field of public health.
- **Background and Epidemiology**: Provide context for the issue, supported by key statistics and trends.
- **Current Strategies and Practices**: Describe existing public health interventions, policies, or programs addressing the topic.
- **Challenges and Gaps**: Identify areas in need of improvement, gaps in current practice, or research needs.
- **Conclusion and Recommendations**: Summarize main insights and propose evidence-based actions or solutions.

Each group should ensure **balanced/equal participation** among members during both preparation and delivery. Use of visual materials—such as slides, infographics, or short videos—is highly encouraged to improve engagement and clarity.

Assessment Criteria

Seminar presentations will be evaluated based on the following criteria:

1. Accuracy, depth, and relevance of content
2. Use of current scientific literature and evidence
3. Logical structure and clarity of presentation
4. Quality of teamwork and balanced participation
5. Presentation skills (tone, body language, timing)
6. Creativity and effective use of visual aids
7. Ability to respond to questions and engage with the audience

Expectations From Students

- Attend all seminar sessions and actively contribute to group work and preparation
- Submit the finalized presentation slides by the announced deadline
- Be prepared to participate in the discussion and answer questions following the presentation

Additional Guidelines:

- Each student is expected to speak for a maximum of 5-7 minutes, supported by relevant visual aids
- Presentations must be thematically cohesive and delivered collaboratively as a team
- All group members should be well-versed in the entire presentation content and contribute to the Q&A session
- The seminar should be submitted as a well-organized, computer-typed document compiled by the group

To successfully complete the Public Health internship, students must present their assigned seminar topic in accordance with the current literature, actively participate in seminars, departmental lectures, and field practices at the Community Health Center (TSM) and the Tuberculosis Dispensary (VSD). All tasks must be thoroughly completed.

The evaluation criteria outlined above reflect the key components of assessment.

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 choosen 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 UNIVERSITY

FACULTY OF MEDICINE
PHASE VI

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

YEDİTEPE UNIVERSITY FACULTY OF MEDICINE
INTERN PHYSICIAN EVALUATION FORM

This form includes evaluation components for intern physicians and is the basis of the passing grade for internship.

Intern's name and surname:	
Intern number:	
Internship program name:	
Dates of start and end for ınternship program:	

1. Evaluation of Cognitive Competencies

**** The level of competency*** should be determined based on ***participation in educational activities*** (Title 1 on the ***Intern Logbook***) and the observations of the Faculty Member / Internship Training Supervisor / Head of the Department for the intern.

	*Competency Level
1.1. Clinical reasoning and decision making The stages of decision making process in an evidence based manner; to determine preliminary / differential diagnosis/diagnoses, to order appropriate diagnostic tests, to achieve an appropriate definitive diagnosis and treatment (interventional or not).	Does not meet expectations ☐ Meets expectations ☐ Above expectations ☐ Well above expectations ☐
1.2. Professional knowledge During the educational activities (case discussions, educational visits, faculty member seminars, intern physician seminars, etc.) to answer the questions, to ask the questions, to start a discussion, to contribute to the discussion, to display an understanding of the subject.	Does not meet expectations ☐ Meets expectations ☐ Above expectations ☐ Well above expectations ☐
1.3. Literature review and seminar presentation Preparation based on evidence of higher scientific strength, presenting the subject in a solid logical reasoning with in a reference to essential check points, mastering the subject, answering the questions asked.	Does not meet expectations ☐ Meets expectations ☐ Above expectations ☐ Well above expectations ☐
Explanations, opinions and recommendations based on the observations of the Faculty Member / Internship Training Supervisor / Head of the Department	

2. Evaluation of Competencies for Basic Medical Practice

**** The level of competency*** should be determined based on ***basic medical practice*** (Title 2 on the ***Intern Logbook***) and the observations of the Faculty Member / Internship Training Supervisor / Head of Department for the intern.

	* Competency Level
Basic medicine practices based on ***Intern Logbook***	Does not meet expectations ☐ Meets expectations ☐ Above expectations ☐ Well above expectations ☐
Explanations, opinions and recommendations based on the observations of the Faculty Member / Internship Training Supervisor / Head of the Department	

3. Evaluation of Professional Competencies for Medicine

	* Competency Level

3.1. Communicating with patients and relatives	Does not meet expectations ☐ Meets expectations ☐ Above expectations ☐ Well above expectations ☐
3.2. Compliance in hospital rules (i.e. standard operating procedures, SOPs)	Does not meet expectations ☐ Meets expectations ☐ Above expectations ☐ Well above expectations ☐
3.3. Working in a team and collaborating and communicating with team members	Does not meet expectations ☐ Meets expectations ☐ Above expectations ☐ Well above expectations ☐
3.4. Performing given tasks	Does not meet expectations ☐ Meets expectations ☐ Above expectations ☐ Well above expectations ☐
3.5. Diligence on attendance and participation in scientific activities	Does not meet expectations ☐ Meets expectations ☐ Above expectations ☐ Well above expectations ☐
Explanations, opinions and recommendations based on the observations of the Faculty Member / Internship Training Supervisor / Head of the Department	

Evaluated Competencies	Total Score (Over 100) (For each section below, the score below 70 obtained by the Intern is a reason for inadequacy.)	Impact on Internship End Score
Cognitive Competencies	Score:….	20%
Competencies for Basic Medical Practice	Score:….	60%
Professional Competencies for Medicine	Score:….	20%

*If the competency level for the intern is determined as "does not meet the expectations" in any part of the evaluation form, the intern is considered to be ***unqualified***. In this condition, ***FF*** is given as a letter grade.

If the intern physician is deemed inadequate due to ***absenteeism*, ***FA*** is given as a letter grade.

Internship Evaluation End Score: ……..
Letter Grade:……..

Score Range	Letter Grade	Credit Rating
90 – 100	AA	4.0
80 – 89	BA	3.5
70 – 79	BB	3.0
65 – 69	CB	2.5
60 – 64	CC	2.0
0 – 59	FF	
Absent	FA	

**Attendance	Absence ≤ 20% ☐	Absence > 20% ☐
Decision	Qualified ☐	Unqualified ☐

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