

**YEDİTEPE UNIVERSITY**  
**FACULTY OF MEDICINE**  
**PHASE VI**  
**ACADEMIC PROGRAM BOOK**  
**2022 - 2023**

**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”

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### AIM

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

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

# YEDİTEPE UNIVERSITY FACULTY OF MEDICINE

## PROGRAM OUTCOMES OF MEDICAL EDUCATION <sup>\*</sup>, <sup>\*\*</sup>

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**Abbreviations:** PO: Program Outcomes, POD: Program Outcomes Domain, PODG: Program Outcomes Domain Group

### PODG.1. Basic Professional Competencies

#### POD.1.1. Clinical Competencies

**PO.1.1.1. values** preventive health services, **offers** primary prevention (i.e. prevention of diseases for the protection of health), secondary prevention (i.e. early diagnosis and treatment) tertiary prevention (i.e. rehabilitation) and quaternary prevention (i.e. prevention of excessive and unnecessary diagnosis and treatment) services, **provides** consultancy on these issues.

**PO.1.1.2. employs** a patient-centered approach in patient management.

**PO.1.1.3. recognizes** most frequently occurring or significant clinical complaints, symptoms, signs, findings and their emergence mechanisms in clinical conditions.

**PO.1.1.4. takes** medical history from the applicant himself/herself or from the individual's companions.

**PO.1.1.5. does** general and focused physical and mental examination.

**PO.1.1.6. interprets** findings in medical history, physical and mental examination.

**PO.1.1.7. employs** diagnostic procedures that are used frequently at the primary health care level.

**PO.1.1.8. selects** tests that have evidence-based high efficacy at the primary health care level and **interprets** results.

**PO.1.1.9. makes** clinical decisions using evidence-based systematic data in health care service.

**PO.1.1.10. performs** medical interventional procedures that are used frequently at the primary health care level.

**PO.1.1.11. manages** healthy individuals and patients in the context of health care services.

**PO.1.1.12. keeps** medical records in health care provision and **uses** information systems to that aim.

#### POD.1.2. Competencies Related to Communication

**PO.1.2.1.** throughout his/her career, **communicates** effectively with health care beneficiaries, co-workers, accompanying persons, visitors, patient's relatives, care givers, colleagues, other individuals, organizations and institutions.

**PO.1.2.2. collaborates** as a team member with related organizations and institutions, with other professionals and health care workers, on issues related to health.

**PO.1.2.3. recognizes** the protection and privacy policy for health care beneficiaries, co-workers, accompanying persons and visitors.

**PO.1.2.4. communicates** with all stakeholders taking into consideration the socio-cultural diversity.

### **POD.1.3. Competencies Related to Leadership and Management**

**PO.1.3.1. *manages*** and ***leads*** within the health care team in primary health care organization.

**PO.1.3.2. *recognizes*** the principles of health management and health sector economy, models of organization and financing of health care services.

**PO.1.3.3. *recognizes*** the resources in the health care service, the principles for cost-effective use.

### **POD.1.4. Competencies Related to Health Advocacy**

**PO.1.4.1. *recognizes*** the health status of the individual and the community and the factors affecting the health, ***implements*** the necessary measures to prevent effects of these factors on the health.

**PO.1.4.2. *recognizes*** and ***manages*** the health determinants including conditions that prevent access to health care.

### **POD.1.5. Competencies Related to Research**

**PO.1.5.1. *develops*, *prepares* and *presents*** research projects

### **POD.1.6. Competencies Related to Health Education and Counseling**

**PO.1.6.1. *provides*** consultancy services and ***organizes*** health education for the community to sustain and promote the health of individual and community.

## **PODG.2. Professional Values and Perspectives**

### **POD.2.1. Competencies Related to Law and Legal Regulations**

**PO.2.1.1. *performs*** medical practices in accordance with the legal framework which regulates the primary health care service.

### **POD.2.2. Competencies Related to Ethical Aspects of Medicine**

**PO.2.2.1. *recognizes*** basic ethical principles completely, and ***distinguishes*** ethical and legal problems.

**PO.2.2.2. *pays importance to*** the rights of patient, patient's relatives and physicians, and ***provides*** services in this context.

### **POD.2.3. Competencies Related to Social and Behavioral Sciences**

**PO.2.3.1. *relates*** historical, anthropological and philosophical evolution of medicine, with the current medical practice.

**PO.2.3.2. *recognizes*** the individual's behavior and attitudes and factors that determine the social dynamics of the community.

### **POD.2.4. Competencies Related to Social Awareness and Participation**

**PO.2.4.1. *leads*** community with sense of responsibility, behavior and attitudes in consideration of individual behaviors and social dynamics of the community, and if there is a necessity, ***develops*** projects directed towards health care services.

### **POD.2.5. Competencies Related to Professional Attitudes and Behaviors**

**PO.2.5.1. *displays*** a patient-centered and holistic (biopsychosocial) approach to patients and their problems.

**PO.2.5.2. *respects*** patients, colleagues and all stakeholders in health care delivery.

**PO.2.5.3. *displays*** the proper behavior in case of disadvantaged groups and situations in the community.

**PO.2.5.4. *takes*** responsibility for the development of patient safety and healthcare quality.

**PO.2.5.6. *evaluates*** own performance as open to criticism, ***realizes*** the qualifications and limitations.

### **PODG.3. Personal Development and Values**

#### **POD.3.1. Competencies Related to Lifelong Learning**

**PO.3.1.1. *embraces*** the importance of lifelong self-learning and ***implements***.

**PO.3.1.2. *embraces*** the importance of updating knowledge and skills; ***searches*** current advancements and ***improves*** own knowledge and skills.

**PO.3.1.3. *uses*** English language at least at a level adequate to follow the international literature and to establish communication related to the profession.

#### **POD.3.2. Competencies Related to Career Management**

**PO.3.2.1. *recognizes*** and ***investigates*** postgraduate work domains and job opportunities.

**PO.3.2.2. *recognizes*** the application requirements to postgraduate work/job domains, and ***distinguishes*** and ***plans*** any requirement for further training and work experience.

**PO.3.2.3. *prepares*** a resume, and ***recognizes*** job interview methods.

#### **POD.3.3. Competencies Related to Protection and Development of Own Physical and Mental Health**

**PO.3.3.1. *implements*** the rules of healthy living.

**PO.3.3.2. *displays*** appropriate behavior specific to work under stressful conditions.

**PO.3.3.3. *uses*** self-motivation factors.

**PHASE VI COORDINATION COMMITTEE  
(TEACHING YEAR 2021 – 2022)**

Berfu Naz AKBAŞ, MD. Assoc. Prof. (Coordinator)

Yaşar KÜÇÜKARDALI, MD. Prof. (Co-coordinator)

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

**Servet Karagül MD. Assoc. Prof. (Co-coordinator)**

**M.Ferudun Çelikmen, MD. Assist. Prof. (Co-coordinator)**

## FACULTY OF MEDICINE CURRICULUM 2022-2023 PHASE VI

CODE	SIXTH YEAR	W	T	A	L	Y	E
601	Child Health and Pediatrics	9					10
602	General Surgery/Emergency Medicine	8					10
603	Internal Medicine	9					10
604	Obstetrics and Gynecology	9					10
605	Rural Medicine	9					10
XXX	Area Elective Course <sup>3</sup>	4					5
607	Psychiatry	4					5
Total Credits							60

The curriculum applies to 2022-2023 educational term. The duration of educational term for each year is shown in the table as total number of weeks. ECTS credits are the university credits of the courses in Yeditepe University Faculty of Medicine Undergraduate Medical Education Program. 1 ECTS=30 hours of workload including independent study hours per average student. GPA and cGPA calculations are based on ECTS credits.

<sup>3</sup>Area Elective Courses. Only one of the provided courses can be elected in the sixth educational year. MED 650 Emergency Medicine, MED 651 Internal Medicine, MED 652 Child Health And Pediatrics, MED 653 Obstetrics and Gynecology, MED 654 General Surgery, MED 655 Cardiology, MED 656 Cardiovascular Surgery, MED 657 Clinic Ethics, MED 658 Plastic and Reconstructive Surgery, MED 659 Public Health, MED 660 Thoracic Surgery, MED 661 Orthopedics and Traumatology, MED 662 Ophthalmology, MED 663 Dermatology, MED 664 Otorhinolaryngology, MED 665 Neurology, MED 666 Neurosurgery, MED 667 Urology, MED 668 Anesthesiology and Reanimation, MED 669 Pediatric Surgery, MED 670 Psychiatry, MED 671 Physical Medicine and Rehabilitation, MED 672 Radiation Oncology, MED 673 Clinical Pharmacology, MED 674 Infectious Diseases & Clinical Microbiology, MED 675 Radiology, MED 676 Nuclear Medicine, MED 677 Forensic Medicine, MED 678 Child Psychiatry, MED 679 Medical Genetics, MED 680 Medical Microbiology, MED 681 Pathology, MED 682 Medical Biochemistry.

T: Theoretical, A: Application , L: Laboratory, Y: Yeditepe University Credit, E: ECTS Credit	Minimum Degree Requirements	
NC: Non-Credit Course, FS: Fall Semester, SS: Spring Semester, W: Weeks.	ECTS	360
Approval Date:	Number of courses	53

\* Please see <https://med.yeditepe.edu.tr/tr/mezuniyet-oncesi-tip-egitimi> for more information.



## **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

Public Health, Family Medicine

Elective

## **AIM AND OBJECTIVES OF PHASE VI**

The characteristic of the Phase VI Program is its nature as a preparation period covering the entire medical faculty goals and objectives. The aim of the Phase VI 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

### ACADEMIC CALENDAR 2022-2023

July 1, 2022, Friday	Beginning of Phase VI
July 1, 2022, Friday 08.30-09.00	Introduction of Phase VI
July 08, 2022 (Friday, ½ day) July 09-12, 2022 (Saturday-Tuesday)	Religious Holiday
July 15, 2022 (Friday)	Democracy and national day
August 30, 2022 (Tuesday)	National Holiday
October 20, 2022 (Thursday)	Coordination committee meeting
October 28, 2022 (Friday, ½ day) October 29, 2022 (Saturday)	Republic Day National Holiday
November 10, 2022 (Thursday 09:00-12:00)	Commemoration of Atatürk
January 1, 2023 (Sunday)	New year
January 10, 2023 (Sunday)	Coordination committee meeting ( with student participation )
March 14, 2023 (Tuesday)	Physicians' Day
April 20, 2023 (Thursday, ½ day) April 21-23, 2023 (Friday-Sunday)	Ramadan Feast Holiday
April 23, 2023 (Sunday )	National Holiday
May 1, 2023 (Monday )	Labor's day
May 19, 2023 ( Friday)	National Holiday
May 23, 2023 (Tuesday)	Coordination committee meeting ( with student participation )
June 27, 2023 (Wednesday, ½ day) June 28- July 1, 2023	Religious Holiday
June 30, 2023, (Friday )	End of Phase
July 11, 2023 (Tuesday)	Coordination committee meeting

## **INTERNSHIP PROGRAMS**

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

### ACADEMIC SCHEDULE 2022-2023

2022-2023	GROUP 1	GROUP 2	GROUP 3	GROUP 4	GROUP 5	GROUP 6
01.07. 2022 - 31.07.2022	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (S.E.A.H)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (Y.Ü.H.)
01.08.2022-31.08.2022						Elective
13.7.2022 27.7.2022 10.8.2022 24.8.2022 14.9.2022 28.9.2022	Symptom Based learning session    Conference Hall in Yeditepe University Hospital / Kozyatağı Between 09.00- 16.00					
01.09. 2022 - 30.09.2022	Psychiatry (Y.Ü.H.)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (S.E.A.H)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine
01.10. 2022 - 31.10.2022	Elective					
01.11.2022-30.11.2022	Rural Medicine	Psychiatry (Y.Ü.H.)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (S.E.A.H)	Child Health and Pediatrics (Y.Ü.H.)
01.12. 2022 - 31.12.2022		Elective				
01.01.2023-31.01.2023	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (Y.Ü.H.)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (S.E.A.H)
01.02.2023-28.02.2023			Elective			
01.03.2023-31.03.2023	Obstetrics and Gynecology (Y.Ü.H.) (S.E.A.H)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (Y.Ü.H.)	Internal Medicine (Y.Ü.H.)	General Surgery / Emergency Medicine (Y.Ü.H.)
01.04.2023-30.04.2023				Elective		
01.05.2023-31.05.2023	General Surgery / Emergency Medicine (Y.Ü.H.)	Obstetrics and Gynecology (Y.Ü.H.) (S.E.A.H)	Child Health and Pediatrics (Y.Ü.H.)	Rural Medicine	Psychiatry (Y.Ü.H.)	Internal Medicine (Y.Ü.H.)
01.06.2023-30.06.2023					Elective	

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

## **STUDENT-CENTRED, SYMPTOM-BASED LEARNING SESSIONS**

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

interns will connect and present their cases via the meet classes. The links will be sent by the coordinators previously the session. This education program will continue with intern classroom which was created as google classroom.

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

**Coordinator:** Yaşar Küçükardalı, MD, Prof.

## THE SCHEDULE

SYMPTOM/SIGN/SITUATION	TIME	DISEASES	DEPARTMENT		FACULTY MEMBER
	09.00-09.05	Introduction			Asist.Prof.Dr Cem Simsek
<b>Change in consciousness</b> 13 July, 2022 09.00-12.00	09.05-09.25	Sentral nerveus system infection	Emergency Department		Asist.Prof.Dr Cem Simsek
	09.25-09.45	Hypoglycemia	Emergency Department		Asist.Prof.Dr Cem Simsek
	09.45-10.05	Metabolic encephalopathie (Hepatic failure)	Emergency Department		Asist.Prof.Dr Cem Simsek
	10.05-10.25	Hypercapnic respiratory failure	Emergency Department		Asist.Prof.Dr Cem Simsek
	10.25-10.45	Coffee break			
	10.45-11.05	Intoxication	Emergency Department		Asist.Prof.Dr Cem Simsek
	11.05-11.25	Serebrovascular event	Emergency Department		Asist.Prof.Dr Cem Simsek
	11.25-11.45	Sepsis	Emergency Department		Asist.Prof.Dr Cem Simsek
	11.45-12.05	Discussion			
<b>Acute Abdomen</b> 13 July 2022 13.30- 16.35	13.30-13.35	Introduction			Assoc.Prof.Dr Süleyman Orman
	13.35-13.55	Acute appendicitis	General surgery		Assoc.Prof.Dr Süleyman Orman
	13.55-14.15	Acute Colesystitis	General surgery		Assoc.Prof.Dr Süleyman Orman
	14.15-14.35	Acute Pancreatitis	Gastroenterology		Assoc.Prof.Dr Emine Köroğlu
	14.35-14.55	Acute diverticulitis	Internal Medicine		Asist. Prof. Dr M.Akif Öztürk
	14.55-15.15	Coffee Break			
	15.15-15.35	Ileus	General surgery		Assoc.Prof.Dr Kinyas Kartal
	15.35-15.55	Familial mediteranian fever	Internal Medicine		Prof..Dr. Yaşar Küçükardalı
	15.55-16.15	Rupture of ovarian cyst	Gynecology		Prof.Dr Rukset Attar
	16.15-16.35	Discussion			
<b>Obstetric Emercencies</b> 27 July 2022 09.00-12.00	09.00-09.05	Introduction			Prof. Dr. Rukset Attar
	09.05-09.25	Ectopic pregnancy	Gynecology		Prof. Dr. Rukset Attar
	09.25-09.45	Preeclampsia / Eclampsia	Gynecology		Assoc Prof. Dr Tanju Demirören
	09.45-10.05	Post partum bleedind	Gynecology		Prof Dr Orhan Ünal
	10.05-10.25	Uterin Rupture	Gynecology		Prof Dr Gazi Yıldırım
	10.25-10.45	Coffee Break			
	10.45-11.05	Abortus	Gynecology		Assoc.Prof Mert Yeşiladali
	11.05-11.25	Fatty Liver in Pregnant Women	Gastroenterology		Assoc Prof.Emine Köroğlu

	11-25 11.45	Endocrinologic emergencies in Pregnant women	Endocrinology		Assoc Prof. Özlem Haliloğlu
	11.45-12.05	Discussion			
<b>Fever (child, adult) 27 July 2022 13.30-16.35</b>	13.30-13.35	Introduction			Prof. Dr. Yaşar Küçükardalı
	13.35-13.55	Sepsis	Internal Medicine		Prof Dr Yaşar Küçükardalı
	13.55-14.15	Acute Pyelonephritis	Internal Medicine		Prof Dr Yaşar Küçükardalı
	14.15-14.35	Pnömoni	Internal Medicine		Prof Dr Yaşar Küçükardalı
	14.35-14.55	Temporal Arterit	Internal medicine		Prof Dr Yaşar Küçükardalı
	14.55-15.15	Coffee Break			
	15.15-15.35	Upper Respiratory system infections	Pediatry		Dr . Bilge Atlı
	15.35-15.55	Lower Respiratory system infections	Pediatry		Dr . Bilge Atlı
	15.55-16.15	Kawasaki Diseases	Pediatry		Dr . Bilge Atlı
	16.15-16.35	Discussion			
<b>GIS bleeding 10 August 09.00-12.00</b>	09.00-09.05	Introduction			Assoc.Prof.Dr Emine Köroğlu
	09.05-09.25	Peptic ulcer	Gastroenterology		Assoc.Prof.Dr Emine Köroğlu
	09.25-09.45	Diverticular bleeding	Gastroenterology		Assoc.Prof.Dr Emine Köroğlu
	09.45-10.05	Angiodisplasia	Gastroenterology		Assoc.Prof.Dr Emine Köroğlu
	10.05-10.25	Eozinophilic proctocolitis	Ped. Gastroenterology		Prof.Dr Meltem Uğraş
	10.25-10.45	Coffee Break			
	10.45-11.05	Gastric Malignancy	Gastroenterology		Prof.Dr.Meltem Ergün
	11.05-11.25	Varriseal bleeding	Gastroenterology		Prof.Dr.Meltem Ergün
	11.25-11.45	Colon carcinoma	Gastroenterology		Prof.Dr.Meltem Ergün
	11.45-12.05	Discussion			
<b>Physchiatric Emercencies 10 August 2022 13.30-17.05</b>	13.30-13.35	Introduction			Assoc.Prof.Dr Serhat Tuncer
	13.35-13.55	Suicide	Psychiatry department		Assoc.Prof.Dr Serhat Tuncer
	13.55-14.15	Substance Intoxication	Psychiatry department		Assoc.Prof.Dr Serhat Tuncer
	14.15-14.35	Delirium	Psychiatry department		Prof.Dr Berfu Naz
	14.35-14.55	Panic Attack	Psychiatry department		Prof.Dr Berfu Naz
	14.55-15.15	Coffee Break			
	15.15-15.35	Manic attack	Psychiatry department		Prof.Dr Hakan Atalay
	15.35-15.55	Grief Reaction	Psychiatry department		Prof.Dr Okan Taycan



	15.55-16.15	Give Bad News	Psychiatry department		Prof.Dr Okan Taycan
	16.15-16.35	Discussion			
<b>Palliative Medicine</b> <b>10 August 2022</b> <b>16.35-17.05</b>	16.35-16.50	Manegement of Sedation	Internal Medicine		Prof.Dr.Yaşar Küçükardalı
	16.50-17.05	Prophylactic Treatments	Internal Medicine		Prof.Dr.Yaşar Küçükardalı
<b>Hypertension ( child, adult)</b> <b>24 August 2022</b> <b>09.00-12.05</b>	09.00-09.05	Introduction			Prof.Dr.Yaşar Küçükardalı
	09.05-09.25	Esential Hypertansion	Internal Medicine		Prof.Dr.Yaşar Küçükardalı
	09.25-09.45	Hyperaldosteronizm	Internal Medicine		Assoc.Prof Özlem Haliloğlu
	09.45-10.05	Feokromasitoma	Internal Medicine		Assoc.Prof Özlem Haliloğlu
	10.05-10.25	Renal artery stenosis	Internal Medicine		Prof.Dr Gülçin Kantarcı
	10.25-10.45	Coffee Break			
	10.45-11.05	Primary hypertension	Pediatry		Prof.Dr. Ruhan Düşünsel
	11.05-11.25	Renal Parancymal diseases related hypertension	Pediatry		Prof.Dr. Ruhan Düşünsel
	11.25-11.45	Renovascular Hypertension	Pediatry		Prof.Dr. Ruhan Düşünsel
	11.45-12.05	Discussion			
<b>Palliative Medicine</b> <b>24.August 2022</b> <b>12.05-12.35</b>	12.05-12.20	Management of comorbidities (Charlston risk index )	Internal Medicine		Asist.Prof.Dr M.Akif Öztürk
	12.20-12.35	Management Constipation	Internal Medicine		Asist.Prof.Dr M.Akif Öztürk
<b>Diarrhea ( child, adult)</b> <b>24 August 2022</b> <b>13.30-16.35</b>	13.30-13.35	Introduction			Prof.Dr.Yaşar Küçükardalı
	13.35-13.55	İrritabl bowel syndrome	Internal Medicine		Prof.Dr.Yaşar Küçükardalı
	13.55-14.15	İnflamatuar bowel diseases	Gastroenterology		Prof.Dr Meltem Ergün
	14.15-14.35	Salmonellosis	Infectious Diseases		Asist Prof.Dr Sibel Bolukçu
	14.35-14.55	Cl.Difficile Infections	Gastroenterology		Assoc.Prpf.Dr Emine Köroğlu
	14.55-15.15	Coffee Break			
	15.15-15.35	Rota virus associated	Pediatry		Asist.Prof.Dr Endi Romano
	15.35-15.55	Giardiasis associated	Pediatry		Asist.Prof.Dr Endi Romano
	15.55-16.15	Toddlers Diarrhea	Pediatry		Asist.Prof.Dr Endi Romano
	16.15-16.35	Discussion			

<b>Comprehensive Geriatric Assessment</b> <b>24 August 2022</b>	16.35-16.50	İmmunoprofilaksi of elderly population	Internal Medicine		Prof.Dr.Yaşar Küçükardalı
	16.50-17.05	Vertigo in elderly patients	Internal Medicine		Prof.Dr.Yaşar Küçükardalı
<b>Dispnea</b> <b>14 Sept 2022</b> <b>09.00-12.00</b>	09.00-09.05	Introduction			
	09.05-09.25	Pulmonary emboli	Pulmonology		Prof.Dr.Banu Salepçi
	09.25-09.45	Chronic obstructive Lung Diseases	Pulmonology		Prof.Dr.Banu Salepçi
	09.45-10.05	Pneumonia	Pulmonology		Prof.Dr.Banu Salepçi
	10.05-10.25	Asthma bronchiale	Pulmonology		Prof.Dr.Banu Salepçi
	10.25-10.45	Coffee Break			
	10.45-11.05	Pneumothrax	Pulmonology		Prof.Dr.Banu Salepçi
	11.05-11.25	Pulmonary edema	Cardiology		Dr. Ferit Onur Mutluer
	11.25-11.45	ARDS	Intensive care		Prof.Dr.Yaşar Küçükardalı
	11.45-12.05	Discussion			
<b>Comprehensive Geriatric Assessment</b> <b>14 Sept 2022</b>	12.05-12.20	Atypical presentation of common disorders in elderly patients	Internal Medicine		Asist.Prof.Dr M.Akif Öztürk
	12.20-12.35	Evaluation of vision and hearing in the elderly	Internal Medicine		Asist.Prof.Dr M.Akif Öztürk
<b>Diabetes (child,adult)</b> <b>14 Sept 2022</b> <b>13.30-16.35</b>	13.30-13.35	Introduction			Doç.Dr Özlem Haliloğlu
	13.35-13.55	Prediabetic patient	Endocrinology		Assoc.Prof.Özlem Haliloğlu
	13.55-14.15	New diagnosed Type II Diabetic patient	Endocrinology		Assoc.Prof.Özlem Haliloğlu
	14.15-14.35	Type 2 diabetic patient which oral therapy is insufficient	Endocrinology		Assoc.Prof.Özlem Haliloğlu
	14.35-14.55	Gestational Diabetic patient	Endocrinology		Assoc.Prof.Özlem Haliloğlu
	14.55-15.15	Coffee Break			
	15.15-15.35	Patient with diabetic ketoacidosis	Endocrinology		Assoc.Prof.Özlem Haliloğlu
	15.35-15.55	Pediatric diabetic ketoacidosis	Pediatrics		Assoc.Prof.Dr Elif Sağsak
	15.55-16.15	Type I Diabetes mellitus	Pediatrics		Assoc.Prof.Dr Elif Sağsak
	16.15-16.35				
<b>Convulsions</b> <b>28 Sept 2022</b> <b>09.00-12.00</b>	09.00-09.05	Introduction			
	09.05-09.25	Juvenile Myoclonic epilepsy	Neurology		Assoc.Prof.Dr Emin Özcan

	09.25-09.45	Brain Tumor ( sec)	Neurology		Assoc.Prof.Dr Emin Özcan
	09.45-10.05	Head Trauma ( sec)	Neurology		Assoc.Prof.Dr Emin Özcan
	10.05-10.25	Santral nervous system infections	Neurology		Assoc.Prof.Dr Emin Özcan
	10.25-10.45	Coffee Break			
	10.45-11.05	Demyelisan diseases	Neurology		Assoc.Prof.Dr Emin Özcan
	11.05-11.25	Drug induced ( velbutrin)	Neurology		Assoc.Prof.Dr Emin Özcan
	11.25-11.45	Hipoglicemia	Internal Medicine		Asist.Prof.Dr. Mehmet Akif Öztürk
	11.45-12.05	Discussion	Neurology		
<b>Chest pain, Palpitation</b> <b>28 Sept 2022</b> <b>13.30-16.35</b>	13.30-13.35	Introduction			
	13.35-13.55	Miyocardial infarction	Cardiology		Dr. Ferit Onur Mutluer
	13.55-14.15	Aort dissection	Cardiology		Dr. Ferit Onur Mutluer
	14.15-14.35	Diffuse esophagial spasm	Gastroenterology		Assoc.Prof.Dr Emine Köroğlu
	14.35-14.55	Reflux diseases	Gastroenterology		Assoc.Prof.Dr Emine Köroğlu
	14.55-15.15	Coffee Break			
	15.15-15.35	Pneumothorax	Pulmonology		Prof.Dr.Banu Salepçi
	15.35-15.55	Pulmonary embolism	Pulmonology		Prof.Dr.Banu Salepçi
	15.55-16.15	Tietz syndrome	Rheumatology		Prof.Dr.Müge Bıçakçıl Kalaycı
	16.15-16.35	Discussion			

## SYMPTOM-BASED LEARNING SESSIONS

### Learning Objectives

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

Change in consciousness	<p>Describe the Change in consciousness</p> <p>Describe initial symptomatology of patient</p> <p>Describe physical findings</p> <p>Describe gold standard and other diagnostic methods</p> <p>Explain X Ray and CT findings</p> <p>Interpret Lab abnormalities</p> <p>Explain risk factors</p> <p>Explain therapeutic approach in relation with severity of the diseases</p> <p>Define indications for admission to the hospital</p>
Dispepsia	<p>Describe dyspepsia</p> <p>Evaluate the symptoms and physical examination findings</p> <p>Explain causes of dyspepsia</p> <p>Plan to work up</p> <p>Explain lab abnormality</p> <p>Explain target of treatment</p> <p>Define chronic conditions</p> <p>Define surgery indications</p> <p>Define how to screen end organ damage</p> <p>Define emergency and urgency conditions</p> <p>To define non pharmacological treatment options</p> <p>Distinguish when to refer the patient to a specialist</p>
Limitation of joint motion ( ROM)	<p>Define Limitation of joint motion</p> <p>Explain physical examinations of patients with ROM</p> <p>List the Causes of ROM</p> <p>Describe how to take the history of a patient with ROM</p> <p>Interpret the physical examination signs in a patient with ROM</p> <p>Explain differential diagnosis to the etiology of ROM</p> <p>Choose necessary follow-up tests</p> <p>Manage the ROM emergencies</p> <p>Evaluate in which patients with ROM are required to refer specialist</p>
Fatigue	<p>Define fatigue</p> <p>Explain the causes of fatigue</p> <p>Make differential diagnosis</p> <p>Interpret diagnostic studies and tests</p> <p>Explain the first medical intervention in life-threatening fatigue</p> <p>Refer the patient in time to a specialist</p> <p>Recognize and take precaution in cases that require emergency treatment</p>
Upper gastrointestinal system bleeding	<p>List the causes of Upper gastrointestinal system bleeding</p> <p>Choose etiology oriented tests that should be performed</p> <p>Evaluate when to ask for further scanning ( gastroscopy , kolonoscopy X-ray, CT, MR)</p> <p>Discriminate the cases in which history taking is enough</p> <p>Interpret the Pain Scale</p> <p>Diagnosis and recognizes the life-threatening GIS bleeding</p> <p>Explain the treatment options for GIS bleeding</p> <p>After the first assessment differentiate the patient who needs to be referred to a specialist for further investigation (Surgery, gastroenterology)</p>
Anorexia	<p>Define Anorexia</p> <p>Explain the causes of anorexia</p> <p>Define differential diagnosis</p> <p>List diagnostic studies and tests</p>

	Can make symptomatic and evidence based treatment of puritis Refer the patient to a specialist when necessary
Constipation	<p>Define criterias of constipation</p> <p>Describe physical examination of constipated patient</p> <p>Explain causes of Constipatio</p> <p>Make differential diagnosis</p> <p>Perform and interpret the case –oriented tests</p> <p>Interpret a Chest X-ray</p> <p>Interpret a lab abnormalities</p> <p>Explain priorities of an emergency treatment</p> <p>Decide when to refer a patient to a specialist</p>
Hemoragic diathesis	<p>Define Hemoragic diathesis</p> <p>Describe physical examination of Hemoragic diathesis</p> <p>List diseases with present Hemoragic diathesis</p> <p>Make differential diagnosis</p> <p>List diagnostic tests</p> <p>Evaluate findings of the X Ray examinations</p> <p>Refer a patient to a specialist</p>
Dispnea	<p>Define criterias of Dispnea</p> <p>Explain the causes of Dispnea</p> <p>Make differential diagnosis</p> <p>Perform diagnostic studies and tests</p> <p>Recognize and manage life-threatening Dispnea</p> <p>Interpret an ECG</p> <p>Perform risk analysis of Dispnea</p> <p>Recognize and takes precaution in cases that require emergency treatment</p> <p>Refer a patient to a specialist in time</p>
Splenomegaly	<p>Define Splenomegaly</p> <p>Explain the causes of Splenomegaly</p> <p>Make differential diagnosis</p> <p>Perform the diagnostic tests and screenings</p> <p>Recognize the life-threatening Splenomegaly</p> <p>Ask for a surgery consultation in time</p> <p>Recognize and take precaution of the cases that require emergency treatment</p>
Cyasosis	<p>Define cyanosis</p> <p>Explain the causes of cyanosis</p> <p>Make differential diagnosis</p> <p>Evaluate the diagnostic tests and screenings</p> <p>Explain the first intervention in a life-threatening cyanosis</p> <p>Define a specific consultation in time</p> <p>Assess the physical examination of a patient</p>
Chest pain	<p>Define Chest pain</p> <p>Distinguish Types of Chest pain</p> <p>Explain causes of Chest pain</p> <p>Make differential diagnosis</p> <p>Perform diagnostic studies and tests</p> <p>Explain the first medical intervention in life-threatening Chest pain</p> <p>Refer the patient in time to a specialist</p> <p>Recognize and take precaution in cases that require emergency treatment</p>

### RECOMMENDED TEXTBOOKS FOR PHASE VI

NO	DEPARTMENT	TEXTBOOK/ SOURCE	EDITOR	PUBLISHER / ACCESS
1	<b>INTERNAL MEDICINE</b>	Harrison's Principles of Internal Medicine		
		Semiyoloji	Yaşar Küçükardalı, MD, Prof.	2013 Nobel Tıp Kitabevleri
		www.uptodate.com		University Knowledge Center
		<a href="http://www.accessmedicine.com">www.accessmedicine.com</a>		University Knowledge Center
2	<b>PEDIATRICS</b>	Nelson Textbook of Pediatrics		
3		Temel Pediatri		
4		www.uptodate.com		University Knowledge Center
5		<a href="http://www.accessmedicine.com">www.accessmedicine.com</a>		University Knowledge Center
6	<b>GENERAL SURGERY AND EMERGENCY MEDICINE</b>	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 <a href="http://www.uptodate.com">www.uptodate.com</a> <a href="http://www.clinicalkey.com">www.clinicalkey.com</a>		
7	<b>OBSTETRICS &amp; GYNECOLOGY</b>	Current Obstetrics and Gynecology, Elsevier Publishing 2015		

## **SPECIFIC SESSIONS**

### **Introductory Session**

#### **Aim of the Session:**

The session provides basic information about the educational phase relevant to the students. This session orients the students to the phase.

#### **Objectives of the Session:**

1. To provide basic information about the phase.
2. 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:

- Work Descriptions and Introduction of Internship Members,
- 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 beginning 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 involved to the internship program 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'

## **INTERNAL MEDICINE**

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### **Faculty**

Fahrettin Keleştimur, MD. Prof of Endocrinology

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Yaşar Küçükardalı, MD. Prof. of Internal Medicine, Intensive care

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Ayça Türer Cabbar MD Asist Prof of Cardiology

Mehmet Akif Öztürk Asist 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 characteristics of more specific tests (eg. PET CT, ERCP, Capsule endoscopy..) and their usages
- decide about when to give the patient a sick leave report and the appropriate report duration

### **SKILLS**

- take an adequate patient history
- perform masterly physical examination
- guide the patient for diagnose, treatment and follow up according to history, physical examination and laboratory tests
- perform successfully minimal invasive procedures like venepuncture, taking blood, paracentesis etc. used in diagnosis and treatment
- fill the patient records
- go through procedures of admitting and discharging patients
- reach and use medical literature other than classical textbooks
- treat the diseases that are commonly seen among adult in primary health care
- refer the patients whose diagnosis, treatment and follow-up cannot be managed by primary health care
- ask for consultation from other medical specialties
- manage well adult follow-up and vaccination
- counsel preventive health care issues
- work in accordance with the law and ethics
- communicate effectively with patients, patients relatives, colleagues and other healthcare personnel
- manage adult emergency cases
- perform anthropometric measures
- follow-up patients with chronic diseases
- guide the patients with chronic diseases
- perform resuscitation of adult
- keep records in regard to primary care according the official and legal requirements
- use the data processing system in the patient records
- search the literature
- use at least one foreign language to communicate with both the adult and families that do not speak Turkish
- know at least one foreign language to follow medical literature

- make presentations to his/her colleagues about the patients he/she has followed
- contribute scientific studies on medical literature
- refer the patients that cannot be managed in a primary healthcare unit to an upper healthcare center
- communicate with the patients' parents during examination, laboratory testing, consultation and treatment steps of the sick adult
- take informed consent from patients' parents and/or the patient
- communicate with his/her colleagues, patients and patients' parents

## **ATTITUDE**

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

<b>NCC 2014 – Essential Medical Procedures</b>	<b>Performance Level</b>
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	4
Respiratory system examination	4
Cardiovascular system examination	4
Urologic examination	2
Preparing medical reports and notice	3
Preparing forensic report	4
Preparing epicrisis	4
Preparing patient file	4
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	3
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.)	3
Using and evaluating peak-flow meter	3

## Internal Medicine

### Phase VI Week I

Introduction to Internal Medicine 1st Group: 01 July 2022, 2nd Group 01 Sep 2022, 3rd Group 01 Nov 2022, 4th Group 01 Jan 2023,  
5th Group 01 Mar 2023, 6th Group 01 May 2023

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	<b>Introductory Session</b> <b>Introduction to Phase VI</b> <b>Yaşar Küçükardalı</b> <b>Kozyatağı /Conference</b> <b>Hall</b>	Clinical Experience (Inpatient)	Multi-disciplinary Case Discussion Conference Hall Kozyatağı	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
09.30-10.00	<b>Introductory Session</b> (Introduction to Internal Medicine) <i>Gülçin Kantarcı</i>	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
10.00-12.00	Clinical Experience (Outpatient)				
12.00- 12.30	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>
12.30-13.15	<b>Journal Club 2</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Presentations 6</b> <b>(Student)</b>	<b>Independent Learning</b>
13.15- 16.00	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
16.00- 16.50	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>
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	Ward Round	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	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00- 12.30	Lunch	Lunch	Lunch	Lunch	Lunch
12.30-13.15	Week II Case Report			Seminar Presentations (Student)	
	Week III Seminary				
13.15- 16.00-	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) II.WEEK	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 IV**

	Day 1	Day 2	Day 3	Day 4	Day 5
<b>08.30- 09.00</b>	Ward Round	Ward Round	Ward Round	Ward Round	Ward Round
<b>09.00-12.00</b>	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom- Based Learning Session Conference Hall All Groups (I-VI)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
<b>12.00- 12.30</b>	Lunch	Lunch	Lunch	Lunch	Lunch
<b>12.30-13.15</b>	Journal Club			Seminar Presentations (Student)	
<b>13.15- 16.00-</b>	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom- Based Learning Session Conference Hall All Groups (I-VI)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
<b>16.00- 16.50</b>	Independent Learning	Independent Learning	Independent Learning	Independent Learning	Independent Learning
<b>17.00-17.50</b>					

**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	Ward Round	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	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
12.00- 12.30	Lunch	Lunch	Lunch	Lunch	Lunch
12.30-13.15	Week V Case Report			Seminar Presentations (Student)	
	Week VI Seminar				
	Week VII Jounal Club				
13.15- 16.00-	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI) VI. week	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 VIII**

	Monday	Tuesday	Wednesday	Thursday	Friday
08.30- 09.00	Ward Round	Ward round	Ward Round	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)	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)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI)	Clinical Experience (Outpatient)	<b>Program Evaluation Session</b> Review of the learning aims, Evaluation of the Course Program <i>Head of the Dept of Internal Medicine</i>
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 assistant doctor working internal medicine department Hospital 2. Floor, conference hall

4 Seminary: to attend seminary which will present by assistant 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 2<sup>nd</sup> Floor, conference hall, **All internship groups should follow these presentations. It is Mandatory.**

# INTERNAL MEDICINE INTERNSHIP PROGRAM FOR 2022 – 2023

	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. 2022 - 31.08. 2022																	
1-4 week	A1	A2	A3	A4	A5	A6	A7	A8	A9	A11	A10	A12	A13	A14	A15	A16	A17
13.7.2022 27.7.2022	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
10.8.2022 24.8.2022	Symtom based learning session    Conference Hall in Yeditepe University Hospital between 09.00- 16.00																
01.09. 2022- 31.10.2022																	
1-4 week	B1	B2	B3	B4	B5	B6	B7	B8	B9	B11	B10	B12	B13	B14	B15	B16	A17
14.9.2022 28.9.2022	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
01.11.2022- 31.12.2022																	
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
01.01.2023 – 28.2.2023																	
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. 2023- 30.4.2023																	
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. 2023 – 30.06.2023																	
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

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

<b>İnf</b>	<b>KŞ Koşuyolu Infectious Diseases</b>
<b>Nef</b>	<b>KŞ Koşuyolu Nephrology</b>
<b>Da</b>	<b>KŞ Koşuyolu Internal Medicine</b>
<b>Gst</b>	<b>KŞ Koşuyolu Gastroenterology</b>
<b>Ser</b>	<b>KŞ Koşuyolu Inpatient / clinic</b>
<b>Kar</b>	<b>KZ Kozyatağı Cardiology</b>

**YEDİTEPE UNIVERSITY  
FACULTY OF MEDICINE  
PHASE VI**

**CHILD HEALTH and PEDIATRICS**

**Head of the Department of Child Health and Pediatrics: Meltem Uğraş, MD. Prof. of Neonatology**

**Responsible of Course of Training: Elif Sağsak, MD Assoc. Prof; Coşkun Saf MD.**

**Faculty**

Filiz Bakar, MD, Prof.  
Ruhan Düşünsel, MD Prof,  
Haluk Topaloğlu, MD, Prof.  
Meltem Uğraş, MD, Prof.  
Hülya Ercan Sarıçoban, MD, Prof.  
Nevin Yalman, MD, Prof.  
Sabri Kemahlı, MD, Prof.  
Ayça Vitrinel, MD, Prof  
Reha Cengizlier , MD, Prof  
Kazım Öztarhan, MD, Prof  
Mustafa Berber, MD. Assist. Prof.  
Elif Sağsak, MDLecturer  
Ferhan Meriç , MD, Lecturer  
Tuba Giray, MD. Lecturer  
Fatma Tuba Coşkun, MD, Lecturer  
Seyhan Perihan Saf, MD, Assist. Prof.  
Çiğdem Yanar Ayanoğlu, MD, Lecturer  
Çetin Timur, MD, Lecturer  
Asım Yörük, MD, Lecturer  
Tülin Şimşek MD, Lecturer  
Coşkun Saf, MD, Lecturer  
Büşra Çağlar, MD, Lecturer  
Erdem Toprak, MD, Lecturer  
Bilge Atlı, MD, Lecturer

<b>NCC 2014 – Essential Medical Procedures</b>	<b>Performance Level</b>
General and symptom-based history taking	4
Antropometric measurements	4
Head-Neck and ENT examination	4
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	4
Breast and axillar region examination	4
Neurological examination	4
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	3
Filling laboratory request paper	4
Obtaining and transfer laboratory specimens in appropriate conditions	4
Using microscope	4
Performing peripheral smear and assessment	4
Performing full urine analysis (including microscopic examination) and assessment	4
Measuring transcutaneous bilirubine and its assessment	4
Rational drug use	3
Following child growth and development (Percentile graphics, Tanner classification)	4
Establishing IV line	3
Performing newborn care after delivery	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	2
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	3
Performing suprapubic bladder aspiration	2
Providing basic life support	3
Solving ethical issues in medical practice	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.

**At the end of every 2 months, a lecture "Immunization principles and vaccination programme" will be given by Prof Dr Ayça Vitrinel .**

**CHILD HEALTH AND PEDIATRICS (CHP)**  
**Phase VI Weekly Schedule**

	Monday	Tuesday	Wednesday		Thursday	Friday	
08.30-09.50	Morning round Clinic visit <i>F. Bakar, H.Topaloğlu, R. Düşünsel, M. Uğraş, H. Sarıçoban, M. Berber, T. Giray, T. Coşkun, E. Romano, P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük, T. Şimşek</i>	Morning round Clinic visit <i>F. Bakar, H.Topaloğlu, R. Düşünsel, M. Uğraş, H. Sarıçoban, M. Berber, T. Giray, T. Coşkun, E. Romano, P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük, T. Şimşek</i>	Morning round Clinic visit <i>F. Bakar, H.Topaloğlu, R. Düşünsel, M. Uğraş, H. Sarıçoban, M. Berber, T. Giray, T. Coşkun, E. Romano, P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük, T. Şimşek</i>	09.00-12.00 Only IV. and VIII. Week Student-Centred, Symptom-Based Learning Session All groups Conference Hall Only 2.4.6.8. week (13.7.2022 27.7.2022 10.8.2022 24.8.2022 14.9.2022 28.9.2022)	Morning round Clinic visit <i>F. Bakar, H.Topaloğlu, R. Düşünsel, M. Uğraş, H. Sarıçoban, M. Berber, T. Giray, T. Coşkun, E. Romano, P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük, T. Şimşek</i>	Morning round Clinic visit <i>F. Bakar, H.Topaloğlu, R. Düşünsel, M. Uğraş, H. Sarıçoban, M. Berber, T. Giray, T. Coşkun, E. Romano, P. Saf, Ç. Ayanoğlu, Ç. Timur, A. Yörük, T. Şimşek</i>	
	10.00-10.50	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation		Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation <i>A.Vitrinel</i>	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation
	11.00-11.50	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation		Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation <i>A.Vitrinel</i>	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation
	12.00-12.50	Lunch	Lunch		Lunch		Lunch
13.00-15.50	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation	Clinical Experience Polyclinics in Rotation Pediatrics Ward in Rotation	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 Only 2.4.6.8. week13.7.2022 (27.7.2022 10.8.2022 24.8.2022 14.9.2022 28.9.2022)		Clinical Experience Pediatric Allergy Learning Session, <i>R. Cengizlier</i>	Clinical Experience Polyclinics 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 Hemat ol.
1 <sup>st</sup> Week	1	2	3	4	5-14	7-8	9-10	11	12
2 <sup>nd</sup> Week	2	3	4	5-14	6-13	9-10	11	12	1
3 <sup>rd</sup> Week	3	4	5-14	6-13	7-8	11	12	1	2
4 <sup>th</sup> Week	4	5-14	6-13	7-8	9-10	12	1	2	3
5 <sup>th</sup> Week	5-14	6-13	7-8	9-10	11	1	2	3	4
6 <sup>th</sup> Week	6-13	7-8	9-10	11	12	2	3	4	5-14
7 <sup>th</sup> Week	7-8	9-10	11	12	1	3	4	5-14	6-13
8 <sup>th</sup> 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

### 2022 - 2023 Intern Working Schedule in Pediatrics

Weeks	Group 4	Group 5	Group 6	Group 1	Group 2	Group 3
1 <sup>st</sup> - 2 <sup>nd</sup>	01.07.2022 - 15.07.2022	01.09.2022- 15.09.2022	01.11.2022- 15.11.2022	01.01.2023- 15.01.2023	01.03.2023- 15.03.2023	01.05.2023- 15.05.2023
3 <sup>rd</sup> - 4 <sup>th</sup>	16.07.2022 - 30.07.2022	16.09.2022- 30.09.2022	16.11.2022- 30.11.2022	16.01.2023- 31.01.2023	16.03.2023- 31.03.2023	16.05.2023- 31.05.2023
5 <sup>th</sup> - 6 <sup>th</sup>	31.07.2022 - 17.08.2022	01.10.2022- 15.10.2022	01.12.2022- 15.12.2022	01.02.2023- 15.02.2023	01.04.2023- 15.04.2023	01.06.2023- 15.06.2023
7 <sup>th</sup> - 8 <sup>th</sup>	18.08.2022 - 31.08.2022	16.10.2022- 31.10.2022	16.12.2022- 31.12.2022	16.02.2023- 28.02.2023	16.04.2023- 30.04.2023	16.06.2023- 30.06.2023

- Intern doctors should be on time at 09:00 a.m in the morning in clinics and should prepare their own patient to present that who are in charge of on it.
- Every week on Wednesday from 10:00 to 12:00 the Pediatric Trainers (Prof Dr Ayça Vitrinel) will organize a training meeting in the hospital conference room.
- Twice a month on Thursday at 13.00-14.00 Prof Dr R Cengizlier will lecture
- During the internship every evening one intern student will stay from 17.00 to 24.00 on duty.

## **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., Dr. Öğr Üyesi Melis Gökçe Koçer Yazıcı

### **Faculty**

Erkut Attar, MD., PhD, Prof.

Orhan Ünal, MD. Prof.

Rukset Attar, MD., PhD, Prof

Tanju Demirören, MD, Dr. Öğr Üyesi

Petek Feriha Uzuner, MD, Dr. Öğr Üyesi

Mert Yeşiladalı, MD. Dr. Öğr Üyesi

Melis Gökçe Koçer Yazıcı, MD. Dr. Öğr Üyesi

Yosun Görkem Zeybek Özçer, MD

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

Niyazi Tuğ, MD. Assoc Prof.

**Responsible of Course of Training:** Niyazi Tuğ, MD. Assoc 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 / unsuccessful" according to their attendance.

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

<b>NCC 2014 – Essential Medical Procedures (Obstetrics and Gynecology)</b>	<b>Performance Level</b>
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:**

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

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

**Rotation Schedule**

**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**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>08.30- 09.00</b>	<b>Clinical Experience (Inpatient)</b>	<b>Clinical Experience (Inpatient)</b>	<b>Clinical Experience (Inpatient)</b>	<b>Clinical Experience (Inpatient)</b>	<b>Clinical Experience (Inpatient)</b>
<b>09.00-12.00</b>	<b>Clinical Experience (Outpatient)</b>	<b>Clinical Experience (Outpatient)</b>	09.00-12.00 Student-Centred, Symptom- Based Learning Session All groups Conference Hall  <b>13.7.2022</b> <b>27.7.2022</b> <b>10.8.2022</b> <b>24.8.2022</b> <b>14.9.2022</b> <b>28.9.2022</b>	<b>Clinical Experience (Outpatient)</b>	<b>Clinical Experience (Outpatient)</b>
<b>12.00- 13.15</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>
<b>13.15- 16.00</b>	<b>Clinical Experience (Outpatient)</b>	<b>Clinical Experience (Outpatient)</b>	Student-Centred, Symptom- Based Learning Session All groups Conference Hall  <b>13.7.2022</b> <b>27.7.2022</b> <b>10.8.2022</b> <b>24.8.2022</b> <b>14.9.2022</b> <b>28.9.2022</b>	<b>Clinical Experience (Outpatient)</b>	<b>Clinical Experience (Outpatient)</b>
<b>16.00- 16.50</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>
<b>17.00-17.50</b>					

**Obstetrics and Gynecology**  
**Phase VI Week IV**

	Monday	Tuesday	Wednesday	Thursday	Friday
<b>08.30- 09.00</b>	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
<b>09.00- 12.00</b>	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
<b>12.00- 13.15</b>	Lunch	Lunch	Lunch	Lunch	Lunch
<b>13.15- 16.00</b>	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI)	Clinical Experience (Outpatient)	<b>Program Evaluation Session</b> Review of the learning objectives , Evaluation of the Course Program <i>Head of the Dept of</i> <b>Obstetrics and Gynecology</b>
<b>16.00- 16.50</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>
<b>17.00- 17.50</b>					

## **GENERAL SURGERY / EMERGENCY MEDICINE**

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

**Responsible of Course of Training :** Kinyas Kartal, MD Assoc.Prof.

### **Faculty:**

Neşet Köksal MD. Prof

Erhan Ayşan MD. Prof

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

Pınar Tura, MD. Assist. Prof.

M.Feridun Çelikmen, MD. Assist. Prof.

Mustafa Yazıcıoğlu, MD. Assist. Prof.

Cem Şimşek, MD. Assist. Prof.

Emin Gökhan Gencer, MD. Assist. Prof.

Hande Candemir, MD. Assist. Prof.

Erman Uygun, MD, Emergency Med. Specialist

Abuzer Kekeç, 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 therapy 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 rhythm on ECG, approach to a patient 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
- communicate 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, inpatient clinics. Operation room and in other related services under the responsibility of a surgeon. They also take responsibility of patient care and work actively like the residents of the related clinic.

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

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

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

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

<b>NCC 2014 – Essential Medical Procedures (General Surgery)</b>	<b>Performance Level</b>
General and symptom-based patient interview	4
Assessing mental status	4
Head-Neck and ENT examination	3
Abdominal physical examination	4
Digital rectal examination	3
General condition and vital signs assessment	4
Cardiovascular system examination	3
Musculoskeletal system examination	3
Breast and axillar region examination	4
Respiratory system examination	4
Urological examination	3
Preparing forensic report	3
Obtaining informed consent	4
Preparing epicrisis	4
Preparing patient file	4
Referring patient appropriately	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	4
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
Obtaining sample for culture	3
Enema administration	3
Nasogastric catheterization	3
Oral, rectal, vaginal and topical drug administration	3
Providing basic life support	4
Transferring amputated limb appropriate	4
Care for burns	3
Superficial suturing and removal of sutures	3



<b>NCC 2014 – Essential Medical Procedures (Emergency Medicine)</b>	<b>Performance Level</b>
General and symptom-based patient interview	2
Assessing mental status	2
Psychiatric history taking	2
Examination of forensic cases	2
Anthropometric measurements	2
Head-Neck and ENT examination	2
Abdominal physical examination	2
Consciousness assessment and mood state examination	2
Child and newborn examination	2
Skin examination	2
Digital rectal examination	2
Obstetric examination	2
General condition and vital signs assessment	2
Eye, fundus examination	2
Gynecologic examination	2
Cardiovascular system examination	2
Musculoskeletal system examination	2
Breast and axillar region examination	2
Neurological examination	2
Respiratory system examination	2
Urological examination	2
Preparing forensic report	2
Obtaining informed consent	2
Preparing epicrisis	2
Preparing patient file	2
Referring patient appropriately	2
Preparing death certificate	2
Preparing medical reports and notice	2
Writing prescription	2
Preparing treatment refusal form	2
Providing decontamination, disinfection, sterilization, antisepsis	2
Reading direct radiographs and assessment	2
Taking and evaluating ECG	2
Measuring blood glucose level with glucometry	2
Stabilization of psychiatric emergency patient	2
Definition and management of forensic cases	2
"Airway" manipulation	2
Rational drug use	2
Preparing and applying splints	2
Bandaging and tourniquet application	2
Placement of anterior buffer and removal	2
Following child growth and development (Percentile graphics, Tanner classification)	2
Establishing IV line	2
Defibrillation	2
Incision and drainage of skin and soft tissue abscess	2
Restriction and stopping external bleeding	2
Hand washing	2
Intubation	2
Glasgow-coma-scale assessment	2
Appropriate patient transportation	2
Giving patient recovery position	2
Removal of foreign body from airway with appropriate maneuver	2
Performing IM, IV, SC, ID injection	2
Urinary catheterization	2
Providing advanced life support	2
Suicide intervention	2
Measuring blood pressure	2
Performing blood transfusion	2

Thick removal	2
Enema administration	2
Performing lumbar puncture	2
Gastric lavage	2
Minimally state examination	2
Nasogastric catheterization	2
Delivering oxygen and administering nebulizer-inhaler treatment	2
Cervical collar application	2
Providing basic life support	2
Neonatal resuscitation	2
Superficial suturing and removal of sutures	2

**General Surgery  
Phase VI Week I**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>08.30- 09.00</b>	<b>Introductory Session</b> Introduction to General Surgery <b>Mirkhalig Javadov</b>	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
<b>09.00-12.00</b>	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Clinical Experience (Out patient)
<b>12.00- 12.30</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>
<b>12.30-13.15</b>	Clinical Experience (Out patient)	Clinical Experience (Out patient)	<b>Independent Learning</b>	Clinical Experience (Out patient)	<b>Independent Learning</b>
<b>13.15- 16.00-</b>	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
<b>16.00- 16.50</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>
<b>17.00-17.50</b>					

**General Surgery**  
**Phase VI Week II-III**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>08.30- 09.00</b>	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Multi-disciplinary Case Discussion Conference Hall Kozyatağ	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
<b>09.00-12.00</b>	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI)	Clinical Experience (Out patient)	Clinical Experience (Out patient)
<b>12.00- 12.30</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>
<b>12.30-13.15</b>	Clinical Experience (Out patient)	Clinical Experience (Out patient)	<b>Independent Learning</b>	Clinical Experience (Out patient)	<b>Independent Learning</b>
<b>13.15- 16.00-</b>	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)	Student-Centred, Symptom-Based Learning Session Conference Hall All Groups (I-VI)	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
<b>16.00- 16.50</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>
<b>17.00-17.50</b>					

**General Surgery  
Phase VI Week IV**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>08.30- 09.00</b>	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
<b>09.00-12.00</b>	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)
<b>12.00- 12.30</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>
<b>12.30-13.15</b>	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)			
<b>13.15- 16.00-</b>	Clinical Experience (Out patient)	Clinical Experience (Out patient)	Student-Centred, Symptom-Based Learning Session Conferens Hall All Groups (I-VI)	Clinical Experience (Out patient)	<b>Program Evaluation Session</b> Review of the learning aims, Evaluation of the Course Program <i>Head of General Surgery</i>
<b>16.00- 16.50</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>
<b>17.00- 17.00</b>					

1 Seminar (all groups: All phase VI groups will attend Hospital 2<sup>nd</sup> 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.

## **EMERGENCY MEDICINE**

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

Pınar Tura, MD. Assist. Prof.

Feridun Çelikmen, MD. Assist. Prof.

Mustafa Yazıcıoğlu, MD. Assist. Prof.

Cem Şimşek, MD. Assist. Prof.

Emin Gökhan Gencer, MD. Assist. Prof.

Hande Candemir, MD. Assist. Prof.

Erman Uygun, MD, Emergency Med. Specialist

Abuzer Kekeç, 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 therapy 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 rhythm on ECG, approach to a patient 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
- communicate 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, inpatient clinics. Operation room and in other related services under the responsibility of a surgeon. They also take responsibility of patient care and work actively like the residents of the related clinic.

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

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

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

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



<b>NCC 2014 – Essential Medical Procedures (Emergency Medicine)</b>	<b>Performance Level</b>
General and symptom-based patient interview	2
Assessing mental status	2
Psychiatric history taking	2
Examination of forensic cases	2
Antropometric measurements	2
Head-Neck and ENT examination	2
Abdominal physical examination	2
Consciousness assessment and mood state examination	2
Child and newborn examination	2
Skin examination	2
Digital rectal examination	2
Obstetric examination	2
General condition and vital signs assessment	2
Eye, fundus examination	2
Gynecologic examination	2
Cardiovascular system examination	2
Musculoskeletal system examination	2
Breast and axillar region examination	2
Neurological examination	2
Respiratory system examination	2
Urological examination	2
Preparing forensic report	2
Obtaining informed consent	2
Preparing epicrisis	2
Preparing patient file	2
Referring patient appropriately	2
Preparing death certificate	2
Preparing medical reports and notice	2
Writing prescription	2
Preparing treatment refusal form	2
Providing decontamination, disinfection, sterilization, antisepsis	2
Reading direct radiographs and assessment	2
Taking and evaluating ECG	2
Measuring blood glucose level with glucometry	2
Stabilization of psychiatric emergency patient	2
Definition and management of forensic cases	2
"Airway" manipulation	2
Rational drug use	2
Preparing and applying splints	2
Bandaging and tourniquet application	2
Placement of anterior buffer and removal	2
Following child growth and development (Percentile graphics, Tanner classification)	2
Establishing IV line	2
Defibrillation	2
Incision and drainage of skin and soft tissue abscess	2
Restriction and stopping external bleeding	2
Hand washing	2
Intubation	2
Glasgow-coma-scale assessment	2
Appropriate patient transportation	2
Giving patient recovery position	2
Removal of foreign body from airway with appropriate maneuver	2
Performing IM, IV, SC, ID injection	2
Urinary catheterization	2
Providing advanced life support	2
Suicide intervention	2
Measuring blood pressure	2

Performing blood transfusion	2
Thick removal	2
Enema administration	2
Performing lomber puncture	2
Gastric lavage	2
Minimental state examination	2
Nasogastric catheterization	2
Delivering oxygen and administering nebule-inhaler treatment	2
Cervical collar application	2
Providing basic life support	2
Noenatal rescucitation	2
Superficial suturing and removal of sutures	2

**EMERGENCY DEPARTMENT  
PHASE VI WEEK I**

	Day 1	Day 2	Day 3	Day 4	Day 5
08.30- 09.00	<b>Introductory Session</b> Introduction to <i>Emergency Medicine</i> Sezgin Sarıkaya	Ward Round	Multi-disciplinary Case Discussion Conference Hall	Ward Round	Ward Round
09.00- 12.00	<b>Resuscitation</b> Basic Principles of Airway Management and DAI Mustafa Yazıcıoğlu Difficult Airway and Alternate Airway Devices Mustafa Yazıcıoğlu	Clinical Experience (Outpatient)	Disaster Medicine/CBRN-E Mustafa Ferudun Çelikmen	Clinical Experience (Outpatient)	Journal Club
12.00- 12.30	Lunch	Lunch	Lunch	Lunch	Lunch
12.30- 16.00	Basic and Advanced Life Support for Adults Cem Şimşek Basic and Advanced Life Support for Children Cem Şimşek	Clinical Experience (Outpatient)	Intoxicated Patient Erman Uygun Toxidromes Erman Uygun	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
17.00- 00.00	Night Shift	Night Shift	Night Shift	Night Shift	Night Shift

**EMERGENCY DEPARTMENT  
PHASE VI WEEK II**

	Day 1	Day 2	Day 3	Day 4	Day 5
<b>08.30- 09.00</b>	Ward Round	Ward Round	Ward Round	Ward Round	Ward Round
<b>09.00- 12.00</b>	<b>Cardiac and Respiratory Emergencies</b>  STEMI / NSTEMI USAP and Risk Stratification <b>Emin Gökhan Gencer</b>	Clinical Experience (Outpatient)	Rythm Disturbances and Appropriate Treatment <b>Cem Şimşek</b>	Clinical Experience (Outpatient)	Journal Club
<b>12.00- 12.30</b>	Lunch	Lunch	Lunch	Lunch	Lunch
<b>12.30- 16.00</b>	Shortness of Breath <b>Abuzer Kekeç</b> Pulmonary Embolism <b>Abuzer Kekeç</b>	Clinical Experience (Outpatient)	Acute Renal Failure <b>Hande Candemir</b>	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
<b>17.00- 00.00</b>	Night Shift	Night Shift	Night Shift	Night Shift	Night Shift

**EMERGENCY DEPARTMENT  
PHASE VI WEEK III**

	Day 1	Day 2	Day 3	Day 4	Day 5
<b>08.30- 09.00</b>	Ward Round	Ward Round	Multi-disciplinary Case Discussion Conference Hall	Ward Round	Ward Round
<b>9.00-12.00</b>	<b>Trauma</b> Management of Polytrauma Patient <b>Sezgin Sarıkaya</b> Abdominal and Chest Trauma <b>Sezgin Sarıkaya</b> Head and Spinal Trauma <b>Mustafa Ferudun Çelikmen</b>	Clinical Experience (Outpatient)	Intern Presentation Journal Club	Clinical Experience (Outpatient)	Journal Club
<b>12.00- 12.30</b>	Lunch	Lunch	Lunch	Lunch	Lunch
<b>12.30-16.00</b>	Pelvic Trauma and Transfusion Principles <b>Emin Gökhan Gencer</b>	Clinical Experience (Outpatient)	Approach to Abdominal Pain <b>Pınar Tura</b>	Clinical Experience (Outpatient)	Clinical Experience (Outpatient)
<b>17.00-00.00</b>	Night Shift	Night Shift	Night Shift	Night Shift	Night Shift

**EMERGENCY DEPARTMENT  
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	Ward Round	Ward Round
09.00-12.00	<b>Neurological Emergencies</b> Stroke Abuser Kekeç TIA Abuzer Kekeç	Clinical Experience (Outpatient)	Student-Centred, Symptom- Based Learning Session <b>All Groups Conference</b> Hall	Clinical Experience (Outpatient)	Journal Club
12.00- 13.15	Lunch	Lunch	Lunch	Lunch	Lunch
13.15- 16.00	Altered Mental Status Hande Candemir	Clinical Experience (Outpatient)	Student-Centred, Symptom- Based Learning Session <b>All Groups Conference</b> Hall	Clinical Experience (Outpatient)	<b>Program Evaluation Session</b> Review of the learning aims, Evaluation of the Course Program Head of Emergency Department
17.00-00.00	Night Shift	Night Shift	Night Shift	Night Shift	Night Shift

## **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.

Serhat Tunç, MD. Assoc. Prof.

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

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

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

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

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

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

<b>NCC 2014 – Essential Medical Procedures (Psychiatry)</b>	<b>Performance Level</b>
General and symptom-based patient interview	3
Assessing mental status	4
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
Assessing suicidal risk	2
Suicide intervention	2
Minimental state examination	3
Defining concent capacity	3

**Psychiatry  
Phase VI Week I**

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

**Psychiatry**  
**Phase VI Week II-III**

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>08.30- 09.00</b>	Discussions (small groups)	Discussions (small groups)	Discussions (small groups)	Discussions (small groups)	Discussions (small groups)
<b>09.00-12.00</b>	Ward Round	Clinical Experience (History taking)	Student-Centred, Symptom-Based Learning Session <b>All Groups Conference Hall</b> 2. week	Clinical Experience (Out patient)	Grand Round
<b>12.00- 13.00</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>
<b>13.00- 15.00-</b>	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)	Student-Centred, Symptom-Based Learning Session <b>All Groups Conference Hall</b> 2.week	Clinical Experience (Inpatient)	Clinical Experience (Inpatient)
<b>15.00- 17.50</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>

**Psychiatry**  
**Phase VI Week IV**

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

## **RURAL MEDICINE**

**Recep Erol Sezer, MD. Prof of Public Health**

**Head of the Department of Public Health**

### **Faculty**

**Güldal İzbirak, MD. Prof. of Medical Education**

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

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

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

**M.Ferudun Çelikmen, MD, Assist. Prof. of Emergency Medicine**

**Ebru Çayır, MD. Assist. Prof. of Family Medicine**

## **FAMILY HEALTH CENTERS**

### **Ataşehir Region**

**Atatürk FHC: Behçet Gök, MD**

Eda Tezcan Aydın, MD

**Kayışdağı FHC: Önder Yiğit, MD**

Nazan Kader Ertuğrul, MD

**Ataşehir Kanuni No 2 FHC: Gözde Metin Bat, MD**

### **Kadıköy Region**

**Kozyatağı FHC: Kemal Murat Ünalmış, MD**

Deniz Oğuz, MD

**Merdivenköy FHC: Ertuğrul Keskin, MD**

**Kadıköy No 3 FHC: Eylem Karaalp, MD**

## **COMMUNITY HEALTH CENTERS**

**Ataşehir CHC: Arife Midyat, MD**

**Kadıköy CHC: Neslihan Uyar, MD**

## **TUBERCULOSIS CENTERS**

**Kartal TC**

**Pendik TC**

**Kadıköy TC**

**Üsküdar TC**

## **AIM AND OBJECTIVES OF PHASE VI RURAL MEDICINE INTERNSHIP PROGRAM**

### **AIM**

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

### **LEARNING OBJECTIVES**

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

#### **KNOWLEDGE**

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

#### **SKILLS**

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

#### **ATTITUDE**

- \_ value the meaning and importance of teamwork for public health

<b>NCC 2014 – Essential Medical Procedures (Rural Medicine)</b>	<b>Performance Level</b>
Examination of forensic cases	1
Crime scene investigation	1
Death examination	3
Preparing forensic report	3
Obtaining informed consent	3
Preparing death certificate	4
Preparing treatment refusal form	3
Leading immunization services	3
Preparing medical reports and notice	3
Referring patient appropriately	3
Defining and finding solution for health associated problems in community using epidemiological methods.	3
Water disinfection	3
Obtaining water sample	3
Defining and evaluating chlorine level in water	3
Organizational of emergency services	3
Providing health services under extraordinary condition	3
Fighting against communicable diseases in community	3



**PHASE VI RURAL MEDICINE ROTATIONS 2022 - 2023**

<b>Group s</b>	<b>Seminars 2 Weeks</b>	<b>Family Health Center 2 Weeks</b>	<b>Public Health Center 2 Weeks</b>	<b>Tuberculosis Center 1 Week</b>	<b>Family Medicine Department Research Presentations</b>
<b>5</b>	July 01- 15, 2022	18.07.2022 29.07.2022 5 /A	18.07.2022 29.07.2022 5/B	August, 15-19, 2022	August, 22 - 31, 2022
		01.08.2022 12.08.2022 5/B	01.08.2022 12.08.2022 5/A		
<b>6</b>	September 01- 09, 2022	12.09.2022 23.09.2022 6/A	12.09.2022 23.09.2022 6/B	October, 10 - 14, 2022	October, 17 - 31, 2022
		26.09.2022 07.10.2022 6/B	26.09.2022 07.10.2022 6/A		
<b>1</b>	November, 01 - 11, 2022	14.11.2022 25.11.2022 1/A	14.11.2022 25.11.2022 1/B	December, 12 - 16, 2022	December, 19-31, 2022
		28.11.2022 09.12.2022 1/B	28.11.2022 09.12.2022 1/A		
<b>2</b>	January, 01 - 13, 2023	16.01.2023 27.01.2023 2/A	16.01.2023 27.01.2023 2/B	February, 13 - 17, 2023	February, 20 – 28, 2023
		30.01.2023 10.02.2023 2/B	30.01.2023 10.02.2023 2/A		
<b>3</b>	March, 01 - 10, 2023	13.03.2023 24.03.2023 3/A	13.03.2023 24.03.2023 3/B	April, 10 - 14, 2023	April, 17 - 30, 2023
		27.03.2023 07.04.2023 3/B	27.03.2023 07.04.2023 3/A		
<b>4</b>	May, 01-12, 2023	15.05.2023 26.05.2023 4/A	15.05.2023 26.05.2023 4/B	June, 12 - 16, 2023	June, 19 - 30, 2023
		29.05.2023 09.06.2023 4/B	29.05.2023 09.06.2023 4/A		

**FHC: FAMILY HEALTH CENTER**  
**PHC: PUBLIC HEALTH CENTER**  
**TC: TUBERCULOSIS CENTER**

**Rural Medicine (RM)  
Phase VI Week I**

	Day 1	Day 2	Day 3	Day 4	Day 5
09.00- 09.50	<b>Introductory Session</b> (Introduction to Family Medicine and Public Health) Recep Erol Sezer	<b>Independent Learning</b> Literature search for study proposal	<b>Interactive Lecture</b> Tobacco Control Recep Erol Sezer	<b>Independent Learning</b> Literature search for study proposal	<b>Independent Learning</b> Literature search for study proposal
10.00- 11.50	<b>Interactive Lecture</b> Community-oriented Primary Care: Concepts and History Recep Erol Sezer		<b>Discussion</b> Tobacco Control Recep Erol Sezer		
11.00- 11.50	<b>Interactive Lecture</b> Treating Tobacco Use and Dependence Recep Erol Sezer		<b>Discussion</b> Tobacco Control Recep Erol Sezer		<b>Lecture</b> Writing a Study Proposal Özlem Tanrıöver
12.00- 12.50	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>
13.00- 13.50	<b>Discussion</b> Treating Tobacco Use and Dependence in Primary Care Recep Erol Sezer	<b>Independent Learning</b> <i>Literature search for study proposal</i>	<b>Interactive Lecture</b> Chronic Disease Control in Primary Care Recep Erol Sezer	<b>Lecture</b> Critical Appraisal of Manuscripts Hale Arık Taşyikan	<b>Interactive Lecture</b> Legal Responsibilities in Primary Care Arzu Akalın
14.00- 14.50	<b>Discussion</b> Treating Tobacco Use and Dependence in Primary Care Recep Erol Sezer		<b>Discussion</b> Chronic Disease Control in Primary Care Recep Erol Sezer	<b>Discussion</b> Critical Appraisal of Manuscripts Hale Arık Taşyikan	<b>Interactive Lecture</b> Legal Responsibilities in Primary Care Arzu Akalın
15.00- 15.50	<b>Discussion</b> Treating Tobacco Use and Dependence in Primary Care Recep Erol Sezer		<b>Discussion</b> Chronic Disease Control in Primary Care Recep Erol Sezer		<b>Interactive Lecture</b> Legal Responsibilities in Primary Care Arzu Akalın
16.00- 16.50	<b>Independent Learning</b>		<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>
17.00-17:50					

**Rural Medicine (RM)  
Phase VI Week II**

	Day 1	Day 2	Day 3	Day 4	Day 5
09.00- 09.50	<b>Lecture</b> Disaster Preparedness and Disaster Medicine Basics* Ferudun Çelikmen	<b>Independent Learning</b> Study proposal- working with consultants	<b>Lecture</b> Health Care Organization in Turkey Güldal İzbirak	<b>Independent Learning</b> Study proposal- working with consultants	<b>Independent Learning</b> Study proposal- working with consultants
10.00- 10.50			<b>Lecture</b> Health Care Organization in Turkey Güldal İzbirak		
11.00- 11.50			<b>Lecture</b> Health Care Organization in Turkey Güldal İzbirak		
12.00- 12.50	Lunch	Lunch	Lunch	Lunch	Lunch
13.00- 13.50	<b>Lecture</b> Disaster Preparedness and Disaster Medicine Basics* Ferudun Çelikmen	<b>Lecture</b> Ebru Çayır	<b>Interactive Lecture</b> Death Certificate Arzu Akalın	<b>Independent Learning</b>	<b>Independent Learning</b>
14.00- 14.50			<b>Interactive Lecture</b> Death Certificate Arzu Akalın		
15.00- 15.50		<b>Independent Learning</b>	<b>Interactive Lecture</b> Death Certificate Arzu Akalın		
16.00- 17.50			<b>Independent Learning</b>		

\* Detailed Program is given in the following pages after weekly schedules.

**Rural Medicine (RM)**  
**Phase VI Week III**

	Day 1		Day 2		Day 3		Day 4		Day 5	
09.00- 09.50	Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)	
10.00- 11.50	Groups A Family Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center	Groups B Public Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center
12.00- 12.50	Lunch		Lunch		Lunch		Lunch		Lunch	
13.00- 13.50	Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Independent Learning	
14.00- 15.50	Groups A Family Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center		
16.00- 16.50	Independent Learning		Independent Learning		Independent Learning		Independent Learning			
17.00-17:50										

**Rural Medicine (RM)**  
**Phase VI Week IV**

	Day 1		Day 2		Day 3		Day 4		Day 5
09.00- 09.50	Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Student-Centred, Symptom-Based Learning Session All Groups Conference Hall		Clinical Experience (Ambulatory)		Reflection Session Moderator: R. Erol Sezer
10.00- 11.50	Groups A Family Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center			Groups A Family Health Center	Groups B Public Health Center	
12.00- 12.50	Lunch		Lunch		Lunch		Lunch		Lunch
13.00- 13.50	Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Independent Learning
14.00- 15.50	Groups A Family Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center	Groups A Family Health Center	Groups B Public Health Center	
16.00- 16.50	Independent Learning		Independent Learning		Independent Learning		Independent Learning		
17.00-17:50									

**Rural Medicine (RM)  
Phase VI Week V**

	Day 1		Day 2		Day 3		Day 4		Day 5	
09.00- 09.50	Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)	
10.00- 10.50	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center
11.00- 11.50										
12.00- 12.50	Lunch		Lunch		Lunch		Lunch		Lunch	
13.00- 13.50	Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Independent Learning	
14.00- 14.50	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center		
15.00- 15.50										
16.00- 16.50	Independent Learning		Independent Learning		Independent Learning		Independent Learning			
17.00-17:50										

**Rural Medicine (RM)**  
**Phase VI Week VI**

	Day 1		Day 2		Day 3		Day 4		Day 5
09.00- 09.50	Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Reflection Session Moderator: Recep Erol Sezer
10.00- 10.50	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	
11.00- 11.50									
12.00- 12.50	Lunch		Lunch		Lunch		Lunch		Lunch
13.00- 13.50	Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Clinical Experience (Ambulatory)		Independent Learning
14.00- 14.50	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	Groups A Public Health Center	Groups B Family Health Center	
15.00- 15.50									
16.00- 16.50	Independent Learning		Independent Learning		Independent Learning		Independent Learning		
17.00-17:50									

**Rural Medicine (RM)**  
**Phase VI Week VII**

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



**Rural Medicine (RM)**  
**Phase VI Week VIII**

	Day 1	Day 2	Day 3	Day 4	Day 5
09.00- 11.50	<b>Independent Learning</b> Study proposal- working with consultants	<b>Independent Learning</b> Study proposal- working with consultants	<b><i>Student-Centred, Symptom-Based Learning Session</i></b> <b><i>All Groups</i></b> <b><i>Conference Hall</i></b>	<b>Presentations (students)</b> Critical manuscript reading Recep Erol Sezer Özlem Tanrıöver Ayşe Arzu Akalın Hale Arık Taşyikan	<b>Independent Learning</b>
12.00- 12.50	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>	<b>Lunch</b>
13.00- 17.50	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Independent Learning</b>	<b>Presentations (students)</b> Study proposals Recep Erol Sezer Özlem Tanrıöver Ayşe Arzu Akalın Hale Arık Taşyikan	<b>Program Evaluation Session</b> Review of the rotations, Evaluation of the Rural Health Program Recep Erol Sezer Özlem Tanrıöver Ayşe Arzu Akalın Hale Arık Taşyikan

## **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

## Writing a Proposal of a Research Project

### TEN SLIDES-TWENTY MINUTES PRESENTATION

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

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

#### FEEDBACK ON PRESENTATION SKILLS

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

#### INSTRUCTIONS FOR TENS LIDES-TWENTY MINUTES PRESENTATIONS

· Use the following headings:

Background, Research question(s), Methods.

· Describe:

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

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

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

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

#### POINTS FOR DISCUSSION

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

#### SCORING CRITERIA AND GUIDELINES FOR PROPOSALS

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

**Yeditepe University Faculty of Medicine Phase VI  
Rural Health Project Assessment Scale**

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

## Reviewing an Article

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

Critical Appraisal of Medical Manuscripts Assessment Scale				
NAME SURNAME	Choosing the article relevant to 'rural medicine' 10P	Critical appraisal of the manuscript 50P	Presentation – Answering questions 20P	Use of time efficiently 20P

Each student will work with 3-4 people and each group will have a mentor. Mentors of groups will be declared at the first meeting.

The accomplishment of this course consists of reviewing a scientific article, proposal of a scientific project and attendance to seminars and ASM, TSM and VSD. All the tasks must be executed completely. The scales above show the essential items for the assessment.

## **ELECTIVE**

The elective clerkship is a 1 month rotation for the 6th year medical students which has been chosen by the students from the area elective courses in the curriculum .

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.

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

**The student counseling lists are announced through the Google Classroom pages of the respective phase.**



<b>YEDİTEPE UNIVERSITY FACULTY OF MEDICINE</b> <b>INTERN PHYSICIAN EVALUATION FORM</b> <i>This form includes evaluation components for intern physicians and is the basis of the passing grade for internship.</i>	
Intern's name and surname:	
Intern number:	
Internship program name:	
Dates of start and end for internship program:	
<b>1. Evaluation of Cognitive Competencies</b> <i>* The level of competency should be determined based on <b>participation in educational activities</b> (Title 1 on the <b>Intern Logbook</b>) and the observations of the Faculty Member / Internship Training Supervisor / Head of the Department for the intern.</i>	
	<b>*Competency Level</b>
<b>1.1. Clinical reasoning and decision making</b> 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 <input type="checkbox"/> Meets expectations <input type="checkbox"/> Above expectations <input type="checkbox"/> Well above expectations <input type="checkbox"/>
<b>1.2. Professional knowledge</b> 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 <input type="checkbox"/> Meets expectations <input type="checkbox"/> Above expectations <input type="checkbox"/> Well above expectations <input type="checkbox"/>
<b>1.3. Literature review and seminar presentation</b> 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 <input type="checkbox"/> Meets expectations <input type="checkbox"/> Above expectations <input type="checkbox"/> Well above expectations <input type="checkbox"/>
Explanations, opinions and recommendations based on the observations of the Faculty Member / Internship Training Supervisor / Head of the Department	
<b>2. Evaluation of Competencies for Basic Medical Practice</b> <i>* The level of competency should be determined based on <b>basic medical practice</b> (Title 2 on the <b>Intern Logbook</b>) and the observations of the Faculty Member / Internship Training Supervisor / Head of Department for the intern.</i>	
	<b>* Competency Level</b>
Basic medicine practices based on <b>Intern Logbook</b>	Does not meet expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Above expectations <input type="checkbox"/> Well above expectations <input type="checkbox"/>
Explanations, opinions and recommendations based on the observations of the Faculty Member / Internship Training Supervisor / Head of the Department	
<b>3. Evaluation of Professional Competencies for Medicine</b>	
	<b>* Competency Level</b>
<b>3.1. Communicating with patients and relatives</b>	Does not meet expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Above expectations <input type="checkbox"/> Well above expectations <input type="checkbox"/>

3.2. Compliance in hospital rules (i.e. standard operating procedures, SOPs)		Does not meet expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Above expectations <input type="checkbox"/> Well above expectations <input type="checkbox"/>																								
3.3. Working in a team and collaborating and communicating with team members		Does not meet expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Above expectations <input type="checkbox"/> Well above expectations <input type="checkbox"/>																								
3.4. Performing given tasks		Does not meet expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Above expectations <input type="checkbox"/> Well above expectations <input type="checkbox"/>																								
3.5. Diligence on attendance and participation in scientific activities		Does not meet expectations <input type="checkbox"/> Meets expectations <input type="checkbox"/> Above expectations <input type="checkbox"/> Well above expectations <input type="checkbox"/>																								
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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%																								
<p>*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 <b>unqualified</b>. In this condition, <b>FF</b> is given as a letter grade.</p> <p>**If the intern physician is deemed inadequate due to <b>absenteeism</b>, <b>FA</b> is given as a letter grade.</p> <p>Internship Evaluation End Score: .....</p> <p>Letter Grade:.....</p> <table border="1"> <thead> <tr> <th>Score Range</th> <th>Letter Grade</th> <th>Credit Rating</th> </tr> </thead> <tbody> <tr> <td>85 – 100</td> <td>AA</td> <td>4.0</td> </tr> <tr> <td>75 – 84</td> <td>BA</td> <td>3.5</td> </tr> <tr> <td>65 – 74</td> <td>BB</td> <td>3.0</td> </tr> <tr> <td>60 – 64</td> <td>CB</td> <td>2.5</td> </tr> <tr> <td>50 – 59</td> <td>CC</td> <td>2.0</td> </tr> <tr> <td>0 – 49</td> <td>FF</td> <td></td> </tr> <tr> <td>Absent</td> <td>FA</td> <td></td> </tr> </tbody> </table>			Score Range	Letter Grade	Credit Rating	85 – 100	AA	4.0	75 – 84	BA	3.5	65 – 74	BB	3.0	60 – 64	CB	2.5	50 – 59	CC	2.0	0 – 49	FF		Absent	FA	
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0 – 49	FF																									
Absent	FA																									
**Attendance	Absence $\leq$ 20% <input type="checkbox"/>	Absence > 20% <input type="checkbox"/>																								
Decision	Qualified <input type="checkbox"/>	Unqualified <input type="checkbox"/>																								

Date:

**Internship Commission:**

Faculty Member  
Internship Training Supervisor

Faculty Member  
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