



BAU TIP

BAHÇEŞEHİR UNIVERSITY SCHOOL OF MEDICINE

"scientia et amore vitae"

**BAHÇEŞEHİR UNIVERSITY
SCHOOL OF MEDICINE**

CLASS 6

ACADEMIC PROGRAMME

2025-2026

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Preface

Dear Intern Doctors,

Congratulations on earning the title of *intern doctor* by successfully completing the first five years of medical school. These years have been filled with intensive theoretical and practical training, as well as challenging examinations. As you now begin your internship, a distinctly different and equally valuable phase of your medical education awaits you.

The internship, also known as the *pre-physician* period, is designed to equip you with the essential skills required for the medical profession and to help you address any remaining gaps in your training. This period offers a unique opportunity to gain hands-on experience and develop professional confidence before entering independent medical practice.

At the Faculty of Medicine of Bahçeşehir University, the internship is conducted at our affiliated hospitals, various public hospitals, and primary healthcare institutions. Depending on the department, your training will include a wide range of educational activities such as outpatient clinics, bedside teaching, operating room participation, night shifts, seminars, and case presentations. In addition, you will visit institutions where physicians actively work, including ambulance services, municipal health services, public health laboratories, and the Medical Chamber, which serves as the professional organization of physicians.

The internship program lasts 12 consecutive months without interruption. Throughout this period, you will rotate through all departments according to the academic calendar, spending specified durations in each. Some departments also include internal rotations. Each department will outline its specific program and expectations on the first day of your rotation. You are expected to contact the internship coordinator of the relevant department on your first day.

You may also regard the internship as a trial period for your future professional career. During this time, you are expected to adopt the responsibilities, conduct, and professional appearance of a physician. The appendices of this logbook include the Internship Directive of the Faculty of Medicine of Bahçeşehir University, which outlines your rights, responsibilities, and the rules governing your internship. Additionally, you are required to comply with the regulations of the institutions where you are assigned, even if they differ from those of our faculty.

We wish you a fulfilling internship experience, during which you will grow more confident in medical practice each day and find enjoyment in learning.

6th Grade Coordinator

Internship – Time Distribution

Compulsory

Course	Duration
Internal Medicine	2 months
Pediatrics	2 months
Public Health	2 months
Obstetrics & Gynecology	1 month
General Surgery	1 month
Psychiatry	1 month
Emergency Medicine	1 month

Electives

Electives are offered in **4 separate rotations** of 15 days each.

No	Course	Duration
1	Thoracic Surgery	15 days
2	Cardiovascular surgery	15 days
3	Neurosurgery	15 days
4	Neurology	15 days
5	Cardiology	15 days
6	Pulmonary Medicine	15 days
7	Orthopedics Surgery and Traumatology	15 days
8	Otolaryngology	15 days

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Course structure diagram with credits

SIXTH YEAR					
11.Semester					
CODE	COURSE	T	P	C	E
MED6001	Internal Medicine II	0	0	0	8
MED6003	Gynecology & Obstetrics II	0	0	0	4
MED6005	Emergency Medicine I	0	0	0	4
MED6007	Psychiatry	0	0	0	4
	Departmental Elective		0	0	5
	Departmental Elective		0	0	5
				0	30
12.Semester					
CODE	COURSE	T	P	C	E
MED6002	General Surgery II	0	0	0	4
MED6004	Pediatrics II	0	0	0	8
MED6006	Public Health	0	0	0	8
	Departmental Elective	0	0	0	5
	Departmental Elective	0	0	0	5
				0	30

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Academic Calendar 2025- 2026

GROUPS	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
GROUP 1A	INTERNAL MEDICINE (01.07.2025-31.08.2025)		OBST&GYNEC (01.09.2025-30.09.2025)	GENERAL SURG (01.10.2025-31.10.2025)	PUBLIC HEALTH (01.11.2025-31.12.2025)		PEDIATRICS (01.01.2026-28.02.2026)		EMERGENCY MED (01.03.2026-31.03.2026)	PSYCHIATRY (01.04.2026-30.04.2026)		
GROUP 1B			GENERAL SURG (01.09.2025-30.09.2025)	OBST&GYNEC (01.10.2025-31.10.2025)					PSYCHIATRY (01.03.2026-31.03.2026)	EMERGENCY MED (01.04.2026-30.04.2026)		
GROUP 2A	EMERGENCY MED (01.07.2025-31.07.2025)	PSYCHIATRY (01.08.2025-31.08.2025)	INTERNAL MEDICINE (01.09.2025- 31.10.2025)		OBST&GYNEC. (01.11.2025-30.11.2025)	GENERAL SURG (01.12.2025-31.12.2025)	PUBLIC HEALTH (01.01.2026- 28.02.2026)		PEDIATRICS (01.03.2026-30.04.2026)			
GROUP 2B	PSYCHIATRY (01.07.2025-31.07.2025)	EMERGENCY MED (01.08.2025-31.08.2025)			GENERAL SURG (01.11.2025-30.11.2025)	OBST&GYNEC (01.12.2025-31.12.2025)						
GROUP 3A	PEDIATRICS (01.07.2025-31.08.2025)		EMERGENCY MED (01.09.2025-30.09.2025)	PSYCHIATRY (01.10.2025-31.10.2025)	INTERNAL MEDICINE (01.11.2025-31.12.2025)		OBST&GYNEC (01.01.2026-31.01.2026)	GENERAL SURG (01.02.2026-28.02.2026)	PUBLIC HEALTH (01.03.2026- 30.04.2026)			
GROUP 3B			PSYCHIATRY (01.09.2025-30.09.2025)	EMERGENCY MED (01.10.2025-31.10.2025)			GENERAL SURG (01.01.2026-31.01. 2026)	OBST&GYNEC (01.02. 2026-28.02. 2026)				
GROUP 4A	PUBLIC HEALTH (01.07.2025-31.08.2025)		PEDIATRICS (01.09.2025- 31.10.2025)		EMERGENCY MED (01.11.2025-30.11.2025)	PSYCHIATRY (01.12.2025-31.12.2025)	INTERNAL MEDICINE (01.01. 2026-28.02. 2026)		OBST&GYNEC (01.03.2026-31.03.2026)	GENERAL SURG (01.04.2026-30.04.2026)		
GROUP 4B					PSYCHIATRY (01.11.2025-30.11.2025)	EMERGENCY MED (01.12.2025-31.12.2025)			GENERAL SURG (01.03.2026-31.03.2026)	OBST&GYNEC (01.04.2026-30.04.2026)		
GROUP 5A	OBST&GYNEC (01.07.2025-31.07.2025)	GENERAL SURG (01.08.2025-31.08.2025)	PUBLIC HEALTH (01.09.2025- 31.10.2025)		PEDIATRICS (01.11.2025-31.12.2025)		EMERGENCY MED (01.01. 2026-31.01. 2026)	PSYCHIATRY (01.02. 2026-28.02. 2026)	INTERNAL MEDICINE (01.03.2026-30.04.2026)			
GROUP 5B	GENERAL SURG (01.07.2025-31.07.2025)	OBST&GYNEC (01.08.2025-31.08.2025)					PSYCHIATRY (01.01. 2026-31.01. 2026)	EMERGENCY MED (01.02.2026-28.02.2026)				

Administrators

Dean	Adnan Kaya, Prof. Dr.
Vice Dean	Fadime Didem Trabulus, Assoc. Prof. Dr.
Vice Dean	Timuçin Avşar, Assoc. Prof. Dr.
Class 6 Coordinator	Merjem Purelku, Assist. Prof. Dr.
Clerkship Administrator- Internal Medicine	Sema Kaymaz Tahra, Assist. Prof. Dr.
Clerkship Administrator- Pediatrics	Fatih Fakirullahoğlu, Assist. Prof. Dr.
Clerkship Administrator- Public Health	Özge Karadağ, Prof. Dr.
Clerkship Administrator-General Surgery	Emre Aray, Assist. Prof. Dr.
Clerkship Administrator- Obstetrics & Gynecology	Emine Eda Akalın, Assist. Prof. Dr.
Clerkship Administrator- Emergency Medicine	Ufuk Utku Göktuğ, Assist. Prof. Dr.
Clerkship Administrator- Psychiatry	Sibel Çakır, Prof. Dr.

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Student Groups

NO										
	1A	1B	2A	2B	3A	3B	4A	4B	5A	5B
1	1903948	2019194	2004129	2018412	2004101	2002134	2017166	2002975	1903325	1901468
2	1904020	2019833	1902710	2019760	2017277	2100993	2018928	2002946	1903963	1906913
3	2001688	2018918	2003837	2001090	2003775	1902209	2017163	2003820	1903216	2019758
4	2001960	2003596	1903284	2019777	2017583	1800669	2000900	2003102	1902103	2267544
5	2001393	2018406	2002592	1906688	2004207	2004023	2018711	2002960	1901631	1804970
6	2003502	2018563	1904520	1906876	2100994	2018285	2000585	2001927	1901610	1905454
7	2002513	2018659	1904498	2019189	2003033	2003253	2017874	2003563	1901741	2017876
8	2003458	2019728	1902281	1900757	2003922	2003281	2018535	2002813	20019198	2000186
9	2001369	2018647	2000645	2018143	2100638	2003860	2018627	1904401	2001249	2019455
10	1903955	1906452	1804454	1906896	2017324	2002836	2019871	2002377	2001406	2018574
11	1902982	2001766	2000642	2019674	1902221	2004251	2018646	2002658	1904092	2003452
12	1902671	2002417	2002717	1900753	1903902	2017445	2019130	1902972	1902377	2019054
13	2001560	2001089	1607313			1728604	1801326	2002276	2000673	1736341
14	2000695	2001009	1736202			1728688	1900708		1902549	
15	1905145	1900095	1802810				1902200		1728712	
16		1905141	1722283				1506277			

Aim and objectives of the sixth year

AIM: The aim of the sixth-year (internship) program is to enable students to integrate and apply the knowledge, skills, and professional attitudes acquired during previous years of medical education through supervised clinical and field practice.

Learning objectives:

By the end of the sixth year, students are expected to demonstrate competency in the following domains:

Knowledge:

Students should be able to:

1. Identify the biological, social, and cultural causes and risk factors of common health problems in the community.
2. Define normal and pathological clinical, laboratory, and radiological findings.
3. Explain preventive measures for the most common, life-threatening, and disabling health problems.
4. Describe the symptoms of common diseases and their clinical, radiological, pathological, and laboratory findings used in diagnosis.
5. List appropriate treatment approaches for common diseases.
6. Explain the organization, management, and functioning of primary health care facilities.
7. Recognize community health needs through field practice and describe preventive services provided in primary health care.
8. Outline the steps required to identify community health needs and manage processes during extraordinary public health threats.

Skills:

Students should be able to:

1. Apply basic medical concepts and principles in the assessment and management of clinical cases.
2. Evaluate medical records and reports related to common community diseases and establish diagnoses.
3. Manage the initial treatment of common diseases, prescribe medications appropriately, and provide referrals when necessary.
4. Perform commonly used diagnostic and therapeutic medical procedures.
5. Conduct appropriate prenatal and postnatal follow-up care.
6. Assist in normal spontaneous vaginal delivery under appropriate conditions using basic obstetric principles.
7. Perform basic care practices for healthy infants.
8. Obtain medical histories from pediatric patients and their families, manage diagnosis and treatment, and make appropriate referrals.
9. Perform initial and emergency interventions in accordance with emergency management principles and carry out basic interventional procedures.
10. Conduct differential diagnosis and initial management of common psychiatric disorders and refer patients when necessary.
11. Plan and deliver primary health education, health promotion, and preventive medicine activities.

12. Communicate effectively with patients, their families, colleagues, and the community.
13. Assess forensic cases appropriately and prepare forensic reports.
14. Prepare and deliver scientific and clinical presentations.

Attitudes:

Students should demonstrate the ability to:

1. Uphold the principle that the primary responsibility of a physician is to protect and improve individual and public health.
2. Recognize the importance of health economics and resource allocation in health care decision-making.
3. Accept responsibility for providing care in emergency situations.
4. Appreciate the importance of informing patients and their families accurately and obtaining informed consent.
5. Value honest, respectful, and effective communication with patients, families, colleagues, and health care staff.
6. Consider social determinants in the prevention and management of health problems.
7. Act in accordance with patient rights, ethical principles, and professional deontology.
8. Recognize the role and importance of health care legislation in the delivery and management of health services.
9. Conduct research related to patient care and management using library and academic resources.





INTERNAL MEDICINE

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Internal Medicine Internship Program

1- Academic Staff

INTERNAL MEDICINE		
Cengiz Bölükbaş	Prof. M.D.	Head of the Department
Fulya Coşan	Prof. M.D.	
Hamdi Levent Doğanay	Prof. M.D.	
Alpaslan Tanoğlu	Prof. M.D.	
Serap Baydur Şahin	Prof. M.D.	
Fatma Paksoy Türköz	Prof. M.D.	
Süleyman Köz	Prof. M.D.	
Ömer Topdağı	Assoc. Prof. M.D.	
Sema Türker	Assoc. Prof. M.D.	
Sema Kaymaz Tahra	Assist. Prof. M.D.	Clerkship Administrator
Sidika Gülkan Özkan	Assist. Prof. M.D.	
Tarık Ercan	Assist. Prof. M.D.	

2- Aim and objectives

Aim:

The aim of the Internal Medicine program is to train physicians who are competent in the diagnosis, management, and prevention of common internal medicine–related health problems. The program emphasizes the delivery of primary health care using current, evidence-based scientific knowledge, while maintaining ethical principles and effective communication skills.

Learning Objectives:

By the end of the Internal Medicine internship program, students are expected to achieve the following competencies:

Knowledge:

Students should be able to:

- Acquire and consolidate fundamental knowledge of internal medicine, with reinforcement in clinical areas relevant to the patients assigned to the individual student.
- Demonstrate knowledge of the scientific and pathophysiologic principles underlying disease mechanism and clinical manifestations.
- Demonstrate knowledge of commonly used procedures' indications, contraindications, and benefits.

Skills:

Students should be able to:

- Obtain accurate and relevant medical histories from all available sources and document them completely and appropriately.

- Perform and document comprehensive physical examinations.
- Establish an appropriate differential diagnosis,
- ☐ Develop diagnostic and treatment plans based on clinical findings and relevant laboratory data.
- ☐ Manage health conditions commonly encountered in adult patients in the primary care setting.
- Distinguish between emergency and non-emergency clinical situations.
- Refer patients whose diagnosis, treatment, or follow-up cannot be adequately managed at the primary care level.
- Provide follow-up care for patients with chronic diseases.
- Request consultations from other medical specialties when indicated.
- Obtain informed consent from patients and, when appropriate, from parents or legal guardians.
- Communicate effectively with patients, their families, colleagues, and other health care professionals.
- Maintain primary health care records in accordance with legal, ethical, and institutional requirements.
- Provide counseling on preventive health care practices.
- Educate patients, families, and members of the health care team effectively.

Attitudes:

- Dress and look appropriate as a medical doctor,
 - Establish professional relationships with patients and members of the multidisciplinary health care team,
 - Demonstrate sufficient interpersonal skills in building a physician-patient relationship,
 - Approach patients holistically, considering the individual as a whole rather than focusing solely on presenting complaints.
 - Respect and protect patient privacy and confidentiality.
- Utilize library resources and academic databases to research clinical issues related to patient care and management.

3- Educational methods

The Internal Medicine internship program employs the following educational methods:

- Outpatient clinic practice
- Bedside training
- Night shifts
- Seminars
- Case discussions

4- General rules of the program

Attendance

- ✓ All students are required to be present at the hospital between **08:00 and 17:00**.
- ✓ Attendance at all educational activities included in the program is **mandatory**.
- ✓ In case of lateness, students must inform their supervisor in advance. This is considered a professional and courteous practice.

Outpatient Clinics

- ✓ Students are assigned to different clinics on the first day of the program, and each clinic has specific training objectives to be completed.
- ✓ Weekly rotations between clinics are conducted.
- ✓ Students observe and participate in patient management under the supervision of faculty members.

Bedside training

- ✓ Students are required to follow hospitalized patients in their assigned clinic and document patient follow-up in the relevant section of their logbook.
- ✓ Attendance at scheduled ward rounds is mandatory.
- ✓ During ward rounds, students are expected to discuss differential diagnoses and appropriate treatment options.

Night shifts

- ✓ Students are required to complete the number of night shifts determined by the department.
- ✓ During night shifts, the supervising physician is responsible for the department, and all departmental rules must be followed.
- ✓ Students must monitor patients during night shifts and document their activities in their logbook.

Seminars and case presentations

- ✓ Each student is required to deliver one seminar and one case presentation during the clerkship. Attendance at all other seminars and case presentations is mandatory.
- ✓ Seminar topics are determined at the beginning of the program.
- ✓ Presentation schedules are arranged in accordance with the faculty members' schedules.

“Completing the logbook and obtaining the professor's signature is your responsibility.”

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the procedure is performed and explains the outcomes to the patient and/or their relatives.
2	Performs the procedure in accordance with relevant guidelines or directives in emergency situations.
3	Performs the procedure independently in uncomplicated or common cases.
4	Performs the procedure competently in complex or challenging situations

**Learning levels are designed according to the National Core Education Program.*

Procedure	Learning level*	Observed Target	Performed Target
History Taking	4	-	5
Physical Examination	4	10	5

Blood Pressure Measurement	4	20	20
Body Temperature Measurement	4	20	20
Measurement and Documentation of Vital Signs	4	20	20
Electrocardiogram (performance and interpretation)	3	10	3
Venous cannula insertion	1	10	5
Venous blood sampling	4	10	5
Arterial blood gas sampling	3	10	3
Urethral catheterization	1	10	3
Nasogastric tube insertion	3	10	3
Blood Glucose Testing (Glucometer)	4	20	5
Chest X-ray interpretation	3	40	20
Intramuscular injection	4	10	5
Oxygen Therapy Administration	4	20	10
Nebulizer Treatment Administration	4	20	10
Administration of IV fluids and medications	4	20	10
Blood sample collection	4	20	10
Cardiopulmonary resuscitation	4	2	-
Blood marrow aspiration/biopsy	1	2	-
Paracentesis/thoracentesis	1	10	-
Prescription writing	4	10	
Healthy diet counseling	4		10



PEDIATRICS

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Pediatrics Internship Program

1- Academic Staff

PEDIATRICS		
Gülendam Esmer	Prof. M.D.	
Duygu Övünç Hamdioğlu	Prof. M.D.	Head of the Department
Bora Baysal	Assoc. Prof. M.D.	
Hatice Gülhan Sözen	Assist. Prof. M.D.	
Mehmet Fatih Fakirullahoğlu	Assist. Prof. M.D.	Clerkship Administrator
Safiye Suna Çelen	Assist. Prof. M.D.	
Yiğit Mustafa Ertunç	Assist. Prof. M.D.	
Mehmet Akif Gökteş	Assist. Prof. M.D.	
İsmail KAYTAN	Assist. Prof. M.D.	

2- Aim and objectives

Aim: The aim of the Pediatrics rotation is to ensure that, by the end of the program, interns are knowledgeable about common pediatric diseases, competent in approaching and examining sick children, and able to plan appropriate investigations and organize patient management.

Learning Objectives:

By the end of the Pediatrics internship program, students are expected to achieve the following:

Knowledge:

Students should be able to:

- Demonstrate comprehensive knowledge of pediatric topics covered during the 3rd and 4th years of the medical curriculum.

Skills:

Students should be able to:

- Establish an appropriate and empathetic relationship with children and their parents or caregivers.
- Obtain accurate and relevant medical histories from all appropriate sources and document them clearly and concisely.
- Perform and record a thorough physical examination
- Plan appropriate laboratory investigations based on medical history and physical examination findings.
- Interpret and evaluate laboratory data.
- Develop appropriate differential diagnoses.
- Formulate diagnostic and therapeutic plans based on clinical findings and laboratory data.
- Present patient cases clearly and systematically.
- Inform patients and parents or caregivers about management plans.
- Prepare discharge (epicrisis) reports accurately.
- Obtain informed consent when required.
- Prepare medical referral reports.

- Explain referral procedures and indications.
- Identify patients who require hospital admission.
- Review relevant medical literature and present findings.

Attitudes:

- Dress and look appropriate as a medical doctor,
- Establish professional relationships with patients and members of the multidisciplinary health care team,
- Demonstrate sufficient interpersonal skills in building a physician-patient relationship,
- Approach patients holistically, considering the individual as a whole rather than focusing solely on presenting complaints.
- Respect and protect patient privacy and confidentiality.
Utilize library resources and academic databases to research clinical issues related to patient care and management.

3- Educational methods

The Pediatrics internship program employs the following educational methods:

- Outpatient clinic practice
- Bedside training
- Night shifts
- Seminars
- Case discussions

4- General rules of the program

Attendance

- ✓ All students are required to be present at the hospital between **08:00 and 17:00**.
- ✓ Attendance at all educational activities included in the program is **mandatory**.
- ✓ In case of lateness, students must inform their supervisor in advance. This is considered a professional and courteous practice.

Outpatient Clinics

- ✓ Students are assigned to different clinics on the first day of the program, and each clinic has specific training objectives to be completed.
- ✓ Weekly rotations between clinics are conducted.
- ✓ Students observe and participate in patient management under the supervision of faculty members.

Bedside training

- ✓ Students are required to follow hospitalized patients in their assigned clinic and document patient follow-up in the relevant section of their logbook.
- ✓ Attendance at scheduled ward rounds is mandatory.
- ✓ During ward rounds, students are expected to discuss differential diagnoses and appropriate treatment options.

Night shifts

- ✓ Students are required to complete the number of night shifts determined by the department.
- ✓ During night shifts, the supervising physician is responsible for the department, and all departmental rules must be followed.
- ✓ Students must monitor patients during night shifts and document their activities in their logbook.

Seminars and case presentations

- ✓ Each student is required to deliver one seminar and one case presentation during the clerkship. Attendance at all other seminars and case presentations is mandatory.
- ✓ Seminar topics are determined at the beginning of the program.
- ✓ Presentation schedules are arranged in accordance with the faculty members' schedules.

Rotations in other hospitals

Students will rotate two days per week in public hospitals to gain experience with a high diversity of patients.

“Completing the logbook and obtaining the professor's signature is your responsibility.”

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the procedure is performed and explains the outcomes to the patient and/or their relatives.
2	Performs the procedure in accordance with relevant guidelines or directives in emergency situations.
3	Performs the procedure independently in uncomplicated or common cases.
4	Performs the procedure competently in complex or challenging situations

*Learning levels are designed according to the National Core Education Program.

Procedure	Learning level*	Observed Target	Performed Target
History taking (general and specific)	4		10
Anthropometric measurements	4		10
Measuring & documenting vital signs	4		10
Measuring and evaluating pulse oximetry	4		10
Physical examination of children and infants	4		10
Cardiovascular system examination	4		10
Abdominal examination	4		10
Respiratory system examination	4		10
Neurologic examination	3		10
Ordering and evaluating laboratory tests	4	10	

Ordering radiological investigation	3	5	
Chest X-ray interpretation	4		5
Electrocardiogram (performance and interpretation)	4		5
Evaluating urine analysis	3	3	
Evaluating blood smear	3	3	
Performing throat culture	3	3	
Capillary blood sampling	4	3	
Venous blood sampling	4	5	
Venous cannula insertion	1	5	
Intramuscular injection	4	5	
Urethral catheterization	3	2	
Nasogastric tube insertion	4	2	
Administer oxygen	4	5	
Administer nebulizer treatment	4	2	
Administration of IV fluids and medications	4	5	
Taking blood culture	3	2	
Newborn resuscitation	4	2	
Supply postnatal newborn care	4	5	
Giving breastfeeding education	4	5	
Performing metabolic screen test	4	5	
Prescription writing	4	5	
Follow-up healthy infant and child	4	10	
Counselling and advising on immunization	4	10	
Counselling and advising on healthy nutrition	4	10	
Counselling and follow-up metabolic and endocrinologic screening programs	4	10	
Healthy diet guidance	4		10
Follow up and criticize UpToDate literature	4	10	1



GYNECOLOGY AND OBSTETRICS

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Gynecology and Obstetrics Internship Program

1- Academic Staff

GYNECOLOGY AND OBSTETRICS		
Tolga Taşçı	Prof. M.D.	Head of the Department
Cihan Çetin	Prof. M.D.	
Aynur Advıye Erşahin	Prof. M.D.	
Nur Dokuzeylül Güngör	Assoc. Prof. M.D.	
Emine Eda Akalin	Assist. Prof. M.D.	Clerkship Administrator
Ömer Uluggerli	Assist. Prof. M.D.	
Özge Kınlı Yıldız	Assist. Prof. M.D.	
Zübeyde Aytufan	Assist. Prof. M.D.	
Dilan Ünsal Kaya	Assist. Prof. M.D.	

2- Aim and Objectives

Aim: The aim of the Gynecology and Obstetrics internship program is to train medical graduates who are capable of recognizing the clinical signs and symptoms of common gynecological diseases, pregnancy-related conditions, and childbirth processes; and who can provide appropriate preventive and primary health care services using up-to-date, evidence-based scientific knowledge, effective communication skills, and ethical principles.

Learning Objectives:

At the end of the Gynecology and Obstetrics internship program, the students should be able to:

Knowledge:

- Differentiate between normal and abnormal uterine bleeding based on the physiology of the menstrual cycle, puberty, and menopause.
- List and explain available contraceptive methods.
- Diagnose pregnancy and assess its stages.
- Distinguish between normal and abnormal physiological changes during pregnancy.
- Analyze the effects of genetic factors, maternal medical conditions, and environmental influences on maternal health and fetal development.
- Identify risk factors for obstetric emergencies, including preeclampsia, eclampsia, antepartum hemorrhage, and postpartum hemorrhage.
- Diagnose common gynecological conditions such as amenorrhea, menopause, abnormal uterine bleeding, and postmenopausal bleeding; list their causes and guide patients appropriately.
- Identify the causes and transmission routes of sexually transmitted diseases.
- Develop differential diagnoses for patients presenting with common benign gynecological conditions.
- List risk factors associated with gynecological malignancies.
- Formulate differential diagnoses for acute abdomen and chronic pelvic pain.
- Outline the etiology, evaluation, and basic management of infertility.

Skills:

- Obtain comprehensive gynecological and obstetric histories from patients.
- Apply recommended preventive health strategies for women across all stages of life.
- Monitor and follow up pregnancies by ordering appropriate investigations and interpreting routine antenatal test results.
- Clerk, investigate, and present patients effectively during ward rounds.
- Perform first aid and transport the patient in obstetric and gynecologic emergencies,
- Inform the patient about protection and prophylaxis methods for sexually transmitted diseases, order relevant diagnostic tests, and initiate the appropriate treatment,
- Perform cervical smear screening, evaluate the result, and refer patients for further evaluation and treatment when indicated.

Attitudes:

- Dress and look appropriate as a medical doctor,
- Establish professional relationships with patients and members of the multidisciplinary health care team,
- Demonstrate sufficient interpersonal skills in building a physician-patient relationship,
- Approach patients holistically, considering the individual as a whole rather than focusing solely on presenting complaints.
- Respect and protect patient privacy and confidentiality.
Utilize library resources and academic databases to research clinical issues related to patient care and management.

3- Educational methods

The Gynecology and Obstetrics internship program employs the following educational methods:

- Outpatient clinic practice
- Bedside training
- Surgery ward and delivery room
- Night shifts
- Seminars
- Case discussions
- Rotations in other hospitals

4- General rules of the program

Attendance

- ✓ All students are required to be present at the hospital between **08:00 and 17:00**.
- ✓ Attendance at all educational activities included in the program is **mandatory**.
- ✓ In case of lateness, students must inform their supervisor in advance. This is considered a professional and courteous practice.

Outpatient Clinics

- ✓ Students are assigned to different clinics on the first day of the program, and each clinic has specific training objectives to be completed.
- ✓ Weekly rotations between clinics are conducted.
- ✓ Students observe and participate in patient management under the supervision of faculty members.

Bedside training

- ✓ Students are required to follow hospitalized patients in their assigned clinic and document patient follow-up in the relevant section of their logbook.

- ✓ Attendance at scheduled ward rounds is mandatory.
- ✓ During ward rounds, students are expected to discuss differential diagnoses and appropriate treatment options.

Surgery ward and delivery room

- ✓ All students must obey the rules in surgery ward and delivery room.

Night shifts

- ✓ Students are required to complete the number of night shifts determined by the department.
- ✓ During night shifts, the supervising physician is responsible for the department, and all departmental rules must be followed.
- ✓ Students must monitor patients during night shifts and document their activities in their logbook.

Seminars and case presentations

- ✓ Each student is required to deliver one seminar and one case presentation during the clerkship. Attendance at all other seminars and case presentations is mandatory.
- ✓ Seminar topics are determined at the beginning of the program.
- ✓ Presentation schedules are arranged in accordance with the faculty members' schedules.

Rotations in other hospitals

Students will rotate two days per week in public hospitals to gain experience with a high diversity of patients.

“Completing the logbook and obtaining the professor's signature is your responsibility.”

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the procedure is performed and explains the outcomes to the patient and/or their relatives.
2	Performs the procedure in accordance with relevant guidelines or directives in emergency situations.
3	Performs the procedure independently in uncomplicated or common cases.
4	Performs the procedure competently in complex or challenging situations

**Learning levels are designed according to the National Core Education Program.*

Procedure	Learning level*	Observed Target	Performed Target
History taking (Gynecology)	3	10	5
History taking (Obstetrics)	3	10	20
Gynecological examination	3	5	-
Pregnancy examination	3	5	3
Obtaining informed consent	4	5	5

Writing Epicrisis	4	10	5
Wound care and dressing	3	2	-
Vaginal smear sampling	3	2	-
Management of normal labor	2	5	5
Urethral catheterization	3	5	5
Non-stress test (NST)	1	10	10
Intrauterine device (IUD) insertion	1	5	2
Prescription writing	4	3	3
Episiotomy	2	3	2
Postnatal care of the mother	3	10	-



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GENERAL SURGERY

BAU TIP
BAHÇEŞEHİR ÜNİVERSİTESİ TIP FAKULTESİ

General Surgery Internship Program

1- Academic Staff

GENERAL SURGERY		
Deniz Balci	Prof. M.D.	Head of the Department
Levent Kaptanoğlu	Prof. M.D.	
Metin Kement	Prof. M.D.	
Fadime Didem Trabulus	Assoc. Prof. M.D.	
Babek Tabandeh	Assist. Prof. M.D.	
Emre Aray	Assist. Prof. M.D.	Clerkship administrator
Mehmet İlker Özel	Assist. Prof. M.D.	
Ufuk Utku Göktuğ	Assist. Prof. M.D.	
Yalçın Burak Kara	Assist. Prof. M.D.	

2- Aim and objectives

Aim: The aim of the General Surgery Internship Program is to develop medical graduates who are competent in the comprehensive assessment and management of surgical patients. The program aims to equip interns with the ability to integrate clinical reasoning, procedural skills, and evidence-based knowledge in diagnosing and managing surgical conditions, while ensuring safe perioperative care, effective communication, teamwork, and adherence to ethical and professional standards.

Learning Objectives:

At the end of the General Surgery internship program, students should be able to:

Knowledge:

- Demonstrate a comprehensive understanding of common surgical conditions and their clinical presentations,
- Understand surgical treatments and alternatives to surgical treatment,
- Become familiar with various surgical procedures and know their expected outcomes and complications,
- Appropriately select and interpret diagnostic tests based on pre-test probability and the likelihood of influencing clinical management,
- Demonstrate knowledge of the indications, dosages, mechanisms of action, and safe use of commonly prescribed pharmacological agents in surgery (e.g., analgesics, antibiotics, anticoagulants, sedatives),
- Gain knowledge about the fundamental principles of disaster and mass-casualty management.

Skills:

At the end of the General Surgery internship program, students should be able to:

- Obtain an accurate, comprehensive medical history from adult surgical patients,
- Perform, document, and interpret a thorough physical examination.
- Choose appropriate laboratory tests and imaging methods according to the clinical condition and the level of primary care.
- Interpret the results of the common laboratory tests and common radiological investigation results.
- Develop an appropriate differential diagnosis,
- Formulate a diagnostic and therapeutic plan for his/her patient based on gathered clinical information and laboratory data,
- Distinguish between emergency and non-emergency surgical conditions,
- Write and manage patient orders,
- Clerk, investigate and present patients effectively during ward rounds,
- Understand and, when appropriate, perform basic surgical procedures under supervision,
- Use effective oral and written presentation skills,
- Prepare patients adequately for surgical procedures,
- Participate in surgical operations in accordance with assigned responsibilities,
- Apply operating room protocols, including proper scrubbing and sterile techniques,
- Manage patients presenting with gastrointestinal bleeding,
- Approach and evaluate patients with acute and chronic abdominal pain,
- Assess and manage patients with polytrauma,
- Perform wound care and follow-up,
- Suture of laceration and remove of stitches,
- Recognize, classify, and manage different types of shock, including appropriate differential diagnosis and treatment selection,
- Learn how to perform drain care and postoperative monitoring,
- Learn how to insert, manage, monitor, and remove nasogastric tubes and urinary catheters,
- Request consultations from other medical specialties when indicated,
- Follow postoperative patients until discharge and prepare appropriate discharge summaries,
- Write accurate and appropriate prescriptions,
- Design simple scientific studies applicable to primary care settings.

Attitudes:

- Dress and look appropriate as a medical doctor,
- Establish professional relationships with patients and members of the multidisciplinary health care team,
- Demonstrate sufficient interpersonal skills in building a physician-patient relationship,
- Approach patients holistically, considering the individual as a whole rather than focusing solely on presenting complaints.
- Respect and protect patient privacy and confidentiality.
- Obtain informed consent, when necessary,

- Utilize library resources and academic databases to research clinical issues related to patient care and management.

3- Educational methods

The General Surgery internship program employs the following educational methods:

- Outpatient clinic practice
- Bedside training
- Surgery ward
- Night shifts
- Seminars
- Case discussions

4- General rules of the program

Attendance

- ✓ All students are required to be present at the hospital between **08:00 and 17:00**.
- ✓ Attendance at all educational activities included in the program is **mandatory**.
- ✓ In case of lateness, students must inform their supervisor in advance. This is considered a professional and courteous practice.

Outpatient clinics

- ✓ Students are assigned to different clinics on the first day of the program, and each clinic has specific training objectives to be completed.
- ✓ Weekly rotations between clinics are conducted.
- ✓ Students observe and participate in patient management under the supervision of faculty members.

Bedside training

- ✓ Students are required to follow hospitalized patients in their assigned clinic and document patient follow-up in the relevant section of their logbook.
- ✓ Attendance at scheduled ward rounds is mandatory.
- ✓ During ward rounds, students are expected to discuss differential diagnoses and appropriate treatment options.

Surgery ward and delivery room

- ✓ All students must obey the rules in surgery ward.

Night shifts

- ✓ Students are required to complete the number of night shifts determined by the department.
- ✓ During night shifts, the supervising physician is responsible for the department, and all departmental rules must be followed.
- ✓ Students must monitor patients during night shifts and document their activities in their logbook.

Seminars and case presentations

- ✓ Each student is required to deliver one seminar and one case presentation during the clerkship. Attendance at all other seminars and case presentations is mandatory.
- ✓ Seminar topics are determined at the beginning of the program.
- ✓ Presentation schedules are arranged in accordance with the faculty members' schedules.

“Completing the logbook and obtaining the professor's signature is your responsibility.”

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the procedure is performed and explains the outcomes to the patient and/or their relatives.
2	Performs the procedure in accordance with relevant guidelines or directives in emergency situations.
3	Performs the procedure independently in uncomplicated or common cases.
4	Performs the procedure competently in complex or challenging situations

**Learning levels are designed according to the National Core Education Program.*

Procedure	Learning level*	Observed Target	Performed Target
History taking	4	10	5
Physical examination	4	10	20
Obtaining informed consent	4	5	-
Writing discharge summary	4	5	3
Measurement and documentation of vital signs	4	5	5
Venous cannula insertion	1	10	5
Central venous line insertion	1	2	-
Arterial blood gas sampling	3	2	-
Venous blood sampling	4	5	5
Wound suturing	4	5	5
Wound care and dressing	3	10	10
Removal of sutures	4	5	2
Urethral catheterization	3	3	3
Nasogastric tube insertion	4	3	2
Chest/urinary/Abdominal evaluation X-ray	3	10	-
Abscess drainage	1	2	1
Intramuscular, intravenous injection	4	10	3
Local anesthesia administration	1	3	-
Removal of drains	1	5	5
Drain, catheter monitoring/evaluation	1	10	5
Breast and axillary examination	3	10	10
Rectal examination	3	2	1
Hernia examination	1	2	2
Application of operating room protocols (scrubbing, gloving, prepping, draping)	4	5	5
Evaluation of nutritional status	4	2	2



PSYCHIATRY

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Psychiatry

1- Academic Staff

PSYCHIATRY		
Sibel Çakır	Prof. M.D.	Head of the Department
Asil Budaklı	Spec. M.D.	Clerkship administrator

2- Aim and objectives

Aim: The aim of the Psychiatry and Behavioral Sciences Internship Program is to train medical graduates who are knowledgeable about common psychiatric disorders and capable of recognizing, diagnosing, and performing differential diagnosis and follow-up of mental health conditions in primary health care settings. The program also aims to enable interns to identify their professional limits and appropriately refer patients to mental health specialists when necessary.

Learning Objectives:

At the end of the Psychiatry and Behavioral Sciences internship program, students should be able to:

Knowledge:

At the end of the Psychiatry and Behavioral Sciences internship program, students should be able to:

- Demonstrate knowledge of the etiology, clinical features, differential diagnosis, and treatment modalities of major psychiatric disorders, including schizophrenia, mood disorders, anxiety disorders, and substance use disorders,
- Describe commonly used psychotropic medications, including their mechanisms of action, indications, side effects, and potential drug interactions,
- Demonstrate a basic understanding of psychotherapeutic approaches and their indications in the management of psychiatric disorders.

Skills:

At the end of the Psychiatry and Behavioral Sciences internship program, students should be able to:

- Conduct a comprehensive psychiatric interview and perform a mental status examination,
- Recognize symptoms, establish diagnoses and differential diagnoses, initiate appropriate treatment, and perform follow-up for common psychiatric conditions such as depression, anxiety disorders, and panic disorder,
- Recognize symptoms, establish preliminary diagnoses, provide initial interventions, and appropriately refer patients with psychiatric disorders such as schizophrenia, bipolar disorder, phobias, substance use disorders, psychosomatic disorders, and attention-deficit/hyperactivity disorder,
- Assess the risk of harm to the patient or others, including suicide and violence risk,
- Stabilize patients presenting with psychiatric emergencies,

- Request and interpret appropriate laboratory tests and specialist consultations when indicated,
- Communicate effectively with patients and their relatives regarding the nature of psychiatric conditions, treatment options, and prognosis.

Attitudes:

- Dress and look appropriate as a medical doctor,
- Establish professional relationships with patients and members of the multidisciplinary health care team,
- Demonstrate sufficient interpersonal skills in building a physician-patient relationship,
- Approach patients holistically, considering the individual as a whole rather than focusing solely on presenting complaints.
- Respect and protect patient privacy and confidentiality.
- Obtain informed consent, when necessary,
- Utilize library resources and academic databases to research clinical issues related to patient care and management.

3- Educational methods

The Psychiatry internship program employs the following educational methods:

- Outpatient clinic practice
- Seminars
- Case discussions
- Rotations in other hospitals.

4- General rules of the program

Attendance

- ✓ All students are required to be present at the hospital between **08:00 and 17:00**.
- ✓ Attendance at all educational activities included in the program is **mandatory**.
- ✓ In case of lateness, students must inform their supervisor in advance. This is considered a professional and courteous practice.

Outpatient clinics

- ✓ Students will observe patient management with faculty staff.

Bedside training

- ✓ Students are required to follow hospitalized patients in their assigned clinic and document patient follow-up in the relevant section of their logbook.
- ✓ Attendance at scheduled ward rounds is mandatory.
- ✓ During ward rounds, students are expected to discuss differential diagnoses and appropriate treatment options.

Seminars and case presentations

- ✓ Each student is required to deliver one seminar and one case presentation during the clerkship. Attendance at all other seminars and case presentations is mandatory.
- ✓ Seminar topics are determined at the beginning of the program.
- ✓ Presentation schedules are arranged in accordance with the faculty members' schedules.

Rotations in other hospitals

- ✓ Students should obey the rules of related hospital if there is any rotation.

“Completing the logbook and obtaining the professor's signature is your responsibility.”

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the procedure is performed and explains the outcomes to the patient and/or their relatives.
2	Performs the procedure in accordance with relevant guidelines or directives in emergency situations.
3	Performs the procedure independently in uncomplicated or common cases.
4	Performs the procedure competently in complex or challenging situations

**Learning levels are designed according to the National Core Education Program.*

Procedure	Learning level*	Observed Target	Performed Target
Psychiatric history taking	3	4	2
Mental Status Examination	3	4	2
Mini-mental state examination (MMSE)	3	4	2
Management of psychiatric emergencies	3	4	2
Assessment of legal capacity	2	4	
Intervention in suicid	3		

BAU TIP
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EMERGENCY MEDICINE

BAU TIP
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Emergency Medicine Internship Program

1- Academic Staff

EMERGENCY MEDICINE		
Ufuk Utku Göktuğ	Assist. Prof. M.D.	Clerkship administrator

2- Aim and objectives

Aim: The aim of the Emergency Medicine Internship Program is to train medical graduates who are knowledgeable in the principles of emergency care and capable of rapidly assessing, stabilizing, and managing patients presenting with a wide spectrum of acute medical, surgical, and traumatic conditions using a systematic and comprehensive approach.

Learning Objectives:

At the end of the Emergency Medicine internship program, students should be able to:

Knowledge:

- Explain the approach and classification of the emergency patient and triage
- Evaluate common acute and life-threatening conditions encountered in the emergency department,
- Integrate information obtained from patient history, physical examination, and diagnostic investigations to formulate appropriate clinical hypotheses and differential diagnoses in the acute care setting,
- Identify the differential diagnosis, diagnostic approach (including history, physical examination, laboratory and imaging studies), and initial management of common emergency conditions, including but not limited to coma and altered levels of consciousness, drug overdose and acute intoxication, myocardial ischemia and infarction, hypertensive emergencies and urgencies, shock, sepsis, syncope, acute pulmonary edema, asthma and COPD exacerbations, fever, seizures, pulmonary embolism, poisonings, environmental injuries, acute gastrointestinal bleeding, headache, stroke, and community-acquired pneumonia,
- Recognize, initiate initial management, and identify referral criteria for common adult behavioral and surgical emergencies, including psychosis, mania, alcohol and substance intoxication and withdrawal, acute abdomen, fractures, trauma, and wounds,
- Identify and address the psychosocial needs of patients and their families in the emergency department setting.

Skills:

At the end of the Emergency Medicine internship program, students should be able to:

- Obtain a focused, developmentally appropriate biomedical and psychosocial history in the acute care setting,
- Perform and document a problem-oriented physical examination tailored to the patient's presenting complaint,
- Demonstrate efficiency and effectiveness in the rapid evaluation and initial management of emergency patients,
- Perform a physical exam that is focused on the patient's acute problem and record it
- Gain speed and effectiveness in evaluation and intervention of emergency patients
- Develop an appropriate differential diagnosis

- Interpret emergency laboratory tests
- Interpret emergency radiologic tests
- Interpret electrocardiography (ECGs),
- Perform basic and advanced airway procedures, and provide basic life support
- Perform advanced cardiac life support (ACLS) for adult and pediatric patients,
- Evaluate and manage patients presenting with chest pain, abdominal pain, and shortness of breath,
- Perform the initial assessment and stabilization of trauma patients,
- Arrange and coordinate appropriate consultations with physicians and other health care professionals when indicated.

Attitudes:

- Dress and look appropriate as a medical doctor,
- Establish professional relationships with patients and members of the multidisciplinary health care team,
- Demonstrate sufficient interpersonal skills in building a physician-patient relationship,
- Approach patients holistically, considering the individual as a whole rather than focusing solely on presenting complaints.
- Respect and protect patient privacy and confidentiality.
- Obtain informed consent, when necessary,
- Utilize library resources and academic databases to research clinical issues related to patient care and management.

3- Educational methods

The Emergency Medicine internship program employs the following educational methods:

- Emergency service clinics
- Case discussions
- Rotations in other hospitals

4- General rules of the program

Attendance

- ✓ All students are required to be present at the hospital between **08:00 and 17:00**.
- ✓ Attendance at all educational activities included in the program is **mandatory**.
- ✓ In case of lateness, students must inform their supervisor in advance. This is considered a professional and courteous practice.

Emergency service clinics

- ✓ Students practice managing emergency patients under the supervision of a faculty staff.

Case presentations

- ✓ Each student is required to deliver one seminar and one case presentation during the clerkship. Attendance at all other seminars and case presentations is mandatory.
- ✓ Seminar topics are determined at the beginning of the program.
- ✓ Presentation schedules are arranged in accordance with the faculty members' schedules.

Rotations in other hospitals

- ✓ Students must comply with the rules and professional standards of the hospitals where they complete their rotations.

“Completing the logbook and obtaining the professor's signature is your responsibility.”

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the procedure is performed and explains the outcomes to the patient and/or their relatives.
2	Performs the procedure in accordance with relevant guidelines or directives in emergency situations.
3	Performs the procedure independently in uncomplicated or common cases.
4	Performs the procedure competently in complex or challenging situations

**Learning levels are designed according to the National Core Education Program.*

Procedure	Learning level*	Observed Target	Performed Target
History taking and comprehensive clinical examination	4	10	10
Measurement and documentation of vital signs	4	5	5
Insertion of oropharyngeal airway	3	1	2
Application of cervical collar	4	1	2
Burn dressing	3	2	-
Orotracheal intubation	3	1	-
Wound suturing	4	3	1
Venous cannula insertion	1	10	2
Urethral catheterization	3	3	1
Nasogastric tube insertion	3	2	1
Abdominal X-ray evaluation	3	5	-
Taking arterial blood gas	3	2	2
Abdominal paracentesis	1	1	-
Gastric lavage	1	1	-
Wound care and dressing	3	3	2
Advanced life support	3	2	1
Chest X-ray Evaluation	3	5	-
Electrocardiogram (ECG) interpretation	3	5	-
Cranial CT evaluation	1	5	-



PUBLIC HEALTH

BAU TIP
BAHÇEŞEHİR ÜNİVERSİTESİ TIP FAKULTESİ

Dear Colleagues,

As the **Department of Public Health**, we aim to support you in every possible way during this two-month period in the final year of your medical education.

We kindly ask you to carefully read the following study principles and rules of the Public Health Department, with which we expect your full cooperation throughout the internship.

On the first day of the internship, students are expected to be present in the classroom at **09:00am**, unless otherwise announced by the department. **On this day, with the participation of all faculty members, detailed information will be provided regarding the content and organization of the internship.** Seminar groups will be formed, students' expectations will be discussed, and any questions will be addressed.

During your internship, you are expected to focus primarily on **three main subject areas**, which will form the core of your learning activities.

1-PARTICIPATION IN DISTRICT HEALTH DIRECTORATE AND FAMILY HEALTH CENTERS' ACTIVITIES:

During the two-month internship period, you are expected to benefit as much as possible from your training at the District Health Directorates and Family Health Centers. You must participate in all activities as a physician working in these institutions would. You are expected to observe routine practices, recognize both effective and inadequate implementations, ask questions whenever needed, and support your learning by consulting relevant sources.

2- PARTICIPATION IN ACTIVITIES/CLASSES OF THE DEPARTMENT

You are required to attend all programs organized by the Department during the internship. This includes seminars, conferences, training sessions, projects, research activities, and other educational activities scheduled during this period.

Attendance is mandatory for all internship-related educational activities. If you have a valid and exceptional reason to miss any class or activity, you must obtain prior permission with the knowledge and approval of the Head of the Department and/or the responsible instructor.

3- PARTICIPATION IN SEMINARS:

Each group is required to prepare **one seminar** during the internship period. Seminar topics should focus on scientific and primary health care services and be based on up-to-date literature. The list of seminar topics is provided in your logbook.

During seminar presentations, **each group member must present for a maximum of 5 minutes**. Presentations should be supported by appropriate visual materials. When individual presentations are combined, coherence and continuity of the overall seminar must be ensured. All group members are expected to be familiar with each other's topics and actively participate in the discussion and question-answer session at the end of the seminar.

The final seminar presentation must be submitted to the Department as a **clear, well-organized, and computer-typed file**, prepared and compiled by one designated group member.

You are required to comply with professional **dress code, attitude, and behavior rules** during all field visits conducted individually or as a group. Each student must be aware that they represent **Bahçeşehir University Faculty of Medicine** during all activities conducted outside the institution. In field studies carried out without direct supervision, you are expected to demonstrate continuity, active participation, and responsibility in completing assigned tasks.

There is **no night shift** in the standard Public Health Internship program. However, intern physicians are required to participate in activities conducted outside regular working hours, such as weekend educational activities, research projects, community-based studies, and field visits.

It is your responsibility to complete **all relevant sections of the logbook fully and on time**. Do not wait until the final days of the internship period to complete your logbook.

At the end of the two-month internship, **attendance, fieldwork performance, seminar presentations, submission of required documents, completeness of the logbook, and compliance with internship rules** will form the basis of the internship evaluation.

Public Health Department

Public Health Internship Program

1- Academic Staff

PUBLIC HEALTH DEPARTMENT		
Özge Karadağ	Prof. M.D.	Head of the Department
Birol Tibet	Assist. Prof.	
Ayşe Seval Palteki	Assist. Prof.	

2- Aim and objectives

The aim of the Public Health Internship is to provide you with a public health perspective on the **prevention, diagnosis, and management of health problems**, as well as the **promotion of health at the community level**. In addition, the internship aims to develop your ability to evaluate **health policies, health systems, and health management practices**, building on the knowledge and skills you have acquired during the previous phases of your medical education.

In line with this aim, **Community Health Center and Family Health Center practices** are integrated into the program. A **community-based medical education model** is adopted to support the theoretical knowledge required for the delivery of primary health care services.

The activities included in this internship program are as follows:

1. Orientation and adaptation to the Public Health Internship Program
2. Primary Health Care Services
3. Seminar Studies

Orientation and adaptation to the Public Health Internship Program

Aim:

To introduce students to the fundamental concepts, principles, and approaches of public health.

Learning objectives:

- Explain the concept, importance, and core functions of public health,
- Identify and explain the determinants of health through case-based examples,
- Describe the organization of primary health care services in Türkiye in accordance with current legislation,
- Explain preventive health services provided by the Ministry of Health within primary health care centers,
- Explain the relevant aspects of health legislation, including mandatory service regulations for medical doctors and assignment regulations for health care personnel.

Primary Health Care Services:

Aim:

Students will gain experience through observation and active participation in the work of various units providing primary health care services.

Learning objectives:

By the end of this phase, you should be able to:

1. Explain the scope and organization of preventive health services provided in Family Health Centers,
2. Administer vaccines in accordance with the National Immunization Schedule,
3. Conduct follow-up of infants and children in primary health care settings according to Ministry of Health protocols,
4. Conduct follow-up of pregnant and postpartum women in primary health care settings according to Ministry of Health protocols,
5. Identify and describe the demographic characteristics of individuals applying to Family Health Centers,
6. Describe premarital counseling and family planning services provided in Family Health Centers,.
7. Explain the activities and responsibilities of each unit within Community Health Centers,
8. Actively participate in at least two different activities conducted in Community Health Centers,
9. Collect water samples under appropriate conditions and measure residual chlorine levels in water.

Seminar Studies:

Aims:

By participating in seminar studies, students are expected to:

1. Update their knowledge on a selected public health topic,
2. Develop the ability to review and analyze the literature on a specific topic using various scientific sources,
3. Improve their academic presentation and communication skills.

SEMINAR TOPICS

Each intern group will select and present one topic from the following topics:

1	Unemployment, poverty, and inequalities in health	18	Cancer early detection and screening programs
2	Community Mental Health	19	Disasters associated with extreme weather events and health
3	Epidemiology of Emerging and Re-emerging Diseases (Inc. COVID-19)	20	Discrimination and Health (Inc. Ethnic, sexual orientation, disability, minorities, immigrants etc.)
4	Epidemiology and Control of Sexually Transmitted Infections	21	Migration and Health

5	Health literacy	22	War and Health
6	Emerging and reemerging vector borne diseases	23	Gender and Health
7	Ergonomics and Musculoskeletal Diseases	24	Health Effects of Climate Change
8	Occupational Health Risks of Health Care Workers	25	Health Effects of Air Pollution
9	Violence against Health Care Workers	26	Healthy Ageing - Ageism
10	Child Labor	27	Chronic/Non-Communicable Diseases: Monitoring and prevention of risk factors
11	Child Abuse	28	Pregnancy Care and Nursing from Public Health Scope
12	Health Promotion and Health Education	29	Health of Persons Living with Disabilities
13	Food policies and Healthy diet	30	Urbanization and health
14	Health effects of pesticides	31	Child marriages and adolescent pregnancies
15	Vaccine hesitancy and controversies	32	Infodemic and health
16	Immunization Counseling and National Childhood Immunization Program of Türkiye	33	Demography and Ageing Populations
17	Contraceptive Methods and Contraceptive Method Counseling		

Public Health Internship Program

Weeks	Monday		Tuesday		Wednesday		Thursday		Friday	
	Morning	Afternoon	Morning	Afternoon	Morning	Afternoon	Morning	Afternoon	Morning	Afternoon
Week 1	Introduction to Public Health Internship Program (Determination of seminar topics)	What is Public Health and who works for public health? Determinants of Health	Health Care System in Türkiye Mandatory service regulation for medical doctors, assignment regulation for health staff		Rational drug use course		Rational drug use course		Rational drug use course	
Week 2	District Health Directorate		District Health Directorate		District Health Directorate		Group studies for outbreak investigation Presentations of groups		Study time for seminar preparation	
Week 3	Family Health Center		Family Health Center		Family Health Center		Workshop: Career paths after medical school		Study time for seminar preparation	
Week 4	Family Health Center		Family Health Center		Family Health Center		Visit to İstanbul Medical Chamber - Health care system in Türkiye - Legal rights of the physicians - Advertisement bans in the medicine		Study time for seminar preparation	
Week 5	Family Health Center		Family Health Center		Family Health Center		Workshop: Community Mental Health Visit to Community Mental Health Center		Study time for seminar preparation	
Week 6	Family Health Center		Family Health Center		Family Health Center		Visit to Provincial Ambulance Service Command and Control Center		Study time for seminar preparation	
Week 7	Family Health Center		Family Health Center		Family Health Center		Study time to fill in the logbook.		Study time to fill in the logbook.	
Week 8	Seminar presentations		Seminar presentations		Seminar presentations		Study time to fill in the logbook		Evaluation of logbook with group	

FAMILY HEALTH CENTER (FHC) ACTIVITIES

Name of Family Health Center:

.....

Number of Family Health Units in the FHC:

.....

District Health Directorate to which it is affiliated:

.....

Information about FHC:

Total population of the FHC	
Total number of service units in the FHC	
Total number of physicians in the FHC	
Total number of non-physician health staff in the FHC	
Total population of unit in the FHC that you work	

Antenatal Care Services:

Follow-up 1 pregnant woman in accordance with antenatal health care protocols of the Ministry of Health in the FHC unit which you work and fill the following box.

Name of woman:.....

Age of woman:

Date of follow-up: / /

Week of pregnancy at follow-up date :

Number of total pregnancies:

Weight:..... kg

Height: cm

Blood pressure:mm/Hg

Pretibial eudema:

Last Hemoglobin value:.....

Fetal heart rate.....

Tetanus Vaccinations status:

HEALTH EDUCATIONS GIVEN BY THE STUDENT:

- | | |
|---|---|
| <input type="checkbox"/> Nutrition | <input type="checkbox"/> Smoking |
| <input type="checkbox"/> Physical activity and working conditions | <input type="checkbox"/> Alcohol and drug use |
| <input type="checkbox"/> Sexual health | <input type="checkbox"/> Medications |
| <input type="checkbox"/> Hygiene | <input type="checkbox"/> Alarming symptoms |
| <input type="checkbox"/> Dental health | |

Child Health Services

Follow-up 1 **infant in** accordance with the Ministry of Health infant and child monitoring protocols in the FHC unit which you work and fill the following boxes.

Name and Surname of infant /child (under 5 years of age)
.....

Date of birth:/...../.....

Date of follow-up:/...../.....

Sex:

Weight: kggr Percentile:

Height : cm Percentile:

Head circumference: cm

Physical examination:

(Please write all the physical examination you did)

HEALTH EDUCATIONS GIVEN BY THE STUDENT:

(Only indicate the educations that you give according to the age of the child)

- ☐ Nursing
- ☐ Umbilical cord care
- ☐ Baby care
- ☐ Communication with the baby
- ☐ Sleep
- ☐ Hand wash
- ☐ Protection from the injuries
- ☐ Importance of vaccination
- ☐ Emergencies (fever, vomiting, diarrhea etc.)

Mark the tests performed to the child.

- Hypothyroidism
- Biotin deficiency
- Phenylketonuria
- Cystic fibrosis
- Hearing test
- Testicular examination
- Developmental hip dysplasia

National Immunization Schedule

Please write the dates for all of the vaccines that have been previously and will be administered later in accordance with the current national vaccination schedule for the infant / child you choosed.

Vaccine	Date	Vaccine	Date
BCG		Hepatitis B 1	
DPT-IPV-Hib 1		Hepatitis B 2	
DPT-IPV-Hib 2		Hepatitis B 3	
DPT-IPV-Hib 3		Conjugate pneumococcus 1	
MMR		Conjugate pneumococcus 2	
Oral polio 1		Conjugate pneumococcus booster	
Oral polio 2		Hepatitis A 1	
Varicella		Hepatitis A 2	

Cold Chain

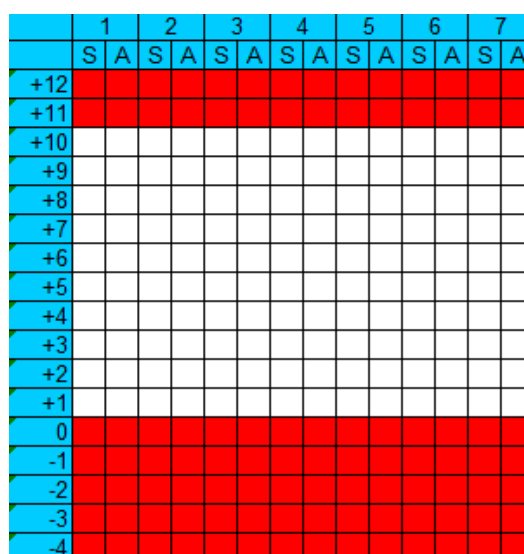
Observe the refrigerator where vaccines are stored. Which vaccines are stored in which shelves? Please draw and write:



What should be the average temperature of the refrigerator in order to preserve the vaccines?

.....

Please draw the temperature chart of the refrigerator in the FHC that you worked (7-days):



Marriage Counseling Services

What are the counseling services provided to applicants for marriage counseling?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Which diseases are evaluated in applicants for marriage counseling?

.....

.....

.....

.....

.....

Environmental Health

What are the medical wastes in the FHC?

.....

.....

Where are the medical wastes accumulated in the FHC?

.....

.....

How are the medical wastes disposed from the FHC?

.....

.....

Opinions of Family Physician about your work in FHC

Date:/...../.....

Name of Family Physician:

Sign of Family Physician :

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DISTRICT HEALTH DIRECTORATE (DHD) ACTIVITIES

Name of District Health Directorate:

Information about District Health Directorate:

Total population of the district	
Total Number of Family Health Centers in the district:	
Total number of Family Physicians in the district	
Total number of non-physician family health staff in the district	

Communicable Diseases

Write down the three most common infectious diseases in the region in the last year.

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

What was the latest outbreak in the area of the District Health Directorate?

.....
.....

What are the studies carried out by the District Health Directorate for the purpose of epidemic control?

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

How many tuberculosis (TB) cases are registered in the District Health Directorate and how many of them are enrolled in Directly Observed Treatment (DOT)?

Number of TB cases
Number of TB cases enrolled in DOT
Number of Multidrug-Resistant (MDR) TB cases

Immunization

How are vaccines provided and distributed in the area of the District Health Directorate?

.....
.....
.....
.....
.....

Indicate the percentage of infant vaccination for 0-12 months of the last calendar year in the population associated with the District Health Directorate:

Vaccine	Vaccination Percentage (%)	Vaccine	Vaccination Percentage (%)
BCG		Hepatitis B 1	
DPT-IPV-Hib 1		Hepatitis B 2	
DPT-IPV-Hib 2		Hepatitis B 3	
DPT-IPV-Hib 3		Conjugate pneumococcus 1	
MMR		Conjugate pneumococcus 2	
Oral polio 1		Conjugate pneumococcus booster	
Oral polio 2		Hepatitis A 1	
Varicella		Hepatitis A 2	

Environmental Health

Which studies are carried out in the Environmental Health Branch of the District Health Directorate?

- € Residual chlorine measurement in public water system of the city/district
- € Audit for swimming pools water
- € Audit for packaged waters
- € Licensing and control of non-sanitary, sanitary establishments and public workplaces
- € Audit for thermal and hot spring waters
- € House occupancy permissions
- € Audit for building sites and storages
- € Audit for biocidal products in terms of production, sales and usage
- € Others (please write)

Child Health- Adolescent Health - Women's Health - Reproductive Health

What screening programs are carried out by the District Health Directorate within the scope of child-adolescent - women - reproductive health services?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Have there been any maternal deaths in the district within the last 12 months? If yes, how many maternal deaths have been reported?


.....

.....

What screening programs are carried out by the District Health Directorate within the scope of School Health ?

[illegible]

What kind of programs are carried out by the District Health Directorate within the scope of Mental Health including control of tobacco and use of illicit drugs?



CLINICAL PHARMACOLOGY

Rational Drug Use Course

Aim of course:

The aim of this course is to provide students with the ability to choose the appropriate drug for the patient and to use it at the correct dose, time, and dosing interval.

Learning objectives

At the end of this course, students will be able to:

- Write accurate and appropriate prescriptions.
- Select the appropriate drug for the appropriate patient, at the correct dose, time, and dosing interval.
- Demonstrate knowledge of clinical pharmacology.
- Understand the toxic effects and side effects of drugs.
- Access scientific information in the field of health, follow current literature, evaluate the accuracy, reliability, and validity of information, and apply it in practice.
- Describe the mechanisms of action, side effects, and pharmacodynamic and pharmacokinetic properties of drugs.

Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the procedure is performed and explains the outcomes to the patient and/or their relatives.
2	Performs the procedure in accordance with relevant guidelines or directives in emergency situations.
3	Performs the procedure independently in uncomplicated or common cases.
4	Performs the procedure competently in complex or challenging situations

**Learning levels are designed according to the National Core Education Program.*

Procedure	Learning level
Public Health	
Provide family planning counseling	4
Provide immunization counseling	4
Carry out immunization services	4
Provide health services in extraordinary situations	2
Conduct periodic health examination (vision, hearing, metabolic diseases, vaccination of risk groups, cancer screenings)	4
Take measures to protect the health of healthcare workers	4
Take measures to prevent healthcare-associated infections	3
Taking precautions to prevent infections in community	4
Provide health education to the community	3
Control and combat infectious diseases in the community	3
Identify community health problems using epidemiological methods and propose solutions	3
Identify risk groups in the community	3

Interpret district-level health indicators	3
Identify the risk groups in the community	3
Immunization (childhood and adult)	4
Infant health monitoring	4
Follow-up and periodic health examinations at different life stages (pregnancy, birth, puerperium, newborn, childhood, adolescence, adulthood, old age)	4
Premarital screening program	4
Developmental hip dysplasia screening program	4
Vision screening programs	4
Hearing screening programs	4
Neonatal metabolic and endocrine disease screening program	4
Review current literature and critically appraise scientific studies	3
Clinical Pharmacology	
Prescribing	4
Apply the principles of rational drug use	4
Apply evidence-based medicine principles in clinical decision-making	3



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APPENDICES



BAU TIP
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ELECTIVE CLERKSHIP PROGRAM STUDENT EVALUATION FORM

Student Name-Surname			
Clerkship Name			
Rotation Date	From:		To:
University/ Department			

	EVALUATION LEVEL			
	BELOW EXPECTED	EXPECTED	BEYOND EXPECTED	NOT OBSERVED
Medical Knowledge				
Patient Care				
Clinical Skills				
Interpersonal and Communication Skills				
Professional attitudes and responsibilities				
Work Ethic				
Teamwork Ability				
Additional comments:				

Assessment

Overall score (over 100)

Numerical

Written

Title, Name - Surname:

Position:

Signature:

Date: / /

BAHÇEŞEHİR UNIVERSITY FACULTY OF MEDICINE
DIRECTIVE OF INTERNSHIP
PART ONE

Purpose, Scope, Basis and Definitions

Purpose

ARTICLE 1 - (1) This directive has been prepared to ensure that the education programs of students who have successfully completed the first five academic years at Bahçeşehir University Faculty of Medicine and are entitled to move to the sixth grade and are defined as "intern doctors" are carried out in accordance with the National Core Education Program (CEP) and the goals and strategies of the Faculty of Medicine; to define the duties, powers, responsibilities and rights of intern doctors. Scope

ARTICLE 2 - (1) This directive covers the 6th class students who are considered as intern doctors, the departments/sciences where they receive education, the department/year coordinators, the dean's office of the Faculty of Medicine and the responsibilities of these structures towards each other. Basis

ARTICLE 3 - (1) This directive has been prepared based on Bahçeşehir University Faculty of Medicine original education and training program; Bahçeşehir University Associate and Undergraduate Education and Examination Regulations, Bahçeşehir University Faculty of Medicine Education and Examination Regulations and National CEP.

Definitions

ARTICLE 4 - (1) This directive defines the following;

- a. University Bahcesehir University,
- b. Faculty: Bahcesehir University Faculty of Medicine,
- c. Dean: Dean of Bahçeşehir University Faculty of Medicine,
- d. Faculty Board: Faculty Board of Bahçeşehir University Faculty of Medicine,
- e. Faculty Board of Directors: Bahçeşehir University Faculty of Medicine Faculty Board of Directors,
- f. Chief Coordinator: A faculty member assigned by the Dean's Office,
- g. Sixth Grade Coordinator: The faculty member responsible for the planning, execution and coordination of education and training in sixth grades in accordance with Bahçeşehir University Faculty of Medicine Education and Examination Regulations,
- h. Education Officer: The faculty member assigned by the relevant department to organize the processes such as the conduct of education, rotations, etc. during the training of intern doctors in the relevant department, and to ensure coordination between the Sixth Grade Coordinatorship and student affairs and the department,
- i. Intern Doctor: A physician candidate who has completed their first five years at Bahçeşehir University Faculty of Medicine, who has been certified to have passed to the sixth grade, who gains the ability to solve clinical problems by using medical knowledge and skills, professional attitudes and values, and who realizes this learning process under the supervision and responsibility of the faculty members they work with,
- j. Intern Report Card: The evaluation document prepared by the departments in accordance with the educational objectives of Bahçeşehir University Faculty of Medicine and the National Curriculum and includes the knowledge, skills, attitudes and behaviors expected to be acquired, the breakdown of the determined field studies and the opinions,
- k. Intern Representative: The student selected to represent the sixth grade of Bahçeşehir University Faculty of Medicine.

PART TWO

Education Program, Working Hours, Shifts

Education Program

ARTICLE 5 - (1) Intern doctors spend the last year of their medical education by receiving practical training in various health institutions determined by the recommendation of the departments, the Medical Education Development Supreme Board and the approval of the Dean, especially in Bahçeşehir University Faculty of Medicine Affiliated Hospital. Class 6 education program is prepared by the departments in accordance with the National CEP in a way that will provide a physician graduated from the Faculty of Medicine with the competencies to practice medicine and management in primary health care institutions such as diagnosis, treatment, disease prevention, informing the society; researcher, questioner, continuous self-renewal and development.

ARTICLE 6 - (1) The education program;

- a. The Class 6 education period covers 12 uninterrupted months. Education periods are applied as determined by the decision of the Faculty Board.
- b. "Intern Report Card" is prepared by the departments involved in intern education and updated when necessary.
- c. At the end of the fifth grade, the sixth grade coordinatorship determines the training groups to ensure a balanced distribution in terms of number. Group lists with training dates are sent to the department training officer and students..
- d. Intern report cards are obtained by the intern doctor from the faculty student affairs office against signature. At the end of each training, intern doctors have their report cards approved by the head of the department. Report cards within five working days following the end of the training, the education officers forward the information to the sixth-grade coordinator.
- e. Internship practices are primarily carried out in faculty departments/sciences. Educational practices in other domestic/foreign institutions can be carried out with the written permission of the relevant department and the approval of the faculty board of directors, provided that the program compliance requirement is met, provided that it does not exceed 1/3 of the 12-month internship period. External applications are evaluated individually for each student by the faculty board of directors.

Working Hours, Shifts

ARTICLE 7 - (1) Working hours, shifts;

- a. Class 6 training program is carried out within the daily working hours of the unit. However, this period may be exceeded in cases where the patient's interest or the health service required. After the end of working hours, intern doctors can voluntarily stay in the clinics if they wish.
- b. The Class 6 education program also includes shifts. The frequency and number of these educational shifts are determined by the relevant departments. Shifts cannot be more than 1 shift in 3 days and on consecutive days.

- c. In departments with a shift system, working time, morning and evening shift times are regulated by the department..

PART THREE

Success Evaluation

ARTICLE 8 - (1) The sixth grade is assessed by 'proficiency' criteria for each educational area. The methods of evaluating the qualification criteria are determined by the relevant departments through intern report cards. During the evaluation, points such as taking responsibility for the patient, attendance, acquiring the prescribed knowledge and skills, and general medical values are taken into consideration. Intern doctors are regularly monitored through their intern report cards within the prepared program and their success or failure is determined by the relevant department. Intern doctors whose passing grade is below 70 points out of 100 are considered unsatisfactory and have to repeat the course.

Absenteeism

ARTICLE 9 - (1) Intern doctors cannot be absent without stating a valid reason and without permission from the training supervisors. Within the scope of the relevant provisions of the Faculty of Medicine Education, Training and Examination Regulations; the intern doctor who does not attend more than 10% of the attendance period, even with an excuse, is considered unsuccessful and repeats the course; absenteeism up to 10% is made up to the student on the days determined by the department. Approval of the excuse is made by the faculty board.

Failure and Grade Repetition

ARTICLE 10 - (1) Failure (inadequacy) or absenteeism is determined by the head of the department according to the specified criteria and reported to the sixth grade coordinator with a report. The relevant training is repeated for intern doctors whose studies are found insufficient or who do not meet the attendance requirement. The repetition period is the total duration of the relevant training. Repetitions take place in the period following the end of the entire training period. The departments make the necessary changes and arrangements in the education programs for the repeat semesters.

PART FOUR

Responsibilities and Duties of the Sixth Grade Coordinator

Responsibilities

ARTICLE 11 - (1) The sixth year coordinator is responsible for ensuring that the education process is carried out in accordance with the educational objectives and curriculum of Bahçeşehir University Faculty of Medicine and the procedures and principles of this Directive, and for ensuring the coordination between the intern doctors, departments and the dean's office.

Duties

ARTICLE 12 - (1) Duties of the sixth-grade coordinator:

- a. They make recommendations about the education and duration of the internship period. These recommendations are finalized by the Medical Education Development Executive Committee and the Faculty Executive Board, approved by the Dean's Office and put into practice.
- b. They ensure that the departments determine and review their educational objectives, tools and methods before each academic year.
- c. They ensure that intern report cards are updated in line with the educational objectives of the departments before each academic year..
- d. At the beginning and end of the training period, the department/science department holds evaluation meetings with the intern education officer and intern representatives.

- e. They ensure the creation of intern education cycle programs.
- f. They identify training groups.
- g. They ensure and monitor the determination, development and use of measurement and evaluation criteria.
- h. They receive the intern report cards filled out at the end of the training.
- i. In cases of inadequacy, they organize and ensure that the relevant training is repeated for appropriate periods of time.
- j. They ensure that evaluation surveys are conducted and submits the feedback to the head coordinator as a report.
- k. They submit the proposals and requests from the departments and intern representatives regarding the education to be received in different educational institutions in Turkey or abroad to the approval of the dean's office and the faculty board and monitors its execution.
- l. They monitor and carry out the preparations for the graduation process.
- m. They ensure that the documents related to graduation are completed and submitted to the dean's office on time.
- n. They fulfill other duties entrusted to it in accordance with this Directive.

PART FIVE

Responsibilities of the Department

ARTICLE 13 - (1) Responsibilities of the department;

- a. All departments in the Class 6 education program notify the Class 6 coordinator and the dean's office as the "Education Officer" before the new academic year begins.
- b. Each year, one month before the start of the new academic semester, the departments submit their intern report cards, which include educational goals and objectives, tools and methods, qualification and evaluation criteria, to the Class 6 coordinatorship through the faculty member in charge of education.
- c. The departments are subject to the National CEP and Bahçeşehir University Faculty of Medicine curriculum in setting their goals. They also specify the obligations and responsibilities of intern doctors during daily practice and shifts. Heads of departments are responsible for preventing intern doctors from performing work that does not contribute to education and does not contribute to education and is intended to close the service gap.
- d. At the end of each training, the head of the relevant department and the education officer evaluate the attendance, success and report cards of the intern doctors and make a decision on competence. Qualification statuses and intern report cards are sent to the sixth-grade coordinator within five working days following the end of the relevant training..
- e. They fulfill other duties entrusted to it in accordance with this Directive.

Conducting the Training

ARTICLE 14 - (1) Conducting the training;

- a. Each year, one month before the start of the new academic semester, the departments submit their intern report cards, which include educational goals and objectives, tools and methods, qualification and evaluation criteria, to the Class 6 coordinatorship through the faculty member in charge of education.
- b. The departments are subject to the National CEP and Bahçeşehir University Faculty of Medicine curriculum in setting their goals. They also specify the obligations and responsibilities of intern doctors during daily practice and shifts. Heads of departments are responsible for preventing intern doctors from performing work that does not contribute to education and does not contribute to education and is intended to close the service gap.
- c. At the end of each training, the head of the relevant department and the education officer evaluate the attendance, success and report cards of the intern doctors and make a decision on competence. Qualification statuses and intern report cards are sent to the sixth grade coordinator within five working days following the end of the relevant training.
- d. Each year, one month before the start of the new academic semester, the departments determine the Sixth Grade Coordinator and the Education Responsible faculty member and notify the dean's office.
- e. They fulfill other duties entrusted to it in accordance with this Directive.

Education Officer's Duties

ARTICLE 15 - (1) Duties of the education officer;

- a. In line with the framework determined by the department, they organize the training and rotation programs of intern doctors and prepare the duty schedules.
- b. They conduct an informative meeting with intern doctors at the beginning of training.
- c. They ensure, monitor and evaluate that the training is carried out in accordance with the objectives during the training..
- d. They follow the working order of the intern doctors, take measures to solve the problems that arise within the knowledge of the department.
- e. At the end of the relevant training, they evaluate the intern report cards together with the head of the department in terms of competence and ensure that the decision is forwarded to the sixth grade coordinator within five working days.
- f. They participate in evaluation meetings with Class 6 Coordinatorship and intern representatives.
- g. They receive the expectations and feedback of the intern doctors and transmit them to the class 6 coordinator.

PART SIX

Rights, Obligations and Responsibilities of Intern Doctors

ARTICLE 16 - (1) Intern doctors;

- a. Develop their ability to produce solutions to health problems in the light of professional values and principles during the Class 6 education process; they develop their medical knowledge and critical thinking skills by participating in academic activities such as article hours, conferences, seminar programs, etc.
- b. They work under the supervision and supervision of the education officer or the faculty member assigned by them..
- c. They have to actively participate in the programmed education, research and academic activities.
- d. They participate actively in routine outpatient clinic practice in the clinical units where work. In the outpatient clinic, they provide patient-physician relationship under the supervision of the faculty member, perform physical examination, make examination notes under the supervision of the physician, and request necessary tests.
- e. They are not authorized to sign prescriptions directly; they have to have their prescriptions signed by the responsible faculty member.
- f. They are not authorized to issue direct clinical practice orders.
- g. They follow the patients under their responsibility in inpatient units, deal closely with their problems, communicate effectively with the relatives of the patients, and perform medical interventions under the responsibility of the faculty member.
- h. They take shifts in accordance with the working order of the clinic.
- i. They learn and apply medical document management. However, these procedures cannot be used to fill labor shortages and cannot be the predominant application of the relevant training.
- j. They recognize the organization of the health system and learn the structure.
- k. They develop leadership and teamwork skills in the field of health and reinforce their ability to communicate effectively with health professionals and the community.
- l. They gain the ability to use the principles of lifelong learning and evidence-based medicine.
- m. They acquire the ability to protect and promote health at all levels, from the environment where the individual lives to a tertiary health institution.
- n. Under the request and supervision of the Education Supervisor or the instructor assigned by them, they can fill the laboratory requests of the patient they follow, enter the results in the patient file, and prepare an epicrisis draft.
- o. They can perform the interventions specified in their intern report cards under the responsibility of the faculty member. The physician overseeing the intervention is responsible for all complications and problems related to the interventional procedure.

- p. They have to know the rights of patients and their relatives, respect them and ethical rules and comply with the principle of confidentiality of patient information.
- q. They cannot convey any information about the patient's medical condition and prognosis to the patient or their relatives without the knowledge and supervision of the faculty member.
- r. They are obliged to follow the processes related to their own training.

Rules to be Followed by Intern Doctors

ARTICLE 17 - (1) Rules to be followed by intern doctors;

- a. Intern doctors are obliged to comply with the dress code determined by the institution, to wear a white coat or other appropriate clothing when necessary and to carry a photo identification document on their lapels.
- b. It is forbidden to use physician's coats and similar health worker-specific clothing and equipment outside of hospitals or health institutions.
- c. They should introduce themselves to patients as "intern doctors".
- d. They must comply with the shift and working order assigned to them. They are directly responsible to the clinic on-call physician during the shift. Shift changes can be performed with the permission of the relevant department/science education officer..
- e. They are obliged to comply with the rules and directives of Bahçeşehir University Faculty of Medicine affiliated hospital and other institutions they work in.
- f. They are responsible for the protection and approval of the intern report cards and their delivery to the training supervisor at the end of the relevant training.
- g. They are responsible for getting the work done in the external work areas approved by the responsible persons there and submitting the intern report cards to the class 6 coordinator with the appropriate documents and within the appropriate time.
- h. They should participate in in-service trainings related to the organization.
- i. They must protect the tools, equipment and materials used in the clinic, patient files and documents belonging to the hospital.
- j. They have to know the health rights of individuals in the society and the rights of patients and their relatives and act accordingly. Information, documents and other materials belonging to individuals/patients cannot be shared in any way without the consent of the responsible physician and the patient, 'even for scientific purposes'.

PART SEVEN

Situations without Provisions, Effectiveness and Execution

ARTICLE 18 - (1) In cases not specified in this regulation, the provisions of Bahçeşehir University Faculty of Medicine Education and Examination Regulation, the decisions of the Senate and the Faculty Board/Faculty Executive Board are applied.

Enforcement

ARTICLE 19 - (1) This directive enters into force on the date of its adoption by Bahçeşehir University Senate.

Execution

ARTICLE 20 - (1) The provisions of this directive are executed by the Dean of Bahçeşehir University Faculty of Medicine.

The date and number of the Senate	
where the Directive	was Adopted
30/07/2019	2019/10/12
Date of the Board of Trustees Decision	
Adopting the Directive	Decision No.
19/08/2019	259



BAU TIP
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MEZUNİYET ÖNCESİ TIP EĞİTİMİ ULUSAL ÇEKİRDEK EĞİTİM PROGRAMI 2020



BÖLÜM 2 TEMEL HEKİMLİK UYGULAMALARI

TEMEL HEKİMLİK UYGULAMALARI

Temel Hekimlik Uygulamaları Öğrenme Düzeyleri:

Tıp fakültesinden mezun olan hekimin, temel hekimlik uygulamaları sırasında sergilemesi gereken performansın, dolayısıyla öğrenmenin asgari düzeyini belirtir (Tablo 2.4.1.). Asgari düzey listesindeki her bir beceri/uygulama için ayrı ayrı belirlenir. Fakülteler uyguladıkları eğitim süresi içinde, her bir öğrencinin söz konusu hekimlik uygulamasını belirlenen asgari düzeyde yapabilir duruma gelmesini sağlarlar.

Tablo 2.4.1. Temel Hekimlik Uygulamaları Öğrenme Düzeyi	
Öğrenme Düzeyi	Açıklama
1	Uygulamanın nasıl yapıldığını bilir ve sonuçlarını hasta ve/veya yakınlarına açıklar
2	Acil bir durumda kılavuz/yönergeye uygun biçimde uygulamayı yapar
3	Karmaşık olmayan, sık görülen, durumlarda/olgularda uygulamayı* yapar
4	Karmaşık durumlar/olgular da dahil uygulamayı* yapar
* Ön değerlendirmeyi/değerlendirmeyi yapar, gerekli planları oluşturur, uygular ve süreç ve sonuçlarıyla ilgili hasta ve yakınlarını/toplumu bilgilendirir	

Tablo 2.4. Temel Hekimlik Uygulamaları	Düzeyler
A. Öykü alma	
1. Genel ve soruna yönelik öykü alabilme	4
2. Mental durumu değerlendirebilme	3
3. Psikiyatrik öykü alabilme	3
B. Genel ve soruna yönelik fizik muayene	
1. Adli olgu muayenesi	3
2. Antropometrik ölçümler	3
3. Batın muayenesi	4
4. Bilinç değerlendirme	4
5. Çocuk ve yenidoğan muayenesi	4
6. Deri muayenesi	4
7. Digital rektal muayene	3
8. Gebe muayenesi	3
9. Genel durum ve vital bulguların değerlendirilmesi	4
10. Göz dibi muayenesi	2
11. Göz muayenesi	3
12. Jinekolojik muayene	3
13. Kardiyovasküler sistem muayenesi	4
14. Kas-İskelet sistem muayenesi	3
15. Kulak-burun-boğaz ve baş boyun muayenesi	3
16. Meme ve aksiller bölge muayenesi	3
17. Nörolojik muayene	3
18. Olay yeri incelemesi	2
19. Ölü muayenesi	3
20. Ruhsal durum muayenesi	3
21. Solunum sistemi muayenesi	4
22. Ürolojik muayene	3
C. Kayıt tutma, raporlama ve bildirim	
1. Adli rapor hazırlayabilme	3
2. Adli vaka bildirimi düzenleyebilme	4
3. Aydınlatma ve onam alabilme	4
4. Engellilik raporu konusunda danışmanlık yapabilme	3
5. Epikriz hazırlayabilme	4
6. Güncel mevzuata uygun sağlık raporlarını hazırlayabilme	3

Tablo 2.4. Devamı	Düzeyler
C. Kayıt tutma, raporlama ve bildirim	
7. Hasta dosyası hazırlayabilme	4
8. Ölüm belgesi düzenleyebilme	3
9. Reçete düzenleyebilme	4
10. Tedaviyi red belgesi hazırlayabilme	4
11. Yasal olarak bildirim zorunlu hastalıkları ve durumları bildirme ve raporlama	4
D. Laboratuvar testleri ve ilgili diğer işlemler	
1. Biyolojik materyalle çalışma ilkelerini uygulayabilme	4
2. Dekontaminasyon, dezenfeksiyon, sterilizasyon, antisepsi sağlayabilme	4
3. Dışkı yayması hazırlayabilme ve mikroskopik inceleme yapabilme	3
4. Direkt radyografileri değerlendirebilme	3
5. EKG çekebilme ve değerlendirebilme	3
6. Gaitada gizli kan incelemesi yapabilme	4
7. Glukometre ile kan şekeri ölçümü yapabilme ve değerlendirebilme	4
8. Kanama zamanı ölçümü yapabilme ve değerlendirebilme	2
9. Laboratuvar inceleme için istek formunu doldurabilme	4
10. Laboratuvar örneğini uygun koşullarda alabilme ve laboratuvara ulaştırabilme	4
11. Mikroskop kullanabilme	4
12. Peak-flow metre kullanabilme ve değerlendirebilme	3
13. Periferik yayma yapabilme ve değerlendirebilme	3
14. Su dezenfeksiyonuyapabilme	3
15. Su numunesi alabilme	3
16. Sularda klor düzeyini belirleyebilme ve değerlendirebilme	3
17. Tam idrar analizi (mikroskopik inceleme dahil) yapabilme ve değerlendirebilme	3
18. Tarama ve tanısal amaçlı inceleme sonuçlarını yorumlayabilme	3
19. Vaginal akıntı örneği hazırlayabilme	3

Tablo 2.4. Devamı	Düzeyler
E. Girişimsel ve girişimsel olmayan uygulamalar	
63. Temel yaşam desteği uygulayabilme	4
64. Topuk kanı alabilme	4
65. Travma sonrası kopan uzvun uygun olarak taşınmasını sağlayabilme	4
66. Uygulanacak ilaçları doğru şekilde hazırlayabilme	3
67. Vajinal ve servikal örnek alabilme	3
68. Yara-yanık bakımı yapabilme	3
69. Yenidoğan canlandırması	2
70. Yüzeysel sütür atabilme ve alabilme	4
71. Zehirlenmelerde akut dekontaminasyon ilkelerini sağlama	2
F. Koruyucu hekimlik ve toplum hekimliği uygulamaları	
1. Acil yardımların organizasyonunu yapabilme	3
2. Aile planlaması danışmanlığı yapabilme	4
3. Bağışıklama danışmanlığı verebilme	4
4. Bağışıklama hizmetlerini yürütebilme	4
5. Doğru emzirme yöntemlerini öğretebilme	4
6. Geriyatrik değerlendirme yapabilme	3
7. Kendi kendine meme muayenesini öğretebilme	4
8. Kontrasepsiyon yöntemlerini doğru uygulayabilme ve kullanıcıları izleyebilme	3
9. Maluliyet değerlendirme	1
10. Olağan dışı durumlarda sağlık hizmeti sunabilme	2
11. Periyodik sağlık muayenesi (görme, işitme, metabolik hastalıklar, riskli grupların aşılama, kanser taramaları)	4
12. Sağlık çalışanlarının sağlığının korunması ile ilişkili önlemleri alabilme	4
13. Sağlık hizmeti ilişkili enfeksiyonları engelleyici önlemleri alabilme	3
14. Toplu yaşam alanlarında enfeksiyonları engelleyici önlemleri alma	4
15. Topluma sağlık eğitimi verebilme	3
16. Toplumda bulaşıcı hastalıklarla mücadele edebilme	3

Tablo 2.4. Devamı	Düzeyler
F. Koruyucu hekimlik ve toplum hekimliği uygulamaları	
17. Toplumda sağlıkla ilgili sorunları epidemiyolojik yöntemler kullanarak saptayabilme ve çözüm yollarını ortaya koyabilme	3
18. Toplumdaki risk gruplarını belirleyebilme	3
G. Bilimsel araştırma ilke ve uygulamaları	
1. Bilimsel verileri derleyebilme, tablo ve grafiklerle özetleyebilme,	3
2. Bilimsel verileri uygun yöntemlerle analiz edebilme ve sonuçları yorumlayabilme	2
3. Bir araştırmayı bilimsel ilke ve yöntemleri kullanarak planlayabilme	2
4. Güncel literatür bilgisine ulaşabilme ve eleştirel gözle okuyabilme	3
5. Klinik karar verme sürecinde, kanıta dayalı tıp ilkelerini uygulayabilme	3
6. Sağlık düzeyi göstergelerini kullanarak hizmet bölgesinin sağlık düzeyini yorumlayabilme	3
H. Sağlıklılık	
1. Bağışıklama-çocukluk çağı ve erişkinlerde	4
2. Bebek Sağlığı İzlemi	4
3. Egzersiz ve fiziksel aktivite	4
4. Hayatın farklı evrelerinde izlem ve periyodik sağlık muayeneleri (gebelik, doğum, lohusalık, yenidoğan, çocukluk, ergenlik, yetişkinlik, yaşlılık)	4
5. Sağlıklı beslenme	4
I. Taramalar	
1. Evlilik öncesi tarama programı	4
2. Gelişimsel kalça displazisi tarama programı	4
3. Görme tarama programları	4
4. İşitme tarama programları	4
5. Yenidoğan metabolik ve endokrin hastalık tarama programı	4

BAU School of Medicine 4th Intern Symposium

5th Intern Symposium will be held in April 2025.

HEKİMLİĞİN EŞLİĞİNDE V. INTERN SEMPOZYUMU

“SAPERE AUDE”

1-4 Nisan 2026

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