

Dear Colleague,

We are writing to kindly request your cooperation in supporting the internship requirements of students from the Faculty of Pharmacy at Bahçeşehir University. In accordance with the regulations of the Turkish Council of Higher Education, the course PHAR3999: Internship I requires each student to complete a minimum of thirty working days of internship in an active pharmacy.

We sincerely thank you for providing this valuable opportunity to our students, as well as for your continued support of our faculty.

Please be informed that our students are insured during their internship period, limited to working days only, and are required to be physically present at the pharmacy throughout this period. We kindly ask you to organize the internship in line with the guidelines provided below. At the end of the internship, we would appreciate it if you could review, stamp, and sign the report prepared by the intern (please note that each page must be stamped and signed).

Additionally, we kindly request that you complete the Internship Evaluation Form, place it in a sealed envelope bearing your stamp and signature, and return it to the student for submission to our department.

We truly appreciate your support and contribution to the professional development of our students, and we wish you continued success in your work.

**Addendum 1:** Internship Learning Objectives

**Addendum 2:** Internship Evaluation Form

Bahçeşehir University  
Faculty of Pharmacy  
Internship Commission

## **Addendum 1. Internship Learning Objectives**

Class: PHARM3999 INTERNSHIP 1

Internship category: Independent pharmacies.

### **1. Definitions**

- a. Definition of pharmacy
- b. Definition of a pharmacist

### **2. General information concerning the interned pharmacy**

- a. Building requirements and procedures for opening a pharmacy
- b. Duties and responsibilities of independent pharmacists as healthcare workers
- c. Definitions, duties, powers and responsibilities of auxiliary personnel working at a pharmacy
- d. Organization of a pharmacy, rules for the categorization and placement of drugs and other pharmaceutical goods
- e. Shelf organization systems (alphabetical, pharmaceutical relevance etc.)
- f. Tools and equipment used in the operation of a pharmacy
- g. Work hours of a pharmacy, the concept of late-night pharmacies and the system by which pharmacies are assigned to late-night duty.

### **3. Purchase and acquisition procedures for drugs, cosmetics and medical supplies**

- a. Duties and responsibilities of pharmacists
- b. Duties of auxiliary personnel in purchase decisions
- c. Pharmacist-pharmaceutical warehouse interactions, inspection and registration of purchased goods, payment conditions

### **4. Matters of import in pharmacist-patient interactions**

- a. General aspects of patient interactions
- b. Systematic approaches to answering patient questions
- c. Patient education techniques (health education, drug literacy etc.)
- d. Frequently asked questions for pharmacists
- e. Approaches for patients presenting with acute disease
- f. Approaches for patients presenting with chronic disease

**5. Prescription filling procedures**

- a. Terms used in prescriptions
- b. ICD-10 and diagnostic report codes in prescriptions
- c. Matters of import regarding prescription filling
- d. Prescription logbooks and the prescription logging process

**6. Computers and software use in pharmacies (You can explain the programs that are also used in your country.)**

- a. Turkish Social Security Service (Sosyal Güvenlik Kurumu, SGK) provision system (MEDULA) and relevant pharmaceutical software (TEBEOS, Farmakom etc.)
- b. Turkish Medical Enforcement Declaration (Sağlık Uygulama Tebliği, SUT) and electronic pharmaceutical information resources (Rx Media etc.)
- c. The Turkish Pharmaceutical Track and Trace System (İlaç Takip Sistemi, İTS)
- d. Available stocks and expiration dates of pharmaceutical and medical materials, disposal of soon-to-expire pharmaceuticals
- e. Income and expense balance, profits, differences in purchase and sales across fiscal periods
- f. Profiling of pharmaceuticals in the context of the Turkish Personal Data Protection Law (Kişisel Verilerin Korunması Kanunu, KVKK)

**7. Pharmaceuticals that must be present in the pharmacy**

**8. Use of fridges, pharmaceuticals requiring cold storage**

**9. Tracking of temperature and humidity in pharmacies**

**10. Procedures regarding the calibration and inspection of fridges, thermometers, hydrometers, scales and other measurement devices**

**11. Organization of the pharmacy's laboratory and the materials and equipment it must contain.**

## Addendum 2: Internship Evaluation Form



### T.C. BAĞCİSARAYI ÜNİVERSİTESİ SCHOOL OF PHARMACY INTERNSHIP EVALUATION REPORT

#### I. Student and internship information

Student ID:  
Name:  
Contact information for  
interned pharmacy:  
Phone/Address:  
Internship start date:  
Internship end date:  
Internship Duration (working  
days)

#### II. Internship evaluation

	20 points inadequate	40 points below average	60 points average	80 points above average	100 points excellent
Daily attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Punctuality regarding work times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obedience to work rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interactions with patients/customers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to communicate and work in a group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Desire for improving professional knowledge and skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Desire for self-improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of duty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional skill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### III. Other observation and suggestions

#### IV. Overall evaluation of the intern

Success evaluation: ( ) Successful ( ) Unsuccessful  
Date of evaluation:

Supervising pharmacist's

Name Stamp and signature

\* To be delivered to the office of the dean in a sealed envelope after signing and stamping.