



BAU TIP

BAHÇEŞEHİR UNIVERSITY SCHOOL OF MEDICINE

"scientia et amore vitae"

BAHÇEŞEHİR UNIVERSITY

SCHOOL OF MEDICINE

CLASS 6

ACADEMIC PROGRAMME

2023-2024

BAU TIP
BAHÇEŞEHİR ÜNİVERSİTESİ TIP FAKÜLTESİ

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Preface

Dear intern doctors,

By completing the first five years of medical school, you have earned the title of intern doctor. Congratulations. The five years you have left behind have been spent in theoretical and practical instructions and challenging exams. A very different process awaits you during your internship.

The internship is also called pre-physician. During this period, you should acquire all the skills necessary for the medical profession and make up for any deficiencies. Do not forget that this time is a good opportunity to gain experience as a doctor before starting your professional life.

The internship at Bahçeşehir University Faculty of Medicine takes place in our affiliated hospitals, various public hospitals, and primary healthcare facilities. During the internship, there are a variety of educational activities depending on the department, such as outpatient clinic, bedside training, operating room, night shifts, seminars, and case presentations. In addition, there are visits to facilities such as ambulance services, municipality health services, public health laboratories where you can work as a physician, and the Medical Chamber, the professional organization of doctors.

The internship in our faculty lasts 12 months without interruption. During this period, you will visit all departments in the program for specific periods of time with rotations as explained in the academic calendar. There are also rotations within each department. Each department creates its programs and informs the students on the first day of the internship. On the first day of your internship, you should contact the internship coordinator of the relevant department.

You can also consider the internship a trial period for your professional career. Therefore, you should feel like a doctor and meet its requirements. You must dress and behave as a doctor should. In the appendices of this logbook, you will find the Directive of Internship of the Faculty of Medicine of Bahçeşehir University, which contains your rights, responsibilities, and rules that you must follow during your internship. In addition, in the institutions where you are, you must comply with the rules of those institutions, even if those rules differ from ours.

We wish you to feel more comfortable day by day in the practice of medicine and learn with pleasure.

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	Forensic Medicine	15 days
9	Otolaryngology	15 days
10	Dermatology	15 days

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



 BAUCENITHIR UNIVERSITISI TIP FAKULTESI

Academic Calendar 2023- 2024

GROUPS	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	
GROUP 1A	INTERNAL MEDICINE (01.07.2023-31.08.2023)		OBST&GYNEC (01.09.2023-30.09.2023)	GENERAL SURG (01.10.2023-31.10.2023)	PUBLIC HEALTH (01.11.2023-31.12.2023)		PEDIATRICS (01.01.2024-28.02.2024)		EMERGENCY MED (01.03.2024-31.03.2024)	PSYCHIATRY (01.04.2024-30.04.2024)	ELECTIVES (01.05.2024-30.06.2024)		
GROUP 1B			GENERAL SURG (01.09.2023-30.09.2023)	OBST&GYNEC (01.10.2023-31.10.2023)					PSYCHIATRY (01.03.2024-31.03.2024)	EMERGENCY MED (01.04.2024-30.04.2024)			
GROUP 2A	EMERGENCY MED (01.07.2023-31.07.2023)	PSYCHIATRY (01.08.2023-31.08.2023)	INTERNAL MEDICINE (01.09.2023- 31.10.2023)		OBST&GYNEC. (01.11.2023-30.11.2023)	GENERAL SURG (01.12.2023-31.12.2023)	PUBLIC HEALTH (01.01.2024- 28.02.2024)		PEDIATRICS (01.03.2024-30.04.2024)				
GROUP 2B	PSYCHIATRY (01.07.2023-31.07.2023)	EMERGENCY MED (01.08.2023-31.08.2023)			GENERAL SURG (01.11.2023-30.11.2023)	OBST&GYNEC (01.12.2023-31.12.2023)							
GROUP 3A	PEDIATRICS (01.07.2023-31.08.2023)		EMERGENCY MED (01.09.2023-30.09.2023)	PSYCHIATRY (01.10.2023-31.10.2023)	INTERNAL MEDICINE (01.11.2023-31.12.2023)		OBST&GYNEC (01.01.2024-31.01.2024)	GENERAL SURG (01.02.2024-28.02.2024)	PUBLIC HEALTH (01.03.2024- 30.04.2024)				
GROUP 3B			PSYCHIATRY (01.09.2023-30.09.2023)	EMERGENCY MED (01.10.2023-31.10.2023)			GENERAL SURG (01.01.2024-31.01.2024)	OBST&GYNEC (01.02.2024-28.02.2024)					
GROUP 4A	PUBLIC HEALTH (01.07.2023-31.08.2023)		PEDIATRICS (01.09.2023- 31.10.2023)		EMERGENCY MED (01.11.2023-30.11.2023)	PSYCHIATRY (01.12.2023-31.12.2023)	INTERNAL MEDICINE (01.01.2024-28.02.2024)		OBST&GYNEC (01.03.2024-31.03.2024)	GENERAL SURG (01.04.2024-30.04.2024)			
GROUP 4B					PSYCHIATRY (01.11.2023-30.11.2023)	EMERGENCY MED (01.12.2023-31.12.2023)			GENERAL SURG (01.03.2024-31.03.2024)	OBST&GYNEC (01.04.2024-30.04.2024)			
GROUP 5A	OBST&GYNEC (01.07.2023-31.07.2023)	GENERAL SURG (01.08.2023-31.08.2023)	PUBLIC HEALTH (01.09.2023- 31.10.2023)		PEDIATRICS (01.11.2023-31.12.2023)		EMERGENCY MED (01.01.2024-31.01.2024)	PSYCHIATRY (01.02.2024-28.02.2024)	INTERNAL MEDICINE (01.03.2024-30.04.2024)				
GROUP 5B	GENERAL SURG (01.07.2023-31.07.2023)	OBST&GYNEC (01.08.2023-31.08.2023)					PSYCHIATRY (01.01.2024-31.01.2024)	EMERGENCY MED (01.02.2024-28.02.2024)					

Administrators

Dean	Türker Kılıç, Prof.
Vice Dean	Demet Koç, Assist. Prof.
Chief Coordinator	Demet Koç, Assist. Prof.
Class 6 Coordinator	Melike Yavuz, Assist. Prof.
Clerkship Administrator- Internal Medicine	Cengiz Bölükbaşı, Prof.
Clerkship Administrator- Pediatrics	Fatih Fakirullahoğlu, Assist. Prof.
Clerkship Administrator- Public Health	Melike Yavuz, Assist. Prof.
Clerkship Administrator-General Surgery	İlker Özel, Assist. Prof.
Clerkship Administrator- Obstetrics & Gynecology	Tolga Taşçı, Prof.
Clerkship Administrator- Emergency Medicine	Mehmet Koşargelir, Dr.
Clerkship Administrator- Psychiatry	Sibel Çakır, Prof.

Student Groups

NO	GROUP 1		GROUP 2		GROUP 3		GROUP 4		GROUP 5	
	1A	1B	2A	2B	3A	3B	4A	4B	5A	5B
1	2000630	1801438	1802666	1801858	1805334	1728628	1728516	1804374	1804279	1728772
2	1728650	1503524	1802353	1801205	1803936	1317005	1728574	1805315	1804271	1804823
3	1737070	1801771	1601654	1729334	1728770	1505251	1728668	1804206	1803607	1728738
4	1802915	1800998	1728642	1728740	1728582	1728564	1728554	1805405	1804322	1804084
5	1606203	1801490	1728688	1801259	1728696	1728518	1728754	1805112	1803775	1803380
6	1602055	1805651	1805350	1800678	1803148	1728506	1728788	1728524	1803384	1803979
7	1800293	1801293	1728764	1805267	1805135	1728620	1728640	1728726	1728570	2101354
8	1802606	1801297	1505040	1802648	1804681	2101087	1728584	1722799	1803947	1800945
9	2101091	2018039	2017675	1804204	1802466	1728750	1728556	1728736	1803845	2017364
10	2100891	1800793	2017689	1805200	1601901	1728682	1728616	1728674	1728594	2017243
11	2100926	1801921	2017804	1734745	2018951	2017404	1728520	1728632	1802546	2017750
12	1728756			1502313	1800976	1728646	1802865	1728530	1804845	1728646
13				1728694				1804358	1805178	

Aim and objectives of the sixth year

AIM: The purpose of the Class 6 program is to enable students to make clinical and field applications to develop the knowledge, attitudes, and skills acquired in the previous periods of medical education.

Learning objectives:

At the end of this class, the students should be able to:

Knowledge:

1. List the biological, social, and cultural causes and risk factors for common health problems in society,
2. Define the normal and pathological clinical, laboratory, and radiological findings,
3. Explain the measures taken to protect people from the most common, deadly, and debilitating health problems,
4. Explain the symptoms of the most common diseases and the clinical, radiological, pathological, and laboratory findings for diagnosis,
5. List the measures to be taken in the treatment of common diseases,
6. Explain the management and operation of primary healthcare facilities,
7. Recognize the community with on-site practices and enumerate the protective measures of primary health care services,
8. List the steps to identify needs and manage the process when extraordinary health problems threaten the community.

Skills:

1. Apply basic concepts and principles in solving clinical cases,
2. Evaluate medical material and reports of common diseases in the community and diagnose them,
3. Treat and intervene in the initial stages of diseases prevalent in the community, compile prescriptions, and provide referral information when necessary,
4. Apply commonly used medical procedures in diagnosis and treatment,
5. Conduct quality and quantity-appropriate prenatal and postnatal follow-ups,
6. Facilitate normal spontaneous vaginal delivery under appropriate conditions by applying basic concepts of childbirth,
7. Fulfillment of basic practices related to the care of healthy infants,
8. Take medical histories of children and their families, manage diagnosis and treatment, and make appropriate referrals when necessary,
9. Perform initial and emergency interventions in accordance with basic rules for the management of emergencies and perform basic interventional procedures,
10. Provide differential diagnosis and treatment of common psychiatric disorders and makes appropriate referrals when necessary,
11. Conduct primary health education, health promotion, and preventive medicine activities,

12. Communicate effectively with the community, colleagues, patients, and their families,
13. Assess forensic cases in an appropriate system and write a forensic report,
14. Prepare and make presentations.

Attitude:

1. Demonstrate the belief that the primary role of the physician is to protect and improve the lives and health of people
2. Be aware of the importance and necessity of acting according to the basic principles of health economics in the practice of health care and in setting priorities,
3. Demonstrate the responsibility to intervene in emergencies,
4. Explain the importance of accurately informing patients and their families of their health status and obtaining informed consent for all patient interventions,
5. Recognize the importance of honest and effective communication with patients, their families, colleagues, and staff,
6. Discuss that social reasons should be considered in resolving health problems,
7. Demonstrate behaviors consistent with patient rights, ethics, and deontology,
8. Recognize the importance of health care legislation in the management and application of health care services,
9. Research clinical issues related to patient care and management using the library and its 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.	
Hasan Atilla Özkan	Prof. M.D.	
Banu Kale	Prof. M.D.	
Ömer Topdağı	Assoc. Prof. M.D.	
Sema Türker	Assoc. Prof. M.D.	
Sidika Gülkan Özkan	Assist. Prof. M.D.	

2- Aim and objectives

Aim: The Internal Medicine program aims to train physicians who are able to treat the most common health problems related to internal medicine in our country and to take the necessary preventive health measures in a primary care environment with good communication skills and ethical principles using current and evidence-based scientific knowledge.

Learning Objectives:

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

Knowledge:

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

Skills:

- Obtain an accurate, pertinent history from all available sources and record it completely and accurately,
- Perform and record a thorough physical examination,
- Establish an appropriate differential diagnosis,
- Establish a diagnostic and treatment plan for the patient based on the clinical information and laboratory data collected,
- Treat conditions common to adults in the primary care setting,
- Distinguish between emergencies and non-emergencies,
- Refer patients whose diagnosis, treatment, and follow-up cannot be provided by primary health care providers,
- Follow-up care of patients with chronic diseases,
- Ask for a consultation with other medical specialties,
- Obtain informed consent from parents and the patient,
- Communicate effectively with patients, their families, colleagues, and other health care personnel,
- Keep records of primary health care in accordance with official and legal requirements,

- Counsel preventive health care issues,
- Demonstrate ability to educate patients, families, and other members of the health care team,

Attitude:

- Dress and look appropriate as a medical doctor,
- Establish professional relationships with patients and members of the multidisciplinary health care providers,
- Demonstrate sufficient interpersonal skills in building a physician-patient relationship,
- Assess the patient as a whole, not just their complaints,
- Respect the patient's privacy,
- Utilize the library and its resources to research clinical issues related to patient care and management.

3- Educational methods

- Outpatient clinics
- Bedside training
- Night shifts
- Seminars
- Case discussions

4- General rules of the program

Attendance

- ✓ All students should be present at the hospital between 08:00 and 17:00.
- ✓ Attendance at all educational activities included in the program is mandatory.
- ✓ If you are going to be late, call your supervisor. This is a courteous and professional procedure.

Outpatient Clinics

- ✓ Students are assigned to different departments on the first day, and each department has specific training to complete.
- ✓ There are weekly rotations between clinics.
- ✓ Students will observe patient management with faculty staff.

Bedside training

- ✓ All students should follow the hospitalized patients in their clinic and record their follow-up in the appropriate section of their logbook.
- ✓ Attendance to ward rounds of clinics at scheduled hours is mandatory.
- ✓ Students are required to discuss differential diagnosis and treatment options during ward rounds.

Night shifts

- ✓ All students are required to work the number of night shifts as determined by the department.
- ✓ During the night shift, the supervisor is responsible for the department and his/her rules must be followed.
- ✓ All students must monitor patients during the night shift and document this in their log book.

Seminars and case presentations

- ✓ All students are required to give a seminar and a case presentation during the clerkship, and attendance at other presentations is mandatory.
- ✓ Seminar topics will be determined at the beginning of the program.
- ✓ Schedule for the presentations will be decided according to the Faculty's staff's program.

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the application is done and explains the results to the patient and / or their relatives
2	Makes the application in accordance with the guide / directive in an emergency
3	Makes the application* in uncomplicated, common, cases/cases
4	Performs practice* including complex situations/phenomenon's

**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
Measurement of body temperature	4	20	20
Measuring and documentation 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
Testing Blood sugar (glucometer)	4	20	5
Chest X-ray interpretation	3	40	20
Intramuscular injection	4	10	5
Administer oxygen therapy	4	20	10
Administer nebulizer treatment	4	20	10
Administration of IV fluids & drugs	4	20	10
Blood sample collection	4	20	10
Cardiopulmonary resuscitation	4	2	-
Blood marrow aspiration/biopsy	1	2	-
Paracentesis/thoracentesis	1	10	-
Prescription arrangement	4	10	
Healthy diet	4		10



PEDIATRICS



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Pediatrics Internship Program

1- Academic Staff

PEDIATRICS		
Gülendam Koçak	Prof. M.D.	Head of the Department
Duygu Övünç Hamdioğlu	Prof. M.D.	
Koray Yalçın	Assoc. Prof. M.D.	
Ferda Yapıcı Köklü	Prof. M.D.	
Hatice Gülhan Sözen	Assist. Prof. M.D.	
Mehmet Fatih Fakirullahoğlu	Assist. Prof. M.D.	
Safiye Suna Çelen	Assist. Prof. M.D.	
Yiğit Mustafa Ertunç	Assist. Prof. M.D.	

2- Aim and objectives

Aim: At the end of this pediatric rotation interns will be well-informed about the common diseases affecting children, have practice on how to approach and examine a sick child, plan investigations and have the ability to organize management.

Learning Objectives:

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

Knowledge:

- Demonstrate knowledge about all the subjects they had learned at the 3rd and 4th Class related to Pediatrics.

Skills:

- Establish a proper relationship with the child and parents
- Obtain an accurate, pertinent history from all appropriate available sources and record it in a complete and concise manner
- Perform and record a thorough physical examination
- Plan laboratory tests according to the obtained medical history and physical examination findings
- Evaluate laboratory data
- Develop an appropriate differential diagnosis
- Formulate a diagnostic and therapeutic plan for his/her patient based on gathered clinical information and laboratory data
- Present his/her patient
- Inform patient/parents about the management plans
- Prepare epicrisis (discharge) report
- Obtain informed approval
- Write medical reports for referral
- Explain the rules of referral
- Identify cases that need hospital admission
- Review and present literature

Attitude:

- Dress and look physically appropriate as a medical doctor,
- Develop professional relationships with patients and members of the multidisciplinary health care providers,
- Demonstrate sufficient interpersonal skills in establishing a physician-patient relationship,
- Assess the patient as a whole, not just their complaints,
- Respect the patient's privacy,
- Utilize the library and its resources to research clinical issues in patient care and management.

3- Educational methods

- Outpatient clinics
- Bedside training
- Night shifts
- Seminars
- Case discussions
- Rotations in other hospitals

4- General rules of the program

Attendance

- ✓ All students should be present at the hospital between 08:00 and 17:00.
- ✓ Attendance at all educational activities included in the program is compulsory.
- ✓ If you will be late, call your supervisor. This is a courteous and professional procedure.

Outpatient clinics

- ✓ Students will be assigned to different departments on the first day, and each department has specific training to complete.
- ✓ There will be weekly based rotations between clinics.
- ✓ Students will observe patient management with faculty staff.

Bedside training

- ✓ All students should follow the hospitalized patients in their clinic and record their follow-up in the appropriate section of their logbook.
- ✓ Attendance to ward rounds of clinics at scheduled hours is compulsory.
- ✓ Students are required to discuss differential diagnosis and treatment options during ward rounds.

Night shifts

- ✓ All students must keep the number of night shifts determined by the department.
- ✓ During the night shift, the supervisor is in charge of the department, and following his/her rules is mandatory.
- ✓ All students must monitor patients during the night shift and document this in their logbook.

Seminars and case presentations

- ✓ All students are required to give a seminar and a case presentation during the clerkship, and attendance at other presentations is mandatory.

- ✓ Seminar topics will be determined at the beginning of the program.
- ✓ Schedule for the presentations will be decided according to the Faculty's staff's program.

Rotations in other hospitals

- ✓ Students will do rotations two days per week in public hospitals where patient diversity is high.
- ✓ Students will do rotations two days per week in public hospitals where patient diversity is high.

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the application is done and explains the results to the patient and/or their relatives
2	Makes the application in accordance with the guide/directive in an emergency
3	Makes the application* in uncomplicated, common cases/cases
4	Performs practice* including complex situations/phenomenon

**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 & documentation vital signs	4		10
Measuring and evaluating pulse oximetry	4		10
Physical examination of children and infant	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 & drugs	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	4	5	
Follow up healthy infant and child	4	10	
Counselling and advising immunization	4	10	
Counselling and advising healthy nutrition	4	10	
Counselling and follow up Metabolic and endocrinologic screening program	4	10	
Healthy diet	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.	
Timur Gürkan	Prof. M.D.	
Aynur Adeviye Erşahin	Assoc. Prof. M.D.	
Mehmet Akif Sargin	Assoc. Prof. M.D.	
Murat Yassa	Assoc. Prof. M.D.	
Nur Dokuzeylül Güngör	Assoc. Prof. M.D.	
Cansu Kanlioğlu Güler	Assist. Prof. M.D.	
Emine Eda Akalin	Assist. Prof. M.D.	
Eylem Odacılar	Assist. Prof. M.D.	
Halenur Bozdağ	Assist. Prof. M.D.	
Merve Demir	Assist. Prof. M.D.	
Yaren Tuba Bektaş	Assist. Prof. M.D.	

2- Aim and Objectives

Aim: The aim of Gynecology and Obstetrics internship program is to graduate medical doctors who can recognize the clinical signs and symptoms of common gynecological diseases and pregnancy problems; can perform the necessary preventive health care implementations in a primary care setting using up-to date and evidence based scientific knowledge and good communication skills.

Learning Objectives:

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

Knowledge:

- Differentiate between normal and abnormal bleeding using knowledge of menstrual cycle physiology, puberty and menopause,
- List contraceptive methods,
- Diagnose pregnancy,
- Distinguish between normal and abnormal physiologic changes during pregnancy,
- Analyze the impact of genetics, medical conditions, and environmental factors on maternal health and fetal development,
- List the risk factors of obstetric emergencies like pre-eclampsia, eclampsia, antenatal bleeding, postpartum bleeding,
- Diagnose, list the causes, and lead the patient for gynecological situations like, amenorrhea, menopause, abnormal uterine bleeding, postmenopausal bleeding
- List the causes of sexually transmitted diseases,
- Construct differential diagnoses of patients with common benign gynecological conditions,
- List the risk factors of gynecological cancers,

- Formulate a differential diagnosis of the acute abdomen and chronic pelvic pain
- Outline the etiology and evaluation of infertility,

Skills:

- Obtain gynecologic and obstetric history from patients,
- Apply recommended prevention strategies to women throughout their lifespan,
- Follow up pregnancy; order the right tests and evaluate the results in routine pregnancy controls,
- Clerk, investigate and presents patients 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 diagnostic tests, and perform the appropriate treatment,
- Perform cervical smear, evaluate the result, and lead the patient to treatment.

Attitude:

- Dress and look physically appropriate as a medical doctor,
- Develop professional relationships with patients and members of the multidisciplinary health care providers,
- Demonstrate sufficient interpersonal skills in establishing a physician-patient relationship,
- Assess the patient as a whole, not just their complaints,
- Respect the patient's privacy,
- Obtain informed consent when necessary
- Utilize the library and its resources to research clinical issues in patient care and management.

3- Educational methods

- Outpatient clinics
- 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 should be present at the hospital between 08:00 and 17:00.
- ✓ Attendance at all educational activities included in the program is compulsory.
- ✓ If you will be late, call your supervisor. This is a courteous and professional procedure.

Outpatient clinics

- ✓ Students will be assigned to different departments on the first day, and each department has specific training to complete.
- ✓ There will be weekly based rotations between clinics.
- ✓ Students will observe patient management with faculty staff.

Bedside training

- ✓ All students should follow the hospitalized patients in their clinic and record their follow-up in the appropriate section of their logbook.
- ✓ Attendance to ward rounds of clinics at scheduled hours is compulsory.
- ✓ Students are required to discuss differential diagnosis and treatment options during ward rounds.

Surgery ward and delivery room

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

Night shifts

- ✓ All students must keep the number of night shifts determined by the department.
- ✓ During the night shift, the supervisor is in charge of the department, and following his/her rules is mandatory.
- ✓ All students must monitor patients during the night shift and document this in their logbook.

Seminars and case presentations

- ✓ All students are required to give a seminar and a case presentation during the clerkship, and attendance at other presentations is mandatory.
- ✓ Seminar topics will be determined at the beginning of the program.
- ✓ Schedule for the presentations will be decided according to the Faculty staff's program.

Rotations in other hospitals

- ✓ Students will do rotations two days per week in public hospitals where patient diversity is high.
- ✓ Students will do rotations two days per week in public hospitals where patient diversity is high.

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the application is done and explains the results to the patient and / or their relatives
2	Makes the application in accordance with the guide / directive in an emergency
3	Makes the application* in uncomplicated, common, cases/cases
4	Performs practice* including complex situations/phenomenon's

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

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

Taking informed consent	4	5	5
Writing Epicrisis	4	10	5
Wound care and Dressing	3	2	-
Vaginal smear taking	3	2	-
Management of normal labor	2	5	5
Urethral catheterization	3	5	5
Non-stress test	1	10	10
IUD insertion	1	5	2
Prescription arrangement	4	3	3
Episiotomy	2	3	2
Postnatal care of the mother	3	10	-



BAU TIP
 BANGKUNING UNIVERSITY TIP FAKULTESI

GENERAL SURGERY

BAU TIP
BAHÇEŞEHİR ÜNİVERSİTESİ TIP FAKÜLTESİ

General Surgery Internship Program

1- Academic Staff

GENERAL SURGERY		
Levent Kaptanoğlu	Prof. M.D.	Head of the Department
Deniz Balci	Prof. M.D.	
Emre Sivrikoz	Prof. M.D.	
Metin Kement	Prof. M.D.	
Babek Tabandeh	Assist. Prof. M.D.	
Fadime Didem Can Trabulus	Assist. Prof. M.D.	
İlhami Soykan Barlas	Assist. Prof. M.D.	
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 General Surgery Internship program is to graduate medical doctors who can effectively carry out the history, physical examination, diagnosis and differential diagnosis processes of the surgical patients and can follow the patients before and after the surgical treatment with good communication skills and ethical principles using up-to-date and evidence based scientific knowledge.

Learning Objectives:

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

Knowledge:

- Demonstrate knowledge and understanding of common surgical problems,
- Understand surgical treatments and alternatives to surgical treatment,
- Become familiar with various surgical procedures and know their expected outcomes and complications,
- Use diagnostic testing based on the pre-test probability of disease and the like hood of test results altering management,
- Become familiar with the action, dosage and use of common pharmacologic agents used in surgery (analgesics, antibiotics, anticoagulants, sedatives),
- Explain the basic principles of disaster management.

Skills:

- Obtain an accurate, comprehensive medical history from adult surgical patients,
- Perform and record comprehensive physical examination,
- Choose appropriate laboratory tests and imaging methods according to clinical condition and appropriate to the primary care level,
- Interpret the results of the common laboratory tests and common radiologic tests
- 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 situations,
- Write the patient's order,
- Clerk, investigate and presents patients during ward rounds,
- Understand and possibly perform various basic procedures,
- Use presentation skills effectively,
- Adequately prepare patients undergoing various surgical procedures,
- Participate in operations,
- Apply specific protocol in the operating room (scrubbing),
- Approach to a patient with gastrointestinal bleeding,
- Approach to a patient with abdominal pain,
- Manage with a polytrauma patient,
- Get ability of wound care,
- Suture of laceration and remove of stiches,
- Explain the types of shock, manage with a shock patient, define the differentials, select the proper treatment,
- Get ability of drain care and follow up,
- Get ability of nasogastric tube and urinary catheter insertion, care, follow up and removal,
- Ask for consultation from other medical specialties,
- Follow up patients after surgery till discharge and write a proper discharge summary
- Write patient's recipe,
- Design scientific studies which can be conducted in primary care circumstances.

Attitude:

- Dress and look physically appropriate as a medical doctor,
- Develop professional relationships with patients and members of the multidisciplinary health care providers,
- Demonstrate sufficient interpersonal skills in establishing a physician-patient relationship,
- Assess the patient as a whole, not just their complaints,
- Respect the patient's privacy,
- Obtain informed consent, when necessary,
- Utilize the library and its resources to research clinical issues in patient care and management.

3- Educational methods

- Outpatient clinics
- Bedside training
- Surgery ward
- Night shifts
- Seminars
- Case discussions

4- General rules of the program

Attendance

- ✓ All students should be present at the hospital between 08:00 and 17:00.
- ✓ Attendance at all educational activities included in the program is compulsory.
- ✓ If you will be late, call your supervisor. This is a courteous and professional procedure.

Outpatient clinics

- ✓ Students will be assigned to different departments on the first day, and each department has specific training to complete.
- ✓ There will be weekly based rotations between clinics.
- ✓ Students will observe patient management with faculty staff.

Bedside training

- ✓ All students should follow the hospitalized patients in their clinic and record their follow-up in the appropriate section of their logbook.
- ✓ Attendance to ward rounds of clinics at scheduled hours is compulsory.
- ✓ Students are required to discuss differential diagnosis and treatment options during ward rounds.

Surgery ward

- ✓ All students must obey the rules in surgery ward

Night shifts

- ✓ All students must keep the number of night shifts determined by the department.
- ✓ During the night shift, the supervisor is in charge of the department, and following his/her rules is mandatory.
- ✓ All students must monitor patients during the night shift and document this in their logbook.

Seminars and case presentations

- ✓ All students are required to give a seminar and a case presentation during the clerkship, and attendance at other presentations is mandatory.
- ✓ Seminar topics will be determined at the beginning of the program.
- ✓ Schedule for the presentations will be decided according to the Faculty's staff's program.

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

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the application is done and explains the results to the patient and / or their relatives
2	Makes the application in accordance with the guide / directive in an emergency
3	Makes the application* in uncomplicated, common, cases/cases
4	Performs practice* including complex situations/phenomenon's

**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
Taking informed consent	4	5	-
Writing discharge summary	4	5	3
Measuring and documentation of vital signs	4	5	5
Venous cannula insertion	1	10	5
Central 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 X-ray evaluation	3	10	-
Abscess drainage	1	2	1
Intramuscular, intravenous injection	4	10	3
Local anesthesia	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
Apply specific protocol in the OR (scrubbing, gloving, prepping, draping)	4	5	5
Evaluation of nutritional status	4	2	2

PSYCHIATRY



BAU TIP
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Psychiatry

1- Academic Staff

PSYCHIATRY		
Sibel Çakır	Prof. M.D.	Head of the Department
Asil Budaklı	Assist. Prof. M.D.	

2- Aim and objectives

Aim: The aim of Psychiatry and Behavioral Sciences Internship program is to graduate medical doctors who are familiar with common psychiatric disorders; can make diagnosis, differential diagnosis and follow up in primary health care settings and refer the patients to a specialist in cases where he/she is not competent.

Learning Objectives:

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

Knowledge:

- Demonstrate knowledge regarding the proposed etiology, clinical features, differential diagnosis and various treatment modalities for the major psychiatric disorders, including schizophrenia, mood disorders, anxiety disorders and substance use disorders
- Explain drugs, drug side effects and drug interactions used in psychiatry
- Have a basic information on psychotherapies

Skills:

- Complete a psychiatric interview and mental status examination
- Distinguish the symptoms, make diagnosis, and differential diagnosis, initiate the appropriate treatment and perform follow-ups of the diseases like depression, anxiety and panic attacks
- Distinguish the symptoms, make diagnosis, make the preliminary interventions and refer to the specialist in psychiatric diseases like schizophrenia, bipolar disorder, phobias, substance use disorders, psychosomatic disorders, attention deficit hyperactivity disorder
- Conduct an assessment risk of harm to the patient or others
- Stabilize the psychiatric emergency cases
- Request the appropriate laboratory tests and consultations, when necessary
- Explain to patients and their relatives the nature of their condition, its management and prognosis.

Attitude:

- Dress and look physically appropriate as a medical doctor,
- Develop professional relationships with patients and members of the multidisciplinary health care providers,
- Demonstrate sufficient interpersonal skills in establishing a physician-patient relationship,
- Assess the patient as a whole, not just their complaints,
- Respect the patient's privacy,

- Utilize the library and its resources to research clinical issues in patient care and management.

3- Educational methods

- Outpatient clinics
- Seminars
- Case discussions
- Rotations in other hospitals

4- General rules of the program

Attendance

- ✓ All students should be present at the hospital between 08:00 and 17:00.
- ✓ Attendance at all educational activities included in the program is compulsory.
- ✓ If you will be late, call your supervisor. This is a courteous and professional procedure.

Outpatient clinics

- ✓ Students will observe patient management with faculty staff.

Seminars and case presentations

- ✓ All students are required to give a seminar and a case presentation during the clerkship, and attendance at other presentations is mandatory.
- ✓ Seminar topics will be determined at the beginning of the program.
- ✓ Schedule for the presentations will be decided according to the faculty's staff's program.

Rotations in other hospitals

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

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the application is done and explains the results to the patient and / or their relatives
2	Makes the application in accordance with the guide / directive in an emergency
3	Makes the application* in uncomplicated, common, cases/cases
4	Performs practice* including complex situations/phenomenon's

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

Procedure	Learning level*	Observed	Performed
		Target	Target
Psychiatric history taking	3	4	2
Mental Status Examination	3	4	2
Mini-mental state examination	3	4	2
Management of psychiatric emergencies	3	4	2
Determine legal capacity	2	4	
Intervene to suicide	3		

EMERGENCY MEDICINE

BAU TIP
BAHÇEŞEHİR ÜNİVERSİTESİ TIP FAKÜLTESİ

Emergency Medicine Internship Program

1- Academic Staff

EMERGENCY MEDICINE		
Mehmet Koşargelir	M.D.	

2- Aim and objectives

Aim: The aim of Emergency Medicine Internship program is to graduate medical doctors who have knowledge about the emergency approach of all diseases and ability to evaluate patients from a wide angle.

Learning Objectives:

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

Knowledge:

- Explain the approach and classification of the emergency patient and triage
- Evaluate common emergent disorders seen in the emergency department setting
- Organize information gathered from the interview, physical examination, and diagnostic tests and formulate reasonable hypotheses and differential diagnosis appropriate to the acute care setting
- Identify the differential diagnosis, diagnostic approach (including history, physical exam, laboratory and imaging assessments, and clinical reasoning) and management of patients with common diagnosis including coma and altered states of consciousness, drug overdose and acute intoxication, myocardial ischemia and infarction, hypertensive emergencies and urgencies, shock, sepsis, syncope, acute pulmonary edema, asthma and COPD exacerbation, fever, seizure, pulmonary embolism, poisonings, environmental injuries, acute GI bleeding, headache, stroke and community-acquired pneumonia
- Recognize, initially manage and understand criteria for referral for common behavioral and surgical problems of adults, including psychosis, mania, alcohol and drug intoxication and withdrawal, acute abdomen, fractures, trauma and wounds.
- Identify the psychosocial needs of patients and families in the emergency room setting.

Skills:

- Obtain a focused developmentally appropriate biomedical and psycho social story of the patient's illness in the acute care setting
- 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
- Perform basic and advanced airway procedures, basic life support
- Perform advanced cardiac life support for adults and children
- Evaluate patient with chest pain, abdominal pain, shortness of breath
- Perform the initial evaluation of a trauma patient
- Arrange necessary consultation with physicians and other professionals when needed

Attitude:

- Dress and look physically appropriate as a medical doctor,
- Develop professional relationships with patients and members of the multidisciplinary health care providers,
- Demonstrate sufficient interpersonal skills in establishing a physician-patient relationship,
- Assess the patient as a whole, not just their complaints,
- Respect the patient's privacy,
- Obtain informed consent, when necessary,
- Utilize the library and its resources to research clinical issues in patient care and management.

3- Educational methods

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

4- General rules of the program

Attendance

- ✓ All students should be present at the hospital between 08:00 and 17:00.
- ✓ Attendance at all educational activities included in the program is compulsory.
- ✓ If you will be late, call your supervisor. This is a courteous and professional procedure.

Emergency service clinics

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

Case presentations

- ✓ All students are required to give a case presentation during the clerkship, and attendance at other presentations is mandatory.
- ✓ Schedule for the presentations will be decided according to the Faculty's staff's program.

Rotations in other hospitals

- ✓ Students should obey the rules in the hospitals which they rotate.

5- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the application is done and explains the results to the patient and / or their relatives
2	Makes the application in accordance with the guide / directive in an emergency
3	Makes the application* in uncomplicated, common, cases/cases
4	Performs practice* including complex situations/phenomenon's

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

Procedure	Learning level*	Observed Target	Performed Target
History taking and complete clinical examination	4	10	10
Measuring 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	-
ECG evaluation	3	5	-
Cranial CT evaluation	1	5	-





PUBLIC HEALTH



BAU TIP
BAHÇESÇİHER UNIVERSİTESİ TIP FAKÜLTESİ

Public Health Internship Program

1- Academic Staff

PUBLIC HEALTH DEPARTMENT		
Melike Yavuz	Assist. Prof. M.D.	Head of the Department
Sebahat Dilek Torun	Prof. M.D.	

2- Aim and objectives

The aim of the Public Health Internship is to provide a public health perspective in prevention, promotion, diagnosis and treatment of health/ health related issues of the community, in evaluation of health policies and systems and health management in the light of the knowledge and skills gained from the first two phases of your medical education.

According to this aim Community Health Center and Family Health Center practices are integrated to our program. The community-based medical education model is adopted in providing the theoretical information that may be necessary for the primary health care services.

The activities in this program will be;

1. Adapting to Public Health Internship Program
2. Primary Health Care Services
3. Seminar Studies

2.1. Adapting to Public Health Internship Program

Aim:

Learning concepts and basic approaches in public health.

Learning objectives:

1. To explain the concept, importance and functions of public health.
2. To explain the determinants of health in a case.
3. To explain primary health care organization in Turkey based on legislation.
4. To explain the preventive health services carried out by the Ministry of Health in the primary health care centers.
5. To explain the relevant parts of health legislation (Mandatory service regulation for doctors, assignment regulation for health staff etc.)

2.2. Primary Health Care Services:

Aim:

Observation and practice by participating in the work of various units providing primary health care services.

Learning objectives:

1. To explain the scope of preventive health services in family health centers
2. To apply vaccines according to national vaccination schedule.
3. To follow-up infants and children in primary health care according to protocols of Ministry of Health.
4. To follow-up pregnant and postpartum woman in primary health care according to protocols of Ministry of Health.
5. To identify demographic characteristics of people who apply to family health centers.
6. To be able to counsel pre-marriage and family planning in Family Health Centers.
7. To explain the activities done in each unit of Community Health Center.

8. To participate at least two activities done in the Community Health Center.
9. To be able to take water samples under appropriate conditions and to measure the amount of residual chlorine in water.

2.3. Seminar Studies:

Aims:

1. Students will have information and update their knowledge on a topic chosen among public health issues.
2. Students will gain the ability to review the information about a special topic by using of various scientific sources.
3. Students will improve their presentation skills.

SEMINAR TOPICS

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

No	Topic	No	Topic
1	Unemployment, poverty, and inequalities in health	16	Cancer early detection and screening programs
2	Community Mental Health	17	Disasters associated with extreme weather events and health
3	Epidemiology of Emerging and Re-emerging Diseases (Inc. COVID-19)	18	Discrimination and Health (Inc. Ethnic, sexual orientation, disability, minorities, immigrants etc.)
4	Epidemiology and Control of Sexually Transmitted Infections	19	Migration and Health
5	Health literacy	20	War and Health
6	Emerging and reemerging vector borne diseases	21	Gender and Health
7	Ergonomics and Musculoskeletal Diseases	22	Health Effects of Climate Change
8	Occupational Health Risks of Health Care Workers	23	Health Effects of Air Pollution
9	Violence against Health Care Workers	24	Healthy Ageing - Ageism
10	Child Labor	25	Chronic/Non-Communicable Diseases: Monitoring and prevention of risk factors
11	Child Abuse	26	Pregnancy Care and Nursing from Public Health Scope
12	Health Promotion and Health Education	27	Health of Disabled People
13	Food policies and Healthy diet	28	Urbanization and health
14	Health effects of pesticides	29	Child marriages and adolescent pregnancies
15	Vaccine hesitancy and controversies	30	Infodemic and health

3- 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 Turkey Mandatory service regulation for 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		Water hygiene (To take water samples under appropriate conditions and to measure the amount of residual chlorine in water) Visit to Public Health Laboratory		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 Turkey - 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		Visit to Municipal Health Department and Environmental Protection Department		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 the missing's in logbook.		Study time to fill the missing's in logbook.	
Week 8	Seminar presentations		Seminar presentations		Seminar presentations		Study time to fill the missing's in logbook		Evaluation of logbook with group	

4- 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):

	1	2	3	4	5	6	7
	S	A	S	A	S	A	S
+12							
+11							
+10							
+9							
+8							
+7							
+6							
+5							
+4							
+3							
+2							
+1							
0							
-1							
-2							
-3							
-4							

Marriage Counseling Services

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

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Which diseases are evaluated in applicants for marriage counseling?

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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 :

5- 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 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 District Health Directorate?

.....

.....

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.....

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 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 - Adolescent - Female - Reproductive Health

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

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

.....

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

.....

School Health

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

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6- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the application is done and explains the results to the patient and / or their relatives
2	Makes the application in accordance with the guide / directive in an emergency
3	Makes the application* in uncomplicated, common, cases/cases
4	Performs practice* including complex situations/phenomenon's

*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
Periodic health examination (vision, hearing, metabolic diseases, vaccination of risky groups, cancer screenings)	4
Take measures related to the protection of health of health care 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
Struggle with infectious diseases in community	3
Identify health-related problems in the community using epidemiological methods and to reveal solutions.	3
Determine the risk groups in the community	3
Be able to interpret health indicators of the district	3
Identify the risk groups in the community	3
Immunization-childhood and adults	4
Infant Health Monitoring	4
Follow-up and periodic health examinations at different stages of life (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
Able to review the current literature and read critically	3
Clinical Pharmacology	
Prescribing	4
Be able to apply principles of rational drug use	4
Be able to apply the principles of evidenced based medicine in the clinical decision	3

Clinical Pharmacology Rational Drug Use Course

1- 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 this drug in the appropriate dose and at the appropriate time.

2- Learning objectives

At the end of this course, students

1. Get the ability to write prescriptions,
2. Choose the appropriate drug for the appropriate patient, in the appropriate dose, at the appropriate time and at the appropriate intervals,
3. Get knowledge of clinical pharmacology,
4. Get knowledge about the toxic and side effects of drugs,
5. Get knowledge of reaching scientific information in the field of health, monitor the current literature, and assess the accuracy, reliability, and validity of the information and apply it.
6. Define drugs' action mechanisms, side effects, and pharmacodynamic and pharmacokinetic properties.

3- Procedures and Skills Table

Learning Levels*	Explanation
1	Knows how the application is done and explains the results to the patient and / or their relatives
2	Makes the application in accordance with the guide / directive in an emergency
3	Makes the application* in uncomplicated, common, cases/cases
4	Performs practice* including complex situations/phenomenon's

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

Procedure	Learning level
Clinical Pharmacology	
Prescribing	4
Be able to apply principles of rational drug use	4
Be able to apply the principles of evidenced based medicine in the clinical decision	3

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: ___ / ___ / _____

Bahçeşehir 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



**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.

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 değerlendirme/yapma, değerlendirme/yapma, gerekli planları oluşturur, uygular ve süreç ve sonuçlarıyla ilgili hasta ve yakınlarını/toplumunu 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 bildirimini 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. Vajinal 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 bakımını 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 aşılması, 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 3rd Intern Symposium

3rd Intern Symposium will be held in May 2024. Exact dates and schedule will be announced late.

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Hekimliğin Eşiğinde:

INTERN SEMPOZYUMU

scientia et amore vitae

5-9 Haziran 2023
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