PEDIATRIC SURGERY (PHASE 5)

LEARNING AIM(S)		
1	In this course, it is aimed that the students gain sufficient knowledge, skills and	
	attitudes to evaluate the signs and symptoms of common diseases in pediatric	
	surgery within the scope of the National CEP, to diagnose in primary care conditions,	
	to create a treatment plan / to perform applications / to monitor, to make emergency	
	interventions when necessary or to provide referral to a pediatric surgeon.	
2	In this course, it is aimed to inform students about childhood accidents and ways of	
	protection.	

LEAF	LEARNING OBJECTIVE(S)		
1	To be able to recognize surgical problems related to the inguinal region,		
	genitourinary system, respiratory system and gastrointestinal system in children and		
	refer the patient to a pediatric surgeon.		
2	To be able to take medical history from pediatric patients with surgical problems, to		
	be able to perform physical examination and make differential diagnosis.		
3	To be able to perform laboratory and radiological evaluations of patients.		
4	To be able to present patient information during visits.		
5	To be able to recognize the causes of respiratory distress in newborns.		
6	To be able to recognize the causes of intestinal obstruction in newborns and children.		
7	To be able to diagnose acute abdomen in children and refer under appropriate		
	conditions.		
8	To be able to communicate with pediatric patients presenting with general body		
	trauma, to evaluate and examine them, to apply the principles of first approach by		
	making the differential diagnosis.		
9	To be able to explain how to intervene in diseases (foreign body aspiration, ingestion		
	of corrosive substances, foreign body ingestion, burns, etc.) that will be encountered		
	frequently in the society, and what should be considered in preventive medicine.		

10	To be able to plan fluid and electrolyte therapy in pediatric patients with emergency
	surgical problems.
11	To be able to monitor the vital signs of critically ill patients requiring emergency
	surgical treatment and refer them to a pediatric surgeon by providing respiratory
	and circulatory support with noninvasive methods when necessary.
12	To be able to adapt to operating room working conditions, to be able to suture simple
	incisions, perform wound care, interosseous application, insertion of nasogastric tube
	or urinary catheter.
13	To be able to explain the importance of obtaining consent from patients before
	surgical interventions.

ENDED LEARNING OUTCOME(S)
Can recognize surgical problems related to the inguinal region, genitourinary
system, respiratory system, and gastrointestinal system in children and refer the
patient to a pediatric surgeon.
Can take medical history from pediatric patients with surgical problems, can perform
physical examination and make differential diagnosis.
Can perform laboratory and radiological evaluations of patients.
Can present patient information during visits.
Can recognize the causes of respiratory distress in newborns.
Can recognize the causes of intestinal obstruction in newborns and children.
Can diagnose acute abdomen in children and refer under appropriate conditions.
Can communicate with pediatric patients presenting with general body trauma, to
evaluate and examine them, to apply the principles of first approach by making the
differential diagnosis.
Can explain how to intervene in diseases (foreign body aspiration, ingestion of
corrosive substances, foreign body ingestion, burns, etc.) that will be encountered
frequently in the society, and what should be considered in preventive medicine.
Can plan fluid and electrolyte therapy in pediatric patients with emergency surgical
problems.
Can monitor the vital signs of critically ill patients requiring emergency surgical
treatment and refer them to a pediatric surgeon by providing respiratory and
circulatory support with noninvasive methods when necessary.

12	Can adapt to operating room working conditions, to be able to suture simple
	incisions, perform wound care, interosseous application, insertion of nasogastric tube
	or urinary catheter.
13	Can explain the importance of obtaining consent from patients before surgical
	interventions.