

MUĞLA SITKI KOÇMAN UNIVERSITY FACULTY of MEDICINE PHASE V ENGLISH MEDICINE PROGRAM

COURSE of PEDIATRIC SURGERY 2022/2023 Academic Year COURSE GUIDEBOOK

Course Code: Med 5004 Course Topic Code: MED5-ÇCE

*This guide has been prepared by the Department of PEDIATRIC SURGERY Course Purpose, Target, Outcomes, Training and Education Contents, Methods, Educational Activities, Measurement and Evaluation Techniques, Course Logbook, Program Qualifications Matrix, Matching the Courses with NCEP 2020, Matching the Courses with the Course Objectives and Outcomes, Matching the Course Achievements with Measurement Techniques, Course Notification Form, Vertical/Horizontal Integration Status of Courses and Course Schedules were declared on 15.06.2022.

PREFACE

Dear Students,

Welcome to the Pediatric Surgery course which is an important part of your education.

In this course program, which is going to continue for 2 weeks, we aim to give the basic education of the course program in all aspects of theoretical courses and practical applications. This guide describes what you will learn and perform during your course, the rules you must follow in our clinic, and the working conditions. We wish you all success with the belief that this guide will guide you sufficiently through your course studies.

Department of Pediatric Surgery

GENERAL INFORMATION on COURSE

Course Title Main Department of Course Department Responsible for Course Course Code Course Type Duration of the Course Teaching Method of the Course ECTS Language Head of the department : Pediatric Surgery : Surgical Sciences : Pediatric Surgery : MED-5004 : Required : 2 weeks : Formal : 3 : English : Prof. Dr. Süleyman Cüneyt Karakuş

Teaching Staff

| Teaching Staff | Subject area | Theoretical Course duration (Hours) |
|-------------------------|-------------------|---|
| Süleyman Cüneyt Karakuş | Pediatric Surgery | 20 |
| Nazile Ertürk | Pediatric Surgery | 2 |
| Alev Süzen | Pediatric Surgery | 26 |

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Coordinator of the Department Education Program Coordinator of the Course Education Program Coordinator of the Course Examinations Coordinator of Course Assessment and Evaluation

- : Assistant Prof. Alev Süzen
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TEACHING METHODS-TECHNIQUES

1. Theoretical lessons

2. Learning Centered Teaching

- a. Case-based discussion sessions
- b. Student case reports,
- c. Practical application at the bedside
- d. Practical application at the bedside in the outpatient clinic

3. Interactive teaching

PHYSICAL SPACES

| Teaching Activity | Physical Space | Explanation | | |
|----------------------------|--------------------------------|-----------------------|--|--|
| Theoretical lessons | Morphology Building | | | |
| Inpatient bedside | Training and Research Hospital | 2nd Floor - Pediatric | | |
| practice | | Surgery Service | | |
| Policlinic | Training and Research Hospital | Ground Floor - | | |
| | | Pediatric Surgery | | |
| | | Polyclinic | | |
| Case analysis | Morphology Building | | | |
| Problem-based teaching | - | | | |
| Special audit | Training and Research Hospital | | | |
| applications | | | | |
| Private field applications | Training and Research Hospital | | | |

RELATED LEGISLATION

http://www.tip.mu.edu.tr/tr/ilgili-mevzuat-6641

AIM(S) of the COURSE

| 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. |

OBJECTIVE(S) of the COURSE

| 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 |
| 1 | |
| | encountered frequently in the society, and what should be considered in |
| | encountered frequently in the society, and what should be considered in preventive medicine. |
| 10 | |
| 10 | preventive medicine. |
| 10 | preventive medicine. To be able to plan fluid and electrolyte therapy in pediatric patients with |
| | preventive medicine. To be able to plan fluid and electrolyte therapy in pediatric patients with emergency surgical problems. |
| | preventive medicine.To be able to plan fluid and electrolyte therapy in pediatric patients with emergency surgical problems.To be able to monitor the vital signs of critically ill patients requiring emergency |
| | preventive medicine.To be able to plan fluid and electrolyte therapy in pediatric patients with emergency surgical problems.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 |
| 11 | preventive medicine.To be able to plan fluid and electrolyte therapy in pediatric patients with emergency surgical problems.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. |
| 11 | preventive medicine.To be able to plan fluid and electrolyte therapy in pediatric patients with emergency surgical problems.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.To be able to adapt to operating room working conditions, to be able to suture |
| 11 | preventive medicine.To be able to plan fluid and electrolyte therapy in pediatric patients with emergency surgical problems.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.To be able to adapt to operating room working conditions, to be able to suture simple incisions, perform wound care, interosseous application, insertion of |
| 11 | preventive medicine. To be able to plan fluid and electrolyte therapy in pediatric patients with emergency surgical problems. 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. 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. |

INTENDED LEARNING OUTCOME(S)

| 1 | 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. |
| 2 | Can take medical history from pediatric patients with surgical problems, can |
| | perform physical examination and make differential diagnosis. |
| 3 | Can perform laboratory and radiological evaluations of patients. |
| | |
| 4 | Can present patient information during visits. |
| 5 | Can recognize the causes of respiratory distress in newborns. |
| 6 | Can recognize the causes of intestinal obstruction in newborns and children. |
| 7 | Can diagnose acute abdomen in children and refer under appropriate conditions. |
| 8 | 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. |
| 9 | 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. |
| 10 | Can plan fluid and electrolyte therapy in pediatric patients with emergency surgical |
| | problems. |
| 11 | 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. |
| | |

DUTIES AND RESPONSIBILITIES OF STUDENTS

Duration of course is 2 weeks.

In addition to the theoretical courses, "patient practice" courses are carried out during the course.

Students are assigned daily in rotation in general and local operating rooms, Pediatric Surgery Clinic and Polyclinic.

In outpatient clinic practices, students are expected to present their thoughts on diagnosis and treatment by taking a history and performing a physical examination.

They are expected to learn and comply with sterility conditions and patient safety in the operating room.

Student who is assigned with bedside history taking and physical examination in the service, is expected to present patient information, differential diagnoses, and diagnosis of the patient during the next day's visit.

Students are responsible for completing the course logbook for each application during the course.

During the course program (if no change is notified by the relevant faculty member during the course period), students are expected to fully present for theoretical or practical application. According to the regulation, there is an attendance requirement of 70% in theoretical courses and 80% in applied courses in Phase V.

RECOMMENDED RESOURCE(S)

KEY RESOURCE(S)

| KEY RESOURCE(S) | Matched Course Outcome(s) |
|--|------------------------------|
| Pediatric Surgery-Arnold G. Coran, 7th Edition, ELSEVIER | 1,2,3,5,6,7,8,9,10 |
| Bebek ve Çocukların Cerrahi ve Ürolojik Hastalıkları- A. | 1,2,3,5,6,7,8,9,10 |
| Can Başaklar, Palme Yayıncılık | |

ADDITIONAL RESOURCE(S)

| ADDITIONAL RESOURCE(S) | Matched |
|--|--------------------|
| | Course |
| | Outcome(s) |
| Çocuk Ürolojisi- Abdurrahman Önen, Cüneyt Günşar, Murat Alkan, Ayşe | 1,2,3 |
| Karaman, US Akademi | |
| Operative Pediatric Surgery- Moritz M. Ziegler, Richard G. Azizkhan, | 1,2,3,5,6,7,8,9,10 |
| Daniel von Allmen, Thomas R. Weber- 2nd Edition, Mcgraw Hill | |

ASSESSMENT AND EVALUATION

Assessment and Evaluation in the End of Course Evaluation Exam

| Assessment and Evaluation Method | Explanation | Role in the End of Course Evaluation | % Value for the End of Course Evaluation |
|-------------------------------------|--------------------------|--|--|
| Attendance to Classes | | Compulsory | |
| Course Logbook | | Compulsory | |
| Multiple Choice | Multiple choice | | 50 |
| Theoretical Test Exam* | questions | | |
| Bedside Clinical | Taking history and | | 5 |
| Practice Exam** | making a physical | | |
| | examination from the | | |
| | patient in the service | | |
| Structured Oral | Under the supervision of | | 45 |
| Examination*** | at least two faculty | | |
| | members | | |
| Total | | | 100 |

Availability of Course Logbook, Place of Course Report in Course Assessment and Evaluation Principles

For the right to take the written exam, the student must be evaluated as "adequate" from the criteria specified in the course report.

Existence of Attendance Requirement and Its Place in Course Assessment-Evaluation Principles

It is stated at the beginning of the course that the student who is absent from the courses will not be taken to the written exam.

The Effect of the Assessment and Evaluation Methods to be Applied on the Success Status at the End of the Course

In order to be successful in the course, it is required to get at least 60 points at each stage of the course exams. A student whose score is 59 and below in an assessment-evaluation technique is not allowed to participate in the other exam phase.

1 st stage: Multiple Choice Theoretical Test Exam

2 nd stage: Structured Oral Examination + Bedside Clinical Practice Exam

Assessment and Evaluation in Resit Examination

| Assessment and | Explanation | Role in the End of | % Value at the End of |
|--------------------------|-------------------|--------------------|-----------------------|
| Evaluation Method | | Course Evaluation | Course Evaluation |
| Multiple Choice | Multiple choice | | 50 |
| Theoretical Test | questions | | |
| Exam* | - | | |
| Structured Oral | Under the | | 50 |
| Examination** | supervision of at | | |
| | least two faculty | | |
| | members | | |
| Total | | | %100 |

Assessment and Evaluation in Single Course Resit Exam

| Assessment and | Explanation | Role in the End of | % Value at the End |
|--------------------------|-------------------|--------------------------|----------------------|
| Evaluation Method | | Course Evaluation | of Course Evaluation |
| Multiple Choice | Multiple choice | | 50 |
| Theoretical Test | questions | | |
| Exam | - | | |
| Structured Oral | Under the | | 50 |
| Examination | supervision of at | | |
| | least two faculty | | |
| | members | | |
| Total | | | %100 |

COURSE LOGBOOK

| STUDENT'S NAME AND SURN | AME : | |
|---|-------------|-------------------------------|
| STUDENT'S SCHOOL NO | : | |
| COURSE PERIOD | : | |
| APPLICATION | NCEP Clause | TEACHING STAFF (SIGNATURE) |
| DATE | | |
| 1.Wearing sterile gloves | E21 | |
| 2.Case monitoring in the operating room | E48 | |
| 3.Inserting and withdrawing the nasogastric tube | E36 | |
| 4.Foley catheter insertion and withdrawal | E70 | |
| 5.Suturing and remove the suture | E68 | |
| 6.Burn dressing | B3/B7/B22 | |
| 7.To be able to perform acute abdomen and genitourinary system examination | F15 | |
| 8.Informing families about ingestion of corrosive substances | F15 | |
| 9.Informing families about protection from burns and accidents | F15 | |
| 10.Informing families about prevention of foreign body ingestion and aspiration | E21 | |
| DECISION: PASS | FAIL | 1 |
| | | |

| Faculty of Medicine English Medicine Program Phase V PEDIATRIC SURGERY COURSE Competence Matrix | | | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---|------|---|---|---|
| The Name of the Course | | | | | | | | | | Po13 | | | |
| Pediatric Surgery | 5 | 4 | 5 | 4 | 5 | 5 | 5 | 5 | 3 | 2 | 5 | 5 | 5 |
| * Completed according to the following program outcomes. (Score from 0 to 5.) PO: Program Outcomes of Faculty of Medicine PO Link: https://muweb.mu.edu.tr/tr/program-yeterlilikleri-6598?site=tip.mu.edu.tr | | | | | | | | | | | | | |

TRAINING ACTIVITY AND ASSESMENT AND EVALUATION METHODS MATCHING OF COURSE GAINS

| Intended Learning Outcome | TRAINING ACTIVITY MATCHING | ASSESMENT AND EVALUATION METHODS MATCHING |
|--|----------------------------------|---|
| 1.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. | Т, С | TE |
| 2.Can take medical history from pediatric patients with surgical problems, can perform physical examination and make differential diagnosis. | CR, V, C | P-L |
| 3.Can perform laboratory and radiological evaluations of patients. | L, R | TE |
| 4.Can present patient information during visits. | V, CR | P-L |
| 5.Can recognize the causes of respiratory distress in newborns. | T, V | OE, TE |
| 6.Can recognize the causes of intestinal obstruction in newborns and children. | T, CR | OE, TE |
| 7.Can diagnose acute abdomen in children and refer under appropriate conditions. | T, V, P, OS | P-L, OE, TE |
| 8.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. | V, C, CR | OE |
| 9.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. | T, V, C, CR | P-L, TE |
| 10.Can plan fluid and electrolyte therapy in pediatric patients with emergency surgical problems. | T, CR | P-L, OE, TE |
| 11.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. | V | OE |
| 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. | VSL | P-L |
| 13.Can explain the importance of obtaining consent from patients | V, CR | P-L |

| before surgical interventions. | | | | | |
|---|--------------|--------|--|--|--|
| Abbreviations | | | | | |
| Teaching Activity: Theorical lessons (T), Visit (V), Case report (CR), Clinical picture | | | | | |
| discussion-Outpatient clinic (C), Vocational skills lab (VSL), Radiological evaluation (R), | | | | | |
| Laboratory evaluation (L), Presentation (Pr) | | | | | |
| Assessment Method: Practical - Logbook (P-L), Oral exam (OE), Theo | retical exam | n (TE) | | | |

INFORMATION AND MATCHING TABLE ON THE THEORETICAL AND PRACTICAL COURSES IN THE COURSE TO BE INCLUDED IN THE 2022- 2023 ACADEMIC YEAR COURSE POGRAM

| Lecture Code* | Hour | Lecture Type | Lecture Subject | Course Aim Matching | Course Learning Outcome Matching | Activity Matching** | Assessment and Evaluation Method matching ** | Vertical Integration | Horizontal Integration |
|-------------------------|------|--------------|--|------------------------|-------------------------------------|---------------------|--|--|---|
| ME D5- ÇCE 001 | 1 | Т | Course Promotion Meeting- Introduction of Pediatric Surgery Course | 1 | 1,2 and 13 | V | | | |
| ME D5- ÇCE 002 | 1 | Τ | Burn Care | 1, 2 | 9,10 and 11 | T, CR | P-L | | Phase 5- Plastic and Reconstructi ve Surgery Course |
| ME D5- ÇCE 003 | 2 | Τ | Anterior abdominal wall anatomy and embryology- Congenital Defects of the Abdominal Wall and Disorders of the Umbilicus | 1 | 1 and 6 | T, CR | OE, TE | Phase 1 and 2 | |
| ME D5- ÇCE 004 | 1 | Т | Obstructive jaundice | 1 | 1 | T, CR | OE, TE | Phase 4- Child Health and Diseases Course | |
| ME D5- ÇCE 005 | 4 | Τ | Anatomy and embryology of inguinal region-Physical examination of the inguinal region and differential diagnosis of acute scrotum, Inguinal Hernias, Hydroceles, Spermatic cord cysts, Undescended Testis and Varicocele | 1 | 1 | T, CR | P-L, OE,TE | Phase 1 and 2 Phase 4- General Surgery Course | Phase 5- Urology Course |
| ME D5- ÇCE 006 | 2 | Т | Radiological evaluation in intestinal obstruction | 1 | 3 and 6 | R | OE | | Phase 5- Radiology Course |
| ME D5- ÇCE 007 | 2 | Τ | Anatomy, physiology and embryology of digestive system- Hirschsprung Disease and Other Disorders of Intestinal Motility | 1 | 1 and 6 | T, CR | OE, TE | Phase 1 and 2 | |
| ME D5- ÇCE 008 | 1 | Т | Phimosis and circumcision | 1 | 1 | T, CR | P-L, OE, TE | | |
| ME | 3 | Т | Anatomy, physiology and | 1 | 1,2 | Τ, | OE, TE | Phase 1 and | Phase 5- |

| D- | | 1 | | | 1.0 | CD | | 2 | TT 1 |
|-------------------------|---|---|---|---|-----------------------|-----------------|----------------|---|---|
| D5- ÇCE 009 | | | embryology of genitourinary system -Genitourinary disorders- Ureteropelvic Junction Obstruction, Vesicoureteral Reflux, Hypospadias and other anomalies | | and 3 | CR | 0.5 | 2 | Urology Course |
| ME D5- ÇCE 010 | 1 | Т | Radiological evaluation of the respiratory system and diseases | 1 | 1,3 and 5 | R | OE | | Phase 5- Radiology Course |
| ME D5- ÇCE 011 | 1 | Т | Esophageal diseases in childhood | 1 | 1 and 6 | T, CR | OE, TE | | |
| ME D5- ÇCE 012 | 2 | Т | Anatomy, physiology and embryology of respiratory system- Congenital anomalies of diaphragm and respiratory system | 1 | 1,3 and 5 | T, CR | OE, TE | Phase 1 and 2 | |
| ME D5- ÇCE 013 | 2 | Т | Anorectal Malformations | 1 | 1 and 6 | T, CR | OE, TE | | |
| ME D5- ÇCE 014 | 2 | Т | Functional constipation, encopresis and urinary incontinence in childhood | 1 | 1 and 6 | T, CR | OE, TE | Phase 4- İnternal diseases and Child Health and Diseases Courses | |
| ME D5- ÇCE 015 | 4 | Τ | Abdominal physical examination and approach to child with acute abdominal pain Acute abdomen in childhood | 1 | 1,2,3, 7 and 10 | T, CR | P-L, OE, TE | Phase 4- General Surgery Course | |
| ME D5- ÇCE 016 | 4 | Т | Solid tumors in childhood- Neuroblastoma, Wilms' Tumor, Teratomas and Other Tumors | 1 | 1 | T, CR | OE, TE | Phase 3 | |
| ME D5- ÇCE 017 | 1 | Т | Stoma care (colostomy, ileostomy, gastrostomy, vesicostomy) | 1 | 1 and 6 | T, CR, Pr | OE, TE | Phase 4- General Surgery Course | |
| ME D5- ÇCE 018 | 3 | Τ | Congenital anomalies of gastrointestinal system- intestinal atresia Hypertrophic Pyloric Stenosis | 1 | 1,2,3, 6 and 10 | T, CR | OE, TE | | |
| | | | Gastrointestinal Bleeding in childhood and intestinal obstruction- Anal fissure, Meckel Diverticulum and Intussusception | | | | | | |
| ME D5- ÇCE 019 | 4 | Т | Approach to child with multiple trauma, Pediatric trauma - respiratory, gastrointestinal and genitourinary systems | 1 | 8,10 and 11 | T, CR | OE, TE | | Phase 5- Emergency Medicine Course |
| ME D5- | 8 | Р | Principles of sterility in surgical operating theatre | 1 | 12 and | CR, Pr | P-L | Phase 4- General | |

| ÇСЕ 020 | | | Patient safety and positioning in surgical operating theatre | | 13 | | | Surgery Course | |
|-------------------------|----|---|--|------|-----------------------|-----------------------|---------|--|---|
| ME D5- ÇCE 021 | 10 | Р | Bedside history and physical examination | 1 | 1,2 and 4 | V, C, CR | P-L | | |
| ME D5- ÇCE 022 | 10 | Р | Outpatient clinic (History taking and physical examination) | 1 | 1,2,3 and 4 | V, C | P-L | | |
| ME D5- ÇCE 023 | 1 | Р | Bedside teaching- Ingestion and aspiration of foreign bodies | 1, 2 | 1,3,4, 9 and 11 | V, CR, C, Pr | P-L | | |
| ME D5- ÇCE 024 | 3 | Р | Presentation and insertion of vascular access, catheters and tubes /Placing intraosseous access | 1 | 12 | VSL | P-L | Phase 1, 2 and 3 | |
| ME D5- ÇCE 025 | 1 | Р | Bedside teaching- wound and burn care | 1 | 9,10 and 11 | V, C | P-L, OE | Phase 4- General Surgery Course | Phase 5- Plastic and Reconstructi ve Surgery Course |
| ME D5- ÇCE 026 | 2 | Р | Structured Free Study hour (Community based education project - Informing students about corrosive substance ingestion and preparing a brochure) Community based education project - Informing families about corrosive substance ingestion and distributing brochures | 1,2 | 9,10 and 11 | С | P-L | | |
| ME D5- ÇCE 027 | 2 | Р | Structured Free Study hour (Community based education project - Informing students about foreign body ingestion/aspiration and preparing a brochure) Community based education project - Informing families about foreign body ingestion/aspiration and distributing brochures | 1,2 | 9,10 and 11 | С | P-L | | |
| ME D5- ÇCE 028 | 2 | Р | Structured Free Study hour (Community based education project - Informing students about burns/accidents and preparing a brochure) Community based education project - Informing families about burns/accidents and | 1,2 | 9,10 and 11 | С | P-L | | |

| | | | distributing brochures | | | | | | |
|-----------|----------|-----|-----------------------------|------|------------|------|----------------|----------|----------|
| ME | 2 | Р | Circumcision under Local | 1 | 12 | С, | P-L, OE | | |
| D5- | - | 1 | Anesthesia | - | and | CR | 1 2,02 | | |
| ÇCE | | | | | 13 | | | | |
| 029 | | | | | 10 | | | | |
| ME | 1 | Р | Bedside teaching- Scrotal | 1 | 1 and | V, | P-L, | | Phase 5- |
| D5- | - | 1 | pain | - | 4 | С, | OE, TE | | Urology |
| ÇCE | | | puilt | | 1 | CR | 01,11 | | Course |
| 030 | | | | | | CIX | | | course |
| ME | 2 | Р | Surgical instruments and | 1 | 12 | VSL | P-L | | |
| D5- | - | 1 | sutures-Learn How To | 1 | 12 | VOL | 1.12 | | |
| ÇCE | | | Suture | | | | | | |
| 031 | | | Sulure | | | | | | |
| ME | 1 | Р | Bedside teaching- | 1 | 1 and | V, C | P-L, | | Phase 5- |
| D5- | 1 | 1 | Undescended Testis | 1 | 4 | v, C | OE, TE | | Urology |
| ÇCE | | | Ondescended Testis | | т | | OL, IL | | Course |
| 032 | | | | | | | | | Course |
| ME | 1 | Р | Bedside teaching- Inguinal | 1 | 1 and | V, C | P-L, | | |
| D5- | 1 | 1 | Hernias and Hydroceles | 1 | 1 and 4 | v, C | Г-L, ОЕ, ТЕ | | |
| ÇCE | | | rierinas and riyuroceles | | 4 | | OE, IE | | |
| | | | | | | | | | |
| 033 ME | 1 | Р | Padaida tarahing Aguta | 1 | 1,2,3, | V, | P-L, | Phase 4- | |
| | 1 | Р | Bedside teaching- Acute | 1 | | | | | |
| D5- | | | abdomen | | 4,7 | C, | OE, TE | General | |
| ÇCE | | | | | and | CR | | Surgery | |
| 034 | | n | | - | 10 | | D.I. | Course | |
| ME | 1 | Р | Bedside teaching- Corrosive | 1 | 4,9,10 | V, C | P-L, | | |
| D5- | | | chemical substance | | and | | OE, TE | | |
| ÇCE | | | ingestions | | 11 | | | | |
| 035 | | | | | | | | | |
| ME | 1 | Р | Bedside teaching-Phimosis | 1 | 1 and | V, C | OE, TE | | |
| D5- | | | | | 4 | | | | |
| ÇCE | | | | | | | | | |
| 036 | | | | | | | | | |
| ME | 1 | Р | Bedside teaching- | 1 | 1 and | V, C | OE, TE | | |
| D5- | | | Hypospadias | | 4 | | | | |
| ÇCE | | | | | | | | | |
| 037 | | | | | | | | | |
| ME | 1 | Т | Bedside teaching-an | 1, 2 | 1,2,3,5 | Pr | P - L, | | |
| D5- | | | overview | | ,6,7 | | OE, TE | | |
| ÇCE | | | | | and 8 | | | | |
| 038 | | | | | | | | | |
| ME | 1 | Т | | 1, 2 | 1,2,3,5 | Pr | | | |
| D5- | | | Evaluation of Course Exam | | ,6,7 | | | | |
| ÇCE | | | Questions | | and 8 | | | | |
| 039 | | | | | | | | | |
| ME | 1 | Т | | 1, 2 | 1,2,3,5 | Pr | | | |
| D5- | | | | | ,6,7 | | | | |
| ÇCE | | | | | and 8 | | | | |
| 040 | | | Course Evaluation Meeting | | | | | | |
| TN/DT | A NT A T | ION | | | | | | | |

EXPLANATIONS:

* Lecture code will be formed by writing 001, 002,... at the end of the code taken from the "Codes for Phase 5 matrix" section.

**Abbreviations

Teaching Activity: Theorical lessons (T), Visit (V), Case report (CR), Clinical picture discussion-Outpatient clinic (C), Vocational skills lab (VSL), Radiological evaluation (R), Laboratory evaluation (L), Presentation (Pr) **Assessment Method:** Practical - Logbook (P-L), Oral exam (OE), Theoretical exam (TE)