

## MUĞLA SITKI KOÇMAN UNIVERSITY FACULTY of MEDICINE PHASE 6 ENGLISH MEDICINE PROGRAM

# COURSE of PEDIATRIC SURGERY COURSE GUIDEBOOK

### **PREFACE**

#### Dear Students,

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

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**

: MED

**Course Title** : Pediatric Surgery

**Main Department of Course** : Surgical Medical Sciences

**Department Responsible for Course** : Pediatric Surgery

**Course Code** : MED-6509

**Course Topic Code Course Type** : Elective

**Duration of the Course** :1 month

**Teaching Method of the Course** : Formal

**ECTS** :5

Language : English

### **TEACHING METHODS-TECHNIQUES**

#### a. Applied training methods

- ✓ Inpatient bedside (service) trainings / Inpatient bedside (service) practical applications
- ✓ Participation in outpatient services / Practical applications at the outpatient clinic
- ✓ Bedside Training / Practical Practices at the Bedside
- ✓ Instructor visits (Story taking, file preparation and presentation, interactive discussion, monitoring)
- ✓ Operating room applications
- ✓ Medical record keeping and evaluation practices
- ✓ Participation in Branch Informatics Applications

#### b. Interactive learning activities:

- ✓ Meetings, panels, group discussions,
- ✓ Case-based discussion sessions, problem-based training sessions with small groups, critical situation discussions, councils, gamification, structured case discussions,
- ✓ Readings and interpretations of works/articles

### c. Vocational Skills applications

✓ The minimum number of practices/studies required for reinforcing the proficiency gained in the previous education periods in the defined vocational skills is determined and it is ensured that each intern does it.

#### d. Teamwork

#### e. Independent learning

✓ Independent working hours

#### f. Other Educational Events

- ✓ Clinical Case Reports
- ✓ Article Presentations
- ✓ Seminar/Lesson Presentations
- ✓ Literature Presentations
- ✓ Research and Presentation

### PHYSICAL SPACES

| <b>Teaching Activity</b>   | 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 comprehend the basic principles and        |
|---|--|
|   | methods of surgical practice in pediatric patients.                                      |
| 2 | In this course, it is aimed that the students have information about the surgical        |
|   | problems of the thoracic cavity, abdomen, and Genito-urinary region in children.         |
| 3 | In this course, it is aimed that the students learn the diagnosis and surgical treatment |
|   | approach for surgical problems and gain the necessary knowledge and skills for           |
|   | appropriate treatment at the primary care level.   |
| 4 | In this course, it is aimed that the students learn the principles of approach to        |
|   | pediatric surgery emergency diseases and gain skills.                                    |
| 5 | In this course, it is aimed that students have information about childhood accidents     |
|   | and ways of protection.  |

### **OBJECTIVE(S) of the COURSE**

| 1  | To be able to recognize diseases that require surgical treatment, which are common   |
|----|--|
|    | in childhood, and to be able to direct the family to a pediatric surgeon.            |
| 2  | To be able to take medical history, perform physical examination and make            |
|    | differential diagnosis from pediatric patients with surgical problems.               |
| 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 to be able to refer them        |
|    | under appropriate conditions.  |
| 8  | To be able to communicate with pediatric patients presenting with general body       |
|    | trauma, to be able to evaluate and examine them, to be able to apply the principles  |
|    | of first approach by making the differential diagnosis.                              |
| 9  | To be able to recognize surgical problems related to inguinal region, genitourinary  |
|    | system, respiratory system, and gastrointestinal system in children.                 |
| 10 | To be able to have knowledge and skills on how to intervene in diseases that are     |
|    | frequently encountered in the society (foreign body aspiration, ingestion of         |
|    | corrosive substances, foreign body ingestion, burns, etc.) and what to pay attention |
|    | to in preventive medicine.   |
| 11 | To be able to plan fluid and electrolyte therapy in pediatric patients with          |
|    | emergency surgical problems.   |
| 12 | To be able to monitor the vital signs of critically ill patients requiring emergency |
|    | surgical treatment, and to be able to refer them to a pediatric surgeon by providing |
|    | respiratory and circulatory support with noninvasive methods when necessary.         |
| 13 | To be able to adapt to operating room working conditions, suturing in simple         |
|    | incisions, wound care, inserting a nasogastric tube or urinary catheter.             |
| 14 | To be able to explain the importance of obtaining consent from patients before       |
|    | surgical interventions.  |
|    |  |

### **INTENDED LEARNING OUTCOME(S)**

| 1  | Can recognize diseases that require surgical treatment, which are common in          |
|----|--|
|    | childhood, and can direct the family to a pediatric surgeon.                         |
| 2  | Can take medical history, perform physical examination, and make differential        |
|    | diagnosis from pediatric patients with surgical problems.                            |
| 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 can refer them under appropriate          |
|    | conditions.  |
| 8  | Can communicate with pediatric patients presenting with general body trauma, can     |
|    | evaluate and examine them, can apply the principles of first approach by making the  |
|    | differential diagnosis.  |
| 9  | Can recognize surgical problems related to inguinal region, genitourinary system,    |
|    | respiratory system and gastrointestinal system in children.                          |
| 10 | Can have knowledge and skills on how to intervene in diseases that are frequently    |
|    | encountered in the society (foreign body aspiration, ingestion of corrosive          |
|    | substances, foreign body ingestion, burns, etc.) and what to pay attention to in     |
|    | preventive medicine.   |
| 11 | Can plan fluid and electrolyte therapy in pediatric patients with emergency surgical |
|    | problems.  |
| 12 | Can monitor the vital signs of critically ill patients requiring emergency surgical  |
|    | treatment and can refer them to a pediatric surgeon by providing respiratory and     |
|    | circulatory support with noninvasive methods when necessary.                         |
| 13 | Can adapt to operating room working conditions, suturing in simple incisions,        |
|    | wound care, inserting a nasogastric tube or urinary catheter.                        |
| 14 | Can explain the importance of obtaining consent from patients before surgical        |
|    | interventions.   |
|    |  |

## **DUTIES and RESPONSIBILITIES OF STUDENTS and OTHER ISSUES**

**Please read:** MSKU Medical Faculty Pre-Graduation Education Rules, Students' Responsibilities and Duties (MSKÜ Tıp Fakültesi Mezuniyet Öncesi Eğitiminde Öğrencilerin Uyması Gereken Kurallar, Öğrencilerin Sorumlulukları ve Görevleri)

Web Site: https://tip.mu.edu.tr/tr/ilgili-mevzuat-6641

### **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**

### Phase 6 Student Internship Success Criteria: (All criteria must be met)

- 1. The student must fulfill the internship continuity criteria.
- 2. Candidate Physician Qualification Certificate scoring of 60 and above is considered successful.
- 3. Candidate Physician Logbook scoring of 60 and above is considered successful.

### Faculty of Medicine English Medicine Program

### Phase 6

### Pediatric Surgery Course Competence Matrix

| The Name of the Course | Po1 | Po2 | Po3 | Po4 | Po5 | Po6 | Po7 | Po8 | Po9 | Po10 | Po11 | Po12 | Po13 |
|------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|------|------|------|------|
| Pediatric<br>Surgery   | 5   | 4   | 5   | 4   | 5   | 5   | 5   | 5   | 3   | 2    | 5    | 5    | 5    |

<sup>\*</sup> 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

## CANDIDATE PHYSICIAN QUALIFICATION CERTIFICATE

### MUGLA SITKI KOCMAN UNIVERSITY MEDICAL SCHOOL

### PEDIATRIC SURGERY INTERNSHIP CANDIDATE PHYSICIAN QUALIFICATION CERTIFICATE

| Student's name and surname:<br>Number: |   |   |                    |  | ng:// |  |  |
|--|---|---|--------------------|--|-------|--|--|
| A                                      | Partici   |   |                    |  |       |  |  |
|  | ✓   | Seminar, article, ca                    | ase report etc.    |  |       |  |  |
|  | ✓   | Report-Homewor                          | k Preparation etc. |  |       |  |  |
|  | ✓   | Research etc.                           |                    |  |       |  |  |
| B*                                     | Interns   | ship Logbook Scor                       | e (50 points) *    |  |       |  |  |
|  | ✓   | Fulfilling the appl<br>desired number a | logbook in the     |  |       |  |  |
| С                                      | Fulfill   | ts)                                     |                    |  |       |  |  |
|  | ✓   |   |                    |  |       |  |  |
|  | ✓   |   |                    |  |       |  |  |
|  | ✓   |   |                    |  |       |  |  |
|  | ✓   |   |                    |  |       |  |  |
|  | ✓   |   |                    |  |       |  |  |
|  | ✓ Communication with patients and their relatives |   |                    |  |       |  |  |
|  | ✓   | Compliance with                         | working hours etc. |  |       |  |  |
| CONT                                   | CONTINUITY: Continuous () Discontinuous           |   |                    |  |       |  |  |

# RESULT: Successful (....) Unsuccessful (....) EVALUATION SCORE: (With numbers and text) Score: ..... (out of 100) INTERNSHIP COORDINATOR ACADEMIC STAFF: Date: Signature: Date: Signature: Signature:

### Phase 6 Student Internship Success Criteria: (All criteria must be met)

- 4. The student must fulfill the internship continuity criteria.
- 5. Candidate Physician Qualification Certificate scoring of 60 and above is considered successful.
- 6. Candidate Physician Logbook scoring of 60 and above is considered successful.
- \* Half of the Candidate Physician Internship Logbook Score must be reflected in the B field.

## CANDIDATE PHYSICIAN INTERNSHIP LOGBOOK

## MUGLA SITKI KOCMAN UNIVERSITY MEDICAL SCHOOL PEDIATRIC SURGERY

|   | CANE                                    | DIDATE PHYSI                      | CIA                        | N INTERNSHIP LOG  | ВОО          | K           |    |  |  |  |
|---|---|-----------------------------------|----------------------------|---|--------------|-------------|----|--|--|--|
| Studen  | t's name and surr                       | name:                             | N                          | lumber:   |              |             |    |  |  |  |
| Beginning:// E  |   |                                   |                            | //  | Level        | Performed   |    |  |  |  |
| 1.  | Patient file prepa                      | ration                            | ration                     |   |              |             |    |  |  |  |
| 2.  | Taking general as                       | nd problem-oriente                | l problem-oriented history |   |              |             |    |  |  |  |
| 3.  | Systematic physic                       | cal examination                   |                            |   |              | 4           |    |  |  |  |
| 4.  | Evaluation of ger                       | neral condition and               |                            | 4   |              |             |    |  |  |  |
| 5.  | Interpreting the r                      | esults of screening               | and (                      | diagnostic examinations                                 |              | 3           |    |  |  |  |
| 6.  | Differential Diag                       | nosis                             |                            |   |              |             |    |  |  |  |
| 7.  | Reading and eval                        | luating direct radio              | grap                       | hs  |              | 3           |    |  |  |  |
| 8.  | Requesting ration                       | nal laboratory and i              | magi                       | ing examination   |              | 4           |    |  |  |  |
| 9.  | Applying the prin                       | nciples of working                | with                       | biological material                                     |              | 4           |    |  |  |  |
| 10.   | Obtaining a biolo                       | gical sample from                 | the p                      | atient  |              | 3           |    |  |  |  |
| 11.   | Taking the labora it to the laborator   |                                   | appı                       | copriate conditions and deli-                           | vering       | 4           |    |  |  |  |
| 12.   | Providing decont                        | tamination, disinfed              | ction,                     | sterilization, antisepsis                               |              | 4           |    |  |  |  |
| 13.   | Hand washing                            |                                   |                            | •   |              | 4           |    |  |  |  |
| 14.   | Opening vascular                        | r access                          |                            | 4   |              |             |    |  |  |  |
| 15.   | IM, IV, SC, ID Inj                      | ection                            |                            | 4   |              |             |    |  |  |  |
| 16.   | Preparing the dru                       | ıgs to be applied co              |                            | 3   |              |             |    |  |  |  |
| 17.   | Administering or                        | al, rectal, vaginal, a            |                            | 3   |              |             |    |  |  |  |
| 18.   | Applying the pri                        | nciples of rational o             |                            | 4   |              |             |    |  |  |  |
| 19.   | Treatment planni                        | ing and prescription              | 4                          |   |              |             |    |  |  |  |
| 20.   | Preparing patient                       | t discharge report                |                            |   |              | 4           |    |  |  |  |
| 21.   | Properly referring                      | g the patient                     |                            |   |              | 4           |    |  |  |  |
| 22.   | Providing sufficients his/her relatives |                                   | lable                      | information to the patient a                            | nd           | 4           |    |  |  |  |
| 23.   |   | ossible intervention              |                            | ation to the patient and/or peatment options, obtaining | patient      | 4           |    |  |  |  |
| 24.   | Communicating (                         | ners                              | 4                          |   |              |             |    |  |  |  |
| 25.   | Internship-specif                       | ic item*                          |                            |   |              |             |    |  |  |  |
|   |   |                                   |                            |   |              |             |    |  |  |  |
| 27.   | Internship-specif                       | ic item*                          |                            |   |              |             |    |  |  |  |
| RESUL<br>Success  | T:<br>sful ()                           | EVALUATION SO<br>(With numbers an |                            | E: INTERNSHIP  (t) COORDINATOR  ACADEMIC STAFF:         | HEAD<br>DEPA | OF<br>RTMEN | NT |  |  |  |
| Score: (out of 100) Unsuccessful ()  Date:  Date:  Signature:  Signature: |   |                                   |                            |   |              |             |    |  |  |  |

#### Phase 6 Student Internship Success Criteria: (All criteria must be met)

- 1. The student must fulfill the internship continuity criteria.
- 2. Candidate Physician Qualification Certificate scoring of 60 and above is considered successful.
- 3. Candidate Physician Logbook scoring of 60 and above is considered successful.

\*The Department can remove the item(s) from the Internship Logbook and/or add the item(s) specific to the internship by specifying the level to the Internship Logbook. It is recommended that the department check that all NCEP-2020 Basic Medicine Practices and levels related to the internship are stated in the Internship Logbook.

| LEARNI | LEARNING LEVEL OF BASIC MEDICAL PRACTICES*   |  |  |  |  |  |
|--------|--|--|--|--|--|--|
| Level  | 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      | Makes the application** including complex situations/phenomenons                                   |  |  |  |  |  |

\*Denotes the minimum level of performance, and therefore learning, that a physician who graduated from the faculty of medicine should exhibit during basic medicine practices. It is determined separately for each skill/application in the minimum level list. The faculties ensure that each student is able to perform the medical practice in question at the minimum level determined during the education period they apply.

\*\* Makes the preliminary evaluation/evaluation, creates, and implements the necessary plans, and informs the patient and their relatives/society about the process and its results.

\*Source: NCEP 2020