



UNIVERSITY | MEDICAL
of NICOSIA | SCHOOL

MED-601
Internal Medicine
Course/ Clinical Rotation Handbook

2024-25

Year 6
Doctor of Medicine (MD) Programme

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Course Handbook introduction by the Chair of Clinical Education

Dear Student,

Your course handbook is an invaluable resource. Reading it before starting your placement will make a huge difference to your learning experience. You will find outlines of the course, the objectives of your learning, the assessment requirements, learning resource suggestions, contact numbers and reporting structures.

You can use the learning outcomes and objective list to guide you through your learning of the subject and even to discuss with your tutors. The requirements, whether these are workplace - based assessments or tutorials, will allow smooth running of your clinical block and avoid unnecessary last-minute hardship.

The medical school has a course lead in place, with knowledge of the specific block, including its learning, revision, and assessment. And the department of clinical education ensures smooth running and delivery of the clinical training, through a number of Curriculum Leads (one for each main specialty) who work with the course leads and the local teams at the placement, to ensure the curriculum is delivered as planned.

The nature of clinical learning is such that, whilst your experiences will be comparable, it is not possible to have identical clinical exposure across all students; a case of disease X may be available today, whereas when the next student comes along it may be disease Y. It is desirable that we see all cases as far as possible but your handbook with its checklist of conditions and objectives will allow you to not fall behind and fill any gaps that may appear during your clinical exposure, and help guide your preparation for assessments.

If there are academic or administrative problems, if you need help and if you need to report anything back to your medical school, the reporting structures ensure that you should not feel even for one minute that you do not have someone to go to when needed. Please contact the team if you need any help, we are all here with our contact details available if you need us.

Please ensure that you are present and available for learning, opportunities will come when you least expect them, the amount we can learn from patients is huge and endless and therefore sitting with, talking to and examining patients is one of your strongest tools.

I hope you gain a lot of knowledge and clinical experience.

Enjoy the next few weeks!

**Professor Joseph Joseph
Chair of Clinical Education**

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1. Introduction

During the MED-601 Internal Medicine Course/Clinical Rotation students spend six weeks at the Clinical Site rotating through teams of various Internal Medicine sub-specialties e.g gastroenterology; respiratory medicine; renal medicine; endocrinology; infectious diseases; oncology; cardiology; neurology; rheumatology, haematology and dermatology. They obtain hands-on experience in the clinical presentation, investigation and management of a variety of conditions relating to internal medicine through direct exposure to these conditions in a supervised clinical setting and as part of a multidisciplinary team. They also obtain competence in performing common procedures relating to internal medicine. Learning may be reinforced by lectures.

2. MED-601 Internal Medicine Course/ Clinical rotation Course Outline

Course Title	Internal Medicine						
Course Code	MED-601						
Course Type	Required						
Level	Undergraduate						
Year / Semester	Year 6/ Semester 11 (Fall)						
Teacher's Name	Course Lead: Dr Stelia Ioannidou Kadis						
ECTS	10	Lectures / week	4	Laboratories / week	0	Clinical Practice	36

<p>Course Purpose and Objectives</p>	<p>The main objectives of the last two years of the six year medical programme are to provide students with extensive experience in the clinical environment, mainly in hospitals but also in the community, so that they can utilise their learning over the previous four years to practise their clinical, communication, diagnostic and reasoning skills on real patients, and to learn about the management of patients, from a medical, therapeutic, surgical, psychosocial and caring perspective.</p> <p>In this course, students will spend six weeks working with patients who present with a medical problem across any sub-specialty of medicine. They will develop an understanding of the presentation, signs and symptoms, physical examination findings, investigations, diagnosis, treatment and management plan for a wide range of conditions.</p> <p>Students will be “on call” in the Emergency Room to receive and clerk patients. They will spend most of their time on wards and in outpatient clinics. They will try to follow their patients throughout their treatment to build up some continuity of care. They will take part in all ward activities, working alongside other doctors, nurses, physiotherapists, occupational therapists, pharmacists, social workers – any healthcare professional involved in patient care – in order to understand the roles each healthcare professional undertakes and the importance of teamwork. They will take histories (clerking), carry out physical examinations, suggest investigations and interpret the findings with a view to reaching a diagnosis and starting treatment. They will take part in ward rounds, team meetings, radiology and pathology meetings and will present their patients to the rest of the team. They will keep accurate records (using an agreed template).</p> <p>The overall aims of the attachment are as follows:</p> <ul style="list-style-type: none"> • To gain experience of patient care as part of a clinical team. • To become proficient in medical diagnosis and formulation of management plans. • To develop an adequate knowledge base for understanding common problems in internal medicine. • To develop clinical reasoning and problem-solving skills at the bedside. • To develop high standards of professional behavior. • To continually reinforce basic and clinical science principles learnt during the earlier part of the course.
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Learning Outcomes	<p>By the end of the course, students will be able to:</p> <ol style="list-style-type: none"> 1. Take a competent history from a patient, or relative of a patient, presenting with a medical condition, in a sensitive and caring manner. 2. Carry out a physical examination of patients. 3. Come up with a differential diagnosis for the presenting complaint. 4. Identify appropriate investigations, including blood and urine tests and imaging, to assist in the diagnosis of the presenting complaint and to interpret the results from such tests. 5. Prepare a treatment management plan for the patient to present to the responsible clinician. 6. Apply clinical reasoning and problem solving skills at the bedside, using hypothesis generation, data gathering, integration of basic science, clinical medicine and evaluation of opinions. 7. Demonstrate knowledge of common medical problems and medical emergencies 8. Perform procedures common to internal medicine – venepuncture, insertion of intravenous cannulae, arterial puncture, urinary catheter and nasogastric tubes, measurement of peak flow, arterial blood gases, transcutaneous pulse oximetry, setting up an intravenous fluid infusion, administration of an intravenous medicine, intramuscular injection, subcutaneous injection, insulin injection, administration of oxygen, diagnosis of death 9. Demonstration of high professional standards and attitudes regarding relationships in the workplace, team work, confidentiality, initiative, self-directed learning and ethical issues. 		
Prerequisites	None	Required	None
Course Content	<p>History taking Problem formulation Differential diagnosis Development of management plans Discriminatory use of investigations Adoption of preventative approach to healthcare Examination of:</p> <ol style="list-style-type: none"> 1. head & neck, thyroid and lymph nodes, eye, ear, nose and throat 2. respiratory system 3. breast and axillae 4. cardiovascular system 5. vascular system 6. abdomen – liver, spleen and bowel 7. rectal examination 8. renal system, including dipstick analysis 		

	<p>9. neurological system</p> <p>10. penis, scrotum and testes</p> <p>11. foot, ankle, knee and hip</p> <p>12. hand, wrist, elbow and shoulder</p> <p>13. lumbar and cervical spine</p> <p>14. skin and appendages</p> <p>15. Insertion of tubes, drains, needles</p> <p>16. Interpretation of investigations – X-rays, CT scans, MRI scans, ultrasound, Doppler and duplex scans, blood tests, pathology Management of fluids and electrolytes</p> <p>17. Emergency medicine skills – airway maintenance etc.</p> <p>18. Patient education – peak flow, spirometry, inhalers, nebulisers, glucose measurement</p> <p>19. Counselling skills</p> <p>20. Prescribing skills</p>										
Teaching Methodology	The course is delivered by clinical placements, lectures, tutorials, case studies and group discussions.										
Bibliography	<p style="text-align: center;">Required Textbooks/Reading:</p> <table border="1"> <thead> <tr> <th>Authors</th> <th>Title</th> <th>Publisher</th> <th>Year</th> <th>ISBN</th> </tr> </thead> <tbody> <tr> <td>Joseph Loscalzo, Anthony S. Fauc, Dennis L. Kasper, Stephen Hauser, Dan Longo, J. Larry Jameson</td> <td>Harrison's principles of internal medicine, 21st ed.</td> <td>McGraw Hill, New York</td> <td>2022</td> <td>978-1264268504</td> </tr> </tbody> </table> <p>E-book resources for Clinical Placements Support Resources: https://libguides.unic.ac.cy/placementresources</p>	Authors	Title	Publisher	Year	ISBN	Joseph Loscalzo, Anthony S. Fauc, Dennis L. Kasper, Stephen Hauser, Dan Longo, J. Larry Jameson	Harrison's principles of internal medicine, 21 st ed.	McGraw Hill, New York	2022	978-1264268504
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Assessment	Final year exam and final year OSCE. The written assessment will be Single Best Answer MCQs and Short Answer Questions. Workplace based assessments will take place during the attachment.										
Language	English										

Lecture list (Uploaded to Moodle)

Review of Diabetes	Dr Stelia Kadis
Review of Endocrinology	Dr Stelia Kadis
Emergencies in Haematology	Dr Niki Vyrides
MGUS & Multiple Myeloma	Dr Niki Vyrides

3. MED-601 Internal Medicine Course Appendix/Supplementary information

The Appendices below include the Ward Round Pro-forma (WRAP) - which students are encouraged to use to follow a patient's changing clinical status from admission to discharge. You are not required to submit with your end of course WPBA portfolio, but are to be used to supplement your learning.

Appendix 1: Student Ward Round Pro-forma (WRAP): Follow up records [one for each patient]

<i>Initials:</i> <i>Sex:</i> <i>Age:</i>		<i>Admission Date:</i>			
Student Ward Round Date	Date (1)	Date (2)	Date (3)	Date (4)	
Admitting symptom (s) New					
Signs: Original					
Supplemental Previous Medical History:					
Summary Diagnoses:					
Treatments/Therapeutics					
Changes in medications (started/stopped/dose changes)					
Allergies:					

Appendix 2a: Student Ward Round Pro-forma (WRAP): Follow up records/ outcome and discharge

Patients Initials	Sex:	Age:	<i>Admission Date:</i>	
Student Ward Round Date	Date (1)	Date (2)	Date (3)	Date (4)
Important laboratory & investigation results:				
Transfer or referral for opinion of another speciality at SGH:				
Expected Outcome:				
Recovery of full independence				
Needs some support from carers and/or services				
Total 24/7 dependence				
Discharge Plan anticipated discharge destination				
Uncertain				
Home				
Sheltered Care				
Residential Care				
Nursing Home				
Hospice Care				
Discharge Support				
MDT services involved: (Physio/ OT/Social services/ Carers/ GP)				
Estimated Date for discharge:				
OPD review date: Purpose of OPD appointment:				
Actual Date Of Discharge				

4. MED-601 Internal Medicine Course/ Clinical Rotation Requirements

Please take note of the following assessments that students will need to complete and submit via **'MyProgress Health'**, **no later than one week** after the completion of the MED-601 Internal Medicine course/ clinical rotation. You must also cross-reference the above with the Year 6 PVB assessment domain handbook, which takes precedence to any other handbook.

Required PVB Assessments

1 x CPPC
1 x Mini-CEX
1 x CBD
Daily Attendance Logbook (submitted via 'MyProgress Health' by uploading the attendance weekly sheets)
1 x Learning Outcomes Record (LOR)
Evidence of completing online student feedback survey

Floating WPBA and On-line Feedback Survey

Submit the above forms together with any floating WPBAs completed during the MED-601 Internal Medicine course/clinical rotation. You also need to ensure that you have completed the online feedback survey and upload evidence of this via **'MyProgress Health'**, by the deadline.

Logbook

The logbook should be completed on a daily basis and submitted at the end of your course/ clinical rotation, by uploaded on **'MyProgress Health'**.

Attachment sign-off process

PLEASE NOTE: It is your responsibility to ensure that your tutor completes your Clinical Practice Portfolio Certificate (CPPC) as well as WPBA forms for you.

You should follow these steps:

- You should contact your Clinical Lead in advance to agree a mutually convenient date to conduct the completion and sign-off of the **CLINICAL PLACEMENT & PROFESSIONALISM CERTIFICATE (CPPC)** using the final week of your attachment. It may take around 15-20 minutes so please bear that in mind when arranging a suitable time slot. You should check in advance if the Clinical Lead will be absent at any time towards the end of the attachment.
- Your CPPC must be completed by the relevant tutor/lead clinician no later than one week after the completion of the attachment (recommended to be completed by the last day of the clinical attachment). Your tutor will be able to access all the WPBAs you have completed on your device during the attachment, as well as your logbooks and other evidence of your attendance.

- If you have not been told who will be signing you off you should contact your local administrator for guidance.
- Attend the meeting with your clinical tutor and bring your device to present all required WPBA forms and logbooks, as well as any other evidence of your attendance.
- It is your responsibility to ensure that the CPPC certificate and all WPBA forms are properly completed prior to their submission. In addition, you are required to use your logbooks to record activities and attendance and ask for a signature from your supervisor prior to submitting these.

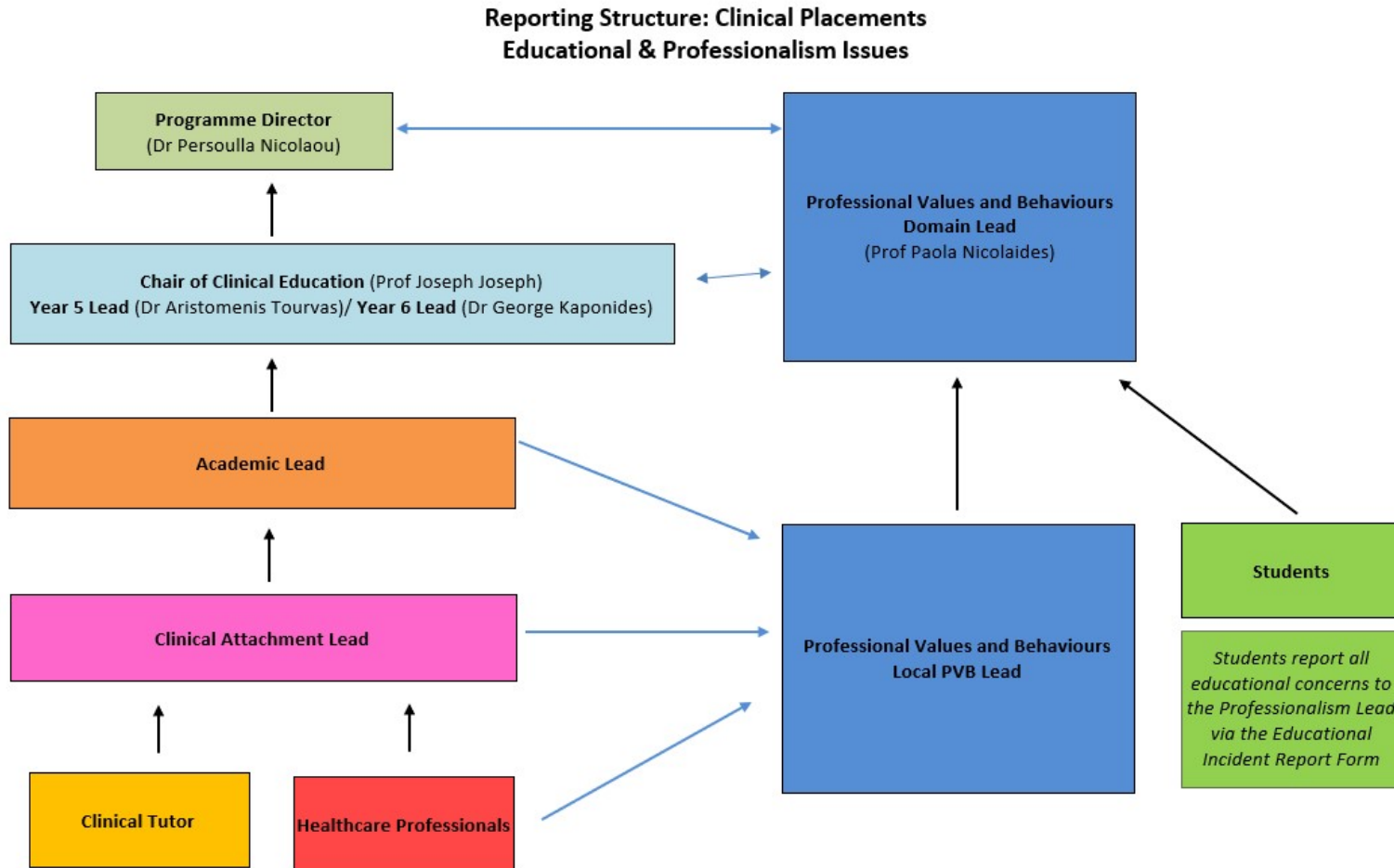
DON'T FORGET:

- ✓ You should use the diaries to record activities and attendance and ask for a signature from supervising Consultant or Registrar each week.
- ✓ You need to achieve submission of all assessment forms and attendance logbook/diaries via 'MyProgress Health' within one week of completing an attachment. If you are using the 'Email for later' function it is your responsibility to chase up the clinician and have your WPBAs completed and submitted by the deadline. **If you anticipate any delays please always inform the PVB Administrator. No communication and late submissions are considered serious and recorded under Professional Behaviour of the PVB domain.**
- ✓ You must check that all section of WPBA forms have been completed appropriately and fully before you submit. Otherwise, your forms will not be accepted by the system.
- ✓ If you are marked with a 'Fail' on the CPPC form for any of the elements, the assessor must give specific detailed feedback explaining reasons for the grade. Feedback should be focused and specific. In such cases or in cases where you fail to complete the required number of WPBAs, you will normally be required to redo part or the whole of the course/clinical rotation (after discussion with your local PVB Domain Lead). **Once remediation is complete a new CPPC form needs to be completed and signed off by the Clinical Lead or the remediation supervisor or the remediation supervisor along with a new Logbook that shows remediation dates.**
- ✓ Check that your course/clinical rotation specific and floating WPBAs have been supervised and signed off by the correct assessor level. If you are unsure, please check before you undertake the WPBA to avoid your forms being rejected and having to return to your placement to repeat the WPBA with the correct assessor.
- ✓ Ensure you have completed the online feedback survey and upload evidence of this via 'MyProgress Health', by the submission deadline.

! Note that late submissions will be recorded under PVB Professional Behaviour Element. Your clinical Site Administrator is here to help! If you are unclear or unsure about any aspect of the PVB Domain ask your Clinical Site Administrator.

! In case of illness or absence Students must notify their Clinical Site Administrators via email, and their Clinical Tutor prior or on the day of absence.

5. Reporting Structures



**Reporting Structure: Clinical Attachments
Patient and Student Safety Issues**

