

Training Programme (essential elements)  
Clinical Practical Year (CPY)  
at Medical University of Vienna, Austria

CPY-Tertial A

**Internal Medicine**

Valid from academic year 2020/21

Responsible for the content

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### 3. Learning objectives (competences)

The following skills must be acquired or deepened in the subject of Internal Medicine during the CPY.

#### 3.1 Competences to be achieved (mandatory)

##### A) History taking

1. Taking a medical history, including taking history from third person to assess psycho-social, economic and hygiene situation, including risk factors for fall
2. Lifestyle history
3. Family history
4. Medication history, taking into account side effects and interactions with other medications
5. Identifying hazardous behaviour and dangerous lifestyles

##### B) Performance of examination techniques

6. Clinical/physical status (including rectal examination)
7. ECG
8. Assessment of patients with medical emergencies or after trauma
9. Assessment of basic and instrumental activities of daily living
10. Clinical diagnosis of death: if not possible in practice, (theoretical) work on this topic
11. Bedside test
12. Attaching a pulse oximeter and interpreting the results

##### C) Performance of routine skills and procedures

13. Making out a prescription
14. Venepuncture / drawing blood
15. Positioning a peripheral permanent venous cannula
16. Subcutaneous injection
17. Intravenous injection
18. Urinary catheterization
19. Correct taking of blood cultures
20. Interpretation of antibiogram

##### D) Therapeutic measures

21. Prescribing measures in treatment of pain, or palliative or end-of-life care
22. Using and giving instructions to use metered dose inhalers, spacers and nebulizers
23. Determining the indication, dosage and use of oxygen therapy (timing)
24. Indication, dosage and monitoring of oral anti-coagulation
25. Checking drug therapy for drug interactions
26. Identification of drug side effects and their management

##### E) Communication with patient/team

27. Providing information to patients and relatives in an ethically correct and professional manner in compliance with legal requirements and ensuring that the patient has understood the information
28. Checking adherence

29. Participation in the giving of main information elements necessary to get informed consent
30. Breaking bad news to patients and family (simulated situation)
31. Summarizing the main points of diagnoses, active problems and management plans of a patient
32. Clarifying with nursing staff monitoring measures and calling criteria concerning patients
33. Giving teaching presentations and passing on specialist information, procedures and skills to students and other medical professionals
34. Identifying ethically problematic situations
35. Communicating and dealing professionally with geriatric patients
36. Advising and supporting patients (empowerment)
37. Managing patients with contradictory investigation results
38. Discussing diagnoses/prognoses with patients
39. Participating in meetings with relatives
40. Involvement in discharge management

F) Documentation

41. Writing letters for transfer or discharge of patient
42. Filling in a death certificate and/or preparing an autopsy request (simulated situation)
43. Diagnostic coding
44. Working with local/national and international guidelines and protocols
45. Documentation in patient files/report of distinct parameters
46. Information request in hospital information system

### 3.2 Optional competences

In addition to the competences that are mandatory to achieve, further competences from the list below or competences from the special disciplines of Internal Medicine (see individual training plan) may also be acquired.

For example:

1. Thoracentesis
2. Paracentesis
3. Positioning a gastric tube
4. Schellong Test

## 4. Information on verification of performance, on-going assessments

### 4.1 The following aspects can be assessed in the Mini-CEX:

1. Taking a medical history
2. Clinical-physical status
3. Examination of a trauma patient
4. Taking an ECG and evaluation

5. Bedside test
6. Planning the diagnostic process
7. Planning the therapeutic process
8. Clarification of diagnostic and therapeutic measures
9. Case presentation based on the medical files

This list can be expanded accordingly.

#### **4.2 The following skills can be assessed in the DOPS**

1. Administration of a subcutaneous injection
2. Urinary catheterization
3. Creating and checking a fluid balance
4. Assessment of parameters recorded during the monitoring of a patient
5. Arterial puncture/blood gas analysis
6. Heimlich manoeuvre
7. Diagnostic coding

This list can be expanded accordingly.