

Student's name and surname: .....

Student registration no.....

Dean's group number.....

## SUMMER INTERNSHIP EVALUATION FORM

Faculty: Medicine, Year: 2

Duration: 4 weeks (120 hours), ECTS: 4, including:  
3 weeks (90 hours), Scope: Out-patient health care,  
1 week (30 hours), Scope: Emergency medical aid

Practical skills	Learning outcomes	Points (0-1 point)*	Confirmation of completion by the internship supervisor (stamp and signature)
<b>Out-patient health care (3 weeks, 90 hours)</b>			
Knowledge of the scope of work of the entity, e.g. patient registration, types of documentation, system of record keeping in the health center or facility, rules for issuing certificates of incapacity for work, other medical certificates, referrals for specialist services and how to fill them out.			
Assistance in the medical interview and physical examination of an adult patient.	E.U1 E.U3		
Assistance in the medical interview and physical examination of a child.	E.U2 E.U4 E.U6		
Assessment of the child's development during the routine health check using norms presented on percentile grids, determination of the degree of sexual maturation.	E.U9 E.U10 E.U11		
Assistance in the qualification procedure for vaccinations	E.U27		
Correct interpretation of the basic results of laboratory tests.	E.U24		
<b>Total number of points:</b>		<b>/6 pts</b>	
<b>Assessment of practical skills</b> <i>(made by the Internship Coordinator in the place of the internship):</i> <b>Grading scale:</b> very good (5.0): 6 pts, good (4.0): 5 pts, satisfactory (3.0): 3-4 pts, unsatisfactory (2.0): < 3 pts			

\*0 points: lack of skill or incomplete skill; 1 point: complete skill

## Social competences and professionalism

Feature	Points (0-1 point) *
Punctuality	
Involvement	
Conscientiousness	
Use of medical terminology	
Case presentation and discussion	
Team work	
Planning	
Compliance with the rules of ethics	
Image (e.g. badge, apron)	
Communication with patients	
<b>Assessment of social competences and professionalism</b> <i>(made by the Internship Coordinator in the place of the internship)</i> <b>Grading scale:</b> very good (5.0): 9-10 pts, good (4.0): 7-8 pts, satisfactory (3.0): 5-6 pts, fail (2.0) (< 5 pts)	<b>Total: /10 pts</b>  <b>Grade:</b>

\*0 points: student does not behave or act professionally; 1 point: student behaves and acts professionally

**I hereby confirm that the Student has completed a summer internship in accordance with the internship program and in the scope indicated in the internship program.**

*(to be completed by the Internship Coordinator in the place of the internship)*

*Place of doing the internship (stamp of the medical facility).....*  
 .....

*Date.....Stamp and signature of the Internship Coordinator.....*

**Student self-evaluation** of the skills acquired during the internship .....

**Student self-evaluation** of the acquired social competences .....

*(grading scale from 1 to 5: 1 = unsatisfactory, 2 = poor, 3 = satisfactory, 4 = good, 5 = very good)*

# Medical University of Warsaw, Faculty of Medicine

Student's name and surname: .....

Student registration no.....

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Practical skills	Learning outcomes	Points (0-1 point)*	Confirmation of completion by the internship supervisor (stamp and signature)
<b>Emergency medical aid (1 week, 30 hours)</b>			
Knowledge of the scope of activities of an emergency department, e.g. keeping records, adjudicating temporary incapacity to work, referring patients to hospital, organizing transport services, organizing rescue operations for mass poisoning, diseases, accidents, natural disasters, etc.			
Getting to know the work of a paramedic in a CPR ambulance, ambulance and pediatric ambulance, performance of the same activities as the paramedic in the hospital emergency departments			
Assistance in a medical interview of an adult patient or a child and their parents.	E.U1 E.U2		
Assessment of the general condition, state of consciousness and awareness of the patient.	E.U7		
Recognition of life-threatening conditions.	E.U14		
Correct interpretation of the basic results of laboratory tests.	E.U24		
Medical procedure in case of injuries (dressing, immobilization, wound debridement).	E.U36		
Knowledge of the diagnosis criteria for patient agony and death.	E.U37		
Assistance in keeping patient medical records.	E.U38		
Treatment of external bleeding.	F.U9		
Knowledge of basic life support procedures using an automatic external defibrillator and other emergency procedures, knowledge of the principles of first aid.	F.U10		
Recognition of ophthalmic conditions that require immediate specialist help, provision of initial, qualified assistance in cases of physical and chemical eye injuries.	F.U19		
<b>Total number of points:</b>		<b>/12 pts</b>	
<b>Assessment of practical skills</b> <i>(made by the Internship Coordinator in the place of the internship):</i> <b>Grading scale:</b> very good (5.0): 11-12 pts, good (4.0): 8-10 pts, satisfactory (3.0): 6-7 pts, unsatisfactory (2.0): < 6 pts			

\*0 points: lack of skill or incomplete skill; 1 point: complete skill

## Social competences and professionalism

Feature	Points (0-1 point) *
Punctuality	
Involvement	
Conscientiousness	
Use of medical terminology	
Case presentation and discussion	
Team work	
Planning	
Compliance with the rules of ethics	
Image (e.g. badge, apron)	
Communication with patients	
<b>Assessment of social competences and professionalism</b> ( <i>made by the Internship Coordinator in the place of the internship</i> ) <b>Grading scale:</b> very good (5.0): 9-10 pts, good (4.0): 7-8 pts, satisfactory (3.0): 5-6 pts, fail (2.0) (< 5 pts)	<b>Total:</b> /10 pts <b>Grade:</b>

\*0 points: student does not behave or act professionally; 1 point: student behaves and acts professionally

**I hereby confirm that the Student has completed a summer internship in accordance with the internship program and in the scope indicated in the internship program.**

*(to be completed by the Internship Coordinator in the place of the internship)*

*Place of doing the internship (stamp of the medical facility).....*  
.....

*Date.....Stamp and signature of the Internship Coordinator.....*

**Student self-evaluation** of the skills acquired during the internship .....

**Student self-evaluation** of the acquired social competences .....

*(grading scale from 1 to 5: 1 = unsatisfactory, 2 = poor, 3 = satisfactory, 4 = good, 5 = very good)*

**I credit this summer student internship with the grade\*** .....

*(to be filled in by the Internship Supervisor of MUW)*

*Date..... Stamp and signature of the Internship Supervisor .....*

**\*Final internship grade** is issued by the Internship Supervisor of MUW, it is an average of the grades obtained for skills and professionalism (issued by the Internship Coordinator in the place of the internship); however, a failed grade for skills or professionalism excludes getting credited by the Internship Supervisor.