KOCAELI UNIVERSITY MEDICAL FACULTY DEPARTMENT OF PSYCHIATRYRESIDENTS' DUTIES AND ACTIVITIES DURING THEEDUCATIONAL YEAR

GENERAL SCHEDULE (Educational period is four years, plus six months if needed)

First year: Inpatient Clinic (9 months)

Second year: A- Neurology and Child and Adolescent Psychiatry (3 + 4 months)

B- Outpatient Clinic (8 months)

Third year: Outpatient Clinic (12 months)
Fourth year: Board of Health (4 months)

Consultation Liaison Psychiatry (4 months)

Inpatient Clinic Chief (4 months)

THE INPATIENT CLINIC

Are sident is responsible of the treatments and follow ups of 5-8 patients in average.

He/she meets the patient during the admission and briefs them about the work order of the clinic.

He/sheinterviews the patient at least 30 minutes a day on a regular basis. Senior medical students attend the meetings as well.

A meeting with the patients' relatives is done in order to finalize the mental status examination of the patients. Family and friends may also be involved in the treatment procedure if needed.

The residents prepare the patient for the rounds of the professor in concern. The subjects discussed in the rounds are noted in the patients' file and taken into consideration in the following rounds.

The residentsattend to all rounds and weekly seminars/board meetings.

During the night shifts, the residents meet with all the patients either together, or individually. Takes notes on the agenda.

Reports the treatments of the patients to the treatment team.

Arranges for the patients to go on daily walks. During each walk, a resident escorts the patients.

Performs the electro-convulsive therapy (ECT) to the suitable patients who are in need.

Prepares a seminar, a case report and article presentations.

The residents who come from different departments follow 2-4 patients and thus become an active member of the treatment team. They prepare a seminar as well.

THE OUTPATIENT CLINIC

Upon completing the inpatient clinicand outer rotations, each resident starts seeing patients in the outpatient clinic under the supervision of a professor. Takescounselling on the treatment procedure and patient management from the professor in charge.

After being discharged from the inpatient clinic, patients are directed to the outpatient clinic of the professor they were under the care of. Therefore, knowing the patients thoroughly, the treatment procedure is decided to the best interest of the patient.

The residents who work at the outpatient clinic are expected to attend to the seminars and the health board meetings on every Thursday. During the seminar hours, a resident stays on duty at the outpatient clinic.

At the outpatient clinic, each resident works with a senior medical student.

While working at the outpatient clinic, both the residents and the senior medical students wear a white doctors uniform.

COUNSULTATION LIAISON PSYCHIATRY

The counselling psychiatry residentevaluates the patients at the regarding department.

Takes notes on the request form of the patient after discussing with the regarding physician and shares information with them. Re-evaluates if necessary. If a treatment is offered to the patient, the resident evaluates the patient one last time before discharging and invites them back to the outpatient clinic of the psychiatry department for follow ups.

BOARD OF HEALTH

The residentwho is in charge of the board of health evaluates the board applications and invitessome 15 of the applicants to the board meeting for further evaluation each week. The applicants are accepted to the board meetings with 1-reason for application, 2-population characteristics, 3-psychiatric evaluation findings, 4-psychiatric treatment history, 5-psychiatric assessment scale findings (if done any), 6-information on judicial process (if there is any), 7-preliminary ruling information. A short form including the information mentioned above is noted and the eighth item is written down as the final decision.

INPATIENT CLINIC CHIEF

The inpatient clinic chief is generally responsible for all the operation process of the inpatient clinic. The initial goal for this rotation is to bring the fourth year residentin the capability of running a psychiatry service independently. Their responsibilities are: to organise the admissions to the inpatient clinic, to take the educational role in the residents' patient interviews and to help them learn how to use the assessment tools, to ensure that the students participate in the patient interviews, to make the patient interviews so that the students gain experience, to make a presentation to the fifth grade medical students with the regarding professor, to organise the patient rounds, to make the primary interview with the patients in the board meetings.

SHARING MEETING

All the treatment crew meet under the supervision of the head of department on the first Wednesday of the month at 12:15 at the inpatient clinic meeting room to discuss the operation process of the inpatient clinic, the outpatient clinic, and the educational problems.

ASSESSMENT AND EVALUATION

In order to evaluate the residents' educational status, examinations are being held each year on the subjects of 1) diagnosis, clinical aspects and evaluation, 2)psychopharmacological and psycho-therapeutic approaches, and 3) innovations in psychiatry. The exams are written exams and the professors' total scores determine the results. These results determine if the residents can take the specialization test. A resident has to score more than 70 points in each type of examination at least once in the educational period. While working in the inpatient clinic, every resident is evaluated regarding the patient files.

THESIS STUDY

At the end of the first year, each resident's thesis adviser is determined. The residents start their thesis work after the first year. They can also be involved in other studies. Upon the finalization of the thesis, the study is made an article and gets sent to a refereed journal. After this phase, the resident takes their specialization exam.

CONFERENCE-COURSE-WORKSHOP PARTICIPATION

Each resident participates in to national psychiatry conference at least once, and if there is any chance, participates to equivalent conferences also. There is no limit in participation with a scientific research. They can participate in to foreign conferences with a scientific research. They can participate in to workshops and courses without unsettling the work order. These types of participations are decided by the academic board.