Wroclaw Medical University Faculty of Medicine 26, Krakowska Street, 50-425 Wroclaw tel. (071) 784-06-57,58

Student's full name:	
Index no	

## Program of the Student Vocational Internship 2021/2022

Pursuant to the education standards of July 26th 2019 (Jurnal of Laws of 2019, item 1573)

Major of Dentistry, 1st year, internship period: 4 weeks (120 hours).

Practice in the field of health care in the general surgery ward, internal diseases or on maxillofacial surgery

1. The aim of internship:

Practical gaining of professional skills obtained during learning key subjects.

2. List of practical skills:  List of skills	Confirmation of completing the internship
the second second possitive or hospital wards	In the period fromto20
Learning of basic administrative procedures related with patients admissions, discharging documentation, patient transfers, etc.)  Gorganization of daily supplies for the ward (food, drugs, equipment)  Familiarizing with basic procedures (taking temperature, pulse, breath ate, preparing and making the bed, sanitary help, feeding the patient preparing drugs for administration).  Familiarizing with work in a treatment room including independent preparing of subcutaneous, intracutaneous and intramuscular injections preparing intravenous drip infusion as well as tests for drug sensitivity together with interpreting their results  Familiarizing with ways of preparing dressing materials and surgice instruments for sterilization  Helping in medical treatments and examinations  Participation and help in consulting meetings	(stamp of the department/unit)  The departmental/unit supervisor of the internship was:
	Date, stamp, institution's stamp Supervisior's signature

I accept a vocational internship after <b>1</b> <sup>st</sup> <b>year</b> of studies in the academic year 2021/2022	
Date and supervisor's of internship signature	

The program of the internship is consistent with teaching standards
The program of the internation is
Uniwersytet Medyczny we Wrocławiu
W/DZIAŁ
LEKARSKO-STOMATOLOGICZNY
THEKAN
prof. dr. Hab. Marsin Mikulewicz
Date and signature of the Dean of the Faculty of Dentistry

## Completed by a student

I declare that I was informed about a necessity of having the following documents:

- a) accident insurance, civil liability insurance,
- b) vaccination against hepatitis B,
- c) updated sanitary-epidemiological book,
- d) obligatory documentation essential to get a credit for apprenticeship,
- e) medical protective clothing,
- f) badge prepared on student's own (it should agree with the protocol enforced by the University).

I confirm the receipt of the internship referral along with the program of internship.

student's signature