

Student Full Name.....

Index No.

Programme of the Student Practical Training 2025/2026

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

field of study: Medicine, year of study: 5th, practical training duration: 4 weeks, 120 hours, subject/scope of practical training:

2 weeks (60 hours) – Practical Training in Gynaecology and Midwifery

2 weeks (60 hours) – Practical Training in Intensive Care

1. The aim of Practical Training: practical improvement of professional skills obtained in the course of learning key occupational subjects.

2. The list of practical skills:

List of Skills	Practical Training Completion Confirmation
<p>Place of Practical Training: gynaecology and midwifery hospital ward</p> <p>Practical Training in Gynaecology and Midwifery:</p> <ol style="list-style-type: none"> learning about the organisational structure of the labour and delivery admission room, the birth delivery pathway, and the postnatal ward, admitting a pregnant person for delivery, checking patient's documentation, as well as preparing the patient for delivery, observing the delivery progress and completing delivery medical documentation under doctor's supervision, including the critical parameters of the mother and foetus condition, assisting with physiological labour under the strict supervision of a midwife and a doctor, learning perineal suturing techniques, assessing the placenta after labour, getting to know the equipment available in the ward (amnioscope, foetal heart rate monitor, etc.), assisting in a caesarean section, becoming familiar with the organisational structure of the gynaecological admission room and gynaecological ward (clinic), reviewing the criteria for qualifying patients for surgical procedures, becoming familiar with the operating room guidelines and regulations, medical records management, collecting samples for histopathological and cytological tests (under the supervision of a doctor), as well as issuing referrals for histopathological and cytological tests, assisting in gynaecological surgical procedures, monitoring patients during the early post-surgical period and maintaining a case report form under the supervision of a doctor, caring for patients hospitalised due to pregnancy pathology, studying the principles of cancer prevention for the female genital tract, as well as mammary gland cancers, gaining knowledge of the sanitary and epidemiological regulations of the OB-GYN ward, and the methods of preventing hospital-acquired infections, improving skills in the accurate interpretation of laboratory, imaging, and histopathological results. 	<p>In the period from to 2026 in:</p> <p>.....</p> <p>Institutional Stamp</p> <p>Name of the Practical Training Supervisor at the Facility:</p> <p>.....</p> <p>Date, Stamp, Signature of the Practical Training Supervisor</p>
<p>Place of Practical Training: hospital anaesthesiology and intensive care ward</p> <p>Practical Training in Anaesthesiology and Intensive Care:</p> <ol style="list-style-type: none"> learning the organisation, admission procedures, medical records management, and discharge procedures of the anaesthesiology and intensive care ward, becoming familiar with the medical equipment used in the anaesthesiology and intensive care ward, perfecting medical examination and diagnostic skills, with a particular emphasis on acute cases, becoming acquainted with the general principles, as well as various methods of patient anaesthesia and sedation. participating in the medical rounds and on-call doctor reports, actively participating in ward tasks under supervision, including performing basic procedures, changing wound dressings, inserting intravenous (IV) cannulae, and collecting samples for diagnostic tests, etc., under a doctor's supervision. learning sanitary and epidemiological regulations and methods for preventing hospital-acquired infections. participating in multispecialty consultations, improving the accurate interpretation of ECG results, as well as laboratory, imaging, and histopathological exam results, becoming familiar with postoperative treatment principles, analgesic management, and the indications and guidelines for intensive care, learning the criteria and indications for initiating, withholding, or discontinuing resuscitation, declaring death, performing basic and advanced resuscitation, and carrying out other critical care procedures, assessing the patient's condition in accordance with established scoring systems. 	<p>In the period from to 2026 in:</p> <p>.....</p> <p>Institutional Stamp</p> <p>Name of the Practical Training Supervisor at the Facility:</p> <p>.....</p> <p>Date, Stamp, Signature of the Practical Training Supervisor</p>

I accept the Practical Training after the 5th year of studies
in the academic year 2025/2026

.....
Date and Signature of Wrocław Medical University
Practical Training Supervisor

The programme of the Practical Training is consistent with teaching standards

Uniwersytet Medyczny we Wrocławiu

WROCLAW LEKARSKI

dr hab. Robert Zymiński, profesor uczelni

(4)

10-12-2025

.....
date and signature of Dean of the Faculty of Medicine

To be completed by the student:

I declare that I have been informed about the requirement to possess the following:

- a) accident insurance,
- b) hepatitis B vaccination,
- c) up-to-date sanitary/epidemiological certificate,
- d) obligatory documentation required to pass the internship,
- e) personal protective equipment (apron, extra shoes, protective goggles),
- f) student-prepared badge adhering to the University's template.

.....
Student Signature

Unit Evaluation Questionnaire
- to be completed by the student

Name and Address of the Practical Training Facility:													
Year:	<input type="checkbox"/> I	<input type="checkbox"/> II	<input type="checkbox"/> III	<input type="checkbox"/> IV	<input type="checkbox"/> V								
Practical Training in: <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> Patient Care</td> <td><input type="checkbox"/> Paediatrics</td> </tr> <tr> <td><input type="checkbox"/> Primary Healthcare (General Practitioner)</td> <td><input type="checkbox"/> Surgery</td> </tr> <tr> <td><input type="checkbox"/> Emergency Medical Aid</td> <td><input type="checkbox"/> Gynaecology and Midwifery</td> </tr> <tr> <td><input type="checkbox"/> Internal Diseases</td> <td><input type="checkbox"/> Intensive Care</td> </tr> </table>						<input type="checkbox"/> Patient Care	<input type="checkbox"/> Paediatrics	<input type="checkbox"/> Primary Healthcare (General Practitioner)	<input type="checkbox"/> Surgery	<input type="checkbox"/> Emergency Medical Aid	<input type="checkbox"/> Gynaecology and Midwifery	<input type="checkbox"/> Internal Diseases	<input type="checkbox"/> Intensive Care
<input type="checkbox"/> Patient Care	<input type="checkbox"/> Paediatrics												
<input type="checkbox"/> Primary Healthcare (General Practitioner)	<input type="checkbox"/> Surgery												
<input type="checkbox"/> Emergency Medical Aid	<input type="checkbox"/> Gynaecology and Midwifery												
<input type="checkbox"/> Internal Diseases	<input type="checkbox"/> Intensive Care												
Date of Practical Training: from to													
Rating scale from 1 to 5 <i>1 - the lowest, 5 - the highest</i>													
The Practical Training improved my professional skills	1	2	3	4	5								
The objectives of the Practical Training programme were met	1	2	3	4	5								
The Practical Training allowed me to achieve the planned learning outcomes set out in the Practical Training programme	1	2	3	4	5								
The Practical Training conditions	1	2	3	4	5								
Access to the medical equipment needed for the Practical Training	1	2	3	4	5								
Time efficiency of the Practical Training tasks	1	2	3	4	5								
Overall satisfaction with the Practical Training	1	2	3	4	5								
COMMENTS:													

Student Evaluation Questionnaire
- to be completed by the Practical Training Supervisor

Student Full Name:					
Year: <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V					
Practical Training in: <input type="checkbox"/> Patient Care <input type="checkbox"/> Paediatrics <input type="checkbox"/> Primary Healthcare (General Practitioner) <input type="checkbox"/> Surgery <input type="checkbox"/> Emergency Medical Aid <input type="checkbox"/> Gynaecology and Midwifery <input type="checkbox"/> Internal Diseases <input type="checkbox"/> Intensive Care					
Date of Practical Training: from to					
Practical Training Supervisor Name:					
Rating scale from 1 to 5 <i>1 - the lowest, 5 - the highest</i>					
Theoretical background (knowledge)	1	2	3	4	5
Practical skills	1	2	3	4	5
Communication with medical staff	1	2	3	4	5
Communication with patients	1	2	3	4	5
Student's initiative	1	2	3	4	5
Punctuality, reliability in performing assigned tasks	1	2	3	4	5
Date, Supervisor Signature and Stamp					
COMMENTS:					

Unit Evaluation Questionnaire
- to be completed by the student

Name and Address of the Practical Training Facility:													
Year:	<input type="checkbox"/> I	<input type="checkbox"/> II	<input type="checkbox"/> III	<input type="checkbox"/> IV	<input type="checkbox"/> V								
Practical Training in: <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> Patient Care</td> <td><input type="checkbox"/> Paediatrics</td> </tr> <tr> <td><input type="checkbox"/> Primary Healthcare (General Practitioner)</td> <td><input type="checkbox"/> Surgery</td> </tr> <tr> <td><input type="checkbox"/> Emergency Medical Aid</td> <td><input type="checkbox"/> Gynaecology and Midwifery</td> </tr> <tr> <td><input type="checkbox"/> Internal Diseases</td> <td><input type="checkbox"/> Intensive Care</td> </tr> </table>						<input type="checkbox"/> Patient Care	<input type="checkbox"/> Paediatrics	<input type="checkbox"/> Primary Healthcare (General Practitioner)	<input type="checkbox"/> Surgery	<input type="checkbox"/> Emergency Medical Aid	<input type="checkbox"/> Gynaecology and Midwifery	<input type="checkbox"/> Internal Diseases	<input type="checkbox"/> Intensive Care
<input type="checkbox"/> Patient Care	<input type="checkbox"/> Paediatrics												
<input type="checkbox"/> Primary Healthcare (General Practitioner)	<input type="checkbox"/> Surgery												
<input type="checkbox"/> Emergency Medical Aid	<input type="checkbox"/> Gynaecology and Midwifery												
<input type="checkbox"/> Internal Diseases	<input type="checkbox"/> Intensive Care												
Date of Practical Training: from to													
Rating scale from 1 to 5 <i>1 - the lowest, 5 - the highest</i>													
The Practical Training improved my professional skills	1	2	3	4	5								
The objectives of the Practical Training programme were met	1	2	3	4	5								
The Practical Training allowed me to achieve the planned learning outcomes set out in the Practical Training programme	1	2	3	4	5								
The Practical Training conditions	1	2	3	4	5								
Access to the medical equipment needed for the Practical Training	1	2	3	4	5								
Time efficiency of the Practical Training tasks	1	2	3	4	5								
Overall satisfaction with the Practical Training	1	2	3	4	5								
COMMENTS:													

Student Evaluation Questionnaire
- to be completed by the Practical Training Supervisor

Student Full Name:					
Year: <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/> V					
Practical Training in: <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Patient Care <input type="checkbox"/> Primary Healthcare (General Practitioner) <input type="checkbox"/> Emergency Medical Aid <input type="checkbox"/> Internal Diseases </div> <div style="width: 48%;"> <input type="checkbox"/> Paediatrics <input type="checkbox"/> Surgery <input type="checkbox"/> Gynaecology and Midwifery <input type="checkbox"/> Intensive Care </div> </div>					
Date of Practical Training: from to					
Practical Training Supervisor Name:					
Rating scale from 1 to 5 <i>1 - the lowest, 5 - the highest</i>					
Theoretical background (knowledge)	1	2	3	4	5
Practical skills	1	2	3	4	5
Communication with medical staff	1	2	3	4	5
Communication with patients	1	2	3	4	5
Student's initiative	1	2	3	4	5
Punctuality, reliability in performing assigned tasks	1	2	3	4	5
Date, Supervisor Signature and Stamp					
COMMENTS:					