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| |  |  |  | | --- | --- | --- | | SAĞLIK BİLİMLERİ ÜNİVERSİTESİ ile ilgili görsel sonucu | **SAĞLIK BİLİMLERİ ÜNİVERSİTESİ**  **SAĞLIK BİLİMLERİ FAKÜLTESİ**  **EBELİK BÖLÜMÜ 4.SINIF**  **KLİNİK SAHADA ENTEGRE UYGULAMA(INTERN PROGRAMI) DEĞERLENDİRME FORMU** | | | **A-PROFESYONEL DAVRANIŞLAR (20 puan)** | | **Verilen Puan:** | | Üniforma düzeni | | | | Çalışma saatlerine uyma | | | | Karar verme yeteneği | | | | Sorumluluk alma ve yerine getirebilme | | | | Eksikleri fark etme, hatalarını düzeltmek için çaba gösterme | | | | **B- KİŞİLERARASI İLİŞKİLER (10 puan)** | | **Verilen Puan:** | | Bakım verdiği sağlıklı/riskli gebe ve ailesi ile iletişim | | | | Ekip üyeleri ile iletişim | | | | Eğitimcilerle iletişim | | | | **C- SAĞLIK EĞİTİMİ VE ARAŞTIRMA (10 puan)** | | **Verilen Puan:** | | Bakım verdiği birey ve ailesinin sağlık eğitimi gereksinimlerini belirleme | | | | Sağlık eğitimi planlama, uygulama | | | | Sağlık eğitiminde uygun teknik ve araçları kullanabilme | | | | **D- UYGULAMA BECERİLERİ (60 puan)** | | **Verilen Puan:** | | 1. Uygulamaya özel uygun, eksiksiz malzeme seçimi | | | | 1. Aseptik tekniği kullanma becerisi | | | | 1. İşlem öncesi hastaya gerekli açıklamayı yapma | | | | 1. Uygulama basamaklarını eksiksiz ve doğru gerçekleştirme | | | | 1. Uygulamanın hasta yönünden etkisini değerlendirme | | | | 1. Araç gereçleri temiz olarak kaldırması | | | | 1. İşlemlerin kayıt edilmesi | | | | 1. Bilgiyi kullanma becerisi | | | | 1. Birey merkezli bakım verme | | | | 1. Hastaya bütüncül yaklaşım ile bakım verme | | | | 1. FKA dinleme ve yorumlayabilme | | | | 1. Leopold manevralarını yapabilme | | | | 1. Vajinal tuşe yapabilme ve değerlendirme | | | | 1. Mesane kateteri uygulayabilme | | | | 1. İnvolüsyon ve kanama kontrolü yapabilme ve değerlendirebilme | | | | 1. Yenidoğanı değerlendirebilme ve bakım verebilme | | | | 1. Emzirmeyi başlatabilme ve sürdürebilme | | | | 1. Plesanta çıkarabilme ve takibini yapabilme | | | | 1. Doğum sürecini izleme ve yönetebilme | | | | 1. Epizyotomi açma ve tamiri | | | | **TOPLAM PUAN:** | | |   **Öğrencinin Adı-Soyadı : Uygulamaya Çıkılan Hastane/Klinik:**  **Öğrenci Numarası: Tarih:**  **Adı Soyadı/İmzası:**    **SAĞLIK BİLİMLERİ ÜNİVERSİTESİ**  **HAMİDİYE**  **SAĞLIK BİLİMLERİ FAKÜLTESİ**  **EBELİK BÖLÜMÜ**  **ÖĞRENCİ UYGULAMA KARNESİ**   |  | | --- | | FOTOĞRAF |   **ÖĞRENCİNİN KİMLİĞİ**  **Adı ve Soyadı** : ...............................................................  **Öğrenci No** : ...............................................................  **Baba Adı** : ...............................................................  **Ana Adı** : ...............................................................  **Doğum Yeri ve Yılı** : ...............................................................  **Uyruğu**  : ...............................................................  **Nüfusa Kayıtlı Olduğu Yer** : ...............................................................  **Mezun Olduğu Lise, Tarih** : ...............................................................  **Fakülte Kayıt Yılı** : ...............................................................  **Telefon No** : ...............................................................  **Yabancı Dil Durumu** : ............................................................... Öğrenci İmzası Danışman İmzası **UYGULAMA KRİTERLERİ**  **Ebelik öğrencisi en az;**   1. 100 doğum öncesi muayene ve danışmanlık yapmalı 2. 40 gebe kadının gebelik takibi ve bakımını yapmalı 3. 40 normal doğum yaptırmalı (20 doğuma yardım ile bu sayı 30’a inebilir=50 doğum) 4. 100 lohusa bakımı vermeli 5. 100 yenidoğan muayenesi yapmalı 6. Gebelik, doğum ya da doğum sonrası dönemde risk altında olan 40 kadının izlemi ve bakımı   6a) 15 riskli gebe kadın izlemeli  6b) 10 riskli doğum izlemeli  6c) 15 riskli lohusa kadın izlemeli   1. 20 Riskli yenidoğan izlemeli 2. Jinekolojik ve obstetrik patolojisi olan kadına bakım vermeli 3. Epizyotomi uygulamalı 4. Makat doğuma aktif olarak (Makat doğum mümkün olmadığı takdirde simülasyon uygulama) katılmalıdır.   **1.KRİTER: 100 Doğum Öncesi Muayene ve Danışmanlık**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Protokol No** | **Tarih** | **Gebelik**  **Haftası** | **Ağırlık** | **Kan**  **Basıncı** | **Tetanoz Aşısı** | **Ödem** | **Varis** | **Nabız** | **Hg** | **Leopold**  **Manevralar** | **FKA** | **Prezentasyon**  **Pozisyon** | **Kan grubu** | **Danışmanlık** | **Gözlemci**  **Ebe,dr,hemş**  **İmza** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |      2. KRİTER: 40 Gebe Kadının Gebelik Takibi ve Bakımı  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Protokol No** | **Tarih** | **Gebelik**  **Haftası** | **Gebelik öncesi ağırlık** | **Gebelikte alınan kilo** | **Kan**  **Basıncı** | **Tetanoz Aşısı** | **Ödem** | **Varis** | **Nabız** | **Hg** | **Leopold**  **Manevralar** | **FKA** | **Prezentasyon**  **Pozisyon** | **Kan grubu** | **Gözlemci**  **Ebe,dr,hemş**  **İmza** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **3. KRİTER: 40 Normal Doğum (20 yardım ile bu sayı 30’a inebilir=50 doğum)**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Protokol No** | **Tarih** | **Ağrı Takibi** | **Leopold**  **Manevraları** | **FKA** | **Silinme** | **Dilatasyon** | **İndiksiyon** | **Boşaltım** | **Eğitim** | **Solunum**  **Egzersizi** | **Epizyotomi**  **Açma** | **Doğum**  **Yaptırma** | **Plesenta**  **Çıkarma** | **Vakum veya çan uygulaması** | **Gözlemci**  **Ebe,Dr,Hemş. İmza** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **4. KRİTER: 100 Lohusa Bakımı**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  | | **ERKEN POSTPARTUM** | | | | | | | | **GEÇ POSTPARTUM** | | | | | | | | | | **Vaka No.** | **Protokol No** | **Tarih** | | **Epizyo**  **Tamiri** | **Vital (TA,Na,Ateş )**  **Bulgular** | **Kanama**  **Kontrolü** | **Uterus**  **Masajı** | **Pozisyon**  **Verme** | **Emzirme** | **Eğitim** | **Perine**  **Bakımı** | **Kanama**  **Kontrolü** | **Vital (TA,Na,Ateş )**  **Bulgular** | **Uterus**  **İvolüsyonu** | **Meme**  **Bakımı** | **Emzirme** | **Mobilizyon** | **Boşaltım** | **Gözlemci**  **Dr,Ebe,Hem**  **İmza** | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  5. KRİTER: 100 Yenidoğan Muayenesi  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | **DOĞUMHANEDE** | | | | | | | | | | | **SERVİSTE** | | | | | | | **Vaka No.** | **Protokol No** | **Tarih** | **Solunum yolunun**  **açıklığı** | **Isının Korunması** | **Apgar ( 1 - 5 dk)** | **Göbek Bakımı** | **Anne-bebek İletişiminin**  **başlatılması** | **Kimlik**  **Belirlemesi** | **K vit**  **Uygulaması** | **Emzirme** | **Anne Eğitimi** | **Yenidoğan**  **Muayenesi** | **Tarama Testler** | **Göbek Bakımı** | **Emzirme** | **Anne Eğitimi** | **Gözlemci**  **Ebe,dr,hemş**  **İmza** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **6A-KRİTER: 15 Riskli Gebe Kadın**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Protokol No** | **Tarih** | **Tanı** | **Anamnez**  **Alma** | **Gebelik Haftası** | **Kilo** | **Kan**  **Basıncı** | **Ödem** | **Varis** | **FKA** | **Tetkik** | **Tedavi** | **Gözlemci**  **Ebe,dr,hemş** İ**mza** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   **6B- KRİTER: 10 Riskli Doğum**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Protokol No** | **Tarih** | **Doğum sayısı** | **Membran rüptürü** | **FKA** | **Amnion sıvıvı** | **Silinme** | **Dilatasyon** | **10 dk kontraksiyon**  **sayısı** | **Oksitosin dm/dk** | **Verilen ilaçlar** | **Tansiyon** | **Nabız** | **Ateş** | **Tanı** | **Tedavi** | **Doğum şekli** | **Gözlemci**  **Ebe,Dr,Hemş. İmza** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  6C- KRİTER: 15 Riskli Lohusa Kadın  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Protokol No** | **Tarih** | **Atoni Kanaması** | **Plasenta Retansiyonu** | **Hematom** | **Kuagülasyon Bozukluğu** | **Subinvolüsyon** | **Uterus İnversiyonu** | **Üreme Sistemi Enfeksiyonu** | **Septisemi** | **Meme Sorunları** | **Üriner Sistem Sorunları** | **Tromboflebit** | **Epizyotomi Sorunları** | **Gözlemci**  **Ebe,Dr,Hemş. İmza** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  7. KRİTER: Riskli Yenidoğan İzlemi  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Prototkol No** | **Tarih** | **Tanı** | **Doğum Şekli** | **Gestasyon**  **Yaşı** | **Muayene**  **Sonuçları** | **Beslenme** | **Bakım**  **Uygulamaları** | **Kilo** | **Boy** | **Baş Çevresi** | **Göğüs Çevresi** | **Laboratuvar**  **Sonuçları** | **Tedavi** | **Gözlemci**  **Ebe,dr,hemş**  İmza | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  8. KRİTER: Jinekolojik ve Obstetrik Patolojisi Olan Kadının Bakım  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Prototkol No** | **Tarih** | **Tanı** | **Anamnez alma** | **Jin. muayeneye hazırlama** | **Spekulum uygulama** | **Bimanuel muayene yapma** | **Smear alma** | **Preop hasta bakımı** | **Postop hasta bakımı** | **Tedavi** | **Gözlemci**  **Ebe, dr, hemş**  İmza | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  1. **KRİTER:** **Epizyotomi Uygulaması**  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Protokol No** | **Tarih** | **Tanı** | **Epizyotomi endikasyonu** | **Epizyotomi için anestezi uygulma** | | **Epizyo açma** | | **Epizyotomi tamiri** | | **Tedavi** | **Gözlemci** Ebe, dr, hemş **İmza** | |  | | | | | **Kendisi** | **Yardımla** | **Kendisi** | **Yardımla** | **Kendisi** | **Yardımla** |  | | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |   **10. KRİTER: Makat Doğuma Aktif Olarak Katılım**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Vaka No.** | **Protokol No** | **Tarih** | **Anamnez**  **Alma** | **Ağrı Takibi** | **Leopold**  **Manevraları** | **Makat prezentasyon şekli** | **FKA** | **Silinme -**  **Dilatasyon** | **İndiksiyon** | **Boşaltım** | **Eğitim** | **Solunum**  **Egzersizi** | **Epizyotomi**  **Açma** | **Doğum**  **Yaptırma** | **Plesenta**  **Çıkarma** | **Gözlemci**  **Ebe,Dr,Hemş. İmza** | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  * Sınıfta makat doğum simülasyonuna katılım: |