

## Oncology Practice Evaluation Sheet 6th Year

## Oncological Module in Internal Medicine Practice 5x6 hours: Oncoteams

Format and elements of the medical documentations for the Oncoteam, workflow of the

Name of the Student, EHA code:

Period of the Registration:

multidisciplin	ary 1	teams, most	t important legal reg	gulations regarding oncolo	gical care
Students parti specific Onco			ily Oncoteam of the	e Department (8-9 a.m.), l	ater on they join the Organ-
Daily Oncoted	am c	at the Depa	rtment		
	Date		Task		Signature of the Supervisor
1.					•
2.					
3.					
4.					
5.					
Organ-specifi can be differe				weekly schedule of the I	Dept. Oncotherapy, Szeged,
Team		Date	Task		Signature of the Supervisor
M: Head neck, Uro	&				
Tu: Derma	- 1				
Breast, Pulmo W: Neuro	)				
Th: Gynaed	20,				
Other:					
Hereby I appr	ove	the comple	tion of the Oncolog	ical Module in Internal Mo	edicine Practice:
		., 20			
				Head of th	e Department