



Oncology Practice Evaluation Sheet 6th Year

Oncological Module in Internal Medicine Practice

5x6 hours: Oncoteams

Name of the Student:

Period of the practice:

Format and elements of the medical documentations for the Oncoteam, workflow of the multidisciplinary teams, most important legal regulations regarding oncological care

Students participate at the daily Oncoteam of the Department (8-9 a.m.), later on they join the Organ-specific Oncoteams

Daily Oncoteam at the Department

	Date	Task	Signature and stamp of the Supervisor
1.			
2.			
3.			
4.			
5.			

Organ-specific Oncoteams (According to the weekly schedule of the Dept. Oncotherapy, Szeged, can be different at other sites)

Team	Date	Task	Signature and stamp of the Supervisor
M: Head & neck, Uro			
Tu: Dermato, Breast, Pulmo			
W: Neuro			
Th: Gynaeco, Gastro			
Other:			

Hereby I approve the completion of the Oncological Module in Internal Medicine Practice:

Date:

Signature and stamp of the
Head of the Department