

Learning objectives – mandatory

The fulfilled and assessed learning objectives must be marked by the student with an x.

The assessment can be performed by the mentor in three ways: direct observation of the student during performance of a clinical activity (see page ii), CPY task (see page P4-P6), Mini-CEX/DOPS (see page v-vi). At the end of completion of the CPY tertial in the respective department, fulfilment of the learning objectives must be signed off by the mentor.

Competence	Objectives completed
Taking a medical history	
1. Clarifying the patient's expectations and request for the consultation	<input type="radio"/>
2. Taking a systematic history (symptoms, current complaints, the patient's life situation, his/her understanding of the illness and concerns, social and cultural background and illness experience)	<input type="radio"/>
3. Taking history from third parties	<input type="radio"/>
4. Taking a psychiatric history	<input type="radio"/>
5. Taking psychoactive/potentially addictive substance history	<input type="radio"/>
6. Assessment of mood and mental status	<input type="radio"/>
7. Assessment of attention, thought (form and content), perception, affect and psychomotor behaviour	<input type="radio"/>
8. Assessment of memory, MMSE, clock test	<input type="radio"/>
9. History taking in emergency psychiatric patients	<input type="radio"/>
10. Assessing and managing patients suspected of self-harm (excluding suicide)	<input type="radio"/>
Performance of examination techniques	
11. Assessment of general condition (habitus and posture, symmetry and mobility of body) and nutritional state	<input type="radio"/>
12. Assessment of vital functions (body temperature, respiration, pulse rate, blood pressure, venous pressure)	<input type="radio"/>
13. Assessment of orientation in space and time	<input type="radio"/>
14. Assessment of psychopathological status	<input type="radio"/>
15. Planning additional examinations/tests for further diagnosis, e.g. psychological test, EEG, lab tests, imaging	<input type="radio"/>
16. Diagnosis of suicidal tendencies (constriction)	<input type="radio"/>
Performance of routine skills	
17. Intravenous injection and cannulation	<input type="radio"/>
18. Subcutaneous and intramuscular injections	<input type="radio"/>
19. Venepuncture/drawing blood	<input type="radio"/>
20. Intravenous injections	<input type="radio"/>
21. Taking an electrocardiogram at rest	<input type="radio"/>

Competence

Objectives completed

Therapeutic measures

- | | |
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| 22. Creating a multidisciplinary treatment plan | <input type="radio"/> |
| 23. Knowledge of the most important psychotropic drugs, including side-effect profile, interaction profile and indications | <input type="radio"/> |
| 24. Knowledge of the most important forms of psychotherapy, including indications | <input type="radio"/> |
| 25. Checking drug therapy for drug interactions | <input type="radio"/> |
| 26. Identification of drug side effects and their management | <input type="radio"/> |

Communication with patient/team

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| 27. Communicating in a multi-disciplinary team | <input type="radio"/> |
| 28. Elaborating a clinical question and searching for its solution in the literature | <input type="radio"/> |
| 29. Dealing with and behaving appropriately in the face of aggression | <input type="radio"/> |
| 30. Working in a multidisciplinary team | <input type="radio"/> |
| 31. Providing information to patients and relatives in an ethically correct and professional manner in compliance with legal requirements and ensuring that the patient has understood the information | <input type="radio"/> |
| 32. Checking compliance | <input type="radio"/> |
| 33. Telephoning patients and third parties in an ethically correct and professional manner (in accordance with legal requirements) | <input type="radio"/> |
| 34. Giving main information elements necessary to get informed consent | <input type="radio"/> |
| 35. Explaining to patients and relatives about the diagnosis, risk factors and therapy options | <input type="radio"/> |
| 36. Summarizing the main points of diagnoses, active problems and management plans of a patient | <input type="radio"/> |
| 37. Clarifying with nursing staff monitoring measures and calling criteria concerning patients | <input type="radio"/> |
| 38. Communicating and dealing professionally with geriatric patients | <input type="radio"/> |
| 39. Advising and supporting patients (empowerment) | <input type="radio"/> |
| 40. Managing psychiatric emergencies and crises | <input type="radio"/> |

Documentation

- | | |
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| 41. Recording findings in patient file | <input type="radio"/> |
| 42. Retrieving patient-specific information from clinical data system | <input type="radio"/> |
| 43. Filling out a requisition for instrumental investigations (lab tests, imaging) | <input type="radio"/> |

Competence

Objectives completed

44. Written summary, documentation and assessment of medical conditions and writing discharge letters and final reports	<input type="radio"/>
45. Checking the coded diagnoses for accuracy	<input type="radio"/>
46. Specialty-specific quality assurance and documentation	<input type="radio"/>
Verified by mentor	

Learning objectives – optional

In addition to the competences that are mandatory to achieve, optional competences from the training programmes may also be acquired.

Competence as per training programme	Objectives completed
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Verified by mentor	