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/D0PS** (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.

Con	npetence	Objectives completed		
Taking a medical history				
1.	Clarifying the patient's expectations for the consultation	0		
2.	Taking history (including from third persons) to assess psycho-social, economic and hygienic situation, including risk factors for falls	0		
3.	Taking a social, family, occupational, medication, lifestyle, travel and illicit drug history and identification of problem areas	0		
4.	Drug history with consideration of side effects and drug interactions	0		
Perfor	mance of examination techniques			
5.	Clinical-physical status (including rectal examination)	0		
6.	Inspection, palpation, auscultation and percussion of all body regions	0		
7.	Assessment of basic and essential activities of daily living	0		
8.	Assessing the general state of health (e.g. dehydration, malnutrition, frailty,)	0		
9.	Consideration and identification of "potentially dangerous conditions" ("red flags")	0		
10.	. Ascertainment/assessment of cognitive functions (MMSE/Mini-Cog)	0		
11.	. Ascertainment/assessment of function of joints and spinal column using appropriate clinical-physical tests	0		
12.	. Testing and assessing radicular symptoms	\circ		
13.	. Measurement of blood pressure	0		
14.	. Taking and describing an electrocardiogram at rest	0		
15.	. Otoscopy and description of the findings	\circ		
16	. Testing for meningeal irritation	0		
17.	. Reflex status	0		
18.	Consideration and identification of functional complaints/somatisation	0		

Competence	Objectives completed			
Performance of routine skills				
 Development of diagnostic pathways, early diagnosis, differential diagnoses taking into account epidemiology, appropriateness and economics as well as prioritization of medical conditions in multiple pathology 	0			
20. Filling in prescription forms and using the "Box System"(in Austria) or respective regulations	0			
21. Reading a urine strip test	0			
22. Taking a throat swab	0			
23. Ear irrigation	0			
24. Using and giving instructions to use metered dose inhalers, spacers and nebulizers	0			
25. Intramuscular/subcutaneous/intravenous injections	\circ			
26. Venipuncture / blood sampling from the vein	\circ			
27. Quick tests (point of care tests; blood sugar, CRP, troponin, blood clotting etc.), interpretation of the result (also with regard to the sensitivity and specificity of the test)	0			
28. Home visits	\circ			
29. Coordination of medical care within the primary care-level (e.g., physiotherapy, occupational therapy, psychotherapy, home nursing, psychosocial services, social work) and the secondary care level (other medical specialists, intra- and extramural), preparation of referrals, assignments, and admissions	0			
30. Recognition of possible sources of error / critical events in the medical care and their prevention	0			
Therapeutic measures				
31. Creating and justifying therapy suggestions considering adequacy and economy	0			
32. Applying national and international EBM guidelines / protocols, as well as a simultaneously critical reflection of them regarding the individual patient, if necessary deviationg from them because of multimorbidity, polypharmacy	0			
33. Watchful waiting	0			
34. Restrained approach in the care of patients with self-limiting diseases	0			
35. Checking and managing drug therapy (interactions, side effects and over-treatment, medicalization)	0			
36. Supporting patients in disease management programmes	0			
37. Dosage, follow-up and documentation of oral anti-coagulation	0			
Communication with patient/team				
38. 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	0			
39. Checking and verification of adherence	0			

Competence	Objectives completed			
40. Advising and supporting patients (empowerment), e.g. in terms of therapy (e.g., mode of administration) and lifestyle (e.g., diet, physical activity, dietary restrictions, smoking, alcohol, illegal drugs), scheduling of control appointments	0			
41. Summarize the most important points concerning the diagnoses, prognoses, current problems and the planned therapy	\circ			
42. Communicating and professionally dealing with special patient groups, e.g. geriatric patients, children and adolescents and their relatives, persons with mental or physical (e.g. deafness) impairment	0			
43. Managing patients with contradictory results from investigations	0			
44. Management of patients with multiple conditions	0			
45. Recognize ethically problematic situations	0			
46. Clear and respectful communication with all team members of the primary care practice	0			
Documentation				
47. Compliance with given legal requirements (e.g. Hospitals Act, Insurance Act, Health Insurance Company Framework Agreement)	0			
48. Compliance with health insurance company requirements	0			
49. Documentation in patient files on PC	0			
50. Coding using ICPC-2	0			
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
	0
	0
	0
	0
	0
	0
	0
	0
	0
	0
Verified by mentor	