

**APPLICATION FOR VOLUNTEERING IN THE ACADEMIC YEAR 2020/2021**

Address (unit manager/responsible person):

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| --- |
| First name, last name, function: |

I, the undersigned, request your permission to volunteer in the unit you are directing:

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| Name and address of the unit: |

to the extent enabling the acquisition of practical skills in accordance with the profile of the individual and the practical learning outcomes indicated in the applicable educational standards for a given field of study.

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| **STUDENT** |
| First name, last name |  | Index  |  |
| Faculty |  |
| Year of study |  | Semester |  |
| Student’s sign |  |

The range of activities performed by the student during his voluntary work corresponds to the practical results of education in the field of **SURGERY (3)**:

|  |  |  |
| --- | --- | --- |
| Number of course education result  | Number of major education result  | A volunteer/student is able/knows |
| U 01 | F.U1 | assists for a typical surgical procedure, prepares the operating field and applies local anaesthesia |
| U 02 | F.U2 | uses common surgical tools |
| U 03 | F.U3 | abides by the rules of asepsis |
| U 04 | F.U4 | manages a simple wound, applies and changes a sterile dressing |
| U 05 | F.U6 | examines the breasts, lymph nodes, thyroid, and abdomen for acute abdominal signs, and performs digital rectal examination |
| U 06 | F.U9 | controls external bleeding |
| U 07 | F.U10 | perform basic CPR treatments using an automatic external defibrillator and other rescue operations and provide first aid |
| U 08 | F.U12 | monitor the patient's post-operative condition based on basic vital signs and symptoms |
| U 09 | F.U21 | assess the condition of an unconscious patient according to international point scales |
| U 10 | F.U22 | recognize the symptoms of increasing intracranial pressure |
| Dean's consent to volunteer |  |
| Duration of volunteering | from: 2020 to: 2020 |
| Total number of hours of volunteering |  |
| Signature and stamp confirming the volunteering |  |