

# BUKU KURIKULUM PENDIDIKAN TINGGI (KPT)

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PROGRAM STUDI : ILMU PENYAKIT DALAM



PROGRAM PENDIDIKAN DOKTER SPESIALIS (PPDS)  
FAKULTAS KEDOKTERAN UNIVERSITAS HASANUDDIN

Drafting team.

1. Prof. Dr. dr. Syakib Bakri, SpPD, K-GH
2. Prof. Dr. dr. Haerani Rasyid, MKes, SpPD, K-GH, SpGK
3. Dr. dr. Andi Makbul Aman, SpPD, K-EMD
4. Dr. dr. Hasyim Kasim, SpPD, K-GH
5. Dr. dr. Harun Iskandar, SpP(K), SpPD, K-P
6. Dr. dr. Faridin HP, SpPD, K-R
7. Dr. dr. Tutik Harjanti, SpPD, K-HOM
8. Dr. dr. A. Fachruddin Benyamin, SpPD, K-HOM
9. Dr. dr. Idar Mappangara, SpPD, SpJP
10. Dr. dr. Nur Ahmad Tabri, SpPD, K-P, SpP(K)
11. Dr. dr. Fardah Akil, SpPD, K-GEH
12. dr. Sudirman Katu, SpPD, K-PTI
13. dr. Wasis Udaya, SpPD, K-Ger
14. dr. Rahmawati Minhajat, PhD, SpPD, K-HOM
15. dr. Suriani Alimuddin, SpPD, K-AI
16. Dr. dr. Khalid Saleh, SpPD, CV
17. dr. Pendrik Tandean, SpPD, CV
18. Dr. dr. Muh. Ilyas, SpP(K), SpPD, K-P
19. Dr. dr. Husaini Umar, SpPD, K-EMD
20. Dr. dr. A. Muh. Luthfi, SpPD, K-GEH
21. Dr. dr. Erwin Arief, SpP, SpPD, K-P
22. Dr. dr. Fabiola MS.Adam, SpPD. K-EMD
23. Dr. dr. Himawan Sanusi, SpPD. K-EMD
24. Dr. dr. Risna Halim, SpPD, K-PTI
25. Dr. dr. Femi Syahriani, SpPD. K-R
26. Dr. dr. Sahyuddin, SpPD. K-HOM
27. dr. Endy Adnan, SpPD, PhD, K-R
28. Dr. dr. Nu'man AS Daud, SpPD. K-GEH
29. dr. Agus Sudarso, SpPD, K-Ger
30. dr. Dimas Bayu, SpPD, K-HOM
31. dr. St. Rabiul Zatalia Ramadhan, SpPD, K-GH
32. dr. Satriawan Abadi, SpPD, K-IC
33. dr. Susanto H Kusuma, SpPD, K-GEH



## **Message from the Dean of the Faculty of Medicine, Hasanuddin University**

Assalamu Alaikum Warahmatullahi Wabarakatuh

Praise and gratitude we send to God Almighty, thanks to His Grace and Hidayah so that the book of Higher Education Curriculum (KPT) Specialist Medical Education Program (PPDS) Faculty of Medicine, Hasanuddin University can be completed.

This Higher Education Curriculum book is expected to be able to accommodate developments that occur in every Education Specialist Medical Education Program, Faculty of Medicine, Hasanuddin University, in order to create specialist doctors who are reliable, competent, ethical and well behaved and uphold the ethics of the medical profession so that they can compete at the international level.

We really appreciate the efforts made by the Specialist Doctors Education Program Team (PPDS) who have accommodated the dynamics and development of Specialist Doctor Education in Indonesia and especially at Hasanuddin University, as well as the PPDS Study Program team who have collaborated and played an active role in the preparation of this KPT. To all Heads of Departments, Head of Undergraduate Program (KPS), Quality Assurance Groups (GPM) and the Faculty's Academic Senate, thank you for all the facilitation in every preparation step at the Faculty level. It is hoped that with this Higher Education Curriculum book, the implementation of the PPDS Program can run more directed, better and more measurably.

We convey our highest respect and appreciation to the Chancellor, Unhas Academic Senate, and the Institute for Quality Assurance and Educational Development. (LPMPP) which has provided direction, views, and improvements as well as approval so that the Higher Education Curriculum (KPT) book can be a guide and reference for the Specialist Medical Education Program (PPDS) of the Faculty of Medicine to be able to achieve the competencies as expected.

Finally, let's always ask for guidance from Allah SWT so that we always be blessed for our efforts. Amen

Makassar, Agustus 2020  
Dekan Fakultas Kedokteran Universitas Hasanuddin,

Prof.dr. Budu, Ph.D.,Sp.M(K),M.Med.Ed.

**Foreword of Specialist Doctor Education Program Manager (PPDS) FSH**

Bismillahirrahmanirahim

Curriculum changes in higher education are routine activities that must be carried out in response to the development of science and technology, community and the graduate users needs. With the impetus of global development, recognition of learning achievements that have been internationally equalized, and with the development of the National Qualifications Framework (CNI) through Presidential Regulation of the Republic of Indonesia Number 8 of 2012, the curriculum in universities since 2012 has undergone a slight shift by providing a measure of equality. learning achievement. This curriculum is known as the Higher Education Curriculum (KPT).

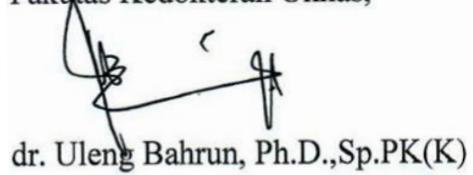
The Specialist Medical Education Program at the Faculty of Medicine, Hasanuddin University has grown so rapidly both in terms of the number of study programs and the number of participants. The implementation of education between specialist doctor study programs also has its own specificity, therefore it is necessary to have a manual that can be used as a written guideline by adjusting to the developments that occur. In accordance with the Rector's Regulation of Hasanuddin University regarding the Implementation of Specialist Programs, the curriculum is reviewed every 4 (four) years to be adapted to the needs and developments of science, technology, arts, and culture. Alhamdulillah, thanks to God Almighty, thanks to His grace and guidance, the book of Higher Education Curriculum (KPT) Specialist Medical Education Program (PPDS) as a general reference for the educational process of specialist doctors in 20 (two) study programs at the Faculty of Medicine has finally been completed.

We express our gratitude and appreciation to the Heads of Study Programs and the team for their cooperation and hard work in the preparation of this Higher Education Curriculum book. To the Dean of the Faculty of Medicine, Hasanuddin University, President Director of the Makassar Unhas Hospital, we thank you for your support, and we also thank all those who have helped to complete this KPT book. Hopefully it will be the weight of our amak scales in the future. Amen.

Makassar, November 2020

Specialist Doctor Education Program Manager

Fakultas Kedokteran Unhas,



dr. Uleng Bahrin, Ph.D., Sp.PK(K)

## **Foreword of Head of Undergraduate Program**

Assalamu Alaikum Wr. Wb.

Praise and gratitude we send to Allah the Almighty, thanks to His grace and guidance, we have succeeded in publishing the book Higher Education Curriculum (KPT) Internal Medicine Study Program, Faculty of Medicine, Hasanuddin University.

There is a paradigm shift in the specialist education process from Hospital-Based to University-Based Education, the IPD Study Program has made improvements to the curriculum book so that the competency achievement process is in accordance with the IPD Collegium & Hasanuddin University.

To all those who have helped in the preparation of this Higher Education Curriculum book, especially to the Compilers, PPDS Managers and the Dean of the Faculty of Medicine, Hasanuddin University, we thank you for all the help and direction that has been conveyed to us.

Makassar, 19 November 2019

Head of Postgraduate program

**Dr. dr. Hasyim Kasim, SpPD, K-GH**

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# **CHAPTER I**

## **INTRODUCTION**

### **I.1. History of Study Program**

Internal Medicine Specialist Study Program is one of study program which is under the Department of Internal Medicine, at the beginning named Division of Internal Medicine as one of study program at the Hasanuddin University Faculty of Medicine (FK UNHAS). Internal Medicine Specialist Study Program at FK UNHAS implemented by decree of Dirjen DIKTI No. 54/DJ/Kep/1983 on 4th December 1983. Followed by the re-establishment of Internal Medicine Education based on the Decree of the Dirjen DIKTI No. 154/Dikti/Kep/2007 on 21st September 2007. The decree of Dirjen DIKTI is the official base in which we started the learning process in this study program. Furthermore, on 16 May 2012, this study program succeeded in obtaining an A accreditation in the Lembaga Akreditasi Mandiri Pendidikan Tinggi Kesehatan Indonesia (LAM-PTKes). On May 27th 2017, through the process of accreditation, this Study program managed to obtain the title of accreditation of LAM- PTKes.

The dynamics of an increasingly advanced and complex society have led to significant changes in various fields, including Internal Medicine. The big challenges faced that pushed the Internal medicine study program, especially in matters relating to curriculum improvement, improving the quality of staff and students. In responding to these challenges, the Department of Internal Medicine, especially the Internal Medicine Study Program, seeks to develop a study program that enhances efforts to produce external abilities that have competence and skills in their speciality, both in the research and community service, especially those related to the application of science in internal medicine as applied science that is contextual with maritime values. Currently, the existing divisions and their teaching staff include the infectious diseases division, the hematology oncology division, the nephrology division, the pulmonology division, the cardiology division, the rheumatology division, the gastrohepatology division, the allergy immunology and geriatric division.

## **1.2. Vision, mission, aims, and objectives of the Internal Medicine Study Program**

### **1.2.1. The description of UNHAS vision into the scientific vision of the Internal Medicine Study Program**

Hasanuddin University has a vision as a center of excellence in human development, science, technology, art, and culture with a strategic plan to become an internationally reputable university based on the Indonesian maritime continent. Internal Medicine Study Program has a great potential to support the vision and strategic plan. With a vision to become an excellent study program in Internal Medicine education and research in Indonesia , Internal Medicine Study Program supported by the resources that already exist today is the science potential in generating a internists to be superior , independent and dignified in line with the vision of Hasanuddin University as a center of excellence for human development, science, and technology. As a Internal medicine study centers and science research leading and productive is one of the prestigious indicator of each universities and research institutions worldwide. Internal Medicine Study Program, University of Hasanuddin is expected to be the first step as well as the role of the Hasanuddin University in developing the potential of the nation to contribute in solving problem of Medicine and Health .

### **I.2.2. Study Program Vision and Mission**

#### **1.2.2.1. Vision**

Being a superior center of education, independent, and dignified to produce internist that qualified and able to compete in regional, national or global, supported by professional and responsible human resources

#### **I.2.2.2. Mission**

To achieve the vision above , the Mission of the Internal Medicine Study Program are:

1. Organizing education in Internal Medicine based on evidence based medicine and research .
2. Providing health services in Internal Medicine with a complete quality cultural and culture approach.
3. Improving the quantity and quality of basic research and applicable internal medicine with international standard.
4. Creating a management system for the Internal Medicine study program that is transparent, accountable , responsible , independent, integrated, and fair

### **I.2.3. Aims , Targets , Strategies, Programs and Indicators of Achievement**

To achieve these four missions , the Internal Medicine Study Program describes the Targets Strategies, Programs and Disease Achievement Indicators as

#### **MISSION I**

Organizing education in Internal Medicine based on evidence based medicine and research.

#### **Aims**

1. To produce internal medicine specialists who superior in achieving basic competencies and superior competencies namely the management of HIV/AIDS
2. To produce independent internal medicine specialists where the entire educational process can be carried out in Makassar with complete divisions including psychosomatics.
3. To produce dignified internal medicine specialists, namely internal medicine doctors who are ethical and have strong faith.

#### **Targets**

1. Creating a conducive and quality academic atmosphere.
2. Achieving the use of information and communication technology in the education sector and the management of educational institutions.
3. Realizing evidence-based learning
4. Producing graduates who have basic competencies and superior competencies in mastering science and technology, are cultured and professional so that they are able to compete in the national, regional and global job markets
5. Increasing national and international reputation and recognition in the fields of education, research, and community service
6. Producing graduates who have experience in presenting research results at international scientific meetings.

#### **Strategies**

1. Providing library facilities, comfortable and conducive lecture rooms, as well as internet access facilities that support smooth access to information and technology
2. Conducting periodic scientific meetings in various scientific fields
3. Taking courses that support competence
4. Organizing lectures by local, national and international teachers

5. Organizing readings of international journals, reading references, reading reports of death cases, and case reports on a regular and scheduled basis
6. Creating national papers and publish international journals  
Encouraging staff to be involved in attending consultant, doctoral and professor education.
7. Organizing spiritual guidance, religious lectures and ethics lectures for staff and students.

### **Policies**

1. Providing freedom of access to library facilities, lecture room capacity, and unlimited access to information for students
2. Conducting periodic scientific meetings in various fields in accordance with each division
3. Organizing courses in internal medicine
4. Requiring students to attend lectures
5. Requiring students to read journals, read references, read death case reports, and case reports on a regular and scheduled basis
6. Requiring students to take part in reading national papers or publications in international journals
7. Requiring students to make a final research with the results of the thesis.
8. Providing opportunities and facilitating staff in continuing their education.

### **Programs**

1. Providing library facilities, lecture hall capacity, and unlimited access to information for students
2. Organizing periodic scientific meetings in various fields in accordance with each division
3. Organizing courses in internal medicine
4. Making class schedules
5. Medical journal reading
6. Literature review reading
7. Case reports reading
8. Problem cases reading
9. Death case reading

10. National papers or international journal publications reading
11. Making a thesis as a final report
12. Cost assistance program for staff attending further education

### **Indicators**

1. Number of periodic scientific meetings held
2. Number of courses held
3. Number of lectures held
4. Number of readings of medical journals per month
5. Number of literature review readings (refarat)
6. Number of readings of case reports
7. Number of readings of problematic cases (problem cases)
8. Number of readings of death reports (death cases)
9. Number of national papers or international journal publications
10. Number of theses
11. Number of consultants, doctorates and professors

### **MISSION II**

Providing health services in the field of Internal Medicine with a complete and quality cultural and cultural approach

### **Aims**

1. To realize health services in the field of Internal Medicine with a complete cultural and cultural approach
2. To improve the quality of health services in the field of Internal Medicine
3. To develop medicine based on marine/maritime community diseases
4. To develop medicine based on local wisdom
5. To run education-based services in the field of Internal Medicine based on evidence-based medicine and research

### **Targets**

1. Producing graduates who have competence in mastering science and technology, are cultured and professional so that they are able to compete in the national, regional and global job markets

2. Increasing the number of graduates who are competitive at national and international levels
3. Increasing the quality of health services in the field of Internal Medicine
4. Increasing the role in the field of Diseases in health services

## **Strategies**

1. Providing library facilities, comfortable and conducive lecture rooms, as well as internet access facilities that support smooth access to information and technology
2. Carrying out regular examinations of both knowledge and skills in handling patients, to increase competence so that graduates who have competitiveness are produced
3. Conducting periodic scientific meetings in various scientific fields
4. Taking courses that support competence
5. Organizing lectures by local, national and international teachers
6. Organizing readings of international journals, reading of references, reading of death case reports, and case reports on a regular and scheduled basis
7. Making national papers and publishing international journals
8. Sending PPDS participants to work outside the region
9. Sending PPDS participants to work at the satellite hospital

## **Policies**

1. Adding library facilities, lecture hall capacity, and unlimited access to information for students
2. It is mandatory for students to take the exam
3. Conducting periodic scientific meetings in various disciplines in accordance with each subdivision
4. Coordinating the implementation of courses
5. It is mandatory for students to attend Saturday lectures
6. It is mandatory for students to read journals, read references, read death case reports, and case reports on a regular and scheduled basis
7. It is mandatory for students to take part in reading national papers or publications in international journals
8. It is mandatory for students to take part in assignments outside the region
9. It is mandatory for students to serve in a satellite hospital

## **Programs**

1. Providing library facilities, lecture hall capacity, and unlimited access to information for students
2. Making exam schedule
3. Organizing periodic scientific meetings in various disciplines in accordance with each subdivision
4. Organizing courses
5. Making class schedules
6. Making schedules for reading journals, reading referrals, reading case reports of deaths, and case reports on a regular and scheduled basis
7. Reading of national papers or international journal publications
8. Making assignment letters out of the region
9. Making assignment letters to serve in a satellite hospital

## **Indicators**

1. Availability of library facilities, lecture halls with a capacity according to the number of students, and unlimited access to information for students
2. Percentage of passing in the exam
3. Number of periodic scientific meetings held
4. Number of participants taking the course
5. Number of students attending lectures
6. Number of readings of journals, reading of referents, reading of death case reports, and case reports held
7. Number of national papers or international journal publications
8. Number of students assigned out of the region
9. Number of students assigned to the satellite hospital

## **MISSION III**

Improving the quantity and quality of basic and applicable internal medicine research at an international standard

### **Aim**

To increase national and international reputation and recognition in the fields of knowledge, research, and community service

## **Targets**

1. Increasing international cooperation networks in the field of research
2. Engaging in international multicenter research

## **Strategies**

1. Publishing national papers based on evidence based medicine and research.
2. Exploring cooperation through the Unhas medical faculty with foreign medical faculties

## **Policies**

1. Requiring students to make and present papers at national or international scientific meetings.
2. Facilitating teaching staff in presenting papers at national and international scientific meetings.

## **Programs**

1. Requiring PPDS to bring papers and research on a national or international scale under the guidance of supervisors
2. Motivating staff to bring national or international scale papers and research under supervisor's guidance
3. Training of staff for international journal publication

## **Indicators**

1. Number of resident national and international papers that have been read.
2. Number of published international journals

## **MISSION IV**

Creating a management system for the Internal Medicine study program that is transparent, accountable, responsible, independent, integrated, and fair

## **Aims**

1. To achieve independent and professional organizational capabilities
2. To implement effective and efficient organizational management in financial management
3. To develop equal distribution of duties and responsibilities in the administration of education

## **Targets**

1. Organization with quality and structured management
2. Accountable asset and financial management
3. Quality and professionalism of lecturers and education staff
4. Opportunity to learn and achieve

## **Strategies**

1. Developing the organizational capability to increase commitment in realizing Professionalism
2. Strengthening financial management to ensure organizational accountability Internal Medicine Study Program
3. Strengthening the professionalism of lecturers and education staff to improve the competence of excellent service
4. Awarding achievement to improve quality and professionalism

## **Policies**

1. Developing and implementing organizational operational standards in accordance with applicable laws and are transparent, accountable, independent, and integrated
2. Fulfilling the principles of transparency and accountability in asset and financial management
3. Strengthening commitment and professionalism to realize excellent service
4. Optimizing equal opportunity for achievement

## **Programs**

1. Establishing, socializing, and implementing organizational operational standards and strategic plans
2. Involving administrative staff in training or workshops on strengthening financial management to support the accountability of study programs.
3. Strengthening the professionalism of lecturers and education staff to improve the competence of excellent service
4. Guaranteeing and providing equal opportunities for achievement
5. Regulating the work coordination system according to the minimum service standards (SPM) that have been set.

## **Indicator**

1. The establishment of an independent and professional organization

2. Percentage of optimal and maximum budget absorption.
3. Achievement of professionalism and commitment to improve the competence of excellent service
4. Equal opportunity for achievement
5. The creation of an orderly work coordination system according to the minimum service standards (SPM) that have been set.

## **CHAPTER II. LEARNING METHODS AND CURRICULUM REVISION MECHANISM**

Curriculum alignment of the Internal Medicine Study Program, Faculty of Medicine, Hasanuddin University refers to the Regulation of the Chancellor of the Hasanuddin University No. 2784/UN4.1/KEP/2018 on the Implementation of the Hasanuddin University Masters Program. The stage of the meeting began with the curriculum team, along with the Head of Undergraduate Program, the Head of Department, and all heads of division holding a meeting to prepare the curriculum. The results of this meeting were discussed with PPDS and the Faculty of Medicine as the parent in order to align this curriculum. The structure of this curriculum document refers to the Guidelines for Preparation of the Higher Education Curriculum, Ministry of Research Technology and Higher Education, Directorate General of Learning in 2001.

The process of revision & curriculum development involved internal and external stakeholders of the Internal Medicine Study Program, Faculty of Medicine, Hasanuddin University. The curriculum revision process was initiated by the IPD Collegium's input during an internal visit to make adjustments to the curriculum from hospital-based to university-based. The next process was also an input by the LAM-PTKes institution during the Accreditation process on May 27 2017. Subsequently, a curriculum revision team was formed and a draft revision of the curriculum was submitted to the work meeting of the Internal Medicine Study Program on February 1, 2019. The working meeting was attended by all staff of the Department of Internal Medicine. Internal Medicine Study Program, Dean of the Faculty of Medicine, Director of Wahidin Sudirohusodo Hospital, Director of Unhas Hospital and Head of PAPDI Makassar Branch. On August 31, a PPDS Curriculum Review Workshop was held at TKP PPDS FK Hasanuddin University in order to adjust the curriculum format. The change in the format was agreed upon in the 20 September 2019 meeting regarding the alignment of curriculum formats and the establishment of a curriculum book and RPS drafting team. The results of the teamwork were agreed upon by all Department Heads, Head of Undergraduate Program, and staff at a meeting at the Internal Medicine Study Program RPS 4 October 2019. Curriculum books for the Internal Medicine Study Program were reported to and submitted to the PPDS TKP at the Curriculum Finalization meeting with the PPDS FK TKP Hasanuddin University 12 October 2019.

## CHAPTER III. GRADUATE LEARNING OUTCOMES

### III. 1. Graduate Profile

Graduates of the Internal Medicine Specialist Study Program Faculty of Medicine UNHAS have mastered the knowledge and skills in the following table which are inseparable both as care providers, researchers, educators, and as managers where the graduates work.

Profile	Skills	Knowledge
<b>Care Provider</b>  Description: Person in Charge and Specialist in Internal Medicine in Health Facilities	<ol style="list-style-type: none"><li>1. Supervising all processes in Internal Medicine services on outpatient and inpatient hospitals Analyzing problems in internal medicine patients</li><li>2. Choosing a supporting examination on the problem of internal medicine patients</li><li>3. Providing pharmacological and non-pharmacological therapy</li><li>4. Being able to summarize the interpretation of history taking, physical examination, laboratory tests, and procedures according to the specialization of internal medicine to establish a diagnosis, with reference to evidence-based medicine;</li><li>5. Being able to perform clinical diagnosis and management in the fields of Endocrine Metabolic and Diabetes, Renal</li></ol>	<ol style="list-style-type: none"><li>1. Master basic theories and concepts in Internal Medicine (Tropical Infections, Gastroenterohepatology, Cardiology, Pulmonology, Renal Hypertension, Rheumatology, Allergy Immunology, Geriatrics, Medical Oncology Hematology, Diabetes Metabolic Endocrine and Psychosomatics)</li></ol>

	<p>Hypertension, Pulmonology, Tropical Infections, Rheumatology, Medical Oncology Hematology, Cardiology, Gastroenterohepatology, Geriatrics, Allergy Immunology and Psychosomatics according to the problem, patient needs and authority</p>	
<b>Educator</b>  Description: Educator in Internal Medicine at PT and College/Health Academy	<ol style="list-style-type: none"> <li>1. Applying theories and concepts of Internal Medicine which is an important scientific foundation for the field of Internal Medicine</li> <li>2. Designing, implementing, and guiding the implementation of Internal Medicine research for the development of science</li> <li>3. Applying knowledge of Internal Medicine and carrying out community service</li> <li>4. Being able to educate in the scope of health education</li> </ol>	<ol style="list-style-type: none"> <li>1. Master teaching theory and effective communication</li> </ol>
<b>Researcher</b>  Description: researcher at university research institutes, government research institutes (outside the university) and	<ol style="list-style-type: none"> <li>1. Designing, implementing, and developing research in the field of Internal Medicine</li> <li>2. Producing research outputs that are beneficial for health services in the field of Internal Medicine and the community</li> </ol>	<ol style="list-style-type: none"> <li>1. Master research ethics, scientific methods, and research techniques</li> <li>2. Publication of research results</li> </ol>

private (industry).		
<b>Manager</b> Description: Manager or leader in a health institution, hospital, polyclinic or independent practice	1. Being able to lead agencies in the health sector 2. Being able to carry out complete treatment in the field of internal medicine 3. Being able to cooperate with other specialist areas of expertise	1. Master the technique of referring back patients who require subspecialty treatment 2. Master the managerial concepts of health institutions 3. Master knowledge of medical legislation and related fields and medical professional ethics 4. Master the concept of institutional management in the health sector

### III.2. Graduate learning outcomes (ILO)

Graduate learning outcomes (Capaian Pembelajaran Lulusan or ILO) were prepared to refer to the legal basis for the preparation of learning outcomes (Capaian Pembelajaran or CP) of Presidential Regulation Number 8 of 2012 on the Indonesian National Qualifications Framework (CNI) which is a competency qualification framework that can juxtapose, equalize, and integrate between the fields of education and in the field of job training and work experience in order to provide recognition of work competencies in accordance with the work structure in various sectors. Based on these regulations, the Internal Medicine Study Program was included in the 8th qualification level. In addition to the regulations mentioned above, the determination of ILO also referred to the Regulation of the Minister of Research and Technology No. 44 of 2015 on National Standards for Higher Education. The following is the composition of the ILO of the Internal Medicine Study Program, Faculty of Medicine, Hasanuddin University:

## **Graduate learning outcomes (ILO) of the Internal Medicine Study Program, Faculty of Medicine**

Every graduate of the FK Internal Medicine Study Program. UNHAS Specialist Program 1 (Sp1). Have learning outcomes as follows:
<b>1. ATTITUDE:</b>
1. Students are able to demonstrate an attitude with a culture based on ethical principles and aspects of medical law (Hippocratic oath).
<b>2. KNOWLEDGE MASTERY:</b>
1. Students are able to demonstrate and understand the concept of disease comprehensively regarding etiology, pathogenesis, pathophysiology, clinical symptoms, history taking and physical examination to establish a diagnosis in the field of internal medicine 2. Students are able to apply the concept of patient management based on Clinical Reasoning and Problem Oriented Medical Record (POMR)
<b>3. GENERAL SKILLS :</b>
1. Students are able to apply logical, critical, systematic, and creative thinking through scientific writing, conducting scientific research in the field of internal medicine and publishing in accredited journals. 2. Students will be able to manage, develop and maintain relationships with colleagues and peers within the intra-departmental scope, other departments, wider health institutions and professional communities.
<b>4. SPECIAL SKILL:</b>
1. Students are able to perform, plan, interpret, summarize and plan treatment for all patient problems within the scope of general internal medicine. 2. Students are able to perform anamnesis, physical examination, laboratory examination, and procedures in accordance with the specialization of internal medicine to establish a diagnosis, with reference to evidence-based medicine 3. Students are able to achieve the level of competence set by the Indonesian Medical Council ( Konsil Kedokteran Indonesia or CI) as Internal Medicine Specialist through training on how to enforce diagnosis and clinical

management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Infection and Tropical Disease, Rheumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics.

4. Students are able to manage independently and/or lead teams in solving internal disease problems in Outpatient, Emergency Room, Inpatient and Intensive Care Units through inter, multi, and transdisciplinary approaches to improve curative treatment, reduce morbidity and mortality.
5. Students are not only able to act as specialists in internal medicine but also as researchers, educators, and role models for the entire community where students work.

### **III. 3. Mapping the relationship between ILO and graduate profiles**

To ensure that the ILO formulation that has been prepared is in accordance with the graduate profile, a mapping of the relationship between the ILO formulation and the graduate profile is made as follows:

Graduate Profile		Graduate Learning Outcomes									
		Attitude (A)	Knowledge (K)		Genera l Skills (GS)		Special Skills (SS)				
			1	2	1	2	1	2	3	4	5
Care Provider	Graduates are able to become professional care service providers in the field of internal medicine in health and community service facilities.	√	√	√			√	√	√	√	√
Educators	Graduates are able to become educators and improve the health conditions of patients and the community		√		√						√

	both in the community and society.								
Researcher	Graduates are able to become researchers in the field of internal medicine, both government and non-government health institutions and academic institutions.				✓				✓
Manager	Graduates are able to act as managers and leaders in internal medicine providers to provide patient safety and evaluate internal medicine services.	✓			✓				✓

**Note:** \*depending on the institution/company, which is usually specific in nature, for example engaged in the development of laboratory products such as reagents, antibodies, methods, etc..

### **III. 4. Mapping the relationship between ILO and stakeholder aspirations**

The ILO formulation that has been prepared must be oriented towards educational outcomes so that it must be able to meet the aspirations of all stakeholders related to the Internal Medicine Study Program. In the preparation of the ILO, website-benchmarking has been carried out at reputable institutions in the field of Internal Medicine, both at home and abroad, and refers to the directions agreed upon by the College of Internal Medicine, so that the competence of graduates is standardized with nationally recognized quality. as well as international. The following is a mapping of the relationship between ILO and the aspirations of stakeholders:

LO	Code	Stakeholder Aspirations					
		Government	Alumni	Alumni Users	Professional Organization	Institution (Unhas)	Benchmark
Atitude	A1	√	√	√	√	√	√
Knowledge	K1			√	√		
	K2			√		√	
General Skills	GS1					√	
	GS2				√	√	
Special Skills	SS1			√			
	SS2			√			
	SS3			√			
	SS4	√		√			
	SS5			√		√	

## **CHAPTER IV. CURRICULUM STRUCTURE AND CONTENT**

### **IV.1. Elaboration and mapping of ILO into study materials**

The ILO formulation that has been obtained from the first stage process, is described in the limits and scope of the scientific/skilled field which is a series of minimal study materials that must be mastered by every graduate of the Internal Medicine Study Program.

The study material covers three aspects, they are:

1. Supporting Science and Technology Study Materials
2. Core Scientific Study Materials
3. Study Materials for Study Program Uniqueness

## STUDY MATERIAL

SUPPORTING SCIENCE AND TECHNOLOGY													CORE OF SCIENCE													Study Program Uniqueness
ILO	1	2	3	4	5	6	7	8	9	10	12	13	14	15	16	17	18	19	20	21	22	23	24	25	27	
A1	X																									
K1					X	X		X	X		X	X	X	X	X	X	X		X	X	X	X	X	X	X	
K2							X																			X
GS1								X	X	X	X	X	X				X				X	X	X			
GS2																										X
SS1					X		X		X		X	X	X				X		X			X	X		X	
SS2											X			X												
SS3								X		X	X	X	X	X	X	X	X	X	X	X	X	X				
SS4																							X	X	X	X
SS5																							X	X		X

Note :

## IV.2. Determination of courses

The Internal Medicine Study Program currently has fixed courses at each concentration. With the Hasanuddin University Chancellor's Regulation Number: 2784/UN4.1/KEP/2018 concerning the Implementation of the Hasanuddin University Masters Program, several adjustments and curriculum evaluations were carried out in the Internal Medicine Specialist Program. Evaluation was carried out by examining how far the relationship between each course and the ILO that had been formulated. This study was carried out by compiling a matrix between ILO items and existing courses as follows::

ILO	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	
A1	X																											
K1				X	X	X	X																					
K2								X																				
GS1		X	X									X	X	X	X	X	X	X	X	X	X	X	X			X		
GS2																								X		X		
SS1						X		X				X	X	X	X	X	X	X	X	X	X	X	X	X				
SS2										X		X	X	X	X	X	X	X	X	X	X	X	X	X				
SS3									X		X														X			
SS4									X																X	X	X	X
SS5		X	X																							X	X	X

<b>STAGE 1</b>																		
<b>SEMESTER 1</b>			<b>SEMESTER 2</b>															
Epidemiological Medicolegal Ethics (2 Credit Points)			Emergency (action and handling of emergency cases) (6 Credit Points )															
Biostatistics & Computer Statistics (2 Credit Points)			Basic Medical Skills (non-invasive and invasive measures (6 Credit Points )															
Research Methods (2 credits)			Leading Competencies (HIV/AIDS) (2 Credit Points )															
Molecular Biology (2 Credit Points)																		
Medical Epidemiology (2 Credit Points)																		
Basic diagnostic skills (Anamnesis, Physical Examination, Basic Supporting Examination) (6 Credit Points)																		
Pathogenesis and Pathophysiology (2 Credit Points)																		
Basic Internal Medicine (clinical reasoning and POMR) (4 Credit Points )																		
<b>STAGE 2</b>																		
<b>SEMESTER 3,4,5,6</b>																		
Endocrine and Metabolic 8 weeks (8 Credit Points)	Kidney and Hypertension, 8 weeks (8 Credit Points)	Tropical Infection 8 weeks (8 Credit Points)	Pulmonology & Respiration 12 weeks (10 Credit Points)	Cardiology, 12 weeks (10 Credit Points)	Rheumatology, 8 weeks (8 Credit Points)	Hematology and Medical Oncology, 8 weeks (8 Credit Points)	Geriatrics 8 weeks , (4 Credit Points)	Gastroenterohepatology 12 weeks, (10 Credit Points)	Allergy Immunology 8 weeks , (4 Credit Points)	Psychosomatic (2 Credit Points ) 4 weeks								
<b>STAGE 3</b>																		
<b>SEMESTER 7</b>				<b>SEMESTER 8</b>														
Outpatient Polyclinic -12 weeks (8 Credit Points)				Interdepartmental Medical Consultation -12 weeks (6 Credit Points)														

Independent Work I (network hospital) - 12 weeks (5 Credit Points)

Independent Work II (chief) - 12 weeks (8 Credit Points)

#### **IV.3. Determination of the amount of course credits**

The credit point of a course is the time needed by students to be able to have the abilities that are formulated in a course. The determining element in the estimation of the number of credits is:

1. 1. The level of ability to be achieved
2. 2. The depth and breadth of learning materials that must be mastered
3. 3. The chosen learning method/strategy to achieve the abilities

The credit point calculation with reference to the following provisions:

<b>Understanding 1 credit point in learning</b>				<b>Hour</b>		
<b>a Lecture, Response, Tutorial</b>						
	Face to face	Structured Assignments	Independent Learning			
	50 Minutes/week/semester	60 Minutes/week/semester	60 Minutes/week/semester	2.83		
<b>b Seminars or other similar forms of learning</b>						
	Face to face	Independent Learning				
	100 Minutes/week/semester	70 Minutes/week/semester		2.83		
<b>c Practicum, studio practice, workshop practice, field practice, research, design or development, community service, and/or other equivalent forms of learning</b>						
	170 Minutes/week/semester			2.83		

The learning activities consist of:

- Morning, equivalent to a lecture
- Reading of journals/case reports/references/death cases, equivalent to seminar activities
- Room visits, bedside teaching, guard the room, equalized with practicum activities

#### **IV. 4. Preparation of courses in the curriculum structure**

The preparation of courses into the curriculum took into account the following:

1. The concept of planned learning in an effort to meet the learning outcomes of graduates;
2. The exact location of the courses that are adjusted to the consistent level of ability and integration between courses;
3. The average student learning load in each semester is 13-24 credits.
4. Regulation of the Chancellor of Hasanuddin University Number: 2784/UN4.1/KEP/2018 regarding the implementation of specialist education programs

The preparation of courses in the Internal Medicine Study Program used a combination of parallel approaches. Parallel approach is learning in an integrated manner, both scientific and learning processes, mastery of certain knowledge is not a prerequisite for starting further knowledge.

Semester	Course Structure	Credit Points
VIII	Thesis	6
	Independent Work II (Chief)	8
	Interdepartmental Medical Consultation	6
VII	Independent Work I (Network Hospital)	5
	Outpatient Polyclinic	8
VI	Psychosomatic	2
	Allergy Immunology	4
	Gastroenterohepatology	10
V	Geriatrics	5
	Hematology & Oncology	8
	Rheumatology	8
IV	Pulmonology & Respiration	10
	Cardiology	10
III	Endocrine & Metabolic	8
	Kidney Hypertension	8
	Tropical Infectious	8
II	Leading Competencies (HIV/AIDS)	2
	Basic Medical Skills (Non-Invasive and Invasive Measures)	6
	Emergency (Emergency Action and Case Management)	6

<b>I</b>	Basic Internal Medicine (Clinical Reasoning and POMR)	4
	Pathogenesis and Pathophysiology	2
	Basic Diagnostic Skills (History, Physical Examination and Basic Supporting Examination)	6
	Medical Epidemiology	2
	Molecular Biology	2
	Research methods	2
	Biostatistics & Computer Statistics	2
	Epidemiological Medicolegal Ethics	2
<b>Total Credit Points</b>		<b>150</b>

## CHAPTER V. STRATEGIES AND LEARNING METHODS

### V.1 Learning Outcomes Mapping and Learning Strategies

Learning Outcomes		Learning strategies			Course Subjects
Area	Code	Method	Lecturer Role	Learning Activities	
Knowledge	A1	1, 5	1	1, 2	1
	K1	1	1, 3, 7	1, 2	5, 6, 8, 9, 11, 12, 13, 14, 15, 16, 17, 19, 20, 21, 22, 23, 25, 26
	K2	1	1, 3, 7, 11	1, 2, 3, 4	7, 26
	GS1	1, 5, 9	7, 11	1, 3, 5, 6	8, 21, 23, 26
	GS2	6, 7	8, 11	3, 5, 6	7, 8, 9, 10, 11, 12, 13, 17, 21, 22, 23, 26
General Skills	SS1	1, 5, 11	1, 3, 7, 11	1, 2, 3, 4	11, 14
	SS2	1, 5, 11	1, 3, 7, 11	1, 2, 3, 4	5, 7, 9, 11, 12, 13, 17, 19, 22, 23, 25

	SS3	1, 5, 11	1, 3, 7, 11	1, 2, 3, 4	8,10,15,16,17,18,19,20,21
	SS4	1, 5, 7, 11	1, 7, 11	1, 2, 3, 4	18,22,23,24,25
	SS5	6,7	1, 3, 7, 11	1, 2, 3, 4	22, 23, 25

Note

<b>Method</b>	1 Lecture 2 Small Group Discussion 3 Role-Play & Simulation 4 Discovery Learning (DL)	5 Self-Directed Learning (SDL) 6 Cooperative Learning (CL) 7 Collaborative Learning (CbL) 8 Contextual Instruction (CI)	9 Project Based Learning (PjBL) 10 Problem Based Learning and Inquiry (PBL) 11 Evidence Based Learning (EBL)
<b>Lecturer Roles</b>	1 Deliver material (Lecture) 2 Draft discussion materials and discussion rules 3 Become a moderator and at the same time review at the end of each student discussion session 4 Design situations/activities that are similar to real ones, can be in the form	6 Provide data, or instructions (methods) to explore a knowledge that must be learned by students 7 Check and review student self-study results 8 Design and monitor the learning process and student group learning outcomes 9 Prepare a problem/case or form of assignment to be completed by students in groups	11 Explain theoretical study materials and relate them to real situations in everyday life, or professional, or managerial, or entrepreneurial work 12 Prepare assignments for student studies going into the field 13 Design a systematic task (project) so that students learn knowledge and skills through a structured and complex inquiry process.

	of role playing or various simulation exercises  5 Discuss student performance	10 Design tasks that are open ended	
<b>Learning Activities</b>	1 Lecture  2 Responses and Tutorials	3 Seminar  4 Field Practice	5 Study  6 Community Service

Note of subjects:

Code	No	Course Subject
20C01510102	1	Epidemiological Medicolegal Ethics
20C01510202	2	Biostatistics & Computer Statistics
20C01510302	3	Research methods
20C01510402	4	Molecular Biology
20C01510502	5	Medical Epidemiology
20C01510606	6	Basic Diagnostic Skills (Anamnesis, Physical Examination, Basic Supportive Examination)

20C01510702	7	Pathogenesis and Pathophysiology
20C01510804	8	Basic Internal Medicine (Clinical Reasoning and POMR)
20C01510906	9	Emergency (Emergency action and handling of cases)
20C01511006	10	Basic Medical Skills (Non-invasive and invasive measures)
20C01511102	11	Leading Competencies (HIV/AIDS)
20C01521208	12	Endocrine and Metabolic
20C01521308	13	Kidney Hypertension
20C01521408	14	Tropical Infectious
20C01521510	15	Pulmonology & Respiration
20C01521610	16	Cardiology
20C01531708	17	Rheumatology
20C01531808	18	Hematology & Medical Oncology
20C01531905	19	Geriatrics
20C01532010	20	Gastroenterohepatology

20C01532104	21	Allergy Immunology
20C01532202	22	Psychosomatic
20C01542308	23	Outpatient Polyclinic
20C01542405	24	Independent Work I (Network Hospital)
20C01542506	25	Interdepartmental Medical Consultation
20C01542608	26	Independent Work II (Chief)
20C01542706	27	Thesis

Based on the agreement of the Collegium of Internal Medicine, FK UNHAS, the recommended assessment method in the Internal Medicine Specialist Education program is the MCQ test method, for knowledge assessment and mini-CEX, CBD, DOPS and OSCE.

### **Guidelines for Use of MINI-CEX (Clinical Evaluation Exercise)**

The essence of the MINI-CEX is an assessment of the resident's clinical ability when dealing with patients, and it only takes 15 – 20 minutes to be able to observe the resident's interactions with patients, followed by 5 – 10 minutes of feedback. From various uses, MINI-CEX has been proven to be a valid and reliable tool to measure resident's clinical ability.

#### **Description of Competence in MINI-CEX:**

##### **1. Medical Interviewing Skills**

Facilitate patients/patient's families to be able to describe, ask questions effectively in order to obtain accurate and adequate information, react appropriately to attitudes and other non-verbal signs.

##### **2. Physical Examination Skills**

Follow a logical sequence, be efficient, balance screening and diagnostic steps, notify patients during examinations, be sensitive to patient comfort and be courteous.

##### **3. Humanistic Qualities/Professionalism**

Respect patients, show empathy, compassion, create trust, help patients feel comfortable, can keep secrets, share information.

##### **4. Clinical Judgement**

Selectively choose the appropriate diagnostic supporting examination considering the risks/benefits.

##### **5. Patient Management Skills**

Choose rational medical therapy, choose dietetic therapy according to the diagnosis, be sensitive to the socio-economic situation of the patient.

##### **6. Counseling Skills**

Explain the reasons/basis for examination and therapy to patients or patients' families, obtain approval for medical action if necessary to patients or patients' families (informed consent), provide education about implementation, prevention and other counseling related to the disease.

##### **7. Organization/Efficiency**

Set priorities, adjust to the time available.

##### **8. Overall Clinical Competence**

Demonstrate how to reach clinical decisions, synthesis, care, effectively and efficiently.

##### **9. Team cooperation Skills**

Be able to build good relationships between medical personnel (doctors, nurses, health workers, and patients) and patients' families, besides being able to collaborate in a harmonious team form for optimal service..

## 10. Patient Safety

Show how to implement a system to prevent injury by mistake, as a result of carrying out an action or not taking the action that should be taken. This includes paying attention to similar drug names, looks, and speech. Correct patient identification. Correct communication during patient handover. Ensure the correct action on the correct side of the body. Ensure the accuracy of drug delivery in service transfers and perform hand hygiene for the prevention of nosocomial infections.

### **Note**

If during the mini-CEX there are items above that you did not score (observe), please put a tick (✓) in the "not observed" column below the assessment item (see assessment form)

**MINI-CEX FORM  
FOR CLINICAL COMPETENCY EXAM**

Examiner : \_\_\_\_\_ Date : \_\_\_\_\_  
 Resident : \_\_\_\_\_ Stage : I / II / III E1 E2 E3 E4 (E=Exam)  
 division : \_\_\_\_\_

Patient Problems / diagnosis: \_\_\_\_\_

Room Situation : Outpatient Inpatient ER Other

Patient : \_\_\_\_\_ Age : \_\_\_\_\_ Sex : \_\_\_\_\_ New Follow up

Complexity level: Low Med High

Focus : Data gathering Diagnosis Therapy Counseling

**POINTS SCALE: 1 - 100**

1. Medical Interviewing Skills ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	<input type="checkbox"/> 15%	<input type="checkbox"/>
2. Physical Examination Skills ( <input type="checkbox"/> not observed)	<input type="checkbox"/> X	<input type="checkbox"/> 15%	<input type="checkbox"/>
3. Humanistic Qualities/Professionalism ( <input type="checkbox"/> not observed)	<input type="checkbox"/> X	<input type="checkbox"/> 5%	= <input type="checkbox"/>
4. Clinical Judgement ( <input type="checkbox"/> not observed)	<input type="checkbox"/> X	<input type="checkbox"/> 15%	= <input type="checkbox"/>
5. Patient Management Skills ( <input type="checkbox"/> not observed)	<input type="checkbox"/> X	<input type="checkbox"/> 15%	= <input type="checkbox"/>
6. Counseling Skills ( <input type="checkbox"/> not observed)	<input type="checkbox"/> X	<input type="checkbox"/> 5%	= <input type="checkbox"/>
7. Organization/Efficiency ( <input type="checkbox"/> not observed)	<input type="checkbox"/> X	<input type="checkbox"/> 10%	= <input type="checkbox"/>
Overall Clinical Competence ( <input type="checkbox"/> not observed)	<input type="checkbox"/> X	<input type="checkbox"/> 10%	= <input type="checkbox"/>
8. Team Cooperation ( <input type="checkbox"/> not observed)	<input type="checkbox"/> X	<input type="checkbox"/> 5%	= <input type="checkbox"/>
9. Patient Safety ( <input type="checkbox"/> not observed)	<input type="checkbox"/> X	<input type="checkbox"/> 5%	= <input type="checkbox"/>

Score : Total Points =

100 %

Total Score

## FEEDBACK ON CLINICAL COMPETENCY

Good	Need improvement

## Note

1. Mini-CEX time : Observation : minutes. Give feedback : minutes
2. Examiner satisfaction with mini-CEX
  - a. Very bad
  - b. Bad
  - c. Enough
  - d. Good
  - e. Excellent
3. Resident satisfaction with mini-CEX
  - a. Very bad
  - b. Bad
  - c. Enough
  - d. Good
  - e. Excellent

Examiner's signature

Student's signature

( )

( )

## **Guidelines for Use Case-based Discussion (CbD)**

### **To Assess Resident's Clinical Competence**

CbD is a method to assess a resident's clinical ability in terms of clinical decision making, and the application/use of medical knowledge in managing patients, and it only takes 20 minutes to be able to evaluate the resident's ability and at the same time provide feedback on the case.

#### **Description of Competence in Case Based Discussion:**

##### **1. Medical record keeping**

Whether the medical record made clear, easy to understand, has been signed and dated, according to the problem at hand, and made sequentially and easy to understand so that it can facilitate other clinicians who will use the medical record to provide next appropriate and effective treatment.

##### **2. Clinical assessment**

Be able to demonstrate an understanding of the patient's medical history through the use of further questions and a physical examination that is appropriate to the clinical problem, so that the most probable diagnosis is obtained for the patient.

##### **3. Investigation and referral**

Able to explain the rationalization of supporting examinations and necessary referrals. Be able to explain why the diagnostic test was requested/Performed including the risks and benefits and their relationship to rule out a differential diagnosis.

##### **4. Treatment**

Be able to explain rationally about treatment, including risks and benefits.

##### **5. Follow up and future planning**

Be able to explain the next management plan including monitoring/follow-up.

##### **6. Professionalism**

Be able to perform care as noted, demonstrate respect, compassion, empathy, and build trust. Be able to explain why patients need comfort, respect, medical confidentiality. Be able to show that the medical record is made based on an ethical medical approach, awareness of legality and self-limitation.

##### **7. Overall clinical care**

Be able to demonstrate in making decisions, synthesizing, carrying out treatments, and work effectiveness on patients when the medical record is made.

##### **8. Team Cooperation Skill**

Demonstrate how to reach clinical decisions, synthesis, care, effectively and efficiently

9. Patient Safety

Be able to build good relationships between medical personnel (doctors, nurses, health workers, and patients) and patients' families, besides being able to collaborate in a harmonious team form for optimal service.

**Note :** If in conducting CbD there are items above that you do not value (observe), please put a tic (✓) in the "not observed" column below the assessment item (see assessment form)

**CASE-BASED DISCUSSION FORM**  
**FOR CLINICAL COMPETENCY EXAM**

Examiner : \_\_\_\_\_

Date : \_\_\_\_\_

Resident : \_\_\_\_\_ Stage : I / II / III

Subdivision : \_\_\_\_\_

Room Situation :  Outpatient  Inpatient  ER  Other

Patient Problems / diagnosis: \_\_\_\_\_

Focus :  Making medical records  Clinical assessment  Management  Professionalism

**POINTS SCALE : 1 - 100**

---

1. Medical record keeping ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	X	<input type="checkbox"/> 10%	=	<input type="checkbox"/>
2. Clinical assessment ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	X	<input type="checkbox"/> 15%	=	<input type="checkbox"/>
3. Investigation and referral ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	X	<input type="checkbox"/> 5%	=	<input type="checkbox"/>
4. Treatment ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	X	<input type="checkbox"/> 15%	=	<input type="checkbox"/>
5. Follow up and future planning ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	X	<input type="checkbox"/> 5%	=	<input type="checkbox"/>
6. Professionalism ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	X	<input type="checkbox"/> 15%	=	<input type="checkbox"/>
7. Overall clinical care ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	X	<input type="checkbox"/> 20%	=	<input type="checkbox"/>
8. Team Cooperation ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	X	<input type="checkbox"/> 5%	=	<input type="checkbox"/>
9. Patient Safety ( <input type="checkbox"/> not observed)	<input type="checkbox"/>	X	<input type="checkbox"/> 10%	=	<input type="checkbox"/>

Score : Total Points =

100 %

Total Score =

## FEEDBACK ON CBD PROFICIENCY

## NOTE

1. CbD assessment time : Observation : minutes. Give feedback : minutes
2. Examiner satisfaction with CBD
  - a. Very bad
  - b. Bad
  - c. Enough
  - d. Good
  - e. Excellent
3. Resident satisfaction with CBD
  - a. Very bad
  - b. Bad
  - c. Enough
  - d. Good
  - e. Excellent

Examiner's signature

### Student's Signature

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## **Guidelines for the Use of Direct Observation of Procedural Skills (DOPS)**

### **To Assess the Medical Action Competence of the Resident**

DOPS is an assessment of the resident's clinical ability to perform a medical action on a patient, and it only takes 15-20 minutes to be able to evaluate the resident's ability to carry out medical actions as a whole, and then followed by 5 minutes of feedback. DOPS has been proven to be a valid tool to measure the resident's ability to perform medical treatment.

#### **Description of Competence in DOPS:**

1. Demonstrate understanding of indications, relevant anatomy, technique of procedure  
Be able to describe the purpose, indications, contraindications, side effects, anatomic locations that need to be known, and how to carry out medical procedures in a row and clearly.
2. Obtain informed consent  
Be able to get verbal and/or written approval (if needed) from the patient or the patient's family, who have previously been given a good explanation regarding the medical action to be carried out including indications, procedures to be carried out, pros and cons, side effects that may arise etc.
3. Demonstrate appropriate preparation preprocedure  
Be able to prepare everything that is needed in the medical follow-up to be carried out, including preparation for treatment to overcome the possibility of complications.
4. Appropriate analgesia or safe sedation  
Have knowledge about analgesic drugs to be given and be able to do it safely and according to indications.
5. Technical ability  
Be able to perform these medical actions sequentially, skillfully and properly and correctly.
6. Aseptic technique  
Be able to demonstrate aseptic technique both before, during and after the medical action.

7. Seek help when appropriate

Know your own abilities and limitations and seek help when needed, either in the form of assistance or further treatment if needed.

8. Post procedure management

Be able to do whatever is needed after carrying out the procedure, for example, proper and safe disposal of disposable needles/sharp objects, reading X-rays, ECG, clear instructions for both nurses and patients' families, etc.

9. Communication skills

Be able to provide explanations to patients/patient' families regarding medical actions properly, clearly, respectfully and empathically.

10. Consideration of patient/profesionalism

Be able to perform medical actions by paying attention to respect, compassion, empathy, and building trust by considering the patient's current condition. Be able to carry out medical actions by considering ethical aspects and awareness of legality and limitations.

11. Overall ability to perform procedure

Overall ability regarding knowledge and skills in carrying out these medical acts by considering the points as mentioned above.

**Note**

If in doing DOPS there are items above that you do not value (observe), please put a tick (✓) in the "not observed" column below the assessment item (see assessment form)

## **DIRECT OBSERVATION OF PROCEDURAL SKILL (DOPS) FORM**

Examiner : \_\_\_\_\_ Date : \_\_\_\_\_

Resident : \_\_\_\_\_ Stage : I / II / III

Room Situation :  ER  Outpatient  Inpatient  Other

Subdivision : \_\_\_\_\_

Types of Medical Action : \_\_\_\_\_

Number of similar medical actions that have been observed : ( )0 ( )1 ( )2 ( )3 ( )4 ( )5-9 ( )>9

Number of similar medical actions carried out by the resident : ( )0 ( )1 ( )2 ( )3 ( )4 ( )5-9 ( )>9

### **POINTS SCALE : 1 - 100**

10. Demonstrate understanding of indications,

relevant anatomy, technique of procedure

(  not observed)

x  5% =

11. Obtain informed consent

(  not observed)

x  5% =

12. Demonstrate appropriate preparation preprocedure

(  not observed)

x  5% =

13. Appropriate analgesia or safe sedation

(  not observed)

x  5% =

14. Technical ability

(  not observed)

x  15% =

15. Aseptic technique

(  not observed)

x  5% =

16. Seek help when appropriate

(  not observed)

x  5% =

17. Post procedure management

(  not observed)

x  10% =

18. Communication skills

(  not observed)

x  5% =

19. Consideration of patient/profesionalism

(  not observed)

x  5% =

20. Overall ability to perform procedure

x  20% =

(  not observed)

21. Team Cooperation

(  not observed)

$$\boxed{\quad} \times \boxed{5\%} = \boxed{\quad}$$

22. Patient Safety

(  not observed)

$$\boxed{\quad} \times \boxed{5\%} = \boxed{\quad}$$

Score : Total Points =

100 %

Total Score

$$\boxed{\quad}$$

## FEEDBACK ON MEDICAL ACTION SKILLS

1. **What is the primary purpose of the proposed legislation?**

---

## NOTE

1. DOPS assessment time : Observation : minutes. Give feedback : minutes
2. Examiner satisfaction with DOPS:
  - a. Kurang sekali
  - b. Kurang
  - c. Cukup
  - d. Baik
  - e. Baik sekali
3. Resident satisfaction with DOPS :
  - a. Kurang sekali
  - b. Kurang
  - c. Cukup
  - d. Baik
  - e. Baik sekali
4. Have you received training using these evaluation tools:

Joint training  face to face

face to face

WEB/CD etc

## Reading guidelines

Examiner's Signature

**Student's Signature**

(

)

(

)

**DIRECT OBSERVATION OF PROCEDURAL SKILL (DOPS) FORM**

Resident : \_\_\_\_\_

Stage : I / II / III

NO	TYPE OF ACTION	E	1	2	3	4	5	6	7	8	9	10	T
1.	Infusion installation	Date											
		SR											
		KS											
2.	Catheter insertion	Date											
		SR											
		KS											
3.	Suprapubic puncture	Date											
		SR											
		KS											
4.	NGT installation	Date											
		SR											
		KS											
5.	ECG installation	Date											
		SR											
		KS											
6.	Drug provocation test	Date											
		SR											
		KS											
7.	Hemodialysis	Date											
		SR											
		KS											

8.	CAPD	Date										
		SR										
		KS										
9.	Kidney Biopsy	Date										
		SR										
		KS										
10.	Kidney Ultrasound	Date										
		SR										
		KS										
11.	UGIE/LGIE Endoscope	Date										
		SR										
		KS										
12	Liver Biopsy	Date										
		SR										
		KS										
13	Liver Asbestos Aspiration via Ultrasound	Date										
		SR										
		KS										
14	Ascitic Fluid Aspiration	Date										
		SR										
		KS										
15	Abdominal ultrasound	Date										
		SR										
		KS										
		Date										

16	BMP	SR										
		KS										
17	Gland Biopsy	Date										
		SR										
		KS										
18	Phlebotomy	Date										
		SR										
		KS										
19	Peripheral Blood Smear Test	Date										
		SR										
		KS										
20	Chemotherapy	Date										
		SR										
		KS										
21	DDR	Date										
		SR										
		KS										
22	Joint Fluid Aspiration	Date										
		SR										
		KS										
23	Intra-articular injection	Date										
		SR										
		KS										
24	Pleura Puncture	Date										
		SR										

		KS										
25	Pleurodesis	Date										
		SR										
		KS										
26	WSD	Date										
		SR										
		KS										
27	Bronchoscopy	Date										
		SR										
		KS										
28	Transthoracic Biopsy	Date										
		SR										
		KS										
29	FNA KBG	Date										
		SR										
		KS										
30	Spirometry/Peak Flow Meter	Date										
		SR										
		KS										
31	Nebulizer	Date										
		SR										
		KS										
32	Thyroid FNA	Date										
		SR										
		KS										

33	Thyroid Ultrasound	Date										
		SR										
		KS										
34	Thyroid Cyst Aspiration	Date										
		SR										
		KS										
35	Foot Screening	Date										
		SR										
		KS										
36	Insulin Injection	Date										
		SR										
		KS										
37	Echocardiography	Date										
		SR										
		KS										
38	ECG	Date										
		SR										
		KS										
39	Cath Lab	Date										
		SR										
		KS										
40	Heart Exercise Test	Date										
		SR										
		KS										
		Date										

41	Cardiovascular Doppler Ultrasound	SR										
		KS										
42	CPR	Date										
		SR										
		KS										
43	Defibrillation	Date										
		SR										
		KS										
44	CVP installation	Date										
		SR										
		KS										
45	ETT installation	Date										
		SR										
		KS										

Note :

Date : Date conducted

SR : Situation of the Room (ER, Outpatient Poly (OP), Inpatient Room (IR))

KS : Initials of Consultant Supervisor

**RESEARCH PROPOSAL RATING FORM**  
**FOR INTERNAL MEDICINE DOCTOR SPECIALIST**

Student name : **Dr.....**

SIN : C101.....

Course programs : Internal Medicine Specialist

No	Description	Score
1	Title Suitability with Research Problem	
2	Background and Problem Formulation	
3	Literature review	
4	Framework	
5	Research Objectives and or Hypotheses	
6	Research methods	
7	Writing Format	
8	Language	
<b>T O T A L</b>		

*The scores given range from 0 – 100*

Total = ..... \_\_\_\_\_

The Category System used in the Assessment: 8

Score : 85 - 100 = A

80 - < 85 = A Minus

**Examiner**

75 - <80 = B Plus

70 - <75 = B

65 - <70 = B Minus

55 - < 65 = C

00 - < 55 = E

Note :

Please, after filling out this assessment form,

submit it directly to the Coordinator  
as the Chair of the Committee

.....

## **RESEARCH PROPOSAL READING ASSESSMENT FORM FOR INTERNAL MEDICINE DOCTOR SPECIALIST**

Student name : Dr.....

SIN : C101.....

Course programs : Internal Medicine Specialist

No	Description	Score
1	Title Suitability with Research Problem	
2	Background and Problem Formulation	
3	Literature review	
4	Framework	
5	Research Objectives and or Hypotheses	
6	Research methods	
7	Writing Format	
8	Language	
T O T A L		

*The scores given range from 0 – 100*

Total = ..... \_\_\_\_\_

The Category System used in the Assessment: 8

Score : 85 - 100 = A

80 - < 85 = A Minus

**Examiner**

75 - < 80 = B Plus

70 - < 75 = B

65 - < 70 = B Minus

55 - < 65 = C

\_\_\_\_\_

00 - < 55 = E

Note :

Please, after filling out this assessment form,  
submit it directly to the Coordinator  
as the Chair of the Committee

.....

**EXAMINER PROPOSAL FORM FOR RESEARCH PROPOSAL OF  
INTERNAL MEDICINE SPECIALIST**

Student name : Dr.....

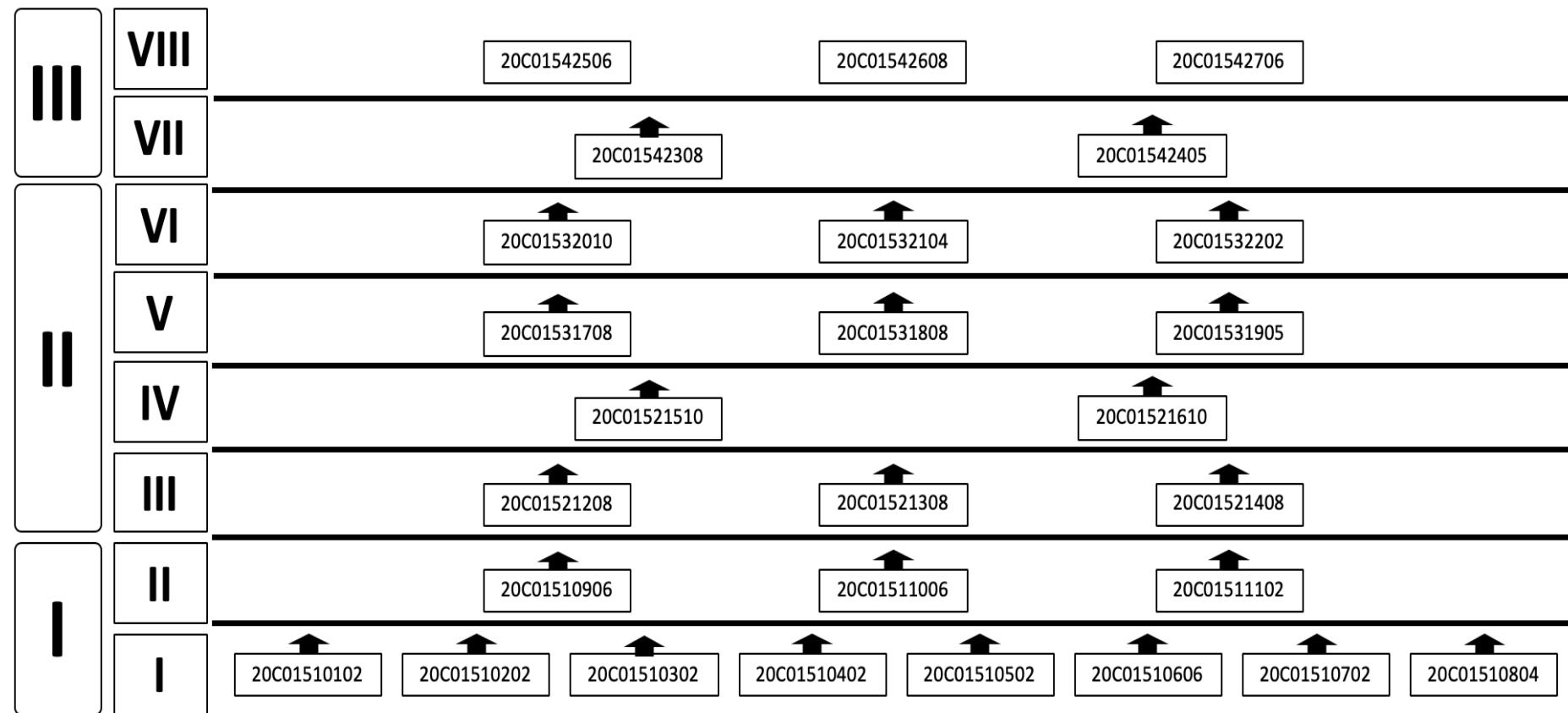
SIN : C101.....

Course programs : Internal Medicine Specialist

### Suggestions from Examiner:

## V.2 Roadmap of Course Learning Outcomes

### Semester Stage



## CHAPTER VI. STRATEGY AND LEARNING ASSESSMENT METHODS

### VI.1 Mapping of Learning Outcomes and Learning Assessment Strategies

Learning Outcomes		Assessment Strategies			Course Subject
Area	Code	Affective	Cognitive	Psychomotor	
Attitude	A1	1,3	2,3,4,5	1,3,4,5	20C01510102
Knowledge	K1	1,3	2,3,4,5	1,3,4,5	20C01510402 20C01510502 20C01510606 20C01510702
	K2	1,3	2,3,4,5	1,3,4,5	20C01510804
General Skills	GS1	1,3	2,3,4,5	1,3,4,5	20C01510202 20C01510302 20C01521208 20C01521308 20C01521308 20C01521510 20C01521610 20C01531708 20C01531808 20C01531905

					20C01532010 20C01532104 20C01532202 20C01542706  20C01542308 20C01542308 20C01542506
	GS2	1,3	2,3,4,5	1,3,4,5	
Special Skills	SS1	1,3	2,3,4,5	1,3,4,5	20C01510606 20C01510804 20C01542308  20C01511006 20C01521208 20C01521308 20C01521308 20C01521510 20C01521610 20C01531708 20C01531808 20C01531905 20C01532010 20C01532104 20C01532202 20C01542308
	SS2	1,3	2,3,4,5	1,3,4,5	20C01510906 20C01511102 20C01521208 20C01521308 20C01521308 20C01521510 20C01521610 20C01531708
	SS3	1,3	2,3,4,5	1,3,4,5	20C01510906 20C01511102 20C01521208 20C01521308 20C01521308 20C01521510 20C01521610 20C01531708

					20C01531808 20C01531905 20C01532010 20C01532104 20C01532202 20C01542308
SS4		1,3	2,3,4,5	1,3,4,5	20C01510906 20C01542308 20C01542308 20C01542506 20C01542608
SS5		1,3	2,3,4,5	1,3,4,5	20C01510202 20C01510302 20C01542608 20C01542706

Note:

1. Tutorial/Face to Face
2. Written Exam
3. Participation (Case Discussion)
4. Performance (Presentation, Field Practice)
5. Seminar Results/Reports (Papers, Journals, Portfolios, Thesis)

## I.2 Example of a course rubric

Assessment criteria	Scoring Dimension	Scoring Indicator
Tutorial/Face to Face (30%)	<p><b><u>General/Non-Test Assessment</u></b></p> <ul style="list-style-type: none"> <li>• Presence</li> <li>• Activity</li> <li>• Courtesy</li> <li>• Tidiness</li> </ul> <p><b><u>Special Assessment/Test</u></b></p> <ul style="list-style-type: none"> <li>• Quiz</li> <li>• Individual Task</li> <li>• Exam</li> </ul>	<p>1. Arrive on time</p> <p>2. Active in the learning process</p> <p>3. Show politeness</p> <p>4. Display neatness</p> <p>Adjusting the competencies to be achieved in each subject</p>
Case Study Discussion (15%)	<ul style="list-style-type: none"> <li>• Case worksheets</li> <li>• Activity</li> <li>• Group cooperation</li> <li>• Ability to convey ideas</li> </ul>	<p>1. Completion of case worksheets</p> <p>2. Show positive activity in the discussion</p> <p>3. Ability to work together in groups</p> <p>4. The ability to convey ideas or ideas in solving cases</p> <p>5. Have ethics in discussions</p>

	<ul style="list-style-type: none"> <li>• Discussion etiquette (politeness, forum etiquette, effective communication)</li> </ul>	
Field Practice (30%)	<p><b><u>General Assessment</u></b></p> <ul style="list-style-type: none"> <li>• Log Book in the field</li> </ul> <p><b><u>Special Assessment</u></b></p> <ul style="list-style-type: none"> <li>• Field presence</li> <li>• Work result</li> <li>• Cooperation</li> <li>• Attitudes and Behavior in the field</li> </ul>	<ol style="list-style-type: none"> <li>1. Complete the instrument log book as attached</li> <li>2. Fulfillment of minimum attendance standards in the field</li> <li>3. Completion of work</li> <li>4. Show a cooperative attitude</li> <li>5. Demonstrate positive attitude and behavior while in the field</li> </ol>
Field Results Seminar (25%)	<ul style="list-style-type: none"> <li>• Power point</li> <li>• Presentation Skills</li> <li>• Cooperation</li> <li>• Activity</li> <li>• Field result report</li> </ul>	<ol style="list-style-type: none"> <li>1. Quality of power point slides</li> <li>2. Ability to present field results (explain and respond to questions)</li> <li>3. Show a cooperative attitude</li> <li>4. Demonstrate a positive active attitude</li> <li>5. Report quality</li> </ol>

## CHAPTER VII. STUDY PROGRAM SPECIFICATIONS

### Study Program Specifications

The Internal Medicine Study Program at FK Unhas is one of the first study programs in eastern Indonesia. The characteristics of the Internal Medicine Study Program at FK Unhas consist of Basic Internal Medicine in semesters 1 and 2, as well as 11 stages 2 divisions (semesters 3,4,5,6), then in semester 7 independent stations and semester 8 chiefs and consuls between departments and theses . The specifications for the Internal Medicine Study Program of the Unhas FK are described in the table below:

Study Program	Internal Medicine Study Program
Institution	Hasanuddin University
Faculty	Medical School
Address	Jl. Perintis Kemerdekaan Km. 11 Kampus Tamalanrea Makassar 90245
Graduate degree	SpPD
Date and No. Decree of Establishment	December 4, 1982 and 054/DJ/KEP/1982
Accreditation Status	A
Date and No. Accreditation Decree	May 28, 2017 and 0257/LAM-PTKes/Akr/Spe/V/2017
Valid until	May 22, 2022
Qualification level	Level 8
Degree	SpPD
Credit Points	150 Credit Points

Number of credits per semester	14 - 28 Credit Points
Study duration	8 semesters
Language of instruction	Indonesian and English
Graduate profile	Care Provider
	Educator
	Researcher
	Manager

## VII Closing

The preparation of the Curriculum for the Internal Medicine Study Program of the FK. Unhas was referred to the Indonesian National Qualifications Framework (CNI) which was in line with the competence of specialist graduates based on Perkonsil No. 12 of 2013, as well as the Competency Standards of Internal Medicine Specialists from the Collegium of Internal Medicine in 2014. With this curriculum, the Internal Medicine Study Program hopes to produce reliable specialists who are able to respond to the demands of the emergence of internal medicine problems in society and the changing world of work that is increasingly competitive.

	Name of college	: Hasanuddin University	Document Code
	Name of Faculty	: Medicine	
	Department Name	: The Science of Internal Medicine	
	Prodi Name	: The Science of Internal Medicine	

SEMESTER LEARNING PLAN								
COURSES (MK)	CODE	Course	WEIGH T (credit)	SEMESTER	Tgl Drafting			
Basic Diagnostic Skills	20C01510606	The Science of Internal Medicine	6	1	5-10-2019			
AUTHORIZATION	RPS Developer		Coordinator RMK		Chairman of PRODI			
	1. Dr.dr.Harun Iskandar, Sp.P (K), Sp.PD, KP 2. Dr.dr. Sahyudin Saleh, Sp.PD,KHOM 3. Dr. Nasrum Machmud, Sp.PD		Prof. Dr. dr. Haerani Rasyid, Sp.PD, KGH		Dr.dr. Hashim Kasim, Sp.PD,KGH			
Learning Achievement (CP)	ILO-PRODI charged to MK							
	Kode ILO P1	Students are able to demonstrate and understand the concept of disease comprehensively regarding etiology, pathogenesis, pathophysiology, clinical symptoms, anamnesis and physical examination to establish diagnosis in the field of internal medicine.						
	C1	Students are able to perform, make plans, interpret, summarize and plan treatment for all patient problems within the scope of disease science in general.						
	Achievement of Course Learning (CLO)							
	CLO1	Able to perform anamnesis techniques, physical examination and choose the right supporting examination and interpret the results of supporting examination correctly (P1)						
CLO2		Able to determine Disease Diagnosis Based on Anamnesis, Physical Examination and Basic Diagnostic Examination (C1)						
Sub-CLO								

	Sub-CLO 1 Sub-CLO 2 Sub-CLO 3 Sub-CLO 4 Sub-CLO 5 Sub-CLO 6	Able to perform anamnesis techniques systematically and correctly Able to perform physical examination techniques correctly Able to choose a diagnosis support examination (Laboratory and Radiology) Able to interpret the results of supporting examinations correctly Able to summarize the interpretation of anamnesis, fisk examination, laboratory tests to establish the diagnosis of the disease Able to establish the diagnosis of the disease appropriately
<b>DeskripsiSingkat MK</b>	<b>This course learns about Basic Diagnostic Skills. This course covers anamnesis skills, physical examination, supporting examination and being able to interpret anamnesis results, physical examination, supporting examination to diagnose a disease.</b>	
<b>Study Materials / Learning Materials</b>	<ol style="list-style-type: none"> <li>1. Anamnesis technique skills</li> <li>2. Skills to identify the history of the present disease, the history of the disease first, the history of the family disease, and the psychosocial history</li> <li>3. Physical examination skills</li> <li>4. Skills determine basic supporting examination</li> <li>5. Skills to synthesize problems in patients</li> <li>6. Basic supporting examination interpretation skills</li> <li>7. Skills determine the Basic Diagnostics of Disease based on anamnesis, physical examination, and supporting examination</li> </ol>	
<b>Book</b>	<b>Main:</b> <ol style="list-style-type: none"> <li>1. Sudoyo, Aru W. et al. (2015). Chapter 3 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</li> <li>2. Systematic Guidebook for The Diagnosis of Physical Anamnesis &amp; Comprehensive Physical Examination</li> </ol> <b>Supporters:</b> <p>-</p>	
<b>Master Lecturer</b>	<ol style="list-style-type: none"> <li>1. Dr. dr. Hashim Kasim, SpPD, K-GH</li> <li>2. Dr. dr. Harun Iskandar, SpP(K), SpPD, K-P</li> <li>3. Dr. Pendrik Tandean, SPPD, SME</li> <li>4. dr. Endy Adnan, SpPD, K-R, PhD</li> </ol>	
<b>Subject syarat</b>	--	

Week1	Sub-CLO (Final ability of each stage of learning)	Valuation		Form of learning, LearningMethods, Student assignments, [Estimated Time]	Learning Materials [Library]	Assessment Weight (%)
		Indicator	Criteria & Shape			
		(1)	(2)	(3)	(4)	(7)
1-12	Able to communicate effectively with patients	Mastering the principle of communication	<b>Criterion:</b> - Accuracy and mastery <b>Non-test form:</b> - Bedsite teaching <b>Form of test:</b> - Mini CEX-CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (Death case)</b> 3x3 hours/week  <b>Practicum (guard)</b> 1x6 hours/week	- Topic: Physical Diagnostic Sciences, Supporting Examination in the Field of Internal Disease Science - Teaching Materials in Disease Science in FSI	10
1-12	Able to perform patient anamnesis systematically	Mastering anamnesis techniques regarding the main complaints, the history of the disease now, the history of the disease first, the history of family disease and psychosocial history	<b>Criterion:</b> - Accuracy and mastery <b>Non-test form:</b> - Bedsite teaching <b>Form of test:</b> - Mini CEX-CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (Death case)</b> 3x3 hours/week  <b>Practicum (guard)</b> 1x6 hours/week	- Topic: Physical Diagnostic Sciences, Supporting Examination in the Field of Internal Disease Science - Teaching Materials of Disease Science In FSI  - Topic: Anamnesis, Physical Examination - Systematic Guidebook for The Diagnosis of Physical Anamnesis & Comprehensive Physical Examination	20

1-12	Able to perform a comprehensive physical examination	<b>Mastering physical examination techniques in assessing patient awareness, Examination of vital signs Physical examination of the neck Thoracic Examination Heart examination Abdominal examination Extremity checks</b>	<b>Criterion:</b> - Accuracy and mastery <b>Non-test form:</b> - Bedsite teaching <b>Form of test:</b> - Mini CEX-CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (Death case)</b> 3x3 hours/week  <b>Practicum (guard)</b> 1x6 hours/week	- Topic: Anamnesis, Physical Examination - Systematic Guidebook for The Diagnosis of Physical Anamnesis & Comprehensive Physical Examination	20
1-12	Able to perform basic diagnostic examination interpretation	<b>Able to interpret the results of peripheral blood tests and interpretation of the results of blood chemistry examination interpretation of EKG results</b>	<b>Criterion:</b> - Accuracy and mastery <b>Non-test form:</b> - Bedsite teaching <b>Form of test:</b> - Mini CEX-CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (Death case)</b> 3x3 hours/week  <b>Practicum (guard)</b> 1x6 hours/week	- Topic: Physical Diagnostic Sciences, Supporting Examination in the Field of Internal Disease Science - Teaching Materials in Disease Science in FSI	10

		Interpretation of Blood Gas Analysis				
1-12	Able to determine Disease Diagnosis Based on Anamnesis, Physical Examination and Basic Diagnostic Examination	<b>Knowing and being able to explain the diagnosis of the disease based on anamnesis results, physical examination and basic diagnostic examination</b>	<b>Criterion:</b> - Accuracy and mastery <b>Non-test form:</b> - Bedsite teaching <b>Form of test:</b> - Mini CEX-CBD - Death case 1 - Journal/report	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (Death case)</b> 3x3 hours/week  <b>Practicum (guard)</b> 1x6 hours/week	- Topic: Physical Diagnostic Sciences, Supporting Examination in the Field of Internal Disease Science - Teaching Materials in Disease Science in FSI  - Topic: Anamnesis, Physical Examination - Systematic Guidebook for The Diagnosis of Physical Anamnesis & Comprehensive Physical Examination	<b>30</b>
16	<b>End of Semester Evaluation / End of Semester Exam</b>					
17	<b>Evaluation per 3 months</b> <b>Stage I test</b>					
<b>Final Value:</b>  85 - 100= A 80 - < 85= A Minus 75 - < 80= B Plus 70 - < 75= B 65 - <70= B Minus 55 - < 65= C 00 - < 55= E						<b>100%</b>

**Note:**

1. **Prodi Graduate Learning Achievement (ILO-PRODI)** is an ability possessed by every PRODI graduate which is an internalization of attitude, mastery of knowledge and skills in accordance with the level of study program obtained through the learning process.
2. **ILO charged to the course** are some of the learning achievements of graduate study programs (ILO-PRODI) that are used for the formation / development of a course consisting of aspects of attitude, general conclusion, special skills and knowledge.
3. **CP Courses (CLO)** is the ability that is spelled out specifically from the ILO charged to the course, and is specific to the study material or learning materials of the course.
4. **Sub-CP Courses (Sub-CLO)** are the specific ability of CLO that can be measured or observed and is the final ability planned at each stage of learning, and is specific to the learning material of the course.
5. **Indicators of ability assessment** in student learning processes and outcomes are specific and measurable statements that identify the ability or performance of student learning outcomes accompanied by evidence.
6. **Criteria Assessment** is a benchmark that is used as a measure or benchmark of learning proficiency in assessment based on established indicators. Assessment criteria is a guideline for assessors so that assessments are consistent and unbiased. Criteria can be either quantitative or qualitative.
7. **Form of assessment:** test and non-test.
8. **Forms of learning:** Lectures, Responsi, Tutorials, Seminars or equivalent, Practicums, Studio Practices, Workshop Practices, Field Practices, Research, Community Service and/or other equivalent forms of learning.
9. **Learning Methods:** Small Group Discussion, Role-Play & Simulation, Discovery Learning, Self-Directed Learning, Cooperative Learning, Collaborative Learning, Contextual Learning, Project Based Learning, and other equivalent methods.
10. **Learning Materials** are details or descriptions of study materials that can be presented in the form of several subjects and sub-subjects.
11. **The weight of the assessment** is the percentage of assessment of each achievement of sub-CLO which is propositional in magnitude with the difficulty level of achievement of sub-CLO tsb., and the total is 100%.
12. **TM**=Face-to-Face, **PT**=Structured assignment, **BM**=Self-study.

	Name of college	: Hasanuddin University	Document Code
Name of Faculty	: Medicine		
Department Name	: The Science of Internal Medicine		
Prodi Name	: The Science of Internal Medicine		

SEMESTER LEARNING PLAN							
COURSES (MK)	CODE	Course	WEIGHT (credit)	SEMESTER	Tgl Drafting		
PATHOPHYSIOLOGY AND PATHOGENESIS	20C01510702	The Science of Internal Medicine	2 credits	1	10 October 2019		
AUTHORIZATION		RPS Developer	Coordinator RMK	Chairman of PRODI			
		1. Dr. dr. Tutik Harjanti, Sp.PD, KHOM 2. dr. Dimas Bayu, Sp.PD, KHOM 3. dr. Nasrum Machmud, Sp.PD	Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, K-GH, Sp.GK	Dr. dr. Hashim Kasim, Sp.PD, K-GH			
Learning Achievement (CP)	<b>ILO-PRODI charged to MK</b>						
	Kode ILO	P1  Students are able to demonstrate and understand the concept of disease comprehensively regarding etiology, pathogenesis, pathophysiology, clinical symptoms, anamnesis and physical examination to establish diagnosis in the field of internal medicine.					
	<b>Achievement of Course Learning (CLO)</b>						
	CLO1	Able to master basic medical science and be associated with the basic concepts of disease about pathophysiology and pathogenesis (P1)					
	<b>Sub-CLO</b>						
	Sub-CLO 1	Know the basic medical science associated with pathophysiology and disease pathogenesis					
	Sub-CLO 2	Knowing concepts of pathophysiology and pathogenesis of febris, dehydration, edema and ascites, hard tape, hematemesis melena, hemoptysis, pulmonary dams, oligouria and anuria, shock, impaired consciousness, acid-base balance, bleeding and clotting, heart rhythm disorders, congestive heart failure, as well as intoxication of drugs and food.					
Short Description of MK	In this course students learn about basic medical science that is associated with pathophysiology and the pathogenesis of disease. Students learn about the concepts of pathophysiology and the pathogenesis of disease conditions.						

Study Materials / Learning Materials	Pathophysiology and pathogenesis: 1. Febrile 2. Dehydration 3. Edema and ascites 4. Jaundice 5. Hematemesis dan Melena 6. Hemoptysis 7. Lung Dam 8. Oligouri dan anuria 9. Syok 10. Impaired Consciousness 11. Impaired balance of electrolytes and acid bases 12. Bleeding and clotting disorders 13. Heart rhythm disorders 14. Congestive heart failure 15. Intoxication of drugs and food					
Book	<p><b>Main:</b></p> <p>1. Sudoyo, Aru W. et al. (2015). <i>Book Teaching The Science of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p> <p><b>Supporter</b></p> <p>1. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education. 2. Guyton AC, Hall JE. Guyton and Hall teach him the physiology of medicine. Elsevier, Singapore. 3. Barret KE, Barman SM, et al. (2012). <i>Ganong's Review of Medical Physiology 24th Edition's Review of Medical Physiology</i>.</p>					
Master Lecturer	1. Prof. Dr. dr. Haerani Rasyid, M.Kes, SpPD, K-GH, SpGK 2. Dr. dr. Andi Makbul Aman, SpPD, K-EMD 3. Dr. dr. Tutik Harjanti, SpPD, K-HOM 4. dr. Rahmawati Minhajat, PhD, SpPD, K-HOM					
Subject terms	-					
Week 1	Sub-CLO (Final ability of each stage of learning)	Valuation		Form of learning, Learning methods, Student assignments, [Estimated Time]	Learning Materials [Library ]	Assessment Weight (%)
(1)	(2)	Indicator	Criteria & Shape	(5)	(6)	(7)
1	Know the basic medical science associated with	Know the basic medical	Criterion: Accuracy and mastery;	Lecture 1x50 minutes/week	Anatomi, physiology, molecular biology, immunology related	10

	pathophysiology and disease pathogenesis	science associated with pathophysiology and disease pathogenesis	<b>Non-test form:</b> Structured assignments  <b>Form of test:</b> CBT	<b>Seminar (morning report)</b> 3x 30 minutes/week	pathophysiology and pathogenesis. <a href="#">[Buku Ajar Ilmu Penyakit dalam, Harrison's Principles of Internal Medicine, Guyton and Hall Textbook of Medical Physiology, Lange Pathophysiology of Disease]</a>	
1-12	Able to explain calm concepts of pathophysiology and pathogenesis	Complete explain the pathophysiological and pathogenic runthesis of febris, dehydration, edema and ascites, ikterus, hematemesis and melena, hemoptysis, pulmonary dams, oligouria and anuria, shock, impaired	<b>Criterion:</b> 3 = explains in runut patophysiology and pathogenesis 2 = explains pathophysiology and pathogenesis is not asimportant asarunut 1 = unable to explain the pathophysiology and pathogenesis of the disease  <b>Non-test form:</b> Presentation of pathophysiology and pathogenesis of disease  <b>Form of test:</b> CBT	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (morning report)</b> 3x 30 minutes/week	<b>Learning materials:</b> patofypig and febris pathogenesis, dehydration, edema and ascites, perchterus, hematemesis and melena, hemoptysis, pulmonary dam, oligouria and anuria, shock, impaired consciousness, impaired electrolyte balance and alkaline acids, bleeding and clotting disorders, heart rhythm disorders, congestive heart failure, and drug and food intoxication <a href="#">[Buku Ajar Ilmu Penyakit dalam, Harrison's Principles of Internal Medicine, Guyton and Hall Textbook of Medical Physiology, Lange Pathophysiology of Disease]</a>	90

		consciousness, impaired electrolyte balance and alkaline acids, bleeding and clotting disorders, heart rhythm disorders, congestive heart failure, and intoxication of drugs and food.			
<b>12</b>	<b>End of Semester Evaluation</b>				
<b>Final Value:</b>					<b>100%</b>
<b>85 - 100= A</b>					
<b>80 - &lt; 85= A Minus</b>					
<b>75 - &lt; 80= B Plus</b>					
<b>70 - &lt; 75= B</b>					
<b>65 - &lt;70= B Minus</b>					
<b>55 - &lt; 65= C</b>					
<b>00 - &lt; 55= E</b>					

**Note:**

1. **Prodi Graduate Learning Achievement (ILO-PRODI)** is an ability possessed by every PRODI graduate which is an internalization of attitude, mastery of knowledge and skills in accordance with the level of study program obtained through the learning process.
2. **ILO charged to the course** are some of the learning achievements of graduate study programs (ILO-PRODI) that are used for the formation / development of a course consisting of aspects of attitude, general conclusion, special skills and knowledge.
3. **CP Courses (CLO)** is the ability that is spelled out specifically from the ILO charged to the course, and is specific to the study material or learning materials of the course.
4. **Sub-CP Courses (Sub-CLO)** are the specific ability of CLO that can be measured or observed and is the final ability planned at each stage of learning, and is specific to the learning material of the course.
5. **Indicators of ability assessment** in student learning processes and outcomes are specific and measurable statements that identify the ability or performance of student learning outcomes accompanied by evidence.
6. **Criteria Assessment** is a benchmark that is used as a measure or benchmark of learning proficiency in assessment based on established indicators. Assessment criteria is a guideline for assessors so that assessments are consistent and unbiased. Criteria can be either quantitative or qualitative.
7. **Form of assessment:** test and non-test.
8. **Forms of learning:** Lectures, Responsi, Tutorials, Seminars or equivalent, Practicums, Studio Practices, Workshop Practices, Field Practices, Research, Community Service and/or other equivalent forms of learning.
9. **Learning Methods:** Small Group Discussion, Role-Play & Simulation, Discovery Learning, Self-Directed Learning, Cooperative Learning, Collaborative Learning, Contextual Learning, Project Based Learning, and other equivalent methods.
10. **Learning Materials** are details or descriptions of study materials that can be presented in the form of several subjects and sub-subjects.
11. **The weight of assessment** is the percentage of assessment of each achievement of sub-CLO which is proportional in magnitude with the difficulty level of achievement of sub-CLO tsb., and a total of 100%.
12. **TM**=Face-to-Face, **PT**=Structured assignment, **BM**=Self-study.

	Name of college	: Hasanuddin University	Document Code
	Name of Faculty	: Medicine	
	Department Name	: The Science of Internal Medicine	
	Prodi Name	: The Science of Internal Medicine	

SEMESTER LEARNING PLAN							
COURSES (MK)		CODE	Course	WEIGHT (credit)	SEMESTER		
Diseases in the Base		20C01510804	The Science of Internal Medicine	6	1		
AUTHORIZATION		RPS Developer	Coordinator RMK	Chairman of PRODI			
<ul style="list-style-type: none"> <li>• Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, Sp.GK</li> <li>• Dr.. Nasrum Machmud, Sp.PD</li> <li>• dr. Endy Adnan, Sp.PD,KR,PhD</li> </ul>		Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, Sp.GK	Dr.dr.Hashim Kasim, Sp.PD,KGH				
Learning Achievement (CP)	ILO-PRODI charged to MK						
	P2	1. Students are able to apply patient management concepts based on Clinical Reasoning and Problem Oriented Medical Record (POMR) (P2)					
	S1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals. (S1)					
	Achievement of Course Learning (CLO)						
	CLO1	Able to create POMR in the management of internal disease patients, ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations (P2)					
	CLO2	Able to create POMR systematically based on data analysis and synthesis to establish problems and establish basic examination and treatment plans, provide education and explain the prognosis of patients' disease in the manufacture of POMR (S1)					
	Sub-CLO						
	Sub-CLO 1	Able to master the basic science concepts of internal medicine include: anamnesis, physical examination, supporting examination plan, establishing a diagnosis / diagnosis of appeal, patient management plan, and education and prognosis of the patient's disease					

	Sub-CLO 2	Able to master the concept of handling patients based on clinical reasons (clinical reasoning) and Problem oriented Medical Record (POMR)								
	Sub-CLO 3	Able to systematically create POMR inpatients								
	Sub-CLO 4	Able to perform data analysis and synthesis to establish problems and establish basic examination and treatment plans, provide education and explain the prognosis of patients' disease in the manufacture of POMR								
<b>Deskripsi Singkat MK</b>	Create a POMR by identifying problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations, establishing diagnoses, preparing patient management plans, providing education, providing explanations of disease prognosis.									
<b>Study Materials / Learning Materials</b>	1. In accordance with the learning materials in the Division of Tropical Infections 2. In accordance with the learning materials in the Division of Gastroentero-Hepatology 3. In accordance with the learning materials in the Division of Cardiology 4. In accordance with the learning materials in the Division of Pulmonology 5. In accordance with the learning materials in the Kidney-Hypertension Division 6. In accordance with the learning materials in the Division of Reumatology 7. In accordance with the learning materials in the Division of Allergy-Immunology 8. In accordance with the learning materials in the Geriatric Division 9. In accordance with the learning materials in the Division of Hematology of Medical Oncology 10. In accordance with learning materials in the Division of Metabolic Endocrine and Diabetes 11. In accordance with the learning materials in the Psychosomatic Division									
<b>Book</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"><b>Main:</b></td><td></td></tr> <tr> <td>1.</td><td>Sudoyo, Aru W. et al. (2015). <i>Book Teaching The Science of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</td></tr> <tr> <td><b>Supporters :</b></td><td></td></tr> <tr> <td>4.</td><td>Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</td></tr> </table>		<b>Main:</b>		1.	Sudoyo, Aru W. et al. (2015). <i>Book Teaching The Science of Internal Medicine</i> . (Edition V). Jakarta: Interna Publishing.	<b>Supporters :</b>		4.	Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20 <sup>th</sup> ed). New York: McGraw Hill Education.
<b>Main:</b>										
1.	Sudoyo, Aru W. et al. (2015). <i>Book Teaching The Science of Internal Medicine</i> . (Edition V). Jakarta: Interna Publishing.									
<b>Supporters :</b>										
4.	Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20 <sup>th</sup> ed). New York: McGraw Hill Education.									
<b>Master Lecturer</b>	1. Prof. Dr. dr. Haerani Rasyid, M.Kes, SpPD, K-GH, SpGK 2. Dr. dr. Andi Makbul Aman, SpPD, K-EMD 3. Dr. dr. Himawan Sanusi, SpPD, K-EMD									
<b>Subject Syllabus</b>	<b><i>Write down prerequisite courses, if any</i></b>									

Week1	Sub-CLO (Final ability of each stage of learning)	Valuation		Form of learning, LearningMethods, Student assignments, [Estimated Time]	Learning Materials [Library]	Assessment Weight (%)
		Indicator	Criteria & Shape			
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1-2	Able to master the concept of disease science in the basis of including: anamnesis, physical examination, supporting examination plan, establishing a diagnosis / diagnosis of appeal, patient management plan, and education and prognosis of the patient's disease	Completion in understanding and explaining anamnesis, physical examination, supporting examination plan, establishing differential diagnosis/diagnosis, patient management plan, and education and prognosis of the patient's disease	<b>Criterion:</b> Provision, suitability, and assignment  <b>Test Form:</b> Mini-CEX, CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (Death case)</b> 3x3 hours/week  <b>Practicum (guard)</b> 1x6 hours/week	<b>Learning Materials:</b> In accordance with the learning materials in the divisions of Tropical Infections, Gastroenterohepatology, Cardiology, Pulmonology, Renal Hypertension, Reumatology, Allergy-Immunology, Geriatrics, Hematology of Medical Oncology, Metabolic Endocrine and Diabetes, Psychosomatic  <b>[Library:</b> Book of Teaching In Internal Diseases Harrison's Principles of internal medicine]	15
1-2	Able to master the concept of handling patients based on clinical reasons (clinical reasoning) and Problem oriented Medical Record (POMR)	Completion in understanding and explaining the treatment of patients based on clinical reasons (clinical reasoning) and	<b>Criterion:</b> Provision, suitability, and assignment  <b>Test Form:</b> Mini-CEX, CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (Death case)</b> 3x3 hours/week  <b>Practicum (guard)</b>	<b>Learning Materials:</b> In accordance with the learning materials in the divisions of Tropical Infections, Gastroenterohepatology, Cardiology,	20

		Problem oriented Medical Record (POMR)		1x6 hours/week	Pulmonology, Renal Hypertension, Reumatology, Allergy-Immunology, Geriatrics, Hematology of Medical Oncology, Metabolic Endocrine and Diabetes, Psychosomatic  <a href="#">[Library: Book of Teaching In Internal Diseases Harrison's Principles of internal medicine]</a>	
3-12	Able to systematically create POMR inpatients	Completion in pomr creation steps with reference to databases, problemlists, diagnostic planning, and therapy,progress records (followup)	<b>Criterion:</b> Provision, suitability, and assignment  <b>Test Form:</b> Mini-CEX, CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (Death case)</b> 3x3 hours/week  <b>Practicum (guard)</b> 1x6 hours/week	<b>Learning Materials:</b> In accordance with the learning materials in the divisions of Tropical Infections, Gastroenterohepatology, Cardiology, Pulmonology, Renal Hypertension, Reumatology, Allergy-Immunology, Geriatrics, Hematology of Medical Oncology, Metabolic Endocrine and Diabetes, Psychosomatic  <a href="#">[Library: Book of Teaching In Internal Diseases]</a>	40

					Harrison's Principles of internal medicine]	
3-12	Able to perform data analysis and synthesis to establish problems as well as establish basic examination and treatment plans in the manufacture of POMR	Completion of data analysis and synthesis to establish problems and establish basic examination and treatment plans in the manufacture of POMR	<b>Criterion:</b> Provision, suitability, and assignment  <b>Test Form:</b> Mini-CEX, CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (Death case)</b> 3x3 hours/week  <b>Practicum (guard)</b> 1x6 hours/week	<b>Learning Materials:</b> In accordance with the learning materials in the divisions of Tropical Infections, Gastroenterohepatology, Cardiology, Pulmonology, Renal Hypertension, Reumatology, Allergy-Immunology, Geriatrics, Hematology of Medical Oncology, Metabolic Endocrine and Diabetes, Psychosomatic  <b>[Library:</b> Book of Teaching In Internal Diseases Harrison's Principles of internal medicine]	25
16	End of Semester Evaluation / End of Semester Exam					
Final Value: 85 - 100= A 80 - < 85= A Minus 75 - < 80= B Plus 70 - < 75= B 65 - <70= B Minus 55 - < 65= C 00 - < 55= E						100%

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	Name of college	: Hasanuddin University				Document Code				
	Name of Faculty	: Medicine								
	Department Name	: The Science of Internal Medicine								
	Prodi Name	: Medical Education								
<b>SEMESTER LEARNING PLAN</b>										
COURSES (MK)	CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting					
Emergency emergency	20C01510906	The Science of Internal Medicine	6	2	7 October 2019					
AUTHORIZATION	RPS Developer	Coordinator RMK	Chairman of PRODI							
	dr. Satriawan Abadi, Sp.PD, KIC	Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, Sp.GK	Dr. dr. Hashim Kasim, Sp.PD, K-GH							
Learning Achievement (CP)	ILO PRODI charged to MK									
	C3	1. Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Infection and Tropical Diseases, Rhumatology, Hematology and Medical Oncology, Cardiology, Gastroenter hepatology, Geriatrics and Gerontology, Alergi Immunology and Psychosomatics. (C3)								
	C4	1. Students are able to manage independently and/or lead teams in problem solving of internal medicine in outpatient, IGD, inpatient and intensive care units through inter, multi- and transdisciplinary approaches to improve curative, decrease pain and mortality rates. (C4)								
	<b>Achievement of Course Learning (CLO)</b>									
CLO1  CLO 2	Able to make clinical diagnosis and procedures in the field of emergency according to the problem, patient needs and authority (C3)									

		Students are able to manage independently and/or lead teams in solving disease problems in the field of emergencies (C4)																
<b>Sub-Achievement of Learning Courses (Sub CLO)</b>																		
	Sub-CLO 1	Able to enforce diagnosis, procedures and complications independently and completely about acid-base disorders (metabolic acidosis, metabolic alkalosis, respiratory acidosis, respiratory alkalosis)																
	Sub-CLO 2	Able to enforce the diagnosis, procedure complications independently and thoroughly about the body's electrolytes and minerals (Hyponatremia and hypernatremia, Hypokalemia and hyperkalemia, Hypomagnesium and hypermagnesium)																
	Sub-CLO 3	Able to enforce diagnosis, procedures and complications independently and completely about shock (distributive shock, cardiogenic shock, hypovolemic shock, neurogenic shock)																
	Sub-CLO 4	Able to enforce diagnosis, procedures and complications independently and completely about hypoglycemia and hyperglycemia (Hypoglycemia, Diabetic Ketoacidosis, <i>Hyperosmolar hyperglycemia state</i> )																
	Sub-CLO 5	Able to enforce diagnosis, procedures and complications independently and completely about the loss of consciousness (Syncpe, <i>Acute confusional state</i> , Koma)																
	Sub-CLO 6	Able to enforce diagnosis, procedures and complications independently and completely about respiration (Coughing blood, shock and cyanosis, respiratory failure)																
	Sub-CLO 7	Able to enforce diagnosis, procedures and complications independently and completely about cardiology ( <b>chest pain, Acute coronary syndrome</b> )																
Short Description of MK	<p>Emergency provides basic emergency capabilities in the field of Internal Medicine as a provision in carrying out their profession, ability in managing disease emergency problems, has the ability to utilize information technology for information search, writing, self-development and profession.</p> <p>Specialist Doctor Education participants who follow the Emergency Module in the field of Internal Medicine is PPDS phase I semester II which has gone through the ward stage and has achieved basic skills and attitudes, namely lifelong learning skills, generic skills and caring attitudes towards the environment / society. At the end of this stage it is expected that PPDS can achieve the competencies as stipulated in the Competency Standards of Internal Medicine Specialists in the field of Emergency.</p>																	
Study Materials/Learning Materials	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;">1</td><td>Metabolic acidosis</td></tr> <tr> <td>2</td><td>Alkalosis metabolik</td></tr> <tr> <td>3</td><td>Respiratory acidosis</td></tr> <tr> <td>4</td><td>Alkalosis respiratorik</td></tr> <tr> <td>5</td><td>Hyponatremia and hypernatremia</td></tr> <tr> <td>6</td><td>Hypokalemia and hyperkalemia</td></tr> <tr> <td>7</td><td>Hypomagnesium and hypermagnesium</td></tr> <tr> <td>8</td><td>Distributive shock</td></tr> </table>		1	Metabolic acidosis	2	Alkalosis metabolik	3	Respiratory acidosis	4	Alkalosis respiratorik	5	Hyponatremia and hypernatremia	6	Hypokalemia and hyperkalemia	7	Hypomagnesium and hypermagnesium	8	Distributive shock
1	Metabolic acidosis																	
2	Alkalosis metabolik																	
3	Respiratory acidosis																	
4	Alkalosis respiratorik																	
5	Hyponatremia and hypernatremia																	
6	Hypokalemia and hyperkalemia																	
7	Hypomagnesium and hypermagnesium																	
8	Distributive shock																	

	9	Cardiogenic syok									
	10	Syok hipovolemic									
	11	Neurogenic syok									
	12	Hypoglycemia									
	13	Ketoacidosis diabetic									
	14	<i>Hyperosmolar hyperglycemia state</i>									
	15	Sinkop									
	16	<i>Acute confusional state</i>									
	17	Come									
	18	Coughing up blood									
	19	Tightness and cyanosis									
	20	Respiratory failure									
	21	Chest pain									
	22	<i>Acute coronary syndrome</i>									
	Main:										
	5. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20 <sup>th</sup> ed). New York: McGraw Hill Education.										
	Supporter:										
	1. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i> . (Edition V). Jakarta: Interna Publishing. 2. Tintinalli JE, Stapczynski JS, Ma OJ. (2018). <i>Tintinalli's Emergency Medicine Manual</i> . (8 <sup>th</sup> Ed). New York: McGraw Hill Education.										
Master Lecturer	1. dr. Satriawan Abadi, Sp.PD, KIC 2. Dr. dr. Harun Iskandar, SpP(K) SpPD, K-P 3. Dr. dr. Idar Mappangara, SpPD, SpJP 4. Dr. dr. Nu'man AS Daud, SpPD, K-GEH										
Prerequisite courses											
Meeting to	Sub CLO (Final ability of each stage of learning)	Valuation		Form of Learning; Learning Methods; Student assignments; Estimated time	Learning Materials (Library)	Assessment Weight (%)					
		Indicator	Criteria and Shapes								
1	2	3	4	5	6	7					
1	Learners are able to enforce the diagnosis, procedures	Tuntas performs diagnosis, procedures	• Shape:	<b>Lecture</b> 1 x 50 minutes/ week	• Text Book Harrison's	14,2 %					

	and complications independently and completely about acid-base disorders (metabolic acidosis, metabolic alkalosis, respiratory acidosis, respiratory alkalosis)	and complications independently and completely about acid-base disorders (metabolic acidosis, metabolic alkalosis, respiratory acidosis, respiratory alkalosis).	<ul style="list-style-type: none"> <li>- Ujian mini-CEX, CbD, DOPS.</li> <li>- 1 Scientific Journal</li> <li>• Criterion: Accuracy and Mastery</li> </ul>	<b>Practicum (emergency patient service)</b> 5 x 6 hours/ week	<ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Medicine</li> <li>• EIMED</li> <li>• Tintinalli's Emergency Medicine</li> </ul>	
2	Learners Are able to enforce the diagnosis, procedures complications independently and thoroughly about the body's electrolytes and minerals (Hyponatremia and hypernatremia, Hypokalemia and hyperkalemia, Hypomagnesium and hypermagnesium)	Tuntas performs diagnosis, procedures and complications in a self-contained and complete manner about electrolyte and mineral disorders of the body (Hyponatremia and hypernatremic, Hypokalemia and hyperkalemia, Hypomagnesium and hypermagnesium, Hypocalcemia and hypercalcemia, Hypophosphateemia and hyperphosphatemia)	<ul style="list-style-type: none"> <li>• Shape:</li> <li>- Ujian mini-CEX, CbD, DOPS.</li> <li>- 1 Scientific Journal</li> <li>• Criterion: Accuracy and Mastery</li> </ul>	<b>Lecture</b> 1 x 50 minutes/ week  <b>Practicum (emergency patient service)</b> 5 x 6 hours/ week	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• EIMED</li> <li>• Tintinalli's Emergency Medicine</li> </ul>	14,2 %
3	Learners Are able to enforce	Tuntas performs diagnosis, procedures	<ul style="list-style-type: none"> <li>• Shape:</li> </ul>	<b>Lecture</b> 1 x 50 minutes/ week	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> </ul>	14,2 %

	diagnosis,procedures and complications independently and completely about syok (distributiveshock, cardiogenicshock, hypovolemicshock, neurogenic shock)	es and complications independently and completely about Shock (Distributiveshock, cardiogenicshock, hypovolemicshock, neurogenic shock)	<ul style="list-style-type: none"> <li>- Ujian mini-CEX, CbD, DOPS.</li> <li>- 1 Scientific Journal</li> <li>• Criterion: Accuracy and Mastery</li> </ul>	<p><b>Practicum (emergency patient service)</b> 5 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Medicine</li> <li>• EIMED</li> <li>• Tintinalli's Emergency Medicine</li> </ul>	
4	Learners Are able to enforce diagnosis,procedures and complications independently and completely about hipoglycemia and hyperglycemia (Hypoglycemia, Diabetic Ketoacidosis, <i>Hyperosmolar hyperglycemia state</i> )	Tuntas performs diagnosis,procedures and complications independently and completely about Hypoglycemia and hyperglycemia (Hypoglycemia, Diabetic Ketoacidosis, <i>Hyperosmolar hyperglycemia state</i> )	<ul style="list-style-type: none"> <li>• Shape:</li> <li>- Ujian mini-CEX, CbD, DOPS.</li> <li>- 1 Scientific Journal</li> <li>• Criterion: Accuracy and Mastery</li> </ul>	<p><b>Lecture</b> 1 x 50 minutes/ week</p> <p><b>Practicum (emergency patient service)</b> 5 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• EIMED</li> <li>• Tintinalli's Emergency Medicine</li> </ul>	14,2 %
5	Learners Are able to enforce diagnosis,procedures and complications independently and completely about the nod of consciousness (Syncope, <i>Acute confusional state</i> , Koma)	Tuntas performs diagnosis,procedures and complications independently and completely about Disorders of Consciousness (Syncope, <i>Acute confusional state</i> , Koma)	<ul style="list-style-type: none"> <li>• Shape:</li> <li>- Ujian mini-CEX, CbD, DOPS</li> <li>- 1 Scientific Journal</li> <li>• Criterion: Accuracy and Mastery</li> </ul>	<p><b>Lecture</b> 1 x 50 minutes/ week</p> <p><b>Practicum (emergency patient service)</b> 5 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• EIMED</li> <li>• Tintinalli's Emergency Medicine</li> </ul>	14,2 %
6	Learners Are able to enforce the	Tcamelsdo the enforcement of	<ul style="list-style-type: none"> <li>• Shape:</li> </ul>	<p><b>Lecture</b> 1 x 50 minutes/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> </ul>	14,2 %

	diagnosis,procedures andcomplications independently and completely aboutrespiration (Coughing blood,sak and cyanosis, respiratory failure)	diagnosis, procedures andcomplications in a self-contained and complete manner about Respiration(Coughing up blood,singak and cyanosis, Respiratory failure)	<ul style="list-style-type: none"> <li>- Ujian mini-CEX, CbD, DOPS.</li> <li>- 1 Scientific Journal</li> <li>• Criterion: Accuracy and Mastery</li> </ul>	<p><b>Practicum (emergency patient service)</b> 5 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Medicine</li> <li>• EIMED</li> <li>• Tintinalli's Emergency Medicine</li> </ul>	
7	Learners Are able to enforce the diagnosis,procedures andcomplications independently and completely aboutcardiology (chestpain, Acute coronary syndrome)	Tuntas performs diagnosis,procedures andcomplications independently and completely about Cardiology (Chestpain, Acute coronary syndrome)	<ul style="list-style-type: none"> <li>• Shape:</li> <li>- Ujian mini-CEX, CbD, DOPS.</li> <li>- 1 Scientific Journal</li> <li>• Criterion: Accuracy and Mastery</li> </ul>	<p><b>Lecture</b> 1 x 50 minutes/ week</p> <p><b>Practicum (emergency patient service)</b> 5 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• EIMED</li> <li>• Tintinalli's Emergency Medicine</li> </ul>	14,2 %
<p><b>Final Value:</b></p> <p>85 - 100= A 80 - &lt; 85= A Minus 75 - &lt; 80= B Plus 70 - &lt; 75= B 65 - &lt;70= B Minus 55 - &lt; 65= C 00 - &lt; 55= E</p>						100%

	Name of college	: Hasanuddin University	Document Code
	Name of Faculty	: Medicine	
	Department Name	: The Science of Internal Medicine	
	Prodi Name	: The Science of Internal Medicine	

SEMESTER LEARNING PLAN												
COURSES (MK)	CODE	Course	WEIGHT (credit)	SEMESTER	Tgl Drafting							
<b>BASIC MEDICAL SKILLS</b>	20C01511006	The Science of Internal Medicine	T=1357 P=6	2	3-10-2019							
<b>AUTHORIZATION</b>		<b>RPS Developer</b> - Dr. dr. Hashim Kasim, SpPD, K-GH - dr. Nasrum Machmud, Sp.PD, KGH	<b>Coordinator RMK</b> Prof. DR. dr. Haerani Rasyid, SP. PD, KGH, Sp.GK		<b>Chairman of PRODI</b> Dr. dr. Hashim Kasim, SpPD, K-GH							
<b>Learning Achievement (CP)</b>	<b>ILO-PRODI charged to MK</b>											
	P1	Students are able to demonstrate and understand the concept of disease comprehensively regarding etiology, pathogenesis, pathophysiology, clinical symptoms, anamnesis and physical examination to establish diagnosis in the field of internal medicine (P1).										
	C1	Students are able to perform, make plans, interpret, summarize and plan treatment for all patient problems within the scope of general internal medicine (C1)										
	<b>Achievement of Course Learning (CLO)</b>											
	CLO1	Able to explain the purpose and indication of basic medical actions of internal medicine (P1)										
	CLO2	Able to explain and perform basic medical actions of the disease in accordance with the correct procedure and anticipate complications of action (C1)										
	<b>Sub-CLO</b>											
	Sub-CLO 1	Able to explain the purpose of basic medical actions of the disease in										
	Sub-CLO 2	Able to explain indications of basic medical actions of the disease in										

	Sub-CLO 3	Able to recognize and prepare tools and materials for basic medical actions of the disease in											
	Sub-CLO 4	Have knowledge of internal medicine cases that need sub-specialist referral											
	Sub-CLO 5	Able to explain and perform basic medical actions of the disease in accordance with the correct procedure											
	Sub-CLO 6	Able to know the risks and complications of basic medical actions of the disease in											
<b>DeskripsiSingkat MK</b>	Teach students to be able to perform basic medical actions in the field of disease science in both invasive and noninvasive actions based on their competence and in accordance with the correct procedures, taking into account the objectives, indications, risks, and complications of these actions.												
<b>Study Materials / Learning Materials</b>	<ul style="list-style-type: none"> <li>- Physical examination and support</li> <li>- Medical measures of internal medicine</li> </ul>												
<b>Book</b>	<b>Main:</b>	Guidebook of Examination Techniques and Clinical Procedures of Internal Disease Science											
	<b>Supporters:</b>	6. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20 <sup>th</sup> ed). New York: McGraw Hill Education.											
<b>Master Lecturer</b>	<ol style="list-style-type: none"> <li>1. Dr. dr. Faridin HP, SpPD, K-R</li> <li>2. Dr. dr. Nur Ahmad Tabri, SpPD, K-P, SpP(K)</li> <li>3. dr. Dimas Bayu, SpPD, K-HOM</li> <li>4. Dr. dr. Femi Syahriani, SpPD, K-R</li> </ol>												
<b>Subjectssyarat</b>													
Week1	Sub-CLO (Final ability of each stage of learning)	Valuation		Help with learning, LearningMethods, Student assignments, [Estimated Time]		Learning Materials [Library]	Assessment Weight (%)						
(1)	(2)	Indicator	Criteria & Shape										
1-4	Able to explain the purpose of basic	- Knowing and explaining the purpose of	Criterion: - Accuracy and mastery	Lecture 1 x 50 minutes/ week		- Guidebook of Examination Techniques and	10 %						

	medical actions of the disease in	<p>both invasive and noninvasive actions, among others:</p> <ul style="list-style-type: none"> <li>• Infusion installation</li> <li>• Installation of urethra catheters</li> <li>• Punksi suprapubic</li> <li>• Installation of NGT</li> <li>• ECG Installation</li> <li>• Drug provocation test</li> </ul> <p>- Can make informed consent action</p>	<p>Non-test form:</p> <ul style="list-style-type: none"> <li>- Bed-site teaching</li> </ul> <p>Form of test:</p> <ul style="list-style-type: none"> <li>- DOPs</li> </ul>	<p><b>Practicum (inpatient services)</b> 5 x 6 hours/ week</p>	<p>Clinical Procedures of Internal Disease Science</p> <ul style="list-style-type: none"> <li>- Standards of Competence of Internal Medicine Specialists</li> </ul>	
<b>1-4</b>	Able to explain indications of basic medical actions of the disease in	<ul style="list-style-type: none"> <li>- Knowing and can explain indications of both invasive and noninvasive actions, including:</li> </ul>	<p>Criterion:</p> <ul style="list-style-type: none"> <li>- Accuracy and mastery</li> </ul> <p>Non-test form:</p> <ul style="list-style-type: none"> <li>- Bed-site teaching</li> </ul> <p>Form of test:</p> <ul style="list-style-type: none"> <li>- DOPs</li> </ul>	<p><b>Lecture</b> 1 x 50 minutes/ week</p> <p><b>Practicum (inpatient services)</b> 5 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>- Guidebook of Examination Techniques and Clinical Procedures of Internal Disease Science</li> <li>- Standards of Competence of</li> </ul>	<b>10%</b>

		<ul style="list-style-type: none"> <li>• Infusion installation</li> <li>• Installation of urethra catheters</li> <li>• Suprapubic puncture</li> <li>• Installation of NGT</li> <li>• ECG Installation</li> <li>• Drug provocation test</li> </ul> <p>- Can make informed consent action</p>			Internal Medicine Specialists	
5-12	Able to recognize and prepare tools and materials for basic medical actions of the disease in	<ul style="list-style-type: none"> <li>- Knowing and being able to explain the tools and materials that must be prepared for both invasive and noninvasive actions, among others:</li> </ul>	<p>Criterion:</p> <ul style="list-style-type: none"> <li>- Accuracy and mastery</li> </ul> <p>Non-test form:</p> <ul style="list-style-type: none"> <li>- Bed-site teaching</li> </ul> <p>Form of test:</p> <ul style="list-style-type: none"> <li>- DOPs</li> </ul>	<p><b>Lecture</b> 1 x 50 minutes/ week</p> <p><b>Practicum (inpatient services)</b> 5 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>- Guidebook of Examination Techniques and Clinical Procedures of Internal Disease Science</li> <li>- Standards of Competence of Internal Medicine Specialists</li> </ul>	<b>20%</b>

		<ul style="list-style-type: none"> <li>• Infusion installation</li> <li>• Installation of urethra catheters</li> <li>• Suprapubic puncture</li> <li>• Installation of NGT</li> <li>• ECG Installation</li> <li>• Drug provocation test</li> </ul>				
<b>5-12</b>	Have knowledge of internal medicine cases that need sub-specialist referral	- Have knowledge of internal medicine cases that need sub-specialist referral, as well as require invasive and noninvasive measures by a consultant medical doctor	<p>Criterion:</p> <ul style="list-style-type: none"> <li>- Accuracy and mastery</li> </ul> <p>Non-test form:</p> <ul style="list-style-type: none"> <li>- Bed-site teaching</li> </ul> <p>Form of test:</p> <p>DOPs</p>	<p><b>Lecture</b></p> <p>1 x 50 minutes/ week</p> <p><b>Practicum (inpatient services)</b></p> <ul style="list-style-type: none"> <li>- 5 x 6 hours/ week</li> </ul>	<ul style="list-style-type: none"> <li>- Guidebook of Examination Techniques and Clinical Procedures of Internal Disease Science</li> <li>- Standards of Competence of Internal Medicine Specialists</li> </ul>	<b>10%</b>
<b>5-12</b>	Able to explain and perform basic medical actions of the disease in	- Knowing and being able to explain and	<p>Criterion:</p> <ul style="list-style-type: none"> <li>- Accuracy and mastery</li> </ul>	<p><b>Lecture</b></p> <p>1 x 50 minutes/ week</p>	<ul style="list-style-type: none"> <li>- Guidebook of Examination Techniques and</li> </ul>	<b>40 %</b>

	accordance with the correct procedure	<p>perform both invasive and noninvasive actions in accordance with the correct procedures:</p> <ul style="list-style-type: none"> <li>• Infusion installation</li> <li>• Installation of urinary catheters</li> <li>• Suprapubic puncture</li> <li>• Installation of NGT</li> <li>• ECG Installation</li> <li>• Drug provocation test</li> </ul>	<p>Non-test form:</p> <ul style="list-style-type: none"> <li>- Bed-site teaching</li> </ul> <p>Form of test:</p> <ul style="list-style-type: none"> <li>- DOPs</li> </ul>	<p><b>Practicum (inpatient services)</b> 5 x 6 hours/ week</p>	<p>Clinical Procedures of Internal Disease Science</p> <ul style="list-style-type: none"> <li>- Standards of Competence of Internal Medicine Specialists</li> </ul>	
5-12	Able to know the risks and complications of basic medical actions of the disease in	<ul style="list-style-type: none"> <li>- Knowing and explaining the risks and complications of both invasive and noninvasive actions, among others:</li> </ul>	<p>Criterion:</p> <ul style="list-style-type: none"> <li>- Accuracy and mastery</li> </ul> <p>Non-test form:</p> <ul style="list-style-type: none"> <li>- Bed-site teaching</li> </ul> <p>Form of test:</p> <ul style="list-style-type: none"> <li>- DOPs</li> </ul>	<p><b>Lecture</b> 1 x 50 minutes/ week</p> <p><b>Practicum (inpatient services)</b> 5 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>- Guidebook of Examination Techniques and Clinical Procedures of Internal Disease Science</li> <li>- Standards of Competence of Internal Medicine Specialists</li> </ul>	<b>10%</b>

		<ul style="list-style-type: none"> <li>• Infusion installation</li> <li>• Installation of urethra catheters</li> <li>• Suprapubic puncture</li> <li>• Installation of NGT</li> <li>• ECG Installation</li> <li>• Drug provocation test</li> </ul> <p>- Can make informed consent action</p>			
<b>Final Value:</b>					<b>100%</b>

85 - 100= A

80 - < 85= A Minus

75 - < 80= B Plus

70 - < 75= B

65 - <70= B Minus

55 - < 65= C

00 - < 55= E

**Note:**

1. **Prodi Graduate Learning Achievement (ILO-PRODI)** is an ability possessed by every PRODI graduate which is an internalization of attitude, mastery of knowledge and skills in accordance with the level of study program obtained through the learning process.

2. **ILO charged to the course** are some of the learning achievements of graduate study programs (ILO-PRODI) that are used for the formation / development of a course consisting of aspects of attitude, general conclusion, special skills and knowledge.
3. **CP Courses (CLO)** is the ability that is spelled out specifically from the ILO charged to the course, and is specific to the study material or learning materials of the course.
4. **Sub-CP Courses (Sub-CLO)** are the specific ability of CLO that can be measured or observed and is the final ability planned at each stage of learning, and is specific to the learning material of the course.
5. **Indicators of ability assessment** in student learning processes and outcomes are specific and measurable statements that identify the ability or performance of student learning outcomes accompanied by evidence.
6. **Criteria Assessment** is a benchmark that is used as a measure or benchmark of learning proficiency in assessment based on established indicators. Assessment criteria is a guideline for assessors so that assessments are consistent and unbiased. Criteria can be either quantitative or qualitative.
7. **Form of assessment:** test and non-test.
8. **Forms of learning:** Lectures, Responsi, Tutorials, Seminars or equivalent, Practicums, Studio Practices, Workshop Practices, Field Practices, Research, Community Service and/or other equivalent forms of learning.
9. **Learning Methods:** Small Group Discussion, Role-Play & Simulation, Discovery Learning, Self-Directed Learning, Cooperative Learning, Collaborative Learning, Contextual Learning, Project Based Learning, and other equivalent methods.
10. **Learning Materials** are details or descriptions of study materials that can be presented in the form of several subjects and sub-subjects.
11. **The weight of the assessment** is the percentage of assessment of each achievement of sub-CLO which is propositional in magnitude with the difficulty level of achievement of sub-CLO tsb., and the total is 100%.
12. **TM**=Face-to-Face, **PT**=Structured assignment, **BM**=Self-study.

	Name of college	: Hasanuddin University	Document Code
	Name of Faculty	: Medicine	
	Department Name	: The Science of Internal Medicine	
	Prodi Name	: The Science of Internal Medicine	

SEMESTER LEARNING PLAN					
COURSES (MK)	CODE	Course	WEIGHT (credit)	SEMESTER	Tgl Drafting

<b>SUPERIOR COMPETENCE OF HIV/AIDS</b>		20C01511102	The Science of Internal Medicine		2		2	5-10-2019										
<b>AUTHORIZATION</b>		<b>RPS Developer</b>	<b>Coordinator RMK</b>			<b>Chairman of PRODI</b>												
		- dr. Sudirman Katu, Sp.PD, KPTI - Dr. dr. Risna Halim, Sp.PD, KPTI	Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, Sp.GK			Dr. dr. Hashim Kasim, Sp.PD, KGH												
<b>Learning Achievement (CP)</b>	<b>ILO-PRODI charged to MK</b>																	
	C3	1. Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Rhumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics																
		<b>Achievement of Course Learning (CLO)</b>																
	CLO	CLO is able to diagnose and clinical procedures of HIV patients according to the problem, patient needs and authority. (C3)																
	ILO Sub-CLO⇒																	
	Sub-CLO 1	Being able to find out the risk factors and diagnoses of HIV infection																
	Sub-CLO 2	Able to explain the prevention and transmission of HIV																
	Sub-CLO 3	Able to know opportunistic infections and governance																
	Sub-CLO 4	Able to find out co-infection in HIV (TB-HIV, HEPATITIS HIV)																
	Sub-CLO 5	Being able to know Tri elimination (HIV, Hepatitis, Syphilis) in Pregnant Women																
	Sub-CLO 6	Able to provide comprehensive and continuous treatment of HIV infection																
<b>DeskripsiSingkat MK</b>	In this course students learn to manage HIV patients, ranging from identifying problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations, establishing problems / diagnosis / diagnosis of appeal, drawing up patient management plans with regard to ethical, social, economic, religious and cultural aspects, providing education, providing explanation of disease prognosis to compile medical records with reference to medical records based on problems, and able to explain the basis of determining the cause of disease, basic non-pharmacological and pharmacological management of rational basis based on disease etiology and pathogenesis and the basis of preventive action plan.																	
<b>Study Materials / Learning Materials</b>	Definition of HIV disease PATHOphysiology of HIV Enforcement of HIV diagnosis The course of HIV infection																	

		Hiv infection testing strategies Counseling for obedience to treatment						
Book		Main:	1. National Guidelines for HIV Management Medical Services. Jakarta: Ministry of Health; 2019. 2. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i> . (Edition V). Jakarta: Interna Publishing.					
		Supporters:	1. Competency Standards of Internal Medicine Specialists, 2014. 2. Text book virology. Principles and application					
		Master Lecturer 1. dr. Sudirman Katu, SpPD, K-PTI 2. Dr. dr. Risna Halim, SpPD, K-PTI						
Subjectssyarat								
Week1	Sub-CLO (Final ability of each stage of learning)	Valuation		Form of learning, LearningMethods, Student assignments, [Estimated Time]	Learning Materials [Library]	(7)	Assessme nt Weight (%)	
(1)	(2)	Indicator	Criteria & Shape					
1	Being able to find out the risk factors and diagnoses of HIV infection	Completion in understanding risk factors and diagnosis of HIV infection	Criterion: Accuracy and mastery Non-test form: 8. Bedsite teaching, Journal/report Non-test form: 9. Ujian Mini CEX, MCQ, CBD	Lecture 1x50 minutes/week  <b>Seminar (morning report)</b> 3x 30 minutes/week	1. Teaching Materials in Disease Science in FSI 2. National Guidelines for HIV Management Medical Services 3. Text book virology. Principles and application 4. Competency Standards of Internal Medicine Specialists, 2014.	10		
2	Able to explain the prevention and transmission of HIV	Completion in explaining hiv prevention and transmission	Criterion: Accuracy and mastery Non-test form: 10. Bedsite teaching, Journal/report Non-test form: Ujian Mini CEX, MCQ, CBD	Lecture 1x50 minutes/week  <b>Seminar (morning report)</b> 3x 30 minutes/week	5. Teaching Materials in Disease Science in FSI National Guidelines for HIV Management Medical Services Text book virology. Principles and application Competency Standards of Internal Medicine Specialists, 2014.	10		

3	Able to know opportunistic infections and governance	Completeness in knowing the understanding of opportunistic infections and governance	Criterion: Accuracy and mastery Non-test form: 13. Bedsite teaching, Journal/report Non-test form: 14. Ujian Mini CEX, CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (morning report)</b> 3x 30 minutes/week	15. Teaching Materials in Disease Science in FSI 16. National Guidelines for HIV Management Medical Services 17. Text book virology. Principles and application 18. Competency Standards of Internal Medicine Specialists, 2014.	20
4	Being able to find out co-infection with HIV	Completion in knowing and understanding tb-HIV co-infection, HIV hepatitis	Criterion: Accuracy and mastery Non-test form: 19. Bedsite teaching, morning report Diary/report Non-test form: 20. Ujian Mini CEX, CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (morning report)</b> 3x 30 minutes/week	16. Teaching Materials in Disease Science in FSI 21. National Guidelines for HIV Management Medical Services 22. Text book virology. Principles and application Competency Standards of Internal Medicine Specialists, 2014.	20
5	Being able to know Tri elimination in Pregnant Women	Completion in knowing and understanding Tri elimination (HIV, Hepatitis, Syphilis) in Pregnant Women	Criterion: Accuracy and mastery Non-test form: 23. Bedsite teaching, morning report Diary/report Non-test form: 24. Ujian Mini CEX, CBD	<b>Lecture</b> 1x50 minutes/week  <b>Seminar (morning report)</b> 3x 30 minutes/week	11. Teaching Materials in Disease Science in FSI 12. National Guidelines for HIV Management Medical Services 13. Text book virology. Principles and application 14. Competency Standards of Internal Medicine Specialists, 2014.	20
6	Able to provide comprehensive and	Completion in knowing	Criterion: Accuracy and mastery Non-test form:	<b>Lecture</b> 1x50 minutes/week	15. Teaching Materials in Disease Science in FSI	20

	continuous treatment of HIV infection	the treatment of HIV infection comprehensively and continuously	25. Bedsite teaching, morning report Diary/report Non-test form: 26. Ujian Mini CEX, CBD	<b>Seminar (morning report)</b> 3x 30 minutes/week	16. National Guidelines for HIV Management Medical Services 17. Text book virology. Principles and application 18. Competency Standards of Internal Medicine Specialists, 2014.	
<b>Midterm Evaluation / Semester Tengah Exam</b>						
<b>End of Semester Evaluation / End of Semester Exam</b>						
<b>Final Value:</b>						<b>100%</b>

### Note:

1. **Prodi Graduate Learning Achievement (ILO-PRODI)** is an ability possessed by every PRODI graduate which is an internalization of attitude, mastery of knowledge and skills in accordance with the level of study program obtained through the learning process.
2. **ILO charged to the course** are some of the learning achievements of graduate study programs (ILO-PRODI) that are used for the formation / development of a course consisting of aspects of attitude, general conclusion, special skills and knowledge.
3. **CP Courses (CLO)** is the ability that is spelled out specifically from the ILO charged to the course, and is specific to the study material or learning materials of the course.
4. **Sub-CP Courses (Sub-CLO)** are the specific ability of CLO that can be measured or observed and is the final ability planned at each stage of learning, and is specific to the learning material of the course.
5. **Indicators of ability assessment** in student learning processes and outcomes are specific and measurable statements that identify the ability or performance of student learning outcomes accompanied by evidence.
6. **Creteria Assessment** is a benchmark that is used as a measure or benchmark of learning proficiency in assessment based on established indicators. Assessment creteria is a guideline for assessors so that assessments are consistent and unbiased. Creteria can be either quantitative or qualitative.

7. **Form of assessment:** test and non-test.
8. **Forms of learning:** Lectures, Responsi, Tutorials, Seminars or equivalent, Practicums, Studio Practices, Workshop Practices, Field Practices, Research, Community Service and/or other equivalent forms of learning.
9. **Learning Methods:** Small Group Discussion, Role-Play & Simulation, Discovery Learning, Self-Directed Learning, Cooperative Learning, Collaborative Learning, Contextual Learning, Project Based Learning, and other equivalent methods.
10. **Learning Materials** are details or descriptions of study materials that can be presented in the form of several subjects and sub-subjects.
11. **The weight of the assessment** is the percentage of assessment of each achievement of sub-CLO which is propositional in magnitude with the difficulty level of achievement of sub-CLO tsb., and the total is 100%.
12. **TM**=Face-to-Face, **PT**=Structured assignment, **BM**=Self-study.

<b>LOGO</b> <b>PT</b>	<b>PT</b> Faculty..... Department/Study Program.....	
	<b>SHORT SYLLABUS</b>	
<b>COURSES</b>	Name	...
	Code	...
	Credit	....
	Semester	....
<b>DESCRIPTION OF COURSES</b>		

<b>ACHIEVEMENT OF COURSE LEARNING (CLO)</b>					
1					
2					
3					
<b>SUB-ACHIEVEMENT OF LEARNING COURSES (SUB-CLO)</b>					
1					
2					
3					
4					
<b>LEARNING MATERIALS</b>					
1					
2					
3					
4					
5					
6					
<b>BOOK</b>					
	<b>MAIN LIBRARY</b>				
	1.				
	<b>SUPPORT LIBRARY</b>				
<b>PRECONDITIONS (If any)</b>					
.....					
<b>LOGO</b> PT	PT Faculty..... Department/Study Program.....				
<b>STUDENT TASK PLAN</b>					
<b>COURSES</b>	.....				
<b>CODE</b>	.....	<b>credits</b>	...	<b>SEMESTER</b>	....
<b>LECTURER</b>	.....				
<b>TASK FORM</b>		<b>TASKWORK TIME</b>			
.....	.....	.....	.....	.....	.....
<b>TASK TITLE</b>					
.....	.....	.....	.....	.....	.....
<b>SUB-ACHIEVEMENT OF LEARNING COURSES</b>					
.....	.....	.....	.....	.....	.....

<b>TASK DECRIPTION</b>
.....
<b>TASKWORKING METHODS</b>
1.
<b>EXTERNAL SHAPES AND FORMATS</b>
a. Objects: ....
b. External Form:
-
<b>INDICATORS, CRETTERIAS AND ASSESSMENT WEIGHTS</b>
<b>SCHEDULE</b>
<b>OTHERS</b>
<b>REFERRAL LIST</b>

Understanding 1 credit in THE FORM OF LEARNING				jam
a	Lectures, Responds, Tutorials			
	Face-to-face	Structured Assignments	Self-Study	
	50 minutes/week/semester	60 minutes/week/semester	60 minutes/week/semester	2,83
b	Seminars or other similar forms of learning			
	Face-to-face		Self-study	

	100 minutes/week/semester	70 minutes/week/semester	2,83
c	Practicums, studio practices, workshop practices, field practices, research, community service, and/or other equivalent forms of learning		
	170 minutes/week/semester		2,83

No	Student Learning Methods	Code
1	Small Group Discussion	SGD
2	Role-Play & Simulation	RPS
3	Discovery Learning	DL
4	Self-Directed Learning	SDL
5	Cooperative Learning	Cabbage
6	Collaborative Learning	CbL
7	Contextual Learning	CtL
8	Project Based Learning	PjBL
9	Problem Based Learning & Inquiry	PBL
10	Or other learning methods, which can effectively facilitate the fulfillment of graduate learning achievements.	

	Name of college		Hasanuddin University			Document Code			
	Name of Faculty		Medicine						
	Department Name		The Science of Internal Medicine						
	Prodi Name		The Science of Internal Medicine						
<b>SEMESTER LEARNING PLAN</b>									
COURSES (MK)	CODE	Course	WEIGHT (credit)	SEMESTER	Tgl Drafting				
ENDOCRINE METABOLIC DIABETES	20C01521208		8 credits	3,4,5,6					
AUTHORIZATION	RPS Developer	Coordinator RMK		Chairman of PRODI					
	Dr. dr. A. Makbul Aman, Sp.PD, K-EMD	Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, K-GH, Sp.GK		Dr. dr. Hashim Kasim, Sp.PD, K-GH					
Learning (CP)	ILO-PRODI charged to MK								
	S1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conduct scientific research in the field of internal medicine and be published in accredited journals (S1).							
	C2	Students are able to perform anamnesis, physical examinations, laboratory examinations, and procedures appropriate to the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> . (C 2)							

	C3	Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics. (C3)
<b>Achievement of Course Learning (CLO)</b>		
		CLO1 Participants ppds disease science in able to make a journal analysis and make case reports or scientific work related to the field of endocrine metabolic (S1)
		CLO2 Participants ppds disease science in able to manage patients with internal diseases ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations and diagnosis and diagnosis appeal and preparing a plan for the management of patients in the field of endocrine metabolic (C2)
		CLO3 Participants ppds disease science in able to perform clinical competency action patients in the field of endocrine metabolic (C3)
<b>Sub-Achievement of Learning Courses (Sub-CLO)</b>		
Sub-CLO 1		Able to make clinical diagnosis and perform management of Diabetes Mellitus type 1, Type 2 Diabetes Mellitus, Gestational Diabetes mellitus, Other types of Diabetes Mellitus, Hypoglycemia, acute compulsion (Diabetic Ketoacidosis, Hyperosmolar Hyperglycemic State), Chronic Complications of Microangiopathy and macroangiopathy and perioperative management of DM independently and thoroughly or treated together
Sub-CLO 2		Able to make clinical diagnosis and perform management of Thyroid Gland disease, Struma Difusa or toxic and non-toxic nodusa, Hyperthyroidism, Hypothyroidism, Graves' Disease, Acute/subacute/chronic thyroiditis, Thyroid Disorders in pregnancy, Thyroid Cancer and perioperative management in Thyroid Gland Disease independently and thoroughly or treated together
Sub-CLO 3		Able to make a clinical diagnosis and perform management of Parathyroid Gland disease, Secondary Hyperparathyroidism, Hypoparathyroidism, Hypercalcemia, Hypocalcemia, Osteoporosis / Osteomalacia independently and thoroughly or treated together
Sub-CLO 4		Able to make clinical diagnoses and perform management of hypothalamic and pituitary gland diseases; Pituitary tumors/pituitary tumors, prolactinemia, acromegaly, gigantism, Diabetes Insipidus, <i>Syndrome of Inappropriate antidiuretic hormone</i> (SIADH) and Growth Hormone Deficiency independently and thoroughly or jointly treated, providing preliminary therapy in non-emergency situations, determining the most appropriate referral for patient treatment and following up upon return from referral

	Sub-CLO 5	Able to make a clinical diagnosis and perform management of adrenal gland disorders, Cushing's disease, Addison's disease, feochromasitoma, adrenal crisis independently and completely or treated together
	Sub-CLO 6	Able to make a clinical diagnosis of Reproductive Disorders, Hypogonadism, Sexual Dysfunction, Infertility, Erectile Disorders, Ejaculation Disorders, Primary and Secondary Amenorrhea, Polycystic Ovarian Syndrome and provide preliminary therapy in non-emergency situations. Able to follow up after returning from referral
	Sub-CLO 7	Able to make clinical diagnoses and perform management of lipid disorders, dyslipidemia and obesity independently and thoroughly and treated together
	Sub-CLO 8	Able to make a clinical diagnosis and provide preliminary therapy on genetic disorders, Turner Syndrome, Klinefelter Syndrome, Congenital Adrenal Hyperplasia (CAH), Marfan Syndrome, Familial Dyslipidemia, Multiple Endocrine Neoplasia 1 and Multiple Endocrine Neoplasia 2 are non-emergency departments. Able to determine the most appropriate referral for the treatment of the next patient Able to follow up after returning from referral
	Sub-CLO 9	Able to perform Clinical Skills Competencies such as blood glucose examination, continuous intravenous insulin administration, blood sugar monitoring during intravenous insulin drip /continuous administration (Glucose Monitoring during intravenous insulin therapy), diabetes foot wound treatment, and can perform ankle brachial index (ABI), fine needle aspiration for thyroid nodules, bone mass density examination /interpretation of Bone Mineral Density(BMD) by Dual energy X-ray Absorptiometry (DXA) independently and thoroughly or treated together
Deskripsi Singkat MK	<p>Endocrine Metabolic and Diabetes is one of the branches of the science of Internal Medicine that focuses on the diagnosis, management and education of diseases in the field of Metabolic Endocrine and Diabetes so that learners are able to master theoretical knowledge and clinical skills so as to explain to patients and their families, peers, and other professions about the principles, indications and complications that may arise and can be implemented independently.</p> <p>This course lasts for 2 months, with process activities consisting of face-to-face, discussion of outpatient cases in metabolic endocrine polyclinics and diabetes, and hospitalization at Wahidin Sudirohusodo Hospital, as well as other networking hospitals. At the end of this stage it is expected that PPDS can achieve the competencies as stipulated in the Competency Standards of Specialist Doctors in Internal Medicine in the field of Endocrine Metabolic and Diabetes.</p>	
Study Materials / Learning Materials	<ul style="list-style-type: none"> <li>➤ Type 1 Diabetes Mellitus (4A)</li> <li>➤ Type 2 Diabetes Mellitus (4A)</li> <li>➤ Diabetes Mellitus Gestasional (4A)</li> <li>➤ Other types of diabetes mellitus (4A)</li> <li>➤ Ketoasidosis Diabetic (4A)</li> <li>➤ Hiperosmolar Hiperglikemik State (4A)</li> <li>➤ Hypoglycemia (4A)</li> <li>➤ Complications of Microangiopathy and Macroangiopathy (4A)</li> <li>➤ Struma Difusa/Nodus Non Toxic from Toxic (4A)</li> <li>➤ Hyperthyroidism (4A)</li> <li>➤ Hypothyroidism (4A)</li> </ul>	

	<ul style="list-style-type: none"> <li>➤ Graves' disease (4A)</li> <li>➤ Acute/subacute/chronic thyroiditis (4A)</li> <li>➤ Thyroid disorders in pregnancy (4A)</li> <li>➤ Thyroid Cancer (3A)</li> <li>➤ Hiperparatiroidisme Seconds (4A)</li> <li>➤ Hipoparatiroidisme (4A)</li> <li>➤ Hiperkalsemia (4A)</li> <li>➤ Hipokalsemia (4A)</li> <li>➤ Osteoporosis/Osteomalacia (4A)</li> <li>➤ Dyslipidemia (4A)</li> <li>➤ Obesity (4A), Metabolic Syndrome</li> <li>➤ Tumor pituitary/tumor hipofisis (3A)</li> <li>➤ Prolaktinemia (3A), Akromegali (3A) Gigantisme (3A), Diabetes insipidus <i>Syndrome of Inappropriate antidiuretic hormone (SIADH)</i>, hormon pertumbuhan (3A)</li> <li>➤ Cushings disease (4A)</li> <li>➤ Growth hormone deficiency (3A)</li> <li>➤ Cushing syndrome (4A)</li> <li>➤ Addisons disease F (3B)</li> <li>➤ Adrenal Crisis (4A)</li> <li>➤ Hipogonadisme (3A)</li> <li>➤ Sexual dysfunction (3A)</li> <li>➤ Infertility (3A)</li> <li>➤ Erectile dysfunction (3A)</li> <li>➤ Ejaculatory Disorder (3A)</li> <li>➤ Primary and secondary amenorrhea</li> <li>➤ Polikistik ovarian sindrome</li> <li>➤ Turner Sindrome (3A)</li> <li>➤ Klinefelter syndrome (3A)</li> <li>➤ Congenital adrenal hyperplasia (CAH) (3A)</li> <li>➤ Marfan syndrome (3A)</li> <li>➤ Familial dyslipidemia (3A)</li> <li>➤ Multiple endocrine neoplasia 1 (3A)</li> <li>➤ Multiple endocrine neoplasia 2 (3A)</li> </ul>
Book	<p><b>Main:</b></p> <p>Harrison's Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2013.</p> <p>Williams Textbook of Endocrinology. Elsevier. 2015</p> <p>Greenspan's Basic &amp; Clinical Endocrinology 10<sup>th</sup>. Editioin. Lange. 2018</p>

		<b>Supporters:</b> <ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Consensus PERKENI 2015</li> <li>• ADA Journal Diabetes Care</li> <li>• Guide to Examination Techniques and Clinical Procedures of Internal Medicine Science. Kolegium of Internal Medicine. 2017</li> </ul>				
<b>Master Lecturer</b>		<ul style="list-style-type: none"> <li>○ DR. Dr. A. Makbul Aman, Sp.PD, K-EMD</li> <li>○ DR. Dr. Husaini Umar, Sp.PD, K-EMD</li> <li>○ DR. Dr. Himawan Sanusi, Sp.PD, K-EMD</li> <li>○ DR. Dr. Fabiola MS Adam, Sp.PD, K-EMD</li> </ul>				
<b>Subjectssyarat</b>						
Meeting	Sub-CLO (Final ability of each stage of learning)	Valuation		<b>Form of learning, LearningMethods, Assignment of PPDS Disease Science Participants In the Division of Endocrine Metabolic Diabetes, [Estimated Time]</b>		<b>Assessment Weight (%)</b>
		Indicator	Criteri a & Shape			
1	Able to make a clinical diagnosis, conduct management of Diabetes Mellitus independently, thoroughly and treat together	Completion describes the definition of DM type 1, DM type 2, Gestational DM, other type DM, hypoglycemia, diabetic ketoacidosis, hyperosmolar state hyperglycemia, complications of microangiopathy, and macroangiopathy, perioperative management in DM.	<b>Criteri on:</b> Accuracy and mastery  <b>Non-test form:</b> Online assignments  <b>Test Form:</b> - Essay	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week	Type 1 Diabetes Mellitus (4A) Type 2 Diabetes Mellitus (4A) Diabetes Mellitus Gestasional (4A) Other types of diabetes mellitus (4A) Ketoacidosis Diabetic (4A) Hiperosmolar Hiperglikemik State (4A) Hypoglycemia (4A) Complications of Microangiopathy and Macroangiopathy (4A)	

		<p>The completion explains Patomekanism, diagnostic procedures, and clinical disorders due to pancreatic hormone disorders.</p> <p>The completion of the procedure of the disease.</p> <p>Completion explains how prevention and promotion of health and referral due to pancreatic hormone disorders.</p>	<ul style="list-style-type: none"> <li>- MC Q</li> <li>- Mini cex</li> <li>- CBD</li> </ul>		<ul style="list-style-type: none"> <li>• Harrison's Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2015.</li> <li>• Williams Textbook of Endocrinology. Elsevier. 2015</li> <li>• Greenspan's Basic &amp; Clinical Endocrinology 10<sup>th</sup>. Editioin. Lange. 2018</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Consensus PERKENI 2015</li> <li>• ADA : Standards of Medical Care in Diabetes 2018. Diab Care. January 2018 Volume 41, Supplement 1. S1 – S156</li> </ul>	
2	Able to make a clinical diagnosis, perform management of thyroid gland disease independently, complete and treat together	Completion describes the definition of thyroid gland, struma diffusion / nodusa toxic and nontoxic, hyperthyroidism, hypothyroidism, Graves disease,	<b>Criteria:</b> Accuracy and mastery	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week	<ul style="list-style-type: none"> <li>• Harrison's Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2013.</li> </ul>	

	<p>acute / subacute / chronic thyroiditis, thyroid disorders in pregnancy, thyroid cancer, perioperative management in thyroid gland disease.</p> <p>The completion explains the patomechanism of the disease is related to thyroid, procedures and thyroid complications.</p> <p>Completion of screening and enforcement of clinical diagnosis of thyroid gland, parathyroid and gonad</p> <p>Completion determines the most appropriate referral of thyroid gland cases, and follows up after returning from referral.</p>	<p><b>Non-test form:</b> Online assignments</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>- Essay</li> <li>- MCQ</li> <li>- Mini cex</li> <li>- CBD</li> </ul>	<p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Williams Textbook of Endocrinology. Elsevier. 2015</li> <li>• Greenspan's Basic &amp; Clinical Endocrinology 10<sup>th</sup>. Editioin. Lange. 2018</li> <li>• Werner and Ingbar's. The Thyroid. A Fundamental and Clinical Text. 8<sup>th</sup> eds. Braverman L, Utiger R Editor. Lippincot William &amp; Wilins</li> </ul>	
3	Able to make a clinical diagnosis, perform the management of Parathyroid Gland disease independently,	Completion explains hyperparathyroid patomechanism, secondary hyperparathyroidism	<p><b>Criteria:</b> Accuracy and</p> <p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p>	<ul style="list-style-type: none"> <li>• Approach to and Hypocalcemia. Sundeep Koshla. Harrison's Endocrinology. 2<sup>nd</sup></li> </ul>	

	<p>complete and treat together</p> <p>, hypoparathyroidism, hypercalcemia, hypocalcemia, osteoporosis/osteomalacia and thyroiditis.</p> <p>Completion of recognizing and explaining the anatomy and abnormalities of the thyroid gland</p> <p>Completion of screening and enforcement of clinical diagnosis of parathyroid glands</p> <p>Completion determines the most appropriate referral of the case of the parathyroid gland and follows up after returning from the referral.</p>	<p>master y</p> <p><b>Non-test form:</b> Online assignments</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>- Essay</li> <li>- MCQ</li> <li>- Mini cex</li> <li>- CBD</li> </ul>	<p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Eds. Jameson L editor. Mc Graw Hill Med. Chapter 27. 2008</li> <li>• Harrison's Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2013.</li> <li>• Williams Textbook of Endocrinology. Elsevier. 2015</li> <li>• Greenspan's Basic &amp; Clinical Endocrinology 10<sup>th</sup>. Editioin. Lange. 2018</li> </ul>		
4	<p>Able to make a clinical diagnosis and provide preliminary therapy in hypothalamic and pituitary gland diseases that are not emergency departments.</p>	<p>Completeness explains patomechanism so as to recognize and explain the clinical picture of some abnormalities in the pituitary, pituitary, pituitary tumors / pituitary tumors,</p>	<p><b>Criteria:</b> Accuracy and master y</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p>	<ul style="list-style-type: none"> <li>• Harrison's Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2013.</li> </ul>	

	<p>Able to determine the most appropriate referral for the treatment of the next patient</p> <p>Able to follow up after returning from referral</p>	<p>Prolactinemia, Acromegaly, Gigantism, Diabetes insipidus, <i>Syndrome of Inappropriate antidiuretic hormone (SIADH)</i></p> <p>Completeness knows the most appropriate way to get more information about some pituitary and pituitary disorders.</p>	<p><b>Non-test form:</b> Online assignments</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>- Essasy</li> <li>- MCQ</li> <li>- Mini cex</li> <li>- CBD</li> </ul>	<p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Williams Textbook of Endocrinology. Elsevier. 2015</li> <li>• Greenspan's Basic &amp; Clinical Endocrinology 10<sup>th</sup>. Edition. Lange. 2018</li> <li>• Disorders of Anterior Hypophyse and Neurohypophyse. Melmed S and Robetson G : Harrison's Endocrinology. 2<sup>nd</sup> Eds. Jameson L editor. Mc Graw Hill Med. Chapter 2 and 3. 2008</li> </ul>	
5	<p>Able to make a clinical diagnosis and perform management of Adrenal Gland disease independently, thoroughly and treated together</p>	<p>Completion explains the definitions, patomechanism, cushing diseases, adrenal crisis, growth hormone deficiency, Cushings disease, Addisons disease, Feoromasitoma.</p> <p>The completion explains the picture of the clinic and some adrenal disorders.</p> <p>Able to prevent and promote health</p>	<p><b>Criteria:</b> Accuracy and mastery</p> <p><b>Non-test form:</b> Online assignments</p> <p><b>Test Form:</b></p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b></p>	<ul style="list-style-type: none"> <li>• Harrison's Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2013.</li> <li>• Williams Textbook of Endocrinology. Elsevier. 2015</li> <li>• Greenspan's Basic &amp; Clinical Endocrinology 10<sup>th</sup>. Editioin. Lange. 2018</li> <li>• Disorders of Adrenal Cortex and</li> </ul>	

		Completion of screening and enforcement of clinical diagnosis of some adrenal disorders	- Essa y - MC Q - Mini cex - CBD	3 x 12 hours/ week	Pheochromacytoma, William Gh, and Gluhy R :. Harrison`s Endocrinology. 2 <sup>nd</sup> Eds. Jameson L editor. Mc Graw Hill Med. Chapter 5 and 6. 2008	
6	<p>Able to make a clinical diagnosis of reproductive abnormalities and provide preliminary therapy in non-emergency situations.</p> <p>Able to determine the most appropriate referral for the treatment of the next patient</p> <p>Able to follow up after returning from referral</p>	<p>Completion explains the definition, patomechanism, the behavior of Male Hypogonadism, Sexual Dysfunction, Infertility, Erectile disorders, ejaculation disorders, primary and secondary amenorrhea and Polycystic ovarian syndrome.</p> <p>The completion explains the picture of the clinic and some reproductive abnormalities.</p> <p>Able to prevent and promote health</p> <p>Completion of screening and enforcement of clinical diagnosis of</p>	<p><b>Criteri on:</b> Accuracy and mastery</p> <p><b>Non-test form:</b> Online assignments</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>- Essa y</li> <li>- MC Q</li> <li>- Mini cex</li> <li>- CBD</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Harrison`s Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2013.</li> <li>• Williams Textbook of Endocrinology. Elsevier. 2015</li> <li>• Greenspan`s Basic &amp; Clinical Endocrinology 10<sup>th</sup>. Editioin. Lange. 2018</li> <li>• Disorders of Testes and Male reproductive system : Endocrinology. Bhasin S, And Jameson L. Harrison`s Endocrinology. 2<sup>nd</sup> Eds. Jameson L editor. Mc Graw Hill Med. Chapter</li> </ul>	

		<p>some reproductive disorders</p> <p>Completion determines the most appropriate referral of some cases of gynecological abnormalities and follows up after returning from referral.</p>			8, 12, and 15.. 2008	
7	Able to make clinical diagnosis and perform management of Lipid abnormalities independently, thoroughly and treated together	<p>Completion explainsthe understanding and patomeomekanism of lipid metabolism, Dyslipidemia, Obesity</p> <p>Completion ofknowing the most appropriate way to get more information about lipid metabolism disorders</p> <p>Completion ofscreening and enforcement of lipid metabolism</p> <p>Completion determines the most appropriate reference of lipid</p>	<p><b>Criteria:</b> Accuracy and master y</p> <p><b>Non-test form:</b> Online assignments</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>- Essa y</li> <li>- MC Q</li> <li>- Minicex</li> <li>- CBD</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Reparat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Harrison's Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2013.</li> <li>• Williams Textbook of Endocrinology. Elsevier. 2015</li> <li>• Greenspan's Basic &amp; Clinical Endocrinology 10<sup>th</sup>. Editiion. Lange. 2018</li> <li>• Pereni Lipid Consensus 2013</li> <li>• Disorders of Lipoprotein metabolism. Rader D and Hobbs H. Harrison's Endocrinology. 2<sup>nd</sup> Eds. Jameson L editor. Mc Graw</li> </ul>	

		metabolism cases so that they can continue after returning from referral.			Hill Med. Chapter 21. 2008	
8	<p>Able to make a clinical diagnosis of genetic abnormalities and provide preliminary therapy in non-emergency situations.</p> <p>Able to determine the most appropriate referral for the treatment of the next patient</p> <p>Able to follow up after returning from referral</p>	<p>Completion explains definitions, patomechanism, Turner syndrome, Klinefelter syndrome and Congenital adrenal hyperplasia (CAH), Marfan syndrome, Familial dyslipidemia, Multiple endocrine neoplasia 1, Multiple endocrine neoplasia 2</p> <p>The completion explains the picture of the clinic and some genetic disorders.</p> <p>Able to prevent and promote health</p> <p>Completion of screening and enforcement of clinical diagnosis of some Genetic disorders</p>	<p><b>Criteria:</b> Accuracy and mastery</p> <p><b>Non-test form:</b> Online assignments</p> <p><b>Test Form:</b> - Essay - MCQ - Mini cex - CBD</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>Divisional College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Referat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Harrison's Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2013.</li> <li>• Williams Textbook of Endocrinology. Elsevier. 2015</li> <li>• Greenspan's Basic &amp; Clinical Endocrinology 10<sup>th</sup>. Editioin. Lange. 2018</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Multiple endocrine Neoplasia and Paraneoplastic ENDocrine. Harrison's Endocrinology. 2<sup>nd</sup> Eds. Jameson L editor. Mc Graw Hill Med. Chapter 23-24. 2008</li> </ul>	

		Completion determines the most appropriate referral of some cases of genetic disorders and follows up after returning from referral				
9	Able to perform clinical skills competence and assess the results of these skills independently and thoroughly	Completion of clinical skills Blood glucose examination, Continuous intravenous insulin administration, Blood sugar monitoring during intravenous insulin drip /continuous administration ( <i>Glucose monitoring during intravenous insulin therapy</i> ), Diabetic foot wound care(debridement), <i>Ankle brachial index</i> (ABI), Fine needle aspiration for thyroid nodules Interpretation, bone mass density examination / <i>Bone Mineral Density Interpretation</i> (BMD) by Dual energy X-ray	<b>Criteria:</b> Accuracy and mastery  <b>Non-test form:</b> Online assignments  <b>Test Form:</b> - Essay - MCQ - Mini cex - CBD	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>Divisional College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week	<ul style="list-style-type: none"> <li>• Panduan Tech Examination and Clinical Procedures of Internal Medicine. Kolegium of Internal Medicine. 2017</li> </ul>	

	<p><i>Absorptiometry (DXA)</i></p> <p>The completion explains the picture of the clinic and some of the clinic's skills disorders.</p> <p>The completion of health prevention and promotion</p> <p>Completion of screening and enforcement of clinical diagnosis some results</p> <p>Clinical skills</p>			
<b>Final Value:</b>				<b>100 %</b>

**85 - 100= A**  
**80 - < 85= A Minus**  
**75 - < 80= B Plus**  
**70 - < 75= B**  
**65 - <70= B Minus**  
**55 - < 65= C**  
**00 - < 55= E**

	Name of college	: Hasanuddin University				Document Code				
	Name of Faculty	: Medicine								
	Department Name	: The Science of Internal Medicine								
	Prodi Name	: The Science of Internal Medicine								
<b>SEMESTER LEARNING PLAN</b>										
COURSES (MK)		CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting				
Nephrology and hypertension		20C015213 08	The Science of Internal Medicine	8	3,4,5,6	10 October 2019				
AUTHORIZATION	RPS Developer		Coordinator RMK		Chairman of PRODI					
	1. Prof. Dr. dr. Syakib Bakri, Sp.PD, KGH 2. Dr. dr. Hashim Kasim, Sp.PD, KGH 3. Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, SpGK 4. Dr. St. Rabiu Zatalia R, Sp.PD, KGH		Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, SpGK		Dr. dr. Hashim Kasim, Sp.PD, KGH					
Learning Achievement (CP)	ILO PRODI charged to MK									
	S1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals. (S1)								
	C2	Students are able to perform anamnesis, physical examination, laboratory examinations, and procedures that are appropriate to the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> (C2).								

C3	<p>Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics.</p> <p>(C 3)</p>	
<b>Achievement of Course Learning (CLO)</b>		
<p>CLO1 Participants ppds disease science in able to make a journal analysis and make case reports or scientific work related to the field of kidney hypertension (S1)</p>		
<p>CLO2 Participants ppds disease science in able to manage patients with internal diseases ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations and diagnosis and diagnosis of appeal and preparing a plan for the management of patients in the field of kidney hypertension (C2)</p>		
<p>CLO3 Participants ppds disease science in able to perform clinical skills competency action patients in the field of kidney hypertension (C3)</p>		
No.	Sub-Achievement of Learning Courses (Sub CLO)	College Topics
Sub-CLO 1	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate glomerular disease and its procedures, clinical picture of the disease, and know the most appropriate way to get more information about glomerular disease.</p> <p>b. Able to make a clinical diagnosis (occupational diagnosis) of glomerular disease. (2)</p> <p>c. Able to make a clinical diagnosis and provide preliminary therapy of glomerular disease in non-emergency situations. (3A)</p> <p>d. Able to make a clinical diagnosis and provide preliminary therapy to glomerular disease with emergency emergencies to save lives or prevent the severity and/or disability in patients. (3B)</p>	Acute Nephrotic Syndrome (3A)
	<i>Rapid Progressive Glomerulonephritis (3B)</i>	
	Chronic Nephrotic Syndrome (3A)	
	Nephrotic syndrome (3A)	
	Hereditary Nephropathy (3A)	
	Renal amyloidosis (2)	
	Acute Glomerulonefritis (3A)	
	Glomerulonephritis kronik (3A)	

		<p>e. Able to determine the most appropriate referral for the treatment of the next patient. (2,3A,3B)</p> <p>f. Able to follow up after returning from referral. (2,3A,3B)</p>	
	Sub-CLO 2	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate tubulo-interstitial kidney disease and its procedures, clinical picture of the disease, and know the most appropriate way to get more information about tubulo-interstitial kidney disease.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy of tubulo-interstitial kidney disease in non-emergency conditions. (3A)</p> <p>c. Able to make a clinical diagnosis and provide preliminary therapy on tubulo-interstitial kidney disease with emergency situations to save lives or prevent severity and/or disability in patients. (3B)</p> <p>d. Able to determine the most appropriate referral for the treatment of the next patient. (3A,3B)</p> <p>e. Able to follow up after returning from referral. (3A,3B)</p>	<p>Acute tubular necrosis (3B)</p> <p>Chronic tubulo-interstitial nephritis (3A)</p> <p>Reflux and obstructive uropathy (3B)</p> <p>Tubulo-interstitial abnormalities due to medications and heavy metals (3B)</p>
	Sub-CLO 3	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate kidney failure and its procedures, picture the clinic of the disease, and know the most appropriate way to get more information about kidney failure.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy to kidney failure with emergency emergencies to save lives or prevent severity and/or disability in patients. (3B)</p> <p>c. Able to determine the most appropriate referral for the treatment of the next patient. (3B)</p> <p>d. Able to follow up after returning from referral. (3B)</p> <p>e. Able to make clinical diagnoses and perform management of kidney failure disease independently and completely, as well as treatment together. (4A)</p>	<p><i>Acute kidney injury degrees 1 and 2. (4A)</i></p> <p><i>Acute kidney injury derajat 3. (3B)</i></p> <p><i>Chronic kidney disease degrees 1-4. (4A)</i></p> <p><i>Chronic kidney disease degree 5. (3B)</i></p>

	Sub-CLO 4	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate other urinary tract disorders and their procedures, picture the clinic of the disease, and know the most appropriate way to get more information about other urinary tract disorders.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy of other urinary tract disorders in non-emergency situations. (3A)</p> <p>c. Able to determine the most appropriate referral for the treatment of the next patient. (3A)</p> <p>d. Able to follow up after returning from referral. (3A)</p> <p>e. Able to make a clinical diagnosis and perform management of other urinary tract disorders independently and completely, as well as joint treatment. (4A)</p> <p>f. Able to make a clinical diagnosis and perform management of other urinary tract disorders independently and completely, as well as joint treatment in cases more complex than 4A. (4A*)</p>	<p>Kidney stone. (4A)</p> <p>Urinary tract stones (vesika urinaria, ureters and urethra). (4A)</p> <p>Kolik renal. (4A)</p> <p>Neuromuscular dysfunction of the urinary tract (3A)</p> <p>Urethritis and urethra syndrome (4A)</p> <p>Striktur urethra (3A)</p> <p>Acute pielonefritis (4A)</p> <p>Pyelonephritis kronik (4A)</p> <p>Lower urinary tract infections (acute and chronic cystitis) (4A*)</p>
	Sub-CLO 5	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate male genitalia organ abnormalities and their procedures, clinical picture of the disease, and know the most appropriate way to get more information about male genitalia organ abnormalities.</p> <p>b. Able to make a clinical diagnosis and perform the management of male genitalia organ abnormalities independently and completely, as well as joint care. (4A)</p>	Hyperplasia of the prostate. (4A)
	Sub-CLO 6	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate congenital kidney abnormalities and their procedures, clinical picture of the disease, and know the most appropriate way to</p>	Ginjal polikistik. (3A)

		<p>get more information about congenital kidney abnormalities.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy of congenital kidney abnormalities in non-emergency situations. (3A)</p> <p>c. Able to determine the most appropriate referral for the treatment of the next patient. (3A)</p> <p>d. Able to follow up after returning from referral. (3A)</p>	Horseshoe kidneys. (3A)
Sub-CLO 7		<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate kidney malignancies and their procedures, picture the clinic of the disease, and know the most appropriate way to get more information about kidney malignancies.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy of kidney malignancy in non-emergency situations. (3A)</p> <p>c. Able to determine the most appropriate referral for the treatment of the next patient. (3A)</p> <p>d. Able to follow up after returning from referral. (3A)</p>	Tumor Wilms. (3A)
			Renal cell carcinoma. (3A)
Sub-CLO 8		<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate metabolic disorders and their procedures, picture disease clinics, and know the most appropriate way to get more information about metabolic disorders.</p> <p>b. Able to make clinical diagnoses and perform management of metabolic disorders independently and completely, as well as joint care. (4A)</p>	Impaired fluids, electrolytes and acid bases. (4A)
Sub-CLO 9		<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate hypertension and its procedures, clinical picture of the disease, and know the most appropriate way to get more information about hypertension.</p>	Primary hypertension (4A*)
			Secondary hypertension (4A)

		<p>b. Able to make clinical diagnoses and perform hypertension management independently and completely, as well as joint care. (4A)</p> <p>c. Able to make clinical diagnoses and perform management of hypertension independently and completely, as well as joint treatment in cases more complex than 4A. (4A*)</p>	Hypertension in pregnancy (4A)
	Sub-CLO 10	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate diabetic kidney disease and its procedures, clinical overview of the disease, and know the most appropriate way to get more information about diabetic kidney disease.</p> <p>b. Able to make clinical diagnosis and conduct management of diabetic kidney disease independently and completely, as well as treatment together. (4A)</p>	Diabetic kidney disease (4A)
	Sub-CLO 11	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate hepatorenal syndrome and its procedures, clinical picture of the disease, and know the most appropriate way to get more information about hepatorenal syndrome.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy in hepatorenal syndrome with emergency situations to save lives or prevent severity and/or disability in patients. (3B)</p> <p>c. Able to determine the most appropriate referral for the treatment of the next patient. (3B)</p> <p>d. Able to follow up after returning from referral. (3B)</p>	Hepatorenal syndrome (3B)
	Sub-CLO 12	Able to master theoretical knowledge of the skills of renal hypertension with an emphasis on clinical reasoning and problem solving and the opportunity to see and observe these skills in the form of demonstrations or direct implementation in patients / communities. (2)	<p>Hemodialysis (2)</p> <p>Peritoneal continuous self-dialysis (Tenchkoff catheter) (2)</p> <p>Kidney transplantation (management in the field of pre- and post internal medicine) (2)</p> <p>12 Installation of double lumen cateter (2)</p> <p>Kidney biopsy (2)</p> <p>Kidney cyst aspiration (2)</p> <p>Peritoneal acute dialysis (2)</p>

			<i>Renal sympathetic denervation (2)</i>
	Sub-CLO 13	<p>a. Mastering the theoretical knowledge of clinical skills of renal hypertension including biomedical background and psychosocial impact of these skills, the opportunity to see and observe these skills in the form of demonstration or direct implementation in patients / communities, and practice these skills on props and / or standardized patients. (3)</p> <p>b. Able to perform clinical skills of renal hypertension independently. (4)</p>	<p>12 Kidney and urinary tract ultrasound (3)</p> <p>Pemasangan folley cateter (4A)</p>
	<p>Kidney hypertension is one of the divisions in the department of Internal Medicine that focuses on diseases in the field of Renal Hypertension so that learners are able to master theoretical knowledge and clinical skills in dealing with diseases in the field of renal hypertension.</p> <p>This course lasts for 2 months which is carried out in stage 2 of student education in the Department of Internal Medicine. His educational activities through face-to-face process, <i>bedside teaching</i> and discussion of outpatient cases in renal hypertensive polyclinics, Hemodialysis room and hospitalization at Wahidin Sudirohusodo Hospital, as well as other networking hospitals. At the end of this stase it is expected that PPDS can achieve the competencies as stipulated in the Competency Standards of Internal Disease Science Specialists in the field of Renal Hypertension.</p>		
Study Materials/Le arning Materials	1	Glomerular disease	
	2	Tubulo-interstitial kidney disease	
	3	Kidney failure	
	4	Other urinary tract disorders	
	5	Male genitalia abnormalities	
	6	Congenital viance of the kidneys	
	7	Kidney malignancy	
	8	Metabolic disorders	
	9	Hypertension	
	10	Diabetic kidney disease	
	11	Hepatorenal syndrome	
	12	Clinical skills of hypertensive kidney	
Book	Main:		
	<p>7. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed). California: Elsevier.</p> <p>8. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p>		

	<p>9. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p> <p>Supporter:</p> <ol style="list-style-type: none"> <li>1. Kidney Disease: Improving Global Outcomes (KDIGO) CKD Work Group. KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. <i>Kidney Int (Suppl)</i>. 2013; 3: 1–150.</li> <li>2. National Kidney Foundation (NKF) Kidney Disease Outcome Quality Initiative (K/DOQI) Advisory Board: K/DOQI Clinical Practise Guidelines for Chronic Kidney Disease: Evaluation, Classification, and Stratification. <i>Kidney Disease Outcome Quality Initiative. Am J Kidney Dis.</i> 2002; 39:(Suppl 2):S1-S246.</li> <li>3. The 7<sup>th</sup> Report of The Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. The JNC report. <i>JAMA</i>. 2003; 289:2560-2572.</li> <li>4. 2014 Evidence-based guideline for the management of high blood pressure in adults. Report from the panel members appointed to the Eight Joint National Committee (JNC 8). <i>JAMA</i>. 2014; 311 (5): 507-520.</li> <li>5. 2017 Guideline for the prevention, detection, evaluation and management of high blood pressure in adults. American college of cardiology. Available at: <a href="http://ACC.org/GMSHBP">http://ACC.org/GMSHBP</a>.</li> <li>6. Consensus PERNEFRI</li> <li>7. Guidance on examination techniques and clinical procedures of internal medicine. For students of the program doctors specialist in internal medicine. Kolegium of Internal Medicine. Department of Disease Sciences In FK UI / RSCM. 2017.</li> </ol>						
Master Lecturer	<ol style="list-style-type: none"> <li>1. Prof. Dr. dr. Syakib Bakri, Sp.PD, KGH</li> <li>2. Dr. dr. Hashim Kasim, Sp.PD, KGH</li> <li>3. Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, SpGK</li> <li>4. Dr.. St. Rabiul Zatalia R, Sp.PD, KGH</li> <li>5. dr. Nasrum Machmud, SpPD, K-GH</li> <li>6. dr. Akhyar Albaar, SpPD</li> <li>7. dr. Taha Albaar, SpPD</li> </ol>						
Prerequisite courses	<p><b>Pass Module Stage 1:</b> Professional Ethics, Biostatistics &amp; Computer Statistics, Research Methods, Molecular Biology, Basic Diagnostic Skills Module (Anamnesis, Physical Examination, Basic Supporting Examination), Pathogenesis and Pathophysiology Module, Clinical Reasoning and POMR Module, Emergency Personnel Module (emergency action and handling of cases), Basic Medical Skills Module (non-invasive and invasive measures and Superior Competence (HIV/AIDS).</p>						
Meeting to	<p>Sub CLO</p> <p>(Final ability of each stage of learning)</p>	Valuation		Form of Learning; Learning Methods; Student assignments; Estimated time		Learning Materials (Library)	Assessment Weight (%)
		Indicator	Criteria and Shapes	Luring (offline)	Daring (online)		
1	2	3	4	5	6	7	8

1	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate glomerular disease and its procedures, clinical picture of the disease, and know the most appropriate way to get more information about glomerular disease.</p> <p>b. Able to make a clinical diagnosis (occupational diagnosis) of glomerular disease. (2)</p> <p>c. Able to make a clinical diagnosis and provide preliminary therapy of glomerular disease in non-emergency situations. (3A)</p> <p>d. Able to make a clinical diagnosis and provide preliminary therapy to glomerular disease with emergency emergencies to save lives or prevent the severity and/or disability in patients. (3B)</p>	<p>Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Glomerular Disease, such as Acute Nephrotic Syndrome, <i>Rapid Progressive Glomerulonephritis</i>, Chronic Nephrotic Syndrome, Nephrotic Sndroma, Hereditary Nephropathy, Renal amyloidosis, acute glomerulonephritis, and chronic glomerulonephritis</p>	<p><b>Criterion:</b></p> <p>8 = Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly,</p> <p>4= unable to explain in full</p> <p>0 = unable to explain</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>• Ujian mini-CEX, CbD.</li> <li>• Pretest and post test</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p>	<p><b>Form:</b> Structured Learning and Self-study</p> <p><b>Method:</b> Reference learning / lecture materials</p>	<p>a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed). California: Elsevier.</p> <p>b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p> <p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p> <p>d. Kidney Disease: Improving Global Outcomes (KDIGO) CKD Work Group. KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. <i>Kidney Int (Suppl)</i>. 2013; 3: 1–150.</p>	<p>Attitude 30%, Pretest 10%, Mini-CEX: 10%, CBD: 10%, Jurnal: 5%, Post test 30%</p>
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	<p>e. Able to determine the most appropriate referral for the treatment of the next patient. (2,3A,3B)</p> <p>f. Able to follow up after returning from referral. (2,3A,3B)</p>		<ul style="list-style-type: none"> <li>1 Scientific Journal</li> </ul>	<p><b>Practicum (Take Care of the Hospital):</b></p> <p>3 x 12 hours/ week</p>		
2	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate tubulo-interstitial kidney disease and its procedures, clinical picture of the disease, and know the most appropriate way to get more information about tubulo-interstitial kidney disease.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy of tubulo-interstitial kidney disease in non-emergency conditions. (3A)</p> <p>c. Able to make a clinical diagnosis and provide preliminary therapy on tubulo-interstitial kidney disease with</p>	<p>Completion in understanding and able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and procedures independently and thoroughly about Tubulo-interstitial kidney disease such as acute tubular necrosis, chronic tubule-interstitial nephritis, reflux and obstructive uropathy, tubule abnormalities, interstitial due to drugs and heavy metals</p>	<p><b>Criterion:</b></p> <p>8 = Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly,</p> <p>4 = unable to explain in full</p> <p>0 = unable to explain</p>	<p><b>Public Lecture:</b></p> <p>1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b></p> <p>1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b></p> <p>3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b></p> <p>2 x 50 minutes/ week</p> <p><b>Test Form:</b></p>	<p><b>Form:</b></p> <p>Structured Learning and Self-study</p> <p><b>Method:</b></p> <p>Reference learning / lecture materials</p>	<p>a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed). California: Elsevier.</p> <p>b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p> <p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p> <p>d. Kidney Disease: Improving Global Outcomes (KDIGO) CKD Work Group. KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney</p>

	<p>emergency situations to save lives or prevent severity and/or disability in patients. (3B)</p> <p>d. Able to determine the most appropriate referral for the treatment of the next patient. (3A,3B)</p> <p>e. Able to follow up after returning from referral. (3A,3B)</p>		<p>a. Ujian mini-CEX, CbD.</p> <p>b. Pretest and post test</p> <p>c. 1 Scientific Journal</p>	<p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>		<p>Disease. <i>Kidney Int (Suppl)</i>. 2013; 3: 1–150.</p>	
3	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate kidney failure and its procedures, picture the clinic of the disease, and know the most appropriate way to get more information about kidney failure.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy to kidney failure with emergency emergencies to save lives or prevent severity and/or</p>	<p>Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examinations, and procedures independently and thoroughly about Kidney Failure such as acute kidney failure degrees 1 and 2, acute kidney failure degree 3, 1-4 degrees of chronic kidney failure, chronic kidney failure degrees 5</p>	<p><b>Criterion:</b> 8 = Able to explain the definition, pathophysiology of diagnosis and complications, supporting examinations, and procedures independently and thoroughly,</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p>	<p><b>Form:</b> Structured Learning and Self-study</p> <p><b>Method:</b> Reference learning / lecture materials</p>	<p>a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed). California: Elsevier.</p> <p>b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p> <p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p> <p>d. Kidney Disease: Improving Global</p>	

	<p>disability in patients. (3B)</p> <p>c. Able to determine the most appropriate referral for the treatment of the next patient. (3B)</p> <p>d. Able to follow up after returning from referral. (3B)</p> <p>e. Able to make clinical diagnoses and perform management of kidney failure disease independently and completely, as well as treatment together. (4A)</p>		<p>4= unable to explain in full 0 = unable to explain</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>a. Ujian mini-CEX, CbD.</li> <li>b. Pretest and post test</li> <li>c. 1 Scientific Journal</li> </ul>	<p><b>Seminar (Journal/case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>		<p>Outcomes (KDIGO) CKD Work Group. KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. <i>Kidney Int (Suppl)</i>. 2013; 3: 1–150.</p> <p>e. National Kidney Foundation (NKF) Kidney Disease Outcome Quality Initiative (K/DOQI) Advisory Board: K/DOQI Clinical Practise Guidelines for Chronic Kidney Disease: Evaluation, Classification, and Stratification. Kidney Disease Outcome Quality Initiative. <i>Am J Kidney Dis.</i> 2002; 39:(Suppl 2):S1-S246.</p> <p>f. Consensus PERNEFRI</p>	
4	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and</p>	<p>Completion in understanding and being able to explain the definition,</p>	<p><b>Criterion:</b> 8 = Able to explain the</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p>	<p><b>Form:</b> Structured Learning</p>	<p>a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed).</p>	

	<p>evaluate other urinary tract disorders and their procedures, picture the clinic of the disease, and know the most appropriate way to get more information about other urinary tract disorders.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy of other urinary tract disorders in non-emergency situations. (3A)</p> <p>c. Able to determine the most appropriate referral for the treatment of the next patient. (3A)</p> <p>d. Able to follow up after returning from referral. (3A)</p> <p>e. Able to make a clinical diagnosis and perform management of other urinary tract disorders independently and completely, as well as joint treatment. (4A)</p> <p>f. Able to make a clinical diagnosis and</p>	<p>pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about other urinary tract disorders such as neuromuscular dysfunction of the urinary tract, Urethritis and urethral syndrome, urethral stricture, acute pyelonephritis, chronic pyelonephritis, Lower urinary tract infections (acute and chronic cystitis)</p>	<p>definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly, 4 = unable to explain in full 0 = unable to explain</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>• Ujian mini-CEX, CbD.</li> <li>• Pretest and post test</li> <li>• 1 Scientific Journal</li> </ul>	<p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Reparat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b></p>	<p>and Self-study</p> <p><b>Method:</b> Reference learning / lecture materials</p>	<p>California: Elsevier.</p> <p>b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p> <p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p>	
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	perform management of other urinary tract disorders independently and completely, as well as joint treatment in cases more complex than 4A. (4A*)			3 x 12 hours/ week		
5	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate male genitalia organ abnormalities and their procedures, clinical picture of the disease, and know the most appropriate way to get more information about male genitalia organ abnormalities.</p> <p>b. Able to make a clinical diagnosis and perform the management of male genitalia organ abnormalities independently and completely, as well as joint care. (4A)</p>	<p>Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and independent and complete implementation of Prostatic Hyperplasia</p>	<p><b>Criterion:</b></p> <p>9 = Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly,</p> <p>4.5 = unable to explain in full</p> <p>0 = unable to explain</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p>	<p><b>Form:</b> Structured Learning and Self-study</p> <p><b>Method:</b> Reference learning / lecture materials</p>	<p>a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed). California: Elsevier.</p> <p>b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p> <p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p>

			<b>Test Form:</b> <ul style="list-style-type: none"> <li>• Ujian mini-CEX, CbD.</li> <li>• Pretest and post test</li> <li>• 1 Scientific Journal</li> </ul>	<b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week		
6	a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate congenital kidney abnormalities and their procedures, clinical picture of the disease, and know the most appropriate way to get more information about congenital kidney abnormalities.  b. Able to make a clinical diagnosis and provide preliminary therapy of congenital kidney abnormalities	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about congenital kidney abnormalities such as polycystic kidneys and horseshoe kidneys	<b>Criterion:</b> 8 = Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly,	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week	<b>Form:</b> Structured Learning and Self-study  <b>Method:</b> Reference learning / lecture materials	a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10 <sup>th</sup> ed). California: Elsevier.  b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20 <sup>th</sup> ed). New York: McGraw Hill Education.  c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i> . (Edition V). Jakarta: Interna Publishing.

	<p>c. in non-emergency situations. (3A)</p> <p>d. Able to determine the most appropriate referral for the treatment of the next patient. (3A)</p> <p>d. Able to follow up after returning from referral. (3A)</p>		<p>4= unable to explain in full 0 = unable to explain</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>a. Ujian mini-CEX, CbD.</li> <li>b. Pretest and post test</li> <li>c. 1 Scientific Journal</li> </ul>	<p><b>Seminar (Journal/case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>		<p>d. Kidney Disease: Improving Global Outcomes (KDIGO) CKD Work Group. KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. <i>Kidney Int (Suppl)</i>. 2013; 3: 1–150.</p>	
7	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate kidney malignancies and their procedures, picture the clinic of the disease, and know the most appropriate way to get more information</p>	<p>Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about malignancies such as</p>	<p><b>Criterion:</b> 8 = Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p>	<p><b>Form:</b> Structured Learning and Self-study</p> <p><b>Method:</b> Reference learning / lecture materials</p>	<p>a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed). California: Elsevier.</p> <p>b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p>	

	<p>about kidney malignancies.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy of kidney malignancy in non-emergency situations. (3A)</p> <p>c. Able to determine the most appropriate referral for the treatment of the next patient. (3A)</p> <p>d. Able to follow up after returning from referral. (3A)</p>	<p>Wilms Tumor, renal cell carcinoma</p>	<p>, and implementation independently and thoroughly,</p> <p>4= unable to explain in full</p> <p>0 = unable to explain</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>• Ujian mini-CEX, CbD.</li> <li>• Pretest and post test</li> <li>• 1 Scientific Journal</li> </ul>	<p><b>Seminar (Refarat/Case):</b></p> <p>3 x 180 minutes/ week</p> <p><b>Seminar (Journal/case):</b></p> <p>2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b></p> <p>5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b></p> <p>3 x 12 hours/ week</p>	<p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p>	
8	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and</p>	<p>Completion in understanding and being able to explain the definition,</p>	<p><b>Criterion:</b></p> <p>9 = Able to explain the</p>	<p><b>Public Lecture:</b></p> <p>1 x 100 minutes/ week</p>	<p><b>Form:</b> Structured Learning</p>	<p>a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed).</p>

	<p>evaluate metabolic disorders and their procedures, picture disease clinics, and know the most appropriate way to get more information about metabolic disorders.</p> <p>b. Able to make clinical diagnoses and perform management of metabolic disorders independently and completely, as well as joint care. (4A)</p>	<p>pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about fluid, electrolyte and acid-base disorders</p>	<p>definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly, 4.5 = unable to explain in full 0 = unable to explain</p>	<p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Reparat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>a. Ujian mini-CEX, CbD.</li> <li>b. Pretest and post test</li> <li>c. 1 Scientific Journal</li> </ul>	<p>and Self-study</p> <p><b>Method:</b> Reference learning / lecture materials</p>	<p>California: Elsevier.</p> <p>b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p> <p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p>	
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				3 x 12 hours/ week			
9	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate hypertension and its procedures, clinical picture of the disease, and know the most appropriate way to get more information about hypertension.</p> <p>b. Able to make clinical diagnoses and perform hypertension management independently and completely, as well as joint care. (4A)</p> <p>c. Able to make clinical diagnoses and perform management of hypertension independently and completely, as well as joint treatment in cases more complex than 4A. (4A*)</p>	<p>Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and independent and complete implementation of hypertension such as primary hypertension, secondary hypertension, and hypertension in pregnancy</p>	<p><b>Criterion:</b></p> <p>9 = Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly,</p> <p>4.5 = unable to explain in full</p> <p>0 = unable to explain</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpati- ent visitation/consulta- tion):</b> 5 x 8 hours/ week</p>	<p><b>Form:</b> Structur ed Learning and Self- study</p> <p><b>Method:</b> Referenc e learning / lecture materials</p>	<p>a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed). California: Elsevier.</p> <p>b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p> <p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p> <p>d. The 7<sup>th</sup> Report of The Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure. The JNC report. JAMA. 2003; 289:2560-2572.</p> <p>e. 2014 Evidence-based guideline for the management of high blood</p>	

			c. post test 1 Scientific Journal	<b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week		pressure in adults. Report from the panel members appointed to the Eight Joint National Committee (JNC 8). JAMA. 2014; 311 (5): 507-520. f. 2017 Guideline for the prevention, detection, evaluation and management of high blood pressure in adults. American college of cardiology. Available at: <a href="http://ACC.org/GMSHBP">http://ACC.org/GMSHBP</a> .	
10	a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate diabetic kidney disease and its procedures, clinical overview of the disease, and know the most appropriate way to get more information about diabetic kidney disease.	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and independent and complete management of diabetic kidney disease	<b>Criterion:</b> 9 = Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week	<b>Form:</b> Structured Learning and Self-study  <b>Method:</b> Reference learning / lecture materials	a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10 <sup>th</sup> ed). California: Elsevier. b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20 <sup>th</sup> ed). New York: McGraw Hill Education.	

	<p>b. Able to make clinical diagnosis and conduct management of diabetic kidney disease independently and completely, as well as treatment together. (4A)</p>		<p>implementation independently and thoroughly, 4.5 = unable to explain in full 0 = unable to explain</p> <p><b>Test Form:</b></p> <ol style="list-style-type: none"> <li>Ujian mini-CEX, CbD.</li> <li>Pretest and post test</li> <li>1 Scientific Journal</li> </ol>	<p><b>Seminar (Refarat/Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p> <p>d. Kidney Disease: Improving Global Outcomes (KDIGO) CKD Work Group. KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. <i>Kidney Int (Suppl)</i>. 2013; 3: 1–150.</p> <p>e. National Kidney Foundation (NKF) Kidney Disease Outcome Quality Initiative (K/DOQI) Advisory Board: K/DOQI Clinical Practise Guidelines for Chronic Kidney Disease: Evaluation, Classification, and Stratification. Kidney Disease Outcome Quality Initiative. <i>Am J Kidney Dis.</i> 2002;</p>	
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						39:(Suppl 2):S1-S246. f. Consensus PERNEFRI	
11	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate hepatorenal syndrome and its procedures, clinical picture of the disease, and know the most appropriate way to get more information about hepatorenal syndrome.</p> <p>b. Able to make a clinical diagnosis and provide preliminary therapy in hepatorenal syndrome with emergency situations to save lives or prevent severity and/or disability in patients. (3B)</p> <p>c. Able to determine the most appropriate referral for the treatment of the next patient. (3B)</p>	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and independent and complete management of hepatorenal syndrome	<p><b>Criterion:</b></p> <p>8 = Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly, 4= unable to explain in full</p> <p>0 = unable to explain</p> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>• Ujian mini-</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Reparat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient</b></p>	<p><b>Form:</b> Structured Learning and Self-study</p> <p><b>Method:</b> Reference learning / lecture materials</p>	<p>a. Skorecki, K. (2016). <i>Brenner and Rector's The Kidney</i> (10<sup>th</sup> ed). California: Elsevier.</p> <p>b. Jameson, J.L, (2018). <i>Harrison's Principles of Internal Medicine</i> (20<sup>th</sup> ed). New York: McGraw Hill Education.</p> <p>c. Sudoyo, Aru W. et al. (2015). Chapter 25 in <i>The Study of Internal Medicine</i>. (Edition V). Jakarta: Interna Publishing.</p> <p>d. Kidney Disease: Improving Global Outcomes (KDIGO) CKD Work Group. KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. <i>Kidney Int</i></p>	

	d. Able to follow up after returning from referral. (3B)		<ul style="list-style-type: none"> <li>CEX, CbD.</li> <li>• Pretest and post test</li> <li>• 1 Scientific Journal</li> </ul>	<b>visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week		<i>(Suppl).</i> 2013; 3: 1–150. e. National Kidney Foundation (NKF) Kidney Disease Outcome Quality Initiative (K/DOQI) Advisory Board: K/DOQI Clinical Practise Guidelines for Chronic Kidney Disease: Evaluation, Classification, and Stratification. Kidney Disease Outcome Quality Initiative. <i>Am J Kidney Dis.</i> 2002; 39:(Suppl 2):S1-S246.	
12	a. Able to master theoretical knowledge of the skills of renal hypertension with an emphasis on clinical reasoning and problem solving and the opportunity to see and observe these skills in the form of demonstrations or direct	Completion in understanding and being able to master clinical skills in the field of renal hypertension such as Hemodialysis, Peritoneal continuous self-dialysis (Tenchkoff catheter), Kidney transplantation (management in the field of pre- and	<b>Criterion:</b> 8 = Able to master skills independently and thoroughly, 4.5 = unable to master the skill in a row	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week	<b>Form:</b> Structured Learning and Self-study  <b>Method:</b> Reference learning / lecture materials	a. Guidance on examination techniques and clinical procedures of internal medicine. For students of the program doctors specialist in internal medicine. Kolegium of Internal Medicine. Department of Disease Sciences In	DOPS: 5%

	<p>implementation in patients / communities. (2)</p> <p>b. Mastering the theoretical knowledge of clinical skills of renal hypertension including biomedical background and psychosocial impact of these skills, the opportunity to see and observe these skills in the form of demonstration or direct implementation in patients / communities, and practice these skills on props and / or standardized patients. (3)</p> <p>c. Able to perform clinical skills of renal hypertension independently. (4)</p>	<p>postal diseases), Renal and urinary tract ultrasound, Folley cateter installation, Double lumen cateter installation, kidney biopsy, renal cyst aspiration, peritoneal acute dialysis, and renal sympathetic denervation</p>	<p>0 = unable to explain</p> <p><b>Test Form:</b></p> <p>a. DOPS exam</p>	<p><b>Seminar (Refarat/ Case):</b></p> <p>3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b></p> <p>2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b></p> <p>5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b></p> <p>3 x 12 hours/ week</p>		<p>FK UI / RSCM. 2017.</p>	
<p><b>Final Score:</b> 30% Attitude, Pretest 10%, Mini-CEX: 10%, CBD: 10%, DOPS: 5%, Journal: 5%, Post test 30%</p>							100%

	Name of college	: Hasanuddin University			Document Code	
	Name of Faculty	: Medicine				
	Department Name	: The Science of Internal Medicine				
	Prodi Name	: Medical Education				
<b>SEMESTER LEARNING PLAN</b>						
COURSES (MK)	CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting	
Tropical Infection	20C01521408	The Science of Internal Medicine	8	3,4,5,6	10 October 2019	
AUTHORIZATIO N	RPS Developer		Coordinator RMK		Chairman of PRODI	
Learning Achievement (CP)	<b>ILO PRODI charged to MK</b> S1 Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conduct scientific research in the field of internal medicine and be published in accredited journals (S 1)					

	C2	Students are able to perform anamnesis, physical examination, laboratory examinations, and procedures that are in accordance with the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> (C 2).
	C3	Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics. (C 3)
<b>Achievement of Course Learning (CLO)</b>		
<p>CLO1 Participants of PPDS Internal Disease Science are able to conduct journal analysis and make case reports or scientific work related to the field of Tropical Infection (S1)</p> <p>CLO2 Participants of PPDS Internal Disease Science are able to manage internal disease patients ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations and diagnosis and differential diagnosis and preparing a plan for the management of patients with tropical infections (C2).</p> <p>CLO3 Participants ppds disease science in able to perform the clinical skills competency action of patients in the field of tropical infections (C3)</p>		
<b>Sub-Achievement of Learning Courses (Sub CLO)</b>		
	Sub-CLO 1	Able to explain the definition, pathophysiology of establishing diagnosis and complications, supporting examinations, and procedures independently and thoroughly about Viral Diseases (Dengue Fever, Dengue Hemorrhagic Fever, Dengue Shock Syndrome, Chikungunya, Mumps, Human Immunodeficiency Virus (HIV), Upper Respiratory Tract Infections (ISPA), Severe Acute Respiratory Syndrome (SARS), Influenza A, Hepatitis A, Hepatitis B, Rubella, Rubella in Infectious pregnancy, Cytomegalovirus, Cytomegalovirus infection in pregnancy, simplex virus infection 2, simplex virus infection 2 in pregnancy, Varicella Herpes simplex virus infection type 1, ShinGles, Morbilli, Rabies, Yellow Fever)

	Sub-CLO 2	Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and procedures independently and thoroughly about Diseases Due to Parasitic Infestation(Malaria, Leptospirosis, Intestinal Amoebiasis, Giardiasis, Toxoplasmosis, Cerebral Toxoplasmosis, Toxoplasmosis in pregnancy, Congenital Toxoplasmosis, Toxoplasmosis in the eye: choyorentinitis, Leishmaniasis, Tripanosomiasis)
	Sub-CLO 3	Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and procedures independently and thoroughly about the disease due to worms( <i>Helminthiasis</i> , Filariasis)
	Sub-CLO 4	Able to explain the definition, pathophysiology of enforcing diagnosis and complications, supporting examination, as well as independent and complete procedures on fungal-induced diseases (Invasive Aspergillosis, Zigomicosis, Diseminata Histoplasmosis, Cryptococcosis, Systemic Candidiasis)
	Sub-CLO 5	Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Bacterial Diseases (Typhoid Fever, Early Sepsis, Sepsis Shock, Methicillin Resistant Staphylococcus Aureus (MRSA), Tetanus, Basiler Dysentery, Anthrax Botulism, Brusellosis, Pes Disease)
	Sub-CLO 6	Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and procedures independently and thoroughly about other Tropical Infectious Diseases (Fever of Unknown Origin (FUO), Nosocomial Infection, Skin and Soft Tissue Infections Komplikata, Intrapartum Infection, Lymphadenitis, Meningitis, Encephalitis, Acute Diarrhea, Food Poisoning, Chemical Poisoning, Organophosphate Poisoning, alcohol, benzodiazepines, opiates, amphetamines, heavy metals, Animal Bites and Seran gga)
	Sub-CLO 7	- Able to master clinical skills in the field of Tropical Infections(Collection and Delivery of Samples in Infectious Diseases: Blood, Urine, Pus, Feces, PCP Examination, Antibiotic Use, Prevention of Nosocomial Infection, Antibiotic Resistance Control, Microbiological Examination: (e.g., BTA), PCR Examination)

Short Description of MK	<p>Tropical Infection is one of the branches of the science of Internal Medicine that focuses on the diagnosis, management and education of diseases in the field of Tropical Infections so that learners are able to master theoretical knowledge and clinical skills so as to explain to patients and their families, peers, and other professions about the principles, indications and complications that may arise and can be implemented independently.</p> <p>This course lasts for 2 months, with process activities consisting of face-to-face, discussion of outpatient cases in Tropical Infection polyclinics, Methadone Polyclinics, and hospitalizations at Wahidin Sudirohusodo Hospital, as well as other networking hospitals. At the end of this stage it is expected that PPDS can achieve the competencies as stipulated in the Competency Standards of Specialist Doctors in Internal Medicine in the field of Tropical Infections.</p>														
Study Materials/Learning Materials	<table border="1"> <tr> <td>1</td><td>Viral Diseases</td></tr> <tr> <td>2</td><td>Diseases Due to Parasitic Infestation</td></tr> <tr> <td>3</td><td>Disease due to worms</td></tr> <tr> <td>4</td><td>Fungal-induced diseases</td></tr> <tr> <td>5</td><td>Bacterial Diseases</td></tr> <tr> <td>6</td><td>Other Tropical Infectious Diseases</td></tr> <tr> <td>7</td><td>Clinical skills in the field of Tropical Infections</td></tr> </table>	1	Viral Diseases	2	Diseases Due to Parasitic Infestation	3	Disease due to worms	4	Fungal-induced diseases	5	Bacterial Diseases	6	Other Tropical Infectious Diseases	7	Clinical skills in the field of Tropical Infections
1	Viral Diseases														
2	Diseases Due to Parasitic Infestation														
3	Disease due to worms														
4	Fungal-induced diseases														
5	Bacterial Diseases														
6	Other Tropical Infectious Diseases														
7	Clinical skills in the field of Tropical Infections														
Book	<table border="1"> <tr> <td>Main:</td><td></td></tr> <tr> <td>Supporter:</td><td></td></tr> <tr> <td></td><td>10. Text Book Harrison's</td></tr> <tr> <td></td><td>11. Book Teaching The Science of Internal Medicine</td></tr> </table>	Main:		Supporter:			10. Text Book Harrison's		11. Book Teaching The Science of Internal Medicine						
Main:															
Supporter:															
	10. Text Book Harrison's														
	11. Book Teaching The Science of Internal Medicine														
Master Lecturer	<ol style="list-style-type: none"> <li>4. Prof. DR. dr. Halim Mubin Sp.PD KPTI</li> <li>5. DR.dr. Rachmat Latief, SpPD, KPTI</li> <li>6. Dr. Sudirman Katu, SpPD KPTI</li> <li>7. DR. dr. Risna Halim, SpPD KPTI</li> <li>8. Dr. Arianti Ulfa, SpPD</li> </ol>														
Prerequisite courses															

Meeting to	Sub CLO (Final ability of each stage of learning)	Valuation		Form of Learning; Learning Methods; Student assignments; Estimated time	Learning Materials (Library)	Assessment Weight (%)
		Indicator	Criteria and Shapes			
1	2	3	4	5	6	7
1	Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examinations, and procedures independently and thoroughly about Viral Diseases (Dengue Fever, Dengue Hemorrhagic Fever, Dengue Shock Syndrome, Chikungunya, Mumps, Human Immunodeficiency Virus (HIV), Upper Respiratory Tract Infection (ISPA), Severe Acute Respiratory Syndrome (SARS), Influenza A, Hepatitis A, Hepatitis B, Rubella, Rubella in Infectious pregnancy,	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Viral Diseases (Dengue Fever, Dengue Hemorrhagic Fever, Dengue Shock Syndrome, Chikungunya, Mumps, Human Immunodeficiency Virus (HIV), Upper Respiratory Tract Infection (ISPA), Severe Acute Respiratory Syndrome (SARS), Influenza A, Hepatitis A, Hepatitis B, Rubella, Rubella in Infectious pregnancy,	<ul style="list-style-type: none"> <li>• Mini-CEX, CbD, DOPS exams. Tests in every division.</li> <li>• 1 Scientific Journal</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> </ul>	15%

	Cytomegalovirus, Cytomegalovirus infection in pregnancy, simplex virus infection 2, simplex 2 viral infection in pregnancy, Varicella Herpes simplex virus infection type 1, Herpes Zoster, Morbilli, Rabies, Yellow Fever)	Syndrome (SARS), Influenza A, Hepatitis A, Hepatitis B, Rubella, Rubella in Infectious pregnancy, Cytomegalovirus, Cytomegalovirus infection in pregnancy, simplex virus infection 2, simplex 2 viral infection in pregnancy, Varicella Herpes simplex virus infection type 1, Herpes Zoster, Morbilli, Rabies, Yellow Fever)				
2	Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and procedures independently and thoroughly about Diseases Due to Parasitic Infestation(Malaria, Leptospirosis,	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Diseases Due to	<ul style="list-style-type: none"> <li>Mini-CEX, CbD, DOPS exams. Tests in every division.</li> <li>1 Scientific Journal</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p>	<ul style="list-style-type: none"> <li>Text Book Harrison's</li> <li>Book Teaching The Science of Internal Medicine</li> </ul>	15%

	Intestinal Amoebiasis, Giardiasis, Toxoplasmosis, Cerebral Toxoplasmosis, Toxoplasmosis in pregnancy, Congenital Toxoplasmosis, Toxoplasmosis in the eye: chyorentinitis, Leishmaniasis, Tripanosomiasis)	Parasitic Infestation(Malaria, Leptospirosis, Intestinal Amoebiasis, Giardiasis, Toxoplasmosis, Cerebral Toxoplasmosis, Toxoplasmosis in pregnancy, Congenital Toxoplasmosis, Toxoplasmosis in the eye: chororentinitis, Leishmaniasis, Tripanosomiasis)		<b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week		
3	Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about worm-induced diseases( <i>Helminthiasis</i> , Filariasis).	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about worm-induced diseases( <i>Helminthiasis</i> , Filariasis)	<ul style="list-style-type: none"> <li>Mini-CEX, CbD, DOPS exams. Tests in every division.</li> <li>1 Scientific Journal</li> </ul>	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week	<ul style="list-style-type: none"> <li>Text Book Harrison's</li> <li>Book Teaching The Science of Internal Medicine</li> </ul>	15%

				<b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week		
4	Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about fungal diseases (Invasive Aspergillosis, Zigomicosis, Diseminata Histoplasmosis, Cryptococcosis, Systemic Candidiasis)	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about fungal-induced diseases (Invasive Aspergillosis, Zigomicosis, Diseminata Histoplasmosis, Cryptococcosis, Systemic Candidiasis)	<ul style="list-style-type: none"> <li>Mini-CEX, CbD, DOPS exams. Tests in every division.</li> <li>1 Scientific Journal</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAl College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>Text Book Harrison's</li> <li>Book Teaching The Science of Internal Medicine</li> </ul>	15%
5	Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examinations, and procedures	Completion in understanding and being able to explain the definition, support, and implementation independently and thoroughly about	<ul style="list-style-type: none"> <li>Mini-CEX, CbD, DOPS exams. Tests in every division.</li> <li>1 Scientific Journal</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAl College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p>	<ul style="list-style-type: none"> <li>Text Book Harrison's</li> <li>Book Teaching The Science</li> </ul>	15%

	independently and thoroughly about BacterialDiseases (Typhoid Fever, Early Sepsis, Sepsis Shock, Methicillin Resistant Staphylococcus Aureus (MRSA), Tetanus, Basiler Dysentery, Anthrax Botulism, Brusellosis, Bubonic Diseases)	BacterialDiseases (Typhoid Fever, Early Sepsis, Sepsis Shock, Methicillin Resistant Staphylococcus Aureus (MRSA), Tetanus, Basiler Dysentery, Anthrax Botulism, Brusellosis, Bubonic Plague Disease)		<p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	of Internal Medicine	
6	Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and management independently and thoroughly about other Tropical Infectious Diseases (Fever of Unknown Origin (FUO), Nosocomial Infection, Skin and Soft Tissue Infections Complicata, Intrapartum Infection, Lymphadenitis, Meningitis, Encephalitis, Acute Diarrhea, Food	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and management independently and thoroughly about other Tropical Infectious diseases (Fever of Unknown Origin (FUO), Nosocomial Infection, Skin and Soft Tissue Infection Komplikata, Intrapartum	<ul style="list-style-type: none"> <li>• Mini-CEX, CbD, DOPS exams. Tests in every division.</li> <li>• 1 Scientific Journal</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> </ul>	15%

	Poisoning, Chemical Poisoning, Organophosphate Poisoning, alcohol, benzodiazepines, opiates, amphetamines, heavy metals, Animal and Insect Bites)	Infection, Lymphadenitis, Meningitis, Encephalitis, Acute Diarrhea, Food Poisoning, Chemical Poisoning, Organophosphate Poisoning, alcohol, benzodiazepine, opiate, amphetamine, heavy metals, Animal and Insect Bites)				
7	Learners are able to master clinical skills in the field of Tropical Infections(Collection and Delivery of Samples in Infectious Diseases: Blood, Urine, Pus, Feces, PCPExamination, Antibiotic Use, Prevention of Nosocomial Infection, Antibiotic Resistance Control, Microbiological Examination: (e.g., BTA), PCR Examination)	Completion in understanding and able to master clinical skills in the field of Tropical Infections (Collection and Delivery of Samples in Infectious Diseases: Blood, Urine, Pus, Feces, PCPExamination, Antibiotic Use, Prevention of Nosocomial Infection, Antibiotic Resistance Control, Microbiological Examination:	<ul style="list-style-type: none"> <li>Mini-CEX, CbD, DOPS exams. Tests in every division.</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b></p>	<ul style="list-style-type: none"> <li>Text Book Harrison's</li> <li>Book Teaching The Science of Internal Medicine</li> </ul>	10%

		(Example: BTA), PCR Examination)		3 x 12 hours/ week		
<b>Final Value:</b> <b>85 - 100= A</b> <b>80 - &lt; 85= A Minus</b> <b>75 - &lt; 80= B Plus</b> <b>70 - &lt; 75= B</b> <b>65 - &lt;70= B Minus</b> <b>55 - &lt; 65= C</b> <b>00 - &lt; 55= E</b>						

**Note:**

1. **Prodi Graduate Learning Achievement (ILO-PRODI)** is an ability possessed by every PRODI graduate which is an internalization of attitude, mastery of knowledge and skills in accordance with the level of study program obtained through the learning process.
2. **ILO charged to the course** are some of the learning achievements of graduate study programs (ILO-PRODI) that are used for the formation / development of a b course consisting of aspects of attitude, general conclusion, special skills and knowledge.
3. **CP Courses (CLO)** is the ability that is spelled out specifically from the ILO charged to the course, and is specific to the study material or learning materials of the course.
4. **Sub-CP Courses (Sub-CLO)** are the specific ability of CLO that can be measured or observed and is the final ability planned at each stage of learning, and is specific to the learning material of the course.
5. **Indicators of ability assessment** in student learning processes and outcomes are specific and measurable statements that identify the ability or performance of student learning outcomes accompanied by evidence.
6. **Creteria Assessment** is a benchmark that is used as a measure or benchmark of learning proficiency in assessment based on established indicators. Assessment creteria is a guideline for assessors so that assessments are consistent and unbiased. Creteria can be either quantitative or qualitative.
7. **Form of assessment:** test and non-test.
8. **Forms of learning:** Lectures, Responsi, Tutorials, Seminars or equivalent, Practicums, Studio Practices, Workshop Practices, Field Practices, Research, Community Service and/or other equivalent forms of learning.
9. **Learning Methods:** Small Group Discussion, Role-Play & Simulation, Discovery Learning, Self-Directed Learning, Cooperative Learning, Collaborative Learning, Contextual Learning, Project Based Learning, and other equivalent methods.
10. **Learning Materials** are details or descriptions of study materials that can be presented in the form of several subjects and sub-subjects.

11. **The weight of the assessment** is the percentage of assessment of each achievement of sub-CLO which is proposional in magnitude with the difficulty level of achievement of sub-CLO tsb., and the total is 100%.
12. **TM**=Face-to-Face, **PT**=Structured assignment, **BM**=Self-study.

	Name of KPT College : Hasanuddin University					<b>Document Code</b>		
	Name of Faculty : Medicine							
	Department Name : The Science of Internal Medicine							
	Prodi Name : The Science of Internal Medicine							
<b>SEMESTER LEARNING PLAN</b>								
COURSES (MK)		CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting		
<b>PULMONOLOGY &amp; RESPIRATION</b>		<b>20C01521510</b>	<b>INTERNAL MEDICINE</b>	<b>10 credits</b>	<b>3</b>	<b>10-10-2019</b>		
AUTHORIZATION	<b>RPS Developer</b>			<b>Coordinator RMK</b>	<b>Department Head</b>			
	Dr. dr. Nur Ahmad Tabri, Sp.PD, KP, Sp. P, (K) Dr. dr. Harun Iskandar, Sp.P, (K), Sp.PD, KP			Prof. Dr. dr. Haerani Rasyid, Sp.GK, Sp.PD, KGH	Dr. dr. Hashim Kasim, Sp.PD, KGH			
<b>Learning Achievement (CP)</b>	<b>ILO PRODI charged to MK</b>							
	S1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals. (I'M 1)						
	C 2	Students are able to perform anamnesis, physical examination, laboratory examinations, and procedures that are appropriate to the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> (C2).						
	C 3	Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenter hepatology, Geriatrics and Geriantology, Allergy Immunology and Psychosomatics. (C 3)						

<b>Achievement of Course Learning (CLO)</b>		
<p>CLO1 Participants ppds disease science in able to make a journal analysis and make case reports or scientific work related to the field of Pulmonology (S1)</p> <p>CLO2 Participants ppds disease science in able to manage patients with internal diseases ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations and diagnosis and differential diagnosis and preparing a plan for the management of patients bidang Pulmonologist (C2)</p> <p>CLO3 Participants ppds disease science in able to perform the clinical skills competency action of patients in the field of Pulmonologist (C3)</p>		
<b>No</b>	<b>Sub-Achievement of Learning Courses (Sub CLO)</b>	
Sub-CLO 1	Able to establish the diagnosis and perform the procedure of pulmonary parenchym disease, airway disease, pleural disease, congenital lung disease, lung emergency disease, and other lung diseases according to indications and competencies.	
Sub-CLO 2	Able to perform invasive action in lung disease	
Sub-CLO 3	Able to uphold the diagnosis and interpretation of the results of supporting examinations in the field of pulmonology	
Sub-CLO 4	Able to perform clinical procedures on lung disease according to problems, patient needs and authority	
Short Description of MK	<ul style="list-style-type: none"> <li>The Pulmonology block describes the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, prevention of complications and prognosis of each disease contained within the specific limitations of the pulmonological subdivision, which consists of abnormalities in pulmonary parenchym, airways, pleuras, congenital lung disease, students are expected to be able to identify advanced diseases in the field of pulmonology such as pulmonary embolism and respiratory failure. Students can make the correct diagnosis and differential diagnosis of diseases in the field of pulmonology in accordance with skdi level. In this pulmonology block is expected to make initial management without complications, management with complications by making proper referral patterns or comprehensive management of diseases in the endocrine field comprehensively in accordance with skdi levels.</li> </ul>	
Book	1 2	Book Teaching The Science of Internal Medicine Indonesian Lung Doctors Association 2018

	3	Harrison's Principles of internal medicine: Pulmonology. Bina Rupa Aksara. Jakarta. 2013.
Study Materials/Learning Materials	1.	<ol style="list-style-type: none"> <li>1. Pulmonary parenchym disease (Pulmonary TB (4A). Pneumonia (4A), Destroyed Lung(3B), Lung Cancer((3A), Diffuse Interstitial Lung Disease (ILD) (3A), Pulmonary Abscess (3B), Pulmonary Infarction (3B), Atelectasis (3B), Acute Respiratory Distress Syndrome (ARDS) (3B), Avian Influenza (4A), Lung Disease due to Fungal Infection (4A), Lung Disease due to Atipic Mycobacterium (4A))</li> <li>2. Airway diseases (Acute bronchitis (4A), chronic bronchitis(4A), Bronchial Asthma (4A), Chronic Obstructive Pulmonary Disease (COPD)(4A))</li> <li>3. Penyakit pleura (Tuberkulosis ekstra paru ( Pleuritis TB) (4A), Efusi Pleura (4A), Empyema (3B), Pneumotoraks (3B), Hematotoraks (4A), Tumor Mediastinum (3A), Mediastinitis (3A), Emfisema mediastinum (3A), Timoma (3A), Kista mediastinum(3A))</li> <li>4. Congenital lung disease (Congenital lung disease (3B), Cystic Fibrosis (4A), Pulmonary Vascular Disease (3A), Pulmonary Hypertension (3A))</li> <li>5. Emergency in the lungs (pulmonary embolism (3B), respiratory failure (4A))</li> <li>6. Other lung diseases (lung disease in HIV(4A), occupational and environmental lung disease (pneumoconiasis asbestosis, silicosis, etc.) (3A), Sleep Related Disorders/ Obstructive Sleep Apnea (OSA) (3A), Diaphragm and chest wall abnormalities(3A))</li> </ol>
	2.	Perform thoracosentesis (with or without ultrasound guidance) (4A),
	3.	<ol style="list-style-type: none"> <li>1. Able to perform thorax photo examination (4A), interpretation of THORAX CT scan (3), thorax ultrasound (3) and Sputum BTA</li> <li>2. Able to perform spirometry and its interpretation (4A)</li> </ol>
	4.	Able to perform inhalation therapy (4A), oxygen therapy (4A) and KGB Coli Needle Aspiration Biopsy (4A)
	Pengampuh	
	Supporter:	
POWERFUL LECTURER		<ol style="list-style-type: none"> <li>1. Dr. dr. Nur Ahmad Tabri, SpPD,K-P,SpP(K)</li> <li>2. Dr. dr. Muhammad Ilyas, SpPD,K-P,SpP(K)</li> <li>3. Dr. dr. Erwin Arief, SpP(K),SpPD, K-P</li> <li>4. Dr. dr. Harun Iskandar,SpP(K), SpPD, K-P</li> </ol>
Book		<ol style="list-style-type: none"> <li>1. Book Teaching The Science of Internal Medicine. FSI Publishing Hall. 2012.</li> <li>2. Indonesian Lung Doctors Association 2018</li> <li>3. Harrison's Principles of internal medicine</li> </ol>

**Note:**

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5. **Indicators of ability assessment** in student learning processes and outcomes are specific and measurable statements that identify the ability or performance of student learning outcomes accompanied by evidence.
6. **Criteria Assessment** is a benchmark that is used as a measure or benchmark of learning proficiency in assessment based on established indicators. Assessment criteria is a guideline for assessors so that assessments are consistent and unbiased. Criteria can be either quantitative or qualitative.
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10. **Learning Materials** are details or descriptions of study materials that can be presented in the form of several subjects and sub-subjects.
11. **The weight of assessment** is the percentage of assessment of each achievement of sub-CLO which is proportional in magnitude with the difficulty level of achievement of sub-CLO tsb., and a total of 100%.
12. TM=Face-to-Face, PT=Structured assignment, BM=Self-study.

Week 1	Sub-CLO (Final ability of each stage of learning)	Valuation		Help with learning, Learning methods, Student assignments, [Estimated Time]	Learning Materials [Library]	Assessment Weight (%)
		Indicator	Criteria & Shape			
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1	Able to establish the diagnosis and perform the procedure of pulmonary parenchym disease, airway disease, pleural disease, congenital	ete-- Complete in enforcing the diagnosis of the disease according	<b>Criterion:</b> Accuracy, conformity and mastery	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week	• (Pulmonary TB (4A), Pneumonia (4A), Destroyed Lung(3B), Lung Cancer((3A),	25 %

	<p>lung disease, lung emergency disease, and other lung diseases according to indications and competencies.</p>	<p>to its indications and competence</p>	<p><b>Non-test form:</b></p> <ul style="list-style-type: none"> <li>• Paper Writing</li> <li>• Journal article summary</li> <li>• Presentation</li> </ul> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>• Written Test (True Pass Limit of 80%)</li> <li>• Mini CEX-CBD-DOPS</li> </ul>	<p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation)</b> : 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<p>Diffuse Interstitial Lung Disease (ILD) (3A), Pulmonary Abscess (3B), Pulmonary Infarction (3B), Atelectasis (3B), Acute Respiratory Distress Syndrome (ARDS) (3B), Avian Influenza (4A), Lung Disease due to Fungal Infection (4A), Pulmonary Disease due to Atipic Mikobakterium (4A)</p> <ul style="list-style-type: none"> <li>• (Acute bronchitis (4A), chronic bronchitis(4A), Bronchial Asthma (4A), Chronic Obstructive Pulmonary Disease (COPD)(4A)</li> <li>• (Tuberkulosis ekstra paru ( Pleuritis TB) (4A), Efusi Pleura (4A), Empyema (3B), Pneumotoraks (3B), Hematotoraks (4A), Tumor Mediastinum (3A),</li> </ul>	
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					<p>Mediastinitis (3A), Emfisema mediastinum (3A), Timoma (3A), Kista mediastinum(3A)</p> <ul style="list-style-type: none"> <li>● (Congenital lung disease (3B), Cystic Fibrosis (4A), Pulmonary Vascular Disease (3A), Pulmonary Hypertension (3A)</li> <li>● (Pulmonary embolism (3B), respiratory failure (4A)</li> <li>● Lung disease in HIV(4A), occupational and environmental lung disease (pneumoconiasis asbestosis, silicosis, etc.)(3A), Sleep Related Disorders/Obstruc tive Sleep Apnea (OSA) (3A), Diaphragm and chest wall abnormalities(3A)</li> <li>● Book Teaching The Science of Internal Medicine</li> </ul>	
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					<ul style="list-style-type: none"> <li>• Indonesian Lung Doctors Association 2018</li> <li>• Harrison's Principles of internal medicine: Pulmonolgy. Bina Rupa Aksara. Jakarta. 2013.</li> </ul>	
2	Is Able to perform invasive action in lung disease	plete in performing thoracosentesis (with or without ultrasound guidance)	<p><b>Criterion:</b> Accuracy, conformity and mastery</p> <p><b>Non-test form:</b></p> <ul style="list-style-type: none"> <li>• Paper Writing</li> <li>• Journal article summary</li> <li>• Presentation</li> </ul> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>• Written Test (True Pass Limit of 80%)</li> </ul> <p>Mini CEX-CBD-DOPS</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation)</b> : 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Indonesian Lung Doctors Association 2018</li> <li>• Harrison's Principles of internal medicine: Pulmonolgy. Bina Rupa Aksara. Jakarta. 2013.</li> </ul>	25 %
3	Able to uphold the diagnosis and interpretation of the results of supporting examinations in the field of pulmonology	Complete in performing the examination of Thorax Photos, interpretation of THORAX CT scan	<p><b>Criterion:</b> Accuracy, conformity and mastery</p> <p><b>Non-test form:</b></p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p>	<ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Indonesian Lung Doctors Association 2018</li> </ul>	25 %

		examination, thorax ultrasound and Sputum BTA and able to perform spirometry and its achievements	<ul style="list-style-type: none"> <li>• Paper Writing</li> <li>• Journal article summary</li> <li>• Presentation</li> </ul> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>• Written Test (True Pass Limit of 80%)</li> <li>• Mini Cex-CBD-DOPS</li> </ul>	<p><b>Seminar (Refarat/Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b></p> <ul style="list-style-type: none"> <li>• 3 x 9 hours/ week</li> </ul>	<ul style="list-style-type: none"> <li>• Harrison's Principles of internal medicine: Pulmonolgy. Bina Rupa Aksara. Jakarta. 2013.</li> </ul>	
4	Able to perform clinical procedures on lung disease according to problems, patient needs and authority	Complete in conducting inhalation therapy, oxygen therapy and KGB Coli Needle Aspiration Biopsy	<p><b>Criterion:</b> Accuracy, conformity and mastery</p> <p><b>Non-test form:</b></p> <ul style="list-style-type: none"> <li>• Paper Writing</li> <li>• Journal article summary</li> <li>• Presentation</li> </ul> <p><b>Test Form:</b></p> <ul style="list-style-type: none"> <li>• Written Test (True Pass Limit of 80%)</li> <li>• Mini CEX-CBD-DOPS</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Indonesian Lung Doctors Association 2018</li> <li>• Harrison's Principles of internal medicine: Pulmonolgy. Bina Rupa Aksara. Jakarta. 2013.</li> </ul>	25 %

	Name of college		: Hasanuddin University			Document Code				
	Name of Faculty		: Medicine							
	Department Name		: The Science of Internal Medicine							
	Prodi Name		: The Science of Internal Medicine							
<b>SEMESTER LEARNING PLAN</b>										
COURSES (MK)	CODE	Course	WEIGHT (credit):		SEMESTER	Tgl Drafting				
Cardiology	20C0153161 0	The Science of Internal Medicine	10		¾/5/6	10 October 2019				
AUTHORIZATION	RPS Developer		Coordinator RMK		Chairman of PRODI					
	Dr.dr.Idar Mappangara, Sp.PD, Sp.JP(K) Dr. Pendrik Tandean, Sp.PD, SME dr. Zaenab Djafar, Sp.PD, Sp.JP(K)		Prof.Dr.dr.Haerani Rasyid, Sp.PD, KGH, Sp.GK (K)		Dr. dr. Hashim Kasim, Sp.PD, KGH					
Learning Achievement (CP)	ILO PRODI charged to MK									
	S1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals.								
	C 2	Students are able to perform anamnesis, physical examinations, laboratory examinations, and procedures appropriate to the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> .								
	C 3	Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics.								

		<b>Achievement of Course Learning (CLO)</b>
	CLO 1	CLO1 Participants ppds disease science in able to make a journal analysis and make case reports or scientific work related to the field of cardiology (S1)
	CLO 2	CLO2 Participants ppds disease science in able to manage patients with internal diseases ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations and diagnosis and diagnosis of appeals and preparing a plan for the management of patients in the cardiology bidang (C2)
	CLO 3	CLO3 Participants ppds disease science in able to perform clinical skills competency action patients in the field of cardiology (C3)
<b>Sub-Achievement of Learning Courses (Sub CLO)</b>		
	Sub-CLO 1	Able to enforce diagnosis and complications, supporting examinations, and procedures independently (non invasive) about Congenital Heart Disease in Adults, among others, ventricular septal defect (IIIA), atrial septal defect (IIIA), persistent ductus arteriosus (IIIA), coartatio aorta (IIIA), Tetralogy Fallot (TOF) (IIIA), Transposition of large blood vessels (IIIA)
	Sub-CLO 2	Able to enforce diagnosis and complications, supporting examinations, and independent and complete (non invasive) procedures on Inflammation of the Heart and Blood Vessels including infective Endocarditis (IVA), Miocarditis (IVA), Pericarditis (IVA), Aortitis (IIIA)
	Sub-CLO 3	Able to enforce diagnosis and complications, supporting examinations, and procedures independently and completely (non invasive) about Ischemic Heart Disease including Angina Pectoris Stable (APS) (IVA), Acute Coronary Syndrome (ACS) (IVA): UAP (IVA), NSTEMI (IVA), STEMI (IVA), Chronic Ischemic Heart Disease (IVA)
	Sub-CLO 4	Able to enforce diagnosis and complications, supporting examinations, and procedures independently and thoroughly about diseases due to circulatory disorders, among others, hypovolemic shock (IVA), cardiogenic shock (IVA), acute heart failure (IVA), chronic heart failure (IVA), cardiorespiratory arrest (IVA)
	Sub-CLO 5	Able to enforce diagnosis and complications, supporting examinations, and procedures independently and completely (non invasive) about Heart Rhythm Disorders include atrial fibrillation (IVA), Flutter atrial (IVA), Ventricular Fibrillation (IVA), Supraventricular Tachycardia (IVA), Takikardi ventricular (IVA), Supraventricular Extrasistol (IVA), Ventricular Extrasistole (IVA), Right Branch Bundle Block (RBBB) (IVA), Left Bundle Branch Block (LBBB) (IVA), Bradikardi: AV Block degree I (IVA), AV Block degree II type Mobitz I (IVA), AVBlok degree II type Mobitz II (IVA), AV total block (IVA), other Arrhythmia (IVA).
	Sub-CLO 6	Able to enforce diagnosis and complications, supporting examinations, and procedures independently and thoroughly about heart defects due to systemic diseases, among others, thyroid heart disease (IVA), rheumatic heart disease (IVA), heart disease in connective tissue disease (IVA).
	Sub-CLO 7	Able to enforce diagnosis and complications, supporting examinations, and procedures independently and completely (non invasive) about diseases due to heart valve abnormalities, among others Mitral stenosis (IVA), mitral regurgitation

		(IVA), aortic stenosis (IVA), aortic regurgitation (IVA), pulmonary stenosis (IVA), pulmonary insufficiency (IVA), tricuspid stenosis (IVA), tricuspid insufficiency (IVA).
	Sub-CLO 8	Able to enforce diagnosis and complications, supporting examinations, and procedures independently and thoroughly about Hypertension, among others, pulmonary hypertension (IIIA), essential hypertension (IVA), secondary hypertension (IIB), hypertension in special circumstances (IVA).
	Sub-CLO 9	Able to enforce diagnosis and complications, supporting examinations, and procedures independently (non invasive) about abnormalities in blood vessels, among others, aortic aneurysms (IIIA), dissection aneurysms (IIB), peripheral vascular disease (PWD) (IVA)
	Sub-CLO 10	Able to enforce diagnosis and complications, supporting examinations, and procedures independently and completely (non invasive) about Other Heart Diseases including idiopathic Cardiomyopathy (IVA), Peripartum Cardiomyopathy (IVA), Acute Kor pulmonale (IVA), Chronic pulmonale Kor (IVA), Cardiovascular Tumor (IIIA)
	Sub-CLO 11	Able to master the competence of clinical skills in the field of Cardiology including electrocardiography Installation (EKG) (IVA), Basic Life Support (IVA), Advanced Life Support (IVA), Defibrillation and Cardioversion (IVA), Installation of peripheral vein access (IVA), Installation of Endotracheal Tube (ETT) (IVA), Brachial Index Ankle Test (IVA), Heart Training Test (IVA), Echocardiography (IVA).
Short Description of MK		<p>Cardiology is one of the branches of the science of Internal Medicine that focuses on the diagnosis, management and education of diseases in the field of Cardiology so that learners are able to master theoretical knowledge and clinical skills so that they can explain to patients and their families, peers, and other professions about the principles, indications and complications that may arise and can be implemented independently.</p> <p>This course lasts for 3 months, with process activities consisting of face-to-face, case discussions, journal readings, morning reports, <i>bedside teaching</i>, guard duty and ward visits, answering consultations from other parts of Outpatient in Cardiology polyclinics, Emergency Department Installations and Inpatient rooms at Wahidin Sudirohusodo Hospital, as well as other networking hospitals. At the end of this stage it is expected that PPDS can achieve the competencies as stipulated in the Competency Standards of Internal Medicine Specialists, especially in the field of Cardiology.</p>
Study Materials/Learning Materials	1	Congenital Heart Disease in Adults
	2	Inflammation of the Heart and Blood Vessels
	3	Ischemic Heart Disease
	4	Diseases due to Circulatory Disorders
	5	Heart rhythm disorders
	6	Heart Defects Due to Systemic Diseases
	7	Diseases Due to Heart Valve Abnormalities
	8	Hypertension
	9	Abnormalities in blood vessels
	10	Other Heart Diseases

	11	Clinical Skills Competencies					
Book	Main:						
			Mann DL, Zipes DP, Libby P, Bonow RO. Braunwald's heart disease e-book: a textbook of cardiovascular medicine. Elsevier Health Sciences; 11 <sup>th</sup> edition, 2018.				
	Supporter:						
		<ol style="list-style-type: none"> <li>1. Kasper D, Fauci A, Hauser S, Longo D, Jameson J, Loscalzo J. Harrison's principles of internal medicine. McGraw-Hill Professional Publishing; 2018.</li> <li>2. Setiati S, Alwi I, Sudoyo AW, Simadibrata M, Setiyohadi B, Sham AF. A book teaching the science of internal medicine. Jakarta: Interna Publishing. 2014:2464-72.</li> <li>3. Lilly LS. Pathophysiology of heart disease: a collaborative project of medical students and faculty. Lippincott Williams &amp; Wilkins; 2012 Aug 14.</li> <li>4. Walsh R, Fang J, Fuster V, O'Rourke RA. Hurst's the Heart Manual of Cardiology. McGraw-Hill Publishing; 2012 Sep 3.</li> <li>5. Griffin BP, Topol EJ, Nair D, Ashley K, editors. Manual of cardiovascular medicine. Lippincott Williams &amp; Wilkins; 2008 Oct 1.</li> </ol>					
Master Lecturer		<ol style="list-style-type: none"> <li>1. Prof. dr. Junus Alkatiri, Sp.PD, Sp.JP (K)</li> <li>2. Prof. Dr. dr. Ali Aspar Mappahiya, Sp.PD, Sp.JP (K)</li> <li>3. Dr. Pendrik Tandean, Sp.PD, SME</li> <li>4. Dr. Khalid Saleh, Sp.PD, SME</li> <li>5. Dr. dr.M. Idar Mappangara, Sp.PD, Sp.JP (K)</li> <li>6. Dr. Zaenab Djafar, Sp.PD, Sp.JP (K)</li> </ol>					
Prerequisite Courses							
Meeting to	Sub CLO (Final ability of each stage of learning)	Valuation		Form of Learning; Method Learning; Estimated Time	Learning Materials (Library)	Assessment Weight (%)	
		Indicator	Criteria and Form of Assessment				
1	2	3	4	5	6	7	
1	Learners are able to	Completion in enforcing diagnosis	Criteria:	Public Lecture: 1 x 100 minutes/ week	• Text Book Braunwald Heart	5%	

	<p>enforce diagnosis and complications , supporting examinations, and independent (non invasive) procedures on Congenital Heart Disease in Adults including Ventricular Septal Defect (IIIA), atrial septal defect (IIIA), Persistent ductus arteriosus (IIIA), coartatio aorta (IIIA), Tetralogy Fallot (TOF) (IIIA), Transposition of large blood vessels (IIIA).</p>	<p>and complications, supporting examination, and independent (non invasive) procedures on Congenital Heart Disease in Adults include Ventricular Septal Defect (IIIA), atrial septal defect (IIIA), Persistent ductus arteriosus (IIIA), Coartatio aorta (IIIA), Tetralogy Fallot (TOF) (IIIA), Transposition of large blood vessels (IIIA)</p>	<p>Accuracy and Mastery Form: MINICEX, CBD</p>	<p><b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation ):</b> 5 x 6 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<p>Disease. 11<sup>th</sup> edition. 2018 • Text Book Harrison's Manual of Medicine. 19<sup>th</sup> edition. 2016 • Book Teaching Disease Science in Chapter 19-21 Edition VI 2014 • Book of Teaching Cardiology. . 2<sup>nd</sup> Edition of 2014</p>	
2	<p>Learners are able to enforce diagnosis and complications , supporting examinations,</p>	<p>Completion in enforcing diagnosis and complications, supporting examination, and independent and complete (non</p>	<p>Criteria: Accuracy and Mastery Form: MINICEX, CBD</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week</p>	<p>• Text Book Braunwald Heart Disease. 11<sup>th</sup> edition. 2018 • Text Book Harrison's Manual of</p>	<p>10 %</p>

	and independent and complete (non invasive) procedures on inflammation of the heart and blood vessels, including infective endocarditis (IVA), Miocarditis (IVA), pericarditis (IVA), aortitis (IIIA).	invasive) procedures on Inflammation of the Heart and Blood Vessels, among others, infective Endocarditis Disease (IVA), Miocarditis (IVA), Pericarditis (IVA), Aortitis (IIIA)		<b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation ):</b> 5 x 6 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week	Medicine. 19 <sup>th</sup> edition. 2016 • Book Teaching Disease Science in Chapter 19-21 Edition VI 2014 • Book of Teaching Cardiology. 2 <sup>nd</sup> Edition of 2014	
3	Learners are able to enforce diagnosis and complications , supporting examinations, and independent and complete (non invasive) procedures on Ischemic Heart Disease including Angina Pectoris Stabil (APS)	Completion in enforcing diagnosis and complications, supporting examination, and implementation independently and completely (non invasive) about Ischemic Heart Disease include Angina Pectoris Stable (APS) (IVA), Acute Coronary Syndrome (ACS) (IVA): UAP (IVA), NSTEMI (IVA), STEMI (IVA),	Criteria: Accuracy and Mastery  Form: MINICEX, CBD	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation ):</b> 5 x 6 hours/ week	• Text Book Braunwald Heart Disease. 11 <sup>th</sup> edition. 2018 • Text Book Harrison's Manual of Medicine. 19 <sup>th</sup> edition. 2016 • Book Teaching Disease Science in Chapter 19-21 Edition VI 2014 • Book of Teaching Cardiology. 2 <sup>nd</sup> Edition of 2014	10 %

	(IVA), Acute Coronary Syndrome (ACS) (IVA): UAP (IVA), NSTEMI (IVA), STEMI (IVA), Chronic Ischemic Heart Disease (IVA)	Chronic Ischemic Heart Disease (IVA)		<b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week		
4	Learners are able to enforce diagnosis and complications , supporting examinations, and procedures independently and thoroughly about Diseases due to Circulatory Disorders including hypovolemic shock (IVA), cardiogenic shock (IVA), acute heart failure (IVA), chronic heart failure (IVA), Cardiorespiratory arrest (IVA)	Completion in carrying out pathophysiology enforcement of diagnosis and complications, supporting examinations, and procedures independently and thoroughly about Diseases due to Circulatory Disorders include hypovolemic shock (IVA), cardiogenic shock (IVA), acute heart failure (IVA), chronic heart failure (IVA), Cardiorespiratory arrest (IVA)	Criteria: Accuracy and Mastery  Form: MINICEX, CBD	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week	<ul style="list-style-type: none"> <li>Text Book Braunwald Heart Disease. 11<sup>th</sup> edition. 2018</li> <li>Text Book Harrison's Manual of Medicine. 19<sup>th</sup> edition. 2016</li> <li>Book Teaching Disease Science in Chapter 19-21 Edition VI 2014</li> <li>Book of Teaching Cardiology. 2<sup>nd</sup> Edition of 2014</li> </ul>	10 %

	tory arrest (IVA)					
5	Learners are able to enforce diagnosis and complications , supporting examinations, and procedures independently and completely (non invasive) about Heart Rhythm Disorders including atrial fibrillation (IVA), Flutter atrial (IVA), Ventricular Fibrillation (IVA), Supraventricular Tachycardia (IVA), Ventricular Tachycardia (IVA), Supraventricular Tachycardia (IVA), Takikardia ventricular (IVA), Extrasistol supraventricular (IVA), Extrasistole	Completion in carrying out the enforcement of diagnosis and complications, supporting examinations, as well as independent and complete (non invasive) procedures on Heart Rhythm Disorders include atrial fibrillation (IVA), Flutter atrial (IVA), Ventricular Fibrillation (IVA), Supraventricular Tachycardia (IVA), Ventricular Tachycardia (IVA), Supraventricular Extrasistol (IVA), Extrasistole vent Right Bundle Branch Block (RBBB) (IVA), Left Bundle Branch Block (LBBB) (IVA), Bradycard: AV Block I (IVA), AV Block II mobitz I type (IVA), AV Block degree II type Mobitz II (IVA), AV total block AV	Criteria: Accuracy and Mastery Form: MINICEX, CBD	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation ):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<ul style="list-style-type: none"> <li>Text Book Braunwald Heart Disease. 11<sup>th</sup> edition. 2018</li> <li>Text Book Harrison's Manual of Medicine. 19<sup>th</sup> edition. 2016</li> <li>Book Teaching Disease Science in Chapter 19-21 Edition VI 2014</li> <li>Book of Teaching Cardiology. 2<sup>nd</sup> Edition of 2014</li> </ul>	10 %

	ventricular (IVA), Right Bundle Branch Block (RBBB) (IVA), Left Branch Bundle Block (LBBB) (IVA), Bradycardia: AV Block degree I (IVA), AV Block degree II type Mobitz I (IVA), AV Block degree II type Mobitz II (IVA), AV total block (IVA), other Arrhythmia (IVA).	(IVA), other Arrhythmias (IVA).				
6	Learners are able to enforce diagnosis and complications , supporting examinations, and independent and complete procedures about heart defects due to systemic diseases	Completion in enforcing diagnosis and complications, supporting examinations, and procedures independently and thoroughly about heart defects due to systemic diseases, among others, thyroid heart disease (IVA), rheumatic heart disease (IVA), heart	Criteria: Accuracy and Mastery  Form: MINICEX, CBD	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient</b>	<ul style="list-style-type: none"> <li>Text Book Braunwald Heart Disease. 11<sup>th</sup> edition. 2018</li> <li>Text Book Harrison's Manual of Medicine. 19<sup>th</sup> edition. 2016</li> <li>Book Teaching Disease Science in Chapter 19-21 Edition VI 2014</li> <li>Book of Teaching</li> </ul>	10 %

	including thyroid heart disease (IVA), rheumatic heart disease (IVA), heart disease in connective tissue disease (IVA).	disease in connective tissue disease (IVA).		<b>visitation/consultation ):</b> 5 x 6 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week	Cardiology. 2 <sup>nd</sup> Edition of 2014	
7	Learners are able to enforce diagnosis and complications , supporting examinations, and procedures independently and completely (non invasive) about diseases due to heart valve abnormalities including mitral stenosis (IVA), mitral regurgitation (IVA), aortic stenosis (IVA), aortic regurgitation (IVA), pulmonary stenosis (IVA), pulmonary insufficiency (IVA), tricuspid stenosis (IVA), tricuspid insufficiency (IVA),	Completion in enforcing diagnosis and complications, supporting examination, and management independently and completely (non invasive) about diseases due to heart valve abnormalities include mitral stenosis (IVA), mitral regurgitation (IVA), aortic stenosis (IVA), aortic regurgitation (IVA), pulmonary stenosis (IVA), pulmonary insufficiency (IVA), tricuspid stenosis (IVA), tricuspid insufficiency (IVA).	Criteria: Accuracy and Mastery  Form: MINICEX, CBD	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation ):</b> 5 x 6 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week	<ul style="list-style-type: none"> <li>Text Book Braunwald Heart Disease. 11<sup>th</sup> edition. 2018</li> <li>Text Book Harrison's Manual of Medicine. 19<sup>th</sup> edition. 2016</li> <li>Book Teaching Disease Science in Chapter 19-21 Edition VI 2014</li> <li>Book of Teaching Cardiology. 2<sup>nd</sup> Edition of 2014</li> </ul>	10 %

	pulmonary stenosis (IVA), pulmonary insufficiency (IVA), tricuspid stenosis (IVA), tricuspid insufficiency (IVA).					
8	Learners are able to enforce diagnosis and complications , supporting examinations, and independent and complete procedures on Hypertension, among others, pulmonary hypertension (IIIA), essential hypertension (IVA), secondary hypertension (IIIB), hypertension	Completion in carrying out the enforcement of diagnosis and complications, supporting examinations, and procedures independently and thoroughly about Hypertension, among others, pulmonary hypertension (IIIA), essential hypertension (IVA), secondary hypertension (IIIB), hypertension in special circumstances (IVA).	Criteria: Accuracy and Mastery  Form: MINICEX, CBD	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation ):</b> 5 x 6 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week	<ul style="list-style-type: none"> <li>Text Book Braunwald Heart Disease. 11<sup>th</sup> edition. 2018</li> <li>Text Book Harrison's Manual of Medicine. 19<sup>th</sup> edition. 2016</li> <li>Book Teaching Disease Science in Chapter 19-21 Edition VI 2014</li> <li>Book of Teaching Cardiology. 2<sup>nd</sup> Edition of 2014</li> </ul>	10 %

	in special circumstances (IVA).					
9	Learners are able to enforce diagnosis and complications , supporting examinations, and independent (non invasive) procedures about abnormalities in blood vessels including aortic aneurysm (IIIA), dissection aneurysm (IIIB), peripheral vascular disease (PWD) (IVA)	Completion in enforcing diagnosis and complications, supporting examination, and independent (non invasive) procedures about abnormalities in blood vessels including aortic aneurysm (IIIA), aneurysm dissection (IIIB), peripheral vascular disease (PWD) (IVA)	Criteria: Accuracy and Mastery  Form: MINICEX, CBD	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation ):</b> 5 x 6 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week	<ul style="list-style-type: none"> <li>Text Book Braunwald Heart Disease. 11<sup>th</sup> edition. 2018</li> <li>Text Book Harrison's Manual of Medicine. 19<sup>th</sup> edition. 2016</li> <li>Book Teaching Disease Science in Chapter 19-21 Edition VI 2014</li> <li>Book of Teaching Cardiology. 2<sup>nd</sup> Edition of 2014</li> </ul>	5 %
10	Learners Are able to enforce diagnosis and complications , supporting examinations, and	Completion in enforcing diagnosis and complications, supporting examinations, and procedures independently and completely (non	Criteria: Accuracy and Mastery  Form: MINICEX, CBD	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b>	<ul style="list-style-type: none"> <li>Text Book Braunwald Heart Disease. 11<sup>th</sup> edition. 2018</li> <li>Text Book Harrison's Manual of</li> </ul>	10 %

	procedures independently and completely (non invasive) about Other Heart Diseases including idiopathic cardiomyopathy (IVA), peripartum cardiomyopathy (IVA), Acute Kor pulmonale (IVA), Chronic pulmonale Kor (IVA), Cardiovascular Tumor (IIIA)	invasive) about Other Heart Diseases include idiopathic cardiomyopathy (IVA), peripartum cardiomyopathy (IVA), Acute Kor pulmonale (IVA), Chronic pulmonale Kor (IVA), Cardiovascular Tumor (IIIA)		3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week	Medicine. 19 <sup>th</sup> edition. 2016 • Book Teaching Disease Science in Chapter 19-21 Edition VI 2014 • Book of Teaching Cardiology. . 2 <sup>nd</sup> Edition of 2014	
11	Learners are able to master the competence of clinical skills in the field of Cardiology including electrocardiography (ECG) (IVA), Basic Life Support (IVA), Advanced Life	Completion in Being able to master the competence of clinical skills in the field of Cardiology include electrocardiography (EKG) installation (IVA), Basic Life Support (IVA), Advanced Life Support (IVA), Defibrillation and Cardioversion (IVA), Peripheral venous	Criteria: Accuracy and Mastery  Form: DOPS	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient</b>	• Text Book Braunwald Heart Disease. 11 <sup>th</sup> edition. 2018 • Text Book Harrison's Manual of Medicine. 19 <sup>th</sup> edition. 2016 • Book Teaching Disease Science in Chapter 19-21 Edition VI 2014 • Book of Teaching	10 %

	<p>Support (IVA), Defibrylation and Cardioversion (IVA), Peripheral venous Access Installation (IVA), Endotracheal Tube (ETT) Installation (IVA), Brachial Index Ankle Test (IVA), Heart Training Test (IVA), Echocardiography (IVA).</p>	<p>access installation (IVA), Endotracheal Tube (ETT) (IVA) (IVA), Brachial Index Ankle Test (IVA), cardiac training test (IVA), Echocardiography (IVA).</p>	<p><b>visitation/consultation</b> ): 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<p>Cardiology. 2<sup>nd</sup> Edition of 2014</p>	
<p><b>Final Value:</b></p> <p><b>85 – 100= A</b>  <b>80 - &lt; 85= A Minus</b>  <b>75 - &lt; 80= B Plus</b>  <b>70 - &lt; 75= B</b>  <b>65 - &lt;70= B Minus</b>  <b>55 - &lt; 65= C</b>  <b>00 - &lt; 55= E</b></p>					100%

	Name of college		: Hasanuddin University			Document Code		
	Name of Faculty		: Medicine					
	Department Name		: The Science of Internal Medicine					
	Prodi Name		: The Science of Internal Medicine					
<b>SEMESTER LEARNING PLAN</b>								
COURSES (MK)		CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting		
<b>Rheumatologists</b>		20C01531708	The Science of Internal Medicine	8	3,4,5,6	<b>10 October2019</b>		
AUTHORIZATION	RPS Developer			Coordinator RMK		<b>Chairman of PRODI</b>		
	Dr. dr. Faridin HP, SpPD, K-R			Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, SpGK		Dr.dr.Hashim Kasim, Sp.PD, KGH		
Learning Achievement (CP)	<b>ILO PRODI charged to MK</b>							
	S 1	<b>Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals.</b>						

	C2	<b>Students are able to perform anamnesis, physical examinations, laboratory examinations, and procedures appropriate to the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i>.</b>
	C3	<b>Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics.</b>
<b>Achievement of Course Learning (CLO)</b>		
CLO1 Participants of PPDS Internal Disease Science are able to make journal analysis and make case reports or scientific work related to the field of Rhumatology (S1)		
CLO2 Participants ppds disease science in able to manage patients with internal diseases ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations and diagnosis and diagnosis of appeal and preparing a plan for patient management in the field of reumatology (C2)		
CLO3 Participants ppds disease science in able to perform the patient clinical skills competency action in the field of reumatology (C3)		

<b>Sub-Achievement of Learning Courses (Sub CLO)</b>	
Sub-CLO 1	<b>Able to identify and master the basic concepts of disease about etiology, pathophysiology, pathogenesis, clinical signs, anamnesis, physical examination, supporting examination and governance in diseases in the field of rhumatology</b>
Sub-CLO 2	<b>Able to identify and master the concept of diseases that require musculoskeletal ultrasound action</b>
Sub-CLO 3	<b>Able to identify and master the concept of diseases that require densitometric action</b>
Sub-CLO 4	<b>mastering the pharmacology of drugs used in diseases in the field of rhumatology (NSAIDs, DMARD, Biologic agents, corticosteroids, allopurinol, colchicines, Roboransia, Plasmafaresis)</b>
Sub-CLO5	<p><b>Able to master clinical skills in the field of Artrosentesis and intrarticular injection.</b></p> <p><b>- Knees, Shoulders, Talocrural, Subtalars</b></p> <p><b>Artrosentesis and injection of small joints (PIP, DIP, wrist, MCP, CMC, tarsometatarsal)</b></p> <p><b>- Injection of periartivascular structures</b></p> <p><b>and interpretation of Bone Densytometry</b></p>
Sub-CLO 6	<b>Able to enforce diagnosis, procedures, and complications independently and completely about Abnormalities in The Joints (Rheumatoid Arthritis, Ankilose Spondylitis, Psoriatic Arthritis, Enterpathic Arthritis, Reactive Arthritis, Unclassified seronegative spondyloarthropathy, Bacterial/septic arthritis, Viral arthritis, Joint trauma, Juvenile Idiopathic Arthritis, Osteoarthritis)</b>

	Sub-CLO 7	<b>Able to enforce diagnosis, procedures, and complications, independently and completely about abnormalities in the spine (Scoliosis, Kyphosis, Lordosis, Spondylitis, spondilodiskitis, Spondilolistesis, Spondylosis (spondiloartrosis))</b>
	Sub-CLO 8	<b>Able to enforce diagnosis, procedures, and complications, independently and completely about abnormalities in autoimmune diseases (mild-moderate SLE, SLE with the involvement of vital organs or special circumstances, Anti Phospholipid Syndrom (APS), Rheumatic fever, non-articulate Rheumatic, Immunological Diseases of the Lungs, Kidneys, and Myoproteins, Sjogren's Syndrome, Behcet Disease, Uveitis)</b>
	Sub-CLO 9	<b>Able to enforce diagnosis, procedures, and complications, independently and completely about Electrolyte Disorders (Hypercalcemia in malignancy, Hypocalcemia, Calcium Metabolism Disorder, Magnesium Metabolism Disorder, Phosphate Metabolism Disorder, Mineral bone disorders- chronic kidney disease (MBDCKD))</b>
	Sub-CLO 10	<b>Able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about abnormalities in connective tissue, tendons, muscles and soft tissues. (Systemic sclerosis, Achilles tendinitis, Achilles tendon rupture, Rotator cuff tendinitis, Frozen shoulder, Rheumatic Disease)</b>
	Sub-CLO 11	<b>Able to enforce diagnosis, procedures, and complications, independently and completely about other other disorders (Vasculitis of small blood vessels, Vasculitis of Medium blood vessels, Vasculitis of large blood vessels, Gout, Other Crystal Arthropathy, Osteoarticular Tuberculosis, Osteomyelitis, Musculoskeletal Neoplasm, Thrombosis kaputmoralis, Carpal tunnel syndrome, Tarsal tunnel syndrome, Hyperparathyroidism, Rheumatic pain)</b>

Short Description of MK	<p>Reumatology is one of the branches of the science of Internal Medicine that focuses on the diagnosis, management and education of diseases in the field of Rhumatology. Learners are able to master theoretical knowledge and clinical skills so as to explain to the patient / his family patients, peers, as well as other professions about the principles, indications and complications that may arise and be able to overcome it independently.</p> <p>This course lasts for 2 months, with process activities consisting of face-to-face, and case discussions. At the end of this stage it is expected that PPDS can achieve the competencies as stipulated in the Competency Standards of Internal Medicine Specialists, especially in the field of Rhumatology.</p>																								
Study Materials/Learning Materials	<table border="1"> <tr> <td data-bbox="424 556 692 621">1</td><td data-bbox="692 556 2086 621"><b>Basic concepts of disease in the field of Rhumatology</b></td></tr> <tr> <td data-bbox="424 621 692 687">2</td><td data-bbox="692 621 2086 687"><b>Musculoskeletal Ultrasound</b></td></tr> <tr> <td data-bbox="424 687 692 752">3</td><td data-bbox="692 687 2086 752"><b>Artrosentesis</b></td></tr> <tr> <td data-bbox="424 752 692 817">4</td><td data-bbox="692 752 2086 817"><b>Densitometry</b></td></tr> <tr> <td data-bbox="424 817 692 882">5</td><td data-bbox="692 817 2086 882"><b>Medicinal pharmacology in the field of rheumatology</b></td></tr> <tr> <td data-bbox="424 882 692 948">6</td><td data-bbox="692 882 2086 948"><b>Clinical skills of artrosentesis, intraarticular injection and densitometry</b></td></tr> <tr> <td data-bbox="424 948 692 1013">7</td><td data-bbox="692 948 2086 1013"><b>Abnormalities in the Joints</b></td></tr> <tr> <td data-bbox="424 1013 692 1078">8</td><td data-bbox="692 1013 2086 1078"><b>Abnormalities in the spine</b></td></tr> <tr> <td data-bbox="424 1078 692 1144">9</td><td data-bbox="692 1078 2086 1144"><b>Autoimmune Diseases</b></td></tr> <tr> <td data-bbox="424 1144 692 1209">10</td><td data-bbox="692 1144 2086 1209"><b>Electrolyte Disorders</b></td></tr> <tr> <td data-bbox="424 1209 692 1274">11</td><td data-bbox="692 1209 2086 1274"><b>Abnormalities in Connective Tissue, Tendons, Muscles and Soft Tissues</b></td></tr> <tr> <td data-bbox="424 1274 692 1372">12</td><td data-bbox="692 1274 2086 1372"><b>Miscellaneous abnormalities</b></td></tr> </table>	1	<b>Basic concepts of disease in the field of Rhumatology</b>	2	<b>Musculoskeletal Ultrasound</b>	3	<b>Artrosentesis</b>	4	<b>Densitometry</b>	5	<b>Medicinal pharmacology in the field of rheumatology</b>	6	<b>Clinical skills of artrosentesis, intraarticular injection and densitometry</b>	7	<b>Abnormalities in the Joints</b>	8	<b>Abnormalities in the spine</b>	9	<b>Autoimmune Diseases</b>	10	<b>Electrolyte Disorders</b>	11	<b>Abnormalities in Connective Tissue, Tendons, Muscles and Soft Tissues</b>	12	<b>Miscellaneous abnormalities</b>
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Master Lecturer	<ol style="list-style-type: none"> <li data-bbox="424 1372 2086 1416">1. Dr. Dr. Faridin HP, Sp.PD, K-R</li> <li data-bbox="424 1416 2086 1465">2. Dr. dr. Femi Syahriani, Sp.PD, K-R</li> </ol>																								

	3. Dr.. Endy Adnan, Sp.PD, K-R 4. dr. Abdul Rahman, Sp.PD, K-R
<b>Book</b>	Main:
	1. Book Teaching Disease Science in FK UI
	Supporter:
	12. Text Book Harrison's 13. Kelley's textbook of rheumatology 14. Primer on the rheumatic disease 15. Dubois lupus erythematosus

Note:

13. Prodi Graduate Learning Achievement (ILO-PRODI) is an ability possessed by every PRODI graduate which is an internalization of attitude, mastery of knowledge and skills in accordance with the level of study program obtained through the learning process.
14. ILO charged to the course are some of the learning achievements of graduate study programs (ILO-PRODI) that are used for the formation / development of a course consisting of aspects of attitude, general conclusion, special skills and knowledge.
15. CP Courses (CLO) is the ability that is spelled out specifically from the ILO charged to the course, and is specific to the study material or learning materials of the course.
16. Sub-CP Courses (Sub-CLO) are the specific ability of CLO that can be measured or observed and is the final ability planned at each stage of learning, and is specific to the learning material of the course.
17. Indicators of ability assessment in the process and learning outcomes of PPDS Disease Science in the Division of Rhumatology is a specific and measurable statement that identifies the ability or performance of learning outcomes of PPDS Disease Science in the Division of Rhumatology accompanied by evidence.
18. Criteria Assessment is a benchmark that is used as a measure or benchmark of learning proficiency in assessment based on established indicators. Assessment criteria is a guideline for assessors so that assessments are consistent and unbiased. Criteria can be either quantitative or qualitative.
19. Form of assessment: test and non-test.
20. Forms of learning: Lectures, Responsi, Tutorials, Seminars or equivalent, Practicums, Studio Practices, Workshop Practices, Field Practices, Research, Community Service and/or other equivalent forms of learning.
21. Learning Methods: Small Group Discussion, Role-Play & Simulation, Discovery Learning, Self-Directed Learning, Cooperative Learning, Collaborative Learning, Contextual Learning, Project Based Learning, and other equivalent methods.
22. Learning Materials are details or descriptions of study materials that can be presented in the form of several subjects and sub-subjects.
23. The weight of the assessment is the percentage of assessment of each achievement of sub-CLO which is proportional in magnitude with the difficulty level of achievement of sub-CLO tsb., and the total is 100%.
24. TM=Face-to-Face, PT=Structured assignment, BM=Self-study.

#### Achievement of Course Learning (CLO)

In this Division of Reumatology MPPDS is expected:

1. Able to explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, prevention of complications and prognosis of each specific disease in the division of rheumatology. Able to perform data analysis and synthesis to establish problems and establish basic examination and treatment plans. Able to carry out rheumatological skills based on proper indications and procedures, as well as knowing the possible complications that will arise from any medical action performed. (P1,P2,P4,S1,C1)

No.	Sub-Achievement of Learning Courses (Sub CLO)	College Topics
1	<p>g. Able to recognize, explain, understand, understand, analyze, formulate and evaluate abnormalities in the joints and their procedures, picture the clinic of the disease, and know the most appropriate way to get more information about joint abnormalities.</p> <p>h. Able to make a clinical diagnosis and provide preliminary therapy in abnormalities in the joints, in non-emergency situations (3A)</p> <p>i. Able to determine the most appropriate referral for the treatment of the next patient. (2,3A)</p> <p>j. Able to follow up after returning from referral. (2,3A)</p> <p>k. Able to make clinical diagnosis and perform management of joint disorders independently and completely, as well as joint care (4A)</p>	<p>Rheumatoid Arthritis (4A)</p> <p>Spondilitis ankilosa (3A)</p> <p>Arthritis Psoriatic (4A)</p> <p>Enteropatik arthritis (4A)</p> <p>Reactive arthritis (4A)</p> <p><i>Unclassified seronegative spondyloarthropathy</i> (3A)</p> <p>Bacterial/septic arthritis (4A)</p> <p>Arthritis virus (4A)</p> <p>Joint trauma (3A)</p> <p><i>Juvenil idiopathic arthritis</i> (3A)</p> <p><i>Osteoarthritis</i> (4A)</p>
2	<p>f. Able to recognize, explain, understand, understand, analyze, formulate and evaluate abnormalities in the spine and its procedures, picture the clinic of the disease, and know the most appropriate way to get more information about spinal disorders.</p> <p>g. Able to make a clinical diagnosis and provide preliminary therapy of abnormalities in the spine in non-emergency situations (3A)</p> <p>h. Able to determine the most appropriate referral for the treatment of the next patient. (3A)</p> <p>i. Able to follow up after returning from referral. (3A)</p>	<p>Skoliosis (3A)</p> <p>Kifosis (3A)</p> <p>Lordosis (3A)</p> <p>Spondilitis, Spondilodiskitis (3A)</p> <p>Spondiolistesis (3A)</p> <p>Spondilosis ( Spondiloartrosis ) (3A)</p>
3	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate autoimmune diseases and their</p>	<p>Light-medium SLE (4A)</p> <p>SLE with involvement of vital organs or special circumstances (3A)</p>

	<p>procedures, clinical picture of diseases, and know the most appropriate way to get more information about autoimmune diseases.</p> <p>b. Able to make a clinical diagnosis (occupational diagnosis) of autoimmune diseases and determine the most appropriate referral for the treatment of the next patient (2)</p> <p>c. Able to follow up after returning from referral. (2,3B)</p> <p>d. Able to make clinical diagnoses and perform autoimmune disease management independently and completely, as well as joint care. (4A)</p>	<p><i>Anti phospholipid syndrome</i> (4A)</p> <p>Rheumatic fever (4A)</p> <p>Nonarticular rheumatics (4A)</p> <p>Immunological diseases of the lungs, kidneys, and myoproteins (3A)</p> <p>Sjogren's syndrome (3A)</p> <p>Behcet's disease (2)</p> <p><i>Uveitis</i> (3A)</p>
4	<p>g. Able to recognize, explain, understand, understand, analyze, formulate and evaluate electrolyte disorder diseases and their procedures, picture the disease clinic, and know the most appropriate way to get more information about electrolyte disorders.</p> <p>h. Able to make a clinical diagnosis and provide preliminary therapy of electrolyte disorders in non-emergency situations. (3A)</p> <p>i. Able to determine the most appropriate referral for the treatment of the next patient. (3A)</p> <p>j. Able to follow up after returning from referral. (3A)</p> <p>k. Able to make clinical diagnosis and conduct management of electrolyte disorders independently and completely, as well as treatment together. (4A)</p>	<p>Hyperkalemia on terrorism (4A)</p> <p>Hipokalemia (4A)</p> <p>Impaired calcium metabolism (4A)</p> <p>Impaired magnesium metabolism (4A)</p> <p>Impaired phosphate metabolism (4A)</p> <p>Mineral bone disorders-chronic kidney disease ( MBD-CKD) (3A)</p>
5	<p>a. Able to recognize, explain, understand, understand, analyze, formulate and evaluate diseases abnormalities in connective tissue, tendons, muscles and soft tissues and their procedures, clinical picture of the disease, and know the most appropriate way to get more information about glomerular disease.</p> <p>b. Able to make a clinical diagnosis (occupational diagnosis) of abnormalities in connective tissue, tendons, muscles and soft tissues. (2)</p>	<p>Systemic sclerosis (3A)</p> <p><i>Tendinitis Achilles</i> (3A)</p> <p>Ruptur tendon Achilles (3A)</p> <p><i>Rotator cuff Tendinitis</i> (4A)</p> <p>Frozen shoulder (4A)</p> <p>Extra articular rheumatic disease (4A)</p> <p>Recurrent polycondritis (2)</p> <p><i>Inflammatory myopathy</i> (3A)</p>

	c. Able to make a clinical diagnosis and provide preliminary therapy of abnormalities in connective tissue, tendons, muscles and soft tissue in non-emergency situations. (3A) d. Able to determine the most appropriate referral for the treatment of the next patient. (2,3A) e. Able to follow up after returning from referral. (2,3A) f. Able to make a clinical diagnosis and perform abnormalities management in connective tissue, tendons, muscles and soft tissue independently and completely, as well as treated together. (4A)	Musculoskeletal infection (3A) Lesi meniscus,medial, dan lateral (3A) <i>Mix connective tissue disease (MCTD)</i> (3A) Fibromyalgia (4A) Pioderma gangrenosum (3A) Amyloidosis (2) Sarkoidosis (2)
6	j. Able to recognize, explain, understand, understand, analyze, formulate and evaluate hereditary diseases and their procedures, clinical picture of diseases, and know the most appropriate way to get more information about glomerular disease. k. Able to make a clinical diagnosis (occupational diagnosis) of hereditary diseases. (2) l. Able to make a clinical diagnosis and provide preliminary therapy of hereditary diseases in non-emergency situations. (3A) m. Able to determine the most appropriate referral for the treatment of the next patient. (2,3A) n. Able to follow up after returning from referral. (2,3A) o. Able to make clinical diagnosis and perform management of hereditary diseases independently and completely, as well as joint care. (4A)	Marfan syndrome (2) <i>Osteogenesis imperfect</i> (2) Sindroma Ehlers-Danlos (2) Osteomalasia,rickets (4A) Adult onset still disease (3A)
7	f. Able to recognize, explain, understand, understand, analyze, formulate and evaluate other rhumatological diseases and their procedures, clinical overview of diseases, and know the most appropriate way to get more information about glomerular disease. g. Able to make a clinical diagnosis (occupational diagnosis) of other rhumatological diseases. (2) h. Able to make a clinical diagnosis and provide preliminary therapy of other rhumatological diseases in non-emergency situations. (3A) i. Able to make a clinical diagnosis and provide preliminary therapy on other rhumatological diseases with emergency situations to save lives or prevent severity and/or disability in patients. (3B)	Vasculitis of small blood vessels (3A) Moderate vascular vasculitis (3A) Vasculitis of large blood vessels (3A) Gout (4A) Other crystal arthropathy (3A) Osteoarthriicular tuberculosis (3A) Osteomyelitis (3B) Musculoskeletal neoplasm (3A) Nekrosis gate femoral (3A) Carpal tunnel syndrome (3B) Tarsal tunnel syndrome (3B) Hiperparatiroidisme (4A)

	<p>j. Able to determine the most appropriate referral for the treatment of the next patient. (2,3A,3B)</p> <p>k. Able to follow up after returning from referral. (2,3A,3B)</p> <p>l. Able to make clinical diagnoses and perform management of other rhumatological diseases independently and completely, as well as joint treatment. (4A)</p>	<p>Regional rheumatic pain (4A)</p> <p>Complex regional pain syndrome, compression neuropathy, and other neuropathic pain (3A)</p> <p>Work and sports trauma (3A)</p>
8	Able to know, understand, understand, and explain the pharmacology of drugs used in diseases in the field of rheumatology	<p>Analgetik (acetaminofen, nsaid, opioid)</p> <p>Corticosteroids</p> <p>Immunosupresan/DMARD (obat anti malaria, azathioprin, siklofosfamid, mofetil mikofenolat, siklosporin, methotrexate)</p> <p>Uric acid reduction</p> <p>Kolkisin</p> <p><i>Biologic Agent</i></p> <p><i>Plasmafaresis</i></p> <p>Roborantia</p> <p>Neuropathy Medications</p>
9	<p>a. Able to master theoretical knowledge of rheumatology skills with an emphasis on <i>clinical reasoning</i> and <i>problem solving</i> and the opportunity to see and observe these skills in the form of demonstrations or direct implementation in patients / communities. (2)</p> <p>b. Mastering theoretical knowledge of clinical skills of rheumatology including biomedical background and psychosocial impact of those skills, having the opportunity to see and observe those skills in the form of demonstrations or direct execution in patients/ communities, and practicing those skills on props and/or <i>standardized</i> patients. (3)</p> <p>c. Able to perform clinical skills of rheumatology independently. (4A)</p>	<p>Artrosentesis and intraarticular injection in various large joints: Knee(4A) Bahu, Talokrural, Subtalar (3)</p> <p>Artrosentesis and injection of small joints (PIP,DIP,wrist,MCP,CMC, tarsometatarsal). (2)</p> <p>Injection of periartic structures (4A)</p> <p>Musculoskeletal ultrasound (2)</p> <p>Interpretasi bone densitometry (2)</p>

Prerequisite courses						
Meeting to	(Final ability of each stage of learning)	Valuation		Form of Learning; Learning Methods; Student assignments; Estimated time	Learning Materials (Library)	WEIGHT
		Indicator	Criteria and Shapes			
1	2	3	4	5	6	7
1	Able to identify and master the basic concepts of disease about etiology, pathophysiology, pathogenesis, clinical signs, anamnesis, physical examination, supporting examination and governance in diseases in the field of rheumatology thoroughly	Completion in identifying diseases about etiology, pathophysiology, pathogenesis, clinical signs, anamnesis, physical examination, supporting examination and procedures in diseases in the field of rheumatology	Criterion: 10 = able to identify and master the basic concepts of disease about etiology, pathophysiology, pathogenesis, clinical signs, anamnesis, physical examination, supporting examination and procedures in diseases in the field of complete rheumatology  5 = able to identify and master but not systematically or not in a row  0 = unable.	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week •	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Kelly's textbook of rheumatology</li> <li>• Primer on the rheumatic disease Dubois lupus erythematosus</li> </ul>	<ul style="list-style-type: none"> <li>• Total value weight = 10</li> </ul>

			<p><u>Shape:</u></p> <ul style="list-style-type: none"> <li>• MCQ test</li> <li>• Mini-CEX, CbD, DOPS exams.</li> </ul> <p>Tests in every division.</p> <ul style="list-style-type: none"> <li>• 1 Scientific Journal</li> </ul>			
2	Able to identify and master the concept of diseases that require musculoskeletal ultrasound action	Completion in identifying and mastering the concept of diseases that require musculoskeletal ultrasound action	<p><u>Criterion</u></p> <p>8= Able to identify and master the concept of diseases that require musculoskeletal ultrasound action</p> <p>4= able to identify but have not mastered the concept of diseases that require musculoskeletal ultrasound.</p> <p>0 = unable.</p> <p><u>Bentuk</u></p> <ul style="list-style-type: none"> <li>• MCQ test</li> <li>• Mini-CEX exam, CBD Exam in each division.</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Kelly's textbook of rheumatology</li> <li>• Primer on the rheumatic disease</li> <li>• Dubois lupus erythematosus</li> </ul>	<ul style="list-style-type: none"> <li>• Total value weight = 8</li> </ul>

3	Able to identify and master the concept of diseases that require densitometric action	Completion in identifying and mastering the concept of diseases that require the action of artrosentesis	<p><u>criterion</u></p> <p><u>8=</u> Able to identify and master the concept of diseases that require densitometric action</p> <p>4= Able to identify but have not mastered the concept of diseases that require densitometric action</p> <p><u>Shape</u></p> <ul style="list-style-type: none"> <li>• MCQ test</li> <li>• Mini CEX</li> <li>• CBD</li> <li>• journal</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Kelly's textbook of rheumatology</li> <li>• Primer on the rheumatic disease</li> <li>• Dubois lupus erythematosus</li> </ul>	<ul style="list-style-type: none"> <li>• Total value weight = 8</li> </ul> <p>MCQ test(2) mini CEX(3) CBD (4) Journal (1)</p>
4	Mastering the pharmacology of drugs used in diseases in the field of rhumatology (NSAIDs, DMARD, Biologic agents, corticosteroids, allopurinol, colchicines)	Complete mastering the pharmacology of drugs used in diseases in the field of rhumatology (NSAIDs, DMARD, Biologic agents, corticosteroids,	<p><u>Criterion</u></p> <p><u>9=</u> Able to master the pharmacology of drugs used in diseases in the field of rhumatology (NSAIDs, DMARD, Biologic agents, corticosteroids,</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Kelly's textbook of rheumatology</li> </ul>	<ul style="list-style-type: none"> <li>• Total value weight = 9</li> </ul>

		allopurinol, colchicines)	allopurinol, colchicines)  4.5= only able to identify but not yet master the whole  0 = unable to identify and master  <u>Shape</u> • MCQ test • Mini CEX • CBD • journal	<b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week	• Primer on the rheumatic disease Dubois lupus erythematosus	
5	Able to master clinical skills in the field of Artrosentesis and intrarticular injection	Complete mastering of clinical skills in the field of Artrosentesis and intrarticular injection	<u>criterion</u> <u>9</u> = Able to master clinical skills in the field of Artrosentesis and intrarticular injection  0 = unable to	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAl College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week	• Text Book Harrison's • Book Teaching The Science of Internal Medicine • Kelly's textbook of rheumatology • Primer on the rheumatic disease • Dubois lupus erythematosus	total value weight = 9

6	Able to enforce diagnosis, procedures, and complications independently and completely about abnormalities in the joints	Complete enforcement of diagnosis, procedures, complications independently in joint abnormalities.	<p><u>Criterion</u></p> <p>10 = Able to enforce diagnosis, procedures, and complications independently and completely about abnormalities in the joints</p> <p>5 = Able to enforce diagnosis, procedures, and complications independently but not completely</p> <p>0=unable</p> <p><u>Shape</u></p> <ul style="list-style-type: none"> <li>• Mini-CEX exam</li> <li>• CbD</li> <li>• DOPS. Tests in every division.</li> <li>• 1 Scientific Journal</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Kelly's textbook of rheumatology</li> <li>• Primer on the rheumatic disease</li> <li>• Dubois lupus erythematosus</li> </ul>	<ul style="list-style-type: none"> <li>• Total value weight = 10</li> </ul>
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			Weight: 10 (column 8)			
7	Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examinations, and procedures independently and thoroughly about Abnormalities in the spine such as Skoliosis, Kifosis, Lordosis, Spondilitis, spondilodiskitis, Spondilolistesis Spondilosis (spondiloartrosis)	Completion in understanding and able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about abnormalities in the spine such as Skoliosis, Kifosis, Lordosis, Spondilitis, spondilodiskitis Spondilolistesis, Spondilosis (spondiloartrosis)	<p><u>Criterion</u></p> <p>10 = able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Abnormalities in the spine</p> <p>5 = able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently but not completely</p> <p>0 = unable to</p> <p><u>Shape</u></p> <ul style="list-style-type: none"> <li>• Mini-CEX, CbD, DOPS exams. Tests in every division.</li> <li>• 1 Scientific Journal</li> </ul>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Kelly's textbook of rheumatology</li> <li>• Primer on the rheumatic disease</li> <li>• Dubois lupus erythematosus</li> </ul>	<ul style="list-style-type: none"> <li>• Total value weight = 10</li> <li>•</li> </ul>

8	<p>Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, as well as implementation independently and completely about Autoimmune Diseases(SLEringan-moderate, SLE with involvement oforganvitalatau specificity, AntiPhospholipidSyndrom (APS), Feverreumatic, Rheumatic nonarticular, HypogymunologiparuDisease, kidney, and imioprotein, SyndromeSjogren, Diseasebehcet, Uveitis)</p>	<p>Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Autoimmune Diseases such as SLEringan-moderate, SLE with involvement oforganvitalatauad aadaankhus, AntiPhospholipidSyndrom (APS), Feverreumatic, Rheumatic nonarticular, Hypotherapeutic, DiseaseImunologiparu, kidney, and mymioprotein, SyndromeSjogren, Diseasebehcet, Uveitis</p>	<p>Criterion: 10 = able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about autoimmune diseases  5 = able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently but not yet completed  Shape</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>Text Book Harrison's</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Kelly's textbook of rheumatology</li> <li>Primer on the rheumatic disease</li> <li>Dubois lupus erythematosus</li> </ul>	<ul style="list-style-type: none"> <li>Total value weight = 10</li> </ul>
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			<ul style="list-style-type: none"> <li>• Mini-CEX, CbD, DOPS exams. Tests in every division.</li> <li>• Scientific Journal</li> </ul>			
9	Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examinations, and procedures independently and thoroughly about Electrolyte Disorders (Hypercalcemia in malignancy, Hypocalcemia, Calcium Disorders, Magnesium metabolism Disorders, Phosphate Metabolism Disorders, Mineral bone disorders- <i>chronic kidney disease (MBD-CKD)</i> )	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Electrolyte Disorders such as Hypercalcemia in malignancies, Hypocalcemia, Calcium Metabolism Disorder, Magnesium Metabolism Disorder, Phosphate Disorder, Mineral bone disorders- <i>chronic kidney disease (MBD-CKD)</i>	<p>Character 10 = able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Electrolyte Disorders</p> <p>5 = able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>Divisional College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Kelly's textbook of rheumatology</li> <li>• Primer on the rheumatic disease</li> <li>• Dubois lupus erythematosus</li> </ul>	<ul style="list-style-type: none"> <li>• Total value weight = 10</li> </ul>

			<p>independently but not yet completed</p> <p>0 = unable</p> <p>Shape</p> <ul style="list-style-type: none"> <li>• Mini test- CEX, CbD, DOPS. Tests in every division.</li> </ul> <p>1 Scientific Journal</p>			
10	Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and procedures independently and thoroughly about systemic sclerosis, Achilles tendinitis, Achilles tendon rupture, Rotator cuff tendinitis, Frozen shoulder, extra-articular rheumatic disease, recurrent polycondritis, inflammatory myopathy, meniscus, medial and lateral cancer Mix connective tissue disease MCTD), Fibromialgia, Pioderma	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about systemic sclerosis, Achilles Tendinitis, Achilles tendon rupture, Rotator cuff tendinitis, Frozen shoulder, extra artiarmatic Rheumatic Disease, Recurrent polycondritis, inflammatory	<p>Character</p> <p>10 = able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about other rhumatological disorders</p> <p>5 = able to explain the definition, pathophysiology of diagnosis</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAl College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<ul style="list-style-type: none"> <li>• Kelly's textbook of rheumatology</li> <li>• Primer on the rheumatic disease Dubois lupus erythematosus</li> </ul>	<ul style="list-style-type: none"> <li>• Total value weight = 10</li> <li>•</li> </ul>

	<p>gangrenosum, Amiloidosis, Sarkoidosis</p> <p>Marfan syndrome</p> <p>Osteogenesis imperfect</p> <p>Sindroma Ehlers-Danlos</p> <p>Osteomalasia, rickets</p> <p>Adult onset still disease</p> <p>Marfan syndrome</p>	<p>myopathy, meniscus, medial and lateral cancer</p> <p>Mix connective tissue disease</p> <p>MCTD),</p> <p>Fibromialgia,</p> <p>Pioderma</p> <p>gangrenosum,</p> <p>Amiloidosis,</p> <p>Sarkoidosis</p> <p>Marfan syndrome</p> <p>Osteogenesis imperfect</p> <p>Sindroma Ehlers-Danlos</p> <p>Osteomalasia, rickets</p> <p>Adult onset still disease</p> <p>Marfan syndrome</p>	<p>and complications, supporting examination, and implementation independently but not completely</p> <p>0 = unable</p> <p>Shape</p> <ul style="list-style-type: none"> <li>• Mini-CEX, CbD, DOPS exams.</li> </ul> <p>Tests in every division.</p> <ul style="list-style-type: none"> <li>• 1 Scientific Journal</li> </ul>			
11	<p>Learners are able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and independent and complete procedures about vasculitis of small blood vessels,</p>	<p>Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently</p>	<p>Character</p> <p>10 = able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week</p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Kelly's textbook of</li> </ul>	<ul style="list-style-type: none"> <li>• Total weight of value10</li> </ul>

	<p>moderate vascular vasculitis.</p> <p>Vasculitis of large blood vessels</p> <p>GoutArtropathy</p> <p>Other Crystals</p> <p>Osteoarticular tuberculosis</p> <p>Osteomyelitis</p> <p>Neoplasma musculoskeletal</p> <p>Nekrosis gate femoral</p> <p>Carpal tunnel syndrome</p> <p>Tarsal tunnel syndrome</p> <p>Hiperparatiroidisme</p> <p>Regional rheumatic pain</p> <p>complex regional pain syndrome, compression neuropathy and other neuropathic pain</p> <p>Trauma to work and sports</p>	<p>and implementation independently and thoroughly about vasculitis of small blood vessels, vasculitis of medium blood vessels</p> <p>Vasculitis of large blood vessels</p> <p>GoutArtropathy</p> <p>Other Crystals</p> <p>Osteoarticular tuberculosis</p> <p>Osteomyelitis</p> <p>Neoplasma musculoskeletal</p> <p>Nekrosis gate femoral</p> <p>Carpal tunnel syndrome</p>	<p>and thoroughly about vasculitis</p> <p>5 = able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently but not completely</p> <p>0= unable.</p> <p>Shape</p> <ul style="list-style-type: none"> <li>• Mini-CEX, CbD, DOPS exams.</li> <li>• Tests in every division.</li> <li>• 1 Scientific Journal</li> </ul>	<p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<p>rheumatology</p> <ul style="list-style-type: none"> <li>• Primer on the rheumatic disease</li> <li>Dubois</li> <li>lupus</li> <li>erythematosus</li> </ul>	
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		<p>Tarsal tunnel syndrome</p> <p>Hiperparatiroidisme</p> <p>Regional rheumatic pain</p> <p>complex regional pain syndrome, compression neuropathy and other neuropathic pain</p> <p>Trauma to work and sports</p>			
<p><b>Final Value:</b></p> <p><b>85 – 100= A</b></p> <p><b>80 - &lt; 85= A Minus</b></p> <p><b>75 - &lt; 80= B Plus</b></p> <p><b>70 - &lt; 75= B</b></p> <p><b>65 - &lt;70= B Minus</b></p> <p><b>55 - &lt; 65= C</b></p> <p><b>00 - &lt; 55= E</b></p>					100%

Understanding 1 credit in THE FORM OF LEARNING				JaM
a	Lectures, Responds, Tutorials			
	Face-to-face	Structured Assignments	Self-Study	
	50 minutes/week/semester	60 minutes/week/semester	60 minutes/week/semester	2,83
b	Seminars or other similar forms of learning			
	Face-to-face		Self-study	
	100 minutes/week/semester		70 minutes/week/semester	2,83
c	Practicums, studio practices, workshop practices, field practices, research, community service, and/or other equivalent forms of learning			
	170 minutes/week/semester			

LOGO PT	PT..... Faculty..... Department/Study Program.....				
<b>TASK PLAN OF DISEASE SCIENCE PPDS PARTICIPANTS IN THE ENDOCRINE DIVISION OF METABOLIC DIABETES</b>					
COURSES	.....				
CODE	.....	credits	...	SEMESTER	....
LECTURER	.....				
<b>TASK FORM</b>		<b>TASKWORK TIME</b>			
.....		.....			
<b>TASK TITLE</b>					
.....					
<b>SUB-ACHIEVEMENT OF LEARNING COURSES</b>					
.....					
<b>TASK DECRYPTION</b>					
.....					
<b>TASKWORKING METHODS</b>					
1.					
<b>EXTERNAL SHAPES AND FORMATS</b>					
a. Objects: ....					
b. External Shape:					
<b>INDICATORS, CRETTERIAS AND ASSESSMENT WEIGHTS</b>					
<b>SCHEDULE</b>					
<b>OTHERS</b>					
<b>REFERRAL LIST</b>					

	Name of college		: Hasanuddin University			Document Code				
	Name of Faculty		: Medicine							
	Department Name		: The Science of Internal Medicine							
	Prodi Name		: The Science of Internal Medicine							
<b>SEMESTER LEARNING PLAN</b>										
COURSES (MK)		CODE	Course	WEIGHT (credit):		SEMESTER	Tgl Drafting			
Medical Oncology Hematology		20C01531808	The Science of Internal Medicine	8		3,4, 5, 6	10 October 2019			
AUTHORIZATION	RPS Developer		Coordinator RMK			Chairman of PRODI				
	Dr. dr. Tutik Harjanti, Sp.PD, KHOM		Prof. Dr. dr. Haerani Rasyid, M.Kes, SpPD, K-GH			Dr. dr. Hashim Kasim, SpPD, K-GH				
Learning Achievement (CP)	ILO PRODI charged to MK									
	S 1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals. (I'M 1)								
	C 2	Students are able to perform anamnesis, physical examination, laboratory examinations, and procedures that are in accordance with the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> (C 2).								
	C 3	Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenter hepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics. (C 3)								

<b>Achievement of Course Learning (CLO)</b>	
CLO1 Participants of PPDS Internal Disease Science are able to conduct journal analysis and make case reports or scientific work related to the field of Hematology of Medical Oncology. (S1)	
CLO2 Participants of PPDS Internal Disease Science are able to manage internal disease patients ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations and diagnosis and differential diagnosis and drawing up a plan for the management of patients with medical oncology spastics. (C2)	
CLO3 Participants of PPDS Internal Disease Science are able to perform Clinical Skills Competency Actions of patients in the field of Medical Oncology Hematology. (C3)	
<b>Sub-Achievement of Learning Courses (Sub CLO)</b>	
Sub-CLO 1	Able to identify and master the basic concepts of disease about etiology, pathophysiology, pathogenesis, clinical signs, anamnesis and physical examination of diseases in the field of Hematology of Medical Oncology.
Sub-CLO 2	Able to identify and master the concept of diseases that require the action of Peripheral Blood Analysis
Sub-CLO 3	Able to identify and master the concept of diseases that require the action of Bone Marrow Aspiration
Sub-CLO 4	Able to identify and master the concept of diseases that require phlebotomies
Sub-CLO 5	Able to enforce diagnosis, procedures and complications independently and completely about Hematological Diseases (Hemopoiesis, Fe Deficiency Anemia, Megaloblastic Anemia, Immune Hemolytic Anemia, Non-Immune Hemolytic Anemia, Thalassemia, Chronic Disease Anemia, Aplastic Anemia, Polycythemia Vera, Acute Myeloblastic Leukemia, Chronic Granulocytic Leukemia, Acute Lymphoblastic Leukemia, Chronic Lymphocytic Leukemia, Multiple Myeloma, Dismieolopoetic Syndrome, Hemophilia A and B)
Sub-CLO 6	Able to enforce the diagnosis, procedures and complications independently and completely about Hemostasis Disease and Thrombosis (Essential Thrombocytosis, Purpura Thrombocytopenia Immune, Disseminated Intravascular Coagulation, Hypercoagility Conditions, Pulmonary Embolism Venous Thrombosis, Thrombosis In Cancer)
Sub-CLO 7	Able to enforce diagnosis, procedures and complications independently and thoroughly about Immunohematology and Blood Transfusion (Basics of Blood Transfusion, Prevention and Treatment of Blood Transfusion Complications, Donor and Therapeutic Apheresis)
Sub-CLO 8	Able to enforce diagnosis, procedures and complications independently and thoroughly about General Oncology (Basic Principles of Systemic Therapy in Cancer, Chemotherapy techniques, Supportive Treatment in Cancer patients, Febrile Neuropenia In Cancer Patients, Paraneoplastic Syndrome, Management of Metastatic Cancer in Bones)

	Sub-CLO 9	Able to enforce diagnosis, procedures and complications independently and completely about Special Oncology (Non-Hodgkin Lymphoma, Hodgkin Lymphoma, Nasopharyngeal Carcinoma, Lung Carcinoma, Heart Tumor, Esophageal Carcinoma, Gaster Tumor, Colorectal Tumor, Pancreatic Cancer)
Short Description of MK		<p>Hematology Oncology is one of the branches of science of Internal Medicine that focuses on the diagnosis, management and education of diseases in the field of Hematology and Medical Oncology so that learners are able to master theoretical knowledge and clinical skills so that they can explain to patients and their families, peers, and other professions about the principles, indications and complications that may arise and can be implemented independently.</p> <p>This course lasts for 2 months, with process activities consisting of face-to-face, discussion of outpatient cases in medical oncology hematology polyclinics, special action rooms and hospitalizations at Wahidin Sudirohusodo Hospital, and other networking hospitals. At the end of this stage it is expected that PPDS can achieve the competencies as stipulated in the Competency Standards of Internal Medicine Specialists in the field of Hematology and Medical Oncology.</p>
Study Materials/Learning Materials	1	Hematological Diseases (Hemopoiesis, Fe Deficiency Anemia, Megaloblastic Anemia, Immune Hemolytic Anemia, Non-Immune Hemolytic Anemia, Thalassemia, Chronic Disease Anemia, Aplastic Anemia, Polycythemia Vera, Acute Myeloblastic Leukemia, Chronic Granulocytic Leukemia, Acute Lymphoblastic Leukemia, Chronic Lymphocytic Leukemia, Multiple Myeloma, Disseminated Syndromes, Hemophilia A and B)
	2	Hemostasis Disease and Thrombosis (Essential Thrombocytosis, Purpura Thrombocytopenia Immune, Disseminated Intravascular Coagulation, Hypercoagulability Conditions, Pulmonary Embolism Venous Thrombosis, Thrombosis In Cancer)
	3	Immunohematology and Blood Transfusion (Basics of Blood Transfusion, Prevention and Treatment of Blood Transfusion Complications, Donor and Therapeutic Apheresis)
	4	General Oncology (Basic Principles of Systemic Therapy in Cancer, Chemotherapy techniques, Supportive Treatment in Cancer patients, Febrile Neutropenia In Cancer Patients, Paraneoplastic Syndrome, Management of Metastatic Cancer in Bones)
	5	Special Oncology (Non-Hodgkin Lymphoma, Hodgkin Lymphoma, Nasopharyngeal Carcinoma, Lung Carcinoma, Heart Tumor, Esophageal Carcinoma, Gaster Tumor, Colorectal Tumor, Pancreatic Cancer)

Book	Main:										
	1. Teaching Materials in Disease Science in FSI 2014 2. Harrison. Harrison's pocket book. Bina Rupa Aksara. Jakarta. 2015. 3. Text Book Hematology and Medical Oncology										
	Supporter:										
		1. Reading Journal 2. Refarat and Case Report of the Division of Hematology and Medical Oncology									
Master Lecturer	1.DR. Dr. Andi Fachruddin Benyamin, Sp.PD, KHOM 2.DR. Dr. Tutik Harjianti, Sp.PD, KHOM 3.DR. Dr. Sahyuddin Saleh, Sp.PD, KHOM 4.Dr. Rahmawati Minhajat, Ph.D, Sp.PD, KHOM 5.Dr. Dimas Bayu, Sp.PD, KHOM 6 dr. Andi Wahyudi Papabbari, SpPD										
Prerequisite courses											
Meeting to	Sub CLO (Final ability of each stage of learning)	Valuation		Form of Learning; Learning Methods; Student assignments; Estimated time	Learning Materials (Library)	Assessment Weight (%)					
		Indicator	Criteria and Shapes	Luring (offline)							
1	2	3	4	5	6	7					
1,2	Able to enforce diagnosis, procedures and complications independently and thoroughly about Hematological Diseases	Completion in identifying the disease about and able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about		<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b>	Hemopoiesis, Fe Deficiency Anemia, Megaloblastic Anemia, Immune Hemolytic Anemia, Non-						

		Diseases about Hematological Diseases		5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week	Immune Hemolytic Anemia, Thalassemia, Chronic Disease Anemia, Aplastic Anemia, Polycythemia Vera, Acute Myeloblastic Leukemia, Chronic Granulocytic Leukemia, Acute Lymphoblastic Leukemia, Chronic Lymphocytic Leukemia, Multiple Myeloma, Dysmiosis	
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					<p>lopoetic Syndro me, Hemoph ilia A and B</p> <p>1. Teachin g Material s in Disease Science in FSI 2014</p> <p>2. Harriso n. Harriso n's Pocket Book: Hemato logy and Oncolog y. Bina Rupa Aksara. Jakarta. 2015.</p> <p>3. Journal and textboo</p>	
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					<b>k reading</b>	
3,4	Able to enforce diagnosis, procedures and complications independently and completely about Hemostasis disease and thrombosis	Complete enforcement of diagnosis, procedures and complications independently and thoroughly about Hematological Diseases	<b>Test Form:</b> Pre Test Divisi Post Split Tests Mini Cex CBD DOPS Division Exam	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week	Essential thrombocytosis, Purpura Immune Thrombocytopenia, Disseminated Intravascular Coagulation, Hypercoagulability Conditions, Pulmonary Embolism Venous Thrombosis, Thrombosis In Cancer	<b>1.</b> <b>Teaching Materials in Disease</b>

					<p>Science in FSI 2014</p> <p>2. Harriso n. Harriso n's Pocket Book: Hemato logy and Oncolog y. Bina Rupa Aksara. Jakarta. 2015.</p> <p>3. Journal and textboo k reading</p>	
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5,6	<p>Able to enforce diagnosis, procedures and complications independently and thoroughly about Immunohematology and Blood Transfusion (Basics of Blood Transfusion, Prevention and Treatment of Blood Transfusion Complications, Donor and Therapeutic Aferesis)</p>	<p>Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Immunohematology and Blood Transfusion (Basics of Blood Transfusion, Prevention and Treatment of Blood Transfusion Complications, Donor and Therapeutic Aferesis)</p>	<p><b>Criterion:</b> Accuracy and mastery  <b>Non-test form:</b> Fulfilling absence from bed side teaching, able to perform clinical skills independently and supervision  <b>Test Form:</b> Mini Cex CBT DOPS Division Exam</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week</p>	<p><b>1. Teaching Materials in Disease Science in FSI 2014</b>  <b>2. Harrison. Harrison's Pocket Book: Hematology and Oncology. Bina Rupa Aksara. Jakarta. 2015.</b>  <b>3. Journal and textbook reading</b></p>	
7	<p>Able to enforce diagnosis, procedures and complications independently and thoroughly about General Oncology (Basic Principles of</p>	<p>Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications,</p>	<p><b>Criterion:</b> Accuracy and mastery  <b>Non-test form:</b> Fulfilling absence from bed side</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Public Lecture:</b> 1 x 100 minutes/ week</p>	<p><b>1. Teaching Materials in Disease Science in FSI 2014</b>  <b>2. Harrison. Harrison's Pocket Book:</b></p>	

	Systemic Therapy in Cancer, Chemotherapy techniques, Supportive Treatment in Cancer patients, Febrile Neutropenia In Cancer Patients, Paraneoplastic Syndrome, Management of Metastatic Cancer in Bones)	supporting examination, and implementation independently and thoroughly about General Oncology	teaching, able to perform clinical skills independently and supervision	<b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week	<b>Hematology and Oncology.</b> <b>Bina Rupa Aksara.</b> <b>Jakarta. 2015.</b>  <b>3. Journal and textbook reading</b>	
8	Able to enforce diagnosis, procedures and complications independently and thoroughly about Special Oncology	Completion in understanding and being able to explain the definition, pathophysiology of diagnosis and complications, supporting examination, and implementation independently and thoroughly about Special Oncology	<b>Criterion:</b> Accuracy and mastery  <b>Non-test form:</b> Fulfilling absence from bed side	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/ case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b>	Non-Hodgkin Lymphoma, Hodgkin Lymphoma, Nasopharyngeal Carcinoma, Lung Carcinoma, Heart Tumor, Esophageal Carcinoma, Gaster Tumor, Colorectal Tumor, Pancreatic Cancer	

			CBD Mini Cex DOPS Division Exam	5 x 8 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 3 x 12 hours/ week	<b>1. Teaching Materials in Disease Science in FSI 2014</b>  <b>2. Harrison. Harrison's Pocket Book: Hematology and Oncology. Bina Rupa Aksara. Jakarta. 2015.</b>  <b>3. Journal and textbook reading</b>	
<b>Final Value:</b>  85 - 100= A 80 - < 85= A Minus 75 - < 80= B Plus 70 - < 75= B 65 - <70= B Minus 55 - < 65= C 00 - < 55= E						100%

	Name of college	:	Hasanuddin University			Document Code
	Name of Faculty	:	Medicine			
	Prodi Name	:	Education of Internal Medicine Specialists			
<b>SEMESTER LEARNING PLAN</b>						
COURSES (MK)		CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting
GERIATRICI		20C01531905	The Science of Internal Medicine	4	3/4/5/6	10 October 2019
AUTHORIZATION	RPS Developer			Coordinator RMK	Chairman of PRODI	
	dr. Wasis Udaya, SpPD-KGer dr Agus sudarso, SpPD, KGer			Prof. Dr. dr. Haerani R, SpPD-K-GH,SpGK	Dr. dr. Hashim Kasim, SpPD-KGH	
Learning Achievement (CP)	<b>ILO PRODI charged to MK</b>					
	S 1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals.				
	C2	Students are able to perform anamnesis, physical examinations, laboratory examinations, and procedures appropriate to the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> .				
	C3	Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics.				
<b>Achievement of Course Learning (CLO)</b>						

CLO1 Participants of PPDS Internal Disease Science are able to conduct journal analysis and make case reports or scientific work related to the field of Geriatrics (S1)

CLO2 Participants ppds disease science in able to manage patients with internal diseases ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations and diagnosis and diagnosis of appeals and preparing a plan for the management of patients bidang Geriatric (C2)

CLO3 Participants ppds disease science in able to perform clinical skills competency action patients in geriatric field (C3)

#### **Sub-Achievement of Learning Courses (CLO)**

Sub-CLO1	Able to perform complete and accurate anamnesis, systematic physical examination, functional status assessment, fall risk assessment, cognitive function assessment, deubitus risk assessment, nutritional status assessment, depression screening in geriatric patients
Sub-CLO 2	Able to identify problems in geriatric patients and establish necessary supporting examinations
Sub-CLO 3	Able to establish diagnosis, provide pharmacological and nonpharmacological procedures, nutritional procedures, prevent complications, provide education, interdisciplinary cooperation, and refer to subspecialists of geriatric syndrome cases
Sub-CLO 4	Able to establish a diagnosis, provide pharmacological and nonpharmacological procedures, nutritional procedures, prevent complications, provide education, interdisciplinary cooperation, and refer to subspecialty of disease cases that are often found in geriatrics.
Sub-CLO 5	Able to perform independently the clinical skills of examination of geriatric patients
Sub-CLO 6	Able to perform independently the clinical skills of geriatric patient care
Sub-CLO 7	Able to perform perioperative management of geriatric patients

<b>Short Description of MK</b>	Geriatrics is one of the divisions in Internal Medicine that studies the health problems of elderly people (age 60 years and above). In this course, students learn to manage geriatric patients, starting from the plenary assessment of geriatric patients, planning supporting examinations, establishing problems / diagnosis / diagnosis of appeals, drawing up patient management plans with regard to ethical, social, economic, religious and cultural aspects, providing education, conducting interdisciplinary cooperation, and referring to subspecialists.
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<b>Study Materials / Learning Materials</b>	<ol style="list-style-type: none"> <li>1 Plenary Assessment of Geriatric Patients (4A)</li> <li>2 Immobilization at an advanced age (4A)</li> <li>3 Postural instability and falls (4A)</li> <li>4 Urinary incontinence (4A)</li> </ol>
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- 5 Alvi incontinence (3A)
- 6 Mild Cognitive Impairment (4A)
- 7 Vascular Cognitive Impairment (4A)
- 8 Alzheimer's dementia (3A)
- 9 Vascular dementia (4A)
- 10 Other types of dementia (3A)
- 11 Depression (4A)
- 12 Visual impairment (4A)
- 13 Hearing loss (4A)
- 14 Swallowing disorder (3A)
- 15 Constipation (A)
- 16 Malnutrition (4A\*)
- 17 Impecunity (3A)
- 18 Iatrogenik (3A),
- 19 Polypharmaceuticals (4A)
- 20 Sleep disorders (4A\*)
- 21 Sexual dysfunction in old age (3A)
- 22 Sarkopenia (3A)
- 23 Frailty (3A)
- 24 Delirium (4A)
- 25 *Cerebrovascular disease* (3B)
- 26 Osteoporosis (4A)
- 27 Chronic pain (4A)

	<p>28 Heart failure (4A)</p> <p>29 Hypertension (4A*)</p> <p>30 Dizziness (3A)</p> <p>31 Syncope (3B)</p> <p>32 PPOK (4A)</p> <p>33 Pneumonia (4A*)</p> <p>34 Hypothyroidism (4A)</p> <p>35 Hyperthyroidism (4A)</p> <p>36 Type 2 DM (4A*)</p> <p>37 Urinary Tract Infections (4A)</p> <p>38 Coronary Heart Disease (4A)</p> <p>39 Osteoarthritis (4A)</p> <p>40 Hyperplasia prostat (4A)</p> <p>41 Parkinson's disease (3A)</p> <p>42 Pemeriksaan body impedance analysis (4A)</p> <p>43 Measurement of knee height (4A)</p> <p>44 Balance check (4A)</p> <p>45 Treatment of decubitus wounds (4A)</p> <p>46 Interpretasi <i>Bone Densitometry</i> 4A)</p> <p>47 Perioperative management of geriatric patients (4A)</p>
	<p><b>Main:</b></p> <p>1 Harrison's principles of internal medicine. 19th edition. New York: McGraw Hill Education; 2015</p>

	2	Book teaching disease science in volume I. Edition VI. Jakarta: Interna publishing; 2014
	<b>Supporter:</b>	
	1	Hazzard's geriatric medicine and gerontology. 7th Edition. New York: McGraw Hill Medical; 2009
<b>Master Lecturer</b>	1	Dr. Wasis Udaya, SpPD KGer
	2	Dr. Agus Sudarso, SpPD KGer
	3	Dr. Shanti Makagiansar, SpPD KGer
<b>Requirements courses</b>		

Week 1	Sub-CLO (Final ability of each stage of learning)	Indicator	Criteria & Form of Assessment	Learning Methods [Estimated Time]	Learning Materials [Library ]	Assessment Weight (%)
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	1 Able to perform complete and accurate anamnesis, systematic physical examination, functional status assessment, fall risk assessment, cognitive function assessment, deubitus risk assessment,	Able to perform complete and accurate guided anamnesis, able to perform a systematic physical examination, able to assess functional status, able to assess the risk of fall, able to assess cognitive function,	<b>Criteria:</b> Accuracy and mastery; <b>Non-test form:</b> structured assignment; <b>Test Form:</b> Essay, Mini Cex-CBD	<b>Public Lecture:</b> 1 x 50 minutes/ week  <b>DivisionAICollege:</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/case):</b> 2 x 50 minutes/ week	- Plenary Assessment of Geriatric Patients(4A)  [Harrison principle of internal medicine, Book of teaching disease science in PAPDI, Hazzard geriatric medicine and gerontology]	15%

	<p>nutritional status assessment, depression screening</p>	<p>able to assess the risk of deubitus, able to assess nutritional status, able to perform depression screening</p>		<p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 3 x 5 hours/ week</p>		
2	<p>Able to identify problems in geriatric patients and establish necessary supporting examinations</p>	<p>Able to identify problems based on the data obtained in the plenary assessment and set problem priorities</p>	<p><b>Criteria:</b> Accuracy and mastery; <b>Non-test form:</b> structured assignment; <b>Test Form:</b> Essay, Mini Cex-CBD</p>	<p><b>Public Lecture:</b> 1 x 50 minutes/ week</p> <p><b>DivisionAlCollege:</b> 1 x 50 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 3 x 5 hours/ week</p>	<p>- Plenary assessment of geriatric patients (4A)</p> <p>[Harrison principle of internal medicine, Book of teaching disease science in PAPDI, Hazzard geriatric medicine and gerontology]</p>	<p><b>15%</b></p>

3 Able to establish diagnosis, provide pharmacological and nonpharmacological procedures, nutritional procedures, prevent complications, provide education, interdisciplinary cooperation, and refer to subspecialists of geriatric syndrome cases	Able to establish a work diagnosis, differential diagnosis, plan supporting examinations, provide pharmacological, nonpharmacological and nutritional management, and prevent complications	<p><b>Criteria:</b> Accuracy and mastery; <b>Non-test form:</b> structured assignment; <b>Test Form:</b> Essay, Essay, Mini Cex-CBD</p>	<p><b>Public Lecture:</b> 1 x 50 minutes/ week</p> <p><b>DivisionAICollege:</b> 1 x 50 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal/case):</b> 2 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 3 x 5 hours/ week</p>	<ul style="list-style-type: none"> <li>- Delirium(4A)</li> <li>- Sarkopenia(3A)</li> <li>- Frailty (3A)</li> <li>- Immobilization(4A)</li> <li>- Postural instability and falls(4A)</li> <li>- Urinary incontinence(4A)</li> <li>- Alvi incontinence (4A)</li> <li>- Mild cognitive impairment(4A)</li> <li>- Vascular cognitive impairment(4A)</li> <li>- Alzheimer's dementia(3A)</li> <li>- Demensia vascular(4A)</li> <li>- Other types of dementia(3A)</li> <li>- Visual impairment(4A)</li> <li>- Hearing Loss(4A)</li> <li>- Swallowing disorder(3A)</li> <li>- Constipation(4A)</li> <li>- Depression(4A)</li> <li>- Malnutrition(4A)</li> <li>- Impecunity(3A)</li> <li>- Iatrogenik(3A)</li> <li>- Polypharmaceuticals(4A)</li> <li>- Sleep disorders(4A)</li> <li>- Sexual dysfunction(3A)</li> </ul> <p><b>[Harrison principle of internal medicine, Book of teaching disease science in PAPDI,</b></p>	20%
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					Hazard geriatric medicine and gerontology]	
	4 Able to establish a diagnosis, provide pharmacological and nonpharmacological procedures, nutritional procedures, prevent complications, provide education, interdisciplinary cooperation, and refer to subspecialty of disease cases that are often found in geriatrics.	Able to establish a work diagnosis, differential diagnosis, plan supporting examinations, provide pharmacological, nonpharmacological and nutritional management, and prevent complications	<b>Criteria:</b> Accuracy and mastery; <b>Non-test form:</b> structured assignment; <b>Test Form:</b> Essay, Mini Cex-CBD	<b>Public Lecture:</b> 1 x 50 minutes/ week  <b>DivisionAICollege:</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 3 x 5 hours/ week	- Pneumonia(4A) - Urinary tract infections(4A) - Osteoarthritis(4A) - Osteoporosis(4A) - Chronic pain(4A) - Parkinson,(3A) - Cerebrovascular disease(3B) - TYPE 2 DM(4A) - Syncope(3B) - Dizziness(3A) - Hipotensi postural(4A) - Hypothyroidism(4A) - Hyperthyroidism(4A) - Coroner's heart disease(4A) - PPOK(4A) - Hyperplasia prostat (4A)  [Harrison principle of internal medicine, Book of teaching disease science in PAPDI,	20%

					Hazard geriatric medicine and gerontology]	
	5 Able to perform independently the clinical skills of examination of geriatric patients	Able to conduct independent examinations and provide follow-up based on the results of the examination.	<b>Criteria:</b> Accuracy and mastery; <b>Non-test form:</b> structured assignment <b>Test Form:</b> DOPS	<b>Public Lecture:</b> 1 x 50 minutes/ week  <b>DivisionAICollege:</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/case):</b> 2 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 3 x 5 hours/ week	- Pemeriksaan <i>body impedance analysis</i> (4A) - Measurement of knee height(4A) - Balance check(4A) - Interpretasi <i>bone densitometry</i> (4A)	10%
	6 Able to perform independently the clinical skills of geriatric patient care	Able to perform actions independently	<b>Criteria:</b> Accuracy and mastery; <b>Non-test form:</b> structured assignment	<b>Public Lecture:</b> 1 x 50 minutes/ week  <b>DivisionAICollege:</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ Case):</b>	- Treatment of decubitus wounds(4A)  [Harrison principle of internal medicine, Book of teaching disease science in PAPDI,	10%

			<b>Test Form:</b> DOPS	3 x 180 minutes/ week  <b>Seminar (Journal/case):</b> 2 x 50 minutes/ week  <b>Practicum</b> <b>(Polyclinic/inpatient visitation/consultation):</b> 3 x 5 hours/ week	<b>Hazard geriatric medicine and gerontology]</b>	
	7 Able to perform perioperative management of geriatric patients	Able to identify problems, provide assistance and input to other fields that are conspersive in the perioperative management of geriatric patients	<b>Criteria:</b> Accuracy and mastery; <b>Non-test form:</b> structured assignment; <b>Test Form:</b> Essay, Mini Cex-CBD	<b>Public Lecture:</b> 1 x 50 minutes/ week  <b>DivisionAlCollege:</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal/case):</b> 2 x 50 minutes/ week  <b>Practicum</b> <b>(Polyclinic/inpatient visitation/consultation):</b> 3 x 5 hours/ week	Perioperative management of geriatric patients(4A)  <b>[Harrison principle of internal medicine, Book of teaching disease science in PAPDI, Hazard geriatric medicine and gerontology]</b>	<b>10%</b>

Final Value:

85 - 100= A

80 - < 85= A Minus

75 - < 80= B Plus

70 - < 75= B

65 - <70= B Minus

55 - < 65= C

100%

00 - < 55= E

	Name of college	: Hasanuddin University				Document Code				
	Name of Faculty	: Medicine								
	Department Name	: The Science of Internal Medicine								
	Prodi Name	: The Science of Internal Medicine								
<b>SEMESTER LEARNING PLAN</b>										
COURSES (MK)		CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting				
Gastroenterohepatologi		20C0153201 0	The Science of Internal Medicine	10	3,4,5,6	10 October 2019				
AUTHORIZATION	RPS Developer		Coordinator RMK		Chairman of PRODI					
	Dr. dr. Fardah Akil, SpPD, KGEH Dr.dr. Lutfi P, SpPD,KGEH Dr.dr Nu'man AS SpPD,KGEH		Prof. Dr. dr. Haerani Rasyid, SpPD, KGH, SpGK		Dr. dr. Hashim Kasim, SpPD, KGH					
Learning Achievement (CP)	ILO PRODI charged to MK									
	S1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals.								
	Kk2	Students are able to perform anamnesis, physical examinations, laboratory examinations, and procedures appropriate to the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> .								
	Kk3	Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases,								

	<p>Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics.</p>
<b>Achievement of Course Learning (CLO)</b>	
<p>CLO1 Participants of PPDS Internal Disease Science are able to make journal analysis and make case reports or scientific work related to the field of Gastroenterohepatology (S1)</p> <p>CLO2 Participants ppds disease science in able to manage patients with internal diseases ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations and diagnosis and diagnosis of appeal and preparing a plan for the management of patients heresy ng Gastroenterohepatology (C2)</p> <p>CLO3 Participants ppds disease science in able to perform clinical skills competency action patients in the field of gastroenterohepatology (C3)</p>	
<b>Sub-Achievement of Learning Courses (Sub CLO)</b>	
Sub-CLO 1	Able to identify the basic concepts of GEH disease on etiology, pathophysiology, pathogenesis, clinical signs, esophageal disease anamnesis, gaster disease, gaster-duodenum-jejunum-ileum disease, hepar disease, gallbladder-pancreatic disease
Sub-CLO 2	Able to enforce diagnosis, procedures, and complications independently and completely about esophageal disease
Sub-CLO 3	Able to carry out diagnosis, procedures, and complications independently and completely about diseases of the walls and abdominal cavities
Sub-CLO 4	Able to carry out the enforcement of diagnosis, procedures, and complications independently and completely about gaster, duodenal, jejunum, ileum diseases
Sub-CLO 5	Able to enforce diagnosis, procedures, and complications independently and completely about hepar disease
Sub-CLO 6	Able to carry out the enforcement of diagnosis, procedures, and complications independently and completely about gallbladder, bile ducts, pancreas
Sub-CLO 7	Able to enforce diagnosis, procedures, and complications independently and completely about colon disease
Sub-CLO 8	Able to work in the field of basic expertise for a specific type of work and have minimal work competencies equivalent to the standard of work competence of the profession

	Sub-CLO 9	Able to utilize the latest medical science and technology to improve practical clinical skills in the field of GEH
	Sub-CLO 10	Able to perform clinical procedures in the field of GEH
Short Description of MK		<p>Gastroenterohepatology is one of the branches of the science of Internal Medicine that focuses on the diagnosis, management and education of diseases in the field of Gastroenterohepatology so that learners are able to master theoretical knowledge and clinical skills so as to explain to patients and their families, peers, and other professions about the principles, indications and complications that may arise and can be implemented independently.</p> <p>This course lasts for 3 months, with process activities consisting of face-to-face, case discussion, journal reading, morning report, bedside teaching, guard duty and answering consultations from other parts of Outpatient in Gastroenterohepatology polyclinics, Emergency Department Installations and Inpatient rooms at Wahidin Sudirohusodo Hospital, as well as other networking hospitals. At the end of this stage it is expected that PPDS can achieve the competencies as stipulated in the Competency Standards of Internal Medicine Specialists, especially in the field of GEH.</p>
Study Materials/Learning Materials		<p>1 Esophageal competence 3A-4A(achalasia, neoplasm, strictures, esophagitis reflux, barrett esophagus, corrosive lesions of the esophagus, varicose veins gastroesophageal, fungal infections of the esophagus, viral infections of the esophagus)</p> <p>2 Abdominal Cavity Wall: competence 3A/3B/4A(abdominal TB, intestinal perforation, mal rotation, hernia (hiatal diaphragmatic))</p> <p>3 Gaster duodenum Jejenum-Ileum : kompetensi 3A/3B/4A (stenosis pylorus, appendicitis, divertikel, ileus obstruksi, tumor gaster, amyloidosis, gastritis, gastroenteritis, ukus (gaster, duodenum), perdarahan gastrointestinal, ileus paralitik, malabsorbsi, maldigesti, intoleransi makanan, botulisme, <i>gastric motility disorders</i>, <i>celiac disease</i>, short bowel syndrome, trombosis arteri mesenterika)</p> <p>4 Hepar: Competence 3A/4A(hepatitis tumor, hepatitis A, hepatitis B, hepatitis C, autoimmune hepatitis, hepar abscess, alcoholic liver disease, non alcoholic fatty liver disease (NAFLD), cirrhosis of the liver, drug-affected hepatitis, hepar failure, hemochromatosis hepar, alpha 1 antitripsin deficiency, wilson disease, bilirubin metabolism disorder (Gilbert Syndrome, Crigler Najjar Syndrome type 1 and 2, Dubin Johnson and Rotor Syndromes), porta vena thrombosis, liver disease in pregnancy)</p>

	5	Gallbladder-bile-duct-pancreatic: Competence 3A/3B/4A(ductus coloxy cyst, pancreatic tumor, pancreatic cyst, PSC, PBC, colangiocarcinoma, cholecystitis, colitis, cholelithiasis, collangitis, pancreatitis)
	6	Colon: Competence 3A/4A(colorectal tumor, diverticulosis, infective colitis, dysentery syndrome, Crohn's disease, ulcerative colitis, irritable bowel syndrome, polyps/adenomas, necrotic enterocolitis, proctitis, anal abscess, hemorrhoids, constipation syndrome)
	7	GEH clinical skills: 2/3/4A(ERCP, Capsul endoscopy, Fibroscan, Busination, Ligase-sclerotherapy, fine needle biopsy, Endoscopy, hepar abscess drainage and hepar cyst aspiration, liver biopsy, nasogastric pipe installation (NGT), abdominal paracentesis (ascites levy) and abdominal ultrasound)
Book	Main:	
		<p>2. Book Teaching The Science of Internal Diseases: Chapter of Gastroenterology-Hepatology</p> <p>3. Gastrointestinal and Liver Disease. Pathophysiology/Diagnosis/Management. Sleisenger and Fordtran</p> <p>4. Textbook Practical Gastrointestinal Endoscopy</p>
	Supporter:	
		<p>1. Teaching Gastroenterology – Hepatology</p> <p>2. Textbook Harrison's Gastroenterology-Hepatology. Mc Graw Hill 2013</p> <p>3. National Consensus on The Management of Gastrointestinal and Hepatobilier Diseases in Indonesia by PPHI-PGI-PEGI</p> <p>4. Guidelines APASL,EASL,AASLD,ACG, ESGE</p> <p>5. Textbook Gastrointestinal Drugs. Wiley Blackwell 2014</p> <p>6. Current Diagnosis and Treatment Gastroenterology, Hepatology, and Endoscopy. Lange. 2016</p> <p>7. Grading and Staging in Gastroenterology. Thieme. 2015</p> <p>8. Clinical Textbook Hepatology. Mauss. Last ed 2018</p> <p>9. Schifs. Diseases of The Liver.</p>

	10. Sherlock's. Diseases of The Liver and Biliary System. 11. Yamada's Textbook of Gastroenterology.					
Master Lecturer	<ol style="list-style-type: none"> <li>1. DR. Dr. Fardah Akil, SpPD, KGEH</li> <li>2. DR. Dr. AM Luthfi Parewangi, SPPD, KGEH</li> <li>3. DR. Dr. Nu'man AS Daud, SpPD, KGEH</li> <li>4. Dr. Rini Rachmawarni Bahtiar, SpPD, KGEH</li> <li>5. Dr. Susanto Hendra Kusuma, SpPD, KGEH</li> <li>6. Dr. Amelia Rifai, SpPD, KGEH</li> </ol>					
Prerequisite courses						
Meeting to	Sub CLO (Final ability of each stage of learning)	Valuation		Form of Learning; Learning Methods; Student assignments; Estimated time	Learning Materials (Library)	Assessment Weight (%)
1	2	3	4	5	7	8
1	Able to identify the basic concepts of GEH disease on etiology, pathophysiology, pathogenesis, clinical signs, anamnesis of esophageal disease, walls and abdominal cavities, gaster-duodenum-jejunum-ileum disease, Hepar disease, gallbladder-pancreatic disease	Complete identification of GEH disease on etiology, pathophysiology, pathogenesis, clinical signs, esophageal disease anamnesis, Wall and abdominal cavity disease, gaster-	Criterion: 10 = Mastering diagnosis, procedure, complications  5= Mastering diagnosis and governance  1 = mastering the diagnosis	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week	Akalasia esophagus (3A) Esophageal neoplasm (3A) Struktur esophagus (3A) Tuberculosis abdomen (3A) Intestinal perforation (3B)	10%

		<p>duodenum- jejunum-ileum disease, Hepar disease, gallbladder- pancreatic disease</p>	<p>Test Form: Mini CEX CBD DOPS</p>	<p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<p>Malrotation of gastrointes tinal trachthus (3B) Stenosis pilorik (3B) Diverticulu m Meckel (3B) Apendisitis (3B) Ileus obstruksi (3B) Adenokarsi noma gaster (3A) Gastrointest inal stromal tumor(GIST) (3B) Amyloidosis (3A) Hepar neoplasm (3A) Kista duktus koledokus (3A) Karsinoma pancreas (3A)</p>	
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Cysts and pseudocysts of pancreas (3B)  
*Primary sclerosing cholangitis* (3A)  
*Primary biliary cirrhosis* (3A)  
Kolangio carcinoma (3A)

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- Textbook  
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Mc Graw Hill  
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Indonesia  
by PPHI-  
PGI-PEGI

					<ul style="list-style-type: none"><li>• Guidelines APASL, EA SL, AASLD, ACG, ESGE</li><li>• Textbook Gastrointestinal Drugs. Wiley Blackwell 2014</li><li>• Current Diagnosis and Treatment Gastroenterology, Hepatology, and Endoscopy. Lange. 2016</li></ul>	
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					<ul style="list-style-type: none"><li>• Grading and Staging in Gastroenterol. Thieme. 2015</li><li>• Clinical Textbook Hepatology. Mauss. Last ed 2018</li><li>• Schiff's. Diseases of The Liver.</li><li>• Sherlock's . Diseases of The Liver and</li></ul>	
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- Grading and Staging in Gastroenterol. Thieme. 2015
- Clinical Textbook Hepatology. Mauss. Last ed 2018
- Schiff's. Diseases of The Liver.
- Sherlock's . Diseases of The Liver and

					Biliary System. • Yamada's Textbook of Gastroenterology	
2.	Able to enforce diagnosis, procedures, and complications independently and completely about esophageal disease	Complete diagnosis, procedures, complications independently in esophageal abnormalities	Criterion: 10 = Mastering diagnosis, procedure, complications 5= Mastering diagnosis and governance 1 = mastering the diagnosis Test Form: Mini CEX CBD DOPS	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week  <b>Practicum (Take Care of the Hospital):</b> 22003 x 9 hours/ week	• National Consensus on The Management of Gastroesophageal Reflux Disease in Indonesia. 2013 • Teaching Gastroenterology – Hepatolog	10%

y.  
Esophageal Chapter  
● Yamada's Textbook of Gastroenterology  
● Textbook Harrison's Gastroenterology- Hepatology. Mc Graw Hill 2013. Section I, III, IX.  
● Textbook Gastrointestinal Drugs.

					Wiley Blackwell 2014	
3	<ul style="list-style-type: none"> <li>• Able to carry out diagnosis, procedures, and complications independently and completely about diseases of the walls and abdominal cavities</li> </ul>	<p>Complete diagnosis, procedures, complications independently in abnormalities Of the wall and abdominal cavity</p>	<p>Criterion: 10 = Mastering diagnosis, procedure, complications</p> <p>5= Mastering diagnosis and governance</p> <p>1 = mastering the diagnosis</p> <p>Test Form: Mini CEX CBD DOPS</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<ul style="list-style-type: none"> <li>• Textbook of gastroenterology</li> <li>• Gastrointestinal Disease Pathophysiology/ Diagnosis/ Management</li> <li>• Textbook Harrison's</li> <li>• Book Teaching</li> </ul>	10%

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and  
Endoscopy. Lange.  
2016

					<ul style="list-style-type: none"> <li>• Yamada's Textbook of Gastroenterology.</li> </ul>	
4	Able to carry out the enforcement of diagnosis, procedures, and complications independently and completely about gaster, duodenal, jejunum, ileum diseases	Complete diagnosis, procedures, complications independently in gaster disease, duodenum, jejunum, ileum	<p>Criterion: 10 = Mastering diagnosis, procedure, complications</p> <p>5= Mastering diagnosis and governance</p> <p>1 = mastering the diagnosis</p> <p>Test Form: Mini CEX CBD DOPS</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Diseases: Chapter of Gastroenterology- Hepatology</li> <li>• Gastrointestinal and Liver Disease. Pathophysiology/Dia</li> </ul>	10%

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Management of Gastrointestinal and Hepatobiliary Diseases in Indonesia by PPHI-PGI-PEGI

- Guidelines APASL, EA, SL, AASLD, ACG, ESGE
- Textbook Gastrointestinal Drugs. Wiley Blackwell 2014

					<ul style="list-style-type: none"> <li>• Current Diagnosis and Treatment Gastroenterology, Hepatology, and Endoscopy. Lange. 2016</li> <li>• Yamada's Textbook of Gastroenterology.</li> </ul>	
5	Able to enforce diagnosis, procedures, and complications independently and completely about hepar disease	Complete diagnosis, procedures, complications independently in hepar disease	Criterion: 10 = Mastering diagnosis, procedure, complications	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b></p>	<ul style="list-style-type: none"> <li>• Book Teaching Disease Science in the Chapter of</li> </ul>	10%

			<p>5= Mastering diagnosis and governance</p> <p>1 = mastering the diagnosis</p> <p>Test Form: Mini CEX CBD DOPS</p>	<p>1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<p>Gastroenterology- Hepatology</p> <ul style="list-style-type: none"> <li>• Gastrointestinal and Liver Disease.</li> <li>Pathophysiology/Diagnosis/Management.</li> <li>Sleisenger and Fordtran</li> <li>• Teaching Gastroenterology – Hepatology</li> </ul>	
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- Guidelines  
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					<ul style="list-style-type: none"> <li>• Clinical Textbook Hepatolog y. Mauss. Last ed 2018</li> <li>• Schifs. Diseases of The Liver.</li> <li>• Sherlock's . Diseases of The Liver and Biliary System.</li> </ul>	
6	Able to carry out the enforcement of diagnosis, procedures, and complications independently and completely about	Complete diagnosis, procedures, complications independently in gallbladder disease, bile ducts, pancreas	Criterion: 10 = Mastering diagnosis, procedure, complications	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b>	<ul style="list-style-type: none"> <li>• Book Teaching Disease Science in the Chapter of</li> </ul>	10%

	gallbladder, bile ducts, pancreas		<p>5= Mastering diagnosis and governance</p> <p>1 = mastering the diagnosis</p> <p>Test Form:</p> <p>Mini CEX</p> <p>CBD</p> <p>DOPS</p>	<p>1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<p>Gastroenterology- Hepatology</p> <ul style="list-style-type: none"> <li>• Gastrointestinal and Liver Disease.</li> <li>Pathophysiology/Diagnosis/Management .</li> <li>Sleisenger and Fordtran</li> </ul> <ul style="list-style-type: none"> <li>• Teaching Gastroenterology – Hepatology</li> </ul>	
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7	Able to enforce diagnosis, procedures, and complications independently and completely about colon disease	Complete diagnosis, procedures, complications independently in colon disease	<p>Criterion: 10 = Mastering diagnosis, procedure, complications</p> <p>5= Mastering diagnosis and governance</p> <p>1 = mastering the diagnosis</p> <p>Test Form: Mini CEX CBD DOPS</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<ul style="list-style-type: none"> <li>Gastrointestinal and Liver Disease.</li> <li>Pathophysiology/Diagnosis/Management.</li> <li>Sleisenger and Fordtran.</li> <li>Teaching Gastroenterology – Hepatology</li> <li>Textbook Harrison's Gastroenterology- Hepatology</li> </ul>	10%
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- Textbook  
Gastrointestinal  
Drugs. Wiley  
Blackwell 2014
- Current Diagnosis and Treatment  
Gastroenterolog, Hepatolog y, and Endoscop y. Lange. 2016
- Yamada's Textbook of

					Gastroenterology	
8	Able to work in the field of basic expertise for a specific type of work and have minimal work competencies equivalent to the standard of work competence of the profession	Have you ever seen or protested	<p>Criterion: 10 = Mastering diagnosis, procedure, complications</p> <p>5= Mastering diagnosis and governance</p> <p>1 = mastering the diagnosis</p> <p>Test Form: Mini CEX CBD DOPS</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<ul style="list-style-type: none"> <li>Book Of Teaching Internal Medicine: Chapter of Gastroenterology- Hepatology</li> <li>Textbook Practical Gastrointestinal Endoscopy</li> <li>Current Diagnosis and Treatment Gastroenterology</li> </ul>	10%

					erolog, Hepatolog y, and Endoscop y. Lange. 2016 • Grading and Staging in Gastroent erology. Thieme. 2015	
9	Able to utilize the latest medical science and technology to improve practical clinical skills in the field of GEH	Have ever done or ever applied under supervision	Criterion: 10 = Mastering diagnosis, procedure, complications  5= Mastering diagnosis and governance	<b>Public Lecture:</b> 1 x 100 minutes/ week  <b>DivisionAI College:</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week	• Book Of Teaching Internal Medicine: Chapter of Gastroent erology-	10%

			<p>1 = mastering the diagnosis</p> <p>Test Form: Mini CEX CBD DOPS</p>	<p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<p>Hepatolog y</p> <ul style="list-style-type: none"> <li>• Textbook</li> <li>Practical</li> <li>Gastrointestinal</li> <li>Endoscopic</li> <li>y</li> <li>• Current</li> <li>Diagnosis</li> <li>and</li> <li>Treatment</li> <li>Gastroenterolog,</li> <li>Hepatolog y, and</li> <li>Endoscop y. Lange.</li> <li>2016</li> <li>• Grading</li> <li>and</li> <li>Staging in</li> </ul>	
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					Gastroenterology. Thieme. 2015	
10	Able to perform clinical procedures in the field of GEH	Able to perform clinical procedures in the field of GEH independently	<p>Criterion: 10 = Mastering diagnosis, procedure, complications</p> <p>5= Mastering diagnosis and governance</p> <p>1 = mastering the diagnosis</p> <p>Test Form: Mini CEX CBD DOPS</p>	<p><b>Public Lecture:</b> 1 x 100 minutes/ week</p> <p><b>DivisionAI College:</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Polyclinic/inpatient visitation/consultation):</b> 5 x 6 hours/ week</p> <p><b>Practicum (Take Care of the Hospital):</b> 3 x 9 hours/ week</p>	<ul style="list-style-type: none"> <li>• Book Of Teaching Internal Medicine: Chapter of Gastroenterology- Hepatology</li> <li>• Textbook Practical Gastrointestinal Endoscopy</li> <li>• Current Diagnosis and</li> </ul>	10%

					Treatment Gastroenterolog, Hepatolog y, and Endoscop y. Lange. 2016 • Grading and Staging in Gastroenterology. Thieme. 2015	
<b>Final Value:</b>  85 - 100= A 80 - < 85= A Minus 75 - < 80= B Plus 70 - < 75= B 65 - <70= B Minus 55 - < 65= C 00 - < 55= E						100%

	Name of college : Hasanuddin University					<b>Document Code</b>					
	Name of Faculty : Medicine										
	Prodi Name : Education of Doctors Specializing in Internal Medicine										
<b>SEMESTER LEARNING PLAN</b>											
COURSES (MK)	CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting						
Division of IMMUNOLOGICAL ALLERGY	20C01532104	The Science of Internal Medicine	4	Credits	3/4/5/6	10 October 2019					
AUTHORIZATION	RPS Developer		Coordinator RMK		Chairman of PRODI						
	Dr.. Suriani Alimuddin, SpPD, KAI		Prof. Dr.dr. Haerani Rashid. Mkes. SpPD KGH SpGK		Dr.dr. Hasyim Kasim SpPD KGH						
Learning Achievement (CP)	ILO PRODI charged to MK										
	S 1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals. (I'M 1)									
	S 2	Students are able to perform anamnesis, physical examination, laboratory examinations, and procedures that are in accordance with the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> (C 2).									

	C3	<p>Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics. (C 3)</p>
<b>Achievement of Course Learning (CLO)</b>		
		<p>CLO1 Participants ppds disease science in able to make a journal analysis and make case reports or scientific work related to the field of allergy immunology (S1)</p> <p>CLO2 Participants ppds disease science in able to manage patients with internal diseases ranging from identification of problems mela luanamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations, diagnosis and diagnosis of appeals and preparing a plan for the managementof patients with immunological allergy (C2)</p> <p>CLO3 Participants ppds disease science in able to perform the clinical skills competency action of patients in the field of allergy immunology (C3)</p>
No	Sub-Achievement of Learning Courses (Sub CLO)	College Topics
Sub-CLO 1	<p>Mastering and being able to explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, self-and complete management, prevention of complicasi, prognosis of diseasesand health promotion related to hypersensitivity reactions (C11)</p>	<ul style="list-style-type: none"> <li>- Anaphylactic reaction (4A)</li> <li>- Drug allergy (4A)</li> <li>- Post-immunisation (4A)</li> <li>- Food allergies (4A)</li> <li>- Rhinitis alergika (4A)</li> <li>- Urticaria Acute (4A)</li> <li>- Chronic urticaria (4A)</li> <li>- Angioedema (4A)</li> <li>- Atopic dermatitis (4A)</li> <li>- Allergic contact dermatitis (4A)</li> <li>- Bronchial Asthma (4A)</li> <li>- Severe acute asthma (4A)</li> </ul>

	Sub-CLO 2	Menguasai dan mampu explain the definition, pathophysiology of basic immunology as well as epidemiology, diagnosis, differential diagnosis, management independently and thoroughly, prevention of complicasi, prognosis of diseases and health promotion related to autoimmune diseases (C11)	<ul style="list-style-type: none"> <li>- Moderate light SLE (4A)</li> <li>- Antiphospholipid syndrome (SPA) (4A)</li> </ul>
	Sub-CLO 3	Able to explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, initial therapy and determine the most appropriate referral for the patient and able to follow up after returning from referral, prevention of complicasi, prognosis of diseases and health promotion related to autoimmune diseases (P2)	<ul style="list-style-type: none"> <li>- Pneumokoniasis (3A)</li> <li>- SLE with involvement of vital organs or special circumstances (3A)</li> <li>- Sjorgen syndrome (3A)</li> <li>- Small vascular disease (Takayasu arteritis, temporal arteritis) (3A)</li> <li>- Moderate vascular disease (nudosa polyarteritis, Kawasaki disease) (3A)</li> <li>- Diseases of large vascular (wagener granulomatosis, churg-strauss syndrome, microscopic polyarteritis, Henoch-Schonlein purpura, essential cryoglobulinemia vasculitis, leukoclastic angitis cutaneous leukoclastic) (3A)</li> <li>- Immunological diseases of the lungs, kidneys, and myoproteins (3A)</li> <li>- Graft versus host response (3A)</li> <li>- Rejeki allograft (3A)</li> <li>- Histokompatibilitas antigen major dan minor (3A)</li> <li>- Hyper IgE Syndrome (3A)</li> <li>- Perioperative management in patients with clinical immunological allergic disorders (3A)</li> </ul>
	Sub-CLO4	Mampu master theoretical knowledge so that he can explain to patients and their patients, peers, and other professions about the principles, indications and complications that may arise and be able to carry out independently in accordance with standard operating procedures (P7).	<ul style="list-style-type: none"> <li>- Prick test (4A)</li> <li>- Drug skin test (4A)</li> <li>- Spirometri (4A)</li> <li>- Adult vaccination (4A)</li> </ul>

	Sub-CLO 5	Mmpumastered theoretical knowledge so thathe could explain to patients andtheir patients, peers, and other professions about the principles,indications and complications that may arise. (P2)	<ul style="list-style-type: none"> <li>- Patch test (3)</li> <li>- Drug provocation test (3)</li> <li>- Food provocation test (3)</li> <li>- 3 Bronchial provocation test (3)</li> <li>- Immunotherapy (sublingual, subcutaneous) (2)</li> </ul>
Short Description of MK	The Immunological Allergy Block describes definitions, patomekanism,diagnosis, disease management and health promotion in the field of immunological allergy according to standard operating procedures consisting of allergic reactions and hypersensitivity, autoimmune diseases, as well as indications, counter indications, complications, and techniques for conducting allergy tests and vaccinations.		
Study Materials/Learning Materials	1 2 3 4 5 6 7	<p>Book Teaching The Science of Internal Medicine</p> <p>Harrison's Principles of internal medicine: Endocrinology and metabolism. Bina Rupa Aksara. Jakarta. 2013.</p> <p>Basic immunology. Edition 10. FK-UI. 2012</p> <p>Basic allergies. Edition 1. Interna Publishing,2009</p> <p>Immunology Module 2015</p> <p>Immunization guidelines in adults</p> <p>Diagnostic criteria in autoimmune disease. Editor Yehuda Shoenfield. 2008</p>	<p>Main:</p> <p>Anaphylactic reaction (4A)</p> <p>Drug allergy (4A)</p> <p>Post-immunisation (4A)</p> <p>Food allergies (4A)</p> <p>Rhinitis alergika (4A)</p> <p>Urticaria Acute (4A)</p> <p>Chronic urticaria (4A)</p> <p>Angioedema (4A)</p> <p>Atopic dermatitis (4A)</p> <p>Allergic contact dermatitis (4A)</p> <p>Bronchial Asthma (4A)</p> <p>Severe acute asthma (4A)</p> <p>Moderate light SLE (4A)</p> <p>Antiphospholipid syndrome (SPA) (4A)</p> <p>Graft versus host response (3A)</p> <p>Rejeksi allograft (3A)</p> <p>Histokompatibilitas antigen major dan minor (3A)</p> <p>Hyper IgE Syndrome (3A)</p> <p>Pneumokoniasis (3A)</p> <p>SLE with involvement of vital organs or special circumstances (3A)</p> <p>Sjorgen syndrome (3A)</p>

		<p>Small vascular disease (Takayasu arteritis, temporal arteritis) (3A)</p> <p>Moderate vascular disease (nudosa polyarteritis, Kawasaki disease) (3A)</p> <p>Diseases of large vascular (wagener granulomatosis, churg-strauss syndrome, microscopic polyarteritis, Henoch-Schonlein purpura, essential cryoglobulinemia vasculitis, leukoclastic angitis cutaneous leukoclastic) (3A)</p> <p>Immunological diseases of the lungs, kidneys, and myoproteins (3A)</p> <p>Perioperative management in patients with clinical immunological allergic disorders (3A)</p> <p>Prick test (4A)</p> <p>Drug skin test (4A)</p> <p>Spirometri (4A)</p> <p>Adult vaccination (4A)</p> <p>Patch test (3)</p> <p>Drug provocation test (3)</p> <p>Food provocation test (3)</p> <p>3 Bronchial provocation test (3)</p> <p>Immunotherapy (sublingual, subcutaneous) (2)</p>
	Pengampuh	
	Supporter:	
POWERFUL LECTURER		<ol style="list-style-type: none"> <li>1. Dr. Surandani Alimudin, SpPD, KAI</li> <li>2. Prof. Dr. dr. Syakib Bakri, Sp.PD, KGH</li> <li>3. Dr. dr. A. Makbul Aman, Sp.PD, KEMD</li> <li>4. Prof. Dr. dr. Haerani Rasyid, Sp.PD, KGH,Sp.GK</li> <li>5. dr. Rahmawati Minhadjat, Sp.PD, KHOM, PhD</li> <li>6. Dr.dr. Harun Iskandar, SpPD,Sp.P, KP</li> </ol>
Book		<ol style="list-style-type: none"> <li>1. Book Teaching The Science of Internal Medicine. FSI Publishing Hall. 2012.</li> <li>2. Immunology Module 2015</li> <li>3. Harrison's Principles of internal medicine</li> <li>4. Basic immunology. Edition 10. FK-UI. 2012</li> <li>5. Basic allergies. Edition 1. Interna Publishing,2009</li> <li>6. Immunization guidelines in adults</li> <li>7. Diagnostic criteria in autoimmune disease. Editor Yehuda Shoenfield. 2008</li> </ol>

**Note:**

1. **Prodi Graduate Learning Achievement (ILO-PRODI)** is an ability possessed by every PRODI graduate which is an internalization of attitude, mastery of knowledge and skills in accordance with the level of study program obtained through the learning process.
2. **ILO charged to the course** are some of the learning achievements of graduate study programs (ILO-PRODI) that are used for the formation / development of a course consisting of aspects of attitude, general skills, special skills and knowledge.
3. **CP Courses (CLO)** is the ability that is spelled out specifically from the ILO charged to the course, and is specific to the study material or learning materials of the course.
4. **Sub-CP Courses (Sub-CLO)** are the specific ability of CLO that can be measured or observed and is the final ability planned at each stage of learning, and is specific to the learning material of the course.
5. **Indicators of ability assessment** in student learning processes and outcomes are specific and measurable statements that identify the ability or performance of student learning outcomes accompanied by evidence.
6. **Criteria Assessment** is a benchmark that is used as a measure or benchmark of learning proficiency in assessment based on established indicators. Assessment criteria is a guideline for assessors so that assessments are consistent and unbiased. Criteria can be either quantitative or qualitative.
7. **Form of assessment:** test and non-test.
8. **Forms of learning:** Lectures, Responsi, Tutorials, Seminars or equivalent, Practicums, Studio Practices, Workshop Practices, Field Practices, Research, Community Service and/or other equivalent forms of learning.
9. **Learning Methods:** Small Group Discussion, Role-Play & Simulation, Discovery Learning, Self-Directed Learning, Cooperative Learning, Collaborative Learning, Contextual Learning, Project Based Learning, and other equivalent methods.
10. **Learning Materials** are details or descriptions of study materials that can be presented in the form of several subjects and sub-subjects.
11. **The weight of assessment** is the percentage of assessment of each achievement of sub-CLO which is propositional in magnitude with the difficulty level of achievement of sub-CLO tsb., and a total of 100%.
12. TM=Face-to-Face, PT=Structured assignment, BM=Self-study.

Week 1	Sub-CLO (Final ability of each stage of learning)	Valuation		Help with learning, Learning methods, [Estimated Time]	Learning Materials [Library]	Assessment Weight (%)
		Indicator	Criteria & Shape			
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1	<p>Mastering and able to explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, management independently and thoroughly, prevention of complicasi, prognosis of diseases and health promotion related to hypersensitivity reactions</p> <ul style="list-style-type: none"> <li>• Anaphylactic reaction (4A)</li> <li>• Drug allergy (4A)</li> <li>• Post-immunisation (4A)</li> <li>• Food allergies (4A)</li> <li>• Rhinitis alergika (4A)</li> <li>• Urticaria Acute (4A)</li> <li>• Chronic urticaria (4A)</li> <li>• Angioedema (4A)</li> <li>• Atopic dermatitis (4A)</li> <li>• Allergic contact dermatitis (4A)</li> <li>• Bronchial Asthma (4A)</li> <li>• Severe acute asthma (4A)</li> </ul>	Mastering and being able to explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, self-and complete management, prevention of complicasi, prognosis of diseases and health promotion related to hypersensitivity reactions	<p><b>Criterion:</b></p> <p>40 = Knowing and mastering 12 diseases</p> <p>30 = Knowing and mastering 9 out of 12 diseases</p> <p>20 = Knowing and mastering 6 out of 12 diseases</p> <p>10 = Knowing and mastering 3 out of 12 diseases</p> <p><b>Test Form:</b></p> <p>MCQ</p> <p>Ask for answers</p>	<p><b>Public Lecture:</b></p> <p>5 x 100 minutes/ week</p> <p><b>Seminar (Reparat/ Case):</b></p> <p>3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b></p> <p>1 x 50 minutes/ week</p> <p><b>Practicum (Keep the Hospital):</b></p> <p>3 x 12 hours/ week</p>	<p>Book Teaching The Science of Internal Medicine</p> <p>Basic allergies. Edition 1. Interna Publishing, 2009</p>	40%*
2	Menguasai and mampu explain the definition, pathophysiology of basic immunology as well as epidemiology, diagnosis, differential diagnosis, management independently and	Mastering and managing the definition, pathophysiology of basic immunology and epidemiology, diagnosis, differential diagnosis,	<p><b>Criterion:</b></p> <p>10 = Knowing and being able to explain 2 diseases</p>	<p><b>Public Lecture:</b></p> <p>5 x 100 minutes/ week</p> <p><b>Seminar (Reparat/ Case):</b></p>	<p>Book Teaching The Science of Internal Medicine</p>	10%*

	<p>thoroughly, prevention of complicasi, prognosis of diseasesand health promotion related to autoimmune diseases</p> <ul style="list-style-type: none"> <li>• Moderate light SLE (4A)</li> <li>• Antiphospholipid syndrome (SPA) (4A)</li> </ul>	<p>management independently and thoroughly, prevention of complicasi, prognosis of diseasesand health promotion related to autoimmune diseases</p>	<p>5= Knowing and being able to explain 1 of 2 diseases</p> <p><b>Test Form:</b> MCQ The question is answered</p>	<p>3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Keep the Hospital):</b> 3 x 12 hours/ week</p>	<p>Basic immunology. Edition 10. FK-UI. 2012</p> <p>Diagnostic criteria in autoimmune disease. Editor Yehuda Shoenfield. 2008</p>	
3	<p>Able to explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, initial therapy and determine the most appropriate referral for the patient and able to follow up after returning from referral, prevention of complicasi, prognosis of diseasesand health promotion related to allergic- autoimmune diseases</p> <ul style="list-style-type: none"> <li>• Pneumokoniasis (3A)</li> <li>• SLE with involvement of vital organs or special circumstances (3A)</li> <li>• Sjorgen syndrome (3A)</li> <li>• Small vascular disease (Takayasu arteritis, temporal arteritis) (3A)</li> <li>• Moderate vascular disease (nudosa</li> </ul>	<p>Mengetahui dan mampu explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, initial therapy and determine the most appropriate referral for the patient and able to follow up after returning from referral, prevention of complicasi, prognosis of diseasesand health promotion related to autoimmune diseases</p>	<p><b>Criterion:</b> 25= Knowing and being able to explain 12 diseases</p> <p>20= Knowing and being able to explain 10 out of 12 diseases</p> <p>15 = Knowing and being able to explain 8 out of 12 diseases</p> <p>10 = Knowing and being able to explain 6 out of 12 diseases</p> <p>5 = Knowing and being able to explain 4 out of 12 diseases</p> <p><b>Test Form:</b> MCQ Ask for answers</p>	<p><b>Public Lecture:</b> 5 x 100 minutes/ week</p> <p><b>Seminar (Reparat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p><b>Practicum (Keep the Hospital):</b> 3 x 12 hours/ week</p>	<p>Book Teaching The Science of Internal Medicine</p> <p>Basic immunology. Edition 10. FK-UI. 2012</p> <p>Diagnostic criteria in autoimmune disease. Editor Yehuda Shoenfield. 2008</p>	25%*

	<p>polyarteritis, Kawasaki disease) (3A)</p> <ul style="list-style-type: none"> <li>• Diseases of large vascular (wagener granulomatosis, churg-strauss syndrome, microscopic polyarteritis, Henoch-Schonlein purpura, essential cryoglobulinemia vasculitis, leukoclastic angitis cutaneous leukoclastic) (3A)</li> <li>• Immunological diseases of the lungs, kidneys, and myoproteins (3A)</li> <li>• Graft versus host response (3A)</li> <li>• Rejeki allograft (3A)</li> <li>• Histokompatibilitas antigen major dan minor (3A)</li> <li>• Hyper IgE Syndrome (3A)</li> <li>• Perioperative management in patients with clinical immunological allergic disorders (3A)</li> </ul>					
4	<p>Mampu mastered theoretical knowledge so that he could explain to patients and their patients, peers, and other professions about the principles, indications and complications that may arise and be able to carry out independently in accordance with standard operating procedures.</p> <ul style="list-style-type: none"> <li>• Prick test (4A)</li> <li>• Drug skin test (4A)</li> </ul>	<p>Knowing and mastering theoretical knowledge so as to explain to patients and their patients, peers, and other professions about the principles, indications and complications that may arise and be able to carry out independently in accordance with standard operating procedures</p>	<p><b>Criterion:</b> 15 = Knowing and being able to perform 4 actions  10 = Knowing and being able to perform 2 actions  5 = Knowing and being able to perform 1 action</p>	<p><b>Public Lecture:</b> 5 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p>	<p>Book Teaching The Science of Internal Medicine</p> <p>Immunization guidelines in adults</p> <p>Basic allergies. Edition 1. Interna</p>	15%*

	<ul style="list-style-type: none"> <li>• Spirometri (4A)</li> <li>• Adult vaccination (4A)</li> </ul>		<b>Test Form:</b> MCQ Ask for answers	<b>Practicum (Keep the Hospital):</b> 3 x 12 hours/ week	Publishing,2009	
5	Mmpumastered theoretical knowledge so that the could explain to patients and their patients, peers, and other professions about the principles, indications and complications that may arise. <ul style="list-style-type: none"> <li>• Patch test (3)</li> <li>• Drug provocation test (3)</li> <li>• Food provocation test (3)</li> <li>• 3 Bronchial provocation test (3)</li> <li>• Immunotherapy (sublingual, subcutaneous) (2)</li> </ul>	Knowing and mastering theoretical knowledge so as to explain to patients and their patients, peers, and other professions about the principles, indications and complications that may arise.	<b>Criterion:</b> 10 = Knowing and being able to explain all 5 actions 6 = Knowing and being able to explain 3 actions 2 = Knowing and being able to explain 1 action <b>Test Form:</b> MCQ Ask for answers	<b>Public Lecture:</b> 5 x 100 minutes/ week  <b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week  <b>Seminar (Journal):</b> 1 x 50 minutes/ week  <b>Practicum (Keep the Hospital):</b> 3 x 12 hours/ week	Book Teaching The Science of Internal Medicine  Basic allergies. Edition 1. Interna Publishing,2009	10%*
<b>Final Value:</b> <b>85 - 100= A</b> <b>80 - &lt; 85= A Minus</b> <b>75 - &lt; 80= B Plus</b> <b>70 - &lt; 75= B</b> <b>65 - &lt;70= B Minus</b> <b>55 - &lt; 65= C</b> <b>00 - &lt; 55= E</b>						100%

	Name of college : Hasanuddin University					<b>Document Code 18C01542108</b>		
	Name of Faculty : Medicine							
	Prodi Name : Education of Doctors Specializing in Internal Medicine							
<b>SEMESTER LEARNING PLAN</b>								
<b>COURSES (MK)</b>		<b>CODE</b>	<b>Course</b>	<b>WEIGHT (credit):</b>	<b>SEMESTER</b>	<b>Tgl Drafting</b>		
Divided Psikosomatik		20C01532202	Psychosomatic	Credits	7	10-10-2019		
<b>AUTHORIZATION</b>		RPS Developer		Coordinator RMK		Chairman of PRODI		
Learning Achievement (CP)	ILO PRODI charged to MK							
	S1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals. (I'M 1)						
	C2	Students are able to perform anamnesis, physical examinations, laboratory examinations, and procedures appropriate to the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> . ( C 2)						

	C3	<p>Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenter hepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics. (C 3)</p>
<b>Achievement of Course Learning (CLO)</b>		
CLO1 Participants ppds internal disease science is able to make a journal analysis and make case reports or scientific work related to the field of psychosomatic (S1)		
CLO2 Participants ppds disease science in able to manage patients with internal diseases ranging from identification of problems through anamnesis, conducting clinical examinations, conducting assessments, conducting / planning supporting examinations, diagnosis and diagnosis of appeals and preparing a plan for the management of psychosomatic patients (C2)		
CLO3 Participants ppds disease science in able to simulate the clinical competency action of patients in psychosomatic field (C3)		
No	Sub-Achievement of Learning Courses (Sub CLO)	College Topics
Sub-CLO 1	<ol style="list-style-type: none"> <li>1. Able to master and explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, prevention of complications and prognosis of psychosomatic diseases</li> <li>2. Mengetahui patomekanism psychosomatic diseases so as to be able to prevent and promote health</li> <li>3. Mampu makes clinical diagnoses and performs the management of the disease independently and completely.</li> </ol>	<ul style="list-style-type: none"> <li>- Overall anxiety disorder / <i>General Anxiety Disorders</i> (GAD) (4A)</li> <li>- <i>Panic disorders</i>(4A)</li> <li>- Anxiety-depression mix disorder (4A)</li> <li>- Reactions to severe stress and adjustment adjustments (4A)</li> <li>- <i>Post traumatic stress disorder</i> (PTSD) (4A)</li> <li>- <i>Now Phobia, Social Phobia, Phobiaspesifik</i> (4A)</li> <li>- Gangguan somatoform (4A*)</li> <li>- Depression (4A)</li> <li>- Irritable colon syndrome (4A)</li> <li>- Functional dyspepsia (4A)</li> </ul>

		<ul style="list-style-type: none"> <li>- Fatigue disorder (4A)</li> <li>- Chronic fatigue syndrome (4A)</li> <li>- Fibromyalgia (4A)</li> <li>- Wins psikogenik (4A)</li> <li>- Neurosis kardiak (4A)</li> <li>- Hyperventille syndrome (4A)</li> <li>- Sleep disorders (4A*)</li> <li>- Withdrawal syndrome and over-dose in drug users; complications, therapy and rehabilitation(4A)</li> <li>- <i>Tension headache</i> (4A)</li> <li>- Erectile dysfunction and sexualpsychogenic dysfunction (4A)</li> <li>- Vegetative autonomic nerve imbalance (4A)</li> <li>- Low back pain (4A)</li> <li>- Functional heart disorders (4A)</li> </ul>
Sub-CLO 2	<ol style="list-style-type: none"> <li>1. Mampu explained the definition, patomekanism and diagnostic procedures so as to be able to recognize and explain the clinical picture of psychosomatic diseases.</li> <li>2. Mengetahui patomekanism of diseases due to psychosomatic reactions so as to be able to prevent and promote health</li> <li>3. Mampu makes clinical diagnoses and provides initial therapy and determines the most appropriate referral for the patient and is able to follow up after returning from referral.</li> </ol>	<ul style="list-style-type: none"> <li>- Obsessive-compulsive disorder (3A)</li> </ul>
Sub-CLO3	<ol style="list-style-type: none"> <li>1. Mampu mastered theoretical knowledge so thathe can explain to patients andtheir patients, peers, and other professions about the principles,indications and complications that may arise and be able to carry out independently in accordance with standard operating procedures.</li> </ol>	<ul style="list-style-type: none"> <li>- Superficial psychotherapy 4A</li> </ul>

	Sub-CLO 4	1. Mampumastered theoretical knowledge so that he could explain to patients and their patients, peers, and other professions about the principles, indications and complications that may arise.	<ul style="list-style-type: none"> <li>- Cognitive Behaviour Therapy (CBT) (3)</li> <li>- Palliative therapy (3)</li> </ul>
Short Description of MK	The Psychosomatic Block describes the definition, patomechanism, diagnosis, management of disease and health promotion in the field of Psychosomatics according to the standards of competence of disease science in the Psychosomatic division.		
Study Materials/Learning Materials	1 2	Book Teaching The Science of Internal Medicine Harrison's Principles of internal medicine	Main: <ul style="list-style-type: none"> <li>- Overall anxiety disorder / <i>General Anxiety Disorders</i> (GAD) (4A)</li> <li>- <i>Panic disorders</i> (4A)</li> <li>- Anxiety-depression mix disorder (4A)</li> <li>- Reactions to severe stress and adjustment adjustments (4A)</li> <li>- <i>Post traumatic stress disorder</i> (PTSD) (4A)</li> <li>- <i>Now Phobia, Social Phobia, Phobias spesifik</i> (4A)</li> <li>- Gangguan somatoform (4A*)</li> <li>- Depression (4A)</li> <li>- Irritable colon syndrome (4A)</li> <li>- Functional dyspepsia (4A)</li> <li>- Fatigue disorder (4A)</li> <li>- Chronic fatigue syndrome (4A)</li> <li>- Fibromyalgia (4A)</li> <li>- Wins psikogenik (4A)</li> <li>- Neurosis kardiak (4A)</li> <li>- Hyperventille syndrome (4A)</li> <li>- Sleep disorders (4A*)</li> <li>- Withdrawal syndrome and over-dose in drug users; complications, therapy and rehabilitation (4A)</li> <li>- <i>Tension headache</i> (4A)</li> <li>- Erectile dysfunction and sexual psychogenic dysfunction (4A)</li> <li>- Vegetative autonomic nerve imbalance (4A)</li> <li>- Low back pain (4A)</li> <li>- Functional heart disorders (4A)</li> </ul>

		- Obsessive-compulsive disorder (3A)
	Pengampuh	
	Supporter:	
POWERFUL LECTURER		<p>7. Dr. A. Khomaeni Takdir Haruni, Sp.PD-K-Psi</p> <p>8. Psychosomatic Teaching Team IPD FK-UI</p>
Book		<p>8. Book Teaching The Science of Internal Medicine. FSI Publishing Hall. 2012.</p> <p>9. Harrison's Principles of internal medicine</p> <p>10. Competency Standards of Internal Medicine Specialists</p>

**Note:**

25. **Prodi Graduate Learning Achievement (ILO-PRODI)** is an ability possessed by every PRODI graduate which is an internalization of attitude, mastery of knowledge and skills in accordance with the level of study program obtained through the learning process.
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27. **CP Courses (CLO)** is the ability that is spelled out specifically from the ILO charged to the course, and is specific to the study material or learning materials of the course.
28. **Sub-CP Courses (Sub-CLO)** are the specific ability of CLO that can be measured or observed and is the final ability planned at each stage of learning, and is specific to the learning material of the course.
29. **Indicators of ability assessment** in student learning processes and outcomes are specific and measurable statements that identify the ability or performance of student learning outcomes accompanied by evidence.
30. **Criteria Assessment** is a benchmark that is used as a measure or benchmark of learning proficiency in assessment based on established indicators. Assessment criteria is a guideline for assessors so that assessments are consistent and unbiased. Criteria can be either quantitative or qualitative.
31. **Form of assessment:** test and non-test.
32. **Forms of learning:** Lectures, Responsi, Tutorials, Seminars or equivalent, Practicums, Studio Practices, Workshop Practices, Field Practices, Research, Community Service and/or other equivalent forms of learning.
33. **Learning Methods:** Small Group Discussion, Role-Play & Simulation, Discovery Learning, Self-Directed Learning, Cooperative Learning, Collaborative Learning, Contextual Learning, Project Based Learning, and other equivalent methods.
34. **Learning Materials** are details or descriptions of study materials that can be presented in the form of several subjects and sub-subjects.

35. **The weight of assessment** is the percentage of assessment of each achievement of sub-CLO which is proposional in magnitude with the difficulty level of achievement of sub-CLO tsb., and a total of 100%.

36. TM=Face-to-Face, PT=Structured assignment, BM=Self-study.

Week 1	Sub-CLO (Final ability of each stage of learning)	Valuation		Help with learning, Learning methods, [Estimated Time]	Learning Materials [Library]	Assessment Weight (%)
		Indicator	Criteria & Shape			
(1)	(2)	(3)	(4)	(5)	(6)	(7)
1	<p>Mastering and able to explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, management independently and thoroughly, prevention of complicasi, prognosis of diseases and health promotion related to psychosomatic disorders</p> <ul style="list-style-type: none"> <li>Overall anxiety disorder / <i>General Anxiety Disorders</i> (GAD) (4A)</li> <li><i>Panic disorders</i>(4A)</li> <li>Anxiety-depression mix disorder (4A)</li> </ul>	<p>Mastering and able to explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, management independently and thoroughly, prevention of complicasi, prognosis of diseases and health promotion related to psychosomatic disorders</p>	<p><b>Criterion:</b></p> <p>70 = Knowing and mastering 23 diseases</p> <p>60 = Knowing and mastering 20 out of 23 diseases</p> <p>50 = Knowing and mastering 16 of 23 diseases</p> <p>40 = Knowing and mastering 13 of 23 diseases</p>	<p><b>Public Lecture:</b> 5 x 50 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p>	<p>- Book of Teaching The Science of Internal Medicine</p> <p>- Competency Standards of Doctors Specializing in Internal Medicine 2014</p> <p>- Harrison's Principles of Internal Medicine</p>	70%*

	<ul style="list-style-type: none"> <li>• Reactions to severe stress and adjustment adjustments (4A)</li> <li>• <i>Post traumatic stress disorder</i> (PTSD) (4A)</li> <li>• <i>Now Phobia, Social Phobia, Phobiaspesifik</i> (4A)</li> <li>• Gangguan somatoform (4A*)</li> <li>• Depression (4A)</li> <li>• Irritable colon syndrome (4A)</li> <li>• Functional dyspepsia (4A)</li> <li>• Fatigue disorder (4A)</li> <li>• Chronic fatigue syndrome (4A)</li> <li>• Fibromyalgia (4A)</li> <li>• Wins psikogenik (4A)</li> <li>• Neurosis kardiak (4A)</li> <li>• Hyperventille syndrome (4A)</li> <li>• Sleep disorders (4A*)</li> <li>• Withdrawal syndrome and overdose in drug users; complications, therapy and rehabilitation(4A)</li> <li>• <i>Tension headache</i> (4A)</li> <li>• Erectile dysfunction and sexualpsychogenic dysfunction (4A)</li> </ul>	<p>30 = Knowing and mastering 9 out of 23 diseases</p> <p>20 = Knowing and mastering 6 out of 23 diseases</p> <p>10 = Knowing and mastering 3 out of 23 diseases</p> <p><b>Test Form:</b> MCQ Ask for answers</p>		
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	<ul style="list-style-type: none"> <li>• Vegetative autonomic nerve imbalance (4A)</li> <li>• Low back pain (4A)</li> <li>• Functional heart disorders (4A)</li> </ul>					
2	<p>Able to explain the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, initial therapy and determine the most appropriate referral for the patient and able to follow up after returning from referral, prognosis of diseases and health promotion related to psychosomatic disorders</p> <ul style="list-style-type: none"> <li>• Obsessive-compulsive disorder (3A)</li> </ul>	<p>Knowing and explaining the definition, epidemiology, pathophysiology, diagnosis, differential diagnosis, initial therapy and determining the most appropriate referral for the patient and able to follow up after returning from referral, prognosis of diseases and health promotion related to psychosomatic disorders</p>	<p><b>Criterion:</b></p> <p>10= Knowing and being able to explain 1 disease</p> <p>0= Knowing and being able to explain 0 out of 1 disease</p> <p><b>Test Form:</b></p> <p>MCQ</p> <p>Ask for answers</p>	<p><b>Public Lecture:</b> 5 x 50 minutes/ week</p> <p><b>Seminar (Reparat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p>	<p>- Book of Teaching The Science of Internal Medicine</p> <p>- Competency Standards of Doctors Specializing in Internal Medicine 2014</p> <p>- Harrison's Principles of Internal Medicine</p>	10%*
3	<p>Mampu mastered theoretical knowledge so that he could explain to patients and their patients, peers, and other professions about the principles, indications and complications that may arise</p>	<p>Knowing and mastering theoretical knowledge so as to explain to patients and their patients, peers, and other professions about the</p>	<p><b>Criterion:</b></p> <p>10 = Knowing and being able to perform 2 actions</p> <p>0 = Knowing and being</p>	<p><b>Public Lecture:</b> 5 x 50 minutes/ week</p> <p><b>Seminar (Reparat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p>	<p>- Book of Teaching The Science of Internal Medicine</p> <p>- Competency Standards of</p>	10%*

	<p>and be able to carry out independently in accordance with standard operating procedures.</p> <ul style="list-style-type: none"> <li>• Superficial psychotherapy 4A</li> </ul>	<p>principles, indications and complications that may arise and be able to carry out independently in accordance with standard operating procedures</p>	<p>able to perform 0 actions</p> <p><b>Test Form:</b> MCQ Ask for answers</p>	<p>Doctors Specializing in Internal Medicine 2014 - Harrison's Principles of Internal Medicine</p>	
4	<p>Mmpumastered theoretical knowledge so that he could explain to patients and their patients, peers, and other professions about the principles, indications and complications that may arise.</p> <ul style="list-style-type: none"> <li>• <i>Cognitive Behaviour Therapy (CBT)</i> (3)</li> <li>• Palliative therapy (3)</li> </ul>	<p>Knowing and mastering theoretical knowledge so as to explain to patients and their patients, peers, and other professions about the principles, indications and complications that may arise.</p>	<p><b>Criterion:</b> 10 = Knowing and being able to explain to-2 actions  5 = Knowing and being able to explain 1 action</p> <p><b>Test Form:</b> MCQ Ask for answers</p>	<p><b>Public Lecture:</b> 5 x 50 minutes/ week</p> <p><b>Seminar (Refarat/ Case):</b> 3 x 180 minutes/ week</p> <p><b>Seminar (Journal):</b> 1 x 50 minutes/ week</p> <p>Book Teaching The Science of Internal Medicine - Competency Standards of Doctors Specializing in Internal Medicine 2014 - Harrison's Principles of Internal Medicine</p>	10%*

<b>Final Value:</b>  85 - 100= A 80 - < 85= A Minus 75 - < 80= B Plus 70 - < 75= B 65 - < 70= B Minus 55 - < 65= C 00 - < 55= E						100%

	Name of college	: Hasanuddin University				Document Code				
	Name of Faculty	: Medicine								
	Department Name	: The Science of Internal Medicine								
	Prodi Name	: The Science of Internal Medicine								
<b>SEMESTER LEARNING PLAN</b>										
COURSES (MK)	CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting					
Outpatient Poly	20C01542308	The Science of Internal Medicine	8	7	10 October 2019					
AUTHORIZATION	RPS Developer		Coordinator RMK		Chairman of PRODI					
	<ul style="list-style-type: none"> <li>- dr. Akhyar Albaar, Sp.PD</li> <li>- dr. St. Rabiul Zatalia Ramadhan, Sp.PD,K-GH</li> <li>- Dr.dr. Harun Iskandar,SpP(K), SpPD,KP</li> </ul>		Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, K-GH, Sp.GK		Dr. dr. Hashim Kasim, Sp.PD, K-GH, FINASIM					
Learning Achievement (CP)	ILO PRODI charged to MK									
	S2	<p>Students will be able to manage, develop, and maintain relationships with colleagues and peers within the intra-departmental sphere, other departments, broader health institutions and the professional community. (I'M 2)</p>								
	C4	<p>Students are able to manage independently and/or lead teams in problem solving of internal medicine in outpatient, IGD, inpatient and intensive care units through inter, multi- and transdisciplinary approaches to improve curative, decrease pain and mortality rates. (C 4)</p>								
<b>Achievement of Course Learning (CLO)</b>										

	<p>CLO1 Is able to explain and enforce the diagnosis (anamnesis, physical examination, and supporting examination), independent procedures (indications, doses, ways of administration and side effects of drugs), complications, education and consultation to subspecialists of internal medicine or other specialists. (S2)</p> <p>CLO2 Able to apply <i>leadership</i> and <i>problem solving</i> in the diagnostic and management of outpatients of Internal Medicine as well as interdisciplinary approaches between divisions and between departments (C4)</p>
<b>Sub-Achievement of Learning Courses (Sub CLO)</b>	
Sub-CLO 1	Able to explain and carry out diagnosis (anamnesis, physical examination, and supporting examination) comprehensively and purposefully in patients with Internal Medicine
Sub-CLO 2	Able to explain and perform independently (indications, dosage, method of administration and side effects of drugs) in patients with internal medicine
Sub-CLO 3	Able to make appropriate referrals to the internal medicine subspecialist for continued treatment in internal medicine patients
Sub-CLO 4	Able to conduct effective education related to disease prevention and health promotion in the field of ScienceEnyakit Dnature
Sub-CLO 5	Able to provide medical services in accordance with standard operating procedures specifically, standardized, applicable in accordance with existing situations and conditions
Sub-CLO 6	Able to make decisions independently including the selection of supporting examinations, therapy, or consultation between departments or subspecialists of internal medicine based on logical, creative, critical, and systematic thinking
Sub-CLO 7	Able to make an integrated scientific conclusion in the form of medical records of outpatients of Internal Medicine
Sub-CLO 8	Able to apply <i>leadership</i> and <i>problem solving</i> in the diagnostic and management of outpatients of Internal Medicine
Sub-CLO 9	Able to update the latest science about internal diseases and apply cutting-edge medical technology in the framework of outpatient services.
Sub-CLO 10	Able to approach interdisciplinary between divisions and between departments

Short Description of MK	<p>Polyclinic Internal Medicine is an integrated service for outpatients in the field of Internal Medicine. This course lasts for 3 months, at The Internal Diseases Poly RS UNHAS and other networking hospitals. At the end of this stage it is expected that PPDS can manage targeted diagnosis, conduct comprehensive management, educate patients and families, and consult other departments. All these competencies are expected to be carried out by learners independently.</p>	
Study Materials/Learning Materials	1	In accordance with the learning materials in the Division of Tropical Infections
	2	In accordance with the learning materials in the Division of Gastroentero-Hepatology
	3	In accordance with the learning materials in the Division of Cardiology
	4	In accordance with the learning materials in the Division of Pulmonology
	5	In accordance with the learning materials in the Kidney-Hypertension Division
	6	In accordance with the learning materials in the Division of Rematology
	7	In accordance with the learning materials in the Division of Allergy-Immunology
	8	In accordance with the learning materials in the Geriatric Division
	9	In accordance with the learning materials in the Division of Hematology of Medical Oncology
	10	In accordance with learning materials in the Division of Metabolic Endocrine and Diabetes
	11	In accordance with the learning materials in the Psychosomatic Division
Book	Main:	
	5.	Text Book Harrison's Principles of Internal Medicine
	6.	Book Teaching The Science of Internal Medicine
	7.	Standard Book of Competence of Internal Medicine Specialists
	Supporter:	
	1.	Buku panduan Clinical Pathway
	2.	Guide to Clinical Practice of Management in the Field of Internal Disease Science
	3.	EIMED PAPDI Emergency Of Diseases In The Policy
	4.	EIMED PAPDI Advanced Internal Illness Emergency
	5.	Hazzard's geriatric medicine and gerontology. 6th Edition. New York: McGraw Hill Medical; 2009
	6.	Brenner and Rector's The Kidney
	7.	Basic Allergy 1st Edition
	8.	Basic Immunology 10th Edition

	9. Book Teaching Division of Tropical Infections and Diseases 10. Indonesian Lung Doctors Association 2018 11. Consensus PERKENI 2015					
Master Lecturer	1. Dr. dr. Andi Makbul Aman, SpPD, K-EMD 2. Dr. dr. Muh. Ilyas, SpPD, K-P, SpP(K) 3. Dr. dr. Sahyuddin, SpPD, K-HOM					
Prerequisite courses						
Meeting to	Sub CLO (Final ability of each stage of learning)	Valuation		Form of Learning; Learning Methods; Student assignments; Estimated time	Learning Materials (Library)	Assessment Weight (%)
1	2	3	4	5	7	8
1	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in patients Infeksi Tropis	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of	Criteria: accuracy, conformity, and accuracy  Shape: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1 x 100 minutes/ week  <b>Seminar (Reparat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b> 1x 12 hours/ week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Book Teaching</li> </ul>	10

		drugs), complicasi, education, and consultation to other specialists in patients Infeksi Tropis			Division of Tropical Infections and Diseases	
2	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in patients Gastroentero-Hepatology	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in patients Gastroentero-Hepatology	Criteria: accuracy, conformity, and accuracy  Shape: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1 x 100 minutes/ week  <b>Seminar (Referat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b> 1x 12 hours/ week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>EIMED PAPDI Emergency Of Diseases In The Policy</li> <li>EIMED PAPDI Advanced</li> </ul>	12

					Internal Illness Emergency	
3	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in Cardiology patients	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in Cardiology patients	Criteria: accuracy, conformity, and accuracy  Shape: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b> 1x 12 hours/ week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Buku panduan Clinical Pathway</li> <li>Clinical Practice Guide</li> <li>Management in the Field</li> </ul>	12

					<p>of Internal Disease Science</p> <ul style="list-style-type: none"> <li>• EIMED PAPDI Emergency Of Diseases In The Policy</li> <li>• EIMED PAPDI Advanced Internal Illness Emergency</li> </ul>	
4	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education,	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination),governance, independently (indications, doses,	Criteria: accuracy, conformity, and mastery  Shape: Ujian mini-CEX, CbD, DOPS	<p><b>Lecture</b> 1 x 100 minutes/ week</p> <p><b>Seminar (Refarat/ case report)</b> 3x3 hours/week</p> <p><b>Practicum (outpatient services)</b> 5x6 hours/week</p> <p><b>Praktium (guard)</b></p>	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science</li> </ul>	12

	and consultation to other specialists in Pulmonology patients	ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in Pulmonology patients		1x 12 hours/ week	of Internal Medicine • Indonesian Lung Doctors Association 2018	
5	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in kidney-hypertensive patients	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in kidney-	Criteria: accuracy, conformity, and accuracy  Shape: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1 x 100 minutes/ week  <b>Seminar (Referat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b> 1x 12 hours/ week	• Text Book Harrison's Principles of Internal Medicine  • Book Teaching The Science of Internal Medicine  • Brenner and Rector's The Kidney	8

		hypertensive patients				
6	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complications, education, and consultation to other specialists in rheumatology patients	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complications, education, and consultation to other specialists in rheumatology patients	Criteria: accuracy, conformity, and accuracy  Shape: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1 x 100 minutes/ week  <b>Seminar (Referat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b> 1x 12 hours/ week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Guide to Clinical Practice of Management in the Field of Internal Disease Science</li> </ul>	8
7	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis,	Completion in performing and able to explain the	Criteria: accuracy, conformity, and accuracy	<b>Lecture</b> 1 x 100 minutes/ week	<ul style="list-style-type: none"> <li>Text Book Harrison's</li> </ul>	4

	physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in Allergy-Immunology patients	enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in allergy-immunology patients	Shape: Ujian mini-CEX, CbD, DOPS	<b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b> 1x 12 hours/ week	Principles of Internal Medicine  • Book Teaching The Science of Internal Medicine  • Basic Allergy 1st Edition  • Basic Immunology 10th Edition	
8	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently	Criteria: accuracy, conformity, and accuracy  Shape: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1 x 100 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b>	• Text Book Harrison's Principles of Internal Medicine  • Book Teaching The Science	4

	other specialists in Geriatric patients	(indications, doses, ways of administration, and side effects of drugs), compensation, education, and consultation to other specialists in Geriatric patients		1x 12 hours/ week	of Internal Medicine • Hazzard's geriatric medicine and gerontology. 6th Edition. New York: McGraw Hill Medical; 2009	
9	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complications, education, and consultation to other specialists in	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of	Criteria: accuracy, conformity, and accuracy  Shape: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1 x 100 minutes/ week  <b>Seminar (Referat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b> 1x 12 hours/ week	• Text Book Harrison's Principles of Internal Medicine • Book Teaching The Science of Internal Medicine	8

	patients Hematology-Oncology Medical	administration, and side effects of drugs), complicasi, education, and consultation to other specialists in patients Hematology-Oncology Medical				
10	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in patients with Metabolic Endocrine and Diabetes	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complicasi, education, and consultation to other specialists in patients with Metabolic	Criteria: accuracy, conformity, and accuracy  Shape: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1 x 100 minutes/ week  <b>Seminar (Referat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b> 1x 12 hours/ week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Consensus PERKENI 2015</li> </ul>	8

		Endocrine and Diabetes				
11	Learners are able to explain and carry out the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), governance, independently (indications, doses, ways of administration, and side effects of drugs), complications, education, and consultation to other specialists in psychosomatic patients	Completion in performing and able to explain the enforcement of diagnosis (anamnesis, physical examination, and supporting examination), procedures, independently (indications, doses, ways of administration, and side effects of drugs), complications, education, and consultation to other specialists in psychosomatic patients	Criteria: accuracy, conformity, and accuracy  Shape: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1 x 100 minutes/ week  <b>Seminar (Referat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week  <b>Praktium (guard)</b> 1x 12 hours/ week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Buku panduan Clinical Pathway</li> <li>Guide to Clinical Practice of Management in the Field of Internal Disease Science</li> </ul>	

<b>Final Value:</b>						100%
<b>85 - 100= A</b>						
<b>80 - &lt; 85= A Minus</b>						
<b>75 - &lt; 80= B Plus</b>						
<b>70 - &lt; 75= B</b>						
<b>65 - &lt;70= B Minus</b>						
<b>55 - &lt; 65= C</b>						
<b>00 - &lt; 55= E</b>						

	<p style="text-align: center;"><b>HASANUDDIN UNIVERSITY</b>  <b>FACULTY OF MEDICINE</b>  <b>THE SCIENCE OF INTERNAL MEDICINE</b></p>					<b>Document Code</b>					
<b>SEMESTER LEARNING PLAN</b>											
<b>COURSES (MK)</b>		<b>CODE</b>	<b>Course</b>	<b>WEIGHT (credit)</b>	<b>SEMESTER</b>	<b>Tgl Drafting</b>					
<b>Mandiri 1 (Jejarig Hospital)</b>		20C01542405		5	7	7 october 2019					
<b>AUTHORIZATION</b>	<b>RPS Developer</b>		<b>Coordinator RMK</b>		<b>Chairman of PRODI</b>						
	Dr. dr. A. Makbul Aman, SpPD, K-EMD dr. Dimas Bayu, SpPD, K-HOM dr. Akhyar Albaar, Sp. PD		Prof. Dr. dr. Haerani Rasyid, Sp. PD, K-GH		DR. Dr. Hashim Kasim, Sp. PD, K-GH						
<b>Learning Achievement (CP)</b>	<b>ILO-PRODI charged to MK</b>										
	C1	Students are able to perform, make plans, interpret, summarize and plan treatment for all patient problems within the scope of disease science in general.									
	C 2	Students are able to perform anamnesis, physical examinations, laboratory examinations, and procedures appropriate to the specialty of internal medicine to establish the diagnosis, with reference to <i>evidence-based medicine</i> .									
	C3										
		Students are able to achieve the level of competence that has been established by the Indonesian Medical Council (CI) as a Specialist in Internal Medicine through training on how to carry out diagnosis enforcement and clinical management in each division of internal medicine; Endocrine and Metabolic, Renal Hypertension, Lung, Tropical Infections and Diseases, Reumatology, Hematology and Medical Oncology, Cardiology, Gastroenterohepatology, Geriatrics and Gerontology, Allergy Immunology and Psychosomatics.									
<b>Achievement of Course Learning (CLO)</b>											

	CLO 1	Mmpuperforms, makes plans, interpretations, summarizes and treatment plans for all patient problems within the scope of general disease science independently (C1)
	CLO 2	Mampu to make clinical diagnosis, conduct management in the field of internal medicine independently, thoroughly and care together (C2)
	CLO 3	Mmpumanage independently and or lead a team in solving internal health problems comprehensively. (C3)
	<b>Sub-Achievement of Learning Courses (Sub CLO)</b>	
	Sub-CLO 1	Students are able to make clinical diagnoses, conduct management in the field of internal medicine independently, thoroughly and treat together
	Sub-CLO 2	Able to master the benefits, dosage, counter indications, as well as side effects of drugs used in the field of internal medicine
	Sub-CLO 3	Able to provide medical consulting services in the field of internal disease science to other parts
	Sub-CLO 4	Able to educate and promote health in the field of internal medicine
	Sub-CLO 5	Able to work independently in accordance with expertise and competence in accordance with the standards of professional work competence
	Sub-CLO 6	able to make clinical decisions independently in carrying out professional work
	Sub-CLO 7	able to evaluate the results of work and decisions made in carrying out work during undergoing external stase
	Sub-CLO 8	able to improve professional skills through training and independent work experience
	Sub-CLO 9	able to be responsible for work in accordance with the professional code of ethics
	Sub-CLO 10	Able to increase learning capacity independently
	Sub-CLO 11	able to collaborate in applying science to community life
	Sub-CLO12	able to establish diagnosis in accordance with anamnesis, physical examination, laboratory tests, and procedures appropriate for the specialty of internal medicine, with reference to <i>evidence-based medicine</i>
	Sub-CLO 13	able to work in teams in comprehensively solving disease health problems
	Sub-CLO 14	able to improve practical clinical skills in the field of internal medicine in networking hospitals by utilizing the latest medical science and technology
	Sub-CLO 15	able to cooperate and use health care facilities available in networking hospitals
<b>DeskripsiSingkat MK</b>	Teaching students to be able to practice independently in the field of internal medicine	
<b>Study Materials / Learning Materials</b>	<ol style="list-style-type: none"> <li>1. In accordance with the learning materials in the Tropical Infection division</li> <li>2. In accordance with the learning materials in the Division of Gastroenterohepatology</li> <li>3. In accordance with learning materials in the Cardiology division</li> <li>4. In accordance with learning materials in the Pulmonology division</li> <li>5. In accordance with the learning materials in the Division of Renal Hypertension</li> <li>6. In accordance with the learning materials in the Division of Reumatology</li> <li>7. In accordance with the learning materials in the Division of Allergy Immunology</li> <li>8. In accordance with the learning materials in the Geriatric division</li> </ol>	

		<p>9. In accordance with the learning materials in the Hematology division of Medical Oncology  10. In accordance with learning materials in the Endocrine-Metabolic and Diabetes division  11. In accordance with the learning materials in the Psychosomatic division</p>						
Book		<b>Main:</b>	<p>1. Book Teaching The Science of Internal Medicine  2. Textbook Harrison's Principles of Internal Medicine  3. Clinical Practice Guide to Internal Medicine</p>					
		<b>Supporters:</b>						
Master Lecturer		<p>1. Dr. dr. Hashim Kasim, SpPD, K-GH  2. Dr. dr. Khalid Saleh, SpPD, CV  3. Dr. Pendrik Tandean, SpPD, SME</p>						
Subjectssyarat								
Week1	Sub-CLO (Final ability of each stage of learning)	Valuation		Form of learning, LearningMethods, Student assignments, [Estimated Time]	Learning Materials [Library]	Assessment Weight (%)		
		Indicator	Criteria & Shape					
(1)	(2)	(3)	(4)	(5)	(7)	(8)		
1-12	Students are able to make clinical diagnoses, conduct management in the field of internal medicine independently, thoroughly and treat together.	completion in conducting independent practice and making independent decisions in making a diagnosis when hospital stase networked	Criteria: accuracy, conformity, and mastery  Non-test form: - self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	6%		

1-12	Able to master the benefits, dosage, counter indications, as well as side effects of drugs used in the field of internal medicine	completion in conducting independent practice and making independent decisions in prescribing drugs when hospital stase networked	Criteria: accuracy, conformity, and mastery  Non-test form: Perform medical measures in wards and outpatient polyclinics independently	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Reparat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	6%
1-12	Able to provide medical consulting services in the field of internal medicine from other parts	Master anamnesis techniques , physical examinations, laboratory tests, and procedures that specialize in disease specialization in providing consultation and referral to other parts	Criteria: accuracy, conformity, and mastery  Non-test form: - Make consultations to subspecialists or between sections	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Reparat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	6%

		and subspeciali sts				
<b>1-12</b>	Able to educate and promote health in the field of internal medicine	Completion in conducting education for disease prevention and health promotion	Criteria: accuracy, conformity, and mastery  Non-test form: - Educate for dietary arrangements, how to use drugs, and prevent complications of disease,	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Reparat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	<b>7%</b>
<b>1-12</b>	Able to work independently in accordance with expertise and competence in accordance with the standards of professional work competence	Completion in anamnesis, physical examination, diagnosis, and medical measures both invasive and noninvasive	Criteria: accuracy, conformity, and mastery  Non-test form: self-directed practice in wards and outpatient polyclinics,	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Reparat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	<b>7%</b>
<b>1-12</b>	able to make clinical decisions independently in carrying out professional work	completion in conducting independent practice and	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Reparat/ case report)</b> 3x3 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> </ul>	<b>6%</b>

		making independent decisions regarding diagnosis and procedures when hospital stase network		<b>Practicum (outpatient services)</b> 5x6 hours/week	• Book Teaching The Science of Internal Medicine • Clinical Practice Guide to Internal Medicine	
1-12	able to evaluate the results of work and decisions made in carrying out work in undergoing external stase	completion in conducting independent practice and making independent decisions regarding diagnosis and procedures when hospital stase network	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	• Text Book Harrison's Principles of Internal Medicine • Book Teaching The Science of Internal Medicine • Clinical Practice Guide to Internal Medicine	7%
1-12	able to improve professional skills through training and independent work experience	completion in conducting independent practice when stase	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b>	• Text Book Harrison's Principles of Internal Medicine • Book Teaching The Science of Internal Medicine	7%

		hospital network		5x6 hours/week	Internal Medicine • Clinical Practice Guide to Internal Medicine	
<b>1-12</b>	able to be responsible for work in accordance with the professional code of ethics	completion in self-practice during stase in polyclinic and networked hospital wards	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	• Text Book Harrison's Principles of Internal Medicine • Book Teaching The Science of Internal Medicine • Clinical Practice Guide to Internal Medicine	<b>7%</b>
<b>1-12</b>	Able to increase learning capacity independently	completion in conducting independent practice when stase hospital network	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	• Text Book Harrison's Principles of Internal Medicine • Book Teaching The Science of Internal Medicine • Clinical Practice Guide to Internal Medicine	<b>7%</b>
<b>1-12</b>	able to collaborate in applying science to community life	completion in conducting independent practice	Criteria: accuracy, conformity, and mastery  Non-test form:	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week	• Text Book Harrison's Principles of Internal Medicine	<b>7%</b>

		related to education to patients	self-practice in wards and outpatient polyclinics	<b>Practicum (outpatient services)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	
<b>1-12</b>	able to establish diagnosis in accordance with anamnesis, physical examination, laboratory tests, and procedures appropriate for the specialty of internal medicine, with reference to <i>evidence-based medicine</i>	completion in conducting independent practice when staying in hospital network	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	<b>7%</b>
<b>1-12</b>	able to work in teams in comprehensively solving disease health problems	completion in doing teamwork in solving disease health problems in a comprehensive manner	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	<b>7%</b>
<b>1-12</b>	able to improve practical clinical skills in the field of internal medicine in	completion in improving	Criteria: accuracy, conformity, and mastery	<b>Lecture</b> 1 x 50 minutes/ week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> </ul>	<b>6%</b>

	networking hospitals by utilizing the latest medical science and technology	practical clinical skills in the field of internal medicine in networking hospitals by utilizing the latest medical science and technology	Non-test form: self-practice in wards and outpatient polyclinics	<b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	Internal Medicine • Book Teaching The Science of Internal Medicine • Clinical Practice Guide to Internal Medicine	
1-12	able to cooperate and use health care facilities available in networking hospitals	completion in cooperating and using health care facilities available in networking hospitals	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (outpatient services)</b> 5x6 hours/week	• Text Book Harrison's Principles of Internal Medicine • Book Teaching The Science of Internal Medicine • Clinical Practice Guide to Internal Medicine	7%
<b>Final Value:</b>  85 - 100= A 80 - < 85= A Minus 75 - < 80= B Plus 70 - < 75= B 65 - <70= B Minus 55 - < 65= C 00 - < 55= E						100%

	Name of college : Hasanuddin University Name of Faculty : Medicine Prodi Name : The Science of Internal Medicine					<b>Document Code</b>							
<b>SEMESTER LEARNING PLAN</b>													
COURSES (MK)		CODE	Course	WEIGHT (credit):		SEMESTER							
Medical Consultation Between Departments		20C01542506	The Science of Internal Medicine	T = 0	P = 6	VII							
AUTHORIZATION	RPS Developer			Coordinator RMK		Chairman of PRODI							
	Dr. dr. Harun Iskandar, Sp.P(K), Sp. PD,K-P			Prof. Dr. dr. Haerani Rasyid, Sp. PD-KGH, Sp.GKs		Dr. dr. Hashim Kasim, Sp. PD, K-GH							
Learning Achievement (CP)	ILO PRODI charged to MK												
	S 2	Mahasiswa will be able to manage, develop, and maintain relationships with colleagues and peers within the intra-departmental sphere, other departments, broader health institutions and the professional community. (I'M 2)											
	C4	Students are able to manage independently and/or lead teams in internal disease problem solving in Outpatient, IGD, Inpatient and Intensive Care Units through inter, multi, and transdisciplinary approaches (C 4).											
	<b>Achievement of Course Learning (CLO)</b>												
	CLO1 Able to provide medical consultation services in the field of internal medicine from other Departments and establish good communication (S1) CLO2 Able to manage independently and lead the team through a multidisciplinary approach of disease science in conducting evaluation and medical consultation services in the Field of Internal Disease Science (C4)												
No	<b>Sub-Achievement of Learning Courses (Sub CLO)</b>				<b>College Topics</b>								
Sub-CLO 1	Mampu makes independent decisions in carrying out the profession of internal medicine and mastering referral techniques for patients who need subspecialist servants.												
Sub-CLO 2	Able to provide medical consulting services in the field of internal medicine from other Departments.												

	Sub-CLO 3	Able to build good communication in interacting and providing services to patients and colleagues from other departments.	
	Sub-CLO 4	Able to manage independently and lead the team through a multidisciplinary approach of disease science in conducting evaluation and medical consulting services in the Field of Disease Science in	
	Sub-CLO 5	Mmpuutilizes the latest medical facilities and technologies in the field of internal medicine in providing medical consulting services from other Departments.	
Short Description of MK	<p>Medical Consultation Between Departments is an integrated service in the field of Internal Medicine for outpatients consulted from Other Departments.</p> <p>This course lasts for 3 months, at The Internal Diseases Poly RS UNHAS and other networking hospitals.</p> <p>At the end of this stase it is expected that PPDS can manage targeted diagnosis, conduct comprehensive management, educate patients and families, on patients consulted by other departments. All these competencies are expected to be carried out by learners independently.</p>		
Study Materials/Learning Materials	<ol style="list-style-type: none"> <li>1. In accordance with the learning materials in the Division of Tropical Infections</li> <li>2. In accordance with the learning materials in the Division of Gastroentero-Hepatology</li> <li>3. In accordance with the learning materials in the Division of Cardiology</li> <li>4. In accordance with the learning materials in the Division of Pulmonology</li> <li>5. In accordance with the learning materials in the Kidney-Hypertension Division</li> <li>6. In accordance with the learning materials in the Division of Allergy-Immunology</li> <li>7. In accordance with the learning materials in the Geriatric Division</li> <li>8. In accordance with the learning materials in the Division of Hematology of Medical Oncology</li> <li>9. In accordance with the learning materials in the Division of Rematology</li> <li>10. In accordance with learning materials in the Division of Metabolic Endocrine and Diabetes</li> <li>11. In accordance with the learning materials in the Psychosomatic Division</li> </ol>		
POWERFUL LECTURER	<ol style="list-style-type: none"> <li>1. Dr. dr. Faridin HP, SpPD, K-R</li> <li>2. Dr. dr. Fardah Akil, SpPD, K-GEH</li> <li>3. Dr. dr. Harun Iskandar, SpP(K), SpPD, K-P</li> </ol>		
Book	<p>Main:</p> <ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Diseases.edition VI. Jakarta: InternaPublishing; 2014.</li> <li>• Kasper et Al. Harrison's Manual of Medicine. 19<sup>th</sup> edition.2016</li> </ul>		

Week 1	Sub-CLO <b>(Final ability of each stage of learning)</b>	Valuation		Help with learning, Learning methods, Student assignments, <b>[Estimated Time]</b>	Learning Materials <b>[Library]</b>	Assessment Weight (%)
		Indicator	Criteria & Shape			
(1)	(2)	(3)	(4)	(5)	(7)	(8)
1-12	1. Students can provide medical consultation services in the field of internal medicine from other departments	<ul style="list-style-type: none"> <li>• Mmeets the basic concepts of disease about etiology, pathogenesis, pathophysiology of Tropical Infections, Gastrohepatology, Cardiology Pulmonology, Kidney Hypertension, Rematology, Immunological Allergy, Geriatricia, Hematology Oncology, Endocrine Metabolic and Diabetes and Psychosomatic)</li> <li>• Master anamnesis techniques, physical examinations, laboratory tests, and procedures that specialize in disease specialization in providing consultation from other Departments</li> </ul>	<p>Criterion:</p> <p>3 = Explaining in a series of basic concepts of disease and mastering anamnesis techniques, physical examination, and supporting examination</p> <p>2 = Explaining not in a row about the basic concepts of the disease and lacking mastery of anamnesis techniques, physical examination, and supporting examination</p> <p>1 = Unable to explain the basic concepts of the disease and not mastering anamnesis techniques, physical examination, and supporting examination</p> <p>Test Form:</p>	<p><b>Lecture</b> 1x 100 minutes/week</p> <p><b>Seminar (Refarat/ case report)</b> 3 x 3 hours/ week</p> <p><b>Practicum (Intersectional consulting services)</b> 6 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>• Book Teaching The Science of Internal Diseases. edition VI. Jakarta: Interna Publishing; 2014.</li> <li>• Kasper et Al. Harrison's Manual of Medicine. 19<sup>th</sup> edition.2016</li> </ul>	30

			Ujian mini-CEX, CbD, DOPS			
1-12	2. Students are able to build good communication in interacting and providing services to patients and colleagues from other departments.	<ul style="list-style-type: none"> <li>Mastering effective communication techniques and empathy in interacting with patients and families of patients after in contact with colleagues from other departments</li> <li>Have verbal and non-verbal skills in providing a consultation waitress</li> </ul>	<p>Criterion:</p> <p>2 = Able to communicate effectively</p> <p>1 = Unable to communicate effectively</p> <p>Test Form:</p> <p>Test Form: Ujian mini-CEX, CbD, DOPS</p>	<p><b>Lecture</b> 1x 100 minutes/week</p> <p><b>Seminar (Reparat/ case report)</b> 3 x 3 hours/ week</p> <p><b>Practicum (Intersectional consulting services)</b> 6 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>Book Teaching The Science of Internal Diseases. edition VI. Jakarta: Interna Publishing; 2014.</li> <li>Kasper et Al. Harrison's Manual of Medicine. 19<sup>th</sup> edition.2016</li> </ul>	20
1-12	3. Students are able to conduct data analysis through a multidisciplinary approach of disease science in conducting evaluation and medical	<ul style="list-style-type: none"> <li>Have the ability to evaluate critically and fully as well as a multidisciplinary approach to data both from physical examination and supporting in making decisions in providing consulting services.</li> <li>Have the ability to make pariurna assessment in the form of problem-</li> </ul>	<p>Criterion:</p> <p>2 = Describe critically and fully the anamnesis data, physical examination, and support</p> <p>1 = does not explain critically and fully the anamnesis data,</p>	<p><b>Lecture</b> 1x 100 minutes/week</p> <p><b>Seminar (Reparat/ case report)</b> 3 x 3 hours/ week</p> <p><b>Practicum (Intersectional consulting services)</b> 6 x 6 hours/ week</p>	<ul style="list-style-type: none"> <li>Book Teaching The Science of Internal Diseases. edition VI. Jakarta: Interna Publishing; 2014.</li> <li>Kasper et Al. Harrison's Manual of Medicine. 19<sup>th</sup> edition.2016</li> </ul>	20

	consultation services in the Field of Disease Science in	oriented medical records in answering consultations from other departments	physical examination, and support  Test Form: Ujian mini-CEX, CbD, DOPS		blishing; 2014. • Kasper et Al. Harrison's Manual of Medicine. 19 <sup>th</sup> edition.2016	
1-12	4. Students are able to make independent decisions in carrying out the profession of internal medicine and mastering referral techniques for patients who need subspecialist servants.	• Have the ability to make independent decisions in carrying out the profession of internal medicine and mastering referral techniques for patients who need subspecialist servants	Criterion:  2 = Mastering the referral technique  1 = Not mastering the reference technique  Test Form: Ujian mini-CEX, CbD, DOPS	<b>Lecture</b> 1x 100 minutes/week  <b>Seminar (Refarat/ case report)</b> 3 x 3 hours/ week  <b>Practicum (Intersectional consulting services)</b> 6 x 6 hours/ week	• Book Teaching The Science of Internal Diseases. edition VI. Jakarta: Interna Publishing; 2014. • Kasper et Al. Harrison's Manual of Medicine. 19 <sup>th</sup> edition.2016	20
1-12	5. Students can take advantage of the latest	• Students have a program utilizing the latest medical facilities	Criterion:  2 = Mastering the latest medical technology in	<b>Lecture</b> 1x 100 minutes/week	• Book Teaching The	10

	medical facilities and technologies in the field of internal medicine in providing medical consulting services from other Departments	and technologies in the field of diseases in providing medical consulting services from other Departments	the field of internal medicine  1 = Lack of Mastery  Test Form: Ujian mini-CEX, CbD, DOPS	<b>Seminar (Referat/ case report)</b> 3 x 3 hours/ week  <b>Practicum (Intersectional consulting services)</b> 6 x 6 hours/ week	Science of Internal Diseases. edition VI. Jakarta: Interna Publishing; 2014. • Kasper et Al. Harrison's Manual of Medicine. 19 <sup>th</sup> edition.2016	
<b>Final Value:</b>  85 - 100= A 80 - < 85= A Minus 75 - < 80= B Plus 70 - < 75= B 65 - <70= B Minus 55 - < 65= C 00 - < 55= E						100%

	<b>HASANUDDIN UNIVERSITY</b> <b>FACULTY OF MEDICINE</b> <b>THE SCIENCE OF INTERNAL MEDICINE</b>					<b>Document Code</b>						
	<b>SEMESTER LEARNING PLAN</b>											
<b>COURSES (MK)</b>	<b>CODE</b>	<b>Course</b>	<b>WEIGHT (credit)</b>	<b>SEMESTER</b>	<b>Tgl Drafting</b>							
Mandiri 2 (Chief)	20C01542608		8	8	7 october 2019							
<b>AUTHORIZATION</b>	<b>RPS Developer</b>		<b>Coordinator RMK</b>		<b>Chairman of PRODI</b>							
	Dr. dr. A. Makbul Aman, SpPD, K-EMD Dr.dr.Harun Iskandar,SpP(K), SpPD,KP		<b>Prof. Dr. dr. Haerani Rasyid, Sp. PD, K-GH</b>		<b>DR. Dr. Hashim Kasim, Sp. PD, K-GH</b>							
<b>Learning Achievement (CP)</b>	<b>ILO-PRODI charged to MK</b>											
	C4		1. Students are able to manage independently and/or lead teams in problem solving of internal medicine in outpatient, IGD, inpatient and intensive care units through inter, multi- and transdisciplinary approaches to improve curative, decrease pain and mortality rates.									
	C5		Students are not only able to act as internal medicine specialists but also as researchers, educators, and role models for the entire community where students work.									
	<b>Achievement of Course Learning (CLO)</b>											
	CLO 1	Students are able to solve internal medicine problems in outpatient, IGD, inpatient and intensive care units through inter, multi, and transdisciplinary approaches to improve curative, decrease pain rates and manage death as chief (C4)										
	CLO 2	Students are not only able to perform the duties of chief resident in internal medicine but also as researchers, educators, and role models for other residents (C5).										
<b>Sub-Achievement of Learning Courses (Sub CLO)</b>												

	Sub-CLO 1	Students are able to make clinical diagnoses, conduct management in the field of internal medicine independently, thoroughly and treat together
	Sub-CLO 2	Able to master the benefits, dosage, counter indications, as well as side effects of drugs used in the field of internal medicine
	Sub-CLO 3	Able to provide medical consulting services in the field of internal disease science to other parts
	Sub-CLO 4	Able to educate and promote health in the field of internal medicine
	Sub-CLO 5	Able to work independently in accordance with expertise and competence in accordance with the standards of professional work competence
	Sub-CLO 6	able to make clinical decisions independently in carrying out professional work
	Sub-CLO 7	able to evaluate the results of work and decisions made in carrying out work during undergoing external stase
	Sub-CLO 8	able to improve professional skills through training and independent work experience
	Sub-CLO 9	able to be responsible for work in accordance with the professional code of ethics
	Sub-CLO 10	Able to increase learning capacity independently
	Sub-CLO 11	able to collaborate in applying science to community life
	Sub-CLO 12	able to establish diagnosis in accordance with anamnesis, physical examination, laboratory tests, and procedures appropriate for the specialty of internal medicine, with reference to <i>evidence-based medicine</i>
	Sub-CLO 13	able to work in teams in comprehensively solving disease health problems
	Sub-CLO 14	able to improve practical clinical skills in the field of internal medicine in hospitals by utilizing the latest medical science and technology
	Sub-CLO 15	able to cooperate and use health care facilities available in hospitals
<b>Deskripsi Singkat MK</b>	Teaching students to be able to practice independently in the field of internal medicine	
<b>Study Materials / Learning Materials</b>	12. In accordance with the learning materials in the Tropical Infection division 13. In accordance with the learning materials in the Division of Gastroenterohepatology 14. In accordance with learning materials in the Cardiology division 15. In accordance with learning materials in the Pulmonology division 16. In accordance with the learning materials in the Division of Renal Hypertension 17. In accordance with the learning materials in the Division of Reumatology 18. In accordance with the learning materials in the Division of Allergy Immunology 19. In accordance with the learning materials in the Geriatric division 20. In accordance with the learning materials in the Hematology division of Medical Oncology 21. In accordance with learning materials in the Endocrine-Metabolic and Diabetes division 22. In accordance with the learning materials in the Psychosomatic division	
<b>Book</b>	<b>Main:</b>	
	4. Book Teaching The Science of Internal Medicine 5. Textbook Harrison's Principles of Internal Medicine 6. Clinical Practice Guide to Internal Medicine	

		Supporters:					
<b>Master Lecturer</b>		4. Dr. dr. Hashim Kasim, SpPD, K-GH 5. Dr. dr. Khalid Saleh, SpPD, CV 6. Dr. Pendrik Tandean, SpPD, SME					
<b>Subjectssyarat</b>							
Week1	<b>Sub-CLO</b> <b>(Final ability of each stage of learning)</b>		<b>Valuation</b>		<b>Form of learning, LearningMethods, Student assignments, [Estimated Time]</b>		<b>Learning Materials [Library]</b>
			<b>Indicator</b>	<b>Criteria &amp; Shape</b>			
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>		<b>(7)</b>	<b>(8)</b>
1-12	Students are able to make clinical diagnoses, conduct management in the field of internal medicine independently, thoroughly and treat together.	completion in conducting independent practice and making independent decisions in making a diagnosis while serving as chief	Criteria: accuracy, conformity, and mastery  Non-test form: - self-practice in wards	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	• Text Book Harrison's Principles of Internal Medicine • Book Teaching The Science of Internal Medicine • Clinical Practice Guide to Internal Medicine	6%	
1-12	Able to master the benefits, dosage, counter indications, as well as side effects of drugs used in the field of internal medicine	completion in conducting independent practice and making independent decisions in prescribing drugs	Criteria: accuracy, conformity, and mastery  Non-test form: Perform medical measures on the ward independently	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	• Text Book Harrison's Principles of Internal Medicine • Book Teaching The Science of Internal Medicine • Clinical Practice Guide to Internal Medicine	6%	

1-12	Able to provide medical consulting services in the field of internal medicine from other parts	Master anamnesis techniques, physical examinations, laboratory tests, and procedures that specialize in disease specialization in providing consultation and referral to other parts and subspecialists	Criteria: accuracy, conformity, and mastery  Non-test form: - Make consultations to subspecialists or between sections	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	6%
1-12	Able to educate and promote health in the field of internal medicine	Completion in conducting education for disease prevention and health promotion	Criteria: accuracy, conformity, and mastery  Non-test form: - Educate for dietary arrangements, how to use drugs, and prevent complications of disease,	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	7%
1-12	Able to work independently in accordance with expertise and competence in accordance with the standards of professional work competence	Completion in anamnesis, physical examination, diagnosis, and medical measures	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	7%

		both invasive and noninvasive				
<b>1-12</b>	able to make clinical decisions independently in carrying out professional work	completion in conducting independent practice and making independent decisions related to diagnosis and governance	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	<b>6%</b>
<b>1-12</b>	able to evaluate the results of work and decisions made in carrying out work in undergoing external stase	completion in conducting independent practice and making independent decisions related to diagnosis and governance	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	<b>7%</b>
<b>1-12</b>	able to improve professional skills through training and independent work experience	completion in self-practice	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatient services)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>• Text Book Harrison's Principles of Internal Medicine</li> <li>• Book Teaching The Science of Internal Medicine</li> <li>• Clinical Practice Guide to Internal Medicine</li> </ul>	<b>7%</b>

1-12	able to be responsible for work in accordance with the professional code of ethics	completion in self-practice while stase in the hospital ward	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	7%
1-12	Able to increase learning capacity independently	completion in conducting independent practice and as chief	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	7%
1-12	able to collaborate in applying science to community life	completion in conducting independent practice related to education to patients	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards and outpatient polyclinics	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	7%
1-12	able to establish diagnosis in accordance with anamnesis, physical examination, laboratory tests, and procedures appropriate for the specialty of internal medicine, with reference to <i>evidence-based medicine</i>	completion in conducting independent practice while being the chief	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	7%

1-12	able to work in teams in comprehensively solving disease health problems	completion in doing teamwork in solving disease health problems in a comprehensive manner	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	7%
1-12	able to improve practical clinical skills in the field of internal medicine in networking hospitals by utilizing the latest medical science and technology	completion in improving practical clinical skills in the field of internal medicine in hospitals by utilizing the latest medical science and technology	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	6%
1-12	able to cooperate and use health care facilities available in networking hospitals	completion in cooperating and using health care facilities available in hospitals	Criteria: accuracy, conformity, and mastery  Non-test form: self-practice in wards	<b>Lecture</b> 1 x 50 minutes/ week  <b>Seminar (Refarat/ case report)</b> 3x3 hours/week  <b>Practicum (inpatientservices)</b> 5x6 hours/week	<ul style="list-style-type: none"> <li>Text Book Harrison's Principles of Internal Medicine</li> <li>Book Teaching The Science of Internal Medicine</li> <li>Clinical Practice Guide to Internal Medicine</li> </ul>	7%
<b>Final Value:</b>						100%
<b>85 - 100= A</b> <b>80 - &lt; 85= A Minus</b> <b>75 - &lt; 80= B Plus</b>						

**70 - < 75= B**

**65 - <70= B Minus**

**55 - < 65= C**

**00 - < 55= E**

	Name of college	: Hasanuddin University				Document Code				
	Name of Faculty	: Medicine								
	Department Name	: The Science of Internal Medicine								
	Prodi Name	: Subspecialty Education Program of Diseases in FK-Unhas								
<b>SEMESTER LEARNING PLAN</b>										
COURSES (MK)	CODE	Course	WEIGHT (credit):	SEMESTER	Tgl Drafting					
Thesis	20C0154270 6	Public Courses	6	semester VIII	7 october 2019					
AUTHORIZATION	RPS Developer		Coordinator RMK		Chairman of PRODI					
	Prof.Dr. dr. Syakib Bakri, Sp.PD, KGH Dr. dr. Andi Makbul Aman, Sp.PD, KEMD Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, Sp.GK Dr. dr. Harun Iskandar, SpP(K), Sp.PD, KP		Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, Sp.GK		Dr. dr. Hashim Kasim, Sp.PD, KGH					
Learning Achievement (CP)	ILO PRODI charged to MK									
	S1	Students are able to apply logical, critical, systematic, and creative thinking through scientific papers, conducting scientific research in the field of internal medicine and published in accredited journals.								
	C5	Students are not only able to act as internal medicine specialists but also as researchers, educators, and role models for the entire community where students work. .								
	<b>Achievement of Course Learning (CLO)</b>									

	<p>CLO1 Students are able to enyusun proposals, results and theses by applying logical, critical, systematic, and creative thinking in the field of internal medicine (S1)</p> <p>CLO2 is able to guarantee the originality of research and is published in accredited journals. (C5)</p>
<b>Sub-Achievement of Learning Courses (Sub CLO)</b>	
Sub-CLO 1	Flow of thinking/Logic. Assessed through the suitability of the background, the formulation of problems, as well as the theories used; Rationalization of data collection methods and accuracy of research results analysis methods.
Sub-CLO 2	Mastery of Material / Presentation, assessed through the ability to explain, mastery of material.
Sub-CLO 3	Benefits of Research Results. Assessed through the contribution of research results to the academic world, as well as the solution of problems that exist in the family environment, certain institutions / institutions, government, or contributions to the general public. The benefits of the study results are reflected in concrete advice (which allows it to be applied in everyday life.)
Sub-CLO 4	Rules of Writing. Assessed through accuracy / accuracy in the writing of sentences / words, bibliography, and conformity with writing methods; The rules of writing are also assessed through the use of language, the selection of words, and the composition / sentence structure of the thesis report.
Sub-CLO 5	Business & Originality. Originality is judged by the uniqueness of the case, the uniqueness of the combination of research variables, the uniqueness of research methods, the uniqueness of treatment. Originality can be attributed to the effort expended to overcome difficulties in the preparation of the thesis (time & cost) issued to obtain case/variable research).
Short Description of MK	This course will lead students to be able to apply research principles that refer to the lectures philosophy of science, bioethics and humanities, and research methodology so that students are able to plan, implement, and report research correctly, in accordance with ethical rules and scientific rules.
Study Materials/Learning Materials	1      Ethics, Professional Ethics, and Basic Principles of Research Ethics
	2      Patient / Case
	3      Facilities of Clinical Laboratory, Biomedicine and Public Health
	4      Review Libraries, internet connections, Notebooks, LCDs and Software
Book	Main:
	1. Indonesian Doctor Competency Standards, CI, 2012

	Supporter:	2. UNESCO Standar of Bioethics in Medical Education, 2014 3. WHO Framework of Interprofessional Collaboration Practice, 2010											
Master Lecturer	Prof.Dr. dr. Syakib Bakri, Sp.PD, KGH  Prof. Dr. dr. Haerani Rasyid, M.Kes, Sp.PD, KGH, Sp.GK  Dr. dr. Andi Makbul Aman, Sp.PD, KEMD  Dr. dr. Harun Iskandar, Sp.PD, K-P												
Courses Prerequisite													
Week to	Sub CLO (The final ability of each stage Learning)	Valuation	Form of Learning; Learning Methods; Assignment Students; Estimated time	Luring (offline)	Daring (online)	Learning Materials (Library)	Assessment Weight (%)						
1	2	3	4	5	6	7	8						
1	Students are able to draft thesis proposals in accordance with scientific rules that can be accounted for	Students are able to Explaining the research plan	<ul style="list-style-type: none"> <li>• Presentation and question and answer</li> </ul> <ul style="list-style-type: none"> <li>• Discussion 1x50 minutes / week (24 weeks)</li> <li>• Research 2x50 minutes /week (24 weeks)</li> <li>• Seminar 2x50 minutes</li> </ul>			Book 1,2,3	5						

2	Students are able to collect, analyze, interpret and present research data that has been collected.	Students are able to explain the collection, analysis, and interpretation of data with an accurate presentation.	<ul style="list-style-type: none"> <li>• Presentation and question and answer</li> </ul>	<ul style="list-style-type: none"> <li>• Research 2x50 minutes /week (24 weeks)</li> <li>• Discussion 1x50 minutes / week (24 weeks)</li> <li>• Seminar 2x50 minutes</li> </ul>		Book 1,2,3	5
3	Students are able to compile the final thesis report in accordance with scientific rules that can be accounted for.	Students are able to explain the overall research report well and accurately.	<ul style="list-style-type: none"> <li>• Presentation and question and answer</li> </ul>	<ul style="list-style-type: none"> <li>• Seminar 2x50 minutes</li> </ul>		Book 1,2,3	5
4.	End-of-semester exams	<ul style="list-style-type: none"> <li>• Accuracy correctly answers all materials</li> <li>• Professional ethics</li> </ul>	<ul style="list-style-type: none"> <li>• Test</li> </ul>	<ul style="list-style-type: none"> <li>• Seminar 2x50 minutes</li> </ul>		Book 1,2,3	15

