



3rd & 4th YEAR LOG BOOK MEDICINE



**KHYBER GIRLS
MEDICAL COLLEGE,
PESHAWAR,
PAKISTAN**

NAME	
FATHER NAME	
ROLL NUMBER	
BATCH	
DATES OF ROTATION	

INTRODUCTION

As part of structured learning program, this log book will identify the objectives for each period / rotation of learning. The main purpose of the log book is to help you monitor your own competence, to recognize gaps and address them. Its second purpose is to describe the minimum competence level expected of you at the end of every rotation.

STRUCTURE

The skills to be achieved are laid out in 2 sections. The first section relates to history taking, examination and presentation of a case. Every organ system has representation in this section as mentioned in the top row of each table. The second section includes procedural skills. Competencies in procedural skills from all organ systems are presented together. Untitled, additional tables for both sections are included in the end in case some competencies have to be reassessed / repeated.

USING THE LOGBOOK

Each organ system commences on a new page. The pages contain numbered competencies. Many of the competencies do not require an assessment of every competence level and these are indicated by shaded boxes. Certain competencies e.g. procedures do not require the student to be level 5 (independent) by the end of the learning period. These are identified by black boxes.

Teacher / trainer will tick off competence levels as you achieve them and sign them with date.

SECTION 1: HISTORY TAKING, EXAMINATION AND PRESENTATION OF A CASE

3 rd Year General Medicine: Mini-Cex 1						
Patient Name:		Diagnosis:			Date:	
COMPETENCIES		LEVEL OF COMPETENCE			Teacher to sign & Date	
		1. Below Expectation 2. Adequate 3. Excellent				
HISTORY / EXAM / MANAGEMENT PLAN		Below Expectation	Adequate	Excellent	Sign	Date
1	Obtain comprehensive history after introduction and informed consent, asking relevant questions in order to reach a history based differential diagnosis.					
2	Perform complete physical examination, with detailed examination of the involved organ system					
3	Skillfully present patient history, physical examination findings in a systematic, coherent and concise manner, which addresses the chief complaint/problem, identifies pertinent positive and negative findings and reach a logical conclusion					
4	Arrange a focused list of differential diagnosis					
5	Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis					
6	Respect the cultural and ethnic diversity of their patient's beliefs					
7	Display honesty, integrity, respect, and compassion for patient & family					

Good points	
Suggestions for improvement	
Sign / Date	

SECTION 1: HISTORY TAKING, EXAMINATION AND PRESENTATION OF A CASE

3 rd Year General Medicine: Mini-Cex 2						
Patient Name:		Diagnosis:			Date:	
COMPETENCIES		LEVEL OF COMPETENCE			Teacher to sign & Date	
		4. Below Expectation 5. Adequate 6. Excellent				
HISTORY / EXAM / MANAGEMENT PLAN		Below Expectation	Adequate	Excellent	Sign	Date
1	Obtain comprehensive history after introduction and informed consent, asking relevant questions in order to reach a history based differential diagnosis.					
2	Perform complete physical examination, with detailed examination of the involved organ system					
3	Skillfully present patient history, physical examination findings in a systematic, coherent and concise manner, which addresses the chief complaint/problem, identifies pertinent positive and negative findings and reach a logical conclusion					
4	Arrange a focused list of differential diagnosis					
5	Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis					
6	Respect the cultural and ethnic diversity of their patient's beliefs					
7	Display honesty, integrity, respect, and compassion for patient & family					

Good points	
Suggestions for improvement	
Sign / Date	

SECTION 1: HISTORY TAKING, EXAMINATION AND PRESENTATION OF A CASE

3 rd Year General Medicine: Mini-Cex 3						
Patient Name:		Diagnosis:			Date:	
COMPETENCIES		LEVEL OF COMPETENCE			Teacher to sign & Date	
		1. Below Expectation 2. Adequate 3. Excellent				
HISTORY / EXAM / MANAGEMENT PLAN		Below Expectation	Adequate	Excellent	Sign	Date
1	Obtain comprehensive history after introduction and informed consent, asking relevant questions in order to reach a history based differential diagnosis.					
2	Perform complete physical examination, with detailed examination of the involved organ system					
3	Skillfully present patient history, physical examination findings in a systematic, coherent and concise manner, which addresses the chief complaint/problem, identifies pertinent positive and negative findings and reach a logical conclusion					
4	Arrange a focused list of differential diagnosis					
5	Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis					
6	Respect the cultural and ethnic diversity of their patient's beliefs					
7	Display honesty, integrity, respect, and compassion for patient & family					

Good points	
Suggestions for improvement	
Sign / Date	

SECTION 1: HISTORY TAKING, EXAMINATION AND PRESENTATION OF A CASE

4 th Year General Medicine: Mini-Cex 1						
Patient Name:		Diagnosis:			Date:	
COMPETENCIES		LEVEL OF COMPETENCE			Teacher to sign & Date	
		1. Below Expectation 2. Adequate 3. Excellent				
HISTORY / EXAM / MANAGEMENT PLAN		Below Expectation	Adequate	Excellent	Sign	Date
1	Obtain comprehensive history after introduction and informed consent, asking relevant questions in order to reach a history based differential diagnosis.					
2	Perform complete physical examination, with detailed examination of the involved organ system					
3	Skillfully present patient history, physical examination findings in a systematic, coherent and concise manner, which addresses the chief complaint/problem, identifies pertinent positive and negative findings and reach a logical conclusion					
4	Arrange a focused list of differential diagnosis					
5	Prepare a diagnostic plan, selecting investigations appropriate for the patient					
6	Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis					
7	Respect the cultural and ethnic diversity of their patient's beliefs					
8	Display honesty, integrity, respect, and compassion for patient & family					

Good points	
Suggestions for improvement	
Sign / Date	

SECTION 1: HISTORY TAKING, EXAMINATION AND PRESENTATION OF A CASE

4 th Year General Medicine: Mini-Cex 2						
Patient Name:		Diagnosis:			Date:	
COMPETENCIES		EXPECTED LEVEL OF COMPETENCE 1. Below Expectation 2. Adequate 3. Excellent			Teacher to sign & Date	
HISTORY / EXAM / MANAGEMENT PLAN		Below Expectation	Adequate	Excellent	Sign	Date
1	Obtain comprehensive history after introduction and informed consent, asking relevant questions in order to reach a history based differential diagnosis.					
2	Perform complete physical examination, with detailed examination of the involved organ system					
3	Skillfully present patient history, physical examination findings in a systematic, coherent and concise manner, which addresses the chief complaint/problem, identifies pertinent positive and negative findings and reach a logical conclusion					
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8	Display honesty, integrity, respect, and compassion for patient & family					

Good points	
Suggestions for improvement	
Sign / Date	

SECTION 1: HISTORY TAKING, EXAMINATION AND PRESENTATION OF A CASE

4 th Year General Medicine: Mini-Cex 3						
Patient Name:		Diagnosis:			Date:	
COMPETENCIES		LEVEL OF COMPETENCE			Teacher to sign & Date	
		1. Below Expectation 2. Adequate 3. Excellent				
HISTORY / EXAM / MANAGEMENT PLAN		Below Expectation	Adequate	Excellent	Sign	Date
1	Obtain comprehensive history after introduction and informed consent, asking relevant questions in order to reach a history based differential diagnosis.					
2	Perform complete physical examination, with detailed examination of the involved organ system					
3	Skillfully present patient history, physical examination findings in a systematic, coherent and concise manner, which addresses the chief complaint/problem, identifies pertinent positive and negative findings and reach a logical conclusion					
4	Arrange a focused list of differential diagnosis					
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7	Respect the cultural and ethnic diversity of their patient's beliefs					
8	Display honesty, integrity, respect, and compassion for patient & family					

Good points	
Suggestions for improvement	
Sign / Date	

SECTION 1: HISTORY TAKING, EXAMINATION AND PRESENTATION OF A CASE

4 th Year General Medicine: Mini-Cex 4						
Patient Name:		Diagnosis:			Date:	
COMPETENCIES		LEVEL OF COMPETENCE			Teacher to sign & Date	
		1. Below Expectation 2. Adequate 3. Excellent				
HISTORY / EXAM / MANAGEMENT PLAN		Below Expectation	Adequate	Excellent	Sign	Date
1	Obtain comprehensive history after introduction and informed consent, asking relevant questions in order to reach a history based differential diagnosis.					
2	Perform complete physical examination, with detailed examination of the involved organ system					
3	Skillfully present patient history, physical examination findings in a systematic, coherent and concise manner, which addresses the chief complaint/problem, identifies pertinent positive and negative findings and reach a logical conclusion					
4	Arrange a focused list of differential diagnosis					
5	Prepare a diagnostic plan, selecting investigations appropriate for the patient					
6	Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis					
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SECTION 2: PROCEDURAL SKILLS MEDICINE

LEVEL OF COMPETENCE

Each competency has an expected level of competence to be achieved. The level of competence ranges from observation (1) to independent practice (5). The following list specifies what is meant by each level

Level 1	Observes	Observes the clinical activity performed by a colleague / senior
Level 2	Assists	Assists a colleague / senior perform the clinical activity
Level 3	Direct supervision	Performs the entire activity under direct supervision of a senior
Level 4	Indirect supervision	Performs the entire activity with indirect supervision of a senior colleague
Level 5	independent	Performs the entire activity without need for supervision

SECTION 2: PROCEDURAL SKILLS MEDICINE

DIRECT OBSERVATION OF PROCEDURAL SKILLS (DOPS)								
COMPETENCIES		EXPECTED LEVEL OF COMPETENCE					CERTIFICATION	
		1	2	3	4	5	Sign	Date
GENERAL								
	IV/IM/SC injection							
	Oxygen therapy							
CARDIOLOGY								
	ECG Recording							
	Echocardiography							
	Exercise tolerance test							
	Defibrillation							
	Cardiac pacemaker							
	Central venous line							
	Cardiopulmonary Resuscitation							
DERMATOLOGY								
	Punch biopsy (skin)							
ENDOCRINOLOGY								
	Blood glucose measurement by glucometer							
	Fundoscopy							
GASTROENTEROLOGY								
	NG tube passing							
	Ascetic fluid aspiration							
	Upper GI endoscopy							
	Lower GI endoscopy							
	Rectal enema							
HEMATOLOGY								
	IV cannulation							
	Venous blood sampling							
	Bone marrow aspiration / trephine biopsy							
HEPATOLOGY								

	Ascetic Tap							
INFECTIOUS DISEASES								
	Lumbar puncture							
	Blood cultures collection							
	Throat swab							
NEPHROLOGY								
	Urethral Catheterization							
	Renal biopsy							
	Double lumen catheter placement (subclavian / jugular / femoral)							
	Hemodialysis							
NEUROLOGY								
	Fundoscopy							
	Electro-encephalogram							
PSYCHIATRY								
	Electroconvulsive therapy							
PULMONOLOGY								
	Nebulization							
	Pulmonary function tests							
	Pleural fluid aspiration							
	Pleural biopsy							
	Chest intubation							
	Oropharyngeal / nasopharyngeal airway insertion							
	Endotracheal intubation							
	Artificial respiration / ventilation							
	Arterial blood gases							
	Bronchoscopy							
	Chest X-ray reading							
RHEUMATOLOGY								
	Joint X-ray reading							
	Synovial fluid aspiration							
	Intra-articular injection							