



4th YEAR LOG BOOK

ENT (Ear, Nose, Throat) & Head and Neck Surgery



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.

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 |

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

| Cases | Signature |
|---|------------------|
| Oral cavity, Pharynx, Larynx (Laryngology) & Head and Neck area | |
| Rhinology (Nose/ Paranasal Sinuses & Nasopharynx) | |
| Otology (Ear section) | |

4th Year ENT: Mini-Cex 1

| Patient Name: | | Diagnosis: | | | Date: | |
|----------------------------------|---|---|----------|-----------|------------------------|------|
| COMPETENCIES | | EXPECTED 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 | Design a treatment plan taking into consideration the risk vs benefit of treatment options and the resources available | | | | | |
| 7 | Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis | | | | | |
| 8 | Respect the cultural and ethnic diversity of their patient's beliefs | | | | | |
| 9 | Display honesty, integrity, respect, and compassion for patient & family | | | | | |

| | |
|-----------------------------|--|
| Good points | |
| Suggestions for improvement | |
| Sign / Date | |

4th Year ENT: 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 | | | | | |
| 4 | Arrange a focused list of differential diagnosis | | | | | |
| 5 | Prepare a diagnostic plan, selecting investigations appropriate for the patient | | | | | |
| 6 | Design a treatment plan taking into consideration the risk vs benefit of treatment options and the resources available | | | | | |
| 7 | Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis | | | | | |
| 8 | Respect the cultural and ethnic diversity of their patient's beliefs | | | | | |
| 9 | Display honesty, integrity, respect, and compassion for patient & family | | | | | |

| | |
|------------------------------------|--|
| Good points | |
| Suggestions for improvement | |
| Sign / Date | |

4th Year ENT: Mini-Cex 3

| | | | | | | |
|---|---|--|----------|-----------|-----------------------------------|-------------|
| 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 | | | | | |
| 4 | Arrange a focused list of differential diagnosis | | | | | |
| 5 | Prepare a diagnostic plan, selecting investigations appropriate for the patient | | | | | |
| 6 | Design a treatment plan taking into consideration the risk vs benefit of treatment options and the resources available | | | | | |
| 7 | Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis | | | | | |
| 8 | Respect the cultural and ethnic diversity of their patient's beliefs | | | | | |
| 9 | Display honesty, integrity, respect, and compassion for patient & family | | | | | |

| | |
|------------------------------------|--|
| Good points | |
| Suggestions for improvement | |
| Sign / Date | |

Section 2: DIRECT OBSERVATION OF PROCEDURAL SKILLS (DOPS)

| COMPETENCIES | | EXPECTED LEVEL OF COMPETENCE | | | Teacher to sign & date | |
|-------------------------------------|---|------------------------------|-------------|--------------|------------------------|------|
| | | 1. Below Expectation | 2. Adequate | 3. Excellent | | |
| | | Below Expectation | Adequate | Excellent | Sign | Date |
| GENERAL | | | | | | |
| | Filling of X-ray/Laboratory form | | | | | |
| | Venous blood sampling | | | | | |
| | I/M, I/V & S/C Injection | | | | | |
| Oral Cavity /Laryngology | | | | | | |
| | Throat swab | | | | | |
| | Air way insertion (Oropharyngeal) | | | | | |
| | Endotracheal tube insertion | | | | | |
| | Tracheostomy tube Insertion | | | | | |
| Rhinology (Nose) | | | | | | |
| | Nasal Packing | | | | | |
| | NG tube insertion | | | | | |
| Otology (Ear) | | | | | | |
| | Otoscopy | | | | | |
| | Tuning fork tests | | | | | |
| | To operate Audiometer /Tympanometer | | | | | |
| | Ear suctioning for wax | | | | | |
| ENT X-ray reading | | | | | | |
| Operation theater procedures | | | | | | |
| | How to put on gown & gloves | | | | | |
| | Scrubbing technique | | | | | |
| | Principles of sterilization | | | | | |
| | Scrubbing & toweling of the patient | | | | | |
| | Various instruments used in ENT surgeries | | | | | |
| | Surgical sutures | | | | | |
| | Preparation of biopsy bottle & filling of biopsy form | | | | | |
| | Incision /drainage of abscess | | | | | |
| | Dressings | | | | | |

