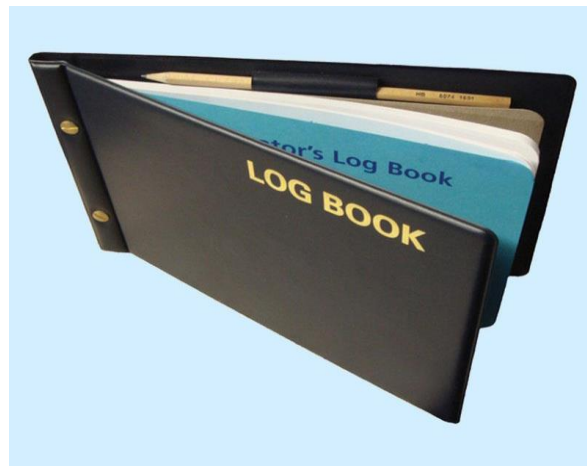# Rawalpindi Medical University

Log Book

Diploma in Child Health

2021

Preface

The horizons of Medical Education are widening & there has been a steady rise of global interest in Post Graduate Medical Education, an increased awareness of the necessity for experience in education skills for all healthcare professionals and the need for some formal recognition of postgraduate training in Internal Medicine.

We are seeing a rise in the uptake of places on postgraduate courses in medical education, more frequent issues of medical education journals and the further development of e-journals and other new online resources. There is therefore a need to provide active support in Post Graduate Medical Education for a larger, national group of colleagues in all specialties and at all stages of their personal professional development. If we were to formulate a statement of intent to explain the purpose of this log book, we might simply say that our aim is to help clinical colleagues to teach and to help students to learn in a better and advanced way. This book is a state of the art log book with representation of all activities of the Diploma in Child Health program at RMU.A summary of the curriculum is incorporated in the logbook for convenience of supervisors and residents. Diploma in Child Health is based on six Core Competencies of ACGME (**Accreditation Council for Graduate Medical Education**) including

Patient Care, Medical Knowledge, System Based Practice, Practice Based Learning, Professionalism, Interpersonal and Communication Skills. A perfect monitoring system of a training program including monitoring of teaching and learning strategies, assessment and Research Activities cannot be denied so we at RMU have incorporated evaluation by **Quality Assurance Cell** and its comments in the logbook in addition to evaluation by **University Training Monitoring Cell (URTMC)**. Reflection of the supervisor in each and every section of the logbook has been made sure to ensure transparency in the training program. The mission of Rawalpindi Medical University is to improve the health of the communities and we serve through education, biomedical research and health care. As an integral part of this mission, importance of research culture and establishment of a comprehensive research structure and research curriculum for the residents has been formulated and a separate journal for research publications of residents is available.

<div style="display:flex; justify-content:space-between;">

Prof. Rai Muhammad Asghar
MBBS, MCPS, FCPS
Dean of Pediatrics
Rawalpindi Medical University
AGAF)

Prof. Muhammad Umar
(Sitara-e-Imtiaz)
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FRCP (Lon), FRCP (Glasg),
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Rawalpindi Medical University
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</div>

Enrolment Details

Program of Admission _____

Session _____

Registration / Training Number _____

Name of Candidate _____

Father's Name _____

Date of Birth _____ / _____ / _____

CNIC No.   _____

Present Address _____

_____

Permanent Address _____

_____

E-mail Address _____

Cell Phone _____

Date of Start of Training _____

Date of Completion of Training _____

Name of Supervisor _____

Designation of Supervisor _____

Qualification of Supervisor _____

Title of department / Unit _____
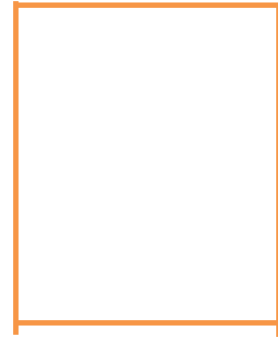
Name of Training Institute / Hospital

Sr. No	Discipline	Department/Hospital
1.	General Pediatrics	
2.	Emergency Pediatrics	
3.	Pediatric Intensive Care Unit (PICU)	
4.	Neonatal Intensive Care Unit	
5.	Pediatric Cardiology	
6.	Endocrinology	
7.	Pediatric Neurology	
8.	Infectious diseases	
9.	Pediatric Nephrology	
10.	Pulmonary and Critical Care Pediatrics	
11.	Gastroenterology & Diarrheal diseases	
12.	Dermatology	
13.	Pediatric Psychiatry	
14.	Radiology	
15.	Pediatric Hematology and Pediatric Oncology	
16.	Pediatric Rheumatology	
17.	Growth, Development and Nutrition	
18.	Ambulatory Pediatrics	
19.	Pediatric surgery	

Introduction

It is a structured book in which certain types of educational activities and patient related information is recorded, usually by hand. Logbooks are used all over the world from undergraduate to postgraduate training, in human, veterinary and dental medicine, nursing schools and pharmacy, either in paper or electronic format.

Logbooks provide a clear setting of learning objectives and give trainees and clinical teachers a quick overview of the requirements of training and an idea of the learning progress. Logbooks are especially useful if different sites are involved in the training to set a (minimum) standard of training. Logbooks assist supervisors and trainees to see at one glance which learning objectives have not yet been accomplished and to set a learning plan. The analysis of logbooks can reveal weak points of training and can evaluate whether trainees have fulfilled the minimum requirements of training.

Logbooks facilitate communication between the trainee and clinical teacher. Logbooks help to structure and standardize learning in clinical settings. In contrast to portfolios, which focus on students' documentation and self-reflection of their learning activities, logbooks set clear learning objectives and help to structure the learning process in clinical settings and to ease communication between trainee and clinical teacher. To implement logbooks in clinical training successfully, logbooks have to be an integrated part of the curriculum and the daily routine on the ward. Continuous measures of quality management are necessary.

Reference

Brauns KS, Narciss E, Schneyinck C, Böhme K, Brüstle P, Holzmann UM, etal. Twelve tips for successfully implementing logbooks in clinical training. Med Teach. 2016 Jun 2; 38(6): 564–569.

Index of Log Book

1. Morning report presentation/ Case presentation
2. Topic presentation/seminar
3. Didactic lectures/interactive lectures
4. Journal club
5. Long Case
6. Short Case
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10. Opd and clinics
11. Procedures (observed, assisted, performed under supervision & performed independently)
12. Multidisciplinary meetings
13. Clinicopathological conference
14. Morbidity/mortality meetings
15. Hands on training/workshops
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19. Clinical assessment record
20. Evaluation record
21. Leave record
22. Record sheet of attendance/counselling session/documentation quality
23. Any other important and relevant information/details

Minimum Log Book Entries Per Month in General

(This minimum number is being provided for uniformity of the training and convenience for monitoring of the resident's performance by Quality Assurance Cell & University Research Training & Monitoring Cell of RMU but resident is encouraged to show performance above this minimum required number)

Serial Number	Entry	Minimum Cases/Time Duration
1.	1. Case presentation, 2. Topic presentation, 3. Journal club, 4. Mortality discussion	15/ month (at least 1/month each)
2.	Clinic-Pathological Conference	1/month
3.	Procedure documentation	6-10/ month
4.	Indoor patient documentation	15/ month
5.	Emergency Cases documentation	50/month 25/month in 2 month rotation 12/month in 1 month rotation
6.	OPD Cases documentation	

Mission Statement

The mission of diploma in child health program of Rawalpindi Medical University is:

1. To provide exemplary medical care, treating all patients who come before us with uncompromising dedication and skill.
2. To set and pursue the highest goals for ourselves as we learn the science, craft, and art of Pediatrics.
3. To passionately teach our junior colleagues and students as we have been taught by those who preceded us.
4. To treat our colleagues and hospital staff with kindness, respect, generosity of spirit, and patience.
5. To foster the excellence and well-being of our residency program by generously offering our time, talent, and energy on its behalf.
6. To support and contribute to the research mission of our medical center, nation, and the world by pursuing new knowledge, whether at the bench or bedside.
7. To promote the translation of the latest scientific knowledge to the bedside to improve our understanding of disease pathogenesis and ensure that all patients receive the most scientifically appropriate and up to date care.
8. To promote responsible stewardship of medical resources by wisely selecting diagnostic tests and Treatments, recognizing that our individual decisions impact not just our own patients, but patients everywhere.
9. To promote social justice by advocating for equitable health care, without regard to race, gender, sexual orientation, social status, or ability to pay.
10. To extend our talents outside the walls of our hospitals and clinics, to promote the health and well-being of communities, locally, nationally, and internationally.
11. To serve as proud ambassadors for the mission of the Rawalpindi Medical University MD Paediatric Residency Program for the remainder of our professional lives.

Clinical Competencies For 1st and 2nd year Diploma in Child Health Medicine
Clinical Competencies/Skill/Procedure

The clinical competencies, a specialist must have, are varied and complex. A complete list of the skills necessary for trainees and trainers is given below. The level of competence to be achieved each year is specified according to the key, as follows:

1. Observer status
2. Assistant status
3. Performed under supervision
4. Performed under indirect supervision
5. Performed independently

Note: Levels 4 and 5 for practical purposes are almost synonymous

PROCEDURES	First Year								Total Cases 1st Year
	3 Months		6 Months		9 Months		12 Months		
	Level	Cases	Level	Cases	Level	Cases	Level	Cases	
Rotations to be incorporated as and when available with the consent of respected supervisor									
Pleural Aspiration	1,2	6	3	6	4	6	4	7	25
Peritoneal Aspiration	1,2	6	3	6	4	6	4	7	25
Lumbar puncture	1	4	2	4	3	4	4	3	15
Nasogastric Intubation	1,2	12	3	12	4	12	4	14	50
Ureteral catheterization	1,2	12	3	12	4	12	4	14	50
Recording and reporting ECG	1	25	2	25	3	25	4	25	100
Proctoscopy	-	-	1	1	1	1	1	1	3
Endotracheal Intubation	1	6	2	6	3	6	3	7	25
Cardio-Pulmonary Resuscitation (CPR)	1,2	4	3	4	3	4	3	3	15
Insertion of CVP lines	1	4	2	4	3	4	3	3	15
Arterial puncture	-	8	-	8	-	8	1	6	30
Urine Examination	3	1	3	1	3	1	3	1	4
Liver biopsy	1	1	2	1	2	1	2	1	4
Pleural biopsy	-	-	1	1	2	1	2	1	3
Joint aspiration	-	-	-	-	1	1	1	-	1
Bone marrow aspiration	-	-	1	1	1	1	1	1	3
Renal biopsy	-	-	-	-	1	1	1	1	2
Hemodialysis	-	-	1	1	1	1	2	1	3
Upper G.I. Endoscopy	-	-	-	-	1	1	1	1	2
Lower G.I. Endoscopy	-	-	-	-	-	-	1	1	1
Bronchoscopy	-	-	-	-	1	1	1	1	2
Ventricle Tap	1	2	1	2	2	2	3	2	8
Exchange transfusion	1	2	1	2	2	2	3	2	8
Intraosseous fluid administration	1	2	1	2	2	2	3	2	8
Saphenous vein cut down	1	2	1	2	2	2	3	2	8
Needle thoracocentesis	1	2	1	2	2	2	3	2	8
Electric cardio version defibrillation	1	2	1	2	2	2	3	2	8
Abdominal Ultrasound	-	-	-	-	1	1	1	1	2
Echocardiography	-	-	-	-	1	1	1	1	2
CT Scan Head	-	-	1	1	1	1	1	1	3
EEG	-	-	-	-	-	-	-	-	-
EMG/NCS	-	-	-	-	-	-	-	-	-
Chest Intubation	-	-	-	-	-	-	-	-	-
Pericardiocentesis	-	-	-	-	-	-	-	-	-

PROCEDURES	Second Year				Total Cases
	18 Months		24 Months		
	Level	Cases	Level	Cases	12 Months
Rotations to be incorporated as and when available with the consent of respected supervisor					
Pleural Aspiration	4	12	4	13	25
Peritoneal Aspiration	4	1	4	1	25
Lumbar puncture	4	1	4	1	15
Nasogastric Intubation	4	1	4	1	50
Uretheral catheterization	4	1	4	1	50
Recording and reporting ECG	4	1	4	1	100
Proctoscopy	1	1	1	1	3
Endotracheal Intubation	3	1	3	1	25
Cardio-Pulmonary Resuscitation (CPR)	3	1	3	1	15
Insertion of CVP lines	3	1	3	1	15
Arterial puncture	2	1	2	1	30
Urine Examination	4	1	4	1	2
Liver biopsy	2	1	2	1	2
Pleural biopsy	2	1	2	1	2
Joint aspiration	1	-	1	1	1
Bone marrow aspiration	1	1	1	1	2
Renal biopsy	1	-	1	1	1
Haemodialysis	2	1	2	1	2
Upper G.I. Endoscopy	1	1	1	-	1
Lower G.I. Endoscopy	1	1	1	1	2
Bronchoscopy	1	1	1	-	1
Abdominal Ultrasound	1	1	1	1	2
Echocardiography	1	1	1	1	2
CT Scan Head	1	1	1	1	2
EEG	1	1	1	1	2
EMG/NCS	1	1	1	1	2
Chest Intubation	1	1	1	1	2
Pericardiocentesis	1	1	1	1	2
Ventricle Tap	4	4	4	4	8
Exchange transfusion	4	5	4	5	10
Intraosseous fluid administration	4	5	4	5	10
Saphenous vien cut down	4	5	4	5	10
Needle thoracoceltsis	4	2	4	2	4
Electric cardio version defibrillation	4	2	4	2	4

Section-1

Morning Report Presentation/ Case Presentation Seen in Last Emergency or Indoor

Sr #	Date	Reg # of Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Reg # of Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Reg# of Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Reg # of Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-2

Topic Presentation/Seminar

Sr#	Date	Name of the Topic & Brief Details of the Aspects Covered	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Name of the Topic & Brief Details of the Aspects Covered	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Name of the Topic & Brief Details of the Aspects Covered	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Name of the Topic & Brief details of the Aspects Covered	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-3

Journal Club

Sr #	Date	Title of the Article	Name of Journal	Date of Publication	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Title of the Article	Name of Journal	Date of Publication	Supervisor's Remarks	S Signature (Name/Stamp)

Section-4

Problem Case Discussion

Sr #	Date	Reg.# of the Patient Discussed	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Reg.# of the Patient Discussed	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Reg.# of the patient Discussed	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-5

Didactic Lectures/Interactive Lectures

Sr #	Date	Topic & brief Description	Name of the Teacher	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Topic & brief Description	Name of the Teacher	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Topic & brief Description	Name of the Teacher	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-6

Emergency Cases (Repetition of Cases Should Be Avoided)
(Estimated 50 Cases to be documented/Month)
(25/Month in Case of 2 months rotation, 12/month in Case of 1 month rotation)

Sr#	Date	Reg # of the Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Procedures Performed	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Reg # of the Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Procedures Performed	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Reg # of the Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Procedures Performed	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-7

Indoor Patients (Repetition of Cases Should Be Avoided)
(15/month)

Sr#	Date	Reg # of the Patient	Diagnosis	Management	Procedures Performed	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Reg # of the Patient	Diagnosis	Management	Procedures Performed	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-8

Opd And Clinics (Repetition of Cases Should Be Avoided)

Sr#	Date	Reg # of the Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Reg # of the Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Reg # of the Patient	Brief Description//History, Diagnosis, Treatment & Outcome if any	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Reg # of the Patient	Diagnosis	Management	Procedures Performed	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-9

Procedures

Observed (o)
Assisted (a)
Performed under supervision (pus)
Performed independently (pi)

Sr.#	Date	Reg no. Of Patient	Name of Procedure	(o)/(a)/ (pus)/(pi)	Detail of Procedure	Place of Procedure	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr.#	S	Reg no. Of Patient	Name of Procedure	(o)/(a)/(pus)/ (pi)	Detail of Procedure	Place of Procedure	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

| Sr.# | S | Reg no. Of Patient | Name of Procedure | (o)/(a)/(pus)/ (pi) | Detail of Procedure | Place of Procedure | Supervisor's Remarks | Supervisor's Signature (Name/Stamp) |

Sr.#	Date	Reg no. Of Patient	Name of Procedure	(o)/(a)/(pus)/ (pi)	Detail of Procedure	Place of Procedure	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-10

Multi Diciplinary Meetings

Sr#	Date	Brief Description	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Brief Description	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Brief Description	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr#	Date	Brief Description	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-11
Clinicopathological Conference (CPC)

(1/month)

Sr#	Date	Brief Description of the Topic/ Case Discussed	Supervisor's Signature (Name/Stamp)

Sr#	Date	Brief Description of the Topic/ Case Discussed	Supervisor's Signature (Name/Stamp)

Section-12
Morbidity/Mortality Meetings
At least 1 Morbidity/Mortality Meeting per month)

Sr #	Date	Reg. # of the Patient Discussed	Brief Description of the Case	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Reg. # of the Patient Discussed	Brief Description of the Case	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Reg. # of the Patient Discussed	Brief Description of the Case	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)
Sr #	Date	Reg. # of the Patient Discussed	Brief Description of the Case	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-13

Hands on Training/Workshops

Sr #	Date	Title	Venue	Facilitator	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Title	Venue	Facilitator	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Title	Venue	Facilitator	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-14
Publications

Sr #	Name of Publication	Type of publication Original article /editorial/ Case report etc.	Name of Journal	Date of Publication	Page No.	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Name of Publication	Type of publication Original article /editorial/ Case report etc.	Name of Journal	Date of Publication	Page No.	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Name of Publication	Type of publication Original article /editorial/ Case report etc.	Name of Journal	Date of Publication	Page No.	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-15

Major Research Project During DC Training/Any Other Major Research Project

Sr #	Research topic	Place of research	Name and Designation of Supervisor	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Research topic	Place of research	Name and Designation of Supervisor	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Research topic	Place of research	Name and Designation of Supervisor	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-16
Written Assessment Record

Sr #	Topic of written Test/examination	Type of the test MCQS or SEQS or both	Total marks	Marks Obtained	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Topic of written Test/examination	Type of the test Mcqs or seqs or both	Total marks	Marks Obtained	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Section-17

Clinical Assessment Record

Sr #	Date	Topic of Clinical test/ Examination	Type of the test & venue (Ospe, minicex, chart Stimulated recall, dops, Simulated patient, skill lab E.t.c)	Total Marks	Marks Obtained	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Topic of Clinical test/ Examination	Type of the test& venue (ospe, minicex, chart Stimulated recall, dops, Simulated patient, skill lab E.t.c)	Total Marks	Marks Obtained	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)

Sr #	Date	Topic of Clinical test/ Examination	Type of the test& venue (ospe, minicex, chart Stimulated recall, dops, Simulated patient, skill lab E.t.c)	Total Marks	Marks Obtained	Supervisor's Remarks	Supervisor's Signature (Name/Stamp)