

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

رَبِّ اشْرَحْ لِي صَدْرِي وَيَسِّرْ لِي أَمْرِي

وَاحْلُلْ عُقْدَةً مِّنْ لِّسَانِي يَفْقَهُوا قَوْلِي

**O my Lord! Expand my heart for me, and make my affair easy to me, and loose the knot from my tongue, (That) they may understand my word;
(Surah Taha 20:25-28)**

Motto



To impart evidence based research oriented medical education

To provide best possible patient care

To inculcate the values of mutual respect and ethical practice of medicine

Contributors



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Preamble

The standards of quality of Higher Education in Pakistan need to be improved significantly to achieve the goals of competitiveness with international standards and to create the foundations of a Knowledge Economy and Compatibility.

Vision of Quality in Medical Higher Education:

- The vision of quality approach in medical higher education is the transformation of existing input focused traditional education model in to students focused Outcome Based Education (OBE) model.
- OBE favors making students demonstrate that they know and are able to do whatever the required outcomes are.
- It emphasizes setting clear standards for observable, measurable outcomes through which students' performance can be empirically measured.
- The purpose of the creation of Quality Enhancement Cell (QEC) at RMU is to institutionalize the quality culture in all disciplines of the university through a systematic approach.

Basic Mandates of QEC

(as per HEC Requirements)

- To Facilitate in conducting self-assessment of all programs
- To develop/ensure implementation of procedures for various aspects e.g.:
 - HEC MS/PhD review
 - Feedback from stakeholders
 - Quality assurance of Master's, M Phil and PhD programs
 - Course review
 - Institutional assessment (Institutional Performance Evaluation) covering all academic and nonacademic aspects of HEI

Rawalpindi Medical University (RMU) seeks excellence in providing qualitative programs through modern tools in Medical Education, Scientific Research & Health Professional Services. It will be not wrong if I say that RMU is among the first Pakistani Medical Universities, which focused on the development and application of quality standards in all academic and administrative operations and services to achieve its mission and objectives. Untiring efforts of Prof. Muhammad Umar and Prof. Bushra Khaar are commendable in this regard. Both of them have put a lot of efforts for the improvement of undergraduate and postgraduate training.

I am confident that Quality Enhancement Cell at Rawalpindi Medical University will be able to develop quality culture which is based around an Internal System of Continuous Quality which seeks to establish quality Higher Education through a holistic approach on a day-to-day basis. Our passing out residents will prove them to be the best healthcare professionals all over the world. I acknowledge all my seniors, colleagues and residents on the achievement conquered so far and request them to work with promise and full dedication for continuation of this journey towards success.

Dr. Rabbia Khalid Latif

MBBS, M.Phil. (Haem)

7th May, 2022

Introduction

On up-gradation of Rawalpindi Medical College to Rawalpindi Medical University on 5th May, 2017, Residency Program of Rawalpindi Medical University was launched to offer rigorous and vibrant postgraduate degree programs. Our University Residency Program entails MS, MD, M.Phil., PhD, Certificate and Diploma courses. These residency programs are meant to get our residents well equipped with knowledge and skills deemed inevitable to compete with international doctors and to improve the healthcare of the nation.

Rawalpindi Medical University provide excellent opportunities to its postgraduate residents and worthy faculty for scholarships, linkages and collaborations with the renowned universities of the world ranking high in research projects. The faculty members are actively engaged in several training and research programs with universities/institutions/centers in the technologically advanced countries.

The University provides excellent academic facilities through its fully equipped laboratories, library, museums, information technology facility, video conferencing, besides good logistic facilities at departments, hostels and the campus in general.

We hope that joining the Rawalpindi Medical University & enrollment in University Residency Program will pave the way of upcoming generation towards new horizon of excellence and prosperity.

SECTION-I

Quality Enhancement Cell

Quality Enhancement Cell (QEC)

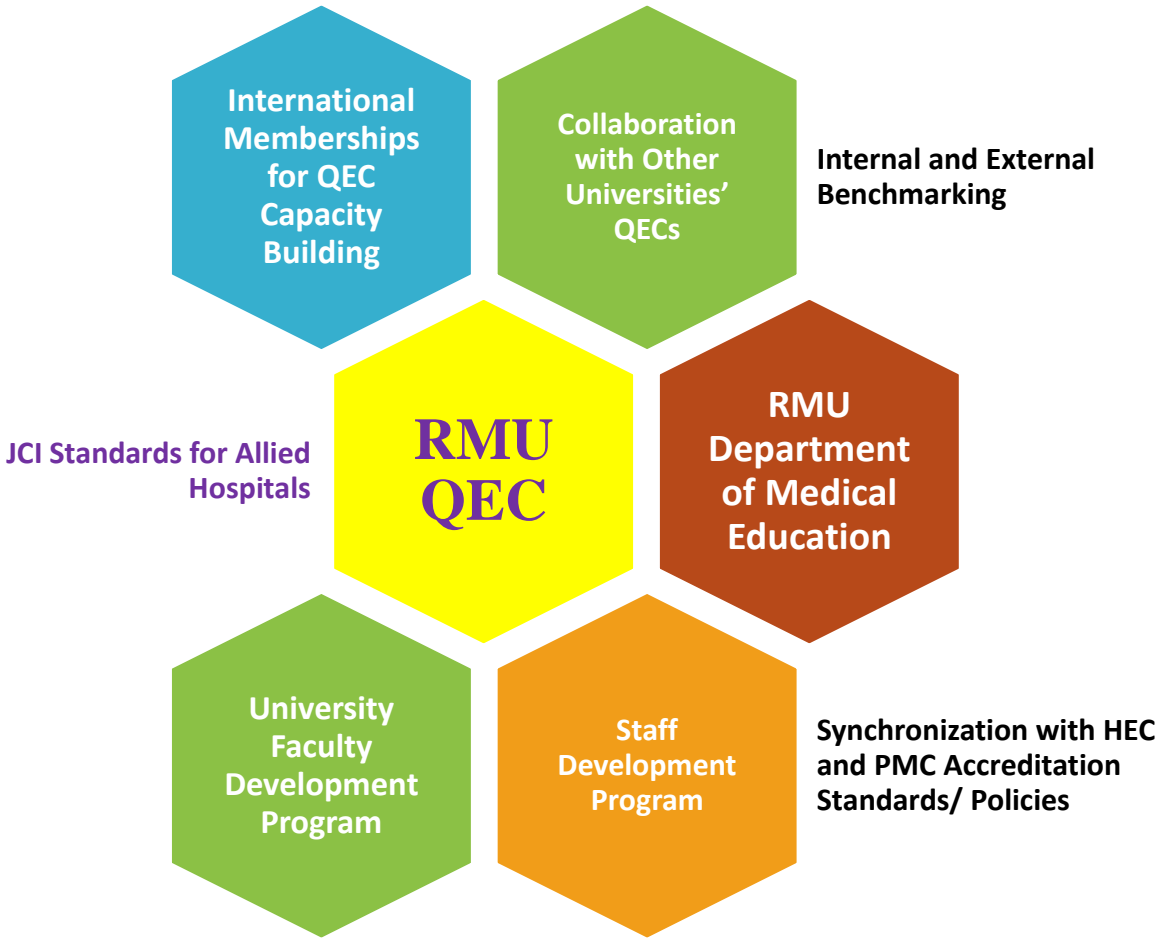
Quality Enhancement Cells serve as focal points for quality assurance in the institutions in order to improve and uphold the quality of higher education. Capacity building of academia in quality assurance is one of the key functions of Quality Assurance Agency (QAA) and subsequently of QEC. Thus, QAA and QECs of the Universities will work hand in hand to move in this direction of capacity building arrangements that include awareness campaigns, development of quality assurance policy instruments, training to learn the processes and procedures of quality assurance in higher education institutions and development of Manual to equip the practitioners of quality assurance.

The QAA and QECs at higher education institutions will undertake their responsibilities and functions based on the best principles of quality assurance namely openness, transparency, fairness, equity and accountability as practiced in the rest of the world.

On up gradation of Rawalpindi Medical College to Rawalpindi Medical University on 5th May, 2017, one of the first goals that were set and achieved, was the establishment of Quality enhancement cell (QEC) which acts as the backbone of all the academic developments in a university by providing constant monitoring and quality control of the teaching and learning activities. It was established in January, 2018 by the executive orders (office orders attached in annexure A). Function of QEC is to maintain the standards and quality of:

- Training programs
- Examinations
- Inductions
- All academic activities

Vision Of QEC In Rawalpindi Medical University for Promoting Quality Culture



A separate and dedicated Quality Enhancement Secretariat has been established so far. It is supervised by dedicated Director Dr. Farrukh Idrees, Dr Shazia Zeb is the Deputy Director QEC and Dr. Rabbia Khalid is Assistant Director and Miss. Shafia Amber who is working as computer operator. We have an internal quality team and an external quality team, which is working in close collaboration to maintain the standards of medical education.



QUALITY ENHANCEMENT CELL

Functions Of QEC

QEC is intended to have excellent quality and standards of:

- Cause evaluation of performance of the university.
- Advise institution in ensuring a proper balance between teaching and research.
- Develop guidelines and facilitate the implementation of a system of evaluation of performance of faculty members and institution.
- Encourage, support and facilitate training programs, workshops and symposia.
- Guide university in designing curricula that provides a proper content of basic sciences and social sciences in the curricula of each level and guide and establish minimum standards for good governance and management.
- Student feedback
 - Feedback of program running for undergraduates is collected
- Workshops feedback
 - Feedback is collected at the end of each workshop.
- Feedback of annual lectures of university residency program trainees
 - Feedback is collected at the end of every lecture.
- CPC feedback
 - Feedback is collected at the end of each CPC.
- Data of all the feedback is then entered and analyzed in IBM SPSS version 22
- Then report is compiled and presented to the director DME and then worthy vice chancellor.
- Monitoring of admissions, inductions and examinations.

QEC Tool Box

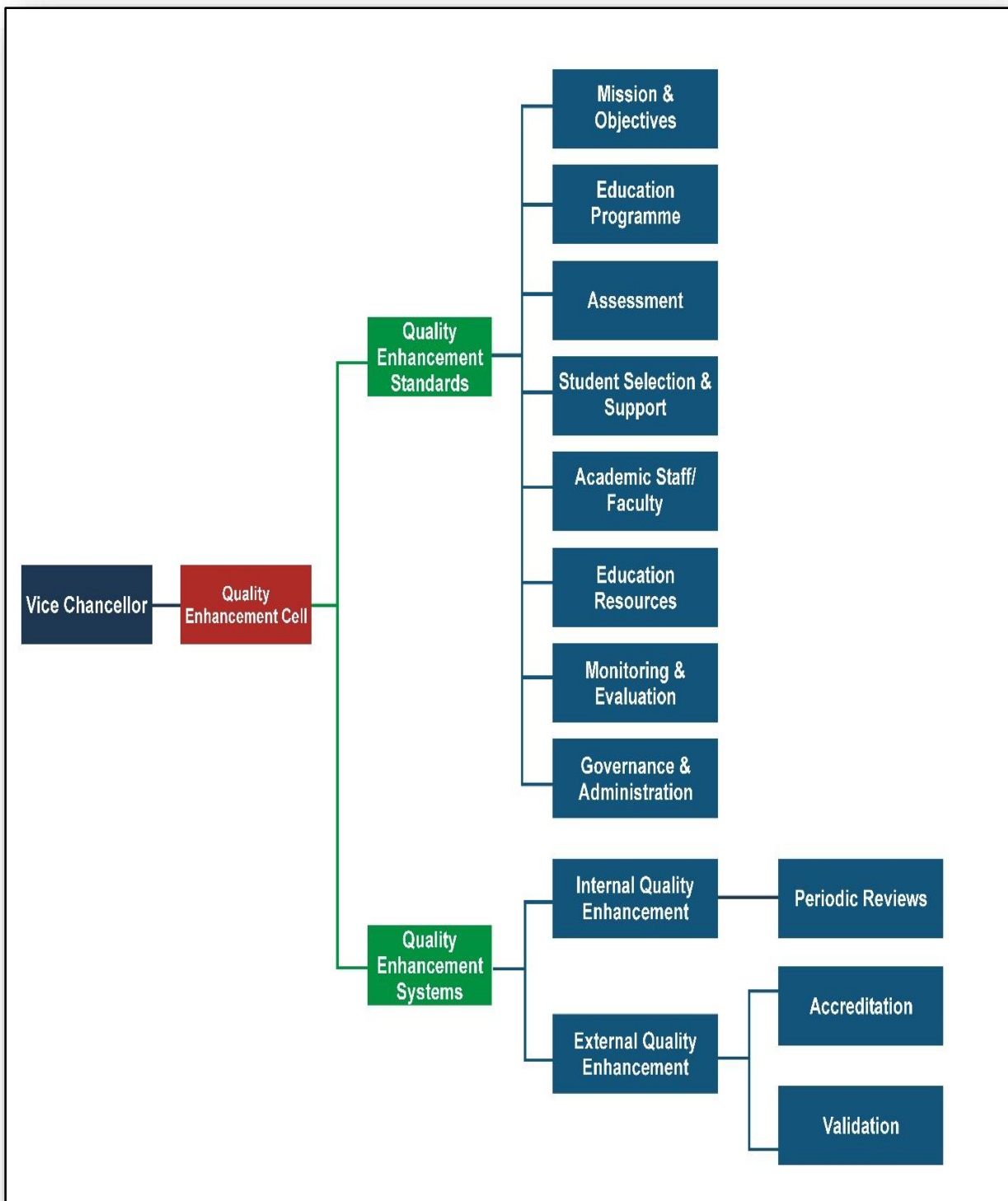
The Higher Education Commission is making concerted efforts to improve the quality of higher education and to move university education to meet international standards in the provision of high-quality teaching, learning, research and service. Focused and precise approach is being developed for the best results and for consistency in the process of the Quality Assurance & Enhancement in higher education in the country. It reflects an effort to sensitize higher education institutions to the changes taking place internationally and bring higher education in Pakistan into complete harmony with the shifting paradigms at leading institutions around the world. Thus, various long and short run initiatives of the Higher Education Commission are aimed particularly at improvement of the quality of knowledge being imparted at the universities and other higher education institutions.

QEC uses has designed many survey forms to keep a check on the learning and teaching process. These proforma have been approved from the academic council of the university. Tools include

- HEC guidelines for university
- Performance evaluation report for faculty
- 360° evaluation proforma for university residency program trainees
- Performance evaluation report for post graduate trainees

*HEC guidelines are available

Quality Assurance Modal of RMU



International Collaborations

As the world grows smaller, the most important medical and health advances of the 21st century are likely to transcend borders, language, culture and politics.

Internationalization of medical education is understood as an educational concept, a framework and a means to achieve an international educational goal in medical education – not a goal in and of itself. International medical competencies achieved via internationalization of medical education can ultimately improve Global Health. Internationalization of medical education is important in ensuring that future physicians practice medicine within a global frame of reference. Furthermore, it can provide the foundation and framework for international leadership and collaboration and provide physicians with skills in cultural competencies, ultimately improving healthcare worldwide.

Goals and outcomes associated with internationalization of medical education include, but are not limited to, improvement of sensitivity to social, intercultural and ethical differences, knowledge and appreciation of differences between healthcare delivery systems, understanding of global Public Health challenges, in-depth understanding of global biomedical research and international networking, leadership and collaboration competencies, resulting in physicians and medical leaders who are subsequently able to practice medicine as globally minded and socially accountable medical practitioners.

To date, international education in medical schools is fragmented, competencies are not agreed upon and internationalization programs vary in the absence of official guidelines or agreed upon formats.

In order to bring awareness of global aspects to medicine, internationalization of medical education needs to find its place in standard medical school curricula and has to be established as an investigational area of educational research.

Internationalization elements should be an essential part of medical education and not an optional extracurricular part of medical school. And internationalization elements should not be considered as being in competition with other subject matters

Medical school curricula designed and delivered in ways that are informed by research into curriculum design, teaching, learning and internationalization are urgently required.

Rawalpindi Medical University is well aware of the importance of the internationalization of the medical education as universities specially medical universities can play vital role to promote and protect the health of students and staff, to create health-conducive working, learning and living environments, to protect the environment and promote sustainability, to promote health promotion in teaching and research and to promote the health of the community and to be a resource for the health of the community.

Failure to incorporate internationalization of medical education into medical education will limit the full potential of developing all medical students' understanding of the global social, cultural and ethical issues associated with medical practice and research – impeding what higher medical education can contribute to shaping a global medical world and improving Global Health.

Aim of Rawalpindi Medical University is to develop health promoting university projects that encourage all these aspects. There is considerable enthusiasm for and interest in the concept of the health promotion. Demand for guidance is also growing. This is a working document that explores,



visualizes and develops the health promoting potential of university using the settings-based approach to health promotion.

There is absolutely no survival in isolation or in a bubble. Our university understands the importance of the international linkages as they are very essential now a day for existence.

The COVID-19 pandemic has demonstrated the need for efficient international collaboration in biomedical research, education and patient care. Such global health emergencies require efficiency in international communication, expert, culturally competent healthcare leadership and practice (locally, nationally and internationally), rapid international public health action and collaborative international biotechnology and medical science research.

COVID-19 has caused unprecedented disruption to the medical education process and to healthcare systems worldwide.

Quality Enhancement Cell, RMU (QEC) is trying to make tireless efforts in making connections with another world. QEC feels immense pleasure to announce that Rawalpindi Medical University has gained the membership of following *international* quality assurance agencies:

1. Tallories Network (TN):

The Tallories Network of Engaged Universities is a growing global coalition of 417 university presidents, vice-chancellors and rectors in 79 countries who have publicly committed to strengthening the civic roles and social responsibilities of their institutions. It is the largest international network focused particularly on university civic engagement.

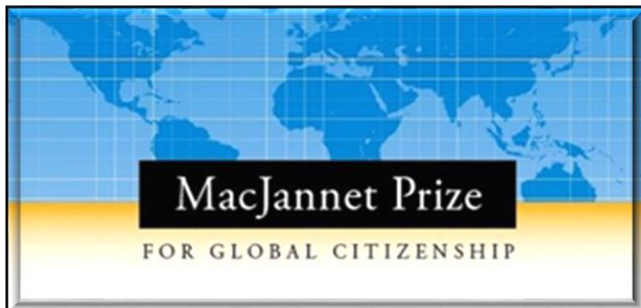
They envision universities around the world as dynamic forces in their communities, incorporating civic engagement into their research and pedagogies — and building relationships through a productive exchange of knowledge, ideas, and practices.

They recognize and celebrate the diversity of ethical approaches to university civic engagement. They fully support engagement in all its forms including community-based research, applied research, service-learning, experiential learning, extension, volunteerism, public service, policymaking, political activism, and social entrepreneurship. They assist the universities to attain sustainable development goals (SDGs).



Benefits for Engaged Members include opportunities to:

- Gain public acknowledgement and visibility as an active contributor to the global university civic engagement movement;
- Participate in bi-annual strategic planning



meetings to explore opportunities for collaboration including fundraising for new programs;

- Apply, without a fee, for the Carnegie Community Engagement Classification International pilot;
- Apply for Network faculty professional development programs, which include financial support for civic engagement activities and public recognition for excellence in engaged

scholarship;

- Apply for Network demonstration grant programs, which involve substantial technical and financial support for innovative university civic engagement programs;
- Apply to participate in global learning exchange programs for students, staff, faculty and administrators;
- Participate in collaborative writing and research projects, which includes international workshops as well as technical and financial support for publishing reports, articles, and books;
- Participate in internationally publicized interviews and webinars;
- Organize and lead plenary and breakout sessions at the Talloires Network Global Leaders Conference;
- Apply for travel, lodging and registration grants for the Talloires Network Global Leaders Conference;

RMU can benefit from this membership through:

- Visibility amongst the international members of the network
- Possibility to join some international civic engagement activity
- Showcasing the civic engagements of RMU Students/Faculty
- Opportunity to compete for MacJannet Prize Award.

MacJannet Prize (<https://talloiresnetwork.tufts.edu/about-the-macjannet-prize/>) has been established by TN to recognize exceptional student community engagement initiatives at member universities and contribute financially to their ongoing public service efforts through following categories of programs:

- [Student volunteer placement programs](#)
- [Institution-managed community outreach](#)
- [Domestic service-learning programs](#)
- [International service-learning programs](#)
- [Student-managed community engagement](#)




National University of
Sciences and Technology
H-12, Islamabad,
Tel: +92-51-9085-6001
No. 0999/45/PCTN/SMME
6 July 2021

To: **Rawalpindi Medical University**

Subject: **Welcome to Pakistan Chapter of the Talloires Network (PCTN)**

1. Pakistan Chapter of the Talloires Network (PCTN) secretariat has received a letter of commitment from your esteemed institution to join PCTN. I, on behalf of Chair PCTN, welcome you to the association of Pakistani universities working to strengthen civic roles and social responsibilities of higher education.
2. Pakistan Chapter of the Talloires Network (PCTN) was formed on 1st July, 2013. PCTN secretariat to be housed at NUST was formed in November 2013.
3. PCTN is a platform for all Pakistani member universities to be able to share their civic engagement activities, and be a source of motivation for each other to promote this great cause. We aim to make community service a necessary part of education and not something that is done sporadically. PCTN secretariat focuses on training and collaboration for civic engagement, giving awards for best community service program, publishing a newsletter, maintaining a website <https://pctn.nust.edu.pk/> and membership expansion.
4. We would also like to acknowledge Rawalpindi Medical University (RMU) commitment to join PCTN and to the cause of civic engagement. PCTN will be in contact with your focal person for anything required. We look forward to working with RMU and getting your input on how to better the civic engagement of universities with communities, both in Pakistan and globally.


Chief Coordinator PCTN
(Dr. Javaid Iqbal)

2. United Nation Academic Impact (UNAI):

RMU has joined over 1400 academic and research institutions from 139 countries who are members of the United Nations Academic Impact (UNAI), a UN platform.

UNAI is a program of the Outreach Division of the United Nations Department of Global Communications. It's an initiative that aligns institutions of higher education with the United Nations in supporting and contributing to the realization of United Nations goals and mandates, including the promotion and protection of human rights, access to education, sustainability and conflict resolution. Since 2010, UNAI has created a vibrant and diverse network of students, academics, scientists, researchers, think tanks, institutions of higher education, continuing education and educational associations. Since its inception some thirty international networks of universities and other institutes of higher education and research have endorsed UNAI and encouraged their members to join, representing a global diversity of regions and a thematic wealth of disciplines.



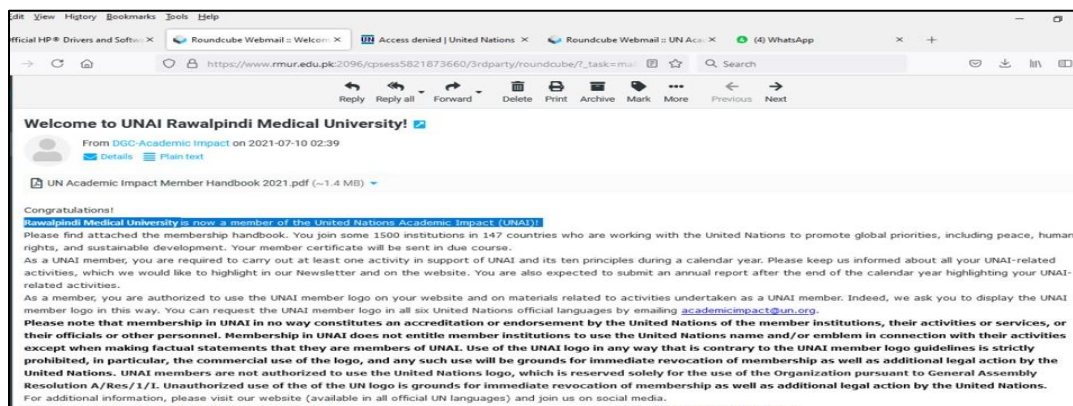
The work of these institutions is vital to achieving the Sustainable Development Goals (SDGs) as they serve as incubators of new ideas,

inventions and solutions to the many global challenges we face. UNAI provides the integral link to these stakeholders to ensure that the international community harnesses the energy and innovation of young people and the research community in service to humanity.

UNAI assists stakeholders in this regard by disseminating information on UN initiatives and activities, providing ideas on how these activities can be applied at the local level on college campuses, in classrooms and in communities, and by providing a platform where university students, academics and researchers can connect and share ideas, research and resources to further the Sustainable Development Goals and other UN mandates.

While joining the UNAI, RMU has expressed its commitment to support four out of the 10 UN SDGs; Capacity-building in higher education system, Commitment to the United Nations Charter Education opportunity for all, Higher education opportunity for every interested individual and Inter-cultural dialogue and understanding -- unlearning intolerance.

Every subject and discipline can have a UN imprint. RMU offers the opportunity to higher education in the field of Medical and Allied Health Sciences to all based on the merit without any discrimination of race, color, gender, creed and religion. RMU also believe in capacity building of the faculty so that they are abreast with the latest development in their fields. Therefore, RMU faculty members are urged to recognize this link and undertake activities that can directly support United Nations mandates and objectives.



Sharing a culture of intellectual social responsibility



academic
impact

Sharing
a Culture
of Intellectual
Social
Responsibility

United Nations Academic Impact

welcomes

Rawalpindi Medical University

*as a member of the United Nations Academic Impact
and endorses its commitment to the following key principles:*

- Commitment to the United Nations Charter
- Human Rights
- Educational opportunity for all
- Higher Education opportunity for every interested individual
- Capacity-building in higher education systems
- Global citizenship
- Peace and conflict resolution
- Addressing poverty
- Sustainability
- The "unlearning" of intolerance

Robert Skinner

Robert Skinner

Chief, United Nations Academic Impact
Department of Global Communications
United Nations

7 September 2021

3. The Arab Network for Quality Assurance in Higher Education:

The Arab Network for Quality Assurance in Higher Education ANQAHE has been established in June, 2007 as a nonprofit nongovernmental organization.

The purpose to establish the Arab network for quality Assurance in higher education is to create a mechanism between the Arab countries to:

- * Exchange information about quality assurance
- * Construct new quality assurance agencies or organizations
- * Develop standards to establish new quality assurance agencies or support the already present one
- * Disseminate good practice in quality assurance
- * Strengthen liaison between quality assurance bodies in the different countries



Mission of the Network:

To ensure and strengthen quality assurance in higher education institutions of the Arab region. To enhance cooperation between similar quality assurance bodies or organizations in the Arab region and other regional and international quality assurance organizations.

Objectives of the Network:

- ✓ Support, promote and disseminate good practice of quality assurance in higher education in the Arab region and to enhance continuous improvement and capacity building for quality assurance agencies in the region;
- ✓ Advise, consult and establish standards and guidelines, to assist the development of new quality assurance agencies in the region;
- ✓ Facilitate links and communication between quality assurance agencies;
- ✓ Provide a platform for information on quality assurance standards, good practices and professional institutional and program reviewers among member organizations;
- ✓ Develop a platform for information on qualification frameworks, recognized educational institutions and accredited programs in the region;
- ✓ Support members of ANQAHE to determine the standards of institutions operating across national borders;
- ✓ Assist in the development and implementation of credit transfer schemes to enhance the mobility of students between institutions both within and across national borders;
- ✓ Provide members of ANQAHE with information on the quality assurance organizations in the Arab region;
- ✓ Facilitate research in the field of quality assurance in higher education in the region;
- ✓ Where appropriate, represent and promote the interests of the region, e.g., vis-à-vis other networks and international organizations;
- ✓ Provide the service of evaluating the quality assurance agencies upon request.

RMU has been accepted by the Association of Quality Assurance Agencies of the Islamic World (Islamic-QA) as an Associate Member.

<https://islamicqa-world.org/>

Islamic-QA was established on May 4, 2011 in an effort to promote and enhance quality of higher education in the countries of the Islamic World. The Association offers two types of Memberships; Full Members and Associate Members. Currently, 46 Universities from Islamic Republic of Pakistan are associate members; whereas HEC is a Full Member of Islamic-QA.



37 – IQA – 2021

July 1, 2021

Farrukh Idrees, Ph.D.
Director, QEC
Rawalpindi Medical University

Dear Dr. Idrees

السَّلَامُ عَلَيْكُمْ وَرَحْمَةُ اللَّهِ وَبَرَكَاتُهُ

Subject: IQA Associate Member Acceptance

By referring to your proposal dated May 31, 2021, I would like to take this opportunity to inform you that the IQA board meeting on 22 June 2021 resulted an agreed acceptance for Rawalpindi Medical University to be an associate member. We are excited to welcome you to the Islamic-QA community and are eager to engage with you in the future endeavors. We firmly believe that this is an exciting development, and one that will enable the IQA to work collaboratively on technical and programmatic aspects of quality higher education with other organization within Islamic countries. Once again, congratulations. We urge you to become an active member and make your distinctive contribution to the platform.

Thank you.

Your Sincerely,

Prof. T. Basaruddin
President

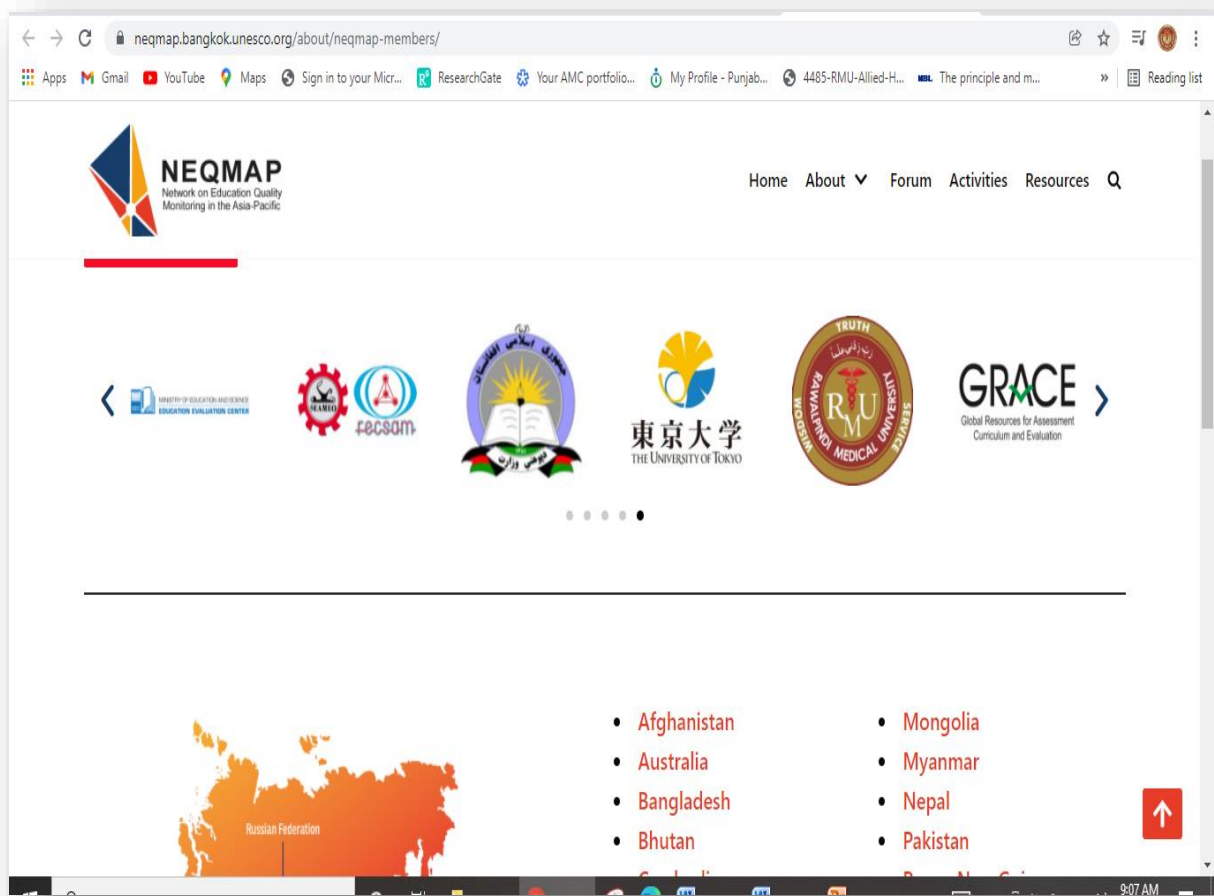
Kantor Kementerian Pendidikan dan Kebudayaan, Gedung D Lantai 17
Jl. Pintu 1 Senayan, Jakarta 10270
Phone: +62 21-57946110, e-mail: sekretariat@banpt.or.id

This Membership will enable RMU to promote/enhance quality of higher education by participating and making contributions to the quality of higher education in the countries of the Islamic World through Islamic-QA forum.

4. UNESCO-Network of Quality Monitoring Program for Asia Pacific:

The Network on Education Quality Monitoring in the Asia-Pacific (NEQMAP), established in March 2013 in Bangkok, Thailand, is a platform for exchange of knowledge, experience and expertise on the monitoring of educational quality in countries and jurisdictions of the Asia-Pacific region. The network focuses on student **learning assessment** as a key tool for monitoring education quality, while acknowledging the importance of maintaining strong linkages with other enablers of learning in classrooms including **curriculum** and **pedagogy**. UNESCO's Asia and Pacific Regional Bureau for Education (UNESCO Bangkok) serves as the NEQMAP Secretariat.

Activities of the network comprise **CAPACITY DEVELOPMENT**, **RESEARCH** and **KNOWLEDGE SHARING** among network members and other relevant stakeholders.





Dr Farrukh Idrees,
Director Quality Enhancement
Cell (QEC),
Rawalpindi Medical University,
Main Campus, Tipu Road,
Rawalpindi

Section for Inclusive Quality Education

18 August 2021

Ref: 159.01/IQE/15/21

**Re: Network on Education Quality Monitoring in the Asia-Pacific (NEQMAP) –
Acceptance of Membership**

Dear Farrukh Idrees,

Thank you for your application to join the Network on Education Quality Monitoring in the Asia-Pacific (NEQMAP) at UNESCO Bangkok. We are pleased to inform you that the NEQMAP Steering Group has approved your application. As such, your organization has been formally accepted as a member of the Network.

The NEQMAP secretariat will be in touch with you, as the nominated focal point, to provide you with relevant details on the activities and meetings of the Network. Please also refer to our website, <https://neqmap.bangkok.unesco.org/>, for more information.

Thank you for your strong support and we look forward to working with your Organization to improve the quality of education in the Asia-Pacific region.

Yours Sincerely,

Margarete Sachs-Israel
Chief, Section for Inclusive Quality Education
UNESCO Bangkok
Asia and Pacific Regional Bureau for Education

5. Association for Medical Education in Europe (AMEE):

The Association for Medical Education in Europe (AMEE) is a worldwide organization with members in 90 countries on five continents. AMEE promotes international excellence in education in the health professions across the continuum of undergraduate, postgraduate and continuing education.

AMEE, working with other organizations, supports teachers and institutions in their current educational activities and in the development of new approaches to curriculum planning, teaching and learning methods, assessment techniques and educational management, in response to advances in medicine, changes in healthcare delivery and patient demands and new educational thinking and techniques.

AMEE promotes excellence in medical education internationally by:

- Promoting the sharing of information through networking, conferences, publications and online activities
 - Identifying improvements in traditional approaches and supporting innovation in curriculum planning, teaching and learning, assessment and education management
 - Encouraging research in the field of healthcare professions education
 - Promoting the use of evidence-informed education
 - Setting standards for excellence in healthcare professions education
 - Acknowledging achievement both at an individual and an institutional level
 - Recognizing the global nature of healthcare professions education
- Influencing the continuing development of healthcare professions education through collaboration with relevant national, regional and international bodies.



Vision:

Supporting excellence in healthcare globally by promoting the development of an outstanding health professional education community.

Mission:

AMEE supports healthcare globally by encouraging excellence in education in the health professions across the continuum of undergraduate, postgraduate, and continuing professional development.

It does so by enabling and promoting collaboration with, and between, a diverse and inclusive global community of health professionals, educators, and other stakeholders to foster scholarship and best practice.

Strategic Objectives

1. **To be the foremost global community of health education stakeholders**
 - a. Encourage a diverse, inclusive and collaborative global community that fosters curiosity and collaboration across all healthcare professions education (HPE)

- b. Develop strategies for the international engagement of all stakeholders, including engagement of individuals, institutions and regulators
- c. Create and encourage communities of practice which engage with specialist and regional challenges in HPE
- d. Develop AMEE conferences as the primary vehicle for networking and knowledge sharing in HPE.

2. **To set the standard in professional development while being responsive to the changing world in health professions education delivery**

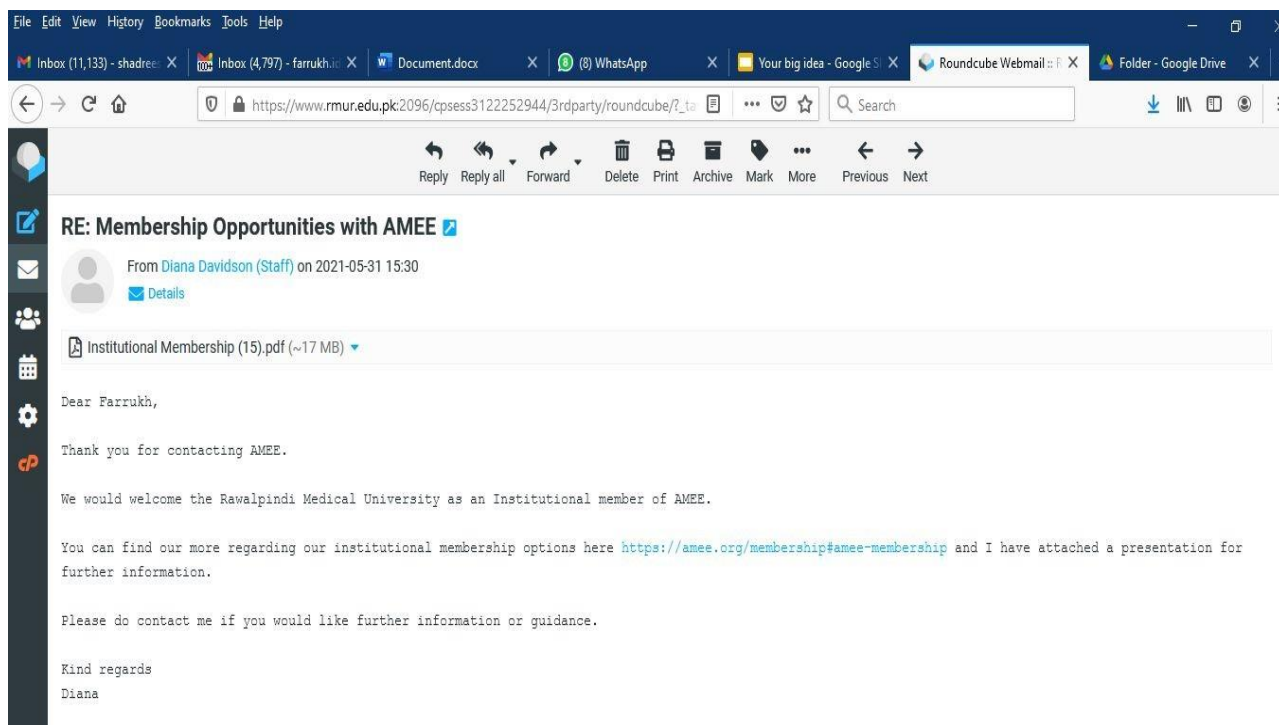
- a. Define the competencies expected of a health professions educator and use it to inform curriculum development
- b. Set high standards of medical education globally whilst considering local and regional requirements
- c. Be a significant influencer of global policy and practice in health professions education

To promote scholarship in healthcare education to support better healthcare delivery

- a. Lead by example in developing a positive culture of learning and scholarship
- b. Provide resources to encourage scholarship
- c. Develop effective collaborations with appropriate partners to cultivate scholarship
- d. Create a program in which schools and educators are recognized and rewarded for scholarship

4. **To be a leader in driving innovation in healthcare educational development worldwide**

- a. Develop an organizational culture that encourages and nurtures innovation in education among all its stakeholders
- b. Provide a forum for the exchange of ideas from around the world
- c. Integrate innovation into forward planning and strategic thinking
- d. Engage with other sectors to develop innovation in HPE



National Collaborations

QEC Contribution in Other Universities/Organizations with respect to Quality Assurance

Contribution	Date
1. Conducted IPE in National University of Modern Language	March 29, 2021
2. Conducted IPE in Foundation University, Islamabad	March 30, 2021
3. Conducted IPE in Ghulam Ishaq Khan Institute of Technology	April 07, 2021
4. Conducted a training session on Benchmarking in Capital University of Science & Technology	June 25, 2021
5. IPE Program Review Visit at Fatima Jinnah Women University	June 15, 2021
6. Conducted training in Qsi USA Training on ISO 21001:2018	June 16, 2021



Representation of RMU in International Webinar on QA in PhD Program on August 04, 2021



The banner features a teal background. On the left, the 'Fireside Chat Applied HE' logo is written in a cursive font. In the center, the 'Education Insight' logo includes a globe icon and the tagline 'Connect Collaborate Create'. On the right, an illustration shows a high jumper in mid-air, clearing a bar. The text 'PhD in the 21st Century – what it takes?' is displayed in yellow, with the date and time 'Wednesday 4 August 2021 20:00 Singapore (noon GMT)' in white below it.

Learning Points

- More PhD options in Interdisciplinary research
- Inter-regional collaboration among industry and HEIs
- The aim of a PhD study is to impact society
- Preparing PhD scholars in finding the appropriate jobs through acquiring relevant skills
- Different QA mechanisms to assess PhD programs

(Mauris Van Rooijen, Director of German University)

Representation of RMU in International Webinar on Green Productivity on August 10, 2021

The screenshot shows a YouTube video player interface. The video title is "PRODUCTIVITY TALK Greening Tourism". The video is scheduled for "10 August 2021, 14:00-15:00 Japan Time". The video features two speakers: Dr. Ravinder Nath Batta, Advisor to the Chief Minister, Gov. of Himachal Pradesh, India, and Dr. Isimeli Waibuta Tagicakiverata, Director, National Training and Productivity Centre (NTPC), Fiji National University. The video is set to premiere in 2 days on August 10, 10:00 AM. A top chat window is visible on the right, displaying a message about upcoming premieres and a "LEARN MORE" link. The video player shows 0 likes and 0 dislikes, and options for share, save, and more.

International Webinar on QA in Higher Education on August 10, 2021

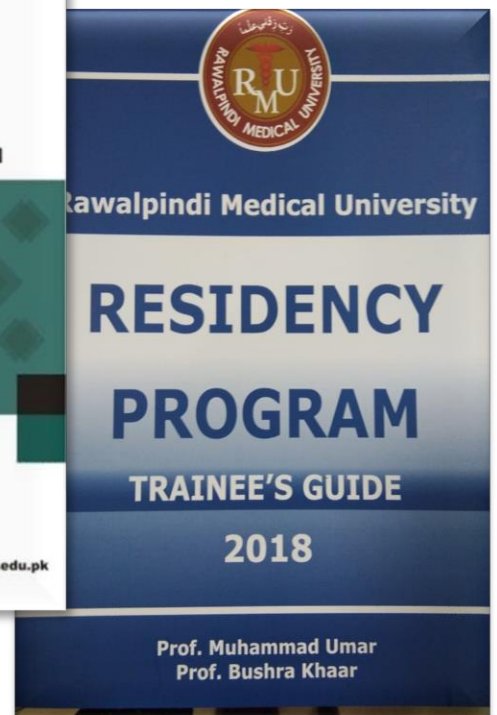
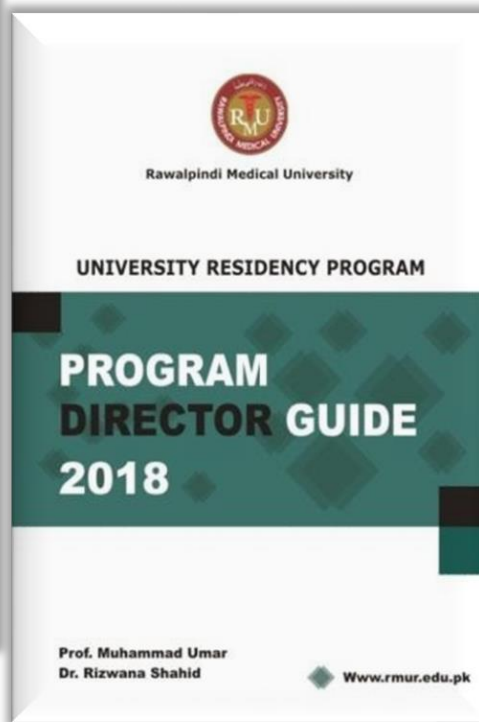
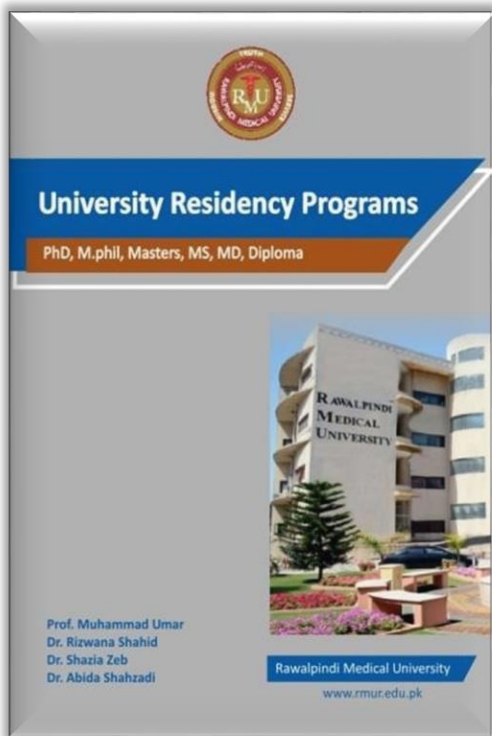
The graphic is for a webinar titled "AppliedHE X CHANGE Alumni Engagement and Management". The main topic is "Best Practises in Alumni Engagement and Management", scheduled for Tuesday, 10 August 2021 at 20:00 Singapore (noon GMT). The moderator is Prof Sibrandes Poppema, President of Sunway University, Malaysia. The speakers are: Dr Kevin Downing, Secretary to Council and Court Director, Institutional Research Office, City University of Hong Kong, HONG KONG; Dr Halfa Jamal Al-Lail, President, Effat University, SAUDI ARABIA; Prof Pamela Z. Dube, Deputy Vice-Chancellor, Student Development and Support, University of the Western Cape, SOUTH AFRICA; Dr Charles Pettit, President and CEO, Carolina University, UNITED STATES OF AMERICA; and Prof Dr Maurits van Rooijen, Chief Academic Officer, Global University Systems and Rector, University of Europe for Applied Sciences Germany, UNITED KINGDOM. The background features a globe with a network of people icons.





SECTION-II

University Residency Program (URP)



University Residency Program

Mission

To provide residents with a comprehensive structured education and training in both basic and clinical sciences that will enable the resident to become competent and proficient.

Vision

To disseminate best services and bring innovation in treatment and preventive strategies through research that spans fundamental discovery, health care services and knowledge mobilization

Objectives Of University Residency Program

By the end of postgraduate training in the discipline concerned, resident should be able to:

1. Recognize the significance of concerned specialty in the context of health needs of the community and national priorities in the health sector
2. Practice the concerned specialty ethically and in compliance with steps of primary health care
3. Promote system-based practice and patient safety
4. Advocate for appropriate health resource allocation
5. Identify social, economic, environmental, biological and emotional determinants of health while dealing with patients and take them into consideration before application of therapeutic, rehabilitative and preventive measures
6. Diagnose and manage the patients on the basis of clinical assessment and appropriate investigations
7. Demonstrate empathy and humane approach towards patients and their families
8. Express interpersonal behavior according to societal norms and expectations
9. Implement national health programs effectively and responsibly
10. Organize and supervise the chosen/assigned health care services demonstrating adequate managerial skills in the clinic / hospital / community
11. Develop skills as a self-directed learner, recognize continuing education needs; select and use appropriate learning resources
12. Function as an effective leader of a health team engaged in health care, research and training
13. Elaborate innovative knowledge about diseases of their specialty in the context of technological and pharmacological advances

Nomenclature & Duration of University Residency Program

NOMENCLATURE

- MD – Doctor of Medicine
- MS – Master of Surgery
- M.Phil. - Master of Philosophy
- PhD – Doctor of Philosophy

Ongoing and Proposed Residency programs of RMU with their proposed duration are mentioned below:

Ongoing Residency Program

<i>SR #</i>	<i>Residency Programs</i>	<i>Duration</i>
1.	<i>MD Pediatrics</i>	<i>4 years</i>
2.	<i>MD Medicine</i>	<i>4 years</i>
3.	<i>MD Gastroenterology</i>	<i>5 years</i>
4.	<i>MD Cardiology</i>	<i>5 years</i>
5.	<i>MD Radiology</i>	<i>4 years</i>
6.	<i>MD Nephrology</i>	<i>5 years</i>
7.	<i>MD Dermatology</i>	<i>5 years</i>
8.	MS Ophthalmology	5 years
9.	MS Gynecology / Obstetrics	4 years
10.	MS ENT	4 years
11.	MS Orthopedic Surgery	5 years
12.	MS Neurosurgery	5 years
13.	MS Plastic Surgery	5 years
14.	MS Pediatric Surgery	5 years
15.	MS General Surgery	4 years
16.	MS Urology	5 years
17.	MS Anesthesiology	4 years
18.	M.Phil. Microbiology	2 years
19.	<i>MD Infectious Diseases</i>	<i>5 years</i>
20.	<i>MD Pulmonology</i>	<i>5 years</i>
21.	<i>MD Critical care Medicine</i>	<i>5 years</i>
22.	PhD Microbiology	6 years
23.	Masters in Health Professions Education (MHPE)	2 years
24.	Diploma in Child Health (DCH)	2 years
25.	Diploma in Anesthesia (DA)	2 years
26.	<i>MSc. Pain Medicine</i>	<i>2 years</i>
27.	<i>MD Psychiatry</i>	<i>4 years</i>
28.	<i>MS Emergency Medicine</i>	<i>5 years</i>
29.	Diploma in Medical Radio Diagnosis (DMRD)	2 years

Proposed Residency Programs

SR #	MS Programs	Duration
1.	Community medicine	2 years
2.	Pharmacology	2 years
3.	Anatomy	2 years
4.	Physiology	2 years
5.	Biochemistry	2 years
6.	Histopathology	2 years
7.	Chemical Pathology	2 years
8.	Hematology	2 years
9.	Diploma in Medical Jurisprudence (DMJ)	2 years

Resident Appointments

Residents / postgraduate medical trainees are enrolled in training program in compliance with Punjab Residency Program Guidelines available at: <http://prp.punjab.gov.pk/>. These guidelines are also mentioned in detail in **Program Director Guide**.

RMU RESIDENTS

Total **293** residents are doing postgraduate training in 3 teaching hospital hospitals of Rawalpindi Medical University.

The screenshot displays the Punjab Residency Program website interface. At the top left, there is a logo for the Punjab Residency Program and a help line number: 0800-99000. To the right, there are input fields for an email address (example: email@example.com) and a password, with a 'Sign In' button and a 'Forgot Password?' link. The main content area is divided into two sections. On the left, under the heading 'Eligibility Criteria PG Induction July, 2019', there is a list of four criteria: MBBS/BDS Degree, Certificate of Completion of 12 months of House Job, PMDC Registration for Pakistani Graduates /License to practice by relevant bodies for foreign graduates, and Result of passing PART-I Examination of FCPS/MD/MS within last 03 years. Below this list are two buttons: 'User Manual' and 'Lowest Merit List'. On the right, there is a 'Get Result Of Phase 1 Of Round 3' form with input fields for 'Email *' and 'PM & DC Number *', and a 'Submit' button.

Success of any program depends upon how dynamic logging and monitoring has been done. University Residency Program is successfully executed and monitored in RMU by University Training & Monitoring Cell (UTMC). This Cell is headed by

- Prof. Muhammad Umar Vice Chancellor RMU

Followed by

- Prof. Dr. Jahangir Sarwar Khan, Chairman PGME Committee
- Prof. Shaguftha Saeed Sial, Director Research Unit
- Prof. Rai Muhammad Asghar, Director DME
- Dr. Shazia Zeb, Deputy Director DME
- Dr. Rizwana Shahid, Assistant Director DME
- Dr. Uzma Hayat, Deputy Director, Research Unit
- Dr. Sarah Rafi, Assistant Director, Research Unit

UTMC is meant to keep the academic record of all the university residents updated.

Postgraduate trainees coming to Rawalpindi Medical University and its 3 Allied Hospitals (HFH, BBH and DHQ Hospital) get affiliated with UTMC by filling their bio- data form.

S. #	Yrs	Hosp	RTMC	RMU	Speciality Name	Candidate Name	MSN #	Supervisor	Joining date	Completion date	Rotations Completed	Rese. U	Workshop			Annual Lecture		
													Communication	Computer	190/2018	190/2018	190/2018	190/2018
1	2016	HFH	009RMUMS-SURFH3JAH-16	Surgery	Adil Shah War	MS	Prof. Iqbal Anwar	20/10/2016	29/03/2017	Urology	Plastic Surgery	Paeds Surgery						
2	2017	HFH	009RMUMS-SURFH3JAH-17	Surgery	Kiran Shah Saeed	MS	Prof. Iqbal Anwar	24-01-2017	23/03/2017									
3	2016	HFH	009RMUMS-GASTRFH3JAH-16	Gastroenterology	M. Danish Nazeem	MD	Prof. M Umar	29-01-2016	29/03/2016									
4	2017	HFH	009RMUMS-GASTRFH3JAH-17	Gastroenterology	Ahmed Raheem	MD	Prof. M Umar	24-02-2017	23/03/2017									
5	2017	HFH	009RMUMS-NEURFH3JAH-17	Neurology	Shahroz Ahmed	MD	Dr. Naveed Sarwar	24-03-2017	23/03/2017									
6	2017	HFH	009RMUMS-SURFH3JAH-17	Neurosurgery	M. Javed Iqbal	MS	Prof. Nadeem Akhtar	28-03-2017	23/03/2017									
7	2017	HFH	009RMUMS-SURFH3JAH-17	Neurosurgery	Ahsan uz zohman	MS	Prof. Nadeem Akhtar	04/04/2017	03/04/2017									
8	2016	HFH	009RMUMS-SURFH3JAH-16	Neurosurgery	Sana Asghar	MS	Prof. Nadeem Akhtar	04/04/2016	04/04/2016	Plastic Surgery	Orthopedic Surgery	SLR - Paeds Surgery						
9	2017	HFH	009RMUMS-ANATSFH3JAH-17	Anesthesia	Naseer Ahmad	MS	Prof. Jawad Zaheer	07/07/2017	16/07/2017									
10	2017	HFH	009RMUMS-ANATSFH3JAH-17	Anesthesia	Abida ussah	MS	Prof. Jawad Zaheer	17/07/2017	16/07/2017									
11	2017	HFH	009RMUMS-ANATSFH3JAH-17	Anesthesia	Mehnoosh Asghar	MS	Prof. Jawad Zaheer	17/07/2017	16/07/2017									
12	2017	HFH	009RMUMS-RADRFH3JAH-17	Diagnostic Radiology	Muhammad Abubakar	MD	Dr. Naeem Khan	07/07/2017	06/07/2017									
13	2017	HFH	009RMUMS-GASTRFH3JAH-17	Gastroenterology	Ahsan Nazeem	MD	Prof. M Umar	07/07/2017	06/07/2017									
14	2017	HFH	009RMUMS-SURFH3JAH-17	General Surgery	Zafran Chaudhry	MS	Prof. Iqbal Anwar	07/07/2017	06/06/2017									
15	2017	HFH	009RMUMS-SURFH3JAH-17	General Surgery	Sana Munir	MS	Prof. Jangir Sarwar	31/07/2017	30/07/2017									
16	2017	HFH	009RMUMS-GYNRFH3JAH-17	Gynecology	Habiba Nazam	MS	Prof. Rizwana Chaudhri	07/07/2017	06/07/2017									
17	2017	HFH	009RMUMS-SURFH3JAH-17	Gynecology	Sadia Sabir	MS	Prof. Iqbal Anwar	07/07/2017	06/07/2017									
18	2017	HFH	009RMUMS-GYNRFH3JAH-17	Gynecology	Afsa Zahid	MS	Prof. Rizwana Chaudhri	31/07/2017	30/06/2017									
19	2017	HFH	009RMUMS-GYNRFH3JAH-17	Gynecology	Humaira Javed	MS	Dr. Nabwila Waheed	07/07/2017	06/07/2017		Soft Skills							
20	2017	HFH	009RMUMS-ENTRFH3JAH-17	Otolaryngology/ENT	Nisreena Akmal	MS	Prof. M Ajmal	30/07/2017	30/07/2017									
21	2017	HFH	009RMUMS-PEDIH3JAH-17	Pediatrics	Muhammad Arslan	MD	Prof. Ra M Asghar	17/07/2017	16/07/2017									
22	2017	HFH	009RMUMS-PEDIH3JAH-17	Pediatrics	Muhammad Saifur Azam	MD	Dr. Raaz Tariq	17/07/2017	16/07/2017									
23	2017	HFH	009RMUMS-PEDIH3JAH-17	Pediatric Surgery	Sadia Jamil	MS	Dr. Naveed Liaqat	31/07/2017	30/06/2017									
24	2017	HFH	009RMUMS-CARDH3JAH-17	Cardiology	Mirza Adnan Baig (RI)	MD	Dr. Faiz ul Rehman	16/09/2017	16/09/2016									
25	2017	HFH	009RMUMS-CARDH3JAH-17	Cardiology	Ahsan Khalid (RI)	MD	Prof. Khuram	16/09/2017	16/09/2016									
26	2017	BBH	009RMUMS-ANATSEBH3JAH-17	Anesthesia	Nasir Karam	MS	Dr. Shafiq	09/07/2017	08/07/2017				W/S From KEMU	W/S From KEMU				
27	2017	BBH	009RMUMS-CARDSEBH3JAH-17	Cardiology	Mohsin	MD	Dr. Imran Saeed	04/07/2017	03/07/2017									
28	2017	BBH	009RMUMS-DEBSEBH3JAH-17	Dermatology	Khaza Hashmi	MD	Dr. Nadia	07/07/2017	06/07/2017									
29	2017	BBH	009RMUMS-RADIOSEBH3JAH-17	Diagnostic Radiology	Ahmed Ahmad	MD	Dr. Habibullah Duran	04/07/2017	03/07/2017									
30	2017	BBH	009RMUMS-SURSEBH3JAH-17	General Surgery	Sulman Mahtaj	MS	Prof. Naveed Zia	09/09/2017	31/07/2017									
31	2017	BBH	009RMUMS-SURSEBH3JAH-17	General Surgery	Muhammad Rehman	MS	Dr. Anees	10/07/2017	10/07/2017									
32	2017	BBH	009RMUMS-GYNSEBH3JAH-17	Gynecology	Zahida Saeed	MS	Prof. Shagufa Sial	10/07/2017	10/07/2017									
33	2017	BBH	009RMUMS-ORTHSEBH3JAH-17	Orthopedic Surgery	Hussain Ali	MS	Prof. Faiz Ahmed	10/07/2017	10/07/2017									
34	2017	BBH	009RMUMS-OPHSEBH3JAH-17	Ophthalmology	Umer shafiq	MS	Prof. Faiz Ahmed	10/07/2017	10/07/2017									
35	2017	BBH	009RMUMS-URSEBH3JAH-17	Urology	Shoaib Rasool	MS	Dr. Zen El Amr	03/06/2017	31/07/2017									
36	2013	BBH	009RMUMS-OPHSEBH3JAH-13	Ophthalmology	Asad Noor Mirza	MS	Prof. Faiz Ahmed	29/07/2013	23/03/2018	G. Surgery	Plastic Surgery	Urology						
37	2016	BBH	009RMUMS-OPHSEBH3JAH-16	Ophthalmology	Fahar sadiq	MS	Prof. Faiz Ahmed	29/07/2016	23/03/2017	G. Surgery	Plastic Surgery							
38	2016	BBH	009RMUMS-OPHSEBH3JAH-16	Ophthalmology	Muhammad Azeem	MS	Prof. Faiz Ahmed	29/07/2016	23/03/2017	G. Surgery	Plastic Surgery							
39	2016	BBH	009RMUMS-OPHSEBH3JAH-16	Ophthalmology	M. Shahzad Faiz	MS	Prof. Faiz Ahmed	29/07/2016	23/03/2017	G. Surgery	Urology							

Logbook

Logbook is an ideal tool to document the activities undertaken during training for accomplishment of the learning outcomes along with procurement of remarks / feedback of the supervisor. They should be appropriately designed to encompass all the components of curriculum¹. Logbooks guide the residents regarding the number of cases to be seen, procedures to be done deemed necessary for skill acquisition. They also facilitate supervisors in giving constructive feedback to the trainees².

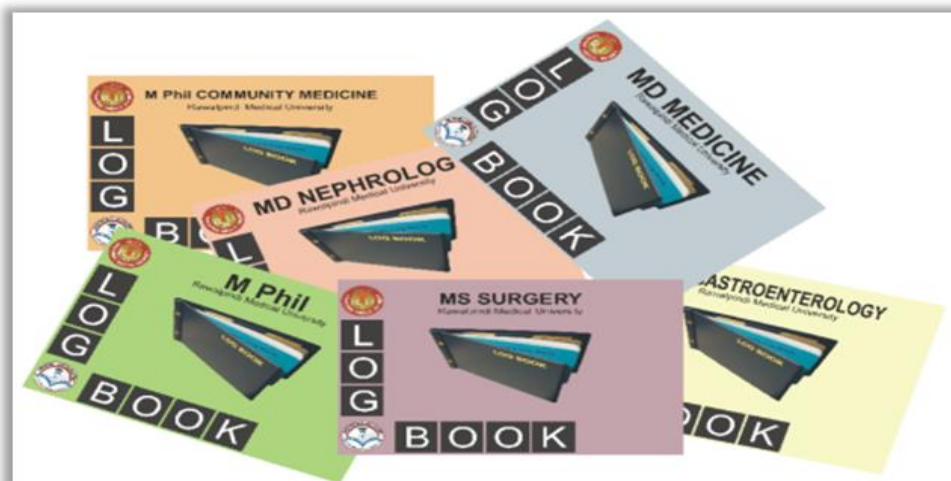
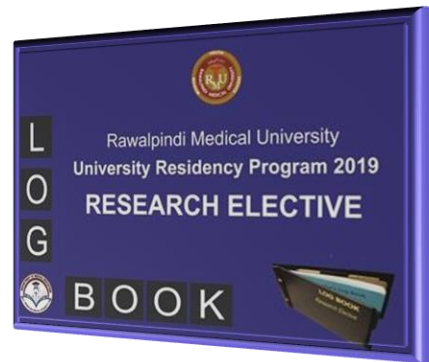
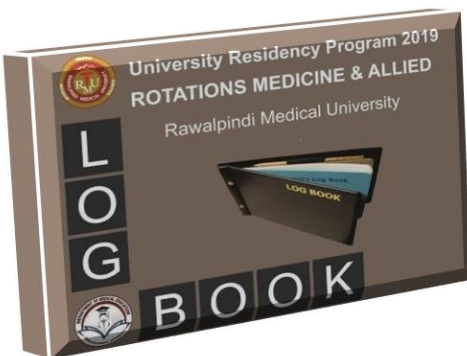
Logbooks can be successfully implemented in residency program by getting input of the stakeholders for its content, keeping short and precise, integrating it into the curriculum and training the supervision physicians and mentors³.

Logbooks are designed for each University Residency program separately by the consensus of the worthy faculty of RMU. These logbooks are also uploaded on www.rmur.edu.pk, to ease its availability for the trainees.

1. Gouda P. The need for logbooks to evolve in the undergraduate medical setting. *Perspect Med Educ*. 2016 Feb; 5(1): 65.
2. Rees CE, Shepherd M, Chamberlain S. The utility of reflective portfolios as a method of assessing first year medical students' personal and professional development. *Reflect Pract*. 2005;6(1):3-14.
3. Brauns KS, Narciss E, Schneyinck C, Bohme K, Brustle P, Mau-Holzmann U, et al. Twelve tips for successfully implementing logbooks in clinical training. *Medical Teacher*, 38: 6, 564-569

In addition to the general logbooks each resident has to maintain

- Research logbook
- Rotations logbook



Portfolio

Portfolios are of great use in postgraduate medical training as an assessment tool, as documentation of competence, a database of procedure experience and for revalidation purposes¹. This form of assessment promotes achievement of learning outcomes by establishing closer links between assessment and learning. In addition, portfolio also assists in understanding varied aspects of the trainees in clinical settings like attitude, personal attributes and professionalism through reflective practices².

An advantage of using portfolios as a means of assessment is that gaps may be identified in training¹. Reflection which is the hallmark of portfolio allows our doctors at all stages of training to learn from their actions and promotes continued review of the literature to keep them up to date³. In the light of the increasing trend towards providing evidence of lifelong learning, modern doctors need to be able to prove their continued commitment to achieving new and maintaining existing knowledge, skills, and training goals⁴.

The Portfolio of a doctor or medical resident should comprise of the following pillars of Good Medical Practice:

- Maintaining good medical practice
- Good clinical care
- Teaching and training, appraising and assessing
- Relationships with patients
- Working with colleagues
- Probity
- Health⁴

-
1. Haldane T. "Portfolios" as a method of assessment in medical education. [Gastroenterol Hepatol Bed Bench](#). 2014; 7(2): 89–93.
 2. Davis MH, Ponnampertuma GG. Portfolios, projects and dissertations. In: Dent JA, Harden RM, editors. A practical guide for medical teachers. London: Elsevier Churchill Livingstone; 2006.
 3. O'Sullivan PS, Cogbill KK, McClain T, Reckase MD, Clardy JA. Portfolios as a novel approach for residency evaluation. *Acad Psychiatry*. 2002; 26:173–179.
 4. Douglas H, West C. Creating a good portfolio. *BMJ* 2009; 338: 811.

Portfolios are meant to depict achievements of healthcare providers and residents in one or more areas. The format of well-designed portfolio is depicted below



Muhammad Umar

Rawalpindi Medical University, Rawalpindi, Pakistan · Gastroenterology & Hepatology

h-index 29.94 · MBBS, FCPS, FACG, AGAF, FRCP (London), FRCP (Glasg)

About

Network

Projects 1

Research 65

About

65

Research items

5,565

Reads

693

Citations

Introduction

Skills and Expertise

Gastrointestinal Diseases

Hepatocellular Carcinoma

Cirrhosis

Liver Transplantation

Biliary Tract Diseases

Cholangiocarcinoma

Chronic Hepatitis C

Pancreas

NASH

EUS

[Show All](#)

Research Experience



Jan 1980

Rawalpindi Medical University, Rawalpindi Pakistan

Gastroenterology · Rawalpindi, Punjab, Pakistan

Position

Vice Chancellor

Residents are expected to keep their portfolios updated. Their logbooks and portfolios are checked from time to time by UTMC and the department of medical education (DME), RMU.



Components Of University Residency Program

- There are four components of the university residency program (URP)
- Curriculum
 - Instructional strategy
 - Assessment
 - Evaluation

All components are executed by UTMC except evaluation which is done by Quality Enhancement Cell (QEC), RMU.

Curricula

Curricula of both ongoing and proposed Residency Programs have been prepared by subject specialists in compliance with objectives of University Residency Program. These curricula can be viewed by all residents on RMU website (www.rmur.edu.pk.)



Curricula of Residency Programs at Rawalpindi Medical University

These curricula are designed and finalized by worthy Dean of respective departments with consensus and discussion of their dedicated faculty in alignment with ACGME (Accreditation Council for Graduate Medical Education)¹ guidelines that are tracked in order to ensure acquisition of our residents by all the 6 core competencies which are:

1. Medical Knowledge
2. Patient care
3. Interpersonal & Communication skills
4. Professionalism
5. Practice Based Learning & Improvement
6. System Based Practice
7. Research

Quality Enhancement Cell collects regular feedback. Feedback report was compiled, analyzed and report was presented to Curriculum Committee of Post Graduate Studies. Feedback report was also presented to deans in the Deans meeting. On the basis of valuable suggestions given in the feedback by the trainees, Curriculum Committee updated all the curricula in 2021. Subject specialists of all specialties are member of the Curriculum Committee, so subject specialists presented their curricula in the Deans Meeting and Academic Council Meeting for approval. After approval all curricula have been implemented successfully.

WFME Global Standards for Quality Improvement in Post-graduate Medical Education

World Federation for Medical Education (WFME)² recommends the following set of global standards for post-graduate medical education according to 9 areas. These areas are defined as broad components in the structure, process and outcome of post-graduate medical education and training. These are:

1. Mission and outcomes
2. Training process
3. Assessment of Trainees
4. Trainees
5. Staffing
6. Training settings and educational resources
7. Evaluation of Training process

8. Governance & Administration
9. Continuous Renewal

Intended users of these standards are Authorities, organizations and institutions with responsibility for postgraduate medical education. These 9 sets of international standards can be used globally as a tool for quality assurance and development of postgraduate medical education in the following ways:

1. Self-evaluation of Programs
2. Peer review
3. Combination of self-evaluation and External Peer review
4. Recognition and Accreditation

1. ACGME Guidelines Available at:

<https://knowledgeplus.nejm.org/blog/exploring-acgme-core-competencies/>.

2. WFME Global Standards for Quality improvement in Post-graduate Medical Education Available at:

<https://wfme.org/publications/wfme-global-standards-for-quality-improvement-pgme-2015/>.

Instructional Strategies

Teaching and training of the residents enrolling in University Residency Program are through diverse modalities which are:

- Workplace Based Assessment (WPBA)
 - a) Direct Observation of Procedural Skills (DOPS)
 - b) Case Based Discussions (CBD)
 - c) Mini-Clinical Evaluation Exercise (Mini-CEX)
- Bedside teaching
- Morning meetings
- Multidisciplinary Team meetings (MDT) monthly
- Mandatory workshops
- Orientation seminar & Training sessions
- Annual lectures
- Interactive sessions
- Rotations

Apart from aforementioned methodologies, trainees will also get expertise in their respective specialty through participation in Conferences / Seminars / Symposium, doing Self-Directed Learning (SDL), visualizing videos of procedures and attending interactive sessions.

Assessment

The curriculum of MD internal Medicine of Rawalpindi Medical University Rawalpindi is derived from Accreditation Council for Graduate Medical Education which is competency / performance based system depends upon six following competencies.

1. Medical Knowledge
2. Patient Care
3. Interpersonal & Communication Skills
4. Professionalism
5. Practice Based Learning
6. System Based Learning

Rawalpindi Medical University Rawalpindi has two incorporated one additional component in this basic structure of six core competencies

7. Research

Details about various competencies required for MD Internal Medicine along with brief details of Teaching Strategies, Type of Assessment, weightage given to the competency & Tools of Assessment:

S N	Competency to be assessed	Teaching & learning strategies	Type of Assessment for the competency to be assessed	% weightage of the competency	Tools of Assessment
1.	Medical knowledge	Case based discussion & problem based learning, large group interactive session, self-directed learning, teaching rounds, and literature search.	Formative Assessment leading to continue internal assessment and also summative assessment in high stake exams	40% for both Medical Knowledge and Patient Care both	MCQs, SEQs, Directly observe procedure, mini clinical examinations, charts, OSCE, teaching ward rounds, case discussion, seminars, topic presentation
2.	Patient care	Case based discussion, teaching rounds, morbidity & mortality meetings, 360 feedback evaluation, DOPS, long case/ short case discussions OPDs, emergency indoor workshops, hands on trainings.	Formative assessment leading to continue internal assessment and also summative assessment in high stake exams		Teaching rounds, case base discussion, presentations, CPC participations, clinical management, problem base learning, peer assisted learning, dealing with paramedics & patient attendants
3.	Professionalism	Teaching rounds, known conferences, workshops, hands on training, CPC, morbidity & mortality meetings, journal club	Formative assessment leading to continue internal assessment	40% for both professionalism & interpersonal communication skills both	Working in OPDs, wards, emergency DOPs, clinical case discussion, dealing with paramedics, meeting with supervisor & mentors, mini clinical examination
4.	Interpersonal & communication skills	Teaching rounds, hands on training, workshops related to research methodology, SPSS, data entry, LGIS, session with supervisor & mentors, session with research units, SDL,	Formative assessment leading to continuous internal assessment		Multi source & 360 degree evaluation.
5.	Practice based learning	Case based discussion, teaching rounds, known conferences, morbidity & mortality meetings, OPDs, emergency indoor workshops, hands on trainings.	Formative assessment leading to continuous internal assessment Multi source & 360 degree evaluation (Logbook & portfolio)	10% both Practice Based Learning & System Based Learning both	Working in OPDs, wards, emergency DOPs, clinical case discussion, dealing with paramedics, meeting with supervisor & mentors, mini clinical examination
6.	System based learning	Working in wards, OPDs, Emergency	Formative assessment leading to continuous internal assessment Multi source & 360 degree evaluation (Logbook & portfolio)		Working in OPDs, wards, emergency DOPs, clinical case discussion, dealing with paramedics, meeting with supervisor & mentors, mini clinical examination
7.	Research	Large group Interactive sessions on Research, hands on training & workshops, practical work of research including literature search, finding research question, synopsis writing, data collection, data analysis, thesis writing	Formative leading to continuous internal assessment Multi source & 360 degree evaluation (Logbook & portfolio)&also Summative assessment	10%	Approval of research topic and synopsis & thesis from URTMC, Board of Advanced studies and Research and ethical review board, Requirement of Completion certificate of research workshops as eligibility criteria for examinations, Defense of Thesis examination
Summary of all Assessments in Four & Five year training program of MD Internal Medicine:					
Grand total of All Assessments for Four Year Training Program					04 Summative Assessments in four years
Grand total of All Assessments for Five Year Training Program One Additional Assessment at the End of Year 4 with same pattern as end of year 1 & 3 Assessments					05 Summative Assessments in five years

SECTION-III
360 Degree Evaluation
Multi Source FeedBack

360 Degree Evaluation

360-degree evaluation comprises of measurement tools duly filled by multiple people in an individual's sphere of influence. They are also labeled as multisource feedback, multi-rater assessment, full-circle appraisal, and peer evaluation. This method of providing developmental feedback is used to assess competency as well as behavior of concerned individual¹.

360-degree evaluations in health care settings are destined to assess the six core competencies among residents but they are particularly valuable in evaluating interpersonal skills, communications skills, and professionalism. Most 360-degree tools use a survey or questionnaire to gather information in several areas (e.g., knowledge base, skills and task proficiency, teamwork, communication, managerial skills, decision making, professionalism and practice-based learning)².

The evaluators filling the 360-degree evaluation proforma should include departmental faculty, fellow residents, medical students, nurses, ancillary staff, patients, families, and the resident self-assessment, allowing for a "gap analysis" between how residents perceive themselves and how others perceive them. This provides a golden opportunity to focus on areas which are to be improved³. However, both raters and ratees must understand and accept the process as a career-enhancing tool for its successful implementation. Raters should give fair and honest feedback, and ratees must respect the confidentiality and anonymity of the process. 360-degree feedback must be used in a positive and constructive manner to enhance career development. Failure in either of these areas will diminish participation and effectiveness¹.

This tool focuses on multiple perspectives and results are considered to be highly credible to change behavior. These forms have been named as 360-degree evaluation because in this trainee is being evaluated by every possible angle. This is a significant deviation from the traditional peer review and the resident review processes that almost exclusively use physicians as raters⁴.

360-degree Evaluation report of the RMU residents is computer based to generate timely and easily correlated results. These reports are sent to respective Deans and are open for discussion only among supervisors and their residents. They constitute 15% weight age in final assessments of residents.

1. Rodger KG, Manifold

C. 360-degree Feedback: Possibilities for Assessment of ACGME Core Competencies for Emergency Medicine Residents. *AcaEmerg Med* 2002; 9(11): 1300-1304.

2. Rudy DW, Fejfar MC, Griffith CH, Wilson JF. Self and peer assessment in a first-year communication and interviewing course. *Eval Health Prof.* 2001; 24:436–45.
3. Atwater LE, Yammarino FJ. Self-other rating agreement: a review and model. *Res Person Hum Resources Manage.* 1997; 15:141–64.
4. Southgate L, Cox J, David T, et al. The General Medical Council's Performance Procedures: peer review of performance in the workplace. *Med Educ.* 2001; 35(suppl 1):9– 19.

360 Degree Evaluation Forms

- 360-degree evaluation comprises of 9 proforma. These are as follows
 1. Mentor / supervisor evaluation of trainee
 2. Patient medical record evaluation proforma
 3. Resident evaluation by nurse / staff
 4. Patient evaluation of trainee
 5. Resident's evaluation of faculty teaching
 6. Final evaluation scoring sheet
 7. Resident self-assessment proforma
 8. Directly Observed Procedural Skills (DOPS)
 9. Case based clinical evaluation of trainee

Each trainee has to submit his / her form after every six months. Cycle is retrospective in nature. This means we get the feedback of trainees from the department where trainee has spent last six months.

Supervisor Evaluation of The Trainee

This is form no. 1. It has to be filled by the supervisors, program directors, deans, coordinators and mentors and minimum three faculty members should duly fill the form so that average value can be taken. This form contains strength of our university residency program i.e., 6 core competencies.



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MENTOR / SUPERVISOR EVALUATION OF TRAINEE

Resident's Name: _____

Evaluator's Name(s): _____

Hospital Name: _____

Date of Evaluation: _____

Traditional Track (10% Clinic) Primary Care Track (20% Clinic)

1	Unsatisfactory
2	Below Average
3	Average
4	Good
5	Superior

Please circle the appropriate number for each item using the scale above.

Patient Care	Scale				
1. Demonstrates sound clinical judgment	1	2	3	4	5
2. Presents patient information case concisely without significant omissions or digressions	1	2	3	4	5
3. Able to integrate the history and physical findings with the clinical data and identify all of the patient's major problems using a logical thought process	1	2	3	4	5
4. Develops a logical sequence in planning for diagnostic tests and procedures and Formulates an appropriate treatment plan to deal with the patient's major problems	1	2	3	4	5
5. Able to perform commonly used office procedures	1	2	3	4	5
6. Follows age appropriate preventative medicine guidelines in patient care	1	2	3	4	5
Medical Knowledge	Scale				
1. Uses current terminology	1	2	3	4	5
2. Understands the meaning of the patient's abnormal findings	1	2	3	4	5
3. Utilizes the appropriate techniques of physical examination	1	2	3	4	5
4. Develops a pertinent and appropriate differential diagnosis for each patient	1	2	3	4	5
5. Demonstrates a solid base of knowledge of ambulatory medicine	1	2	3	4	5
6. Can discuss and apply the applicable basic and clinically supportive sciences	1	2	3	4	5
Professionalism	Scale				
1. Demonstrates consideration for the patient's comfort and modesty	1	2	3	4	5
2. Arrives to clinic on time and follows clinic policies and procedures	1	2	3	4	5
3. Works effectively with clinic staff and other health professionals	1	2	3	4	5
4. Able to gain the patient's cooperation and respect	1	2	3	4	5
5. Demonstrates compassion and empathy for the patient	1	2	3	4	5
6. Demonstrates sensitivity to patient's culture, age, gender, and disabilities	1	2	3	4	5
7. Discusses end-of-life issues (DPOA, advanced directives, etc.) when appropriate	1	2	3	4	5



Interpersonal and Communication Skills	Scale				
1. Demonstrates appropriate patient/physician relationship	1	2	3	4	5
2. Uses appropriate and understandable layman's terminology in discussions with patients	1	2	3	4	5
3. Patient care documentation is complete, legible, and submitted in timely manner	1	2	3	4	5
4. Recognizes need for behavioral health services and understands resources available	1	2	3	4	5
Systems-based Practice	Scale				
1. Spends appropriate time with patient for the complexity of the problem	1	2	3	4	5
2. Able to discuss the costs, risks and benefits of clinical data and therapy	1	2	3	4	5
3. Recognizes the personal, financial, and health system resources required to carry out the prescribed care plan	1	2	3	4	5
4. Demonstrates effective coordination of care with other health professionals	1	2	3	4	5
5. Recognizes the patient's barriers to compliance with treatment plan such as age, gender, ethnicity, socioeconomic status, intelligence, dementia, etc.	1	2	3	4	5
6. Demonstrates knowledge of risk management issues associated with patient's case	1	2	3	4	5
7. Works effectively with other residents in clinic as if a member of a group practice	1	2	3	4	5
Practice-Based Learning and Improvement	Scale				
1. Locates, appraises, and assimilates evidence from scientific studies	1	2	3	4	5
2. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies to assess diagnostic and therapeutic effectiveness of treatment plan	1	2	3	4	5
3. Uses information technology to access information to support diagnosis and treatment	1	2	3	4	5
Comments					

Total Score _____ /165

Resident's Signature	Date	Evaluator's Signature	Date
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Patient Medical Record Evaluation Proforma

This is form no. 2. It has to be filled by the supervisors, program directors, deans, coordinators and mentors and minimum three faculty members should duly fill the form so that average value can be taken. Random files of the patients are consulted to fill this form.

Resident Evaluation by Nurse / Staff

This is form no. 3. It has to be filled by the nurses or the staff which are in contact with the



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Patient Medical Record / Chart Evaluation Proforma

Name of Resident _____

Location of Care or Interaction
(OPD/Ward/Emergency/Endoscopy Department) _____

S#		Poor	Fair	Good	V. Good	Excellent
1.	Basic Data on Front Page Recorded	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2.	Presenting Complaints written in chronological order	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3.	Presenting Complaints Evaluation Done	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.	Systemic review Documented	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.	All Components of History Documented	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.	Complete General Physical Examination done	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.	Examination of all systems documented	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8.	Differential Diagnosis framed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9.	Relevant and required investigations documented	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10.	Management Plan framed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11.	Notes are properly written and eligible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12.	Progress notes written in organized manner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13.	Daily progress is written	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14.	Chart is organized no loose paper	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15.	Investigations properly pasted	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16.	Abnormal findings in investigations encircled.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17.	Procedures done on patient documented properly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18.	Medicine written in capital letter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19.	I/v fluids orders are proper with rate of infusion mentioned	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20.	All columns of chart complete	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Poor: 0, Fair: 1, Good: 2, V.Good: 3, Excellent: 4

trainee and minimum three nurses should duly fill the form so that average value can be taken.



Preview Form

RESIDENT EVALUATION BY NURSE / STAFF

Please take a few minutes to complete this evaluation form. All information is confidential and will be used constructively. You need not answer all the questions

Name of Resident*

Location of care or interaction: (OPD/Ward/Emergency/Endoscopy Department)

Your position (Nurse, Ward Servant, Endoscopy Attendant)

S#		PROFESSIONALISM					
		Poor	Fair	Good	V Good	Excellent	Insufficient Contact
1.	Resident is Honest and Trustworthy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2.	Resident treats patients and families with courtesy, compassion and respect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3.	Resident treats me and other member of the team with courtesy and respect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.	Resident shows regard for my opinions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.	Resident maintains a professional manner and appearance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
INTERPERSONAL AND COMMUNICATIONS SKILLS							
6.	Resident communicates well with patients, families, and members of the healthcare team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.	Resident provides legible and timely documentation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8.	Resident respect differences in religion, culture age, gender sexual orientation and disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SYSTEMS BASED PRACTICE							
9.	Resident works effectively with nurses and other professionals to improve patient care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PATIENT CARE							
10.	Resident respects patient preferences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11.	Resident is reasonable accessible to patients	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12.	Resident take care of patient comfort and dignity during procedures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PRACTICE BASED LEARNING AND IMPROVEMENT							
13.	Resident facilitates the learning of students and other professionals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
COMMENTS							
14.	Please describe any praises or concerns or information about specific incidents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
THANK YOU for your time and thoughtful input. You play a vital role in the education and training of the internal medicine residents.							

Poor: 0, Fair: 1, Good: 2, V. Good: 3, Excellent: 4

Total Score _____/56

Patient Evaluation of Trainee

This is form no. 4. It has to be filled by the patients which are in contact with the trainee and minimum three patients should duly fill the form so that average value can be taken.



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Patient Evaluation of Trainee

Trainee Name: _____
Date of Evaluation: _____

1	Strongly Disagree
2	Disagree
3	Neutral
4	Agree
5	Strongly Agree

Please circle the appropriate number for each item using this scale. Please provide any relevant comments on the back of this form.

	This Trainee:	Scale				
1.	Introduces him/herself and greets me in a way that makes me feel comfortable. <i>ڈاکٹر صاحب نے خود کو متعارف کرایا اور خوش اسلوبی سے پیش آئے</i>	1	2	3	4	5
2.	Manages his/her time well and is respectful of my time. <i>ڈاکٹر صاحب نے میرے اور اپنے وقت کا خیال رکھا۔</i>	1	2	3	4	5
3.	Is truthful, upfront, and does not keep things from me that I believe I should know. <i>ڈاکٹر صاحب نے میرے مرض کی سورت حال پر ہی سچائی سے بیان کی۔</i>	1	2	3	4	5
4.	Talks to me in a way that I can understand, while also being respectful. <i>ڈاکٹر صاحب نے میرے مسائل کا خیال رکھا اور عزت سے میرا بیان کیا۔</i>	1	2	3	4	5
5.	Understands how my health affects me, based on his/her understanding of the details of my life. <i>ڈاکٹر صاحب نے میرے بیان میں میری صحت پر ذاتی زندگی کو مد نظر رکھا۔</i>	1	2	3	4	5
6.	Takes time to explain my treatment options, including benefits and risks. <i>ڈاکٹر صاحب نے میرے مرض کے علاج کے فائدے اور نقصانات کو سمجھایا بیان کیا۔</i>	1	2	3	4	5

Total Score _____/30

Resident's Evaluation of Faculty Teaching

This is form no. 5. It has to be filled by the trainee him / herself. This form is about the teaching methodology of the facilitators. This is not included in the final score. This is just for information and improvement of the faculty teaching.



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Resident/Fellow Evaluation of Faculty Teaching

Evaluator: _____

Evaluation of: _____

Date: _____

Evaluation information entered here will be anonymous and made available only in aggregated form.

S#		Strongly Disagree	Disagree Moderately	Disagree Slightly	Agree Slightly	Agree Moderately	Strongly Agree
PATIENT CARE							
1.	Teaches current scientific evidence for daily patient management*						
2.	Explains rationale behind clinical judgements/decisions*						
3.	Teaches clear diagnostic algorithms*						
4.	Teaches clear treatment algorithms*						
PATIENT CARE - OPERATIVE AND PROCEDURAL SKILLS							
5.	Teaches operative/procedural skills during cases*						
6.	Allows learners to perform operative/procedural skills when appropriate*						
MEDICAL KNOWLEDGE							
7.	Teaches relevant pathophysiology needed to evaluate patient medical conditions*						
8.	Teaches how/when to use-order-perform procedures/tests*						
9.	Teaching content adds significantly to my medical knowledge						
10.	Teaches the use of literature / evidence based medicine to support clinical decisions/teaching points*						

Final Evaluation Scoring Sheet



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FINAL Evaluation Scoring Sheet

Name of Resident	Name of Supervisor				Year of Training								
Date _____	Faculty #1 (165)	Faculty #2 (165)	Faculty #3 (165)	Average Score	Duration of Assessment _____								
					Specialty _____								
					Hospital _____								
					Unit _____								
Medical Patient Care (30)				___/30	Patient # 1 (30)	Patient # 2 (30)	Patient # 3 (30)	Medical Record Performa #1 (80)	Medical Record Performa #2 (80)	Medical Record Performa #3 (80)	Staff # 1 (56)	Staff # 2 (56)	Staff # 3 (56)
Medical Knowledge (30)				___/30									
Professionalism (35)				___/35									
Interpersonal and Communication Skills (20)				___/20									
System Based Practice (35)				___/35									
Practice Based Learning and Improvement (15)				___/15									
Overall Rating													
Average:	___/165				___/30			___/80			___/56		
											Grand Total		
											___/331		



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Logbook complete incomplete

Portfolio complete incomplete

Leave /absentees: _____

Comments

Supervisor Name (1) _____ Supervisor Name (2) _____ Head of Unit _____

Sign & Stamp _____ Sign & Stamp _____ Sign & Stamp _____

Self-Assessment Form

This is form no. 7. It has to be filled by the trainee him / herself. This is not included in the final score. This is just giving the idea how much the trainee is confident about him / herself.



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RESIDENT SELF-ASSESSMENT PROFORMA

Resident Name _____ Date _____

Year of Training _____ Hospital Name _____ Unit _____

<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Not Applicable	I rarely demonstrates (<25% of the time)	I do this Sometimes (25-50% of the time)	I do this most of the time (50-75% of the time)	I do this all the time (>75% of time)

1.	I am able to acquire accurate and relevant histories from my patients in an efficient, prioritized and hypothesis driven fashion.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
2.	I am able to seek and obtain appropriate, verified, and prioritized data from secondary sources (e.g. family, records and pharmacy)	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
3.	I am able to perform accurate physical examinations that are appropriately targeted to the patient's complaints.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
4.	I am able to synthesize all available data, including interview, physical exam, and preliminary lab data to define each patient's central clinical problem.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
5.	I am able to develop prioritized differential diagnoses, evidence based diagnostic and therapeutic plans for common conditions in Internal Medicine patients.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
6.	I am able to recognize situations with a need for urgent or emergent medical care, including life threatening conditions.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
7.	I am able to recognize when to seek additional guidance.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
8.	I am able to provide appropriate preventive care.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
9.	I am able to manage patients with common clinical disorders in the practice of outpatient internal medicine with minimal supervision.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
10.	I have performed several invasive procedures and documented them in my New Innovations log.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
11.	I demonstrate sufficient knowledge to diagnose and treat common conditions that require hospitalization.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
12.	I understand the indications for and the basic interpretation of common diagnostic tests.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
13.	I have reviewed my in service exam scores and believe my medical knowledge is where it should be for my level of training.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
14.	I am able to identify clinical questions as they emerge	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4



	in patient care activities.					
15.	I am responsive to feedback from all members of the healthcare team including faculty, residents, students, nurses, allied health professionals, patients and their advocates.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
16.	I am an active participant in teaching rounds and intern report.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
17.	I effectively use verbal and non verbal skills to create rapport with patients and their advocates.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
18.	I communicate effectively with other caregivers to ensure safe transitions in care.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
19.	My patient presentations on rounds are organized, complete and succinct.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
20.	I am able to communicate the plan of care to all the members of the healthcare team.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
21.	My documentation in the medical record is accurate, complete and timely.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
22.	I accept personal errors and honestly acknowledge them.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
23.	I demonstrate compassion and respect to all patients.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
24.	I complete my clinical, administrative and academic tasks promptly.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
25.	I maintain patient confidentiality	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
26.	I log my duty hours regularly and make every effort not to violate the rules	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
27.	When I feel I am too fatigued to work safely, I understand that I can call the chief medical residents for back-up.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
28.	I understand the unique roles and services provided by the workers in the local health delivery system (social workers, case managers, dept of public health etc...)	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
29.	I am able to identify, reflect on, and learn from critical incidents and preventable medical errors.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
30.	I do my best to minimize unnecessary care including tests, procedures, therapies and consultations.	<input type="checkbox"/> NA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

Please identify three specific clinical skills that you have improved over the past six months:

[Empty text box for clinical skills improvement]

Please set three specific goals for the next six months:

[Empty text box for goals for next six months]

Signature _____

Date _____

Direct Observation of Procedural Skills

This is form no. 8. It has to be filled by the supervisors, program directors, deans, coordinators and mentors. Marks are included in the evaluation. Supervisors or mentors observe and evaluate any procedure (short case).



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DIRECT OBSERVATION OF PROCEDURAL SKILLS (DOPS)

Please complete the questions using a cross Please use black ink and CAPITAL LETTERS

Doctor's Name: _____

PMDC Number: _____

Clinical setting:	<input type="checkbox"/> A&E	<input type="checkbox"/> OPD	<input type="checkbox"/> In-patient	<input type="checkbox"/> Acute Admission	<input type="checkbox"/> Other				
Procedure number	<input type="checkbox"/> <input type="checkbox"/>								
Assessor's position:	<input type="checkbox"/> Consultant	<input type="checkbox"/> SpSR	<input type="checkbox"/> SpR	<input type="checkbox"/> Specialty doctor	<input type="checkbox"/> Nurse	<input type="checkbox"/> Other			
Number of previous DOPS observed by assessor with any trainee	<input type="checkbox"/> 0		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5-9	<input type="checkbox"/> >9	
Number of times procedure performed by trainee:	<input type="checkbox"/> 0	<input type="checkbox"/> 1-4	<input type="checkbox"/> 5-9	<input type="checkbox"/> >10	Difficulty of procedure:		<input type="checkbox"/> Low	<input type="checkbox"/> Average	<input type="checkbox"/> High
Please grade the following areas	<input type="checkbox"/> Well below expectations	<input type="checkbox"/> Below Expectations	<input type="checkbox"/> Borderline	<input type="checkbox"/> Meets Expectations	<input type="checkbox"/> Above Expectations	<input type="checkbox"/> Well above expectations	<input type="checkbox"/> U/C*		
	1	2	3	4	5	6			
1 Demonstrate understanding of indications, relevant anatomy, technique of procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Obtaining informed consent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Demonstrate appropriate preparations pre-procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Appropriate analgesia or preparation pre-procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 Technical ability safe and sound	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6 Anesthetic technique	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 Seeks help where appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8 Post-procedure management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9 Communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10 Consideration of Patient/Professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11 Overall ability to perform procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
* U/C Please mark this if you have not observed the behaviour and therefore feel unable to comment.									
Please use this space to record areas of strength or any suggested development									
Anything especially good?					Suggestions for development:				
Have you had training in the use of this assessment tool? <input type="checkbox"/> Face to face <input type="checkbox"/> Have read guidelines <input type="checkbox"/> Web/ CD-Rom									
Assessor's signature: _____						Time taken for observation: (in minutes) <input type="checkbox"/>			
						Time taken for feedback <input type="checkbox"/>			
Assessor's Name: _____						Date (mm/yy) <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>			

SpSR - Specialty Senior Registrar
SpR - Specialty Registrar

*if appropriate Please note failure of return of all completed forms to your administrator is a priority issue
Acknowledgement: Adapted with permission of the American Board of Internal Medicine

Case Based Clinical Evaluation of Trainee

This is form no. 9. It has to be filled by the supervisors, program directors, deans, coordinators and mentors. Marks are included in the evaluation. Supervisors or mentors observe and evaluate the whole one case i.e. from history taking to management (long case).



CASE BASED CLINICAL EVALUATION OF TRAINEE

Resident's Name: _____
 Evaluator's Name(s): _____
 Hospital Name: _____
 Date of Evaluation: _____
 Traditional Track (10% Clinic) Primary Care Track (20% Clinic)

1	Unsatisfactory
2	Below Average
3	Average
4	Good
5	Superior

Please circle the appropriate number for each item using the scale above.

History		Scale				
1. Introduces himself and greet the patient.		1	2	3	4	5
2. Listen to the patient problems.		1	2	3	4	5
3. Shows politeness and empathy		1	2	3	4	5
4. Gathers proper information of present and past history		1	2	3	4	5
Physical Examination		Scale				
1. Physical examination done correctly		1	2	3	4	5
2. Pick physical signs correctly		1	2	3	4	5
3. Relevant examination done in detail		1	2	3	4	5
4. Interpret physical signs correctly		1	2	3	4	5
Assessment Plans		Scale				
1. Can list a logical differential diagnosis		1	2	3	4	5
2. Defend the diagnosis logically		1	2	3	4	5
3. Identifies patient active problems		1	2	3	4	5
Interpretation and Correlation of Laboratory and Imaging Data		Scale				
1. Can order logical and relevant investigations		1	2	3	4	5
2. Correctly interpret investigations (Laboratory and Imaging)		1	2	3	4	5
3. Formulate a logical management plan		1	2	3	4	5
4. Treatment plan is logical and relevant		1	2	3	4	5
5. Able to write a proper prescription		1	2	3	4	5

Pilot Study

As it was an innovative idea of our worthy Vice Chancellor Prof. Muhammad Umar so no one was sensitized to it. A big task was to train everyone on board as in this system the trainee is evaluated by multiple observers like seniors, paramedical staff and patients.

On the first step as a pilot study all the trainees were asked to submit self-assessment form (form 7). this process took a period of 6 months. All the forms were analyzed and soft copy was maintained. This gave us the baseline of our trainees that how much he or she is confident about his or her self. After taking feedback (from the trainees and supervisors) into account, system was implemented.

Orientation Seminar & Training Sessions

Orientation sessions are imperative to prepare the faculty members for commencement of new academic program. These sessions are meant to provide the guidance pertinent to course structure, expectation and support services available.

A grand orientation seminar was organized about University Residency Program at RMU. All the Deans, supervisors, Mentors, Program Directors and Program Coordinators were invited in this seminar. The honorable Vice Chancellor RMU Prof. Muhammad Umar, Chairman PGME Committee Prof. Muhammad Ajmal and Director DME Prof. Rai Muhammad Asghar gave an overview of University Residency Program (URP), briefed its road map and assured the audience of transparency in all the upcoming steps from enrollment in this program through CIP till award of degree.

2 Training sessions have been carried out regarding University Residency Programs.

- For facilitators (supervisors, mentors, program directors & program coordinators)
- For residents

These were basically organized to clear the ambiguities regarding filling of assessment proforma.

The pictures relevant to this prestigious event are shown below:



PROF. MUHAMMAD UMAR VC RMU IS DISTRIBUTING THEIR REG.



SUPERVISORS AND MENTORS ARE COLLECTING

UTMC Registration cards to RMU residents certificates at the end of orientation session

Other worth mentioning pictures related to orientation and training sessions regarding URP are depicted below:



PROF. MUHAMMAD UMAR VC RMU ADDRESSING THE QUERIES OF RMU RESIDENTS IN ORIENTATION SESSION OF



WORTHY FACULTY OF RMU ASKING QUESTIONS PERTINENT TO URP FORM THE PATRONS OF UNIVERSITY RESIDENCY PROGRAM



PGME CHAIRMAN PROF. MUHAMMAD AJMAL BRIEFING ABOUT UNIVERSITY RESIDENCY PROGRAM TO THE RESIDENTS



DR. RABBIA KHALID EXPLAINING ABOUT THE SCORING OF 360-DEGREE EVALUATION PROFORMA DESIGNED FOR URP

Such sessions are planned to be organized every 4 months to resolve the queries of RMU residents pertinent to their training.

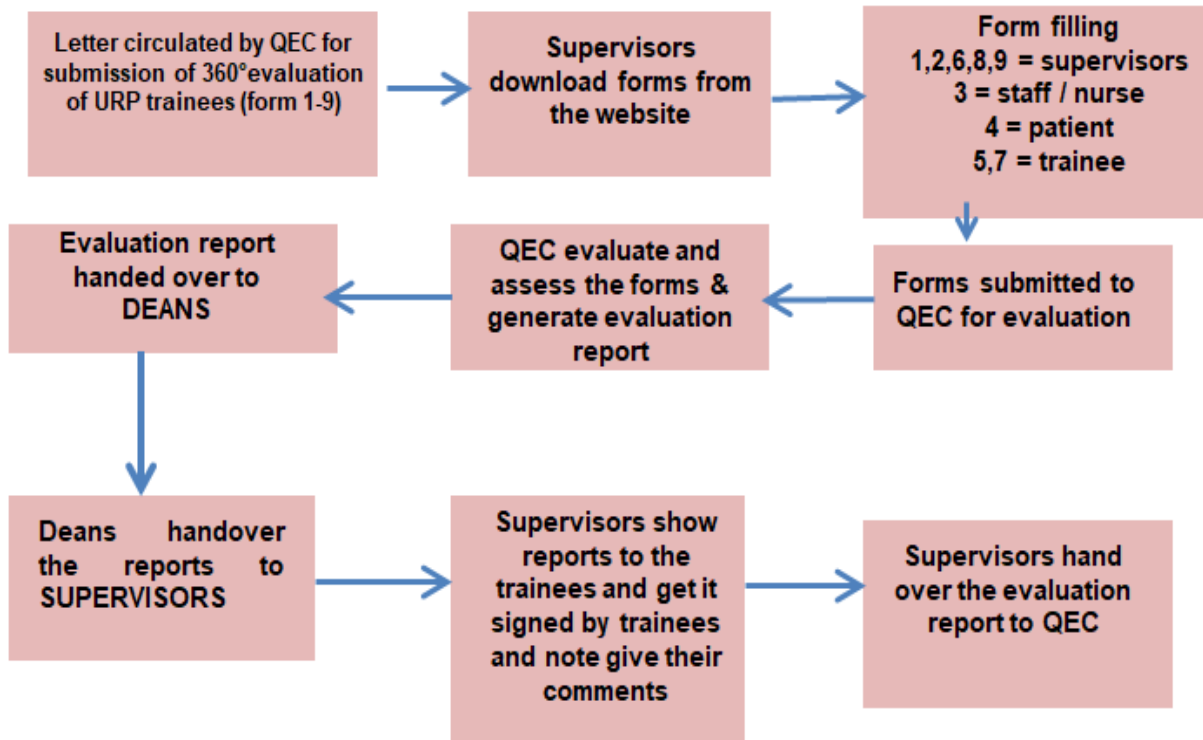
Data Management Levels

For proper entry of the data whole cycle is divided into three levels

1. Submission of the 360-degree evaluation forms
2. Data entry
3. Dispatch of the evaluation reports

So the

University Residency Program 360 Degree Evaluation STEPS



Evaluation Reports

Based on the data entered evaluation report of each trainee is prepared along with the recommendations duly signed by the Director QEC and Chairman PGME, which are the dispatched to the head of the departments. Facilitators then arrange a counseling session with the trainees. Trainees are provided with the reports and sign them. After counseling supervisors then enter the counseling notes and finally submit them back to QEC.



EVALUATION REPORT (6th CYCLE)

Note: 70% is required to be in the satisfactory zone



UTMC No: 021/RMU/MS SUR/HPH 2/1UL17
Name of Resident: Dr. Ziaullah Khalid
Discipline: MS Surgery

Unit / Hospital: SUR/HPH
Supervisor: Prof Idrees Anwar
Year of Starting: 7/7/2017

Supervisor Evaluation of Trainee: (1)

Medical Patient Care: 81 / 90 (90%)
Medical Knowledge: 81 / 90 (90%)
Professionalism: 105 / 105 (100%)
Communication Skills: 57 / 60 (95%)
System Based Learning: 96 / 105 (91%)
Practice Based Learning: 39 / 45 (87%)
Grand % = 93%

Patient Medical Record Evaluation: (2) Marks obtained: 225/240 (94%)

Resident Evaluation by Staff / Nurse: (3) Marks obtained: 162/ 168 (96%)

Resident Evaluation by Patient/Attendant: (4) Marks obtained: 87/ 90 (97%)

DOPS: (8) Marks obtained: 65/ 66 (98%)

Case Based Clinical Evaluation: (9) Marks obtained: 70/100 (70%)

Comments:

Well done. Keep the good work up.

Chairperson
Post Graduate Medical Education
Rawalpindi Medical University

Quality Enhancement Cell
Department of Medical Education
Rawalpindi Medical University

Candidate' signature _____

Supervisor's comments _____

So Far Cycles

360 Degree Evaluation Cycles	Duration	No. of Trainees Evaluated	Status
1 st cycle	Jan 18 - June 18	138	Complete
2 nd cycle	July 18 – Dec 18	149	Complete
3 rd cycle	Jan 19- June 19	161	Complete
4 th cycle	July 19 – Dec 19	220	Complete
5 th cycle	Jan 20- June 20	230	Cancelled due to pandemic
6 th cycle	July 20 – Dec 20	249	Complete
7 th cycle	Jan 21- June 21	300	Complete
8 th cycle	July 21 – Dec 21	263	Now submitting

Outstanding University Resident Award

Quality Enhancement Cell arranged certificate distribution ceremony for the top ten residents of the 1st cycle of the 360-degree evaluation of URP.



Position No.	Supervisor	Trainee	Total	Obtained	%
1.	Prof. Khurram	Dr. Hassan Hayat Durrani	993	965	97.18 %
2.	Dr. Shawana	Dr. Khizra Hashmi	993	894	90.03 %
3.	Prof. Idrees Anwar	Dr. Adil Shafi War	993	873	87.91 %
4.	Prof. Jahangir	Dr. Jamal Nasir Malik	993	832	83.78 %
5.	Dr. Imran Saeed	Dr. M. Atif Shahzad	993	822	82.77 %
6.	Prof. M. Hanif	Dr. Saira Khan	993	817	82.27 %
6.	Prof. Riaz Ahmad Sheikh	Dr. Fahad Amin	993	817	82.27 %
7.	Dr. Naveed Sarwar	Dr. Shehroz Ahmed	993	800	80.56 %
8.	Prof. Idrees Anwar	Dr. Abdul Basit Waqar	993	782	78.75 %
9.	Prof. Musharaf Baig	Dr. Muzammal Hussain	993	766	77.13 %
10.	Prof. Nadeem Akhtar	Dr. Jazib Ijaz	993	757	76.23 %

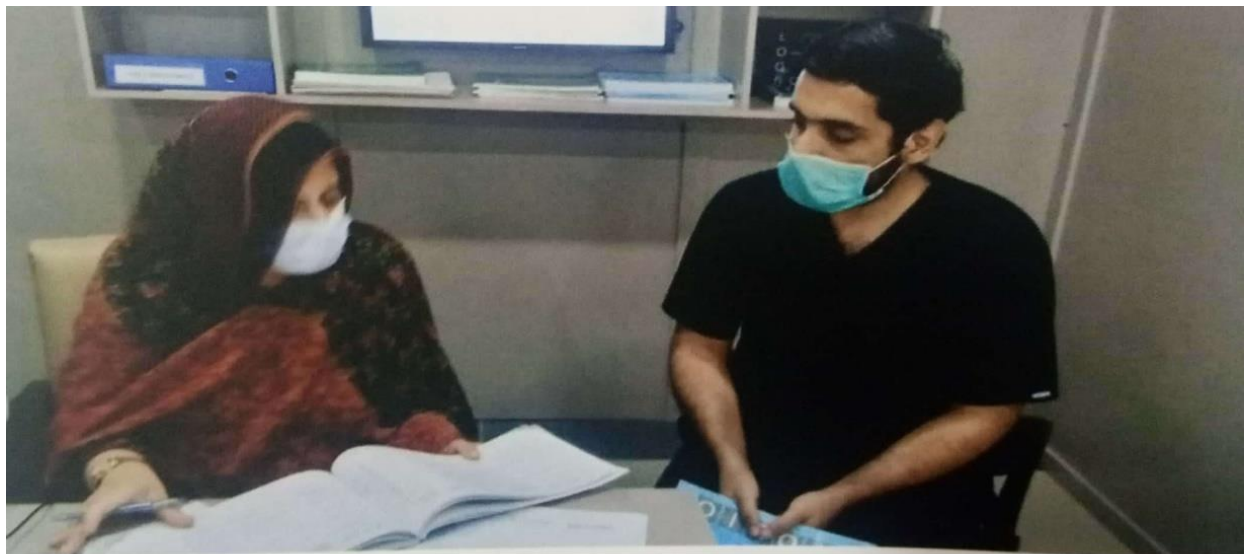
Few highlights of the ceremony



Communication

Communication of the multi-source feedback results is a vital part of University Residency Program (URP). Without communicating the results of the feedback, purpose of implementing URP will die. For this purpose, QEC and UTMC regularly arranged sessions with different departments on individual basis. Glimpse and different minutes of meetings are as follows:

Glimpse of Different Counselling Meetings



CS Scanned with CamScanner

Glimpse of Different Counselling Meetings and Feedback



Glimpse of Different Counselling Meetings and Feedback





**DEPARTMENT OF MEDICAL EDUCATION
RAWALPINDI MEDICAL UNIVERSITY, RAWALPINDI**



Ref. No. LIRTK 260 /DME

Date: 13-12-2021

Minutes of Meeting (11-12-2021)

A meeting was held in Office of the Vice Chancellor, RMU Main campus on 11-12-2021. The meeting was chaired by Prof. Muhammad Umar, Vice Chancellor RMU. The agenda of this meeting was:

Assessment of University residents

Following doctors attended this meeting:

1. Prof. Rai Muhammad Asghar, Controller of Examinations, RMU
2. Dr. Syed Muarradhussain, Deputy Controller of Examinations, RMU
3. Mr. Syed Rizwan Saeed, Manager Examinations, RMU
4. Dr. Uzma Hayat, Assistant Director Research & Development, RMU
5. Dr. Rizwana Shahid, Assistant Director DME, RMU

The following decisions were made in this meeting:

Revised curriculum and assessment scheme 2021 will be implemented on the university residents inducted from July 2020. Only the residents inducted from July 2020 and onwards will be supposed to appear in all the yearly exams devised for 2 groups of residents as illustrated below:

Assessments for residents enrolled in 4 years training program	Assessments for residents enrolled in 5 years training program
In training assessment- 1 st year	In training assessment- 1 st year
Mid Training Assessment (MTA)	Mid Training Assessment (MTA)
In training Assessment – 3 rd year	In training Assessment – 3 rd year
Final Training Assessment (FTA)	In training Assessment – 4 th year
	Final Training Assessment (FTA)

The university residents who were inducted in training before July 2020 will be supposed to appear in 2 exams which are:

- Mid Training Assessment (MTA)
- Final Training Assessment (FTA)

Moreover, it was decided that postgraduate exams of university residents will be taken only twice a year i.e; during January and July.


The meeting adjourned with vote of thanks by the Vice Chancellor.

No. & Date Even

Copy for information to:

1. Controller of Examinations, RMU
2. Assistant Registrar, RMU
3. All concerned
4. Master file


Dr. Rizwana Shahid
Assistant Director DME
RMU, Rawalpindi


Prof. Jahangir Sarwar Khan
Dean of Postgraduate Studies
RMU, Rawalpindi



DEPARTMENT OF MEDICAL EDUCATION
RAWALPINDI MEDICAL UNIVERSITY, RAWALPINDI



Ref. No. URTMC-261 DME

Date: 15-01-2022

Minutes of Orientation Session (13-01-2022)

An orientation session was organized for the supervisors of Medicine & Allied (Internal Medicine, Cardiology, Pulmonology, Nephrology, Dermatology, Gastroenterology) and their residents in Heritage Hall of RMU Main campus on 13-01-2022 at 12:00 pm. The agenda of this session was "Assessments of University Residents".

The speakers in this session were:

- Dr. Rabbia Khalid who gave a comprehensive presentation on 360 degree evaluation
- Dr. Rizwana Shahid elaborated the eligibility criteria for all assessments along with layout of logbooks' scoring
- Prof. Muhammad Umar, VC RMU discussed the planner for rotations in accordance with the logbooks designed for university residents.

This meeting was attended by Prof. Jahangir Sarwar Khan, Dean of Postgraduate Studies, all supervisors of Medicine & Allied disciplines along with their MD residents who also brought their logbooks for clarification of queries (Attendance of audience is attached herewith).

Prof. Muhammad Umar requested all the supervisors to send a plan of rotations of their residents in accordance with the planner to Incharge URTMC. Moreover, it was requested by all to streamline the rotations of all residents in order to ensure the fulfillment of eligibility criteria for all the assessments planned in July 2022.

Dr. Rizwana Shahid announced the names of trainees whose logbooks scoring submission in DME was pending, deemed necessary for declaration of In Training Assessment- 1st year result by the Examination department of RMU.

Dr. Rabbia Khalid reminded the supervisors for submission of 360 degree evaluation proforma for 7th and 8th cycle.


The meeting adjourned with vote of thanks by Vice Chancellor RMU and Dean of Postgraduate studies.

No. & Date Even

Copy for information to:

1. Controller of Examinations, RMU
2. Assistant Registrar, RMU
3. All concerned
4. Master file


Dr. Rizwana Shahid
Assistant Director DME
RMU, Rawalpindi


Prof. Jahangir Sarwar Khan
Dean of Postgraduate Studies
RMU, Rawalpindi



**DEPARTMENT OF MEDICAL EDUCATION
RAWALPINDI MEDICAL UNIVERSITY, RAWALPINDI**



Ref. No. UR TMC-262 /DME

Date: 24-03-2021

Minutes of Meeting (20-03-2021)

A meeting was held in Academic Council hall of VC Office of RMU /NTB on 20-03-2021. The meeting was chaired by Prof. Muhammad Umar, Vice Chancellor RMU. The agenda of this meeting was:

Registration of RIC & University of Sargodha residents with RMU

Following doctors attended this meeting:

1. Prof. Jahangir Sarwar Khan, Dean of Postgraduate Studies, RMU
2. Dr. Rizwana Shahid, Assistant Professor Community Medicine

(List of RIC & Sargodha University residents who attended this meeting is attached herewith as attendance sheet).

The following decisions were made in this meeting:

1. Prof. Muhammad Umar, Vice Chancellor RMU recommended RIC residents to attend Deans meeting at RMU along with their supervisors to perceive how much our supervisors and respective Deans are accountable regarding training of their residents.
2. Prof. Umar confessed that a presentation will be given by him in RIC and Sargodha University so that their faculty / supervisors can understand the standard of training programs implemented at RMU and the frequent assessments associated with them.
3. Representatives from RIC and Sargodha University were asked to provide complete data of their residents (date of joining, workshops / rotations / synopsis approval status etc) who are willing to register with RMU for their training.

The meeting adjourned with vote of thanks by the Vice Chancellor.

Dr. Rizwana Shahid
Assistant Director DME
RMU, Rawalpindi

Prof. Jahangir Sarwar Khan
Dean of Postgraduate Studies
RMU, Rawalpindi

No. & Date Even

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1. Assistant Registrar, RMU
2. All concerned
3. Master file



DEPARTMENT OF MEDICAL EDUCATION
RAWALPINDI MEDICAL UNIVERSITY, RAWALPINDI



Ref. No. URTMC-263 /DME

Date: 10-02-2021

Minutes of Meeting (6-02-2021)

A meeting was held in VC Office of RMU /NTB on 6-2-2021. The meeting was chaired by Prof. Muhammad Umar, Vice Chancellor RMU. The agenda of this meeting was:

- **Incorporation of revised MS / MD Training program**


This meeting was attended by the following doctors:


1. Prof. Jahangir Sarwar Khan, Dean of Postgraduate Studies RMU
2. Dr. Rizwana Shahid, Incharge URTMC
3. Dr. Uzma Hayat, Incharge Research Unit, RMU
4. Dr. Zahid Iqbal, resident Diagnostic Radiology RMU
5. Dr. Jamal Nasir Malik, resident MS Surgery RMU
6. Dr. Waqar Hussain, resident MD Medicine RMU
7. Dr. Fahad Amin, resident MS Orthopedics RMU
8. Dr. Faisal Shiraz, resident MD Medicine, RMU

The following issues were discussed in this meeting.

- Prof Muhammad Umar elaborated the whole revised MS/ MD Training Program including its Assessments to the residents. He confessed that assessment of the residents will be done by the end of each year of Training.
- Residents agreed on endorsement of revised curricula. Moreover it was decided that a Resident Committee will be formulated to resolve the issues of the residents. Residents also appreciated the stringent efforts of Vice Chancellor RMU in showing keen interest towards improvement in postgraduate Training.
- It was assured to the residents that they will be sent to the sister hospitals to do their rotations. In addition, Short Intensive Preparatory Course for all those residents was also planned who are intended to appear in Mid Training Assessment (MTA) during July 2021.
- It was decided to issue the transcript to the Postgraduate residents along with their degrees as well by RMU.

The meeting adjourned with vote of thanks by the Vice Chancellor RMU.


Dr. Rizwana Shahid
Assistant Director DME
RMU, Rawalpindi


Prof. Jahangir Sarwar Khan
Dean of Postgraduate Studies
RMU, Rawalpindi

No. & Date Even

Copy for information to:

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2. All concerned
3. Master file



DEPARTMENT OF MEDICAL EDUCATION
RAWALPINDI MEDICAL UNIVERSITY, RAWALPINDI



Ref. No. URPMC-264/DME

Date: 24-01-2022

Minutes of Meeting (22-01-2022)

A meeting was held in VC Office of RMU Main Campus on 22-01-2022. The meeting was chaired by Prof. Muhammad Umar, Vice Chancellor RMU. The agenda of this meeting was:


Monitoring of University Residency Program


This meeting was attended by the following officers:

1. Prof. Jahangir Sarwar Khan, Dean of Postgraduate Studies, RMU
2. Dr. Rizwana Shahid, Assistant Director Medical Education, RMU
3. Mr. JavedBhatti, retired Office Superintendent, RMU

The following issues were discussed in this meeting.

- A letter regarding deficiencies notified in Pediatrics department of DHQ Hospital essential to be rectified for FCPS program accreditation was also discussed in this meeting. Solution to all highlighted deficiencies was to be communicated to Dr. HinaSattar, Assistant Professor of Pediatrics DHQ Hospital for rectification at the earliest.
- Statutes and regulations of postgraduate training, monitoring, assessments and evaluation will be finalized in discussion with Controller of examinations, Dean of Postgraduate Studies and Assistant Registrar of RMU.
- Focal person from each department should be nominated for monitoring the training and rotations of residents. Rotation schedule from each department should be submitted in DME
- Dr. Rizwana Shahid was directed by VC RMU to circulate a letter from VC Office to all Deans for submission of their revised updated MS / MD curricula 2022 to Department of Medical Education and to request all supervisors for submission of their residents' rotations planner.
- As per CPSP rules and regulations, supervisors in URP should have 5 years post-fellowship experience. In addition, it is imperative for the supervisors to have attended all supervisory workshops for their capacity building. In extraordinary case, Senior Registrar fulfilling the required supervisory criteria will perform duties of supervisor.
- All official notifications pertinent to statutes and regulations will be notified by Assistant Registrar RMU. The meeting adjourned with vote of thanks by the Vice Chancellor RMU.


Dr. Rizwana Shahid
Assistant Director DME
RMU, Rawalpindi


Prof. Jahangir Sarwar Khan
Dean of Postgraduate Studies
RMU, Rawalpindi

No. & Date Even

Copy for information to:

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2. All concerned
3. Master file



DEPARTMENT OF MEDICAL EDUCATION
RAWALPINDI MEDICAL UNIVERSITY, RAWALPINDI



Ref. No. LR/TMC-265/DME

Date: 01-02-2022

Minutes of Meeting (31-01-2022)

A meeting was held in VC Office of RMU Main NTB on 31-01-2022. The meeting was chaired by Prof. Muhammad Umar, Vice Chancellor RMU. The agenda of this meeting was:

Research & Assessments of University Residents

This meeting was attended by the following doctors:

1. Prof. Jahangir Sarwar Khan, Dean of Postgraduate Studies RMU
2. Dr. Rizwana Shahid, Assistant Director Medical Education, RMU
3. Ms. SundasIqbal, Assistant Registrar, RMU

The following issues were discussed in this meeting.

1. Assessment model in MTA book will be revised and upgraded in discussion with Prof. SamiaSarwar. Title of MTA book will be revised as Postgraduate Training Assessment Model.
2. 6 core competencies as per ACGME guidelines should always be taken into consideration while assessing the residents. A meeting with Prof. BushraKhaar and Prof. SamiaSarwar will be done in this regard.
3. Scoring of research based competencies for residents will be done by asking a set of questions from them as given on page No. 10 & 11 in research electives logbook. Dr. Sarah Rafi from R&D will be nominated for this purpose. This will be implemented from current 1st year inducted in July 2021.
4. Calendaring of research activities of the university residents will be carried out in discussion with Dr. Sidra Hamid and Dr. OmaimaAsif.
5. Research cycles for both 4 and 5 years training programs will be printed at the end of each research electives logbook.
6. An orientation session will be arranged for university residents to give a comprehensive overview regarding postgraduate research curriculum and planner.
7. A self-evaluation proforma for university residents will be designed by Dr. Faiza in order to gauge their acquisition with research based competencies.
8. Research curriculum and planners should be sent to all residents inducted during 2021 and their supervisors through whats app and will also be uploaded on RMU Research Dashboard by university residents. These will also be uploaded on RMU website very soon.
9. Result of the In Training Assessment -1s year will be sent to all supervisors along with a feedback proforma. Supervisors will be supposed to send back duly filled feedback proforma to the residents after counseling their respective residents. Supervisors willing to review the attempted MCQs of their residents can visit Examination department of RMU for this purpose.
10. Growth chart for monitoring the trainees' academic growth will be designed by Dr. Khaula Noreen.

11. An orientation session for all residents and supervisors other than those of Medicine & Allied disciplines will be organized on 09-02-2022 at RMU Main Campus Tipu Road in order to streamline the assessment of university residents.
12. There will be a meeting on Friday of those supervisors / departments whose MTA Jan 2022 result was 0%.
13. Dr. Rizwana Shahid and Ms. SundasIqbal will check RMU website for any deficient document.
14. Dr. Rizwana was assigned a task to do logbook assessment of the residents in alignment with 6 core competencies.

The meeting adjourned with vote of thanks by the Vice Chancellor RMU.



Dr. Rizwana Shahid
Assistant Director DME
RMU, Rawalpindi



Prof. Jahangir Sarwar Khan
Dean of Postgraduate Studies
RMU, Rawalpindi

No. & Date Even

Copy for information to:

1. Assistant Registrar, RMU
2. Dr. Khaula Noreen, Associate Professor Community Medicine, RMU
3. All concerned
4. Master file

SECTION-IV
University Residents
Structured Evaluation Report (SER)

Structured Evaluation Report (SER) of University Residents

After the successful cycles Quality Enhancement Cell compared the progress and plotted a graph for each trainee. This have been termed as Structured Evaluation report (SER). SER of 274 residents has been prepared and shared with their respective supervisors. This report has following components

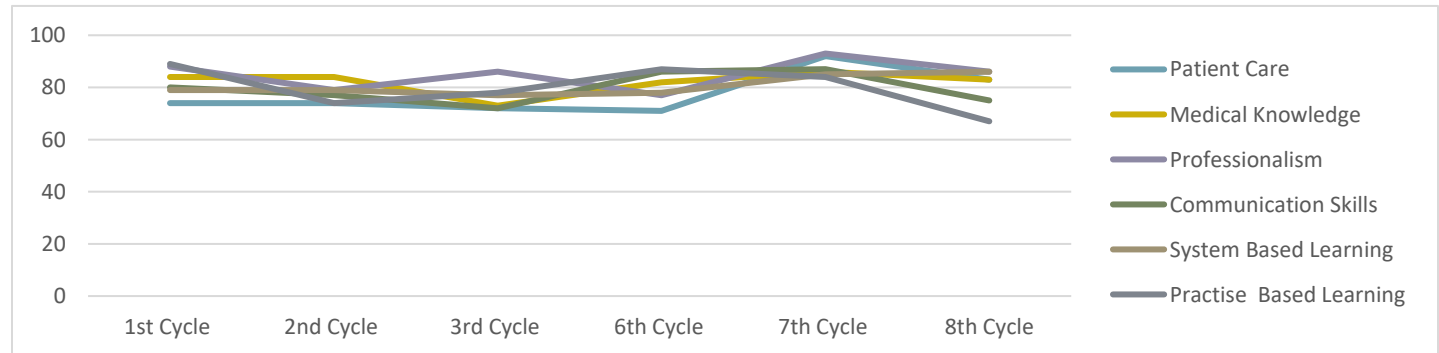
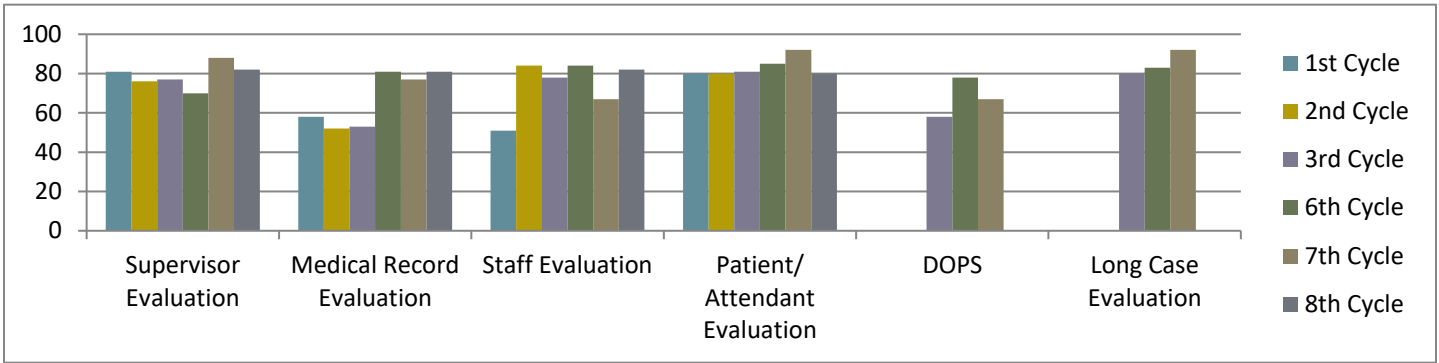
1. Analysis of six core competencies of each trainee in the form of graph.
2. 360-degree feedback analysis
3. Continuous Internal Assessment (CIA)
4. Exam status
5. Rotation Assessment Table
6. Research status

These reports were shared with the supervisors confidentially. They were advised to arrange counseling meeting with their trainees, discuss the feedback with them and identify the weak areas with them.

Specialty: Anesthesia
Supervisor: Dr. Abeera Zareen
Hospital: Banazir Bhutto Hospital

Name of Resident: Dr. Nazish Kazam
Discipline: MS Anesthesia

Supervisor: Dr. Abeera Zareen
Year of Starting: 7/8/2017



Average Performance of Core Competencies:

Patient Care:	77.7%	Communication Skills:	79.5%
Medial Knowledge:	82.0%	System Based Learning:	80.7%
Professionalism:	84.8%	Practice Based Learning:	79.8%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment)

Table Vivas Total Marks=50						MCQ Tests Total Marks=50					Logbook Total Marks=50					360 evaluation Total Marks=50					Grand Total			
O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	871/1200 (72%)
c	v	c	n	b	r	c	v	c	n	b	r	c	v	c	n	b	r	c	v	c	n	b	r	
38	35	30	38	40	39	35	41	38	42	45	32	38	36	35	34	39	28	32	30	41	38	32	35	
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	

CIA: OTs (6 months-Collective assessment)

DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Logbook Total marks=60	Grand Total marks=180
40/60	50/60	48/60	138/180=76%

Exam Status

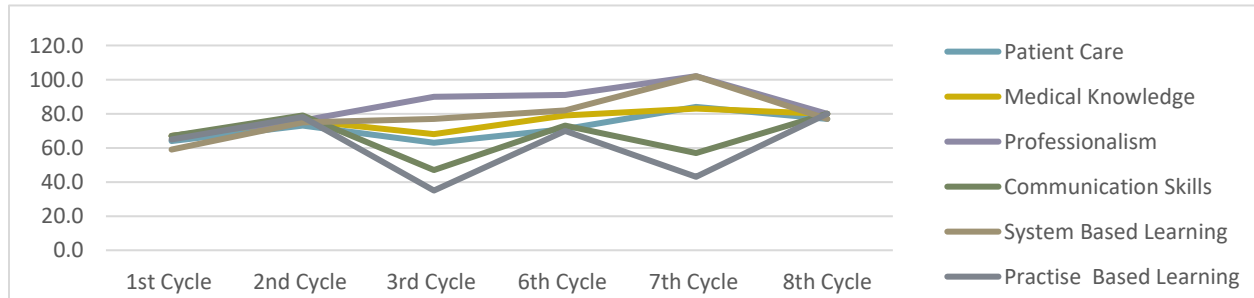
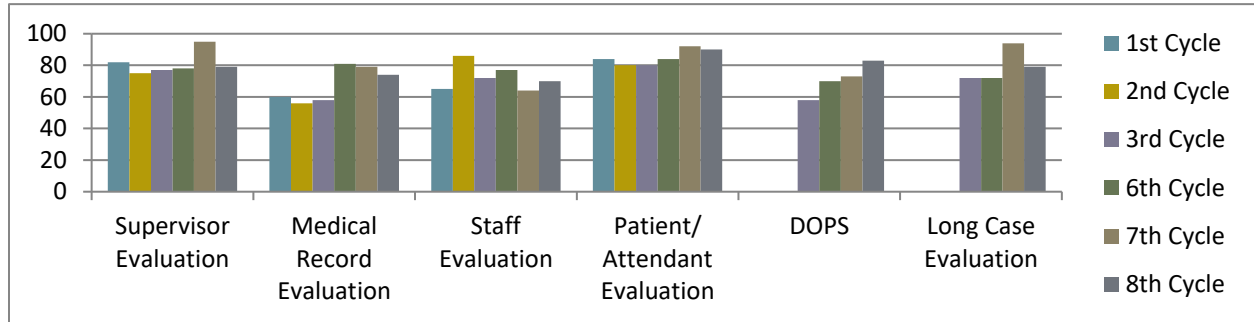
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Not Appear	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Rabia Sarwar
Discipline: MS Anesthesia

Supervisor: Dr. Abeera Zareen
Year of Starting: 1/29/2018



Average Performance of Core Competencies:

Patient Care:	72.0%	Communication Skills:	67.2%
Medial Knowledge:	75.5%	System Based Learning:	78.7%
Professionalism:	84.3%	Practice Based Learning:	61.8%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment)																									
Table Vivas Total Marks=50						MCQ Tests Total Marks=50						Logbook Total Marks=50						360 evaluation Total Marks=50						Grand Total	
O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	896/1200 (74%)	
c	v	c	n	b	r	c	v	c	n	b	r	c	v	c	n	b	r	c	v	c	n	b	r		
t	v	c	n	b	r	t	v	c	n	b	r	t	v	c	n	b	r	t	v	c	n	b	r		
40	41	39	38	41	39	40	38	36	32	34	40	44	34	32	34	30	38	40	34	42	36	38	40		
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50		
CIA: OTs (6 months-Collective assessment)																									
DOPS Total marks =60				Presentations Journal clubs, topic presentations. Total marks=60								Logbook Total marks=60						Grand Total marks=180							
42/60				52/60								51/60						145/180=80%							

Exam Status

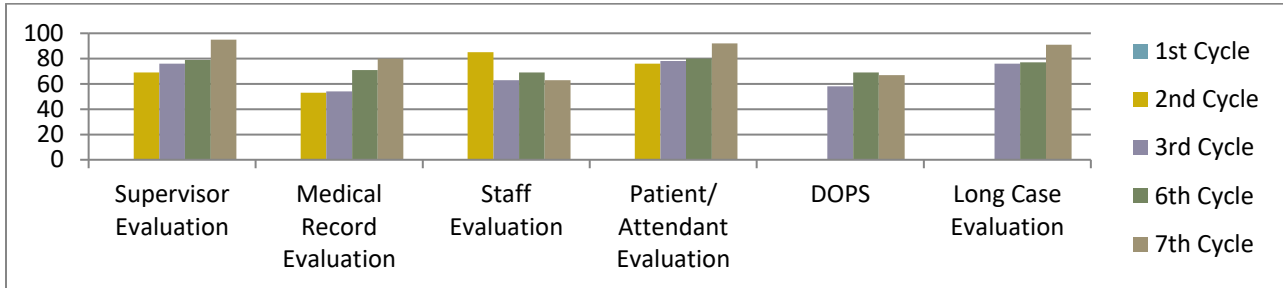
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

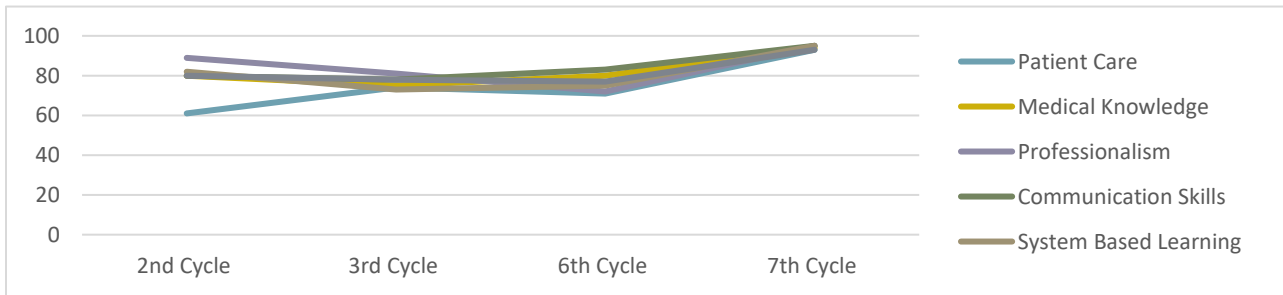
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. M. Yousaf Dar
Discipline: MS Anesthesia

Supervisor: Dr. Abeera Zareen
Year of Starting: 8/11/2018



Average Performance of Core Competencies:



Patient Care: 74.8% Communication Skills: 84.0%
 Medical Knowledge: 82.3% System Based Learning: 81.3%
 Professionalism: 84.3% Practice Based Learning: 82.0%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment)

Table Vivas Total Marks=50						MCQ Tests Total Marks=50						Logbook Total Marks=50						360 evaluation Total Marks=50						Grand Total
O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	867/1200 (72%)
c	v	c	n	b	r	c	v	c	n	b	r	c	v	c	n	b	r	c	v	c	n	b	r	
34	30	38	40	30	38	35	38	42	45	32	35	35	35	38	41	39	40	35	40	24	38	35	30	
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	

CIA: OTs (6 months-Collective assessment)

DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Logbook Total marks=60	Grand Total marks=180
45/60	42/60	51/60	138/180=76%

Exam Status

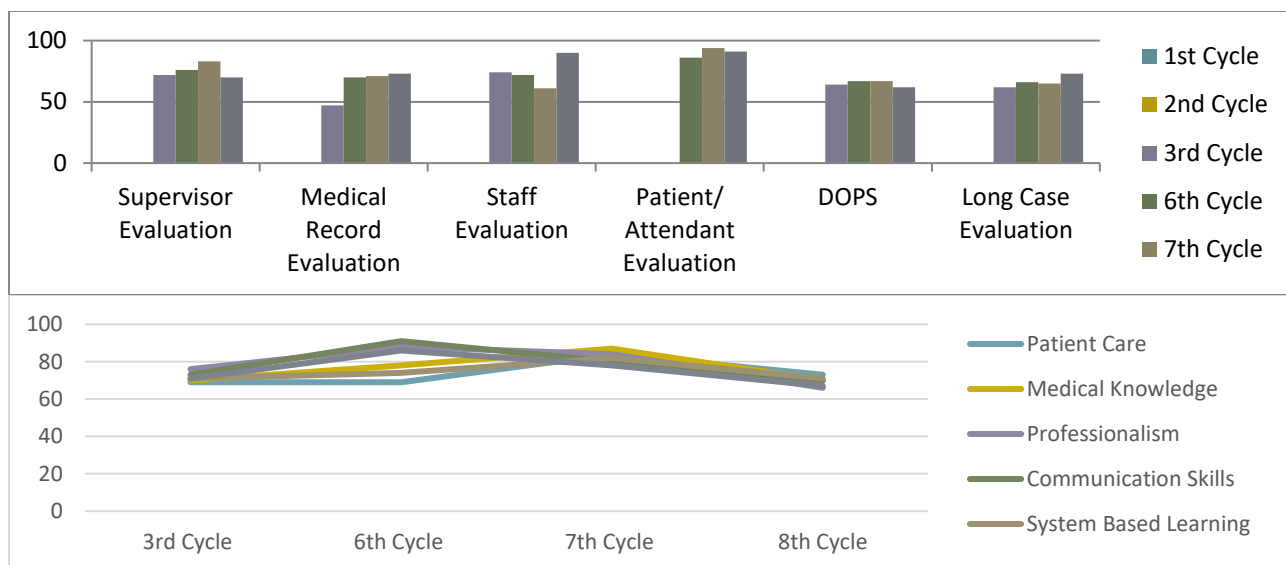
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Raheel Ahmed Baig
Discipline: MS ANAESTHESIA

Supervisor: Dr. Abeera Zareen
Year of Starting: 3/27/2019



Average Performance of Core Competencies:

Patient Care:	73.8%	Communication Skills:	78.5%
Medial Knowledge:	76.3%	System Based Learning:	74.5%
Professionalism:	78.5%	Practice Based Learning:	75.5%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment)

Table Vivvas Total Marks=50						MCQ Tests Total Marks=50						Logbook Total Marks=50						360 evaluation Total Marks=50						Grand Total
O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	867/1200 (72%)
c	v	e	a	e	r	c	v	e	a	e	r	c	v	e	a	e	r	c	v	e	a	e	r	
34	30	38	40	30	38	35	38	42	45	32	35	35	35	38	41	39	40	35	40	24	38	35	30	
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	

CIA: OTs (6 months-Collective assessment)

DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Logbook Total marks=60	Grand Total marks=180
43/60	49/60	53/60	145/180=80%

Exam Status

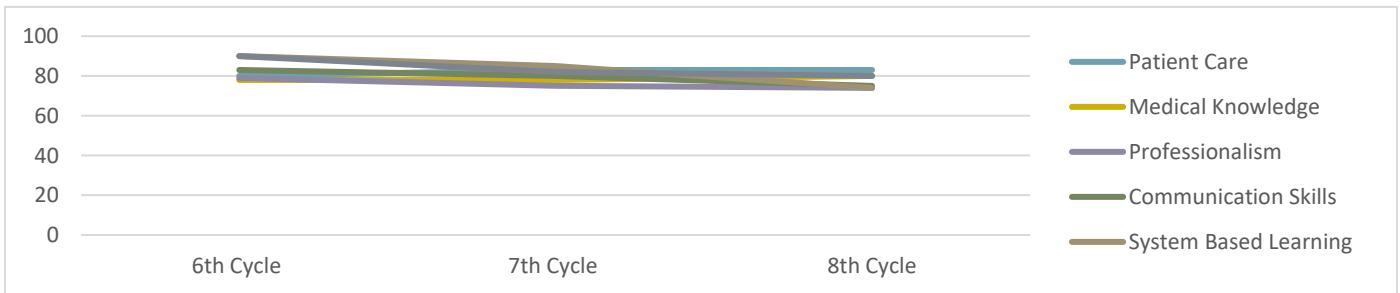
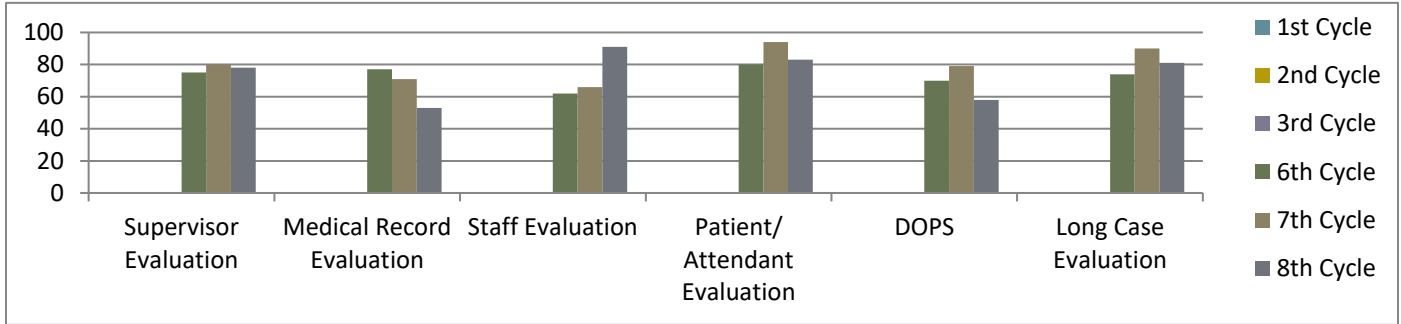
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Fayzan Farooq
Discipline: MS Anesthesia

Supervisor: Dr Abeera Zareen
Year of Starting: 03-09-2019



Average Performance of Core Competencies:

Patient Care: 82.0% Communication Skills: 79.3%
 Medical Knowledge: 78.7% System Based Learning: 83.0%
 Professionalism: 76.0% Practice Based Learning: 84.0

Internal Evaluation of MS residents: OTs (6 months-Collective assessment)																								
Table Vivas Total Marks=50						MCQ Tests Total Marks=50						Logbook Total Marks=50						360 evaluation Total Marks=50						Grand Total
O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	
36	35	35	38	42	30	38	40	30	38	40	35	35	35	35	32	31	32	39	35	36	48	35	30	860/1200 (71%)
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	
CIA: OTs (6 months-Collective assessment)																								
DOPS Total marks =60			Presentations Journal clubs, topic presentations. Total marks=60									Logbook Total marks=60						Grand Total marks=180						
38/60			50/60									41/60						129/180=71%						

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Fail	NA	NA	NA

Research Status

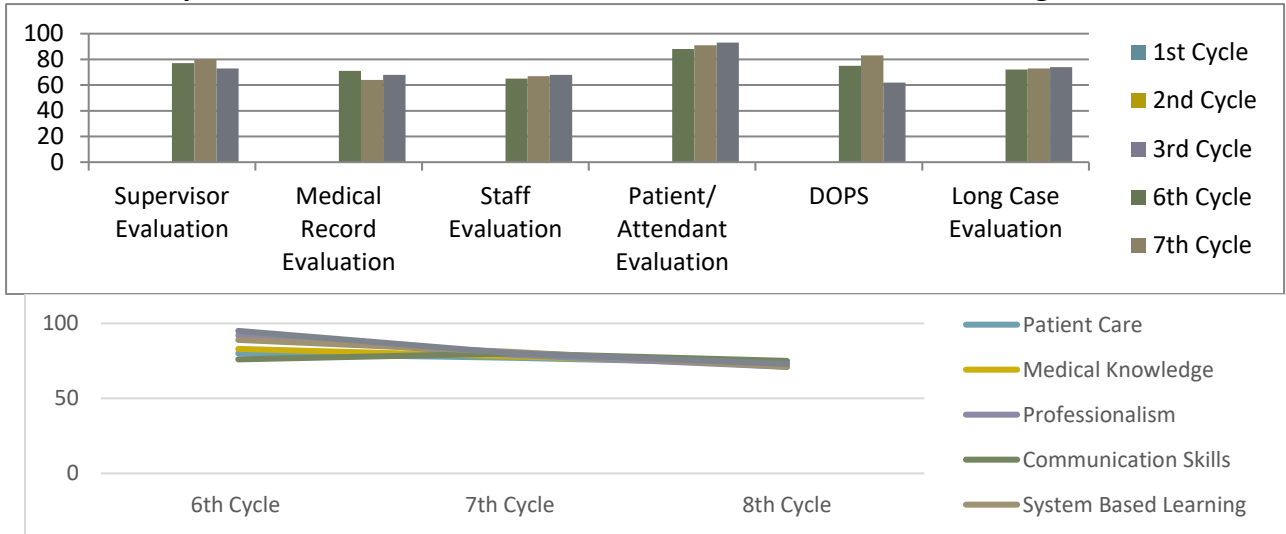
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Kaleem Ahmed Nazir

Supervisor: Dr Abeera Zareen

Discipline: MS Anesthesia

Year of Starting: 25-02-2020



Average Performance of Core Competencies:

Patient Care:	76.7%	Communication Skills:	77.0%
Medical Knowledge:	78.0%	System Based Learning:	80.3%
Professionalism:	80.7%	Practice Based Learning:	82.7%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment)

Table Vivas Total Marks=50						MCQ Tests Total Marks=50						Logbook Total Marks=50						360 evaluation Total Marks=50						Grand Total
O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	874/1200 (72%)
c	o	e	a	e	a	c	o	e	a	e	a	c	o	e	a	e	a	c	o	e	a	e	a	
t	v	c	n	b	r	t	v	c	n	b	r	t	v	c	n	b	r	t	v	c	n	b	r	
35	34	30	38	40	39	35	41	38	42	45	32	38	36	35	34	39	28	32	41	38	32	35	37	
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	

CIA: OTs (6 months-Collective assessment)

DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Logbook Total marks=60	Grand Total marks=180
45/60	42/60	51/60	138/180=76%

Exam Status

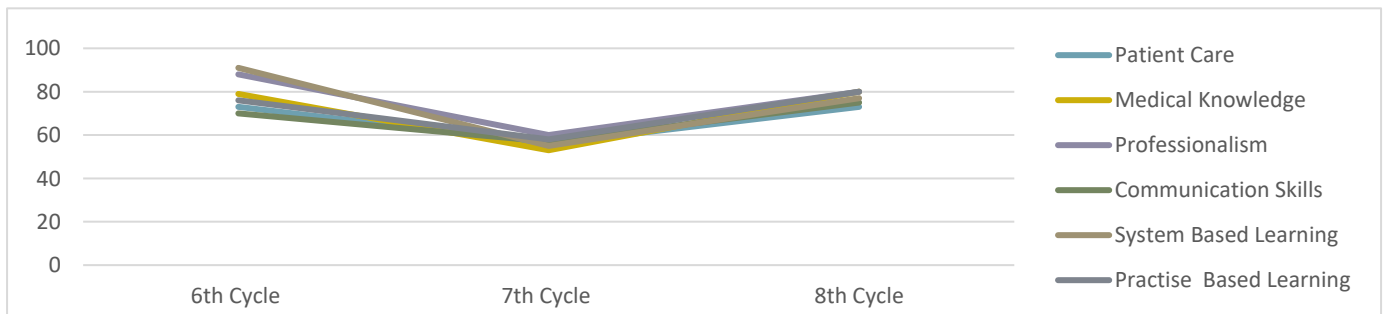
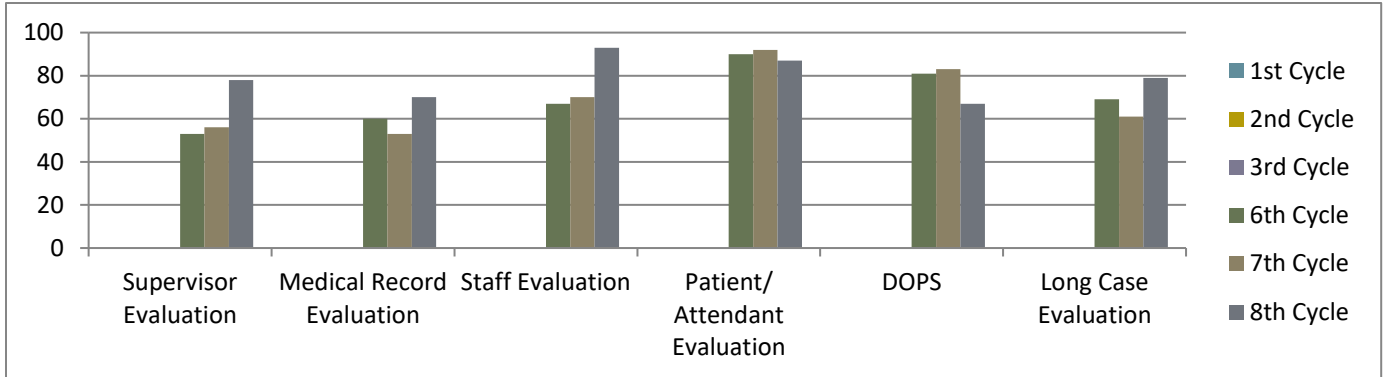
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: M.Noman Aslam
Discipline: MS Anesthesia

Supervisor: Dr Abeera Zareen
Year of Starting: 01-03-2021



Average Performance of Core Competencies:

Patient Care:	67.3%	Communication Skills:	63.3%
Medial Knowledge:	70.7%	System Based Learning:	74.3%
Professionalism:	76.0%	Practice Based Learning:	71.3%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment)																										
Table Vivas Total Marks=50					MCQ Tests Total Marks=50					Logbook Total Marks=50					360 evaluation Total Marks=50					Grand Total						
O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M			
c	o	e	a	e	a	c	o	e	a	e	a	c	o	e	a	e	a	c	o	e	a	e	a			
t	v	c	n	b	r	v	c	n	b	r	v	c	n	b	r	v	c	n	b	r	v	c	n	b	r	
35	30	40	30	38	35	38	42	45	32	35	35	38	41	39	40	35	35	38	24	38	35	30	38	866/1200 (72%)		
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50			

CIA: OTs (6 months-Collective assessment)			
DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Logbook Total marks=60	Grand Total marks=180
47/60	38/60	49/60	134/180=74%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

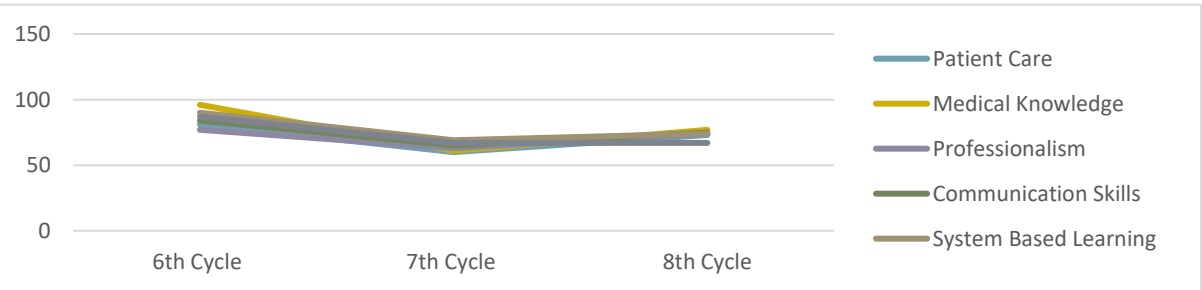
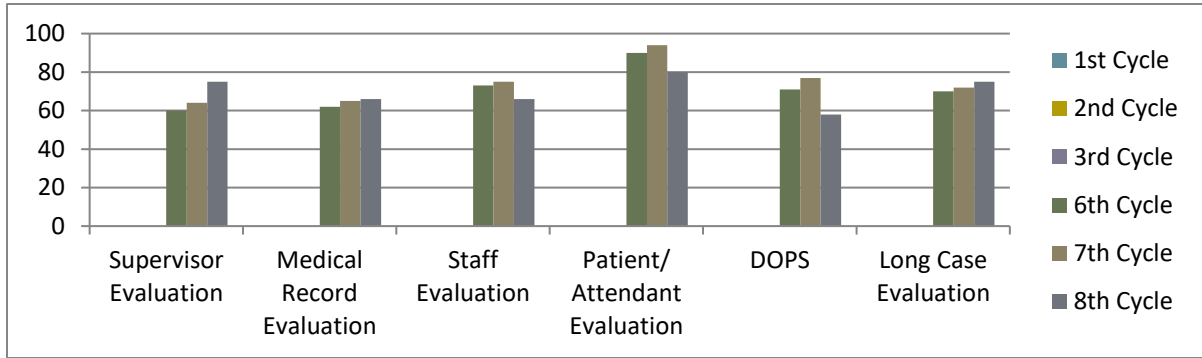
Name of Resident: Dr. Tayyaba Malik

Supervisor: Dr. Abeera Zareen

Discipline: MD Anaesthesia

Year of Starting: 28/10/2020

Average Performance of Core Competencies:



Patient Care:	71.3%	Communication Skills:	74.7%
Medical Knowledge:	78.0%	System Based Learning:	77.7%
Professionalism:	71.3%	Practice Based Learning:	73.7%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment)

Table Vivas Total Marks=50						MCQ Tests Total Marks=50						Logbook Total Marks=50						360 evaluation Total Marks=50						Grand Total
O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	
c	v	e	a	n	b	c	v	e	a	n	b	c	v	e	a	n	b	c	v	e	a	n	b	
35	40	39	38	41	39	40	38	36	32	34	40	44	34	32	34	30	38	40	42	36	38	40	36	896/1200 (74%)
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	

CIA: OTs (6 months-Collective assessment)

DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Logbook Total marks=60	Grand Total marks=180
37/60	40/60	50/60	127/180=70%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
Result Waiting	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

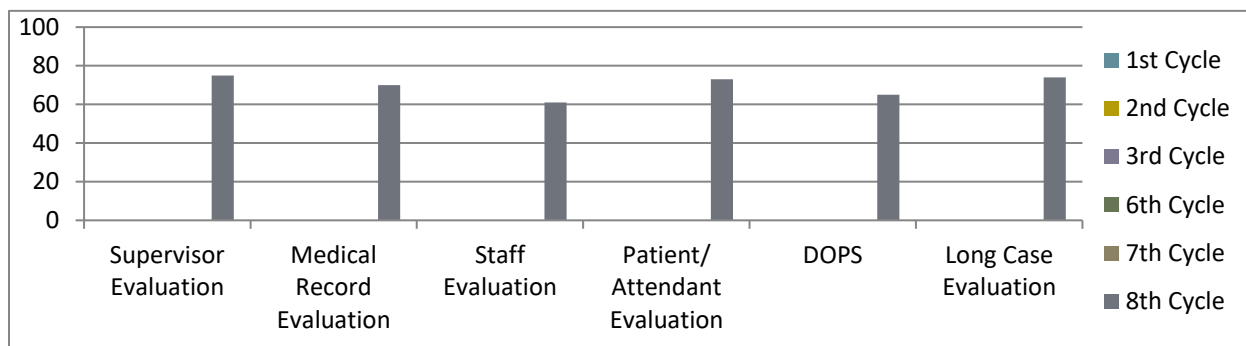
Name of Resident: Dr. Rabbiya Ghafoor

Supervisor: Dr Abeera Zareen

Discipline: MS Anesthesia

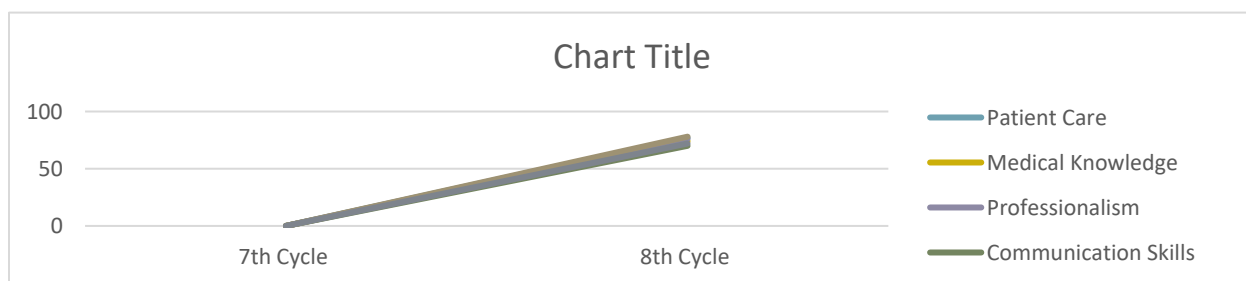
Year of Starting: 26-7-2021

7th Cycle is not applicable



Average Performance of Core Competencies:

Patient Care: 38.5% Communication Skills: 35.0%



Medical Knowledge: 37.0% System Based Learning: 39.0%
 Professionalism: 38.0% Practice Based Learning: 36.0%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment)

Table Vivas Total Marks=50						MCQ Tests Total Marks=50						Logbook Total Marks=50						360 evaluation Total Marks=50						Grand Total
O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	O	N	D	J	F	M	
35	40	39	38	41	39	40	38	36	32	34	40	44	34	32	34	30	38	40	42	36	38	40	36	836/1200 (69%)
50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	50	

CIA: OTs (6 months-Collective assessment)

DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Logbook Total marks=60	Grand Total marks=180
38/60	40/60	49/60	127/180=70%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

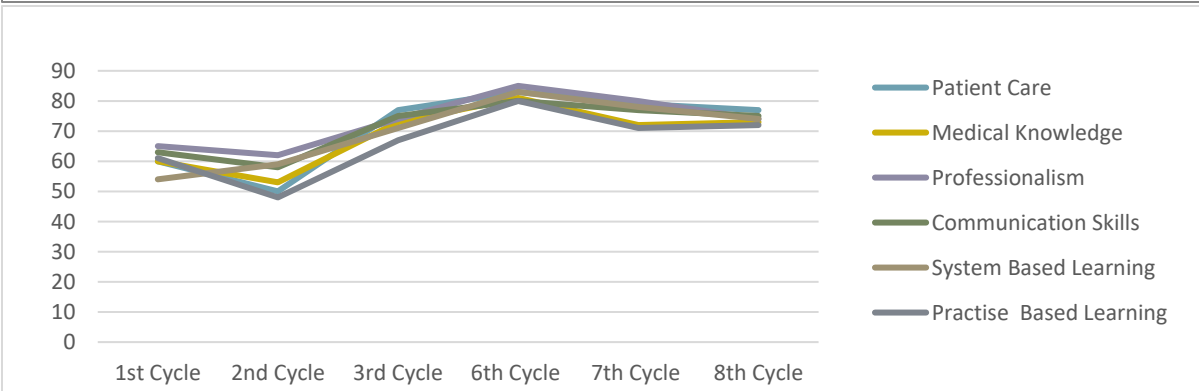
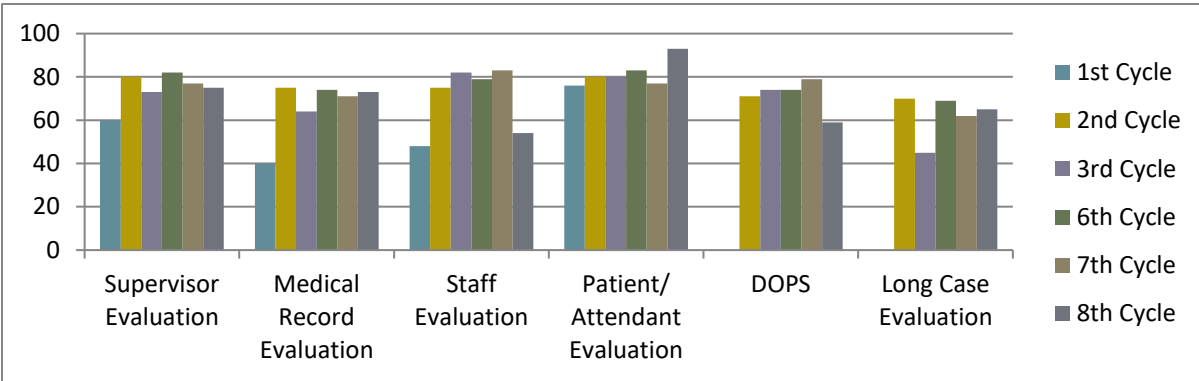
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Specialty: Anesthesia
Supervisor: Prof. Jawad Zaheer
Hospital: Holy Family Hospital

Name of Resident: Dr. Naseer Ahmad
Discipline: MS ANAESTHESIA

Supervisor: Prof. Jawad Zaheer
Year of Starting: 7/7/2017



Average Performance of Core Competencies:

Patient Care:	71.0%	Communication Skills:	71.3%
Medial Knowledge:	68.7%	System Based Learning:	69.8%
Professionalism:	73.3%	Practice Based Learning:	66.5%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022					
Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. Naseer Ahmad	52	45	50	60	207

Exam Status

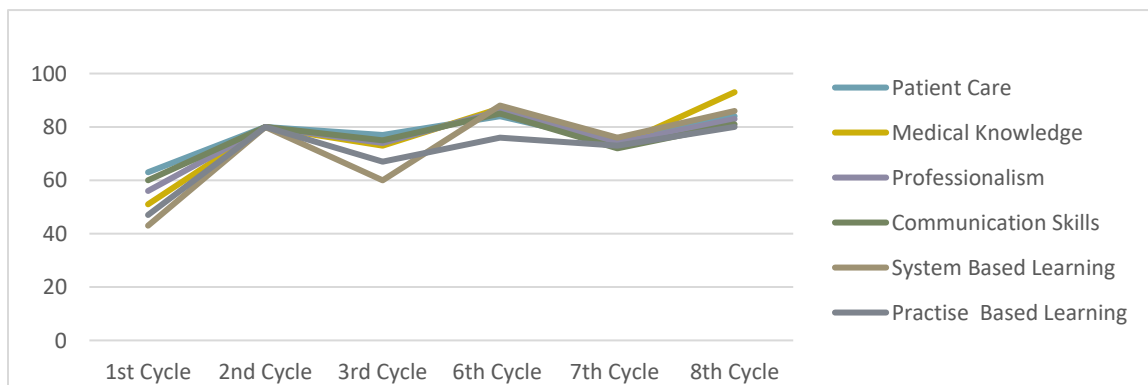
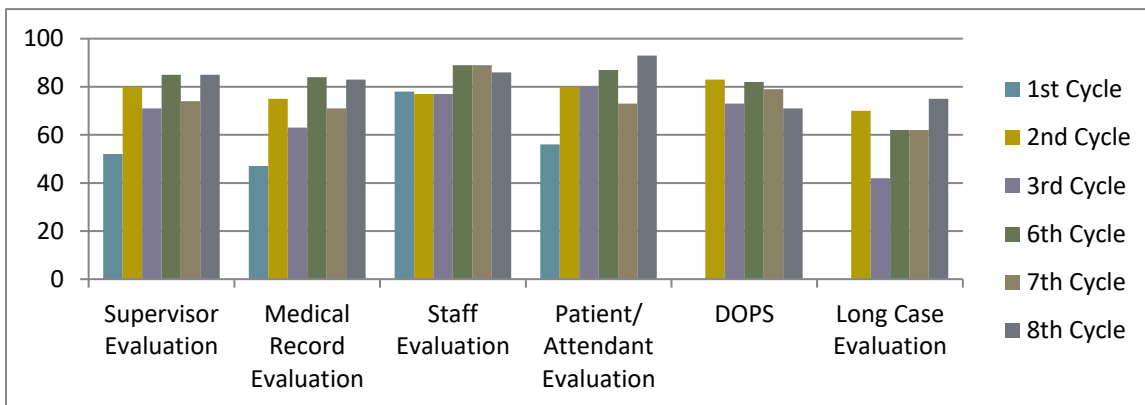
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Abida Qadir
Discipline: MS ANAESTHESIA

Supervisor: Prof. Jawad Zaheer
Year of Starting: 7/17/2017



Average Performance of Core Competencies:

Patient Care:	77.0%	Communication Skills:	75.5%
Medial Knowledge:	76.2%	System Based Learning:	72.2%
Professionalism:	75.5%	Practice Based Learning:	70.5%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022					
Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. Abida Qadir	52	47	70	60	229

Exam Status

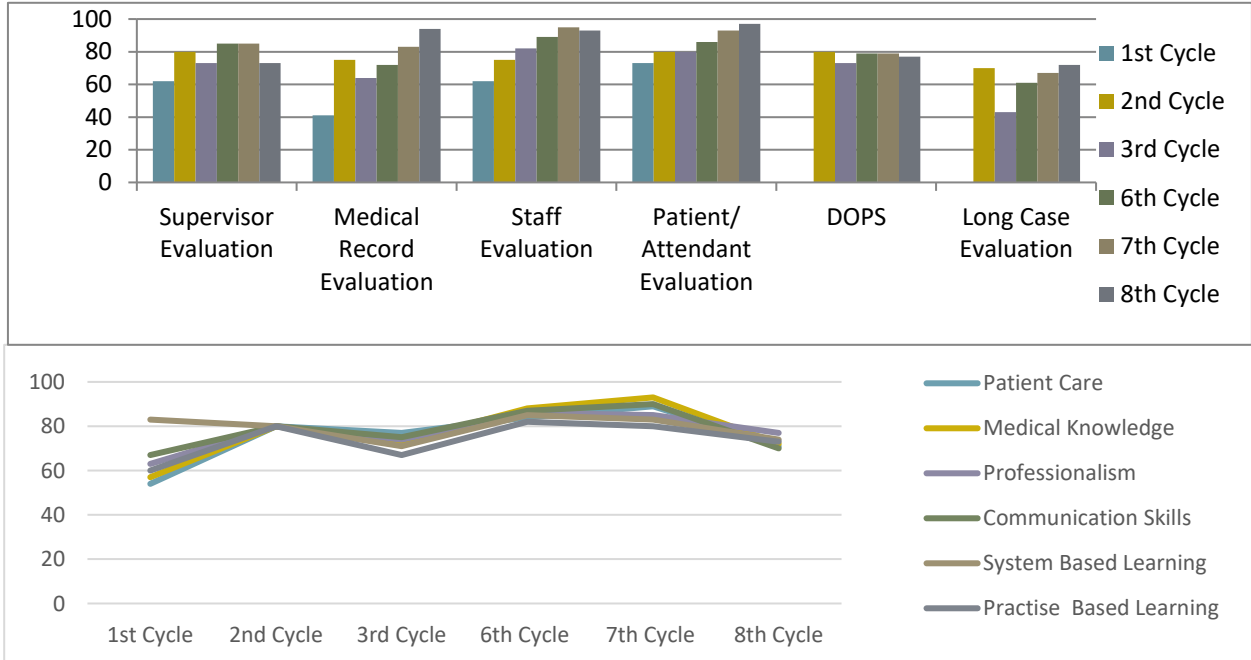
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Mehwish Arshad
Discipline: MS ANAESTHESIA

Supervisor: Prof. Jawad Zaheer
Year of Starting: 7/17/2017



Average Performance of Core Competencies:

Patient Care:	75.8%	Communication Skills:	78.2%
Medial Knowledge:	77.2%	System Based Learning:	79.3%
Professionalism:	77.5%	Practice Based Learning:	73.7%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022					
Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. Mehwish Arshad	52	45	70	60	227

Exam Status

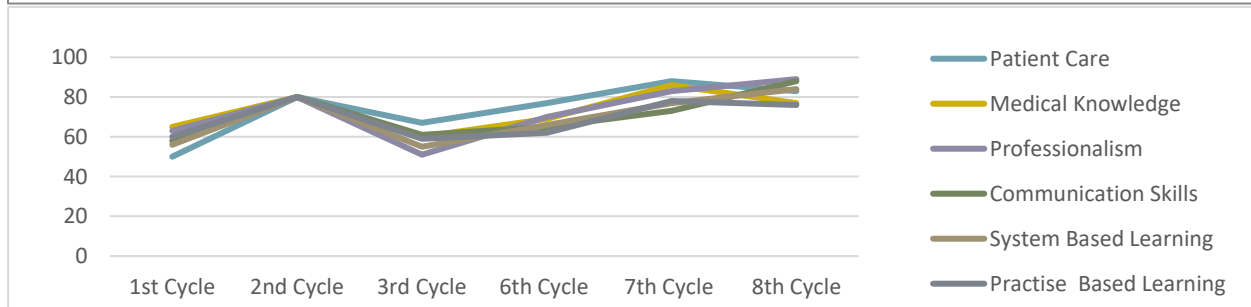
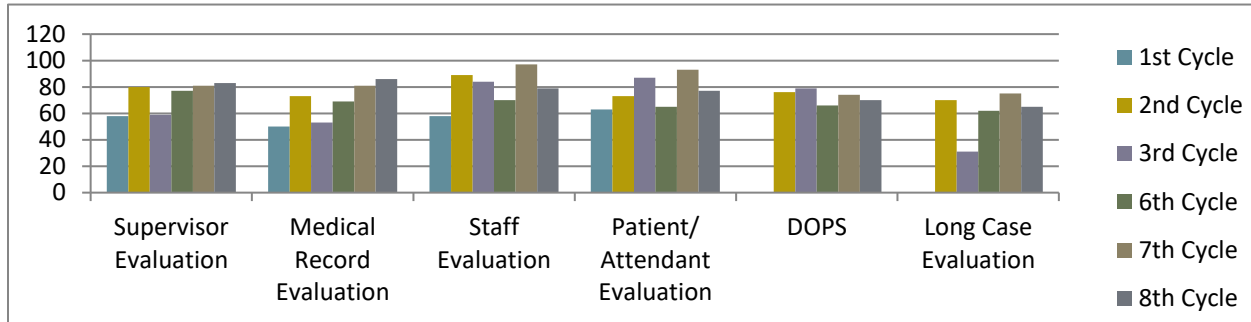
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Arfa Zanib
Discipline: MS Anesthesia

Supervisor: Dr Jawad Zaheer
Year of Starting: 4/28/2018



Average Performance of Core Competencies:

Patient Care:	74.2%	Communication Skills:	70.8%
Medial Knowledge:	72.8%	System Based Learning:	69.7%
Professionalism:	72.7%	Practice Based Learning:	69.2%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022					
Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. Arfa Zainab	49	44	70	30	193

Exam Status

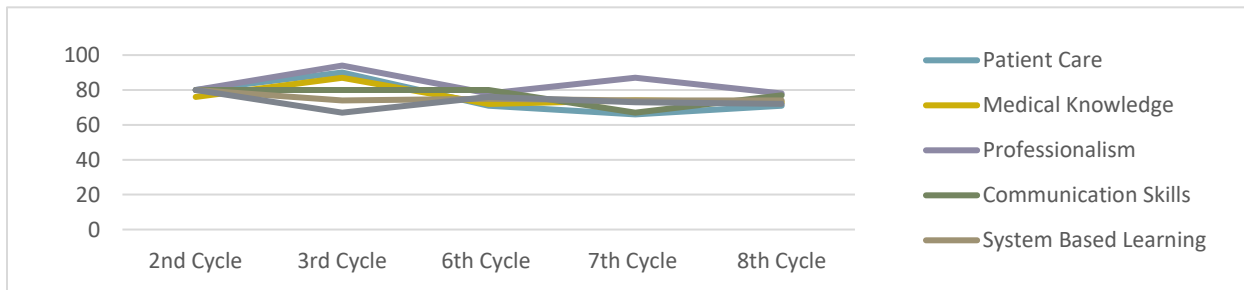
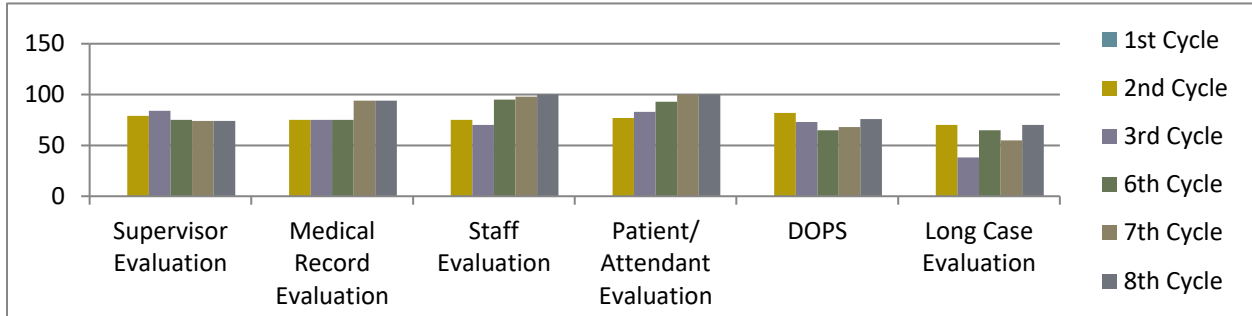
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Syed Ahmad Zunoor
Discipline: MS Anesthesia

Supervisor: Dr Jawad Zaheer
Year of Starting: 10/4/2018



Average Performance of Core Competencies:

Patient Care:	75.6%	Communication Skills:	76.8%
Medial Knowledge:	76.4%	System Based Learning:	75.4%
Professionalism:	83.4%	Practice Based Learning:	73.6%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022					
Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. Syed Ahmad Zunoor	45	46	60	60	211

Exam Status

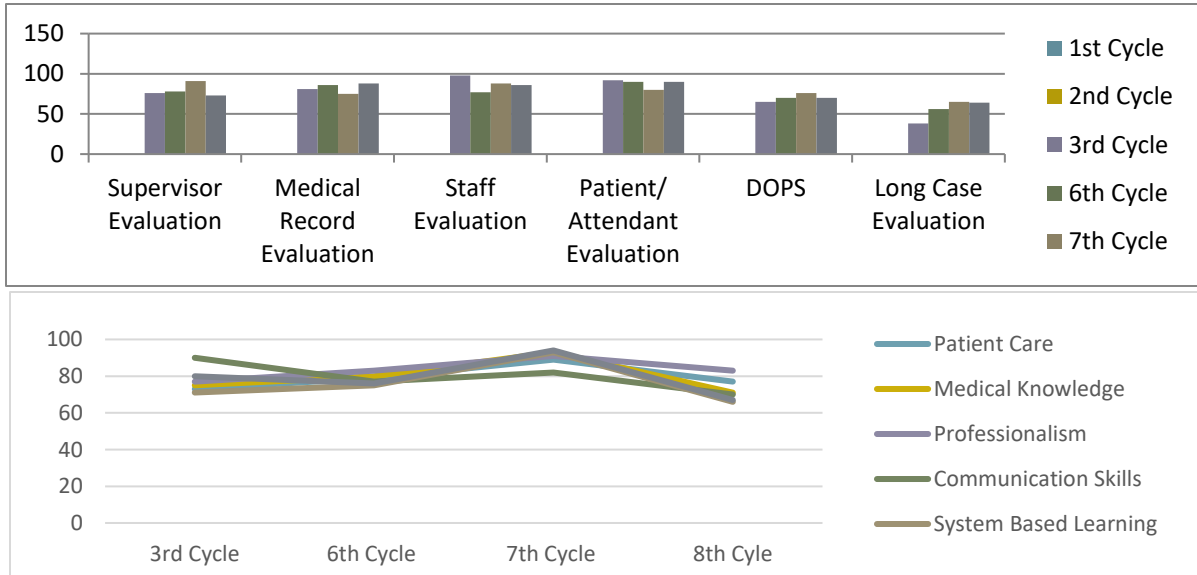
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Hamza Tanveer
Discipline: MS Anesthesia

Supervisor: Prof. Jawad Zaheer
Year of Starting: 2/15/2019



Average Performance of Core Competencies:

Patient Care:	79.5%	Communication Skills:	79.8%
Medical Knowledge:	79.8%	System Based Learning:	76.3%
Professionalism:	83.5%	Practice Based Learning:	79.3%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022					
Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. Hamza Tanveer	50	48	50	30	178

Exam Status

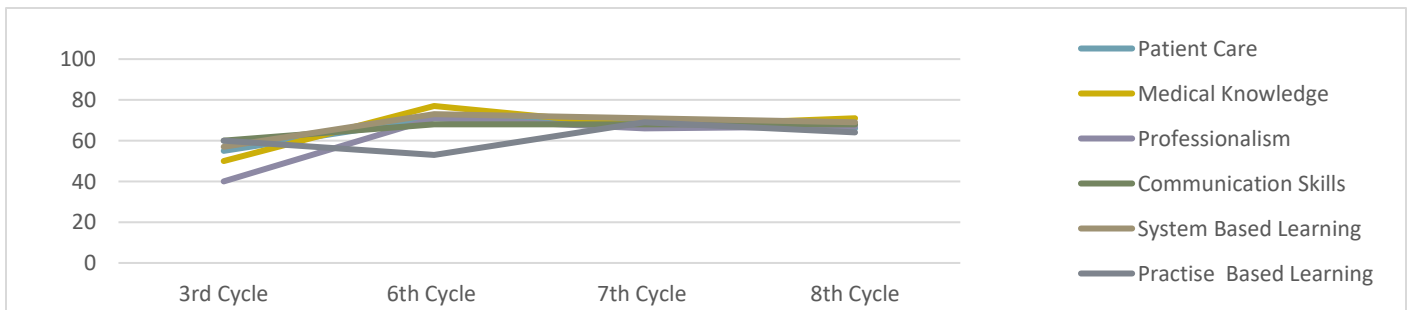
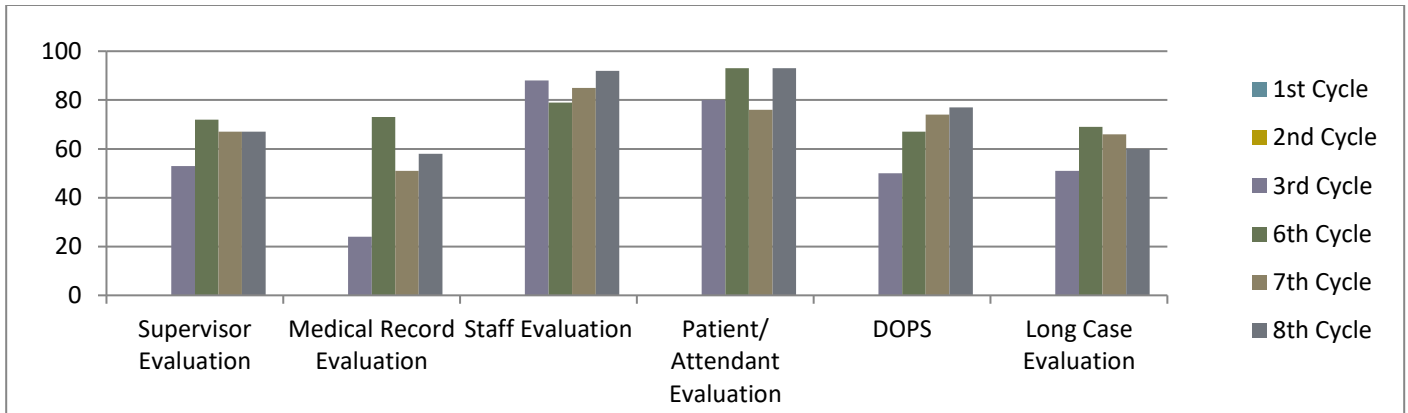
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Saad Ullah Raja
Discipline: MS Anesthesia

Supervisor: Prof. Jawad Zaheer
Year of Starting: 27-04-18



Average Performance of Core Competencies:

Patient Care:	65.3%	Communication Skills:	66.0%
Medial Knowledge:	66.3%	System Based Learning:	67.5%
Professionalism:	61.0%	Practice Based Learning:	61.5%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022					
Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. M.Saad ullah Raja	49	45	60	30	184

Exam Status

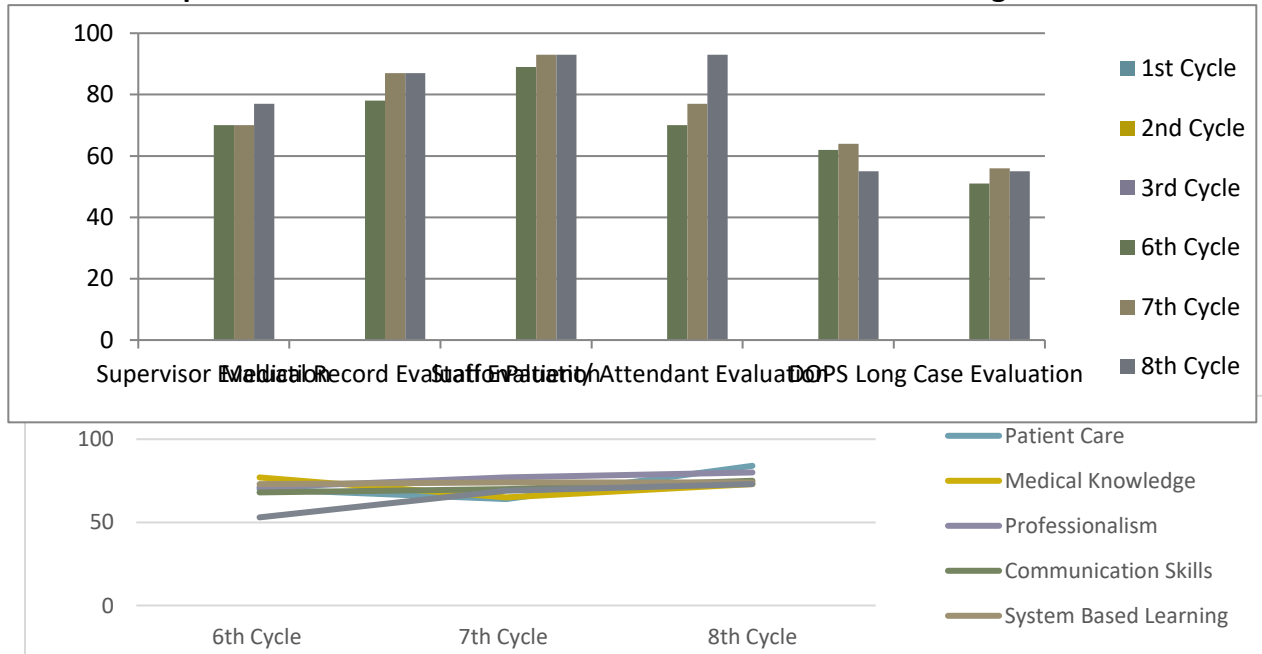
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Maryam Ahmad
Discipline: MS Anesthesia

Supervisor: Prof Jawad Zaheer
Year of Starting: 26-2-2020



Average Performance of Core Competencies:

Patient Care:	72.7%	Communication Skills:	71.0%
Medical Knowledge:	71.7%	System Based Learning:	73.7%
Professionalism:	76.0%	Practice Based Learning:	65.0%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022					
Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. Maryam Ahmad	42	44	70	30	186

Exam Status

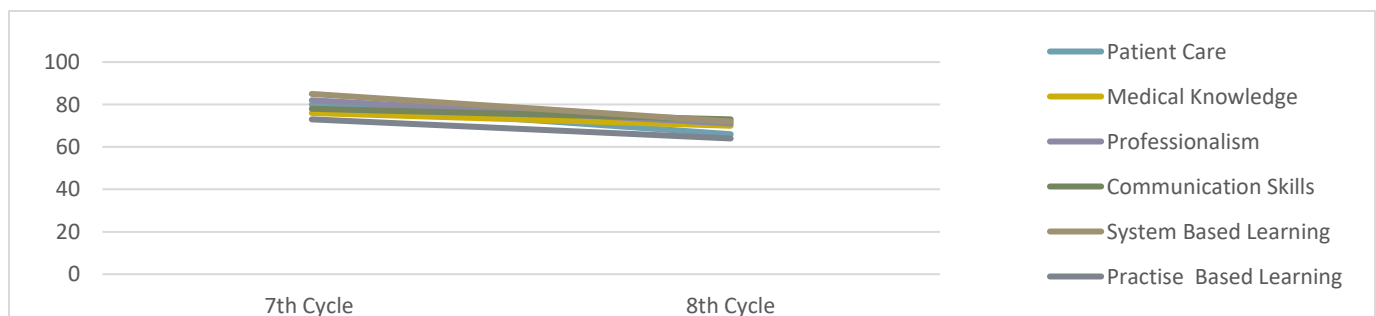
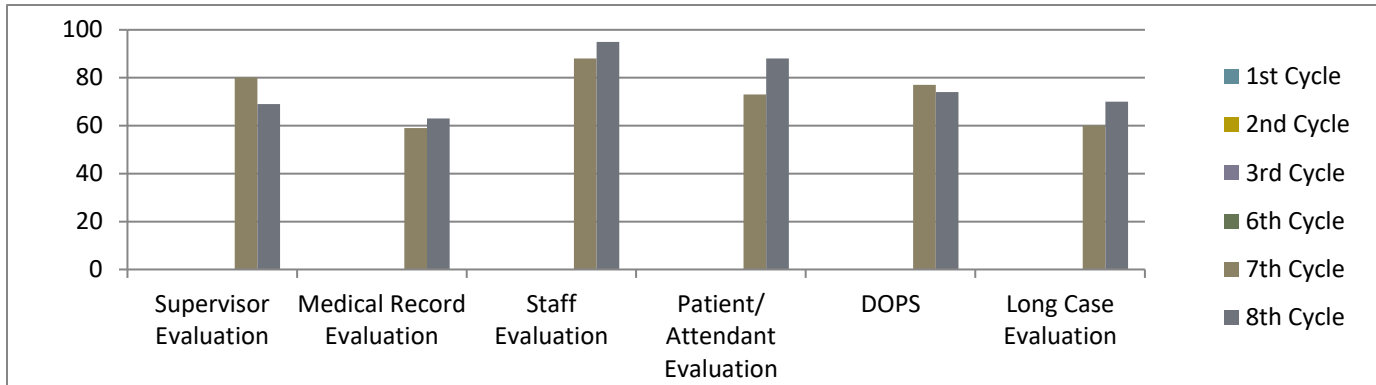
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Ahmad Bilal
Discipline: MS Anesthesia

Supervisor: Prof Jawad Zaheer
Year of Starting: 3-3-2021



Average Performance of Core Competencies:

Patient Care:	73.0%	Communication Skills:	75.5%
Medial Knowledge:	73.0%	System Based Learning:	78.5%
Professionalism:	76.5%	Practice Based Learning:	68.5%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022

Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. Ahmad Bilal	51	44	60	30	185

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

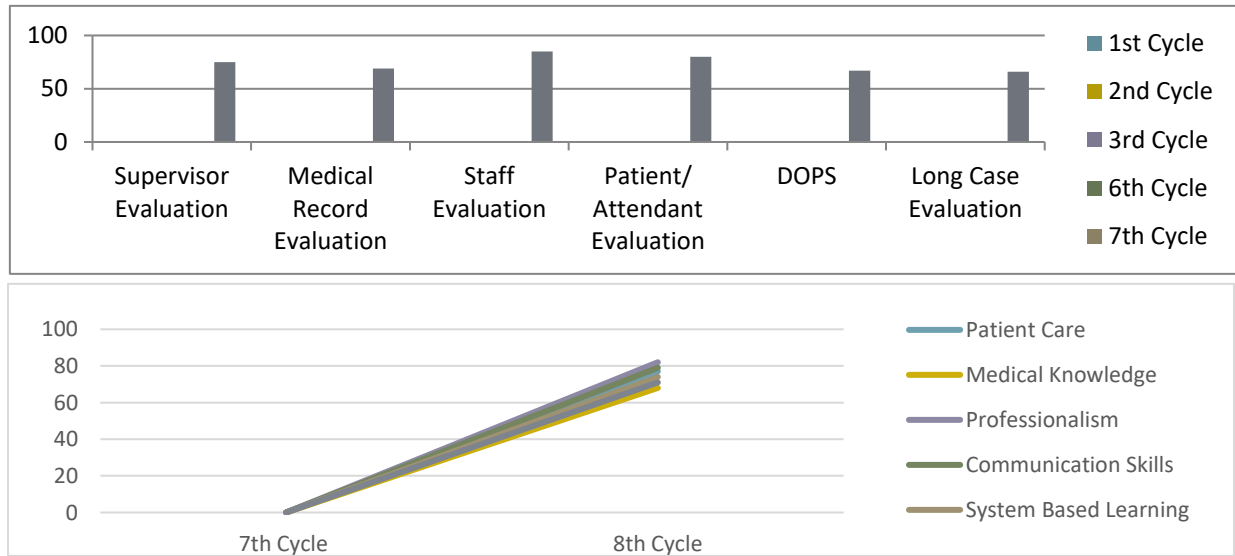
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Zainab Tayyab
Discipline: MS Anesthesia

Supervisor: Prof Jawad Zaheer
Year of Starting: 26-7-2021

7th cycle is not applicable.



Average Performance of Core Competencies:

Patient Care:	38.5%	Communication Skills:	39.5%
Medial Knowledge:	34.0%	System Based Learning:	37.0%
Professionalism:	41.0%	Practice Based Learning:	35.5%

Internal Evaluation of MS residents: OTs (6 months-Collective assessment) Oct 2021- march 2022					
Names	DOPS Total marks =60	Presentations Journal clubs, topic presentations. Total marks=60	Table Vivas Total Marks=100	Log book Total marks=60	Grand Total marks=280
Dr. Zainab Tayyab	44	45	50	30	169

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

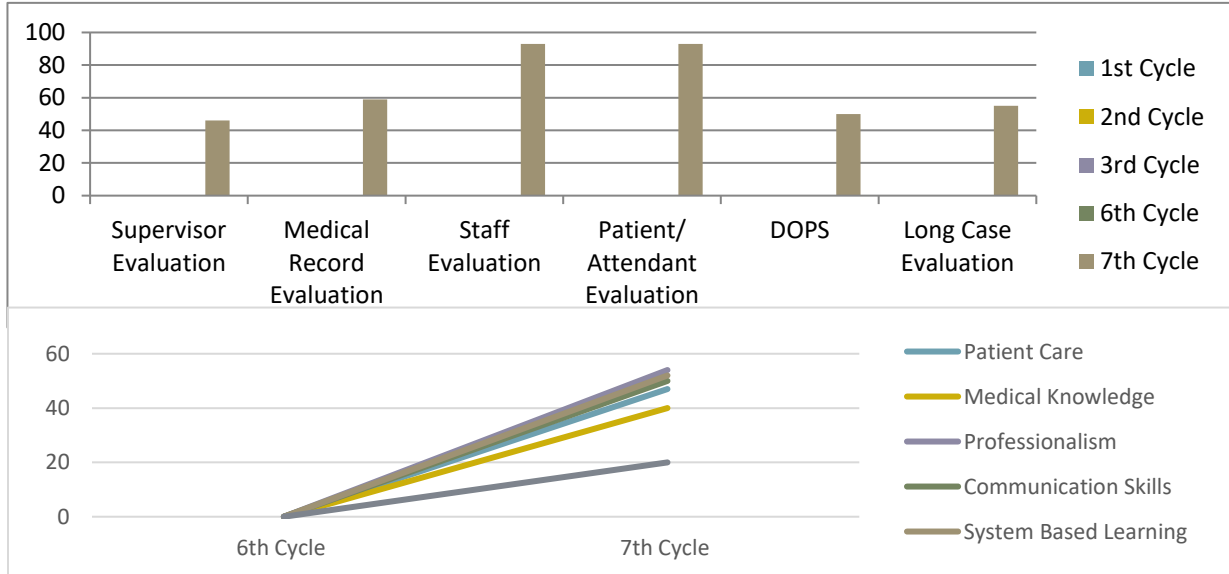
Specialty: Cardiology
Supervisor: Dr. M. Asad
Hospital: Banazir Bhutto Hospital

Name of Resident: Muhammad Sajjad Ali
Discipline: MD Cardiology

Supervisor: Dr. M. Asad
Year of Starting: 26/07/2021

6th Cycle is not applicable.

Average Performance of Core Competencies:



Patient Care:	23.5%	Communication Skills:	25.0%
Medial Knowledge:	20.0%	System Based Learning:	26.0%
Professionalism:	27.0%	Practice Based Learning:	10.0%

Internal Evaluation of MD residents: CARDIOLOGY CARDIOLOGY				
Bedside/Group discussions Total Marks= 20	DOPS Total marks=40	Log book Total marks=10	360 evaluation Total marks= 30	Grand Total 100 marks
14/20	29/40	6/10	21 /30	70/100 (70%)

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

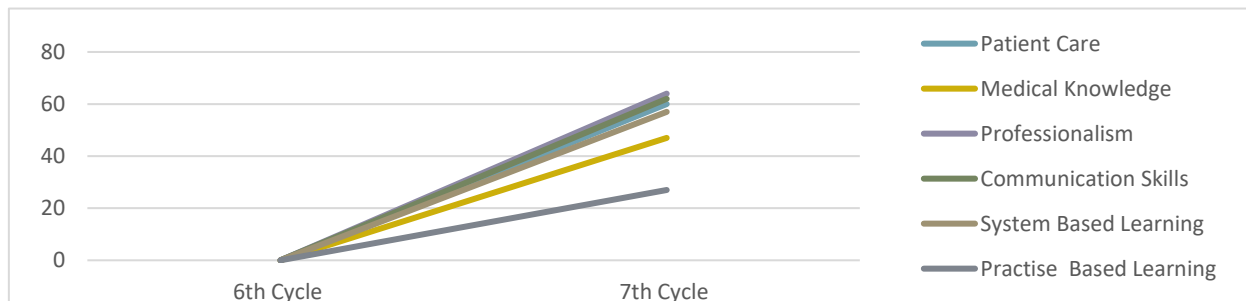
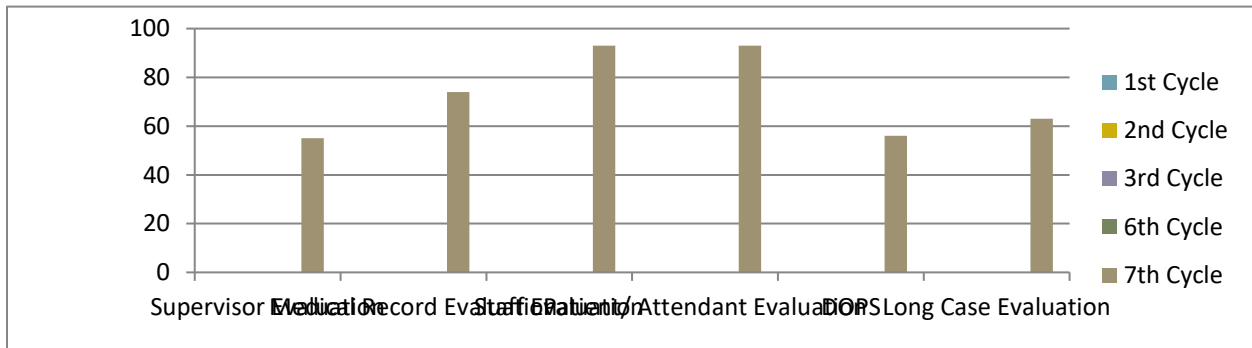
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
Submitted	NA	NA	NA

Name of Resident: Dr. Yasir Zeb
Discipline: MD Cardiology

Supervisor: Dr. M. Asad
Year of Starting: 26/07/2021

6th Cycle is not applicable.



Average Performance of Core Competencies:

Patient Care: 30.0% Communication Skills: 31.0%
 Medical Knowledge: 23.5% System Based Learning: 28.5%

Internal Evaluation of MD residents: CARDIOLOGY CARDIOLOGY				
Bedside/Group discussions Total Marks= 20	DOPS Total marks=40	Log book Total marks=10	360 evaluation Total marks= 30	Grand Total 100 marks
15 /20	32 /40	6/10	23/ 30	76/100(76%)

Professionalism: 32.0% Practice Based Learning: 13.5%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
Submitted	NA	NA	NA

Specialty: Dermatology
Supervisor: Dr. Shawana Sharif
Hospital: Banazir Bhutto Hospital

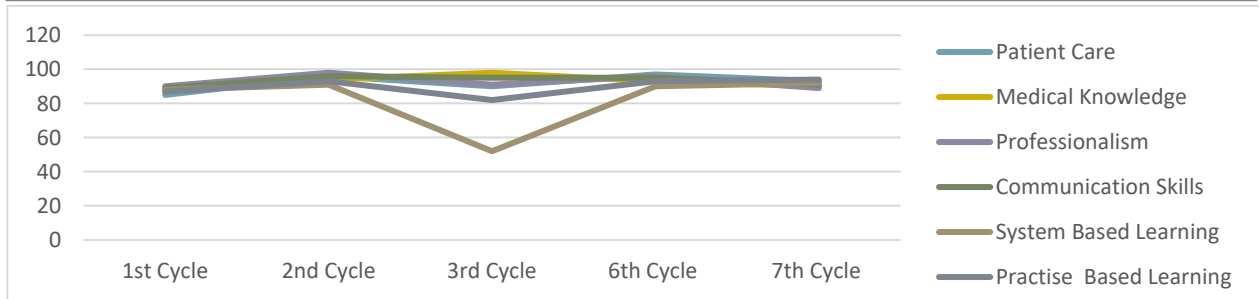
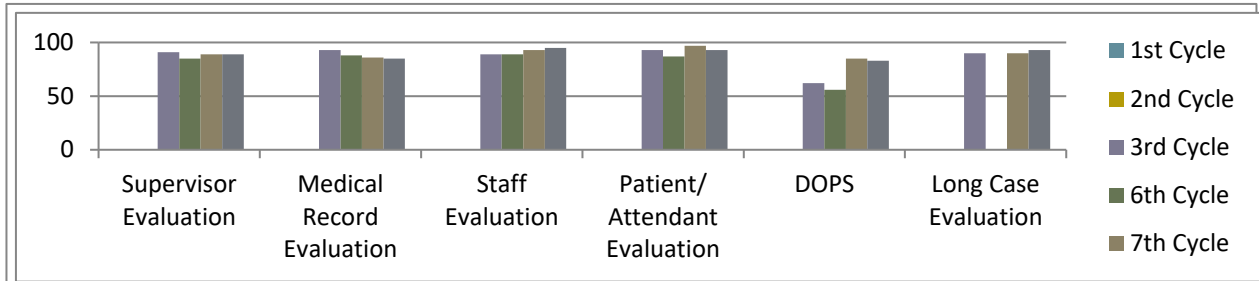
Name of Resident: Dr. Khizra Hashmi

Supervisor: Dr. Shawana Sharif

Discipline: MD Dermatology

Year of Starting: 7/3/2017

Average Performance of Core Competencies:



Patient Care:	92.2%	Communication Skills:	93.2%
Medial Knowledge:	92.4%	System Based Learning:	82.6%
Professionalism:	92.8%	Practice Based Learning:	89.8%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Short case 15	Long case 15	MCQs 40	TOACS 20	Logbook 10	360 degree evaluation 20	Grand total 120
12	12	25	15	8	18	90
CIA : WARD (6 months-Collective assessment)						
DOPs 60		Presentations and Journal Club 30		Log Books 10		Grand Total 100
50		25		8		83
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
OPD (08 weeks) 100		OT (02weeks) 100		Ward(02 weeks) 100		Grand total 300
78		74		75		227

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

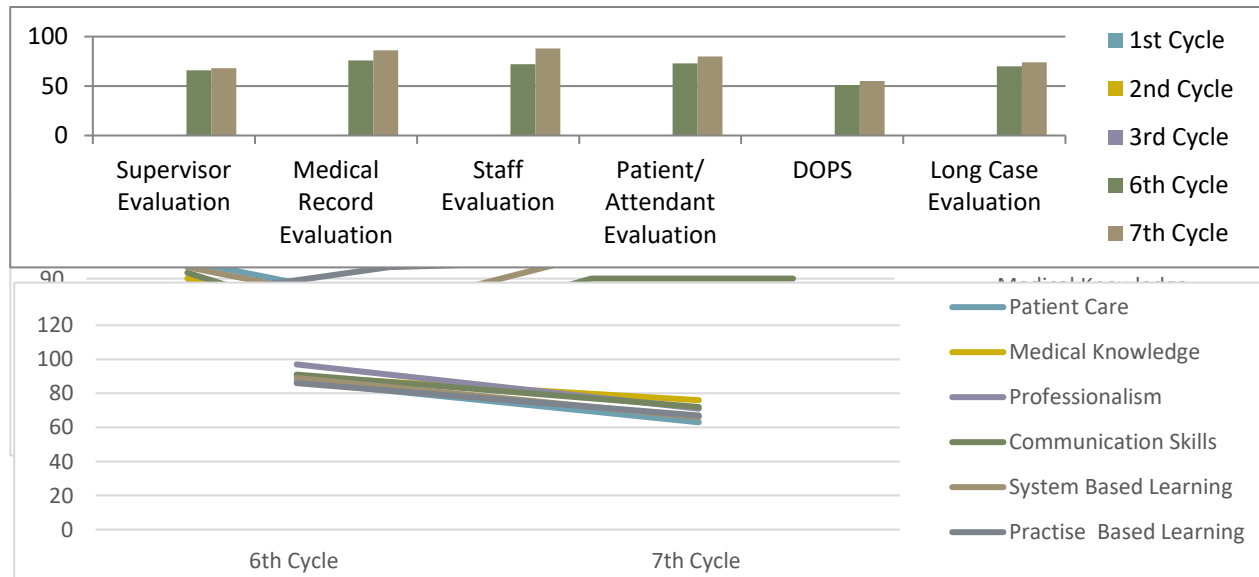
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Shama Benazir

Supervisor: Dr. Shawana Sharif

Average Performance of Core Competencies:



Patient Care:	83.3%	Communication Skills:	87.8%
Medial Knowledge:	87.3%	System Based Learning:	91.3%
Professionalism:	86.0%	Practice Based Learning:	91.3%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Short case	Long case	MCQs	TOACS	Logbook	360 degree evaluation	Grand total
15	15	40	20	10	20	120
10	9	16	13	7	16	71
CIA : WARD (6 months-Collective assessment)						
DOPs		Presentations and Journal Club		Log Books		Grand Total
60		30		10		100
45		20		7		73
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
OPD (08 weeks)		OT (02weeks)		Ward(02 weeks)		Grand total
100		100		100		300
75		71		73		219

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
A	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Sirajulhaq
Discipline: MD Dermatology

Supervisor: Dr. Shawana Sharif
Year of Starting: 28-10-2020

Average Performance of Core Competencies:

Patient Care:	84.5%	Communication Skills:	80.0%
Medial Knowledge:	83.5%	System Based Learning:	78.0%
Professionalism:	82.0%	Practice Based Learning:	79.5%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Short case 15	Long case 15	MCQs 40	TOACS 20	Logbook 10	360-degree evaluation 20	Grand total 120
CIA : WARD (6 months-Collective assessment)						
DOPs 60		Presentations and Journal Club 30			Log Books 10	Grand Total 100
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
OPD (08 weeks) 100		OT (02weeks) 100			Ward(02 weeks) 100	Grand total 300

Exam Status

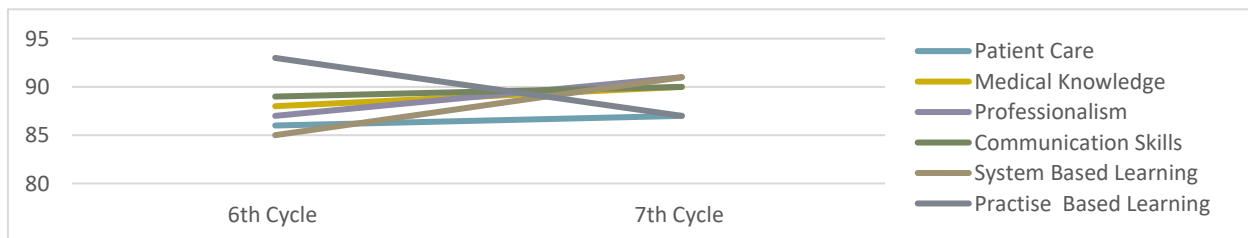
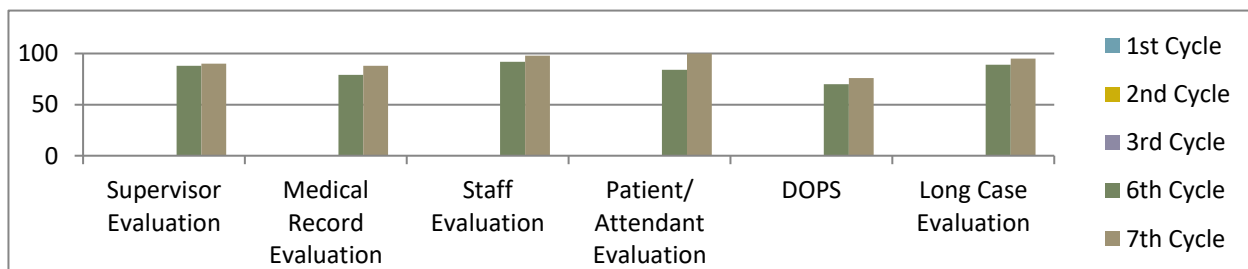
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
Result Waiting	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
Submitted	NA	NA	NA

Name of Resident: Dr. M. Usman Khan
Discipline: MD Dermatology

Supervisor: Dr. Shawana Sharif
Year of Starting: 28-10-2020



Average Performance of Core Competencies:

Patient Care:	75.0%	Communication Skills:	81.5%
Medial Knowledge:	83.0%	System Based Learning:	77.5%
Professionalism:	84.0%	Practice Based Learning:	76.5%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Short case	Long case	MCQs	TOACS	Logbook	360 degree evaluation 20	Grand total
15	15	40	20	10		120
11	11	30	12	8	14	86
CIA : WARD (6 months-Collective assessment)						
DOPs		Presentations and Journal Club		Log Books		Grand Total
60		30		10		100
45		23		8		76
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
OPD (08 weeks)		OT (02weeks)		Ward(02 weeks)		Grand total
100		100		100		300
72		NA		70		--

Exam Status

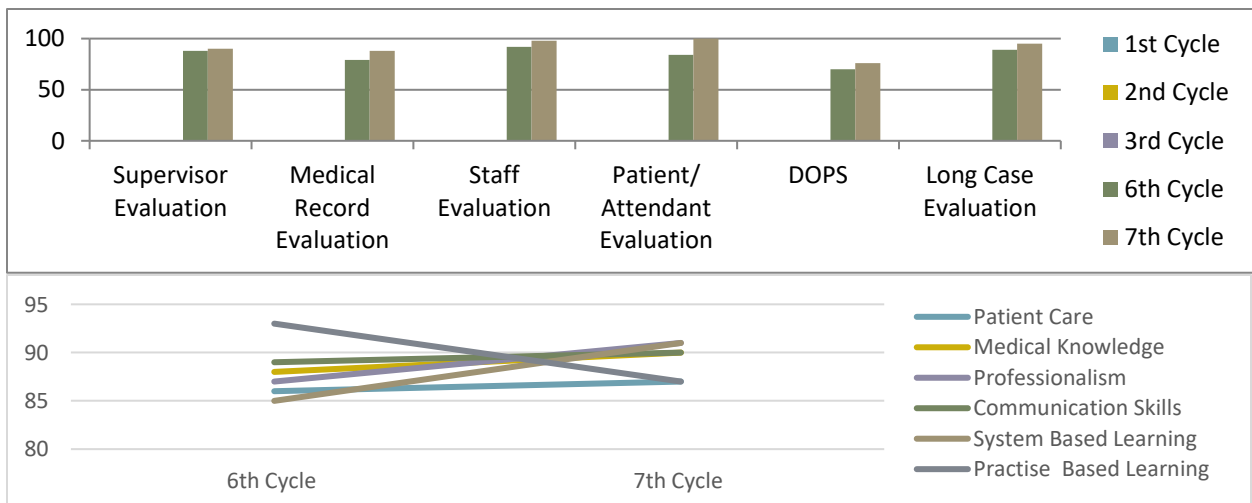
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	NA	NA	NA

Name of Resident: Dr. M. Tanveer Hussain
Discipline: MD Dermatology

Supervisor: Dr. Shawana Sharif
Year of Starting: 28-07-2018



Average Performance of Core Competencies:

Patient Care:	86.5%	Professionalism:	89.0%
Medial Knowledge:	89.0%	Communication Skills:	89.5%

System Based Learning: 88.0%

Practice Based Learning: 90.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Short case	Long case	MCQs	TOACS	Logbook	360 degree evaluation	Grand total
15	15	40	20	10	20	120
11	10	20	14	8	17	80
CIA : WARD (6 months-Collective assessment)						
DOPs		Presentations and Journal Club		Log Books		Grand Total
60		30		10		100
48		23		8		79
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
OPD (08 weeks)		OT (02weeks)		Ward (02 weeks)		Grand total
100		100		100		300
76		73		75		224

Exam Status

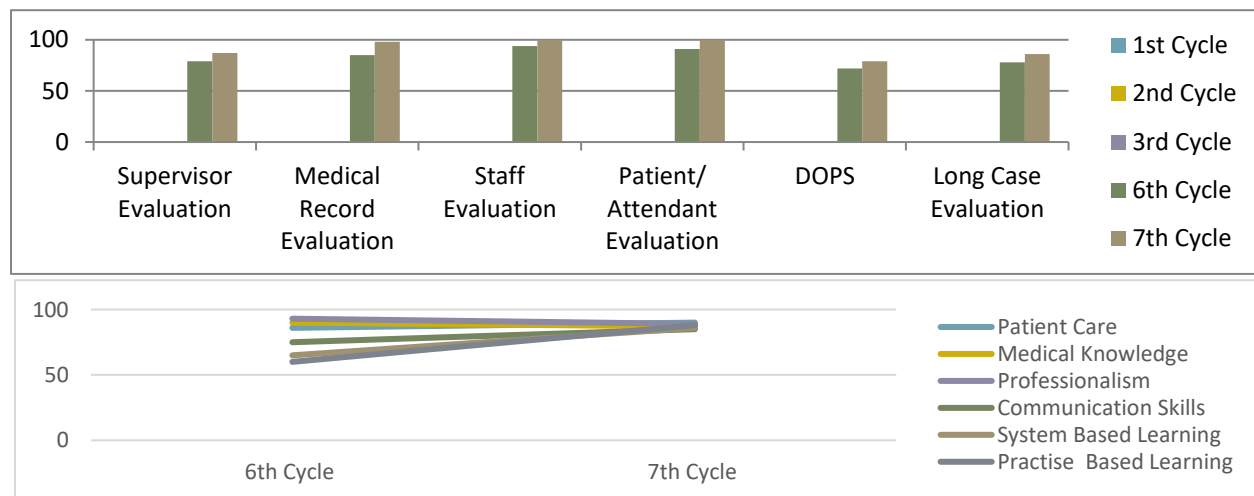
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Aneeza Saleem
Discipline: MD Dermatology

Supervisor: Dr. Shawana Sharif
Year of Starting: 09-03-2019



Average Performance of Core Competencies:

Patient Care:	88.0%	Communication Skills:	80.0%
Medial Knowledge:	88.5%	System Based Learning:	75.5%
Professionalism:	91.0%	Practice Based Learning:	74.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Short case	Long case	MCQs	TOACS	Logbook	360 degree evaluation 20	Grand total
15	15	40	20	10		120
9	8	16	12	7	15	67
CIA : WARD (6 months-Collective assessment)						
DOPs		Presentations and Journal Club		Log Books		Grand Total
60		30		10		100
45		20		7		73
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
OPD (08 weeks)		OT (02weeks)		Ward(02 weeks)		Grand total
100		100		100		300
72		67		70		209

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

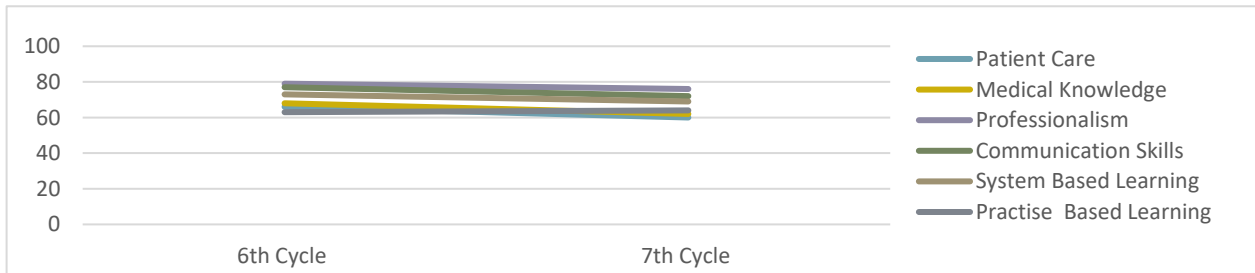
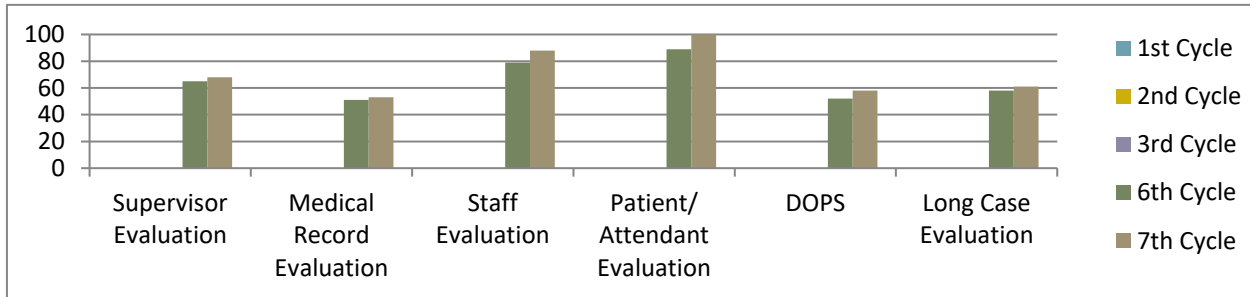
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Specialty: **ENT**
Supervisor: **Dr. Ahmed Hassan**
Hospital: **Banazir Bhutto Hospital**

Name of Resident: Dr. Sana Rehman
Discipline: MS ENT

Supervisor: Dr. Ahmad Hassan
Year of Starting: 26-02-2020



Average Performance of Core Competencies:

Patient Care:	63.5%	Communication Skills:	74.5%
Medial Knowledge:	65.0%	System Based Learning:	71.0%
Professionalism:	77.5%	Practice Based Learning:	63.5%

INTERNAL EVALUATION OF UNIVERSITY RESIDENTS						
DOPS/ OSATS (10)	Long case (20)	Presentation /Journal Club (20)	MCQ / SAQ's (20)	Log book (10)	Mini CEX (20)	Grand Total (100)
5	11	9	10	4	13	52/100=52%

Exam Status

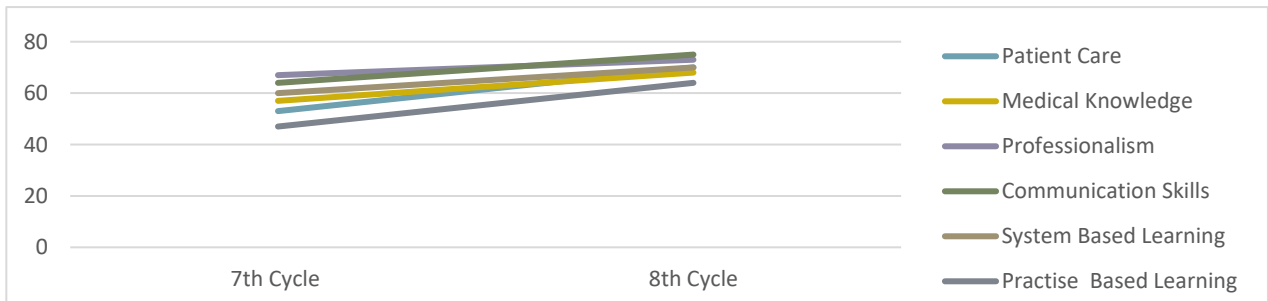
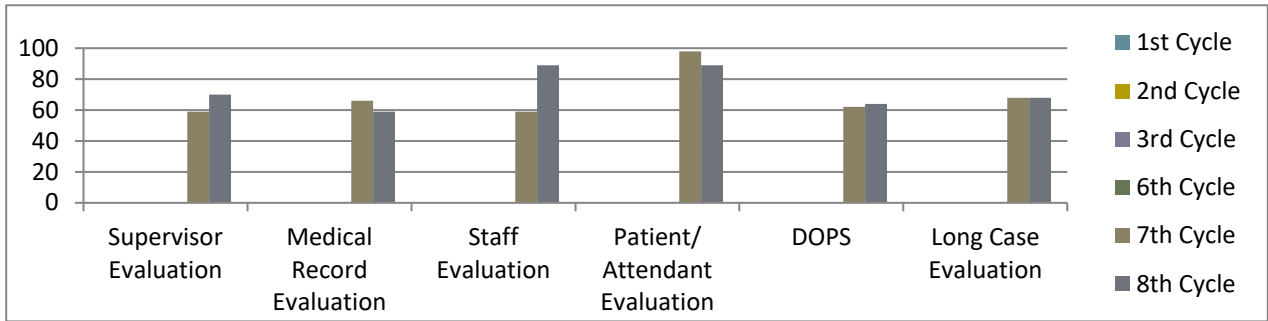
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	NA	NA	NA

Name of Resident: Dr. Muhammad Sibtain Raza
Discipline: MS ENT

Supervisor: Dr. Ahmed Hassan
Year of Starting: 03-03-2021



Average Performance of Core Competencies:

Patient Care:	61.5%	Communication Skills:	69.5%
Medial Knowledge:	62.5%	System Based Learning:	65.0%
Professionalism:	70.0%	Practice Based Learning:	55.5%

INTERNAL EVALUATION OF UNIVERSITY RESIDENTS						
DOPS/ OSATS (10)	Long case (20)	Presentation /Journal Club (20)	MCQ / SAQ's (20)	Log book (10)	Mini CEX (20)	Grand Total (100)
5	13	11	10	6	12	57/100 = 57%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	NA	NA	NA

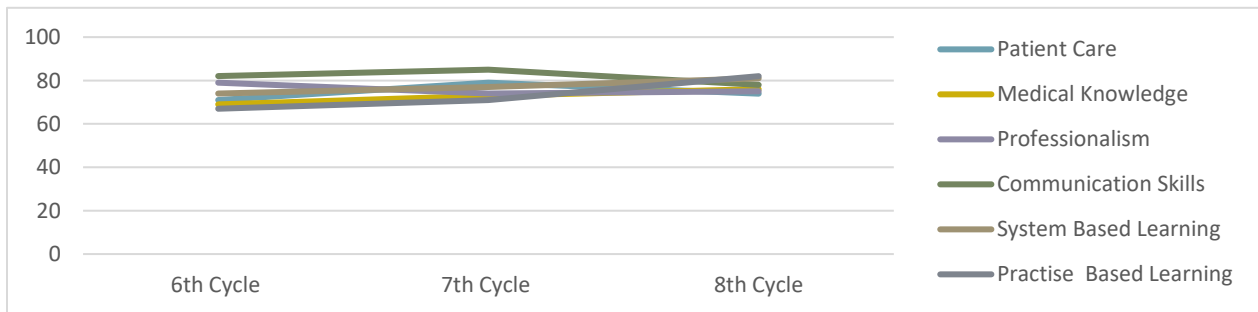
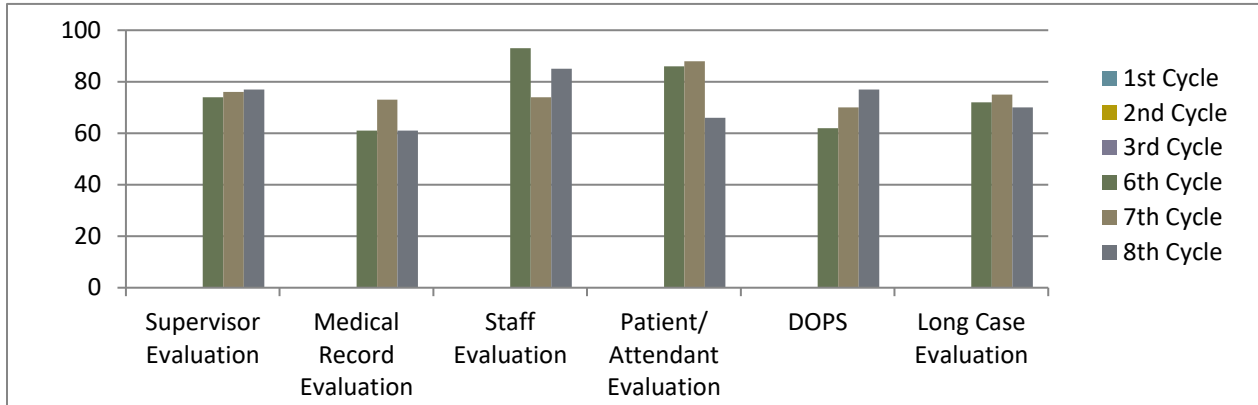
Name of Resident: Dr. Anique Ahmad Jamil
Discipline: MS ENT

Supervisor: Dr. Ahmad Hassan
Year of Starting: 28-10-2020

Average Performance of Core Competencies:

Patient Care: 74.7%

Communication Skills: 81.7%



Medial Knowledge: 72.7%
Professionalism: 76.0%

System Based Learning: 77.3%
Practice Based Learning: 73.3%

INTERNAL EVALUATION OF UNIVERSITY RESIDENTS						
DOPS/OSATS (10)	Long case (20)	Presentation /Journal Club (20)	MCQ / SAQ's (20)	Log book (10)	Mini CEX (20)	Grand Total (100)
6	14	12	14	6	14	66/100 = 66%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
Result Waiting	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
Submitted	NA	NA	NA

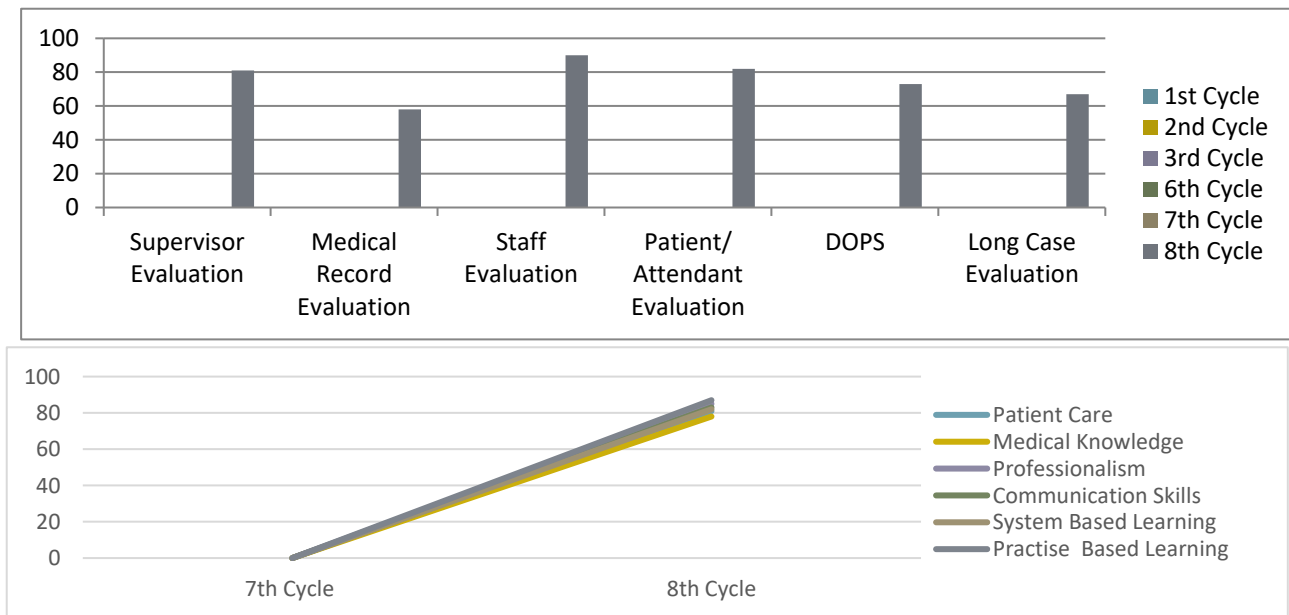
Name of Resident: Dr. Maham Raashid Sidhu

Supervisor: Dr Ahmad Hassan

Discipline: MS Otorhinolaryngology ENT

Year of Starting: 27-7-2021

7th cycle is not applicable.



Average Performance of Core Competencies:

Patient Care:	40.5%	Communication Skills:	41.5%
Medial Knowledge:	39.0%	System Based Learning:	41.0%
Professionalism:	42.5%	Practice Based Learning:	43.5%

INTERNAL EVALUATION OF UNIVERSITY RESIDENTS						
DOPS/ OSATS (10)	Long case (20)	Presentation /Journal Club (20)	MCQ / SAQ's (20)	Log book (10)	Mini CEX (20)	Grand Total (100)
6	15	14	13	7	15	70/100 = 70%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

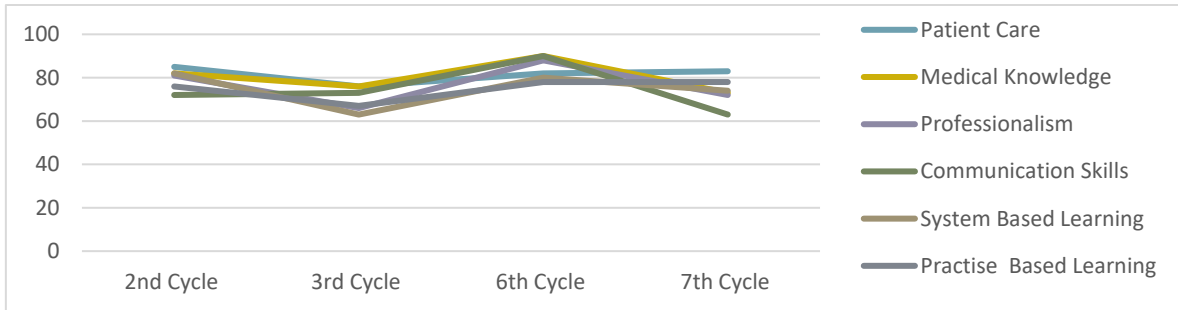
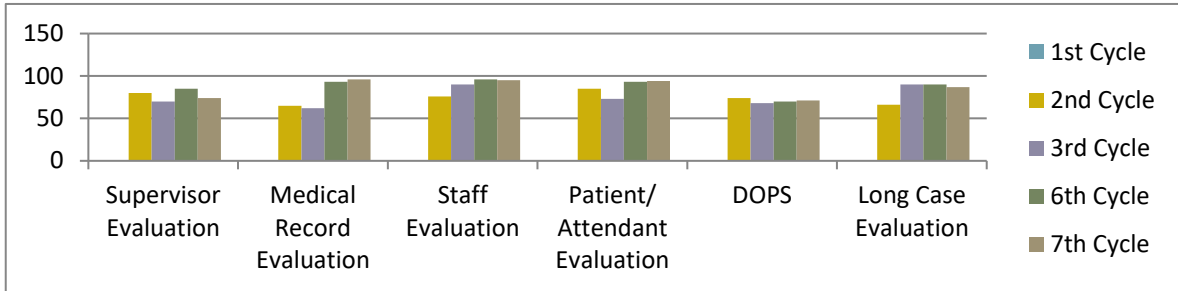
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
Submitted	NA	NA	NA

Specialty: **ENT**
Supervisor: **Dr. Sadia Chaudhary**
Hospital: **District Headquarter Hospital**

Name of Resident: Dr. Sanam Saqib
Discipline: MS ENT

Supervisor: Dr. Sadia Chaudhary
Year of Starting: 4/28/2018



Average Performance of Core Competencies:

Patient Care:	81.5%	Communication Skills:	74.5%
Medial Knowledge:	80.5%	System Based Learning:	74.8%
Professionalism:	76.8%	Practice Based Learning:	74.8%

Internal Evaluation of MS residents			
Long Case (30)	Short Case (20)	SEQs (50)	Total (100)
25	15	21	61

Exam Status

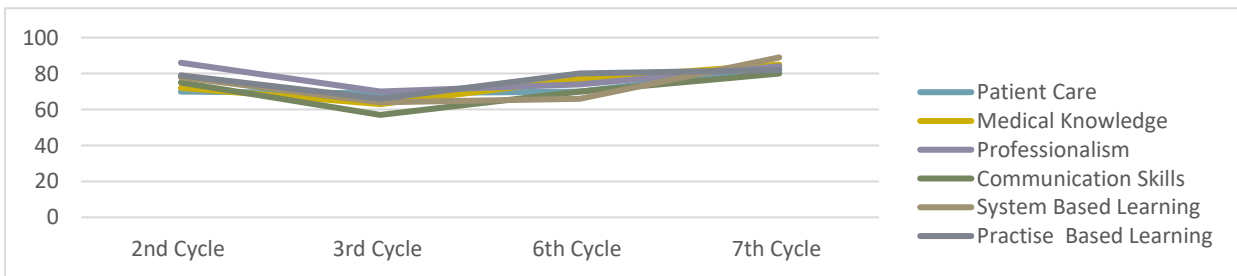
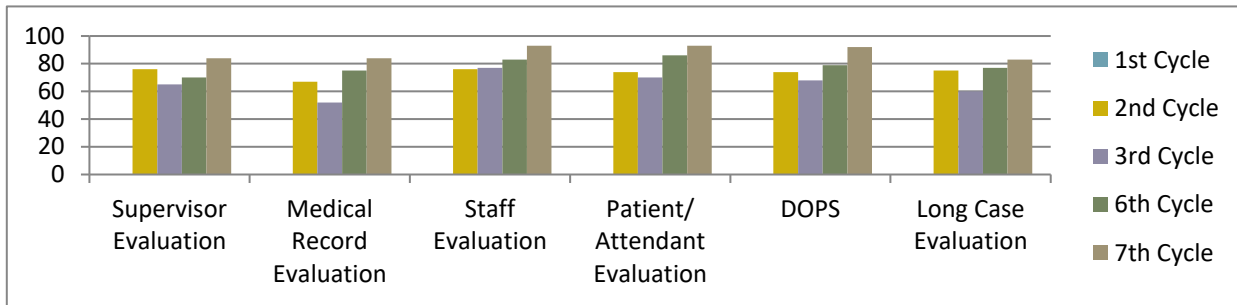
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Javed Ahmad
Discipline: MS ENT

Supervisor: Dr Sadia Chaudhary
Year of Starting: 7/27/2018



Average Performance of Core Competencies:

Patient Care:	73.0%	Communication Skills:	70.5%
Medial Knowledge:	74.3%	System Based Learning:	74.3%
Professionalism:	78.5%	Practice Based Learning:	76.8%

Internal Evaluation of MS residents			
Long Case (30)	Short Case (20)	SEQs (50)	Total (100)
25	15	34	74

Exam Status

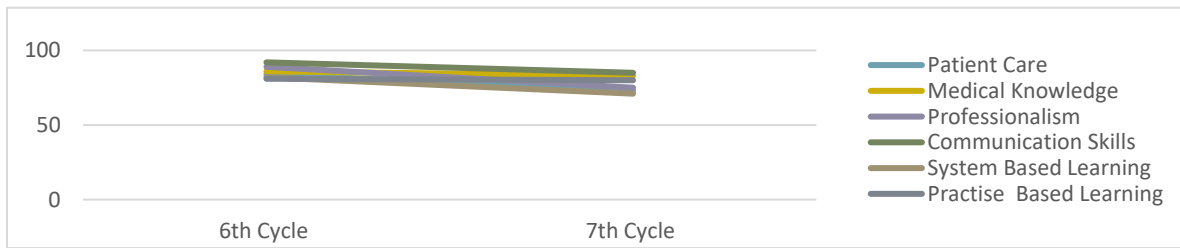
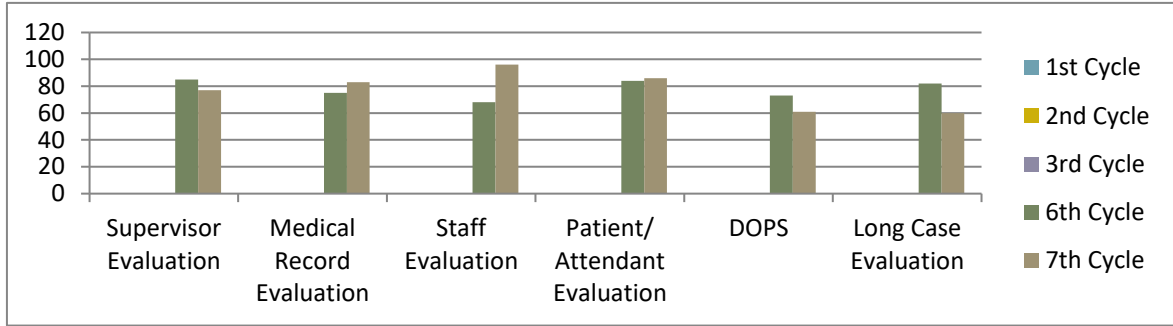
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Shaiza Kiran

Supervisor: Dr Sadia Chaudhary



Average Performance of Core Competencies:

Patient Care:	78.5%	Communication Skills:	88.5%
Medial Knowledge:	84.5%	System Based Learning:	76.5%
Professionalism:	82.0%	Practice Based Learning:	80.5%

Internal Evaluation of MS residents			
Long Case (30)	Short Case (20)	SEQs (50)	Total (100)
25	15	47	87

Exam Status

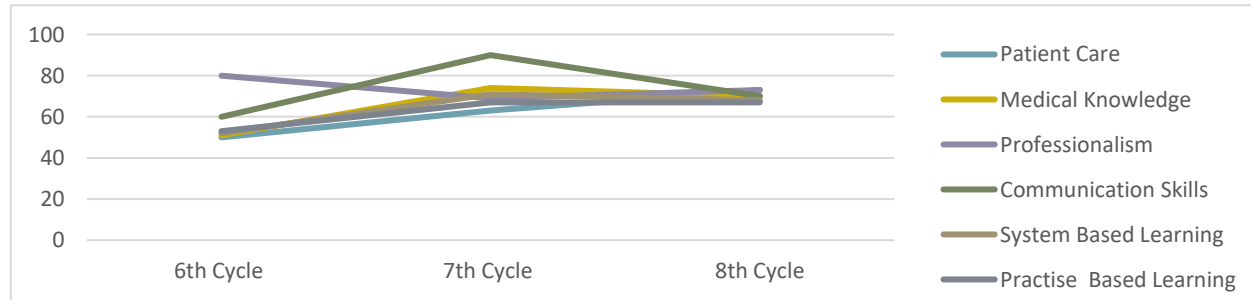
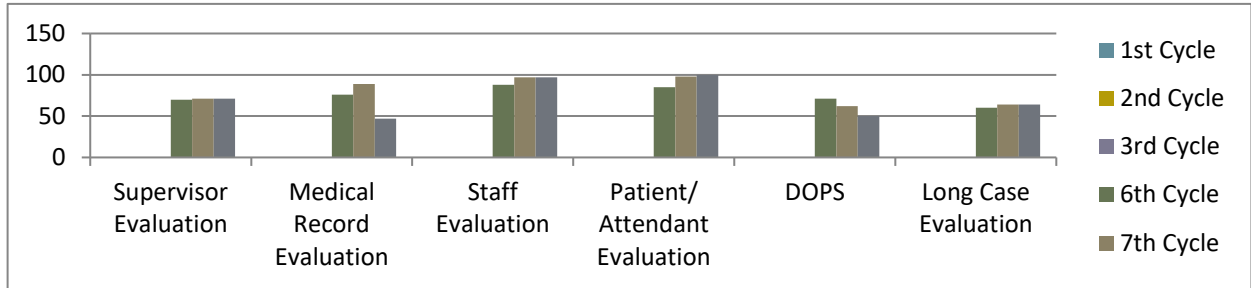
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Ishra Javed
Discipline: MS ENT

Supervisor: Dr Sadia Chaudhary
Year of Starting: 28-10-2020



Average Performance of Core Competencies:

Patient Care:	62.0%	Communication Skills:	73.3%
Medial Knowledge:	65.0%	System Based Learning:	63.7%
Professionalism:	74.0%	Practice Based Learning:	62.3%

Internal Evaluation of MS residents			
Long Case (30)	Short Case (20)	SEQs (50)	Total (100)
15	15	21	51

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
Result Waiting	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
Submitted	NA	NA	NA

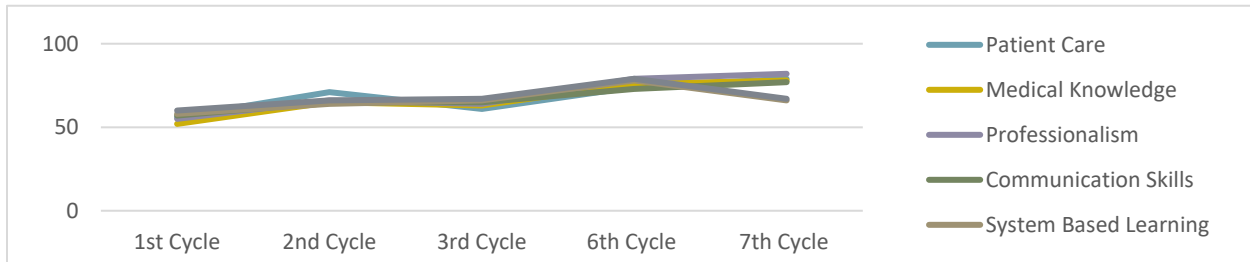
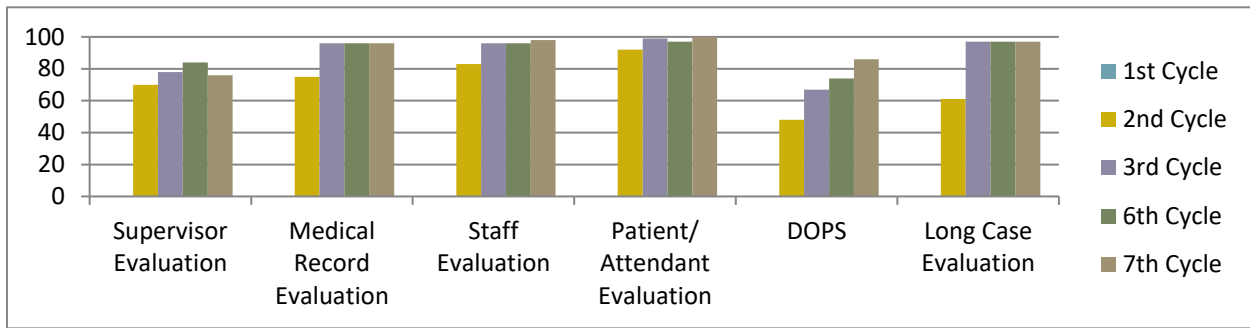
Specialty: **ENT**
Supervisor: **Dr. Nousheen Qureshi**
Hospital: **Holy Family Hospital**

Name of Resident: Dr. Asmara Hussain

Supervisor: Dr. Nousheen Qureshi

Discipline: MS ENT

Year of Starting: 7/28/2018



Average Performance of Core Competencies:

Patient Care:	68.2%	Communication Skills:	67.4%
Medial Knowledge:	66.8%	System Based Learning:	66.4%
Professionalism:	69.2%	Practice Based Learning:	67.8%

Internal Evaluation of MS residents						
DOPS/OSATS (10)	Long Case (20)	Presentation/ Journal Club (20)	MCQ/SEQs (20)	Log Book (10)	Mini CEX (20)	Grand Total (100)
7	15	14	14	7	16	73/100 73%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

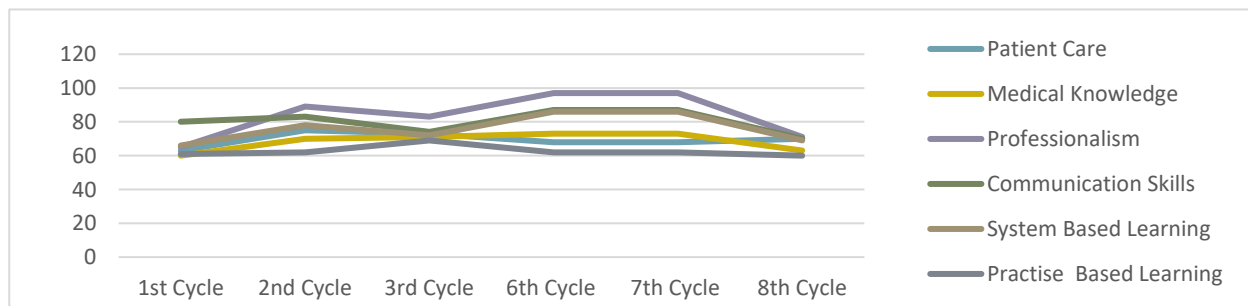
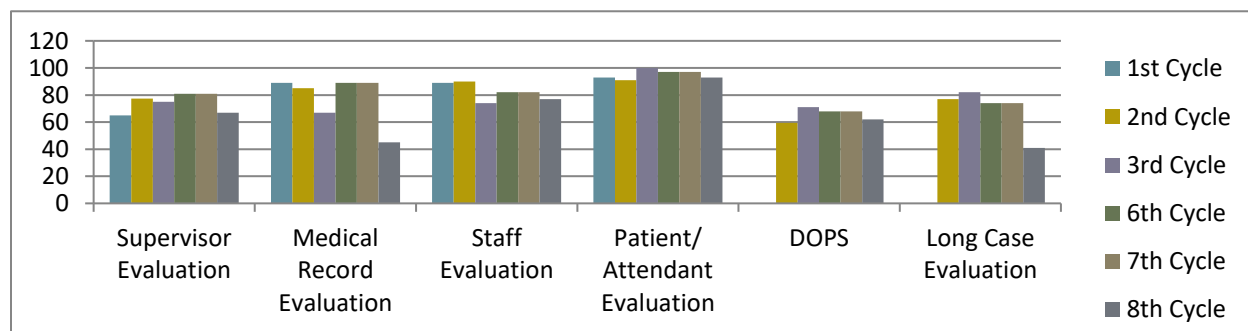
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Specialty: Gastroenterology
Supervisor: Prof. Muhammad Umar
Hospital: Holy Family Hospital

Name of Resident: Dr. Ahsan Nawaz
Discipline: MD Gastroenterology

Supervisor: Prof. M. Umar
Year of Starting: 7/7/2017



Average Performance of Core Competencies:

Patient Care:	69.5%	Communication Skills:	80.2%
Medial Knowledge:	68.3%	System Based Learning:	76.2%
Professionalism:	83.7%	Practice Based Learning:	62.7%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Long case and group discussions Total Marks= 15	Short case Total marks=15	System wise written test SEQ and MCQ Total Marks=20	TOACS Total marks=20	Log book Total marks=10	360 evaluations Total marks= 20	Grand Total 100 marks
10 /15	10.5 /15	10.5/20	11/20	8/10	15 / 20	65/100(65%)
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
DOPS Total marks =60		Presentations Journal clubs, topic presentations, guideline presentations. Histology radiology presentations Total marks=30			Logbook Total marks=10	Grand Total marks=100
45/60		22/30			8/10	75/100 (75%)
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
Ward rotation (100)			Emergency rotation (100)			Grand total = 200
65			75			140 /200(70%)

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	Submitted

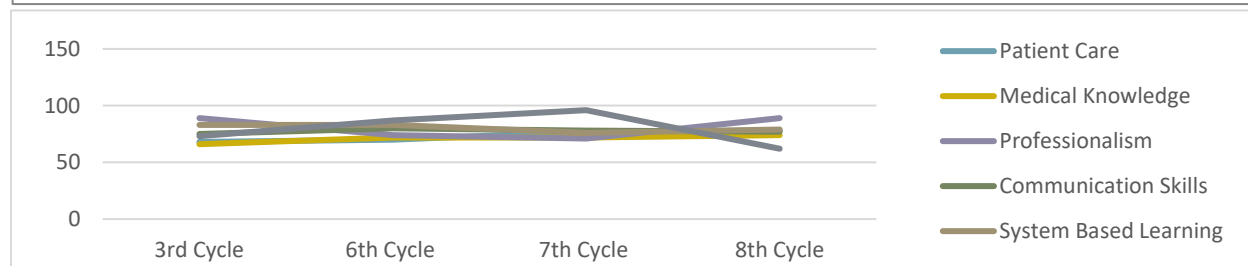
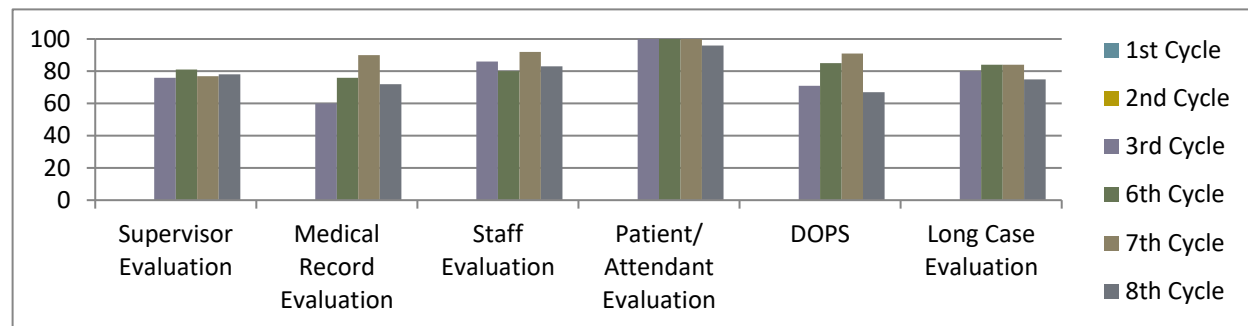
Name of Resident: Dr. Muhammad Mumtaz

Supervisor: Prof. M. Umar

Discipline: MD Gastroenterology

Year of Starting: 2/15/2019

Average Performance of Core Competencies:



Patient Care:	73.3%	Communication Skills:	77.5%
Medical Knowledge:	71.0%	System Based Learning:	80.3%
Professionalism:	80.8%	Practice Based Learning:	79.5%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)

Long case and group discussions Total Marks= 15	Short case Total marks=15	System wise written test SEQ and MCQ Total Marks=20	TOACS Total marks=20	Log book Total marks=10	360 evaluations Total marks= 20	Grand Total 100 marks
8 /15	9 /15	14.5 /20	11 /20	8/10	15 /20	65.5/100 65.5 %

Internal Evaluation of MD residents:WARD (6 months-Collective assessment)

DOPSTotal marks =60	PresentationsJournal clubs, topic presentations, guideline presentations. Histology radiology presentations Total marks=30	Log bookTotal marks=10	Grand Total marks=100
41/60	23 /30	8/10	72/100 (72%)

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)

Internal rotation Marks obtained

Ward rotation (100)	Emergency rotation (100)	Grand total = 200
65.5	72	137.5 /200(69%)

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

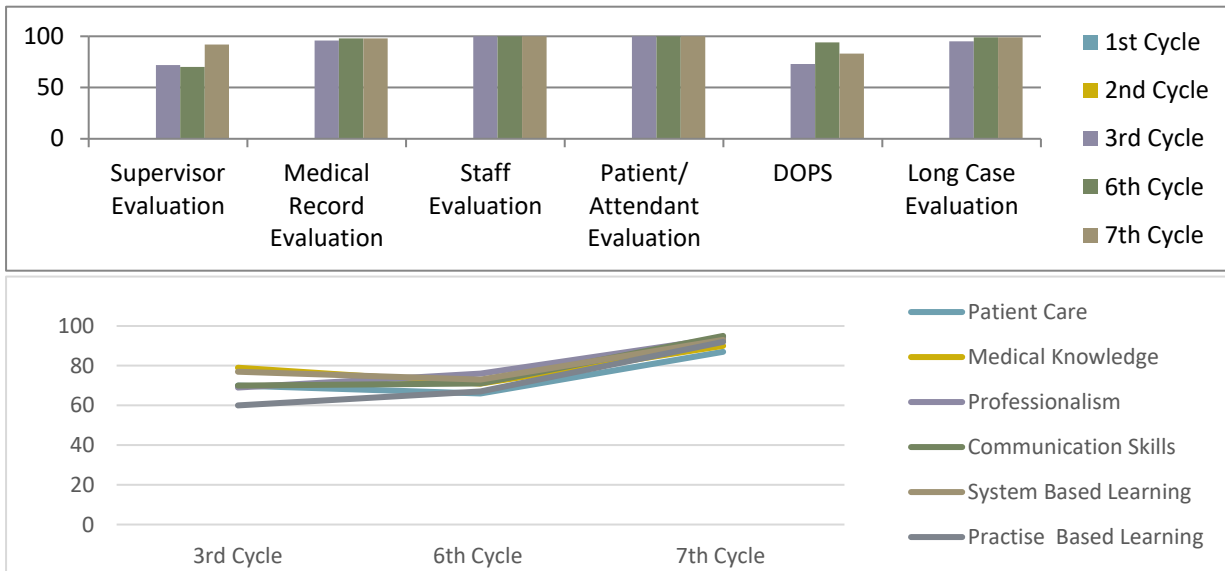
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Specialty: **G. Surgery**
Supervisor: **Prof. Naeem Zia**
Hospital: **Banazir Bhutto Hospital**
Unit-I

Name of Resident: Dr. Ayesha Mureed
Discipline: MS General Surgery

Supervisor: Prof. Naeem Zia
Year of Starting: 7/27/2018



Average Performance of Core Competencies:

Patient Care:	74.3%	Communication Skills:	78.7%
Medial Knowledge:	80.0%	System Based Learning:	81.0%
Professionalism:	79.7%	Practice Based Learning:	73.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Long case and group discussions Total Marks= 15	Short case Total marks=15	System wise written test SEQ and MCQ Total Marks=20	TOACS Total marks=20	Log book Total marks=10	360 evaluations Total marks= 20	Grand Total 100 marks
7.5	8	7.5	16	8	16	63
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
DOPS Total marks =60		Presentations Journal clubs, topic presentations, guideline presentations. Histology radiology presentations Total marks=30			Log book Total marks=10	Grand Total marks=100
52		22			7	81
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
Ward rotation (100)			Emergency rotation (100)			Grand total = 200
80			80			160

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

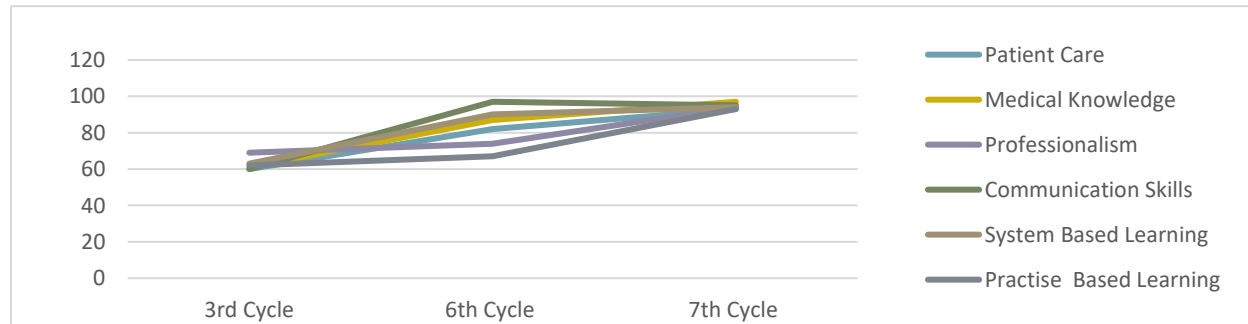
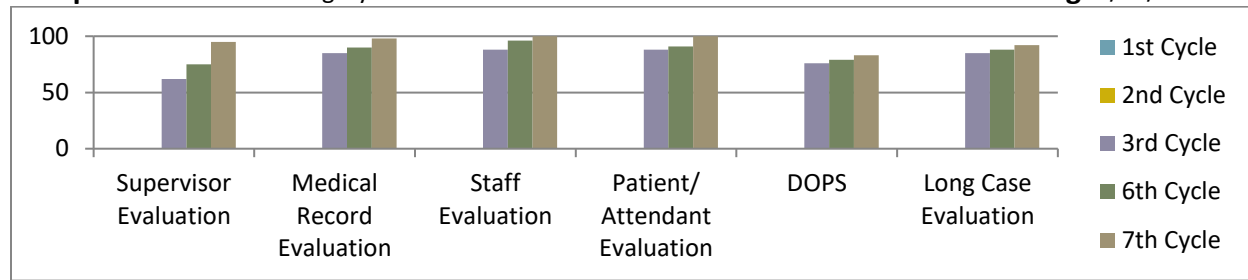
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	Submitted

Name of Resident: Dr. Sidra Akbar

Supervisor: Prof. Naeem Zia

Discipline: MS General Surgery

Year of Starting: 2/15/2019



Average Performance of Core Competencies:

Patient Care:	78.3%	Communication Skills:	84.0%
Medial Knowledge:	81.7%	System Based Learning:	82.3%
Professionalism:	79.0%	Practice Based Learning:	74.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)

Long case and group discussions Total Marks= 15	Short case Total marks=15	System wise written test SEQ and MCQ Total Marks=20	TOACS Total marks=20	Log book Total marks=10	360 evaluations Total marks= 20	Grand Total 100 marks
7	7	6.5	15	7	14	56.5
Internal Evaluation of MD residents:WARD (6 months-Collective assessment)						
DOPSTotal marks =60		PresentationsJournal clubs, topic presentations, guideline presentations. Histology radiology presentations Total marks=30			Log bookTotal marks=10	Grand Total marks=100
40		23.25			6	69.25
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
Ward rotation (100)			Emergency rotation (100)			Grand total = 200
60			70			130

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

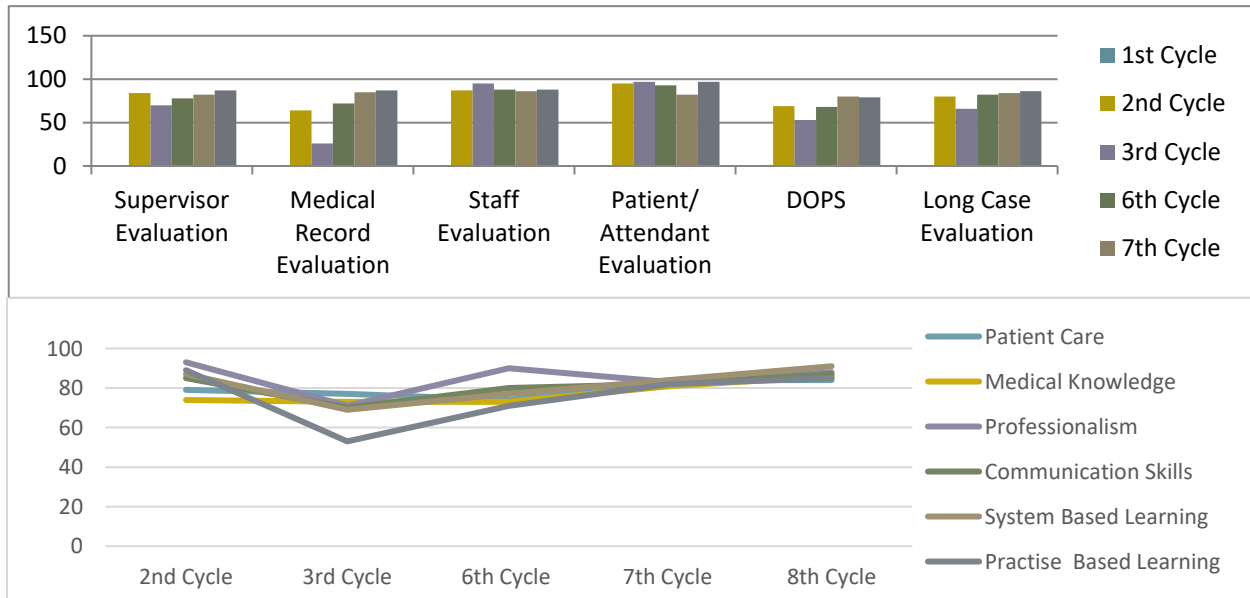
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Specialty: **G. Surgery**
Supervisor: **Prof. M. Hanif**
Hospital: **Banazir Bhutto Hospital**
Unit-II

Name of Resident: Dr. M. Umar Javed
Discipline: MS Surgery

Supervisor: Prof M. Hanif
Year of Starting: 7/28/2018



Average Performance of Core Competencies:

Patient Care:	79.6%	Communication Skills:	80.8%
Medial Knowledge:	77.4%	System Based Learning:	81.6%
Professionalism:	85.0%	Practice Based Learning:	76.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Long case and group discussions Total Marks= 15	Short case Total marks=15	System wise written test SEQ and MCQ Total Marks=20	TOACS Total marks=20	Log book Total marks=10	360 evaluations Total marks= 20	Grand Total 100 marks
13	10	16	15	08	18	80
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
DOPS Total marks =60		Presentations Journal clubs, topic presentations, guideline presentations. Histology radiology presentations Total marks=30			Logbook Total marks=10	Grand Total marks=100
49		24			8	81
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
Ward rotation (100)			Emergency rotation (100)			Grand total = 200
81			86			167

Exam Status

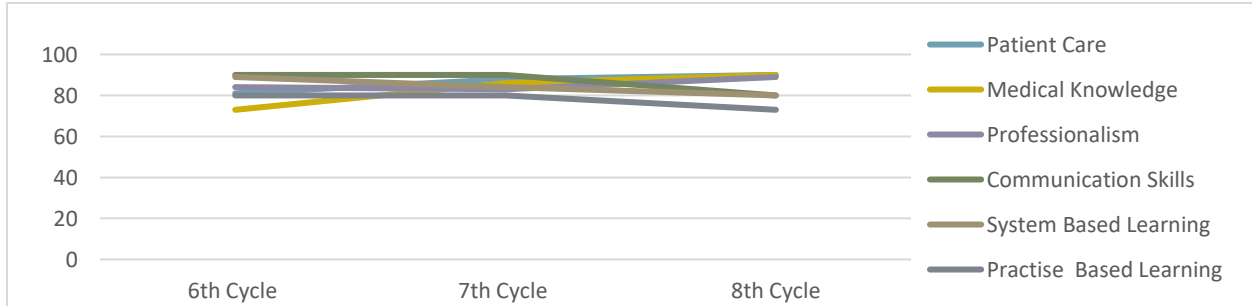
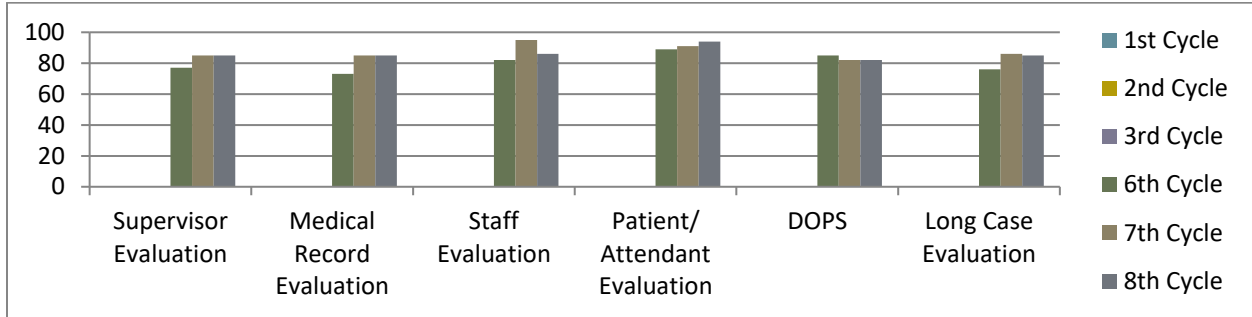
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. M. Zeeshan Azam
Discipline: MS G. Surgery

Supervisor: Prof Muhammad Hanif
Year of Starting: 09/03/2019



Average Performance of Core Competencies:

Patient Care:	86.3%	Communication Skills:	86.7%
Medial Knowledge:	83.0%	System Based Learning:	84.3%
Professionalism:	85.3%	Practice Based Learning:	77.7%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Long case and group discussions Total Marks= 15	Short case Total marks=15	System wise written test SEQ and MCQ Total Marks=20	TOACS Total marks=20	Log book Total marks=10	360 evaluations Total marks= 20	Grand Total 100 marks
12	10	15	16	09	17	79
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
DOPS Total marks =60		Presentations Journal clubs, topic presentations, guideline presentations. Histology radiology presentations Total marks=30			Logbook Total marks=10	Grand Total marks=100
50		23			8	81
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
Ward rotation (100)			Emergency rotation (100)			Grand total = 200
82			83			165

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

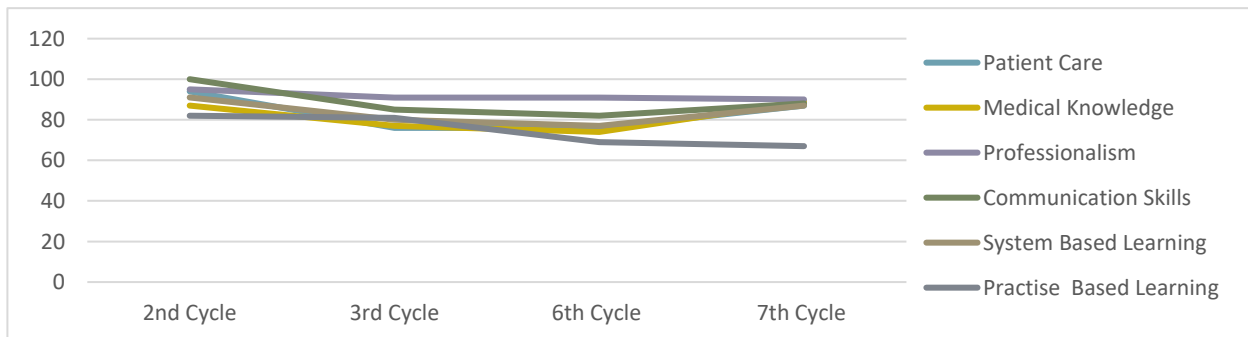
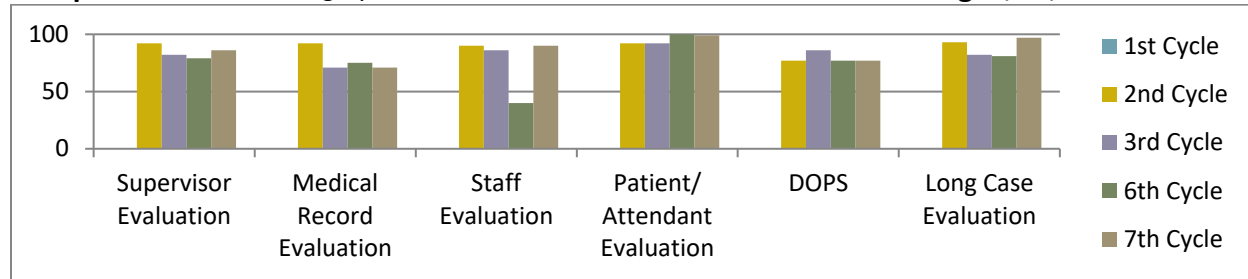
Specialty: G. Surgery
Supervisor: Prof. Jahangir Sarwar
Hospital: Holy Family Hospital Unit-I

Name of Resident: Dr. Anam Saeed

Supervisor: Prof Jahangir Sarwar

Discipline: MS General Surgery

Year of Starting: 7/28/2018



Average Performance of Core Competencies:

Patient Care: 83.3% Communication Skills: 88.8%
 Medial Knowledge: 81.8% System Based Learning: 83.8%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Long case and group discussions Total Marks= 15	Short case Total marks=15	System wise written test SEQ and MCQ Total Marks=20	TOACS Total marks=20	Log book Total marks=10	360 evaluations Total marks= 20	Grand Total 100 marks
10	09	13	15	08	15	70/100 (70%)
CIA: WARD (6 months-Collective assessment)						
DOPS Total marks =60		Presentations Journal clubs, topic presentations, guideline presentations. Histology radiology presentations Total marks=30			Log book Total marks=10	Grand Total marks=100
47		23			8	78/100 78%
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
Ward rotation(100)			Emergency rotation (100)			Grand total 200 marks
70			72			142
Professionalism: 91.8%			Practice Based Learning: 74.8%			

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

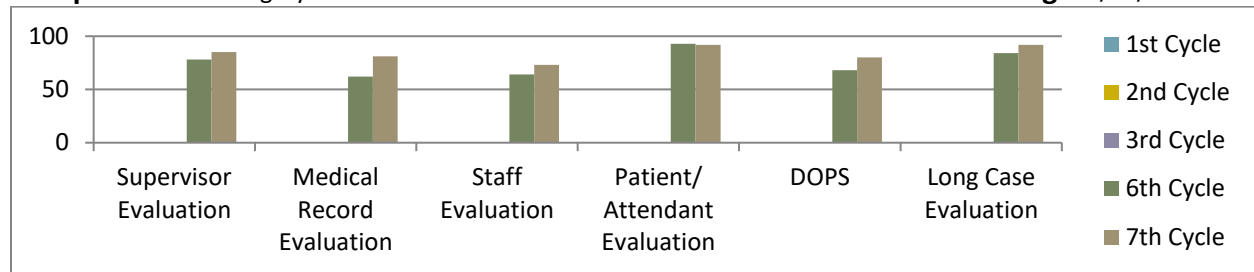
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	Submitted

Name of Resident: Dr. Sadaf Nayab

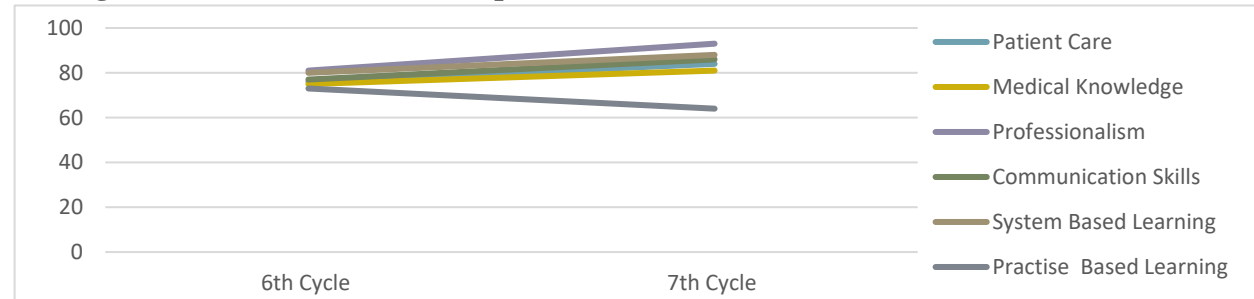
Supervisor: Prof Jahangir Sarwar

Discipline: MS G. Surgery

Year of Starting: 09/03/2019



Average Performance of Core Competencies:



Patient Care: 80.0% Communication Skills: 81.5%
 Medial Knowledge: 78.0% System Based Learning: 84.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Long case and group discussions Total Marks= 15	Short case Total marks=15	System wise written test SEQ and MCQ Total Marks=20	TOACS Total marks=20	Log book Total marks=10	360 evaluations Total marks= 20	Grand Total 100 marks
12	10	15	16	09	15	77/100 77 %
CIA: WARD (6 months-Collective assessment)						
DOPS Total marks =60		Presentations Journal clubs, topic presentations, guideline presentations. Histology radiology presentations Total marks=30			Log book Total marks=10	Grand Total marks=100
48		24			8	80/100 80%
Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Internal rotation Marks obtained						
Ward rotation(100)			Emergency rotation (100)			Grand total 200 marks
77			80			157

Professionalism: 87.0% Practice Based Learning: 68.5%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

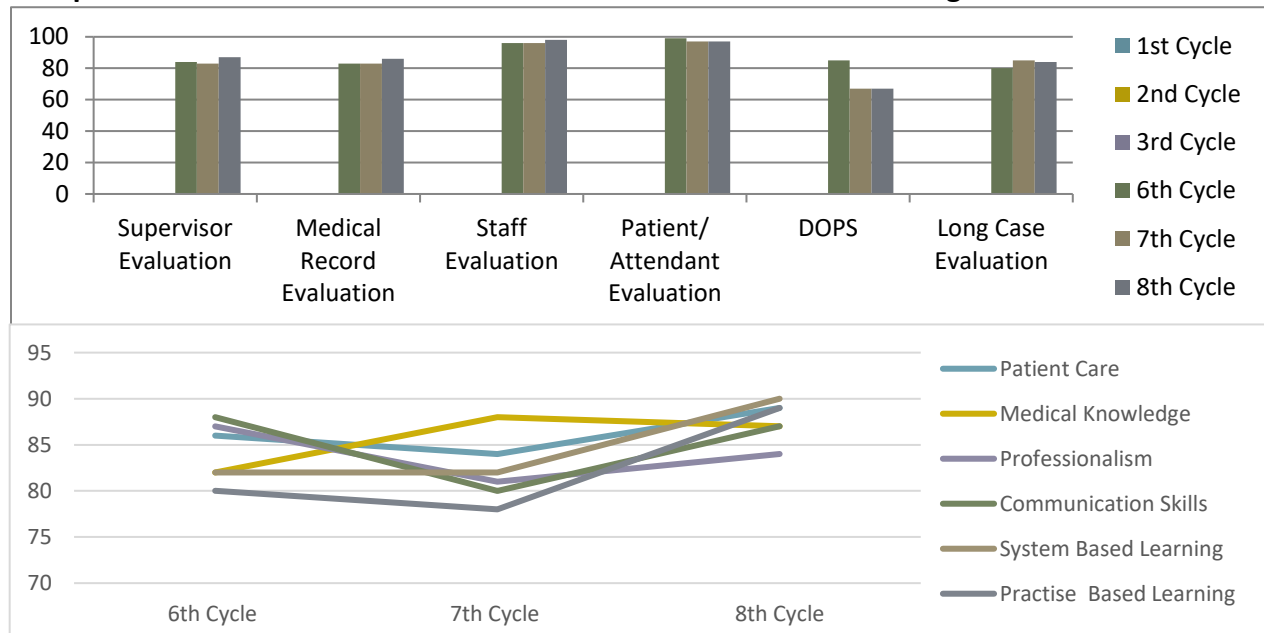
Specialty: Medicine
Supervisor: Dr. Shahzad Manzoor
Hospital: District Headquarter Hospital

Name of Resident: Dr. Noor Nasir Rajpoot

Supervisor: Dr Shahzad Manzoor

Discipline: MD Medicine

Year of Starting: 13/05/2019



Average Performance of Core Competencies:

Patient Care:	86.3%	Communication Skills:	85.0%
Medical Knowledge:	85.7%	System Based Learning:	84.7%
Professionalism:	84.0%	Practice Based Learning:	82.3%

INTERNAL ROTATION

Ward (100)	ER (100)	OPD (100)	Total (300)	%
76	76	75	227/300	75.60%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

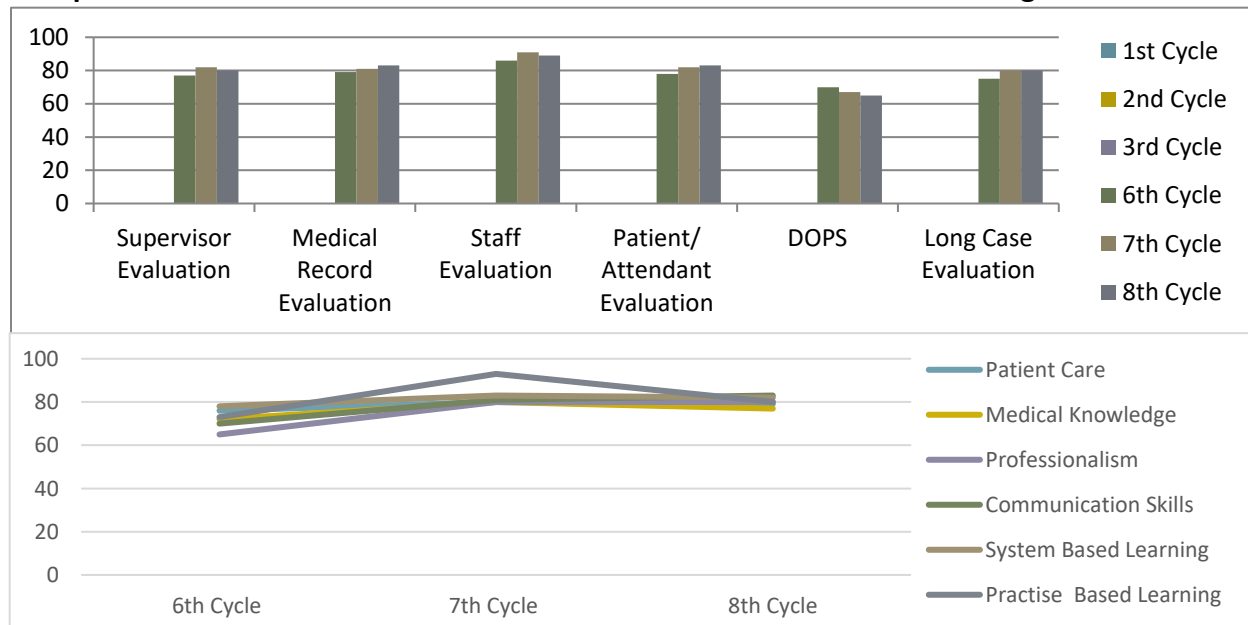
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Zeshan Ali Saddiqui

Supervisor: Dr Shahzad Manzoor

Discipline: MD Medicine

Year of Starting: 26-02-2020



Average Performance of Core Competencies:

Patient Care:	78.3%	Communication Skills:	78.0%
Medial Knowledge:	76.3%	System Based Learning:	81.0%
Professionalism:	75.0%	Practice Based Learning:	82.0%

INTERNAL ROTATION

Ward (100)	ER (100)	OPD (100)	Total (300)	%
75	75	75	225/300	75%

Exam Status

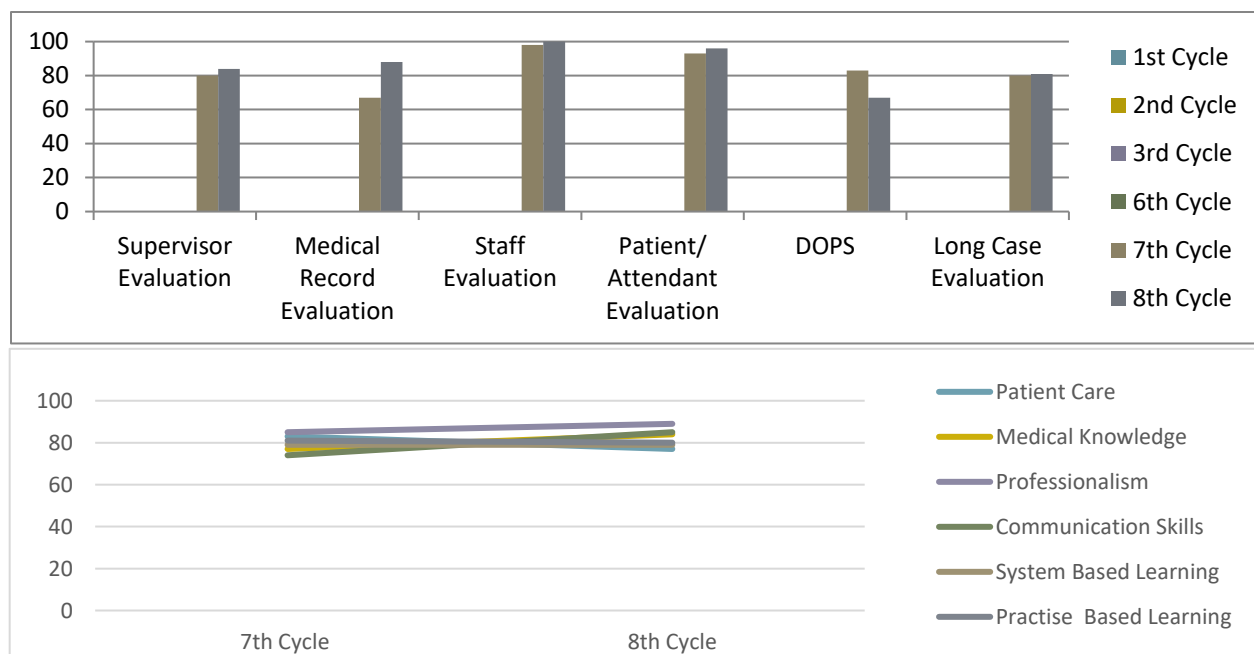
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Name of Resident: Dr. Sanabil Anwar
Discipline: MD Medicine

Supervisor: Dr. Shahzad Manzoor
Year of Starting: 03/03/2021



Average Performance of Core Competencies:

Patient Care:	80.0%	Communication Skills:	79.5%
Medial Knowledge:	80.5%	System Based Learning:	79.0%
Professionalism:	87.0%	Practice Based Learning:	80.5%

<u>INTERNAL ROTATION</u>				
Ward (100)	ER (100)	OPD (100)	Total (300)	%
75	75	75	225/300	75%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

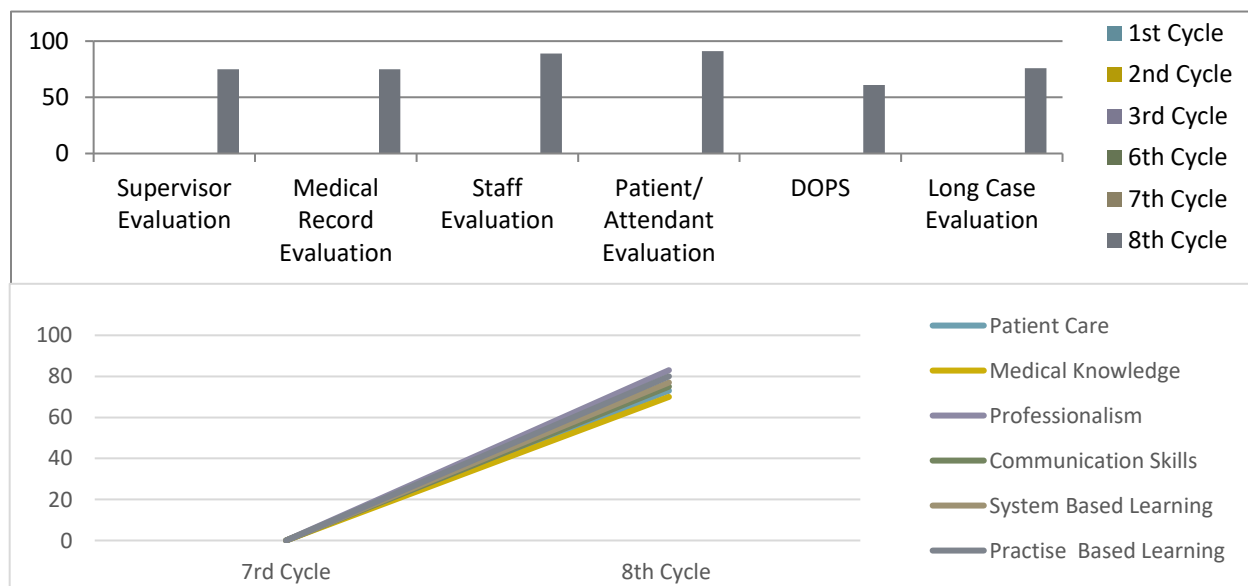
Name of Resident: Dr. Nauman Nawaz

Supervisor: Dr Shahzad Manzoor

Discipline: MD Medicine

Year of Starting: 26-7-2021

7th Cycle is not applicable.



Average Performance of Core Competencies:

Patient Care:	36.5%	Communication Skills:	37.5%
Medial Knowledge:	35.5%	System Based Learning:	38.5%
Professionalism:	41.5%	Practice Based Learning:	40.0%

INTERNAL ROTATION

Ward (100)	ER (100)	OPD (100)	Total (300)	%
75	75	75	225/300	75%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

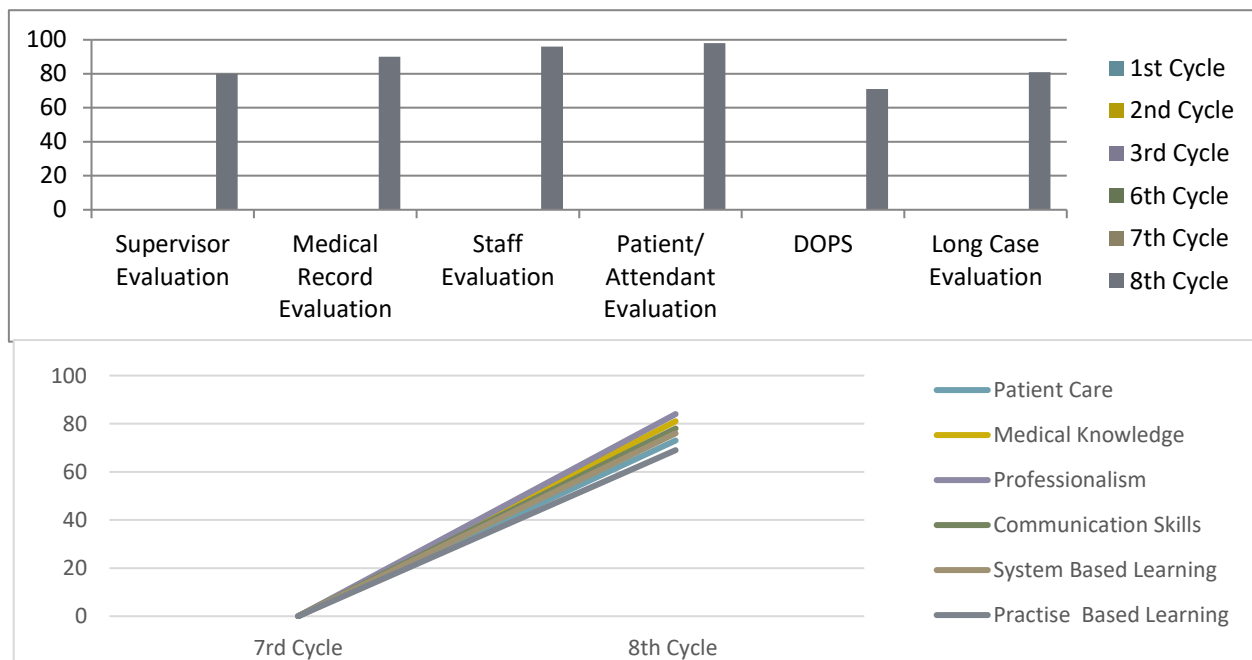
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Name of Resident: Dr. Muhammad Ihtisham Ul Haq
Discipline: MD Medicine

Supervisor: Dr Shahzad Manzoor
Year of Starting: 26-7-2021

7th Cycle is not applicable.



Average Performance of Core Competencies:

Patient Care:	36.5%	Communication Skills:	39.0%
Medial Knowledge:	40.5%	System Based Learning:	38.0%
Professionalism:	42.0%	Practice Based Learning:	34.5%

<u>INTERNAL ROTATION</u>				
Ward (100)	ER (100)	OPD (100)	Total (300)	%
75	75	75	225/300	75%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	NA	NA	NA

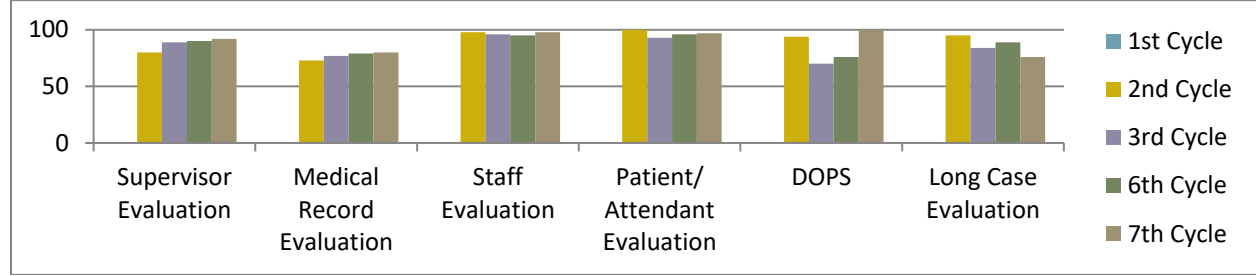
Specialty: Medicine
Supervisor: Dr. Lubna Meraj
Hospital: Banazir Bhutto Hospital
Unit-I

Name of Resident: Dr. Faisal Sheraz

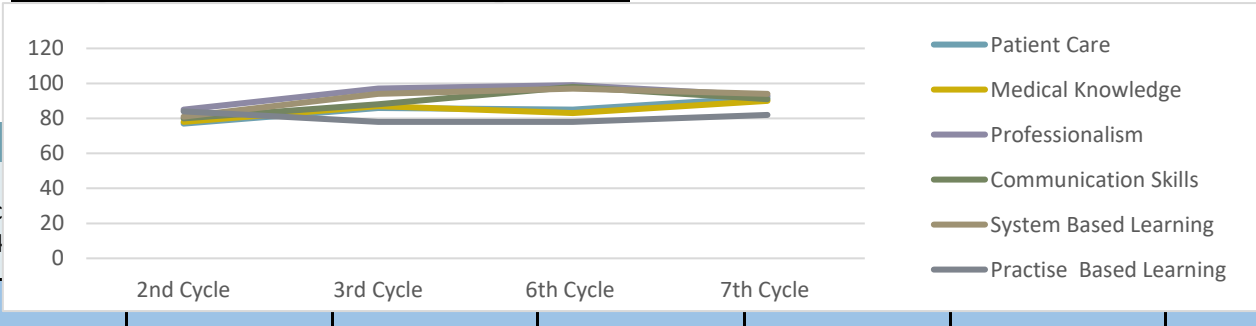
Supervisor: Dr. Lubna Meraj

Discipline: MD Medicine

Year of Starting: 7/28/2018



Average Performance of Core Competencies:



Long case group disc					Total marks
Total Mark					100(76.5%)
12 /15	2nd Cycle	3rd Cycle	6th Cycle	7th Cycle	

CIA : WARD (6 months-Collective assessment)			
Patient assessment Total marks =50	Presentations, Journal clubs, topic presentations, guideline presentations. (Total marks=40)	Logbook Total marks=10	Grand Total marks=100
45/50	30/40	8/10	83/100 (83%)

Internal rotation Marks obtained		
Internal rotation Marks obtained		Grand total 200 marks
Ward rotation (100)	Emergency rotation (100)	
80	80	160 /200 (80%)

Patient Care:	85.0%	Communication Skills:	89.5%
Medial Knowledge:	84.5%	System Based Learning:	91.0%
Professionalism:	93.5%	Practise Based Learning:	80.5%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

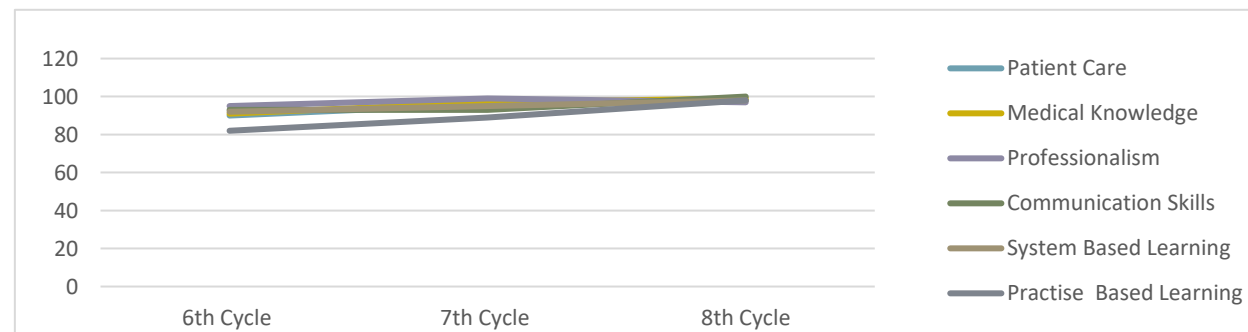
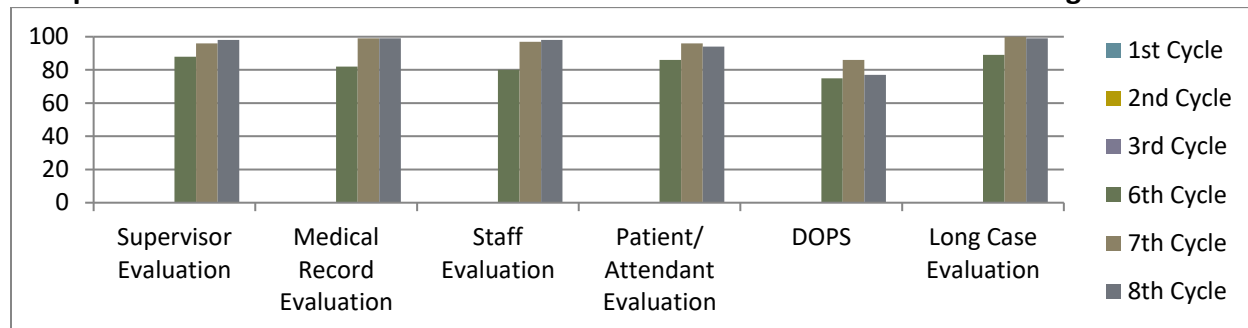
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	Submitted

Name of Resident: Dr. Ayesha Saman

Supervisor: Prof Lubna Meraj

Discipline: MD Medicine

Year of Starting: 26-02-2020



Average Performance of Core Competencies:

Patient Care:	94.7%	Communication Skills:	95.3%
Medial Knowledge:	95.7%	System Based Learning:	95.0%
Professionalism:	97.0%	Practice Based Learning:	89.7%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)

Long case and group discussions Total Marks= 15	Short case Total marks=15	System wise written test SEQ and MCQ Marks=20	TOACS marks=20	Log book Total marks=10	360 evaluation Total marks= 20	Grand Total 100 marks
10/15	11/15	15/20	14/20	8/10	18/20	76/100 (76%)

CIA : WARD (6 months-Collective assessment)

Patient assessment Total marks =50	Presentations, Journal clubs, topic presentations, guideline presentations. (Total marks=40)	Logbook Total marks=10	Grand Total marks=100
40/50	27/40	8/10	75/100 (75%)

Internal rotation Marks obtained

Internal rotation Marks obtained		Grand total 200 marks
Ward rotation (100)	Emergency rotation (100)	
75	75	150/200 75%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Na	NA	NA

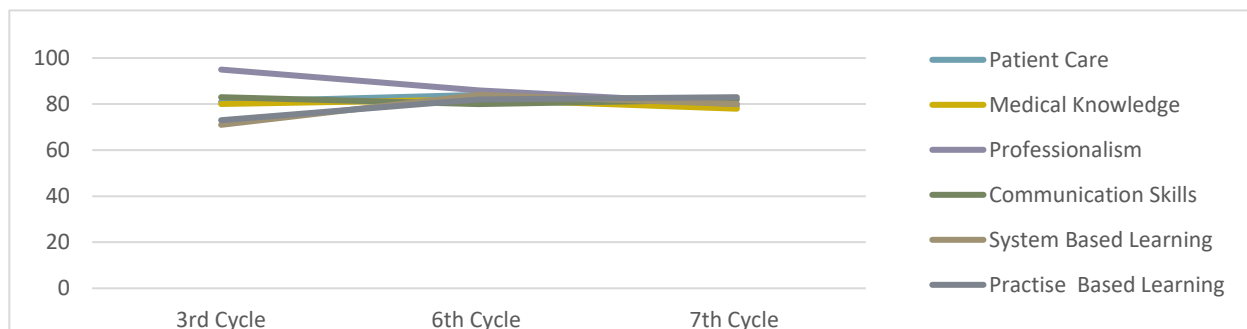
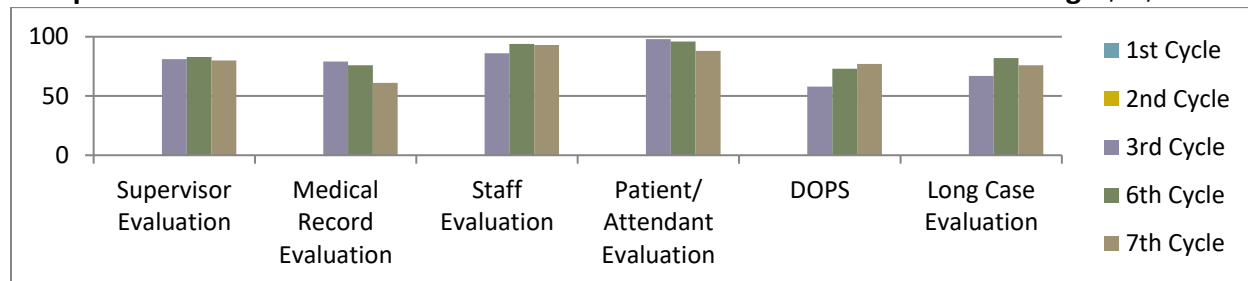
Specialty: Medicine
Supervisor: Prof. Ali Khalid
Hospital: Banazir Bhutto Hospital
Unit-II

Name of Resident: Dr. Nabeel Riaz

Supervisor: Prof. Ali Khalid

Discipline: MD Medicine

Year of Starting: 5/14/2019



Average Performance of Core Competencies:

Patient Care:	81.3%	Communication Skills:	81.7%
Medial Knowledge:	80.0%	System Based Learning:	78.3%
Professionalism:	87.0%	Practice Based Learning:	79.3%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
LONG CASE AND GROUP DISCUSSIONS TOTAL MARKS= 15	SHORT CASE TOTAL MARKS=15	SYSTEM WISE WRITTEN TEST SEQ AND MCQ MARKS=20	TOACS TOTAL MARKS=20	LOGBOOK TOTAL MARKS=10	360 EVALUATION TOTAL MARKS= 20	GRAND TOTAL 100 MARKS
8/15	10/15	16/20	12/20	8/10	15/20	69 (69%)

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

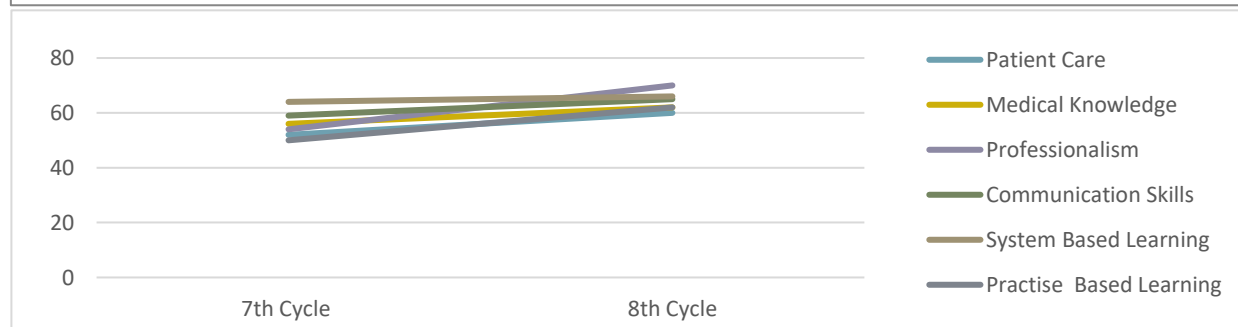
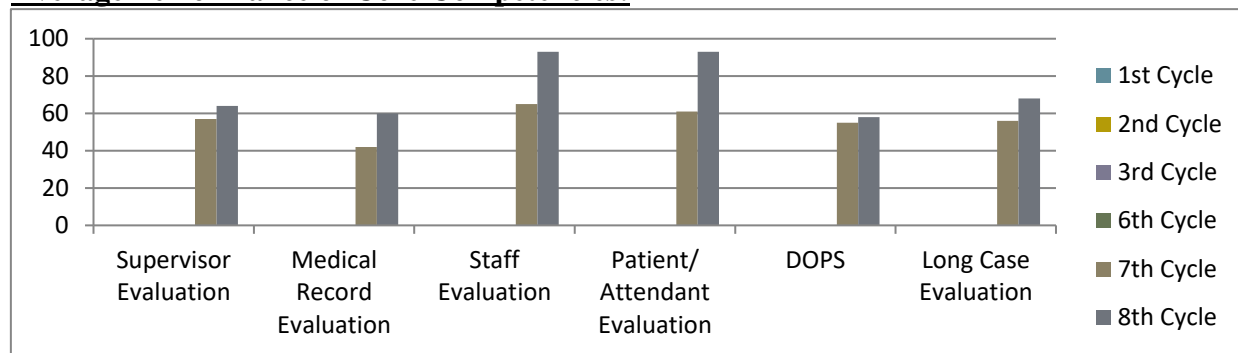
Name of Resident: Dr. Muhammad Zeeshan Tariq

Supervisor: Prof M Ali Khalid

Discipline: MD Medicine

Year of Starting: 03-03-2021

Average Performance of Core Competencies:



Patient Care:	56.0%	Communication Skills:	62.5%
Medial Knowledge:	59.0%	System Based Learning:	65.0%
Professionalism:	62.0%	Practice Based Learning:	56.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)

LONG CASE AND GROUP DISCUSSIONS TOTAL MARKS= 15	SHORT CASE TOTAL MARKS=15	SYSTEM WISE WRITTEN TEST SEQ AND MCQ MARKS=20	TOACS TOTAL MARKS=20	LOGBOOK TOTAL MARKS=10	360 EVALUATION TOTAL MARKS= 20	GRAND TOTAL 100 MARKS
7.5/15	8/15	13/20	10/20	7/10	14/20	59.5 (59.5 %)

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

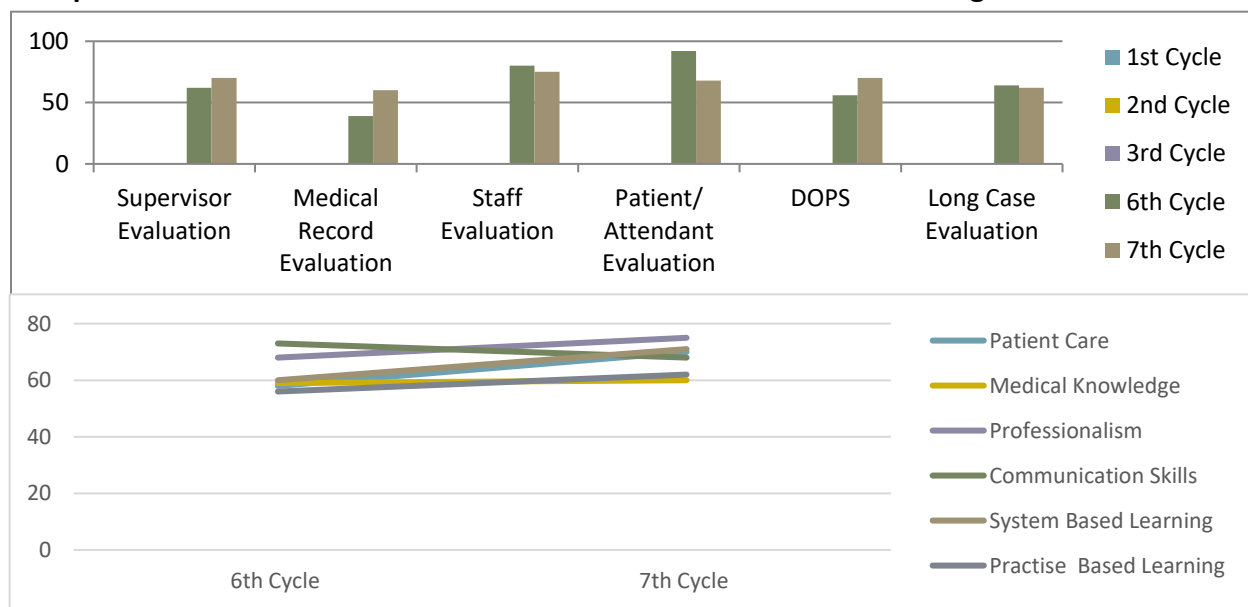
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Specialty: Medicine
Supervisor: Dr. Saima Ambreen
Hospital: Holy Family Hospital Unit-I

Name of Resident: Dr. Ali Asif
Discipline: MD Medicine

Supervisor: Dr. Saima Ambreen
Year of Starting: 28-10-2020



Average Performance of Core Competencies:

Patient Care:	64.0%	Communication Skills:	70.5%
Medial Knowledge:	59.5%	System Based Learning:	65.5%
Professionalism:	71.5%	Practice Based Learning:	59.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)							
LONG CASE AND GROUP DISCUSSIONS TOTAL MARKS= 10	SHORT CASE TOTAL MARKS=10	SYSTEM WISE WRITTEN TEST SEQ AND MCQ MARKS=20	TOACS TOTAL MARKS=20	LOG BOOK TOTAL MARKS=10	TOPIC PRESENTATION/ JOURNAL CLUB MARKS=10	360 EVALUATION TOTAL MARKS= 20	GRAND TOTAL 100 MARKS
5/10	5/10	10/20	12/20	8/10	5/10	15/20	60 (60%)

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
Result Waiting	NA	NA	NA	NA

Research Status

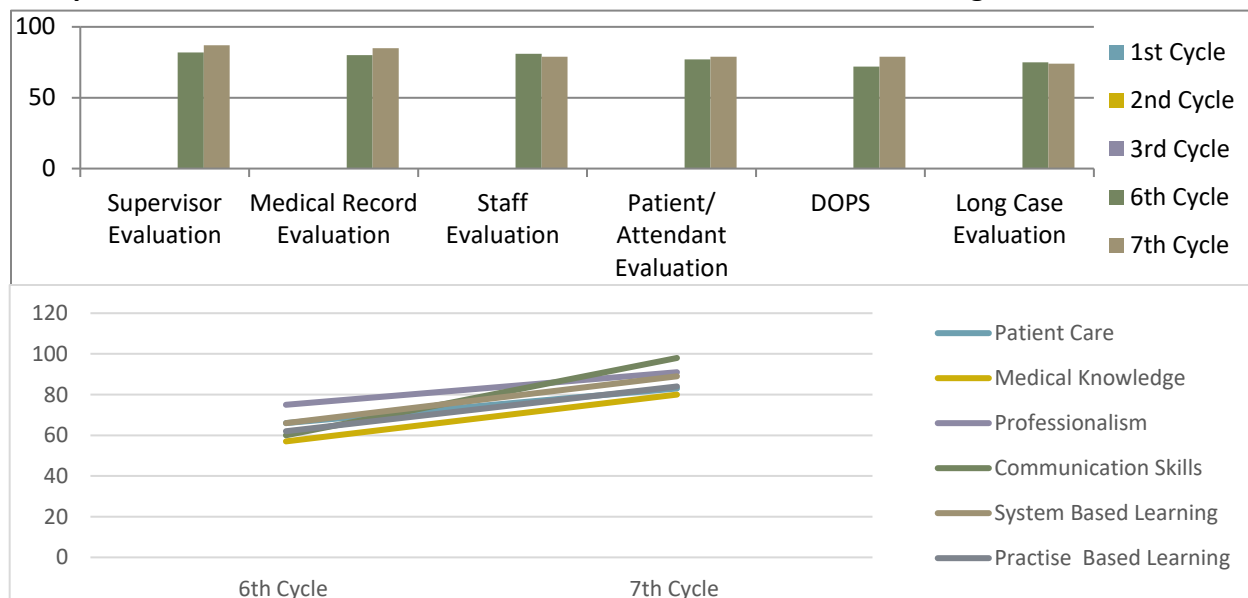
One Disease Statistical Report Submitted	Synopsis Status	BASR Approval	Thesis Status
	Na	NA	NA

Name of Resident: Dr. Mariya Ahsan

Supervisor: Dr Saima Ambreen

Discipline: MD Medicine

Year of Starting: 28-10-2020



Average Performance of Core Competencies:

Patient Care:	74.5%	Communication Skills:	79.0%
Medial Knowledge:	68.5%	System Based Learning:	77.5%
Professionalism:	83.0%	Practice Based Learning:	73.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)

LONG CASE AND GROUP DISCUSSIONS TOTAL MARKS= 10	SHORT CASE TOTAL MARKS=10	SYSTEM WISE WRITTEN TEST SEQ AND MCQ MARKS=20	TOACS TOTAL MARKS=20	LOG BOOK TOTAL MARKS=10	TOPIC PRESENTATION/ JOURNAL CLUB MARKS=10	360 EVALUATION TOTAL MARKS= 20	GRAND TOTAL 100 MARKS
6/10	6/10	12/20	12/20	8.8/10	9.5/10	17.6/20	71.9 (72 %)

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
Result Waiting	NA	NA	NA	NA

Research Status

One Disease Statistical Report Submitted	Synopsis Status Approved	BASR Approval Approved	Thesis Status NA

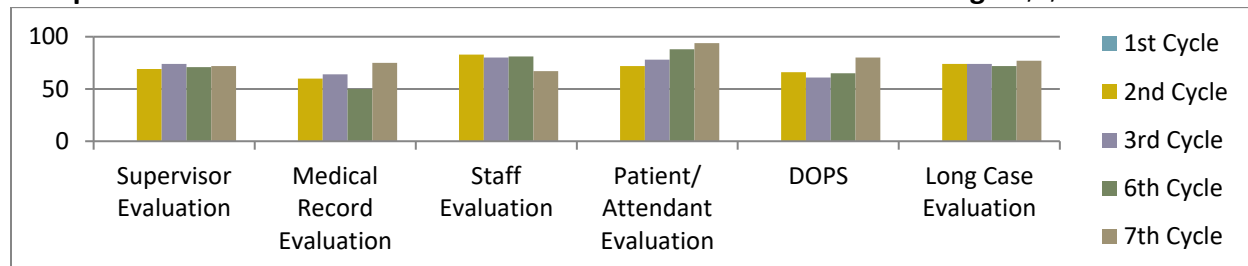
Specialty: Medicine
Supervisor: Prof. Muhammad Khurram
Hospital: Holy Family Hospital Unit-II

Name of Resident: Dr. Abdul Kabeer Baig

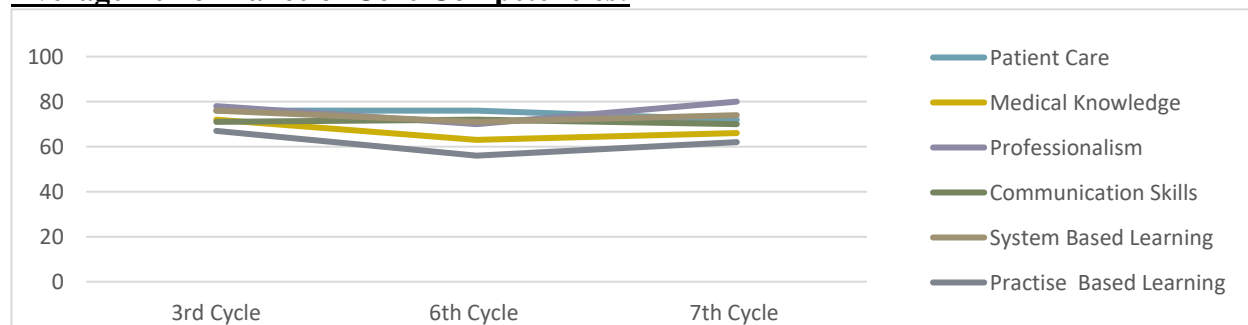
Supervisor: Prof Khurram

Discipline: MS Medicine

Year of Starting: 10/4/2018



Average Performance of Core Competencies:



Patient Care:	74.7%	Communication Skills:	71.0%
Medial Knowledge:	67.0%	System Based Learning:	73.7%
Professionalism:	76.0%	Practice Based Learning:	61.7%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)					
LONG CASE AND GROUP DISCUSSIONS TOTAL MARKS= 25	SHORT CASE TOTAL MARKS=25	CBD Total Marks=20	LOG BOOK TOTAL MARKS=10	360 EVALUATION TOTAL MARKS= 20	GRAND TOTAL 100 MARKS
17	17	15	8	15	72%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

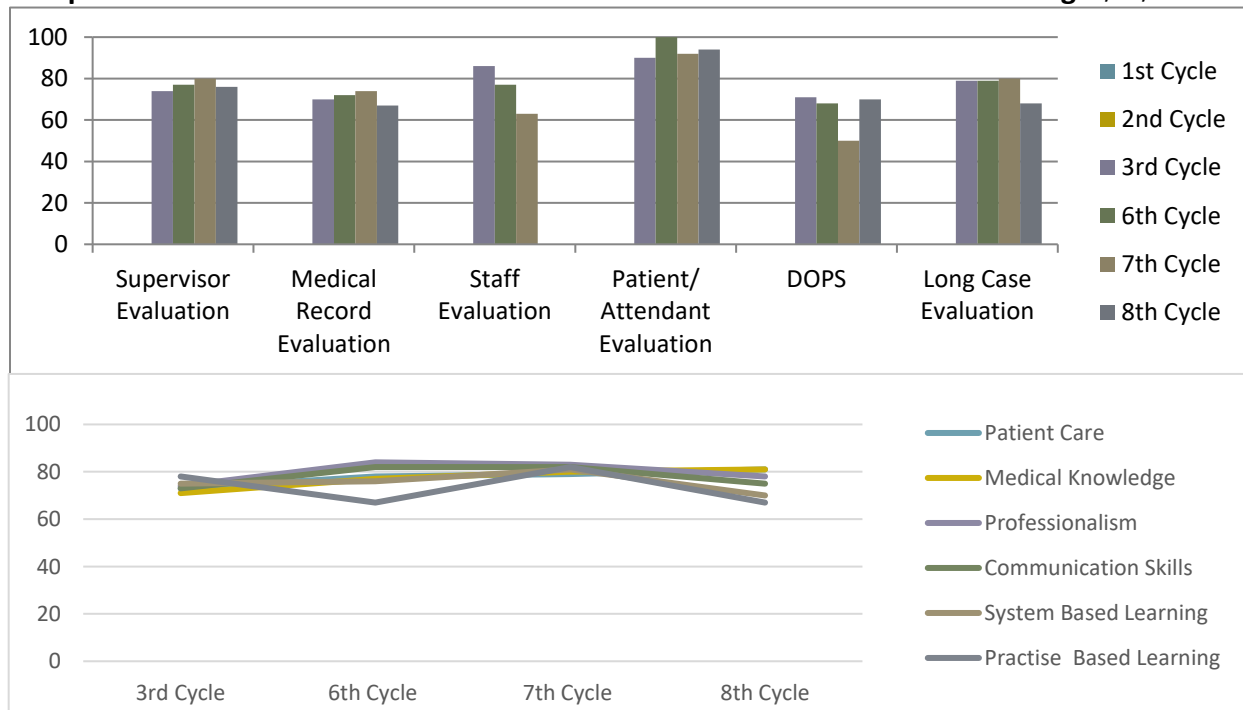
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Muhammad Sarfraz

Supervisor: Prof. Khurram

Discipline: MD Medicine

Year of Starting: 2/15/2019



Average Performance of Core Competencies:

Patient Care:	77.8%	Communication Skills:	78.0%
Medial Knowledge:	77.3%	System Based Learning:	75.5%
Professionalism:	79.8%	Practice Based Learning:	73.5%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)					
LONG CASE AND GROUP DISCUSSIONS TOTAL MARKS= 25	SHORT CASE TOTAL MARKS=25	CBD Total Marks=20	LOG BOOK TOTAL MARKS=10	360 EVALUATION TOTAL MARKS= 20	GRAND TOTAL 100 MARKS
18	18	15	8	15	75%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

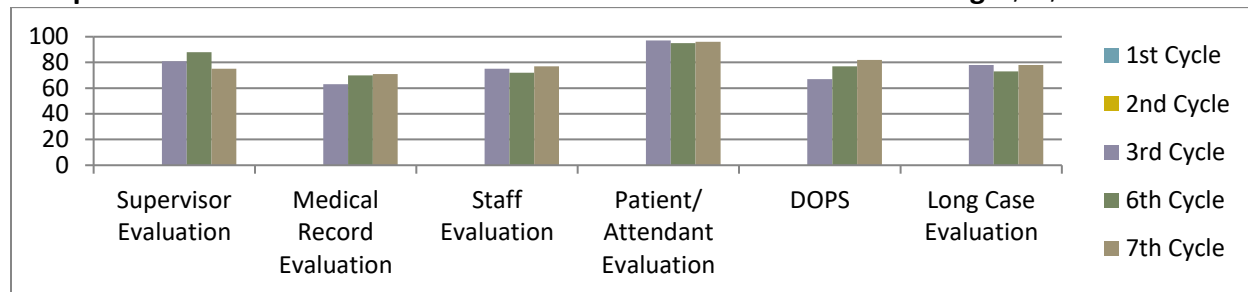
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Sidra Mubeen Arshad Iqbal

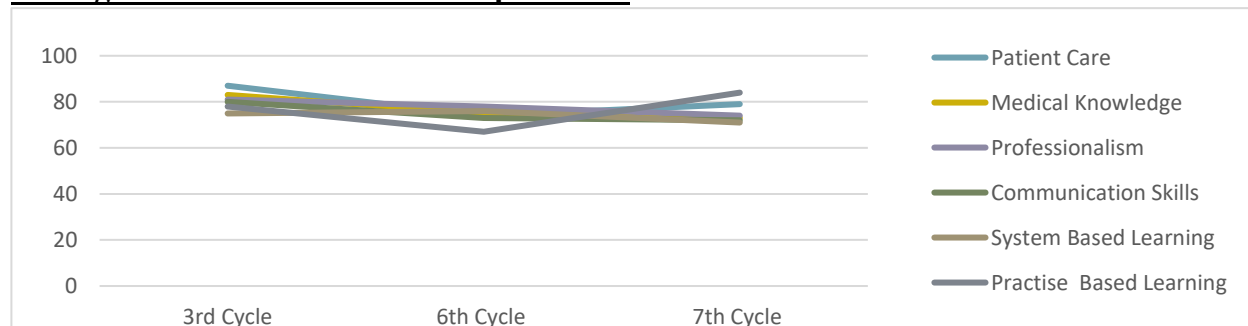
Supervisor: Prof. Khurram

Discipline: MS Medicine

Year of Starting: 2/15/2019



Average Performance of Core Competencies:



Patient Care:	80.0%	Communication Skills:	75.0%
Medial Knowledge:	77.0%	System Based Learning:	74.0%
Professionalism:	77.7%	Practice Based Learning:	76.3%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)

LONG CASE AND GROUP DISCUSSIONS TOTAL MARKS= 25	SHORT CASE TOTAL MARKS=25	CBD Total Marks=20	LOG BOOK TOTAL MARKS=10	360 EVALUATION TOTAL MARKS= 20	GRAND TOTAL 100 MARKS
17	17	14	8	15	71%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

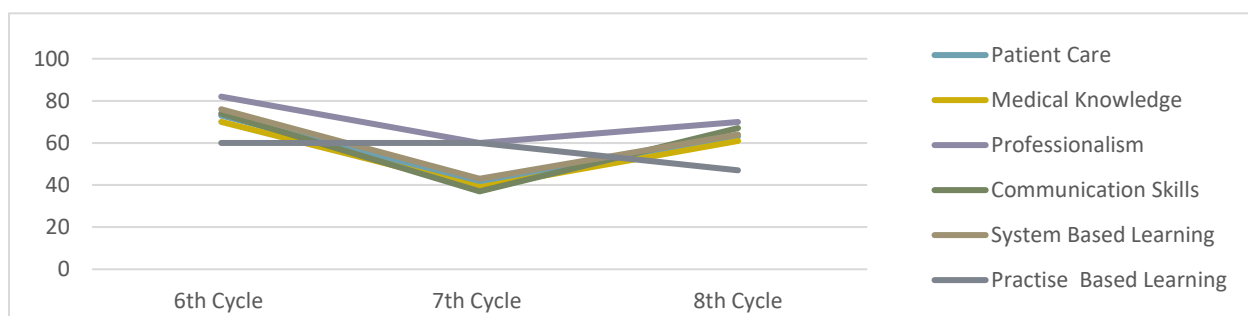
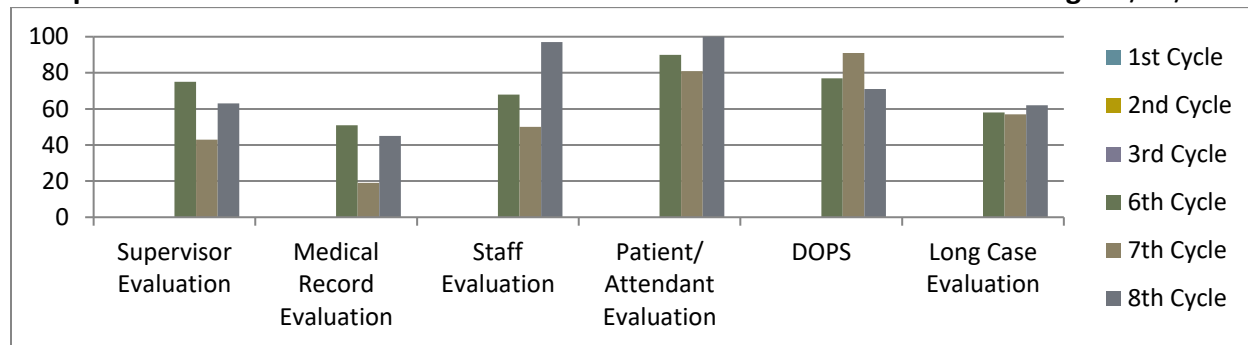
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Muhammad Shahid Khan

Supervisor: Prof M Khurram

Discipline: MD Medicine

Year of Starting: 26/10/2019



Average Performance of Core Competencies:

Patient Care:	59.0%	Communication Skills:	59.3%
Medial Knowledge:	56.7%	System Based Learning:	61.0%
Professionalism:	70.7%	Practice Based Learning:	55.7%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)					
LONG CASE AND GROUP DISCUSSIONS TOTAL MARKS= 25	SHORT CASE TOTAL MARKS=25	CBD Total Marks=20	LOG BOOK TOTAL MARKS=10	360 EVALUATION TOTAL MARKS= 20	GRAND TOTAL 100 MARKS
10	12.5	10	05	10	47.5%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

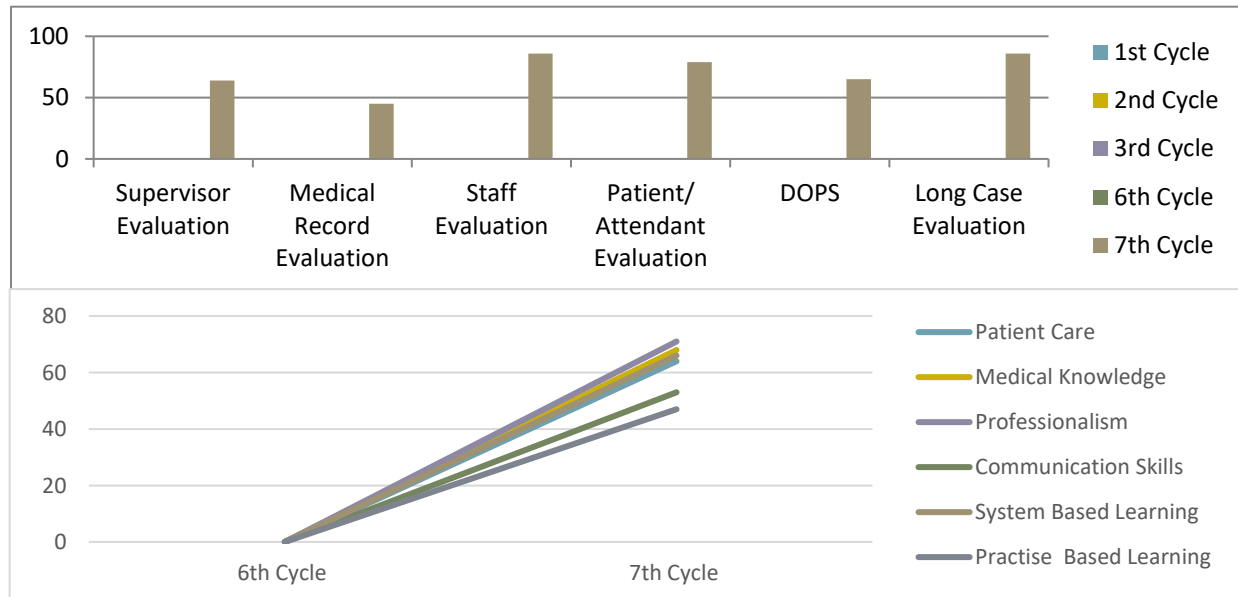
Name of Resident: Dr. Asad Khan

Supervisor: Prof M Khurram

Discipline: MD Medicine

Year of Starting: 03/03/2021

6th Cycle is not applicable



Average Performance of Core Competencies:

Patient Care:	32.0%	Communication Skills:	26.5%
Medial Knowledge:	34.0%	System Based Learning:	33.0%
Professionalism:	35.5%	Practice Based Learning:	23.5%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)					
LONG CASE AND GROUP DISCUSSIONS TOTAL MARKS= 25	SHORT CASE TOTAL MARKS=25	CBD Total Marks=20	LOG BOOK TOTAL MARKS=10	360 EVALUATION TOTAL MARKS= 20	GRAND TOTAL 100 MARKS
12.5	13	12	05	10	52%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

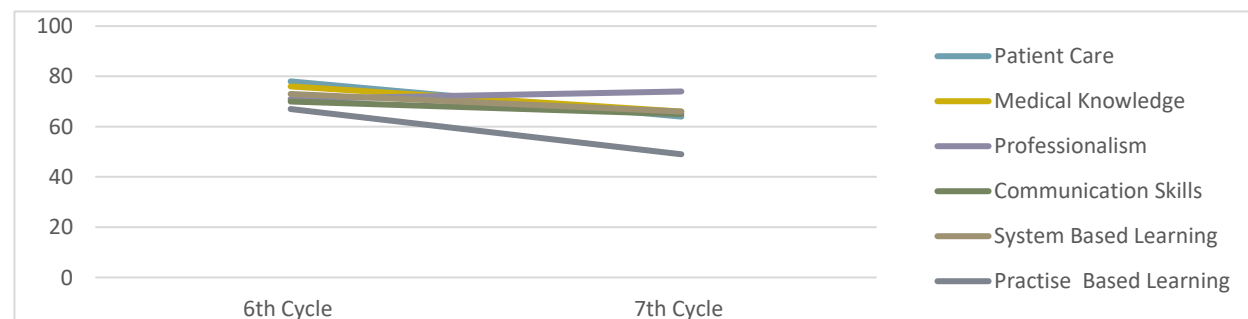
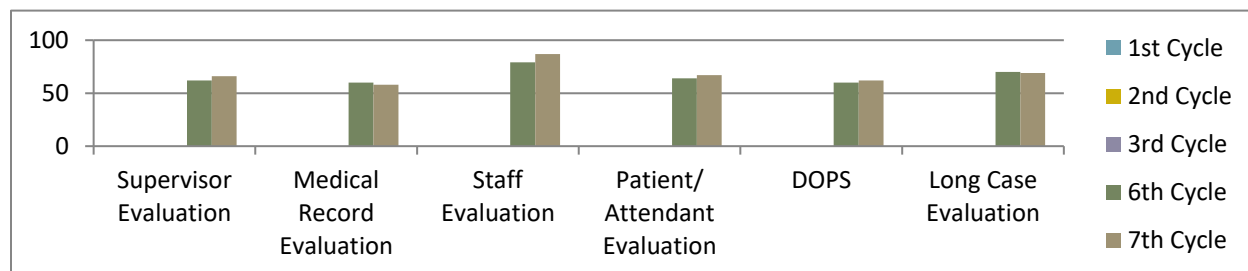
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Specialty: Nephrology
Supervisor: Dr. Naureen CH
Hospital: Holy Family Hospital

Name of Resident: Dr. Salman Zafar
Discipline: MD Nephrology

Supervisor: Dr. Naureen CH
Year of Starting: 28-10-2020



Average Performance of Core Competencies:

Patient Care:	71.0%	Communication Skills:	67.5%
Medial Knowledge:	71.0%	System Based Learning:	69.5%
Professionalism:	72.5%	Practice Based Learning:	58.0%

Short Case (Total Marks 15)	Long Case (Total Marks 15)	MCQ & SEQ (Total Marks 20)	Mini Cex/TOACS (Total Marks 20)	Logbook (Total Marks 10)	OBTAINED

Exam Status

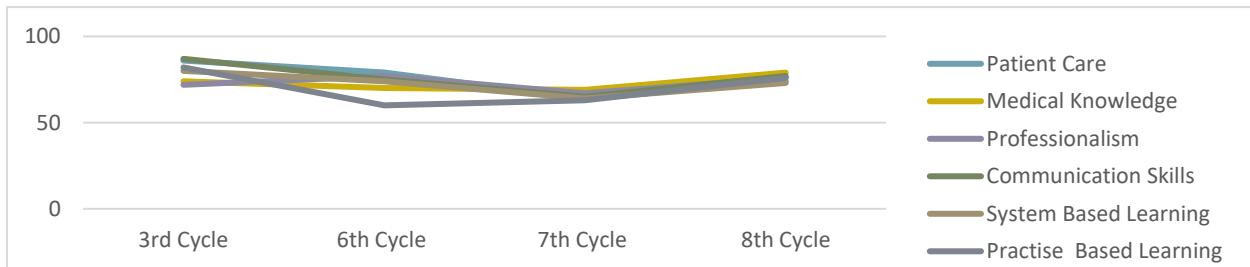
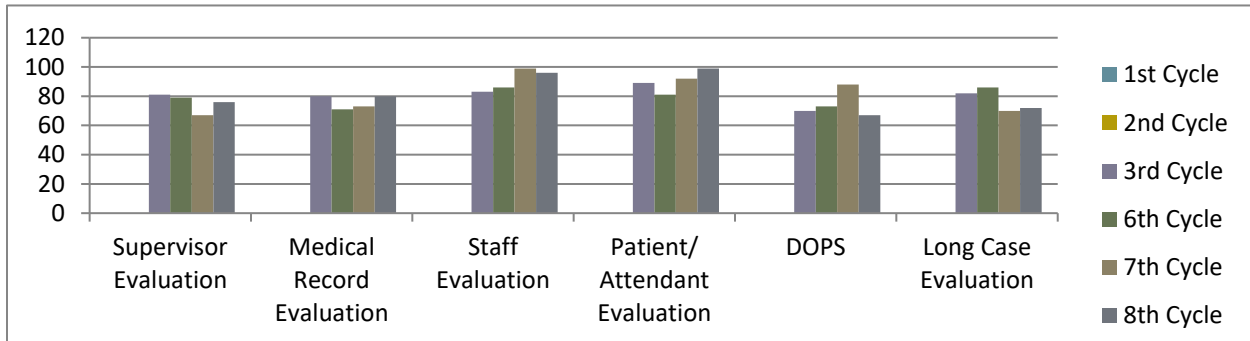
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
Result Wetting	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
Submitted	Approved	Approved	NA

Name of Resident: Dr. Muhammad Awais
Discipline: MD Nephrology

Supervisor: Dr. Naureen Ch.
Year of Starting: 2/15/2019



Average Performance of Core Competencies:

Patient Care:	75.8%	Communication Skills:	76.0%
Medial Knowledge:	73.0%	System Based Learning:	72.8%
Professionalism:	73.0%	Practice Based Learning:	70.3%

Short Case (Total Marks 15)	Long Case (Total Marks 15)	MCQ & SEQ (Total Marks 20)	Mini Cex/TOACS (Total Marks 20)	Logbook (Total Marks 10)	OBTAINED
8	8	11	13	10	62.50%

Exam Status

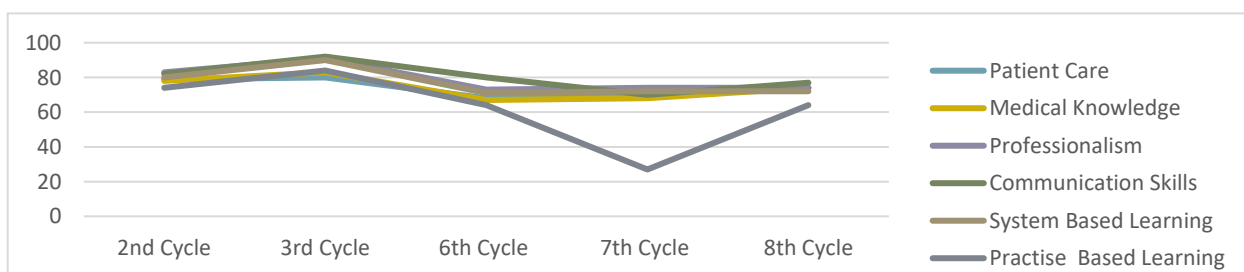
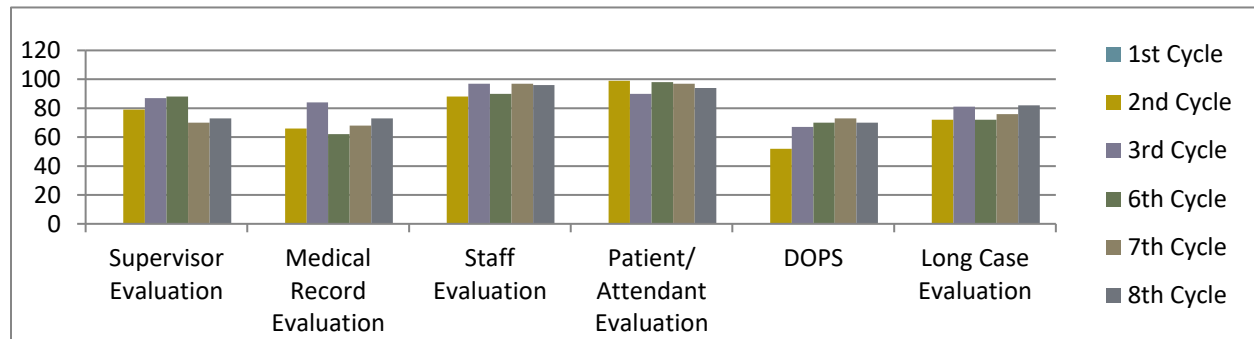
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	NA	NA	NA

Name of Resident: Dr. Muhammad Husnain
Discipline: MD Nephrology

Supervisor: Dr. Naureen
Year of Starting: 7/28/2018



Average Performance of Core Competencies:

Patient Care:	74.4%	Communication Skills:	80.2%
Medial Knowledge:	74.0%	System Based Learning:	77.0%
Professionalism:	79.0%	Practice Based Learning:	62.6%

Short Case (Total Marks 15)	Long Case (Total Marks 15)	MCQ & SEQ (Total Marks 20)	Mini Cex/TOACS (Total Marks 20)	Logbook (Total Marks 10)	OBTAINED
9	8	13	11	8	61.20%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	NA	NA	NA	NA

Research Status

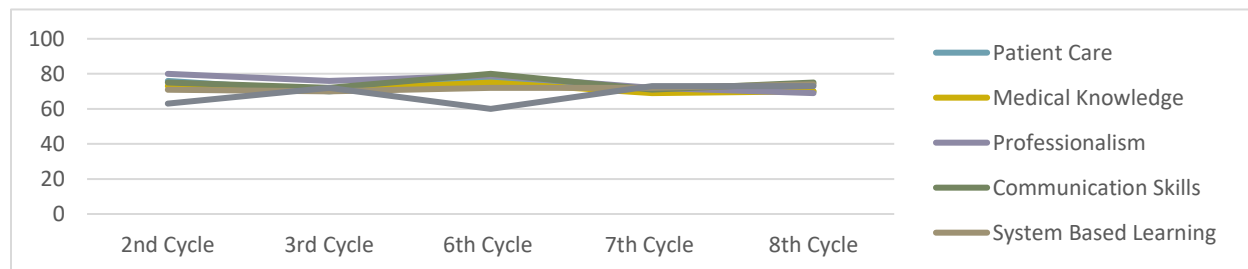
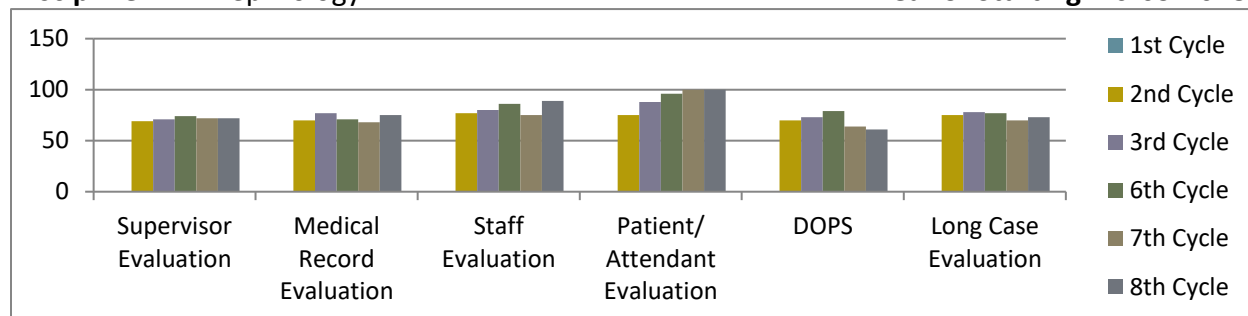
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	NA	NA	NA

Name of Resident: Dr. Hammad Mehmood

Supervisor: Dr Naureen CH

Discipline: MD Nephrology

Year of Starting: 10-03-2018



Average Performance of Core Competencies:

Patient Care:	72.8%	Communication Skills:	74.6%
Medial Knowledge:	71.6%	System Based Learning:	71.8%
Professionalism:	75.2%	Practice Based Learning:	68.2%

Short Case (Total Marks 15)	Long Case (Total Marks 15)	MCQ & SEQ (Total Marks 20)	Mini Cex/TOACS (Total Marks 20)	Logbook (Total Marks 10)	OBTAINED
8	8	10	12	8	70%

Exam Status

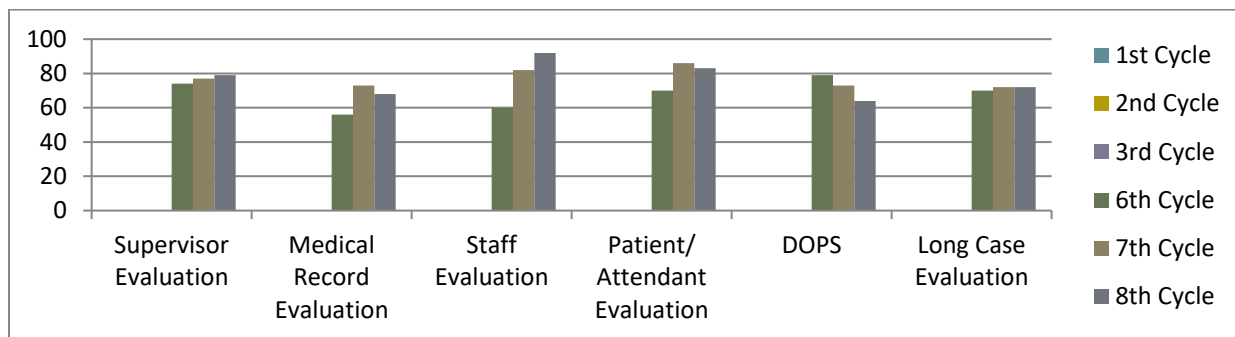
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

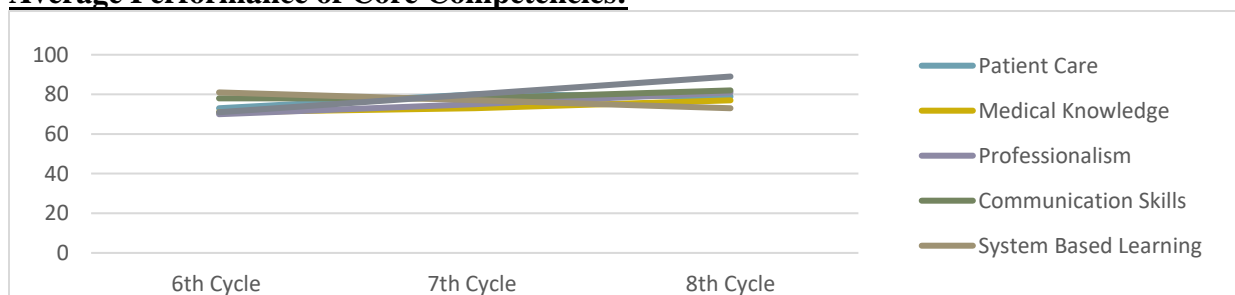
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Name of Resident: Dr. Jamshaid Iqbal Anjum
Discipline: MD Nephrology

Supervisor: Dr Naureen CH
Year of Starting: 13-05-2019



Average Performance of Core Competencies:



Patient Care:	77.3%	Communication Skills:	79.3%
Medial Knowledge:	73.7%	System Based Learning:	77.0%
Professionalism:	75.3%	Practice Based Learning:	80.0%

Short Case (Total Marks 15)	Long Case (Total Marks 15)	MCQ & SEQ (Total Marks 20)	Mini Cex/TOACS (Total Marks 20)	Logbook (Total Marks 10)	OBTAINED
8	8	12	12	10	62.50%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

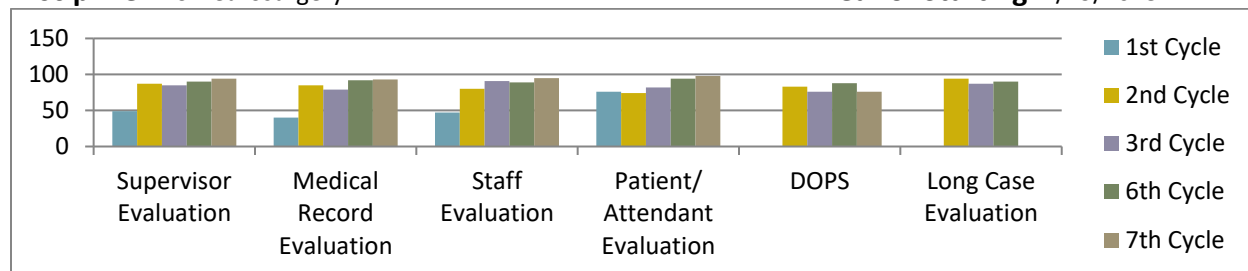
Specialty: Neuro Surgery
Supervisor: Dr. Ashraf Mehmood
Hospital: Holy Family Hospital

Name of Resident: Dr. Sohaib Azhar

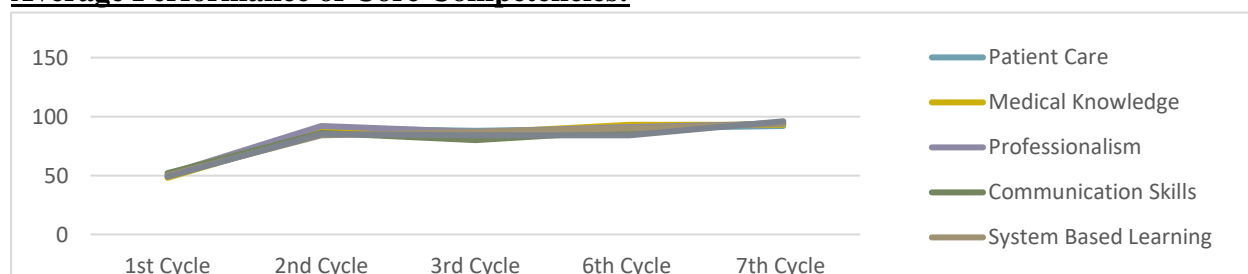
Supervisor: Dr. Ashraf Mehmood

Discipline: MS Neurosurgery

Year of Starting: 1/29/2018



Average Performance of Core Competencies:



Patient Care:	81.8%	Communication Skills:	80.2%
Medial Knowledge:	81.4%	System Based Learning:	81.0%
Professionalism:	83.0%	Practice Based Learning:	79.6%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Log book Total marks=10	360 evaluation Total marks= 20	Long case and group discussions Total Marks=15	TOACS marks=20	Short case Total marks=15	System wise written test SEQ and MCQ Marks=20	Grand Total 100 marks
8	13	11	17	10	14	73%
CIA : WARD (6 months-Collective assessment)						
TOACS		SHORT CASE		LONG CASE		VIVA
21		19		20		19
Total marks=100						
79%						
Internal rotation Marks obtained						
Internal rotation Marks obtained						Grand total
Ward/OPD/OT rotation (100)			Emergency/OT rotation (100)			200 marks
80			82			162

Exam Status

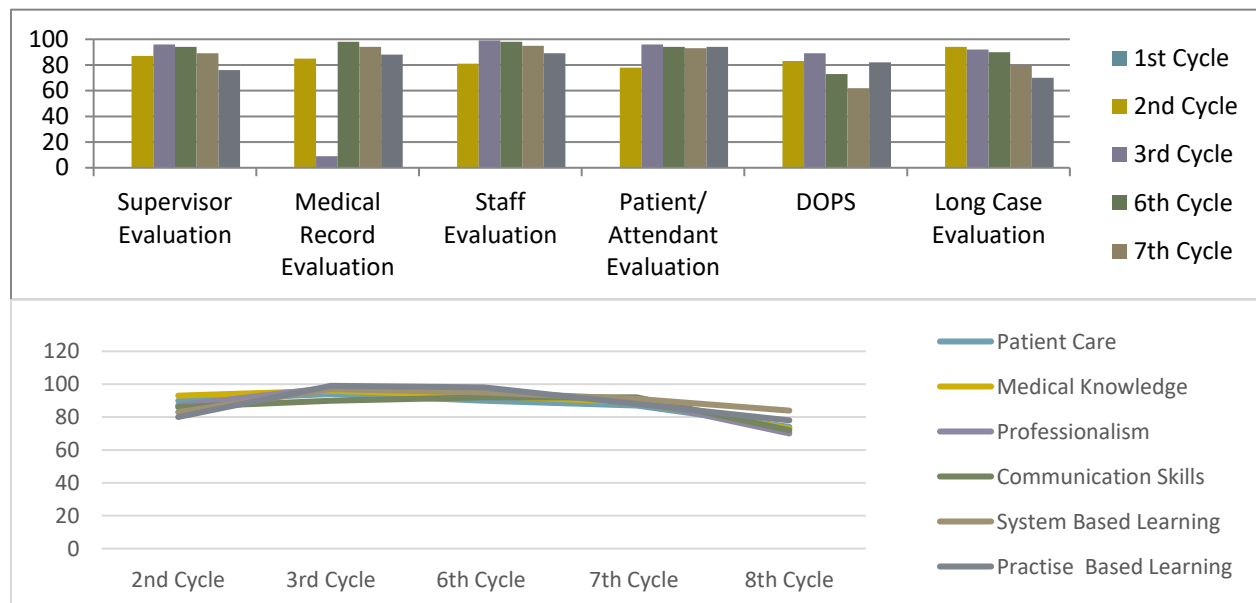
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Sabz Ali
Discipline: MS Neuro Surgery

Supervisor: Dr. Ashraf Mehmood
Year of Starting: 8/13/2018



Average Performance of Core Competencies:

Patient Care:	87.0%	Communication Skills:	84.7%
Medial Knowledge:	88.8%	System Based Learning:	81.3%
Professionalism:	88.0%	Practice Based Learning:	83.0%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Log book Total marks=10	360 evaluation Total marks= 20	Long case and group discussions Total Marks=15	TOACS marks=20	Short case Total marks=15	System wise written test SEQ and MCQ Marks=20	Grand Total 100 marks
7	12	10	16	9	15	69%
CIA : WARD (6 months-Collective assessment)						
TOACS		SHORT CASE		LONG CASE		VIVA
18		18		20		21
						Total marks=100
						77%
Internal rotation Marks obtained						
Internal rotation Marks obtained						Grand total
Ward/OPD/OT rotation (100)			Emergency/OT rotation (100)			200 marks
77			79			156

Exam Status

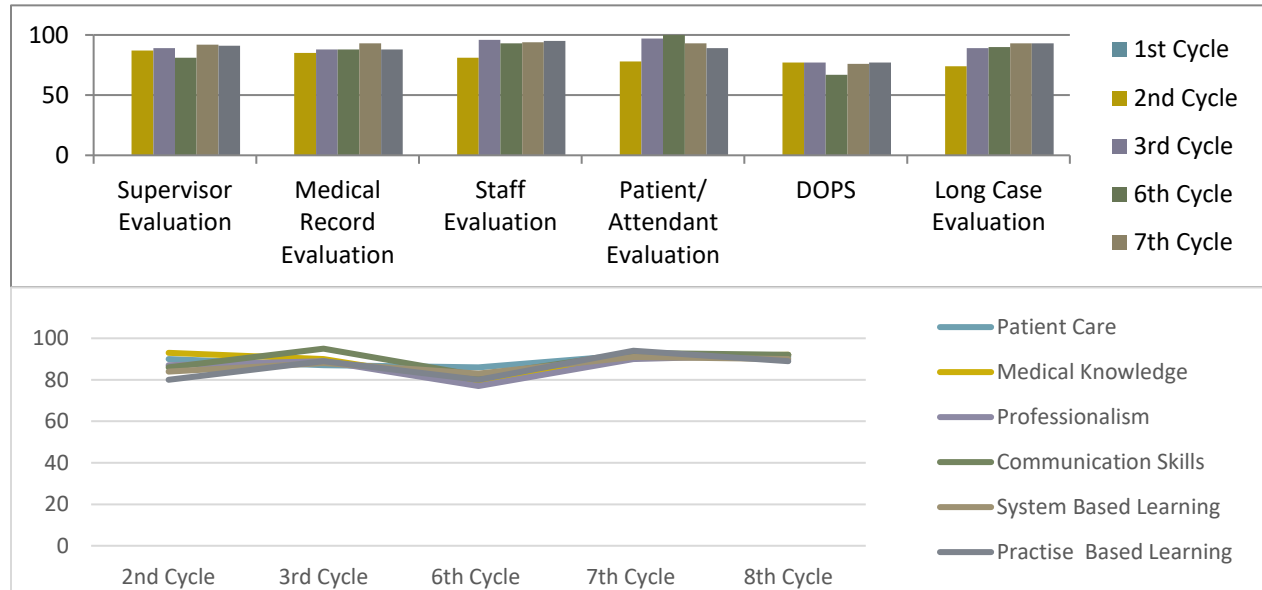
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Saad Javed
Discipline: MS Neuro Surgery

Supervisor:Dr. Ashraf Mehmood
Year of Starting: 7/28/2018



Average Performance of Core Competencies:

Patient Care: 89.2% Communication Skills: 84.7%
 Medical Knowledge: 88.8% System Based Learning: 81.3%

Internal Evaluation of MD residents: WARD (6 months-Collective assessment)						
Log book Total marks=10	360 evaluation Total marks= 20	Long case and group discussions Total Marks=15	TOACS marks=20	Short case Total marks=15	System wise written test SEQ and MCQ Marks=20	Grand Total 100 marks
7	13	10	17	10	13	70
CIA : WARD (6 months-Collective assessment)						
TOACS		SHORT CASE		LONG CASE		VIVA
19		20		18		20
Internal rotation Marks obtained						
Internal rotation Marks obtained						Grand total
Ward/OPD/OT rotation (100)			Emergency/OT rotation (100)			200 marks
82			78			160

Professionalism: 87.0% Practice Based Learning: 83.0%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Fail	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

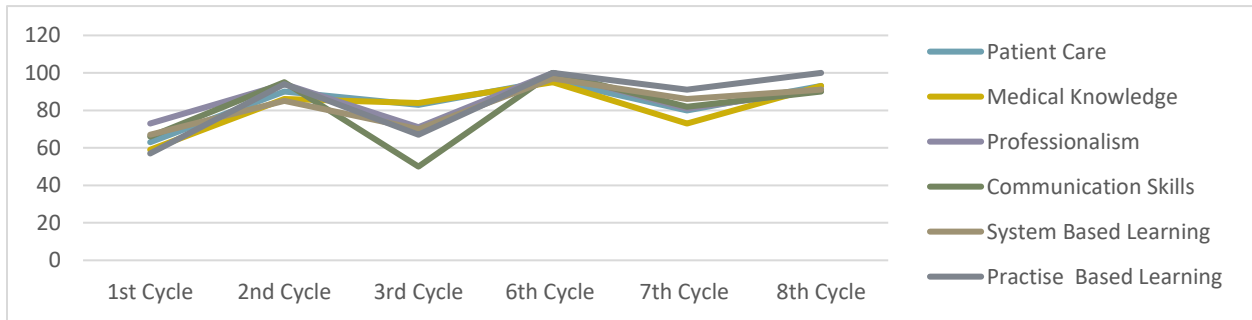
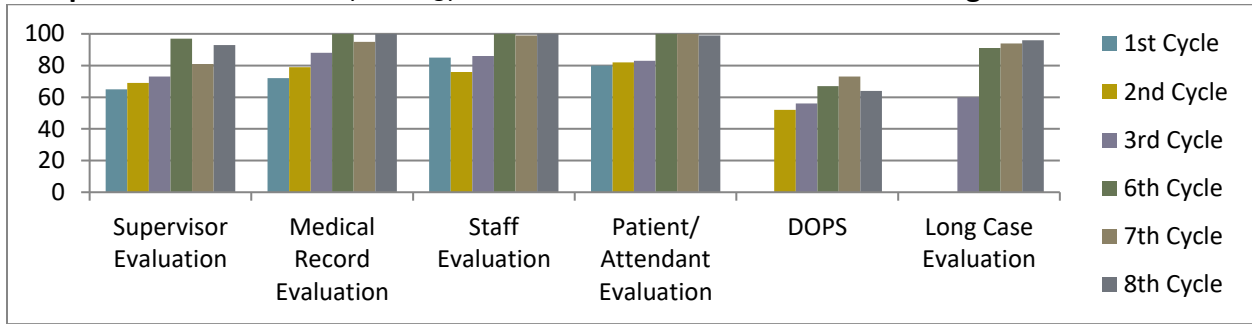
Specialty: Obs Gynae
Supervisor: Dr. Shazia Syed
Hospital: Banazir Bhutto Hospital

Name of Resident: Dr. Unsa Malik

Supervisor: Dr. Shazia Syed

Discipline: MS Obstetrics & Gynecology

Year of Starting: 1/29/2018



Average Performance of Core Competencies:

Patient Care:	84.2%	Communication Skills:	80.5%
Medial Knowledge:	81.7%	System Based Learning:	82.7%
Professionalism:	85.0%	Practice Based Learning:	84.8%

CIA						
DOP's (10)	Long case (20)	Presentation/ Journal club (20)	MCQ/ SAQ's (20)	Log book (10)	Mini- CEX (20)	Grand Total = 100
8	15	16	14	9	17	79

Exam Status

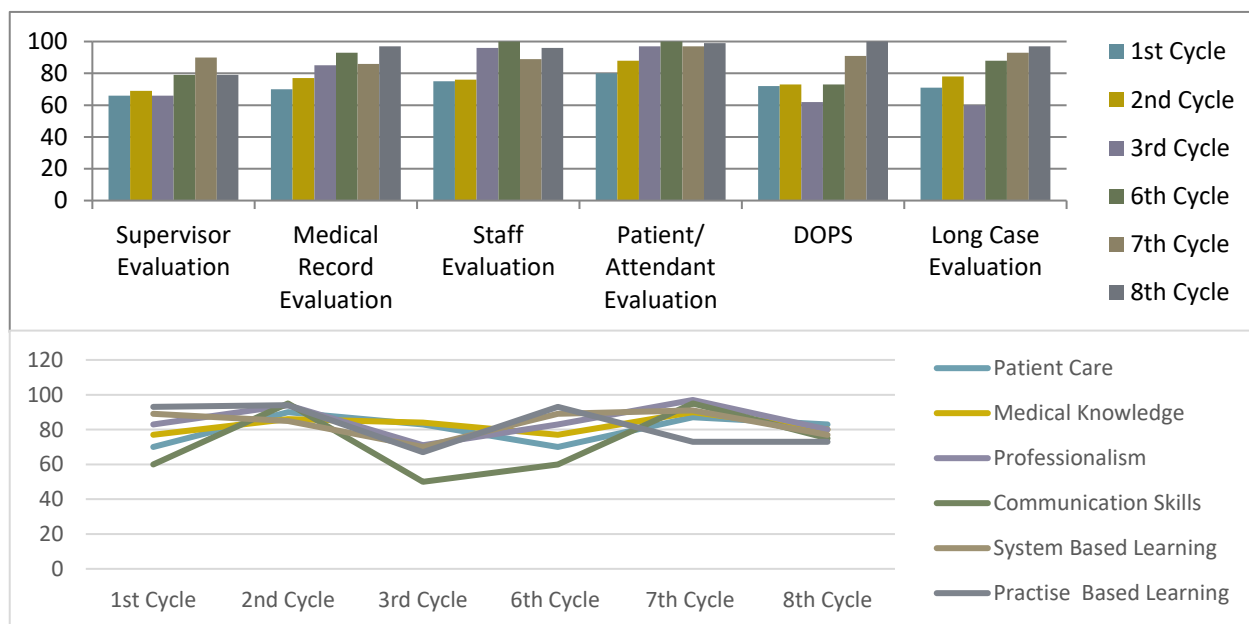
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Sumaira Mubashir
Discipline: MS Gynae/OBS

Supervisor: Dr. Shazia Syed
Year of Starting: 7/28/2018



Average Performance of Core Competencies:

Patient Care:	80.5%	Communication Skills:	72.5%
Medial Knowledge:	82.3%	System Based Learning:	83.5%
Professionalism:	84.7%	Practice Based Learning:	82.2%

CIA						
DOP's (10)	Long case (20)	Presentation/ Journal club (20)	MCQ/ SAQ's (20)	Log book (10)	Mini- CEX (20)	Grand Total = 100
77	13	14	16	8	15	73

Exam Status

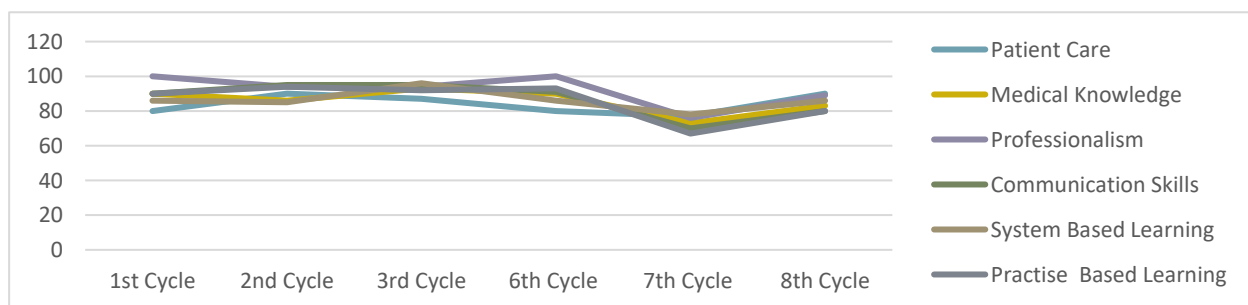
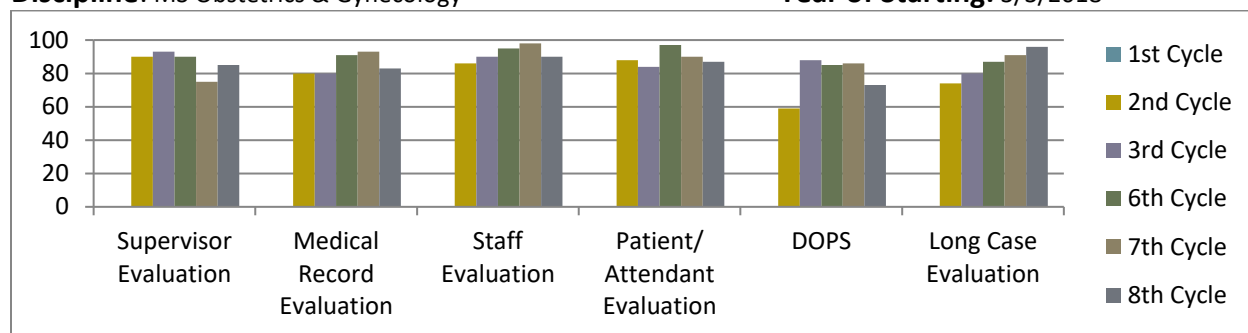
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Aisha Ishtiaq
Discipline: MS Obstetrics & Gynecology

Supervisor: Dr. Shazia Syed
Year of Starting: 3/3/2018



Average Performance of Core Competencies:

Patient Care:	84.0%	Communication Skills:	86.8%
Medial Knowledge:	85.8%	System Based Learning:	86.2%
Professionalism:	92.2%	Practice Based Learning:	86.0%

CIA						
DOP's (10)	Long case (20)	Presentation/ Journal club (20)	MCQ/ SAQ's (20)	Log book (10)	Mini- CEX (20)	Grand Total = 100
8	16	16	12	9	17	78

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

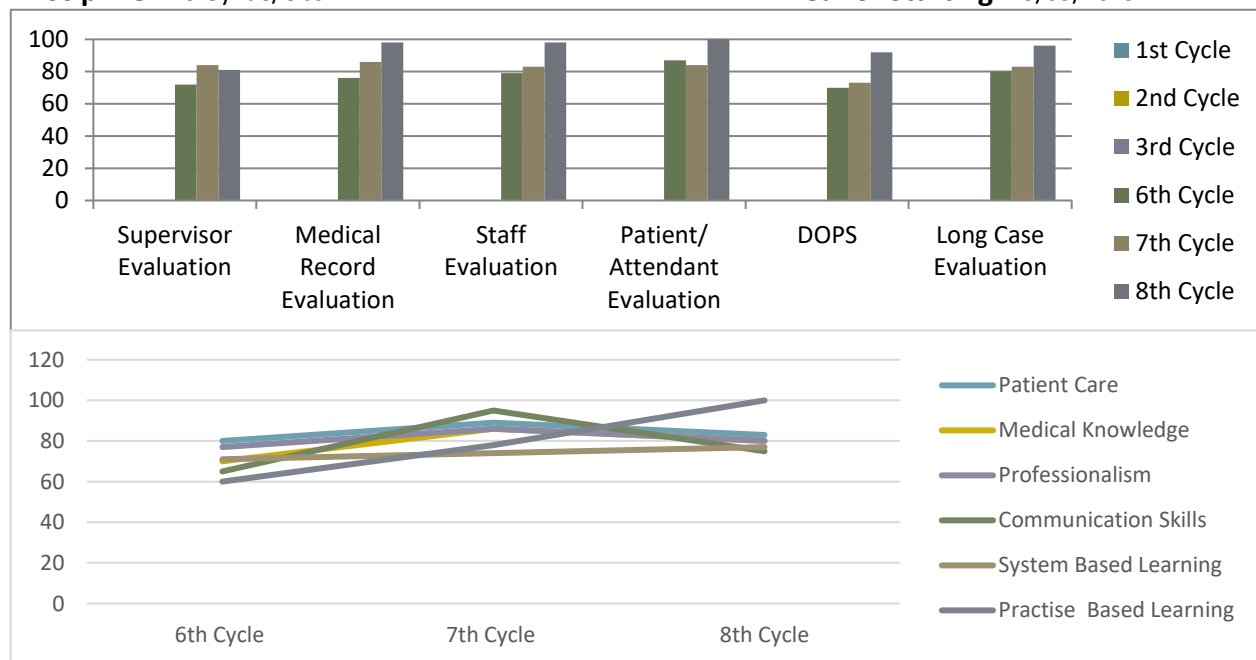
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Sidra Kayani

Supervisor: Prof Shazia Syed

Discipline: MS Gynae/Obs

Year of Starting: 13/05/2019



Average Performance of Core Competencies:

Patient Care:	84.0%	Communication Skills:	78.3%
Medial Knowledge:	78.7%	System Based Learning:	74.0%
Professionalism:	81.0%	Practice Based Learning:	79.3%

CIA						
DOP's (10)	Long case (20)	Presentation/ Journal club (20)	MCQ/ SAQ's (20)	Log book (10)	Mini- CEX (20)	Grand Total = 100
8	13	15	14	8	16	74

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

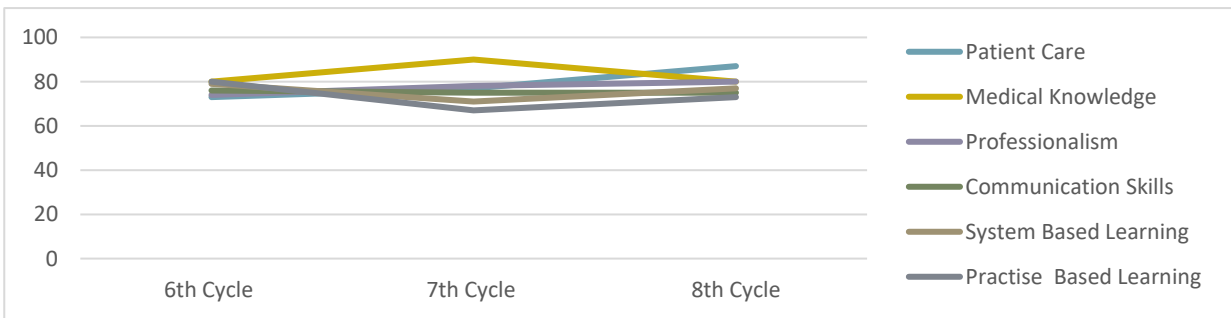
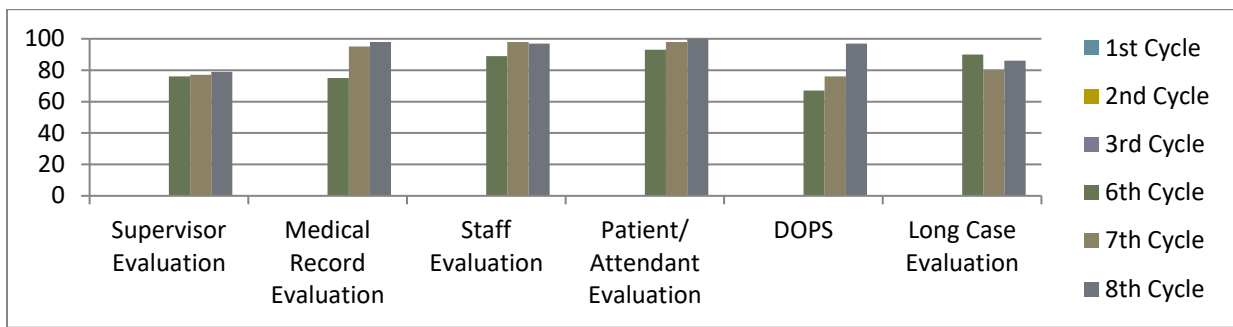
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Aiman Shahid

Supervisor: Prof. Shazia Syed

Discipline: MS Gynae/Obs

Year of Starting: 14/05/2019



Average Performance of Core Competencies:

Patient Care:	79.0%	Communication Skills:	75.3%
Medial Knowledge:	83.3%	System Based Learning:	75.7%
Professionalism:	77.3%	Practice Based Learning:	73.3%

CIA						
DOP's (10)	Long case (20)	Presentation/ Journal club (20)	MCQ/ SAQ's (20)	Log book (10)	Mini- CEX (20)	Grand Total = 100
8	14	15	18	8	16	79

Exam Status

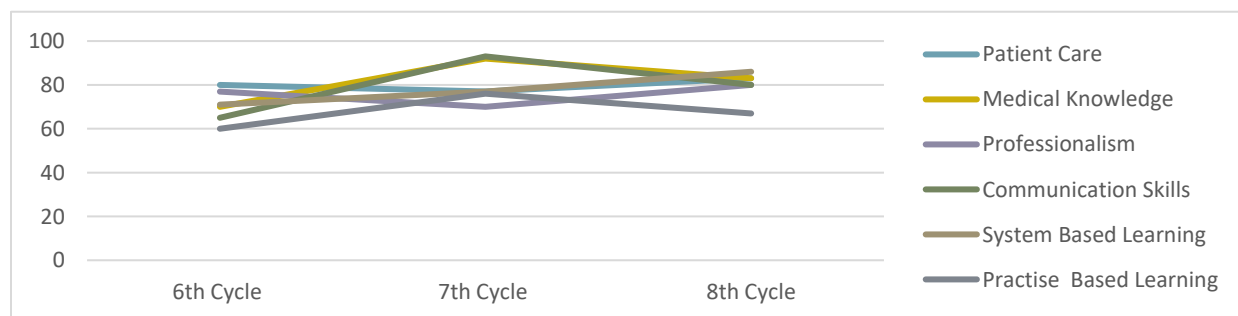
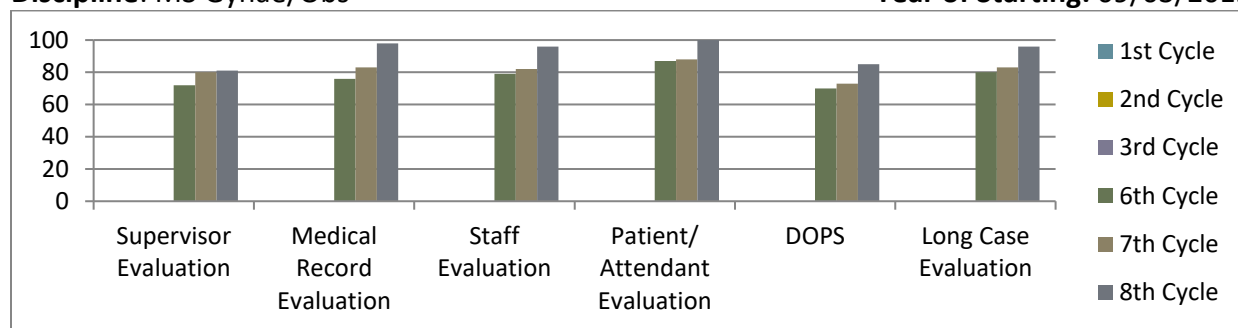
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Tabassam Jehangir
Discipline: MS Gynae/Obs

Supervisor: Prof. Shazia Syed
Year of Starting: 09/03/2019



Average Performance of Core Competencies:

Patient Care:	80.0%	Communication Skills:	79.3%
Medial Knowledge:	81.7%	System Based Learning:	78.0%
Professionalism:	75.7%	Practice Based Learning:	67.7%

CIA						
DOP's (10)	Long case (20)	Presentation/ Journal club (20)	MCQ/ SAQ's (20)	Log book (10)	Mini- CEX (20)	Grand Total = 100
7	13	15	16	8	15	75

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

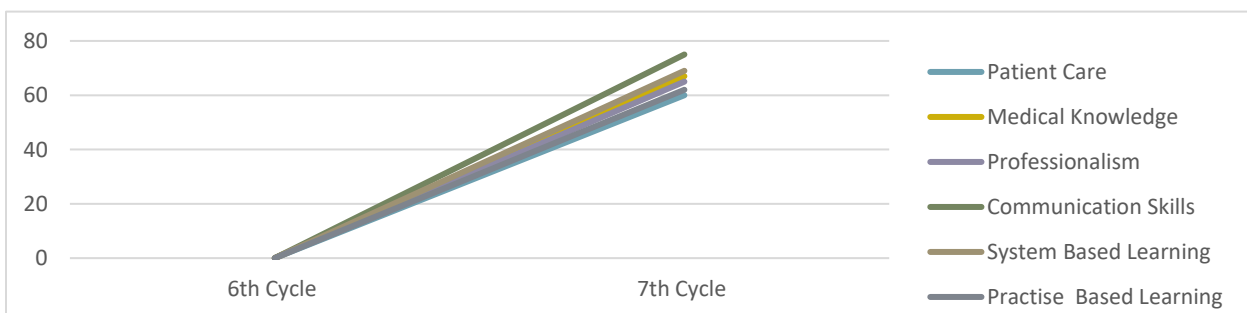
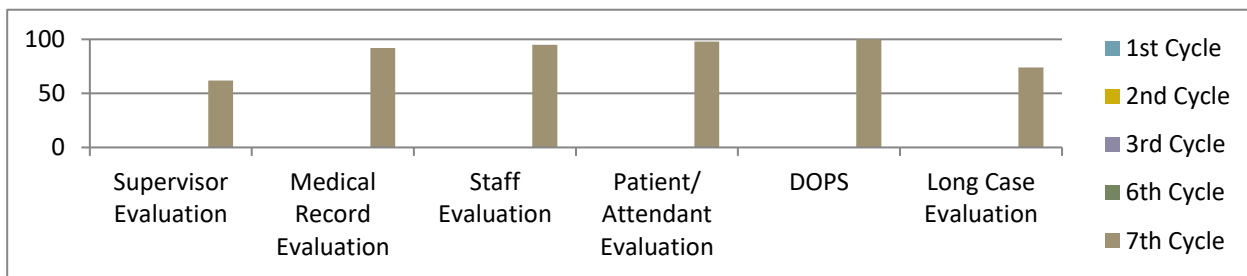
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Zeshan Ahmad
Discipline: MS Gynae/Obs

Supervisor: Dr Humaira Noreen
Year of Starting: 03/03/2021

6th Cycle is not applicable



Average Performance of Core Competencies:

Patient Care:	30.0%	Communication Skills:	37.5%
Medial Knowledge:	33.5%	System Based Learning:	34.5%
Professionalism:	32.5%	Practice Based Learning:	31.0%

CIA						
DOP's (10)	Long case (20)	Presentation/ Journal club (20)	MCQ/ SAQ's (20)	Log book (10)	Mini- CEX (20)	Grand Total = 100
5	10	10	13	6	12	56

Exam Status

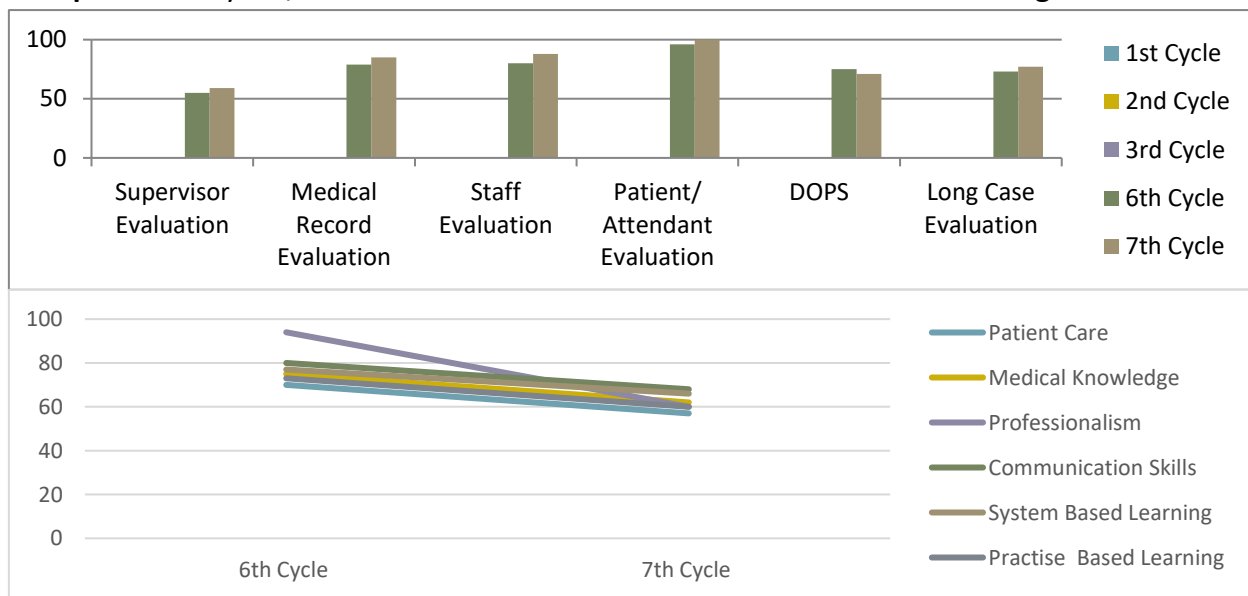
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Na	NA	NA

Name of Resident: Dr. Maryam Iqbal
Discipline: MS Gynae/Obs

Supervisor: Dr. Humaira Noreen
Year of Starting: 28-10-2020



Average Performance of Core Competencies:

Patient Care:	63.5%	Communication Skills:	74.0%
Medial Knowledge:	68.5%	System Based Learning:	71.5%
Professionalism:	77.0%	Practice Based Learning:	66.5%

CIA						
DOP's (10)	Long case (20)	Presentation/ Journal club (20)	MCQ/ SAQ's (20)	Log book (10)	Mini- CEX (20)	Grand Total = 100
5	8	10	14	6	10	53

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
Result wetting	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
Submitted	NA	NA	NA

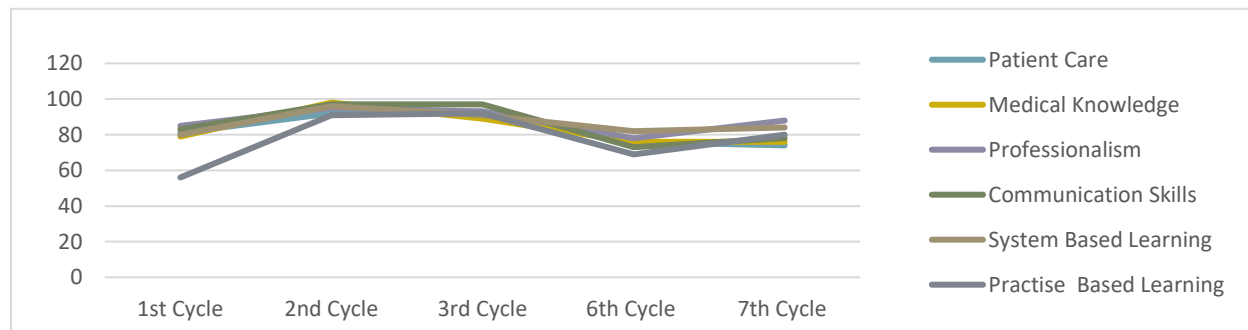
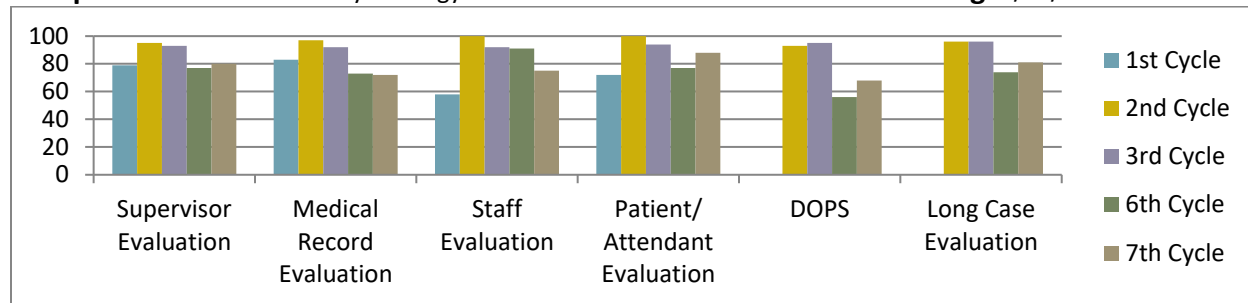
Specialty: Obs Gynae
Supervisor: Dr. Lubna Ejaz
Hospital: Holy Family Hospital Unit - I

Name of Resident: Dr. Afreen Asad

Supervisor: Dr. Lubna Ejaz

Discipline: MS Obstetrics & Gynecology

Year of Starting: 1/29/2016



Average Performance of Core Competencies:

Patient Care:	83.2%	Communication Skills:	85.6%
Medial Knowledge:	83.6%	System Based Learning:	86.6%
Professionalism:	87.8%	Practice Based Learning:	77.6%

Exam Status

1 st Year		2 nd Year	3 rd Year	4 th Year		Final Year
N.A		Pass	NA	NA		NA
INTERNAL EVALUTION						
DOPS /OSATS (10)	Long Case (20)	Presentation Journal club (20)	MCQ /SAQ's (20)	Log book (10)	Mini CEX (20)	Grand Total =100
8	16	16	18	8	18	84/100 =84%

Research Status

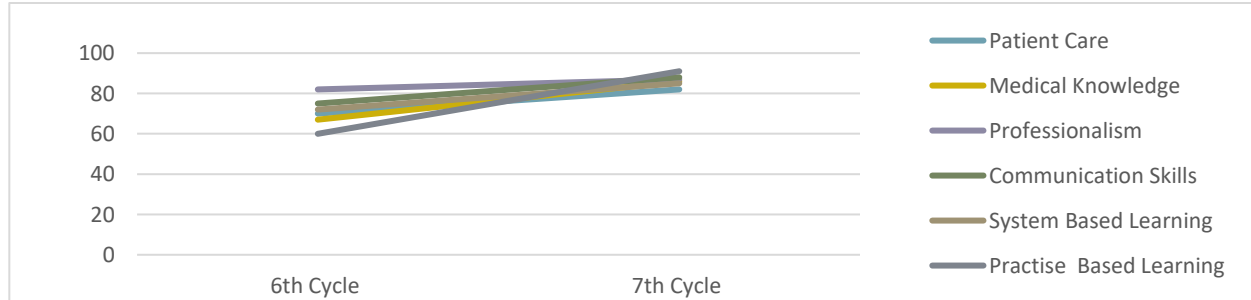
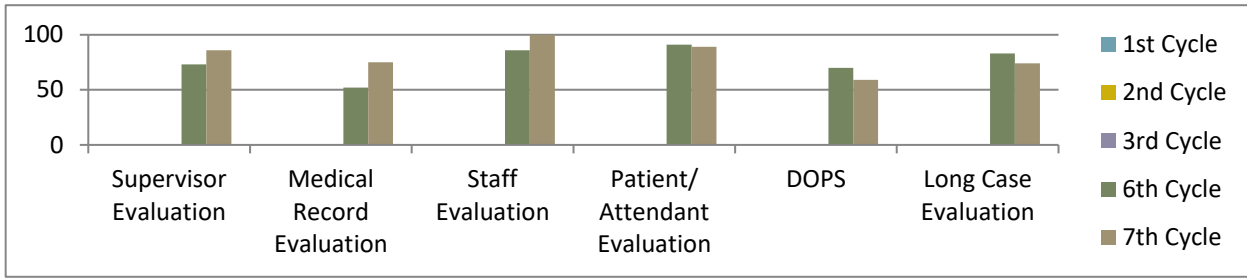
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Ambreen Asghar

Supervisor: Dr. Lubna Ejaz

Discipline: MS Obstetrics & Gynecology

Year of Starting: 2/15/2019



Average Performance of Core Competencies:

Patient Care:	76.0%	Communication Skills:	81.5%
Medial Knowledge:	76.5%	System Based Learning:	78.5%
Professionalism:	84.5%	Practice Based Learning:	75.5%

INTERNAL EVALUTION						
DOPS /OSATS (10)	Long Case (20)	Presentation Journal club (20)	MCQ /SAQ's (20)	Log book (10)	Mini CEX (20)	Grand Total =100
7	16	16	16	8	17	80/100=80%

Exam Status

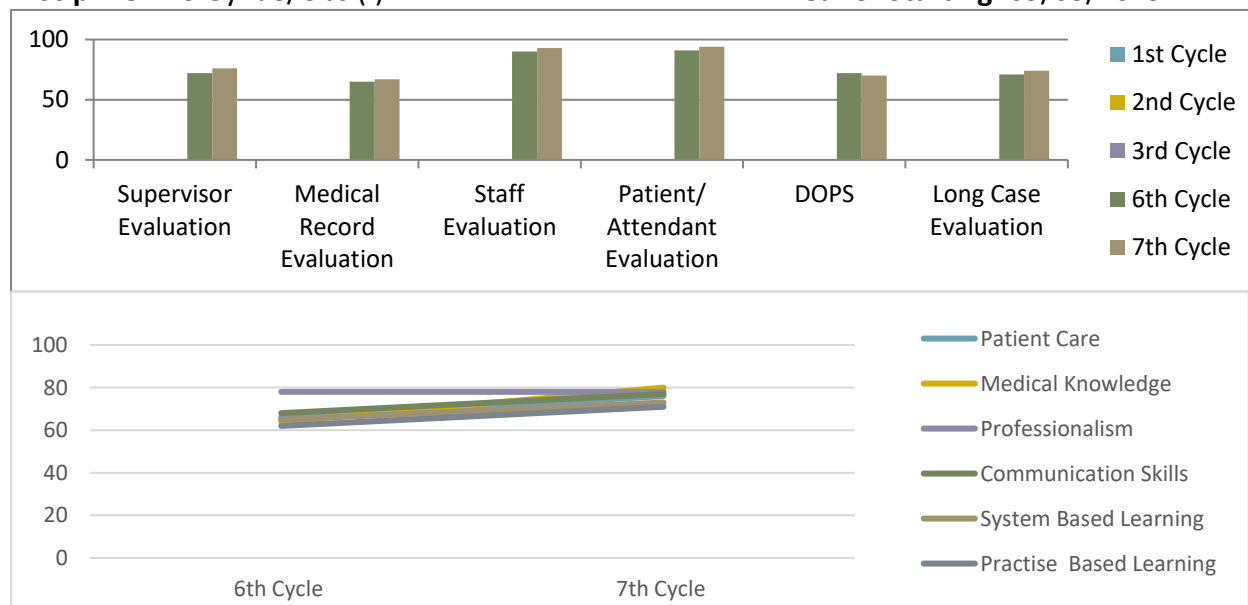
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Qurat Ul Ain
Discipline: MS Gynae/Obs (I)

Supervisor: Dr Sadia khan
Year of Starting: 09/03/2019



Average Performance of Core Competencies:

Patient Care:	71.0%	Communication Skills:	72.5%
Medial Knowledge:	72.0%	System Based Learning:	69.0%
Professionalism:	78.0%	Practice Based Learning:	66.5%

INTERNAL EVALUTION						
DOPS /OSATS (10)	Long Case (20)	Presentation Journal club (20)	MCQ /SAQ's (20)	Log book (10)	Mini CEX (20)	Grand Total =100
7	15	16	18	7	16	79/100=79%

Exam Status

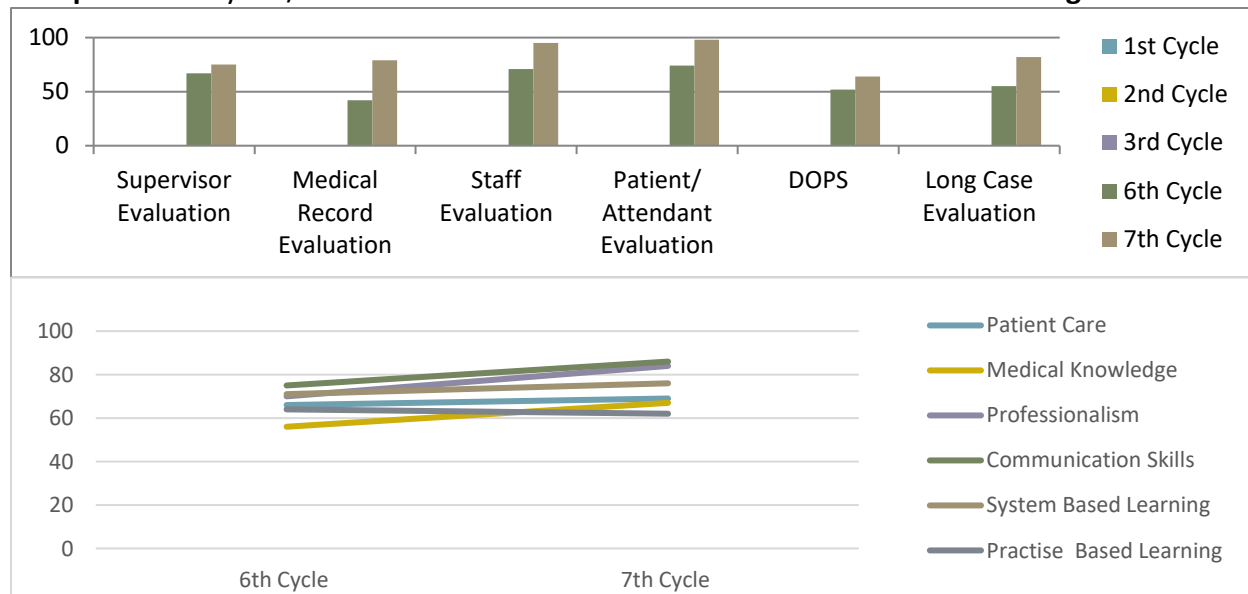
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Saman Akhter
Discipline: MS Gynae/Obs

Supervisor: Dr Sadia Khan
Year of Starting: 28-10-2020



Average Performance of Core Competencies:

Patient Care:	67.5%	Communication Skills:	80.5%
Medial Knowledge:	61.5%	System Based Learning:	73.5%
Professionalism:	77.0%	Practice Based Learning:	63.0%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	Presentation Journal club (20)	MCQ /SAQ's (20)	Log book (10)	Mini CEX (20)	Grand Total =100
On Elective Rotation						

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

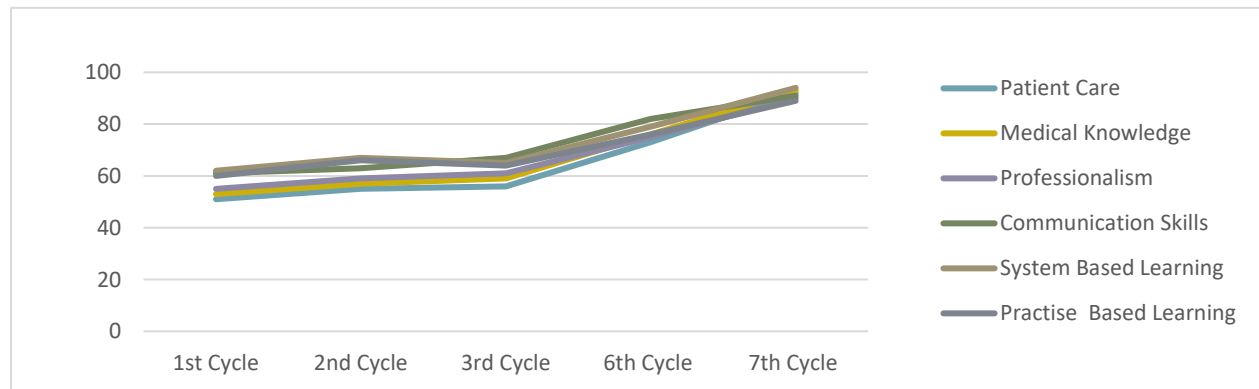
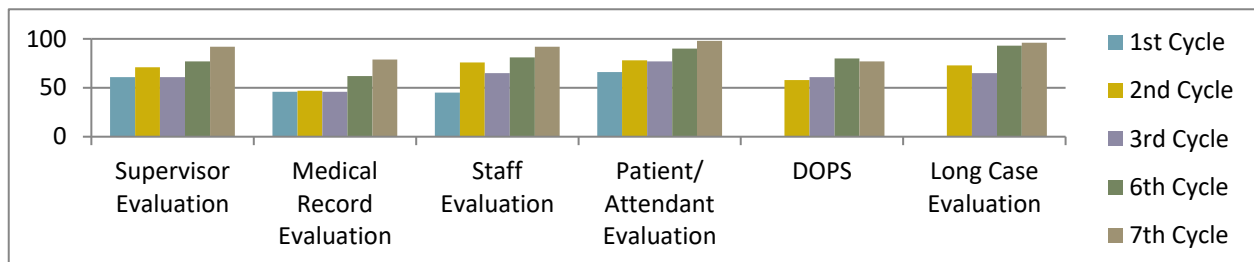
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Specialty: Obs Gynae
Supervisor: Dr. Nabeela Waheed
Hospital: Holy Family Hospital Unit-II

Name of Resident: Dr. Humera javed
Discipline: MS Obstetrics & Gynecology

Supervisor:Dr Nabeela Waheed
Year of Starting: 7/7/2017



Average Performance of Core Competencies:

Patient Care:	65.4%	Communication Skills:	72.8%
Medial Knowledge:	67.6%	System Based Learning:	73.4%
Professionalism:	68.0%	Practice Based Learning:	71.0%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100

Exam Status

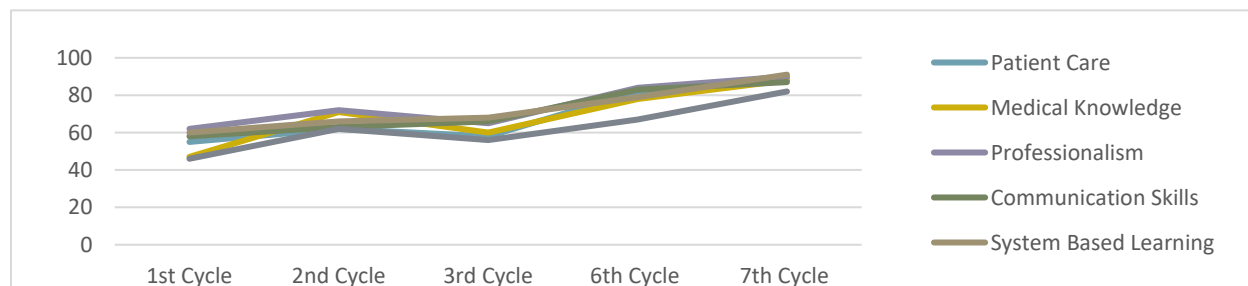
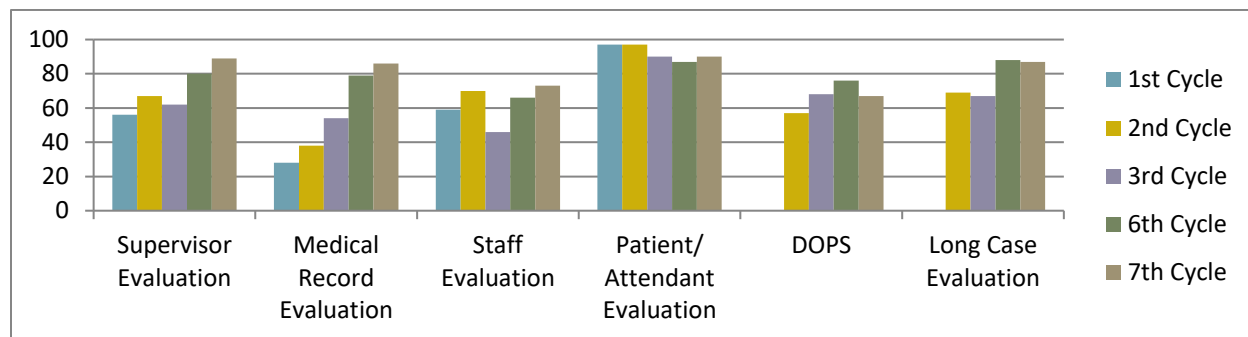
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Asia Saleem

Supervisor:Dr Nabeela Waheed



Average Performance of Core Competencies:

Patient Care:	69.2%	Communication Skills:	71.4%
Medical Knowledge:	68.8%	System Based Learning:	72.8%
Professionalism:	74.6%	Practice Based Learning:	62.6%

Exam Status

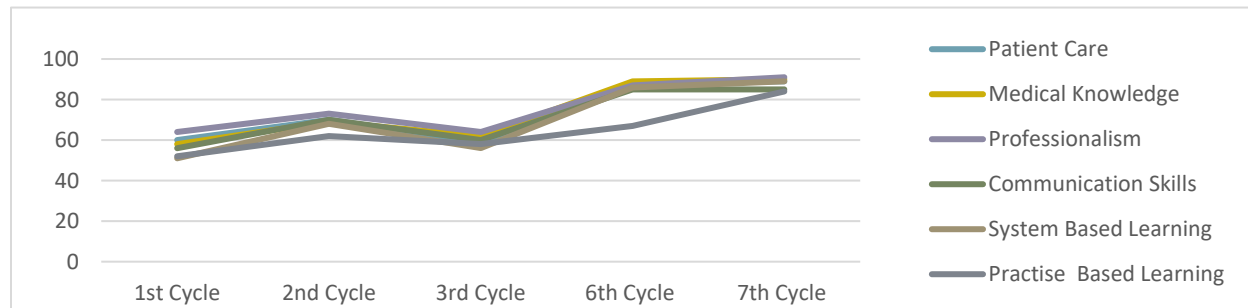
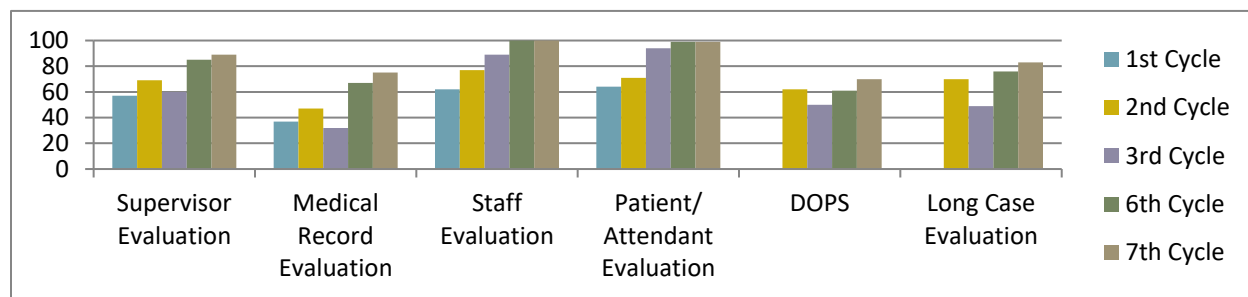
1 st Year		2 nd Year		3 rd Year		4 th Year		Final Year
N.A		Pass		INTERNAL EVALUTION		NA		NA
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20		Log book (10)	360 evaluation 20		Grand Total =100

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Amna Bibi
Discipline: MS Obstetrics & Gynecology

Supervisor: Dr.Nabeela Waheed
Year of Starting: 1/29/2018



Average Performance of Core Competencies:

Patient Care:	73.2%	Communication Skills:	71.2%
Medial Knowledge:	73.6%	System Based Learning:	70.0%
Professionalism:	75.8%	Practice Based Learning:	64.6%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100
07	14	17	16	09	16	79

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	pass	NA	NA	NA

Research Status

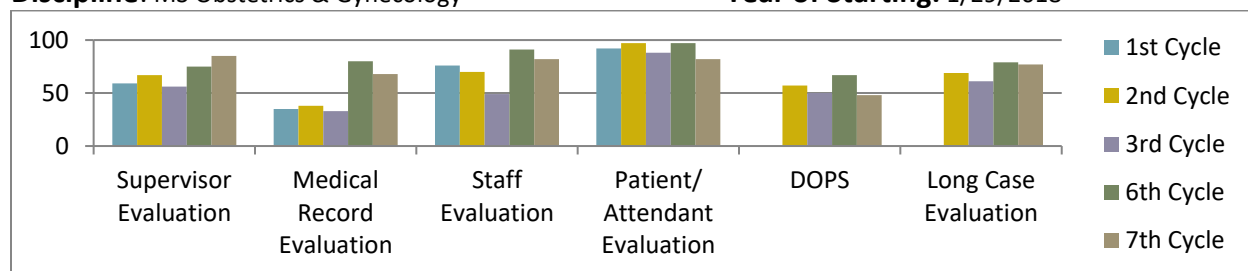
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Madeeha Rashid

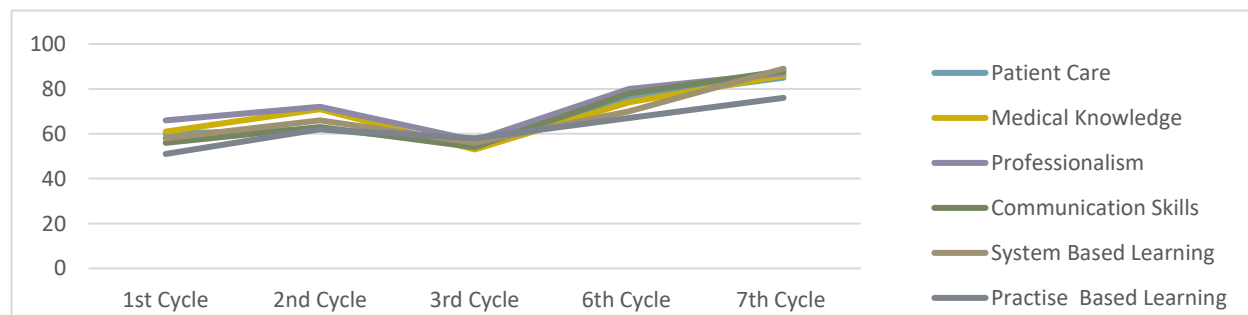
Supervisor: Dr. Nabeela Waheed

Discipline: MS Obstetrics & Gynecology

Year of Starting: 1/29/2018



Average Performance of Core Competencies:



Patient Care:	67.8%	Communication Skills:	67.8%
Medial Knowledge:	69.0%	System Based Learning:	67.8%
Professionalism:	72.4%	Practice Based Learning:	62.8%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

Research Status

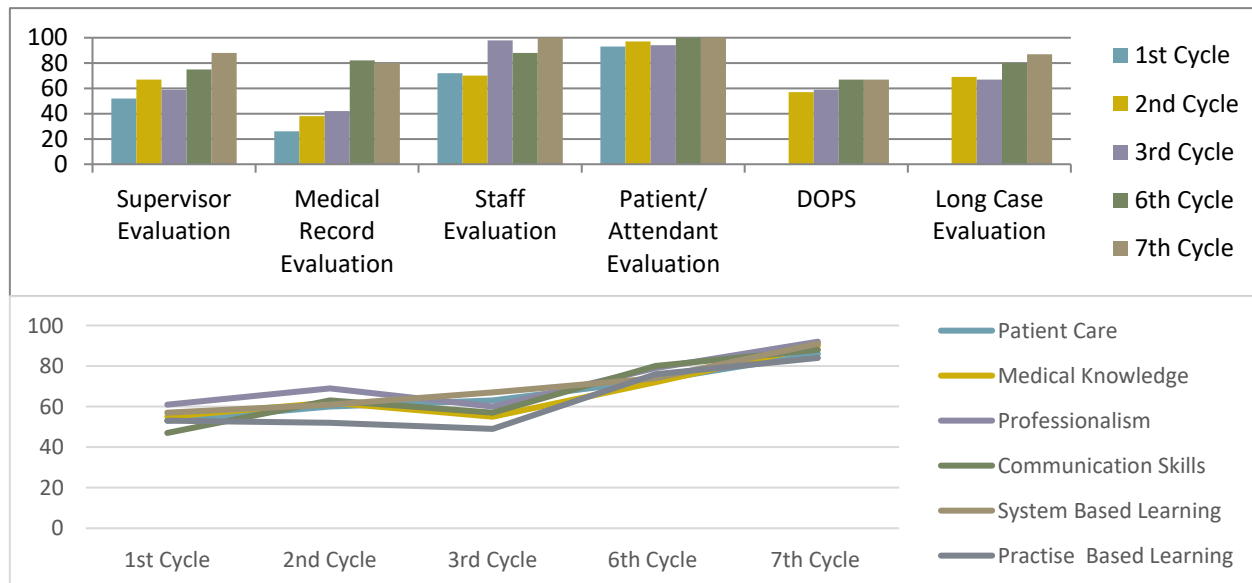
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Kiran Mushtaq

Supervisor: Dr. Maliha Sadaf

Discipline: MS Obstetrics & Gynecology

Year of Starting: 7/28/2018



Average Performance of Core Competencies:

Patient Care:	67.0%	Communication Skills:	67.0%
Medial Knowledge:	66.8%	System Based Learning:	70.0%
Professionalism:	72.2%	Practice Based Learning:	62.8%

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	Pass	NA	NA	NA

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100
07	15	17	17	09	16	81

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

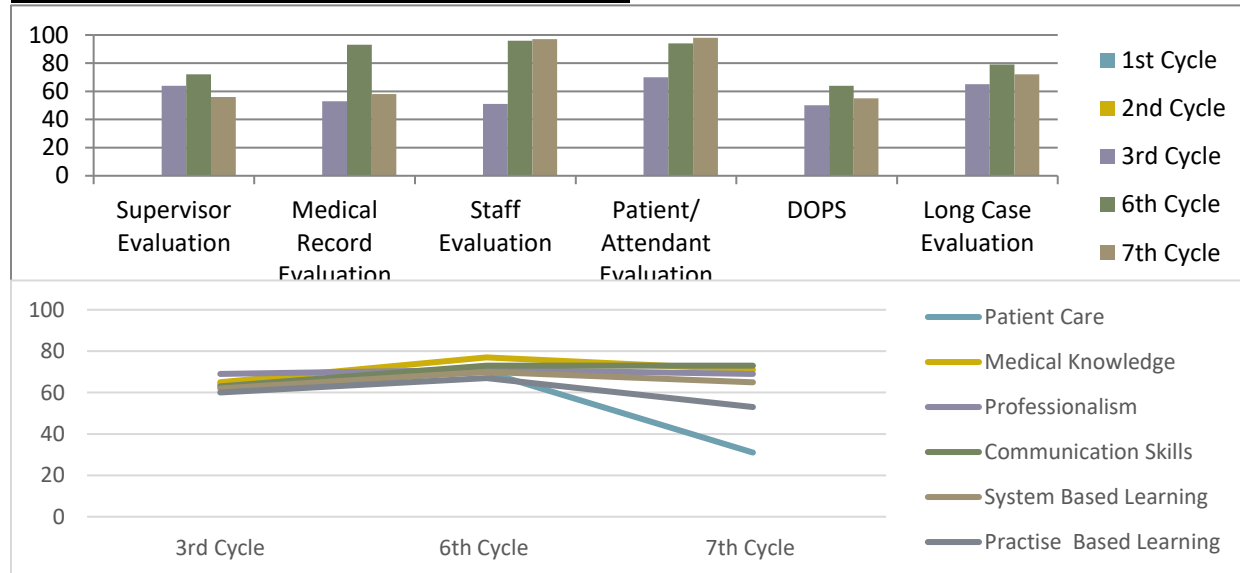
Name of Resident: Dr. Sana Ahmed

Supervisor: Dr. Maliha Sadaf

Discipline: MS Obstetrics & Gynecology

Year of Starting: 2/15/2019

Average Performance of Core Competencies:



Patient Care:	55.0%	Communication Skills:	69.7%
Medial Knowledge:	71.0%	System Based Learning:	65.7%
Professionalism:	69.7%	Practice Based Learning:	60.0%

Exam Status

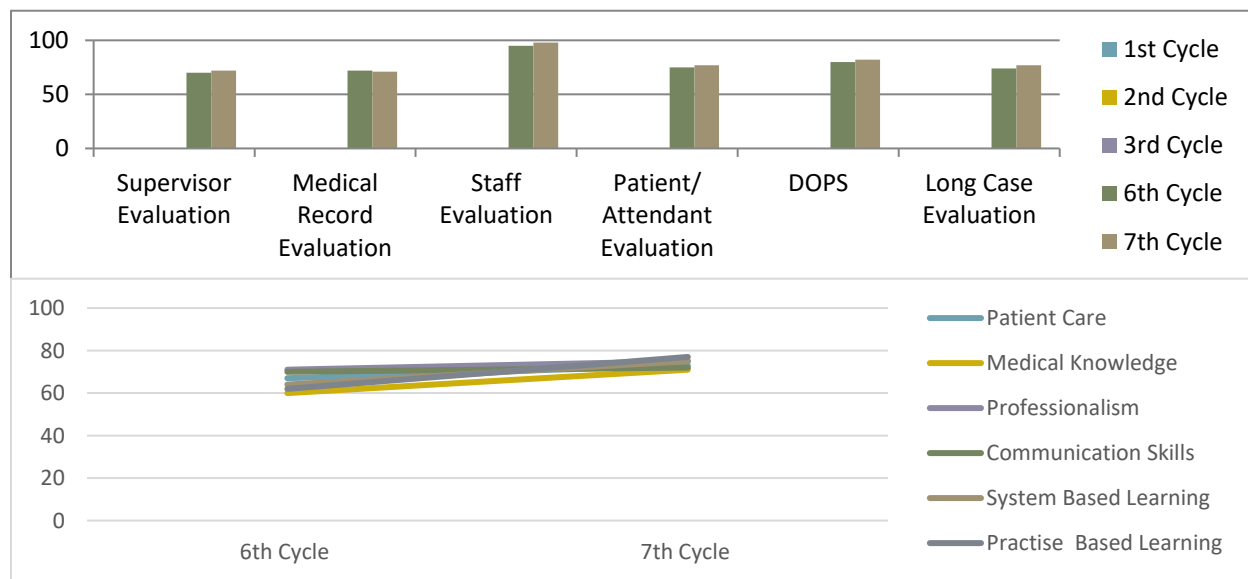
1 st Year		2 nd Year		3 rd Year		4 th Year		Final Year
N.A		Fail		INTERNAL EVALUTION		NA		NA
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20		Log book (10)	360 evaluations 20		Grand Total =100
06	14	08	16		09	14		67

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Qurat Ul Ain
Discipline: MS Gynae/Obs (II)

Supervisor: Dr. Maliha sadaf
Year of Starting: 09/03/2019



Average Performance of Core Competencies:

Patient Care:	70.0%	Communication Skills:	71.0%
Medial Knowledge:	65.5%	System Based Learning:	69.5%
Professionalism:	73.0%	Practice Based Learning:	69.5%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluations 20	Grand Total =100
07	14	14	16	09	15	75

Exam Status

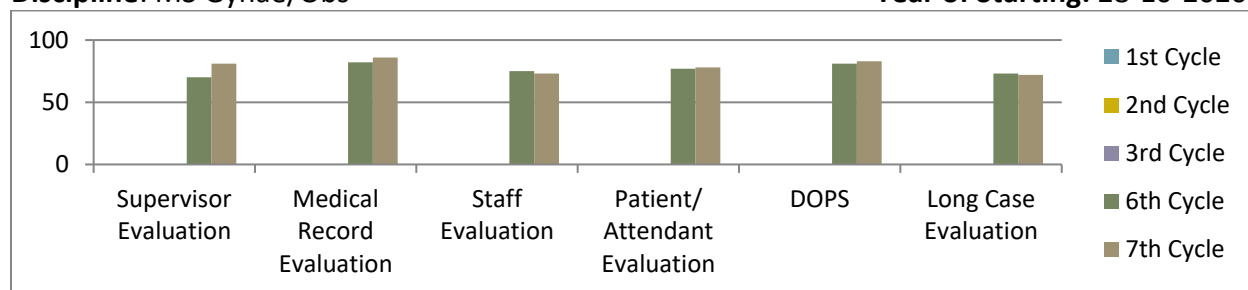
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

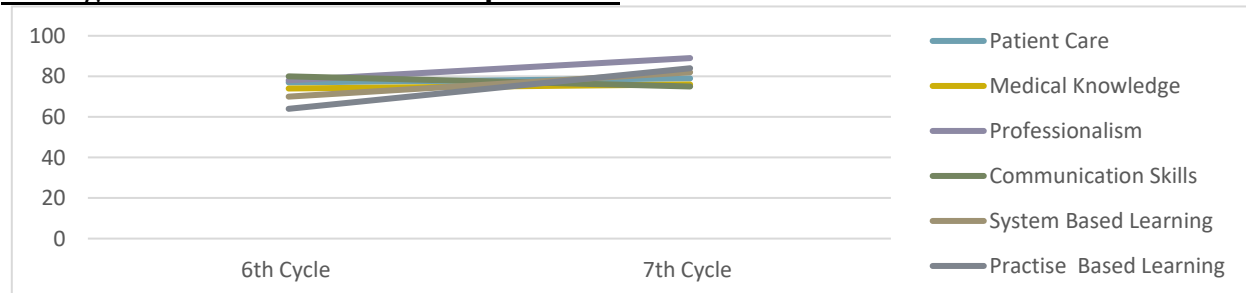
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Hafsa Butter
Discipline: MS Gynae/Obs

Supervisor: Dr Maliha sadaf
Year of Starting: 28-10-2020



Average Performance of Core Competencies:



Patient Care:	78.0%	Communication Skills:	77.5%
Medial Knowledge:	75.0%	System Based Learning:	76.0%
Professionalism:	83.5%	Practice Based Learning:	74.0%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100
06	12	12	13	09	14	66

Exam Status

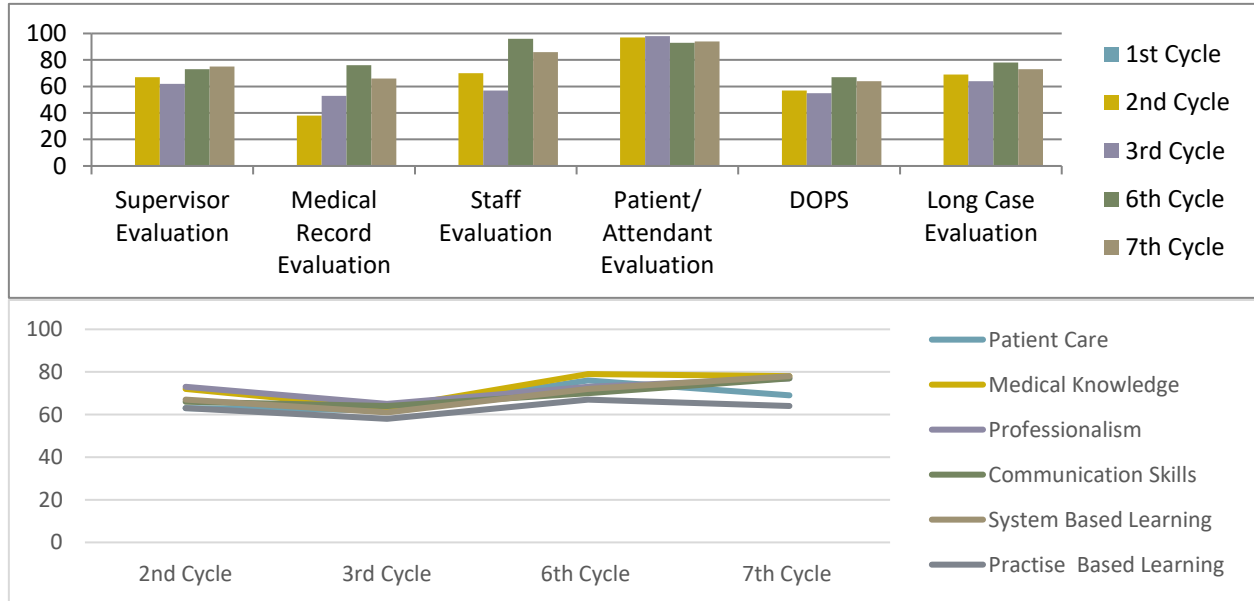
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
Result Wetting	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
Submitted	NA	NA	NA

Name of Resident: Dr. Farzeen Ehsan
Discipline: MS Obstetrics & Gynecology

Supervisor: Dr Khansa Iqbal
Year of Starting: 10/4/2018



Average Performance of Core Competencies

Patient Care:	65.5%	Communication Skills:	69.3%
Medial Knowledge:	73.0%	System Based Learning:	69.5%
Professionalism:	72.0%	Practice Based Learning:	63.0%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100
08	15	16	16	09	16	80

Exam Status

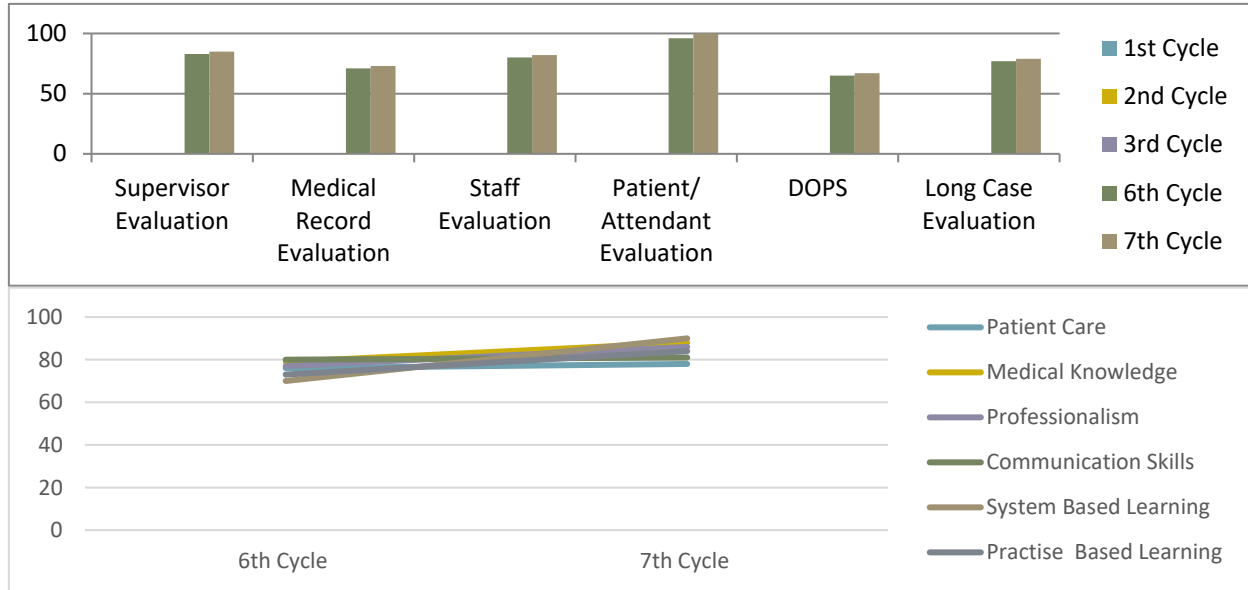
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
NA	Pass	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Asma Arshid
Discipline: MS Gynae/Obs

Supervisor: Dr. Khansa Iqbal
Year of Starting: 09/03/2019



Average Performance of Core Competencies:

Patient Care:	77.0%	Communication Skills:	80.5%
Medial Knowledge:	83.5%	System Based Learning:	80.0%
Professionalism:	81.5%	Practice Based Learning:	78.5%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100
06	15	15	15	08	14	73

Exam Status

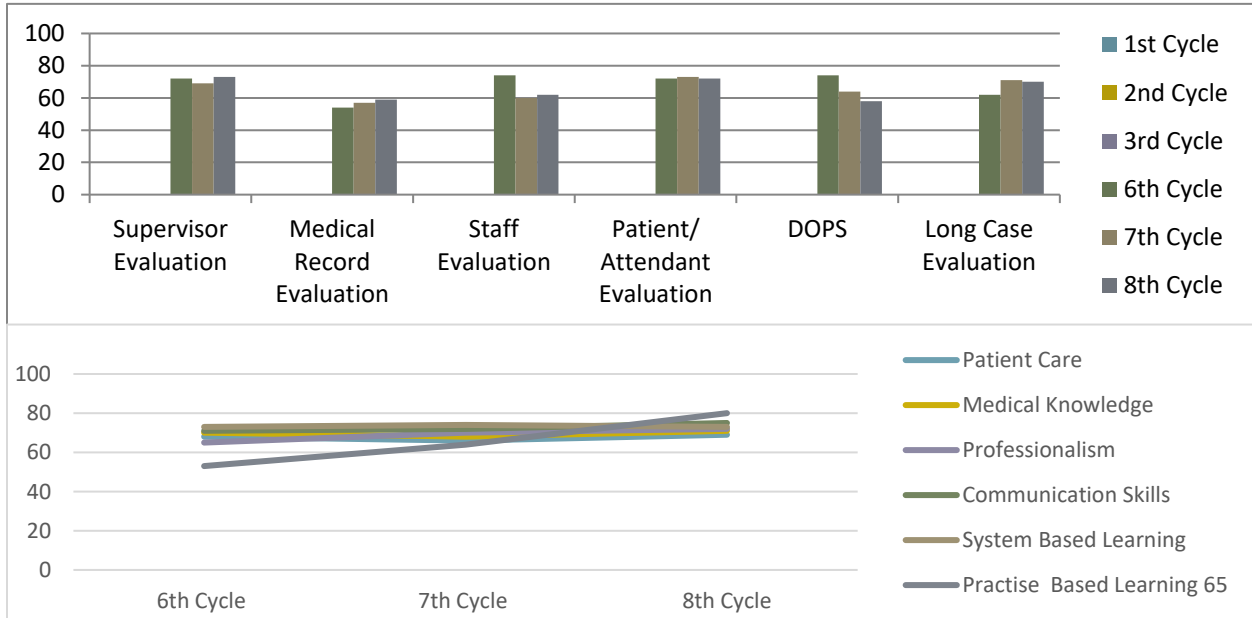
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Name of Resident: Dr. Faiza Izhar
Discipline: MS Gynae/Obs

Supervisor: Dr Humaira Bilqees
Year of Starting: 26/02/2020



Average Performance of Core Competencies:

Patient Care:	67.7%	Communication Skills:	72.7%
Medial Knowledge:	69.7%	System Based Learning:	73.3%
Professionalism:	69.0%	Practice Based Learning:	65.7%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

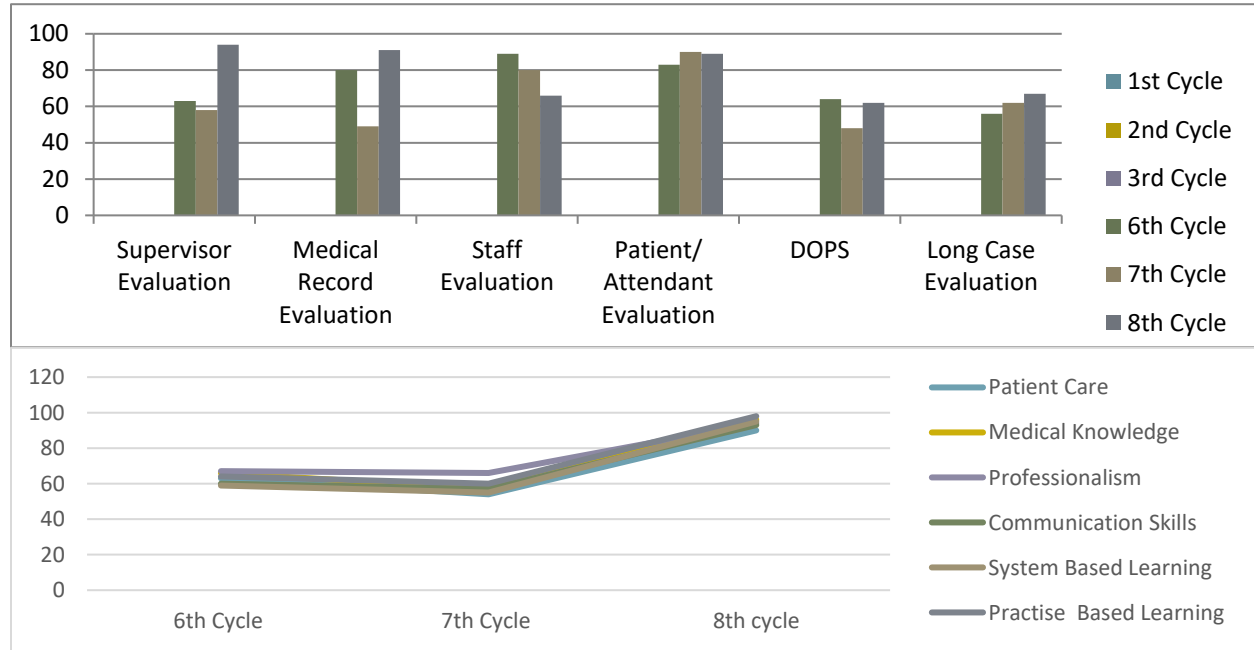
Specialty: Obs Gynae
Supervisor: Dr. Sobia Nawaz
Hospital: District Headquarter Hospital

Name of Resident: Dr. Anum Zahra

Supervisor: Dr Sobia Nawaz

Discipline: MS Gynae/Obs

Year of Starting: 15/02/2019



Average Performance of Core Competencies:

Patient Care:	69.0%	Communication Skills:	70.0%
Medial Knowledge:	73.0%	System Based Learning:	69.7%
Professionalism:	75.7%	Practice Based Learning:	74.0%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100
06	14	08	16	09	14	67

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

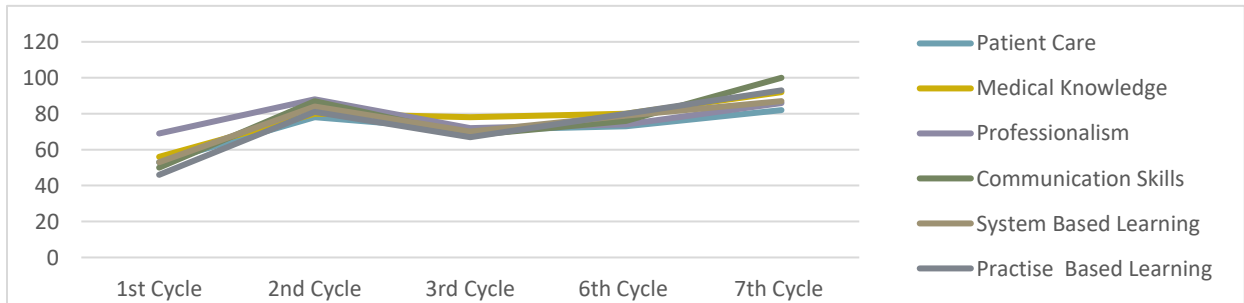
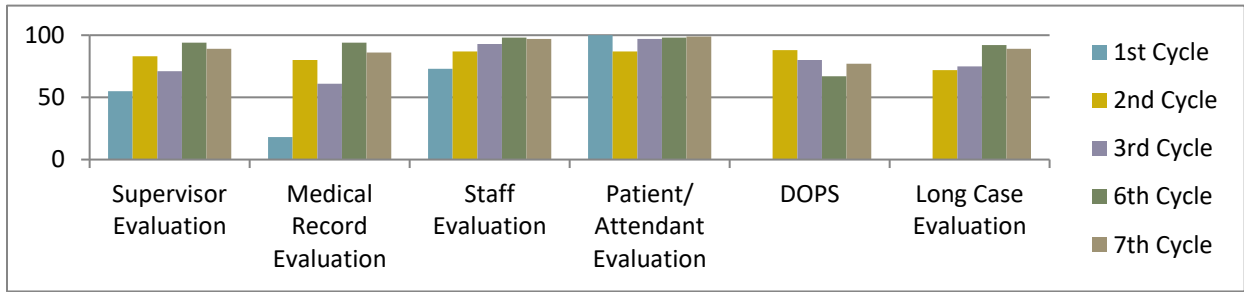
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Name of Resident: Dr. Shahana Majeed

Supervisor: Dr Sobia Nawaz

Discipline: MS Gynae/Obs

Year of Starting: 1-29-2018



Average Performance of Core Competencies:

Patient Care:	71.4%	Communication Skills:	76.2%
Medial Knowledge:	77.2%	System Based Learning:	74.6%
Professionalism:	77.8%	Practice Based Learning:	73.4%

Exam Status

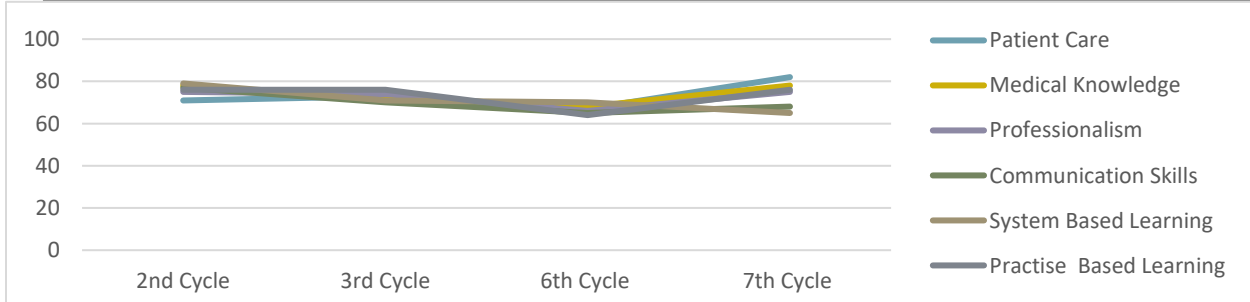
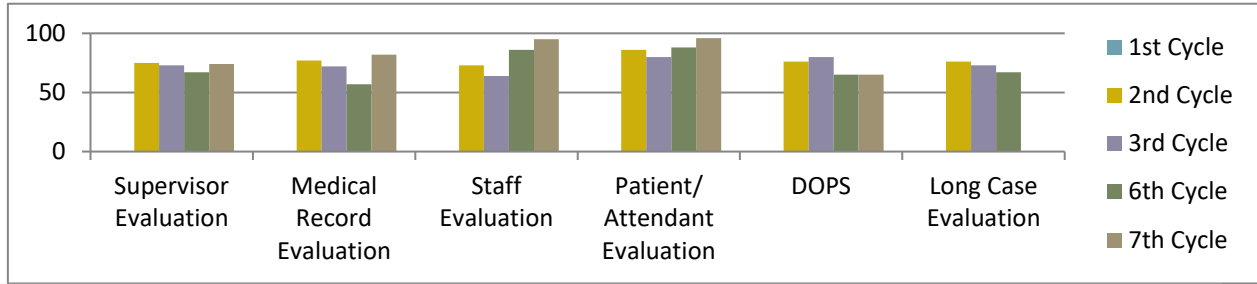
1 st Year		2 nd Year		3 rd Year		4 th Year		Final Year	
N.A		Fail		N.A		NA		NA	
INTERNAL EVALUTION									
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20			Log book (10)	360 evaluation 20	Grand Total =100	

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Humaira Raheem
Discipline: MS Obstetrics & Gynecology

Supervisor: Dr Sobia Nawaz
Year of Starting: 7/28/2018



Average Performance of Core Competencies:

Patient Care:	73.3%	Communication Skills:	70.0%
Medial Knowledge:	74.0%	System Based Learning:	71.3%
Professionalism:	72.5%	Practice Based Learning:	73.0%

Exam Status

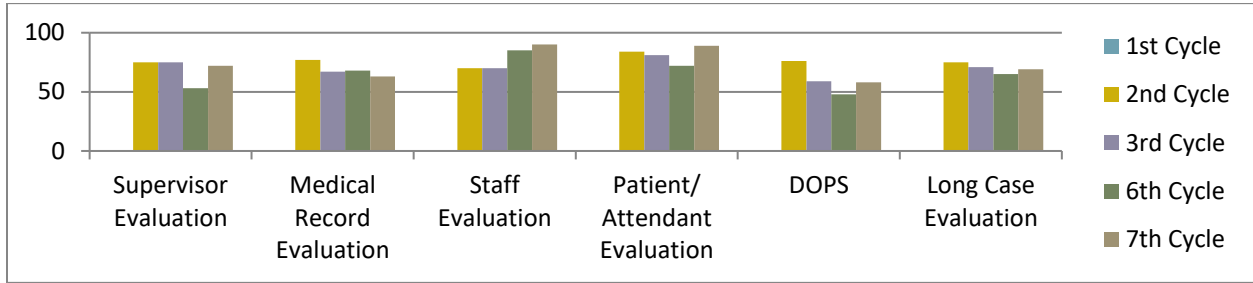
1 st Year		2 nd Year		3 rd Year		4 th Year		Final Year
N.A		Pass		INTERNAL EVALUTION		NA		NA
DOPS /OSATS	Long Case	MCQ Test		Presentations/ Journal		Log book	360 evaluation	Grand Total
(10)	(20)	20		Club		(10)	20	=100
07	14	14		20		09	15	76

Research Status

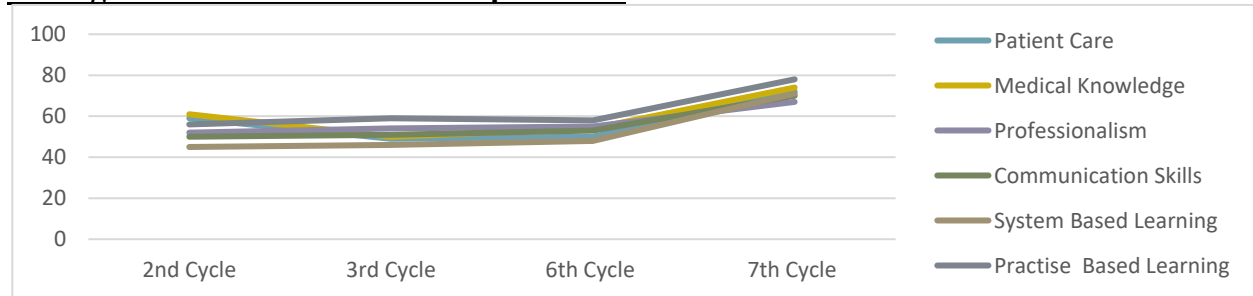
One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	Approved	Approved	NA

Name of Resident: Dr. Aisha Habib
Discipline: MS Obstetrics & Gynecology

Supervisor: Dr Sobia Nawaz
Year of Starting: 10/4/2018



Average Performance of Core Competencies:



Patient Care:	57.5%	Communication Skills:	56.0%
Medial Knowledge:	59.8%	System Based Learning:	52.5%
Professionalism:	57.0%	Practice Based Learning:	62.8%

Exam Status

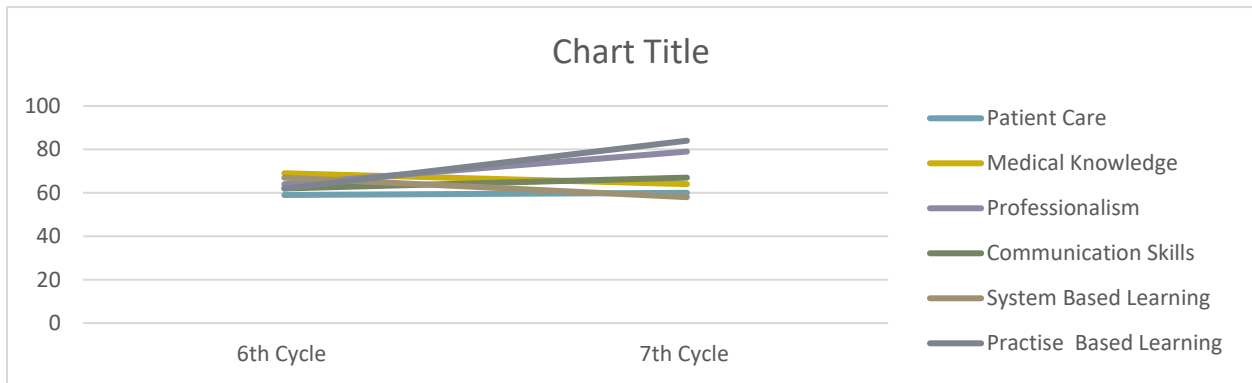
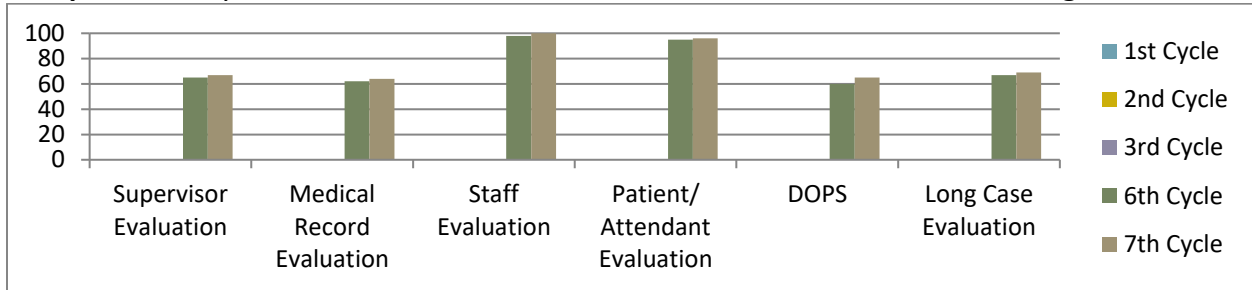
1 st Year		2 nd Year		3 rd Year		4 th Year		Final Year
NA		Fail		NA		NA		NA
INTERNAL EVALUTION								
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20		Log book (10)	360 evaluation 20	Grand Total =100	
06	12	12	17		09	15	71	

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	Approved	Approved	NA

Name of Resident: Dr. Faiza Akram
Discipline: MS Gynae/Obs

Supervisor: Dr Sobia Nawaz
Year of Starting: 09/03/2019



Average Performance of Core Competencies:

Patient Care:	59.5%	Communication Skills:	64.5%
Medial Knowledge:	66.5%	System Based Learning:	62.5%
Professionalism:	71.5%	Practice Based Learning:	73.0%

Exam Status

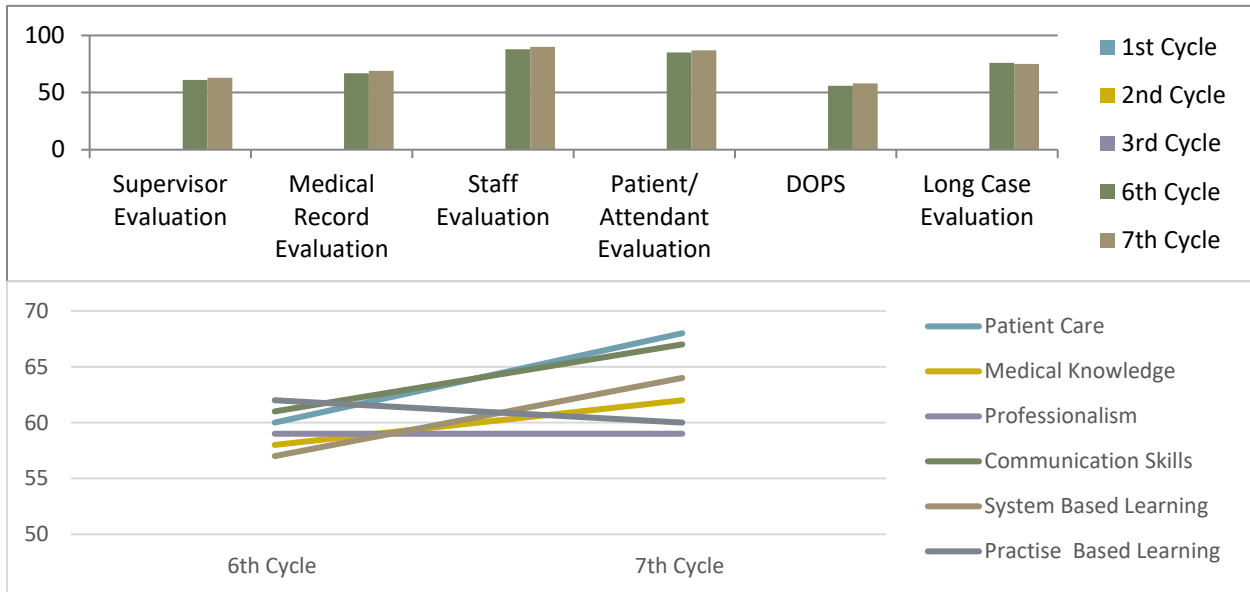
1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year		
NA	NA	NA	NA	NA		
INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100
07	12	10	16	09	14	68

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
NA	NA	NA	NA

Name of Resident: Dr. Humaira Shoukat
Discipline: MS Gynae/Obs

Supervisor: Dr Sobia Nawaz
Year of Starting: 09/03/2019



Average Performance of Core Competencies:

Patient Care:	64.0%	Communication Skills:	64.0%
Medial Knowledge:	60.0%	System Based Learning:	60.5%
Professionalism:	59.0%	Practice Based Learning:	61.0%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100
06	12	09	16	09	14	66

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

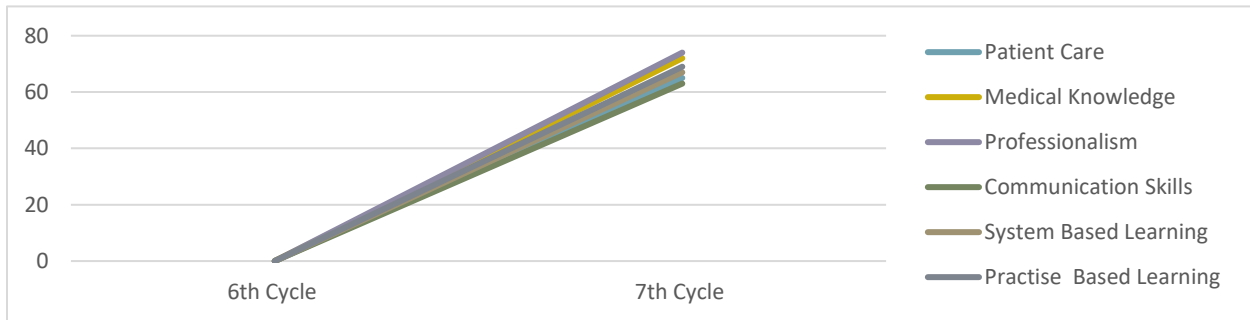
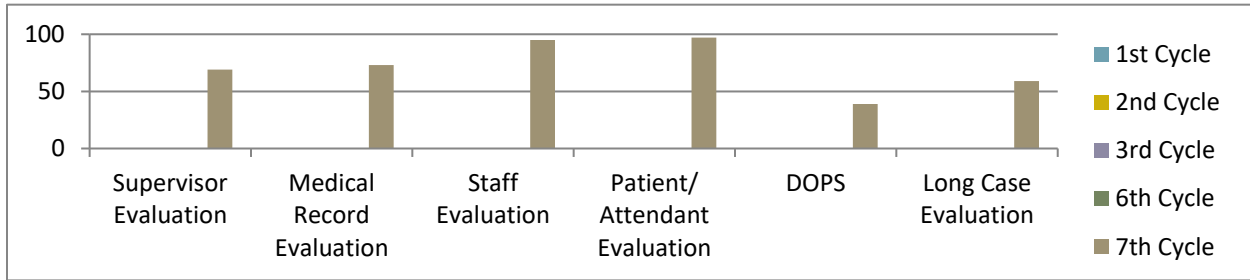
Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Name of Resident: Dr. Ishrat Irshad
Discipline: MS Gynae/Obs

Supervisor: Dr. Sobia Nawaz
Year of Starting: 03/03/2021

6th Cycle is not applicable



Average Performance of Core Competencies:

Patient Care:	32.5%	Communication Skills:	31.5%
Medial Knowledge:	36.0%	System Based Learning:	33.5%
Professionalism:	37.0%	Practice Based Learning:	34.5%

INTERNAL EVALUATION						
DOPS /OSATS (10)	Long Case (20)	MCQ Test 20	Presentations/ Journal Club 20	Log book (10)	360 evaluation 20	Grand Total =100
06	12	09	15	07	14	63

Exam Status

1 st Year	2 nd Year	3 rd Year	4 th Year	Final Year
N.A	NA	NA	NA	NA

Research Status

One Disease Statistical Report	Synopsis Status	BASR Approval	Thesis Status
N.A	NA	NA	NA

Comments by QEC

Quality Enhancement Cells serve as focal points for quality assurance in the institutions in order to improve and uphold the quality of higher education. Capacity building of academia in quality assurance is one of the key functions of Quality Assurance Agency (QAA), HEC and subsequently of QEC. Thus, QAA and QECs of the Universities work hand in hand to move in this direction of capacity building arrangements that include awareness campaigns, development of quality assurance policy instruments, training to learn the processes and procedures of quality assurance in higher education institutions and development of Manual to equip the practitioners of *quality assurance*.

In recent years it has become an obligation that institutions of higher education demonstrate the effectiveness of their academic programs in providing high quality education that positively impacts students. Furthermore, most accrediting bodies and others concerned with quality assurance are requesting that institutions assess students learning outcomes as a means of improving academic programs. This has led the accrediting bodies to develop methods for assessing the quality of academic programs. So, whole conventional system was needed to be revamped. Rawalpindi Medical University has the honor of being the first public sector Medical University of Punjab which has introduced work place-based assessment (WPBA) for post graduate trainees. Structured evaluation of the post graduate trainees is the need of the hour, if we want to raise the quality of patient care being offered at the hospitals.

It was a big challenge for Quality Enhancement Cell to maintain the quality and standards of all the teaching and training practices. Quality enhancement cell, RMU appreciate the untiring efforts of UTMC in this regard. UTMC team has worked day and night for the implementation of the evaluation system.

Now as system has been placed and compliance of the forms is becoming better with each day. Regular sharing of the feedback of the trainees with the supervisors and trainees has improved the quality of the forms greatly. QEC team appreciates the hard work of the supervisors and paramedical staff for their tiring efforts for improving the trainings of our future doctors.



Dr. Rabbia Khalid
Assistant Director
Quality Enhancement Cell
Rawalpindi Medical University
Rawalpindi
Dated: 01-07-22