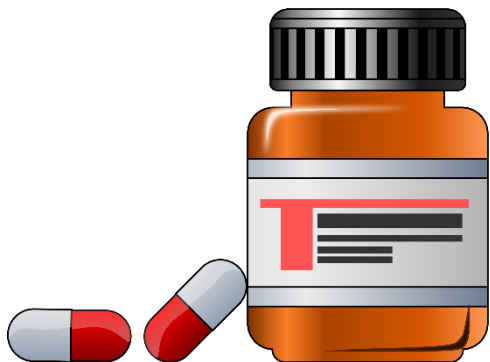




MEDICINE LOGBOOK



MCM - PESHAWAR

MESSAGE BY PRINCIPAL

I wish to underscore the significance of your clinical rotation, a pivotal phase in your journey towards becoming proficient healthcare professionals.

The clinical rotation serves as a foundation, providing you with hands-on experiences, exposure to various specialties, and the opportunity to apply theoretical knowledge in real-life patient. At MCM and MTH, we place utmost emphasis on this phase, recognizing its paramount importance in shaping your future practice.

During your clinical rotation, I urge you to approach each day with unwavering dedication, interest, and a commitment to learning. Embrace the challenges you encounter as invaluable learning experiences, and endeavor to uphold the highest standards of ethics, empathy, and professionalism.

Remember, each patient interaction offers not only a chance to learn but also an opportunity to make a positive impact on someone's life. Treat each patient with the respect, compassion, and care they deserve, for it is through these interactions that you will truly understand the essence of being a healthcare provider.

Our esteemed faculty and staff are dedicated to guiding and supporting you throughout this phase of your education. Do not hesitate to seek their guidance, ask questions, and actively engage in your learning process.

Your journey through clinical rotation is not just about acquiring clinical skills; it is about cultivating a mindset of lifelong learning, resilience, and integrity that will serve as the foundation of your medical career.

All the Best.

MESSAGE BY CEO

The observation and assessment of performance of medical students is an integral part of curriculum. It can be accomplished by different modalities of assessments at different times. Similarly, exposing the students to different clinical activities during undergraduate medical training is essential. Supervising these activities is mandatory. For that purpose, keeping record of these events is important for student evaluation and inclusion of these activities in grading student`s performance. Logbooks system is in use for many decades in the field of medicine throughout the world, and has some weaknesses like falsification of data, but still it is considered to be a useful checklist in assessing the performance of students and record keeping of different activities.

For this purpose, the Muhammad College of Medicine is introducing the LOG BOOK for students of 3rd, 4th and 5th year to help the students as well as the faculty in streamlining the teaching, assessment and certification of student`s performance. This activity will ensure structuring and recording student`s activities during their clinical rotations based on the learning objectives assigned, and will help the faculty in assessing student`s performance. The logbook system will be converted to a portfolio system in future.

PURPOSE OF THE LOGBOOK:

This Logbook serves as a comprehensive tool designed to support, document, assess, and validate student engagements across clinical and various rotations during their final year of study. It's structured in alignment with the predefined learning objectives specified in the curriculum.

Its core purpose is to systematically document and validate both clinical and educational involvements. This thorough record is essential for evaluating individual student performance and assessing the institution and curriculum comprehensively. Additionally, the inclusion of a reflective segment empowers students to augment their academic proficiency through self-reflection and critical assessment.

Furthermore, this Logbook is envisioned to transform into a reflective portfolio, providing a platform for students to encapsulate their learning journey and personal growth. Compiling these reflective insights will facilitate continuous enhancement, promoting patient safety by instilling in students a keen understanding of their responsibilities, limits, and accountabilities.

Ultimately, the meticulous documentation within this Logbook not only fosters individual academic progress but also elevates the quality of future healthcare professionals. This contributes to higher standards, ensuring improved patient safety and care. A medical student portfolio serves as a comprehensive collection of work, evolving from its traditional meaning of a compilation of drawings or papers representing someone's efforts. These Log books aid institutions in showcasing assessment evidence, facilitating continuous tracking of student progress and accomplishments. Moreover, when accompanied by effective procedures, portfolios promote students' abilities in self-assessment and continual professional growth.

OBJECTIVES OF CLINICAL ROTATIONS

Clinical rotation is one of the integral parts of undergraduate medical students that usually start at 3rd year. However, in contemporary programs, rotations in clinical activities starts right at the start of training as part of integration attempt. This document will be extended in future amongst students of early years. Clinical skills learning requires the exposure of students into clinical environment. This exposure should be preceded by skill laboratory training, and should be gradual. It has to be according to the learning objectives defined in the curriculum. The objectives of these rotations include:

- 1.** Application of concepts in real life situations which is being given in lectures, books and other reading materials
- 2.** Acquisition of clinical skills relevant to the level and understanding of students
- 3.** Understanding the concepts of patient safety, hospital organization and roles of doctors in clinical situations
- 4.** Developing communication skills, patient management skills, team work, time management skills, and interdepartmental collaboration at workplace
- 5.** Developing and enhancing professionalism in medical students

It is important to mention that this logbook is not only intended for the above-mentioned purposes, but include other activities and accomplishments of students like research, presentations and record of participation in co-curricular activities.

WHAT ROLE DO LOG BOOK FULFILL IN MEDICAL EDUCATION?

Logbooks serve various purposes, encompassing student evaluation, feedback provision, career mapping, and acting as a repository for student endeavors and accomplishments.

1. Logbooks as repositories of assessments:

- a. Enable learners to compile and showcase evidence of their competencies, augmenting traditional assessment methods.
- b. Track learner advancement against defined learning objectives and curriculum expectations.
- c. Serve as a comprehensive assessment tool throughout the medical student curriculum.
- d. Improve assessment in areas challenging to evaluate conventionally, like attitudes, personal attributes, reflection, critical thinking, and professionalism.
- e. Foster more effective learning through continual reflection and learning plans.
- f. Merge formative and summative feedback.
- g. Demonstrate fulfillment of curriculum requirements.
- h. Offer an integrated and continuous structure across the curriculum.

2. Logbooks supporting feedback mechanisms:

- a. Enable mentors to provide guidance on materials students include in their portfolios.
- b. Allow mentors to evaluate learners' skills based on the portfolio contents.
- c. Serve both formative and summative assessment needs.
- d. Act as a platform for formal feedback, enabling mentors to offer direct written input.
- e. Ideally include input from peers.
- f. Determine a learner's readiness to progress to the next training level.
- g. Identify any gaps in individual learning.

3. Log books aiding in Career Planning by:

- a. Assisting the transition from undergraduate to graduate medical education and beyond.
- b. Connecting with existing medical school tools and services related to career planning.
- c. Demonstrating career progression when maintained as an ongoing resource.

Methods of writing Reflection in the Logbook

In the context of clinical rotations, it's compulsory for students to articulate their reflective thoughts and experiences within the provided space in the logbook. This entails addressing specific elements:

1. **Description of an Event:** A concise paragraph detailing the encountered event.
2. **Thoughts and Feelings:** Another paragraph encapsulating the student's thoughts and emotions regarding the experience.
3. **Pros and Cons:** A balanced overview, highlighting both positive and negative aspects of the encounter.
4. **Strategies for Improvement:** Recommendations or thoughts, ranging from brief insights to a paragraph, on how to mitigate negative experiences and foster positive ones in subsequent encounters.

The entire reflective document is expected to fall within the range of 200-300 words, enabling students to systematically analyze and introspect upon their clinical experiences while enhancing their capacity for critical evaluation and continual improvement.

HOW TO USE THIS LOG BOOK:

Within this structured learning program, the logbook serves as a guide to delineate the objectives for each learning period or rotation. Its primary aim is to aid in self-assessment, enabling you to monitor your competence, identify any existing gaps, and take steps to address them. Additionally, it delineates the minimum expected competence level upon completion of each rotation.

Structure: The logbook delineates skill acquisition in two primary sections: history taking and procedural skills, followed by operative skills.

Levels of Competence: Competence levels are classified on a scale from observation (Level 1) to independent practice (Level 5). Each level is defined as follows:

- **Level 1:** Observes - Observes clinical activities performed by a colleague or senior.
- **Level 2:** Assists - Provides assistance to a colleague or senior during clinical activities.
- **Level 3:** Directed Supervision - Conducts entire activities under direct senior supervision.
- **Level 4:** Indirect Supervision - Completes activities with indirect senior colleague supervision.
- **Level 5:** Independent - Executes activities autonomously without supervision.

Assessment Procedure:

Your teacher or trainer will mark the achieved competence level and endorse them with a signature and date upon completion.

This logbook structure and competence assessment process aim to support your learning journey, allowing you to monitor progress, recognize areas for improvement, and achieve the required competence levels throughout your rotations.

MEDICINE HISTORY NO 1

NAME: _____

AGE: _____

GENDER: _____

ADDRESS: _____

GENERAL PHYSICAL EXAMINATION

PULSE: _____

RESP RATE: _____

HEART RATE: _____

ANEMIA: _____

KOILINYCHIAS: _____

CLUBBING: _____

CARDIOVASCULAR SYSTEM:

RESPIRATORY SYSTEM:

CENTRAL NERVOUS SYSTEM:

GASTROINTESTINAL SYSTEM:

INVESTIGATIOS:

DIFFERENTIAL DIAGNOSIS:

FINAL DIAGNOSIS:

TREATMENT:

MEDICINE HISTORY NO 2

NAME: _____

AGE: _____

GENDER: _____

ADDRESS: _____

GENERAL PHYSICAL EXAMINATION

PULSE: _____

RESP RATE: _____

HEART RATE: _____

ANEMIA: _____

KOILINYCHIAS: _____

CLUBBING: _____

CARDIOVASCULAR SYSTEM:

RESPIRATORY SYSTEM:

CENTRAL NERVOUS SYSTEM:

GASTROINTESTINAL SYSTEM:

INVESTIGATIOS:

DIFFERENTIAL DIAGNOSIS:

FINAL DIAGNOSIS:

TREATMENT:

MEDICINE HISTORY NO 3

NAME: _____

AGE: _____

GENDER: _____

ADDRESS: _____

GENERAL PHYSICAL EXAMINATION

PULSE: _____

RESP RATE: _____

HEART RATE: _____

ANEMIA: _____

KOILINYCHIAS: _____

CLUBBING: _____

CARDIOVASCULAR SYSTEM:

RESPIRATORY SYSTEM:

CENTRAL NERVOUS SYSTEM:

GASTROINTESTINAL SYSTEM:

INVESTIGATIOS:

DIFFERENTIAL DIAGNOSIS:

FINAL DIAGNOSIS:

TREATMENT:

MEDICINE

No	Date	Competencies	Level					Supervisor's comments / signature
			A: Observation status B: Assistant status C: Performed part of the procedure under supervision D: Performed whole procedure under supervision E: Independent Performance					
			A	B	C	D	E	
1.		History taking from a patient in a medical unit						
2.		General Physical Examination						
		• Pulse						
		• BP						
		• Temperature						
		• Respiratory Rate						
		• Others (Specify)						
3.		Systematic Examination						
		• GIT						
		• CVS						
		• Respiratory System						
		• Nervous System						
		• Others (Specify)						
4.		Pulse Oximeter Placement						
5.		Nasogastric tube insertion						
6.		Foley's catheter insertion						
7.		Fluid aspirations						
		• Ascetic						
		• Pleural						
		• CSF						
		• Others (Specify)						

DETAILS OF ACTIVITIES

Competencies	Details	Supervisor's comments / signature
Introduction to common symptoms and diseases to general medicine	Presented By:	
<p>*Details of history and examination</p> <p>You have to write 2 stories in each ward along with examination, provisional diagnosis, relevant investigations, results of procedures, final diagnosis, treatment and final follow up protocol</p>	<p>*Mention 3 symptoms and system involved</p> <ol style="list-style-type: none"> 1. 2. 3. 	
End of ward assessment	Marks: _____ out of : _____	
Any other event that you want to record during your stay at the unit (Provide details)		
Reflection by student		

Comments about professionalism and behaviors of students
 (To be filled by the supervisor)

No	Statement			
		YES	NO	Any other point
1.				
2.				
3.				
4.				
5.				
6.				
7.	Total Attendance		Out of =	
8.	Overall assessment of professional conduct	A: High		B: Moderate
				C: Lowd

MEDICAL UNIT

No	Date	Competencies	Level					Supervisor's comments / signature
			A: Observation status B: Assistant status C: Performed part of the procedure under supervision D: Performed whole procedure under supervision E: Independent Performance					
			A	B	C	D	E	
8.		History taking from a patient in a medical unit						
9.		General Physical Examination						
		• Pulse						
		• BP						
		• Temperature						
		• Respiratory Rate						
		• Others (Specify)						
10.		Systematic Examination						
		• GIT						
		• CVS						
		• Respiratory System						
		• Nervous System						
		• Others (Specify)						
11.		Pulse Oximeter Placement						
12.		Nasogastric tube insertion						
13.		Foley's catheter insertion						
14.		Fluid aspirations						
		• Ascetic						
		• Pleural						
		• CSF						
		• Others (Specify)						

DETAILS OF ACTIVITIES

Competencies	Details	Supervisor's comments / signature
Introduction to common symptoms and diseases to general medicine	Presented By:	
*Details of history and examination You have to write 2 stories in each ward along with examination, provisional diagnosis, relevant investigations, results of procedures, final diagnosis, treatment and final follow up protocol	*Mention 3 symptoms and system involved 1. 2. 3.	
End of ward assessment	Marks: _____ out of : _____	
Any other event that you want to record during your stay at the unit (Provide details)		
Reflection by student		

Comments about professionalism and behaviors of students
(To be filled by the supervisor)

No	Statement			
		YES	NO	Any other point
9.				
10.				
11.				
12.				
13.				
14.				
15.	Total Attendance		Out of =	
16.	Overall assessment of professional conduct	A: High		B: Moderate
				C: Lowd

COMMENTS

No	Statement	Supervisor comments		
		Yes	No	Any other points
1	Was polite with patients, nurses, premedical staff, seniors and colleagues			
2	Was ready to take responsibility			
3	Kept calm in difficult situations			
4	Maintained an appropriate appearance / dress			
5	Avoid derogatory remarks in the unit			
6	Presentation skills were up to the mark			
7	Total attendance		Out of =	
8	Overall assessment of professional conduct	A: High		B: Moderate
				C: Low

For Examination Section

Details of marks of internal assessments

No	Assessment module	Marks obtained	Total Marks	MCQ	SAQ	OSCE / Viva / practical	%age	Pass / Fail	
1									
2									
3									
4									
5	Total Marks of all modules								
6	Total marks of log book					Out of: 50			
7	%age								

Director Medical Education

NAME _____

Sign _____