



## PAEDS 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 facilitate, document, evaluate, and certify student activities throughout clinical and other rotations during the final year of study. It is structured around the predefined learning objectives delineated in the curriculum document.

The primary aim of this Logbook is to meticulously record and certify both clinical and educational engagements, furnishing an objective record pivotal for assessing individual student performance and appraising the institution and curriculum as a whole. Additionally, the inclusion of a reflective section empowers students to enhance their academic proficiency through introspection and critical analysis.

Moreover, this Logbook is envisioned to evolve into a reflective portfolio, fostering a platform for students to encapsulate their growth and learning journey. The compilation of these reflective insights will contribute to continuous improvement, benefitting patient safety by instilling in students an acute awareness of their boundaries, obligations, and accountabilities.

Ultimately, the meticulous documentation within this Logbook not only benefits individual academic growth but also amplifies the caliber of future healthcare professionals, thereby elevating standards and ensuring enhanced patient safety and care.

## **OBJECTIVES OF CLINICAL ROTATIONS**

Clinical rotations constitute a crucial component of undergraduate medical education, typically commencing in the third year. However, modern programs integrate clinical activities from the outset, aiming to extend this practice to early-year students in the future. The progression into clinical settings follows prior training in skill laboratories, ensuring a gradual exposure aligned with the curriculum's learning objectives. The goals of these rotations encompass:

1. Translating theoretical concepts from lectures and study materials into real-life scenarios.
2. Cultivating clinical skills pertinent to students' level of comprehension and expertise.
3. Fostering an understanding of patient safety, hospital dynamics, and the roles of physicians within clinical contexts.
4. Nurturing communication proficiency, patient care management, teamwork, time management, and collaboration across departments in the workplace.
5. Cultivating and refining professionalism among aspiring medical professionals.

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## **PEDIATRIC EXAMINATION GUIDELINES**

### **Approach**

The approach to examining children varies based on their age and cooperation level. Tailor your approach accordingly:

### **Undressing:**

Allow the parent to undress the child, exposing only the part of the body being examined.

### **Positioning:**

Respect the child's comfort. Use a standing position if preferred, minimizing laying down as it might feel intimidating.

### **Putting the Child at Ease:**

Establish rapport gradually. Engage with the child's space, offering toys and clear explanations. Reassure them consistently; continuous communication can ease any discomfort.

### **Examination:**

Start with a hands-off approach, observing the child's behavior, interaction with parents, and overall appearance. Adjust your demeanor and language to suit their age. Maintain eye level by kneeling when necessary.

### **Adaptability:**

Flexibility is key. Prioritize areas when the child is calm and receptive. Avoid fixating on a rigid examination order. Be comprehensive in your assessment and consider demonstrating procedures using props or cooperative family members.

Always reserve potentially uncomfortable procedures, such as examining ears and throat, for the end of the examination to minimize distress.





Past Blood Transfusion History: \_\_\_\_\_

Drug history: \_\_\_\_\_

Allergy history: \_\_\_\_\_

### **SOCIO ECONOMIC HISTORY**

Impact of the Diseases: \_\_\_\_\_

Parents Understanding: \_\_\_\_\_

### **GENERAL PHYSICAL EXAMINATION**

O/E: \_\_\_\_\_

VITALS: \_\_\_\_\_

Blood pressure: \_\_\_\_\_

Respiratory Rate: \_\_\_\_\_

Pulse rate: \_\_\_\_\_

Temperature: \_\_\_\_\_

Saturation: \_\_\_\_\_

### **GROWTH PARAMETERS**

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

OFC: \_\_\_\_\_

### **SYSTEMIC EXAMINATION**

Cardio vascular system

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Respiratory system

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Nervous system

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Muscular skeletal system

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Abdomen / GIRTH

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**DIFFERENTIAL DIAGNOSIS**

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**DIAGNOSIS**

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**INVESTIGATIONS**

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**TREATMENT PLAN**

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**DIAGNOSIS**

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**INVESTIGATIONS**

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**TREATMENT PLAN**

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## HISTORY NO 3

Name: \_\_\_\_\_

Age: \_\_\_\_\_

Address: \_\_\_\_\_

Sex: \_\_\_\_\_

Source of Admission: \_\_\_\_\_

OPD/ Emergency: \_\_\_\_\_

Relationship with patient: \_\_\_\_\_

History of present Illness: \_\_\_\_\_

### CHIEF COMPLAINTS

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### HISTORY OF PRESENT ILLNESS

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Birth History: \_\_\_\_\_

Feeding / Nutritional History: \_\_\_\_\_

Vaccination History: \_\_\_\_\_

Development History: \_\_\_\_\_

### FAMILY HISTORY

Past Medical history: \_\_\_\_\_

Past surgical history: \_\_\_\_\_

Past Blood Transfusion History: \_\_\_\_\_

Drug history: \_\_\_\_\_

Allergy history: \_\_\_\_\_

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Parents Understanding: \_\_\_\_\_

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**INVESTIGATIONS**

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**TREATMENT PLAN**

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**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

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### 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	<b>Total Marks of all modules</b>								
6	<b>Total marks of log book</b>					<b>Out of: 50</b>			
7	<b>%age</b>								

**Director Medical Education**

NAME \_\_\_\_\_

Sign \_\_\_\_\_