The Draft CBME Curriculum for PG Clinical is being Circulated for Comments and Suggestions. The Suggestions are to be sent to RGUHS by mail to dcd.rguhs@gmail.com and copy to be mailed to Chairman BOS PG Clinical ravikdoc@gmail.com

RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES

4th T Block, Jayanagar, Bengaluru, Karnataka 560041



POST GRADUATE STUDENT'S LOG BOOK Department of Dermatology

NAME

YEAR:.....INSTITUTE OF MEDICAL SCIENCES

(Affiliated to RGUHS, Karnataka, Bangalore)

COLLEGE EMBLEM

CERTIFICATE

Certified that the content of this Log Book is the Bonafide work of DrPost Graduate

Student of Department of
ofInstitute
of Medical Sciences, for the academic <i>Vear</i>

Signature Name & Seal of Guide Signature Name & Seal of Professor & HOD Signature Name & Seal of Director

Date:

Date:

Date:

INDEX

SI. No.	Item	Page No.
1	Bio data of the student	
2	Evaluation of clinical work	
3	Evaluation during academic grand rounds	
4	Evaluation of clinical case presentations	
5	Seminar presentations	
6	Journal review presentations	
7	Dissertation details	
8	Periodic evaluation of dissertation	
9	Evaluation of skill lab sessions	
10	Details of participation in academic programmes / CME / Workshop	
11	Details of paper and poster presentation and publications	
12	UG teaching skills	
13	Clinico - pathological meetings	
14	Diagnostic procedures	
15	Laser procedures	
16	Dermato-Surgical procedures — (Minor)	
17	Sub specialty postings	
18	Dermatological emergencies attended/handled	
19	Details of Annual assessments	
20	Details of leaves taken	
21	Details of inter-departmental postings	
22	Details of achievements in curricular / extracurricular activities (if any)	

BIO-DATA OF THE CANDIDATE

Student's Name

Date of Birth

MBBS Degree

Year of passing

College

University

Pass Port Size Photo of the student to be affixed and attested by the HOD.

Medical Registration

Permanent Address

Mobile no

Date of joining PG course

Name of the Guide

Candidate's Signature

Signature of Guide

Signature of HOD

Clinical work record

Guidelines for evaluation of Clinical Work in the Department

(This data include the overall care given to a patient who is admitted for dermatalogical diseases, where evaluated/assisted by the candidate)

SI.	Points to be considered
No.	
1	Regularity of attendance
2	Punctuality
3	Case sheet completion
4	Presentation of the case during rounds
5	Relevant investigations done pre-operatively
6	Post operative care given
7	Maintenance of case records
8	Ulcer/wound care/dressings and bedside investigations

Corollary Grading in all Check lists:

Poor-0, Satisfactory -1, Average-2, Good-3, Very Good-4.

Evaluation of Clinical Work in the Department

SI. No.	Date	IP No. /OP No.	Name of the patient	Diagnosis & Treatment done	Average /Grade	Initials of Guide / Faculty
						_

Guidelines for evaluation of academic grand ward rounds

SI.	Points to be considered
No.	
1	Presentation of the case
2	Ability to manage the case in the emergency department
3	During Bedside Investigation
4	Day to day management of the admitted patients

Corollary Grading in all Check lists:

Poor-0, Satisfactory -1, Average-2, Good-3, Very Good-4.

	<u>Evaluation of academic</u> grand ward rounds						
SI	Date	Patient	Name of the	Diagnosis	Average	Signature	
no		op/Ip no	patient		/grade	of faculty	

Evaluation of academic grand ward rounds

Guidelines for evaluation of Clinical Case Presentation

SI.No.	Points to be considered
1	Completeness of history
2	Clarity of presentation
3	Logical order
4	Accuracy of general physical examination
5	Diagnosis
6	Ability to defend diagnosis
7	Ability to justify differential diagnosis
8	Ability to plan management of the case

Corollary Grading in all Check lists:

Poor-0, Satisfactory -1, Average-2, Good-3, Very Good-4.

Evaluation of Clinical Case Presentation

SI no	Date	Patient op/Ip no	Name of the patient	Diagnosis	Average /grade	Signature of faculty

SEMINAR PRESENTATIONS Guidelines for evaluation of Seminar Presentation

SI/	Items for observation
No.	
1	Whether other relevant publications referred
2	Whether cross references have been verified
3	Completeness of preparation
4	Clarity of Presentation
5	Understanding of subject
6	Ability to answer questions

Corollary Grading in all Check lists:

Poor-0, Satisfactory -1, Average-2, Good-3, Very Good-4.

Evaluation of Seminar Presentations

Si. No.	Date	Seminar Topic	Average /Grade	Name of the Moderator	Initials of Moderator
		al di			
		7			

JOURNAL REVIEW PRESENTATION Guidelines for evaluation of Journal Review Presentation

SI/	Items for observation
No.	
1	Article chosen is whether relevant and appropriate
2	Extent of understanding of the scope & objectives of the paper by
	the candidates
3	Whether the Material, Methods, Observation and statistical analysis is understood
4	Whether cross references have been consulted
5	Ability to respond to questions on the paper / subject
6	Ability to analyse the paper and correlate with the existing knowledge
7	Ability to defend the paper
8	Clarity of presentation

Corollary Grading in all Check lists:

Poor-0, Satisfactory -1, Average-2, Good-3, Very Good-4.

Evaluation of Journal Review Presentation

(This table should be filled and signed by the concerned teacher regularly)

SI. No.	Date	Journal Article & Publication details	Average /Grade	Name of the	Initials of moderator

DISSERTATION

(To be submitted for registration of the demonstration topic within six months from the date of joining into the course)

Title of the Topic

Name of the Guide

S. No.	Points to be considered (guidelines)
1	Interest shown in selecting a topic
2	Appropriate review of literature
3	Discussion with guide and other faculty
4	Quality of protocol
5	Preparation of proforma

*Corollary Grading in all Checklists:

Poor-0, Satisfactory -1, Average-2, Good-, Very Good-4

SI. No.	Name of the Faculty & Designation	Average /Grade

Signature of the Candidate

Signature of the Guide

Signature of the HOD With Official Seal Signature of the Principal & Official Seal

DISSERTATION WORK

(Form to be filled before submitting the	dissertation to the University & retained in this book)
Subject	:
Name of the guide Date of Allotment	:
Date of Registration of Dissertation Topic	
Date of 1st review	
Date of 2 nd review	:
Date of 3rd review	·
Date of 4th review	
Date of approval of Dissertation	:
Date of Submission of Dissertation	:

Signature of the Candidate

Signature of Guide

Periodic evaluation of Dissertation work

Check list guide for evaluation of Dissertation Work

S. No.	Items for Observations
1	Periodic consultation with guide / co-guide
2	Regular collection of case material
3	Depth of analysis / discussion
4	Departmental presentation of findings
5	Quality of final output
6	Others

*Corollary Grading in all Check lists:

Poor-O, Satisfactory -1, Average-2, Good-, Very Good-4

Evaluation of Dissertation Work

Evaluation of skill lab sessions

Sl no	Date	Procedure performed	Grade	Signature of
				the faculty

Details of the participation in the academic programs

01				
Sl no	Name of the academic	Name of the	Nature of	Initials of the
	program and date	organizers	participation	HOD
	F8		(delegate /	
			presentation if	
			any)	
			uny	
L				

	1	

Details of paper and poster presentation

Sl no	Title of the presentation	Academic event of presentation	Paper / Poster	Signature of HOD

UG Teaching Skills

(Theory Class / Clinics / Practicals / Demonstrations, Tutorials, Group Discussion)

Guidelines for evaluation of teaching skills practice(UG)

SI	Points to be considered			
no				
1	Communication of the purpose of the talk			
2	Evokes the interest of audience in the subject			
3	Introduction & Sequence of ideas			
4	Speaking style (enjoyable, monotonous, etc., specify)			
5	Attempts audience participation			
6	Answer the questions asked by the audience			
7	Summary of the main points at the end			
8	Rapport of speaker with his audience			
9	Effectiveness of the talk			
10	Use AV aids appropriately			

Corollary Grading in all Check lists: Poor-0, Satisfactory -1, Average-2, Good-3, Very Good-4.

					J	
SI.	Date	Topic of	Class/	Average	Name of the	Initials of
No.		Teaching	Clinics /	/Grade	Supervisor	Guide /
			Practicals		Faculty	Faculty

Evaluation of UG teaching skills

Clinico Pathological Meetings

Date	HPE finding	Discussion	Diagnosis

Diagnostic and Dermatology procedures performed

- **O: Observed/Watched**
- A: Assisted
- P: Performed

Sl no	Date	Patient OP / IP no	Name of the patient	Procedure performed	O/A/P	Signature of faculty
				*		

Details of Sub specialty postings/Peripheral postings

Duration	Duration		Details of	Initials of	
	From	То	sub specialty	the HOD / In charge where posted	
	Duration			From To sub	

Dermatological emergencies managed in ward meetings

Sl	Date	IP number	Name of the	Topic discussed	Signature of the
no			patient		Dermatology faculty
		Ţ			

ANNUAL OVERALL ASSESSMENT SHEET (To be filled at the end of each year)

Academic Year — I

Grade:- Poor-0, Satisfactory-1, Average -2, Good-3, Very Good -4.

SI	Faculty Member	Grade
Νο		

Mean Grade

Signature of the HOD / Unit Chief

Academic Year - II

Grade:- Poor – 0, Satisfactory – 1, Average – 2, Good – 3, Very Good – 4.

SI	Faculty Member	Grade
No		

Mean Grade

Signature of the HOD / Unit Chief

Academic Year – III

Grade:- Poor – 0, Satisfactory – 1, Average – 2, Good – 3, Very Good – 4.

SI	Faculty Member	Grade
No		

Mean Grade

Signature of the HOD / Unit Chief

Details of the Leave taken

Date		Reason	Signature of the HOD /
			Unit Chief
From	То		

Details of the Clinical Postings

Date		Department	Unit	Remarks of the HOD / Unit Chief	Signature of the HOD / Unit Chief
From	То				