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**

4<sup>th</sup> T Block East, Jayanagar, Bengaluru, Karnataka 560041



# **STUDENT LOG BOOK**

(Practical work book in accordance with the MCI Regulations on Postgraduate Medical Education, 2020)

#### **CONTENTS**

SI.No.	Item	Page No.
1	Bio Data Sheet	3
2	Journal Review Presentation	4
3	Seminar Presentations	7
4	Clinical Work Record	12
5	Clinical Case Presentation	19
6	Academic Grand Rounds	29
7	Diagnostic & Surgical procedures	39
8	Skill lab & Cadeveric dissection	45
9	Ortho Radiological meet	49
10	Ortho Radiology Pathology meet	52
11	Surgical Audit(Mortality, morbidity meetings	54
12	UG teaching skills	58
13	Dissertation: Periodical Evaluation of Dissertation Copy	65
14	Leave availed	68
15	Subspeciality postings	69
16	Details of participation in the academic programs	70
17	Details of paper and poster presentations	71
18	Details of publications	72
19	Annual overall assessment	73
20	Space for specific PG academic work	74

#### NOTE:

- This log book is a work diary common for PG Degree.
- The work details shall be entered periodically under the supervision of faculty and kept in the department
- A student can take a Xerox copy of the log book after all entries are made after completions of the course for his / her future references
- The candidate has to fill the Bio-Data sheet after the closure of administrations are announced by KNR University of Health Sciences, Telangana, Warangal
- The form for registration of dissertation should be submitted within six months from the date of joining

### 1. 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.

Candidate's Signature

Signature of Guide Signature of HOD

Medical Registration no

Permanent Address

Mobile no Date of joining PG course

Name of the Guide

## 2. **Journal Review Presentations**

### 3. Guidelines for evaluation of Journal Review Presentation

SI/ No.	Items for observation
1	Article chosen is relevant and appropriate
2	Extent of understanding of scope & objectives of the paper by the candidates
3	Whether understood the Material, Methods, Observation and statistical analysis
4	Whether cross references have been consulted
5	Ability to respond to questions on the paper / subject
6	Ability to analyse the paper and co-relate 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.

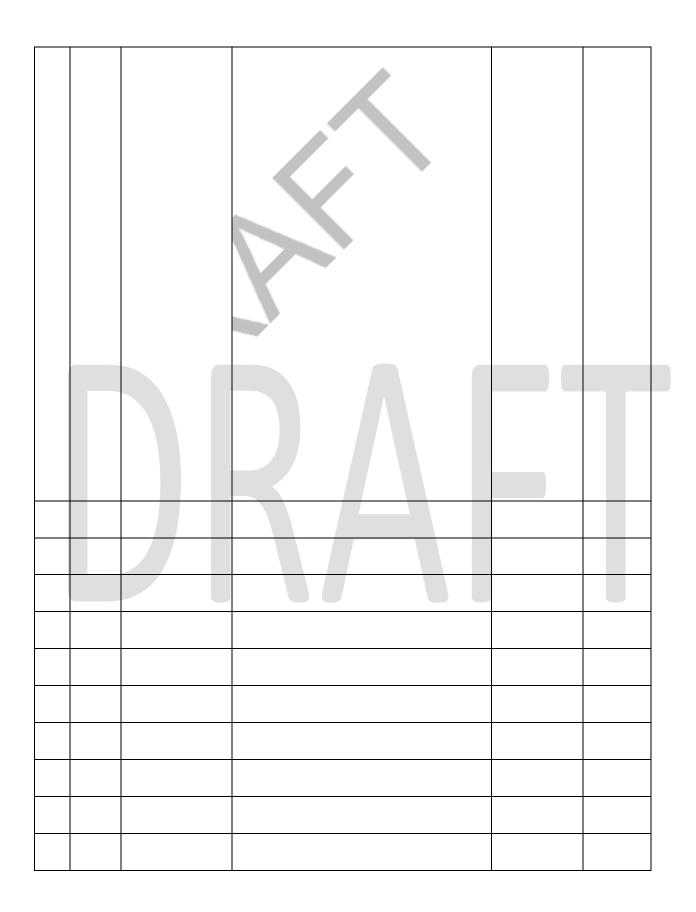
## **Evaluation of Journal Review Presentation**

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

SI. No.	Date	Journal Article & Publication details	Average Grade *	Name of the Moderator	Initials of moderator
			7		
		<b> </b>			

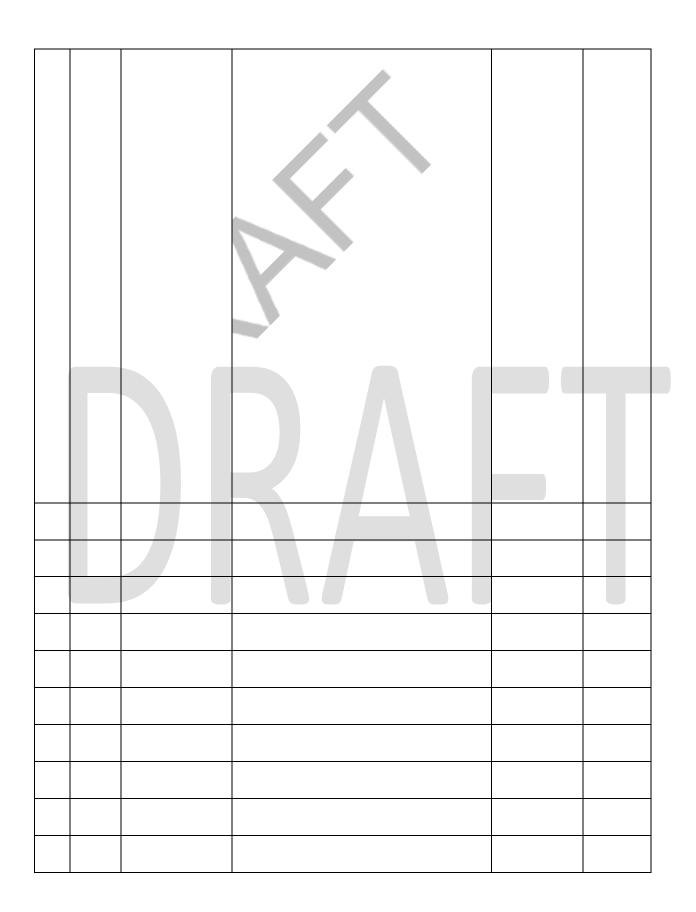
### **Evaluation of Journal Review Presentation - Cont,**

SI. No.	Date	Journal Article & Publication details	Average Grade *	Name of the Moderator	Initials of Guide



## **Evaluation of Journal Review Presentation - Cont,**

SI. No.	Date	Journal Article & Publication details	Average Grade *	Name of the Moderator	Initials of Guide



## **4. Seminar Presentation**

#### **Guidelines for evaluation of Seminar Presentation**

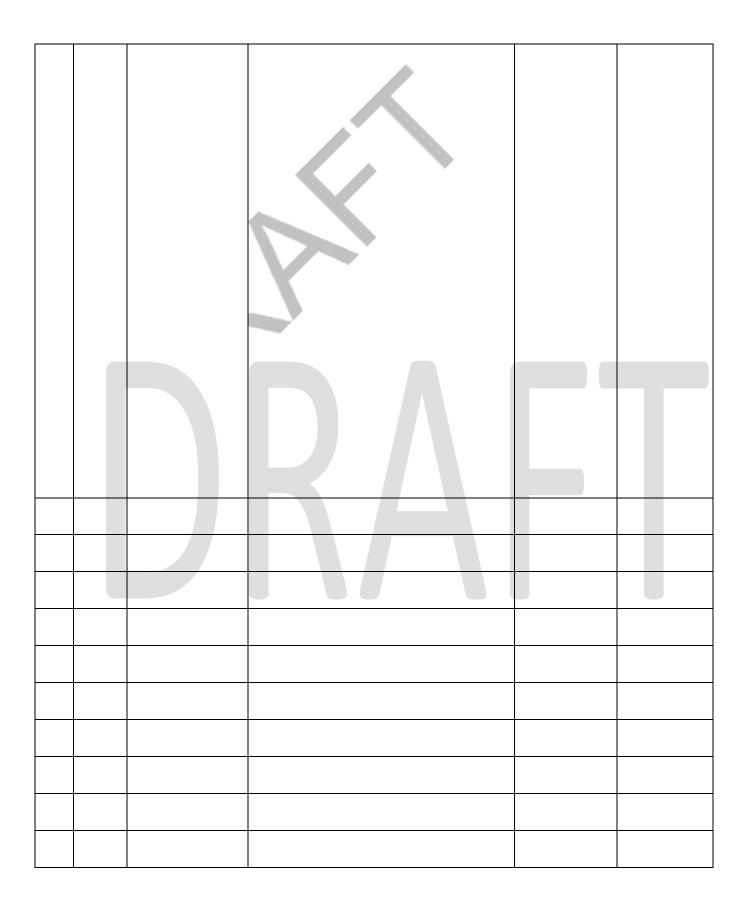
SI/ No.	Items for observation
1	Whether other relevant publications consulted
2	Whether cross references have been consulted
3	Completeness of preparation
4	Clarity of Presentation
5	Understanding of subject
6	Ability to answer questions

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



SI. No.	Date	Name of the Moderator	Initials of Guide

### **Evaluation of Seminar Presentations**

		Seminar Topic	Average Grade *	
ı	1			

SI. No.	Date	Name of the Moderator	Initials of Guide


SI. No.	Date	Name of the Moderator	Initials of Guide

### **Evaluation of Seminar Presentation**

	Seminar Topic	Average Grade *	

SI. No.	Date	Name of the Moderator	Initials of Guide

SI. No.	Date	Name of the Moderator	Initials of Guide

### **Evaluation of Seminar Presentations**

	Se	eminar Topic	A	verage Grade	e *		
1							
							I
	1			<u> </u>	<u> </u>		

SI. No.	Date	Name of the Moderator	Initials of Guide

Evaluation of Seminar Presentation

		Seminar Topic	Average Grade *	
[				

SI. No.	Date	Name of the Moderator	Initials of Guide

SI. No.	Date	Name of the Moderator	Initials of Guide

SI. No.	Date	Name of the Moderator	Initials of Guide

SI. No.	Date	Name of the Moderator	Initials of Guide


## 4. Clinical work record

#### **Guidelines for evaluation of Clinical work record**

(This data include the overall care given to a patient who is admitted for surgery, where the surgery is 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	Bedside manners and rapport with the patients

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 & surgery done	Average Grade *	Initials of Guide / Faculty
			AV			
		-				
			)			

		l	1	1	

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

SI. No.	Dat		IP No. /OP No.	ne of the atient	Diagnosis & surgery done	Ave Gra	de *	Initials of Guide / Faculty
SI. No.	Date	IP No.		Dia & sur	agnosis gery done		Average Grade <sup>3</sup>	e Initials of Guide / Faculty

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

	ı	T	T	<u></u>	T	

SI. No.	e	P No. P No.	ne of the atient	Diagnosis & surgery done	rage de *	Gu	itials of iide / culty

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

1			

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

			33			

SI. No.	SI. Date IP /OP		IP No. OP No.	Name of the patient	Diagnosis & surgery done	Average Grade *	Initials of Guide / Faculty
							1

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

	•					

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

			36			

# Evaluation of Clinical Work in the Department – Contd.,

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

## **Evaluation of Clinical Work in the Department – Contd.,**

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

ľ		•					

## **Evaluation of Clinical Work in the Department – Contd.,**

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

			39			

#### Evaluation of Clinical Work in the Department - Contd.,

SI. No.	Date	IP No. /OP No	ne of the atient	Diagnosis & surgery done	Avei Grad	Initials of Guide / Faculty
•						

## **5. Clinical Case Presentation**

#### **Guidelines for assessment 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.

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

SI	Date
no	

Signature of faculty

_				
ı				
ı				
ı				
ı				
ı				
ı				
ı				

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

SI	Date
no	

Signature of faculty

			45		

Patient op/Ip no	Name of the patient	Diagnosis	Average grade	

SI no	Date					Sig of f	nature aculty
I	I		I	 	I		

				Clinical Case Presentation- o		1
SI no	Date	Patient op/Ip	Name of the	Diagnosis	Average grade	Signature of faculty
		no	patient		_	
			•			

SI no	Date	}			Signature of faculty

SI	Date
no	

Signature of faculty

Patient Name of Diagnosis					
		Patient		Diagnosis	Average
		op/Ip	the		Average grade
		no	patient		
			- 1		

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

SI no	Date	Patien op/Ip	nt no	Name o	of the	Diagnosis	A	verage rade	S	ignature f faculty

SI no	Date	Patient op/Ip no	Name of to	the Diagnosi	s Avera	ige Si e of	gnature faculty

SI no	Date	Patie op/I	ent p no	Name of patient	of the	Diagnosis	Av	erage ade	Si of	gnature faculty
ĺ										

SI no	Date	Patient op/Ip no	Name of to	the Diagnosi	s Avera grade	ige Si e of	gnature faculty

SI no	Date	Patient op/Ip r	Name o patient	Diagnosis	Aver grad	age e	Sign	gnature faculty

SI no	Date	Patie op/Ip	nt no	Name o	f the	Diagnosis	Aver grad	age e	Si of	gnature faculty

SI no	Date	Patient op/Ip no	Name of the patient	Diagnosis	Average grade	Signature of faculty
1		I	ļ		I	ı
L			1			

SI no	Date	Patient op/Ip no	Name of to	the Diagnosi	s Avera grade	ige Si e of	gnature faculty

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

# **6.Academic grand ward rounds**

## Guidelines for evaluation of academic grand ward rounds

SI. No.	Points to be considered
1	Presentation of the case
2	Ability to manage the case in the emergency department
3	Plaster/splint/traction application
4	Day today management of the admitted patient

Corollary Grading in all Check lists:

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

## **Evaluation of academic grand ward rounds**

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

## **Evaluation of Academic grand ward rounds- contd.**

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

		<b>-</b>							
SI no	Date						Average grade	S	ignature faculty
		_ Evaluati	on of Acader	nic g	rand wa	rd roun			
		Patient op/Ip no	Name of the		nosis				
		ор, гр 110	F 3 3 3 3 3						

# **Evaluation of Academic grand ward rounds- contd.**

SI no	Date	Patient op/Ip no	Name of the patient		Diagnosis	Average grade	Sigr of fa	nature aculty
				60				

#### contd.

SI no	Date	5		Aver grad	age e	Signature of faculty

## **Evaluation of Academic grand ward rounds- contd.**

SI no	Date	Patien op/Ip	Name o		Diagnosis	Aver grad	age e	Si of	gnature faculty
				70					

		_							
SI no	Date						Average grade	Sig	inature faculty
		Evaluati	on of Acader	nic g	rand wa	ard rou	nds-		
		Patient op/Ip no	Name of the patient						
		7,7,7	F						
	1	1							

## **Evaluation of Academic grand ward rounds- contd.**

SI no	Date	Patient op/Ip no	Name of the patient		Diagnosis	Average grade	Sigr of fa	Signature of faculty	
				72					

#### contd.

SI no	Date	5		Aver grad	age e	Signature of faculty

### **Evaluation of Academic grand ward rounds- contd.**

SI no	Date	Patien op/Ip	Name o		Diagnosis	Aver grad	age e	Si of	gnature faculty
				74					

#### contd.

### **Evaluation of Academic grand ward rounds-**

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

Γ				

### **Evaluation of Academic grand ward rounds- contd.**

01 10	nature aculty

#### contd.

1	

# **Evaluation of Academic grand ward rounds- contd.**

SI no	Date	Patiei op/Ip	nt no	Name o	f the	Diagnosis	Aver grad	age e	Si of	gnature faculty
					70					

#### contd.

### **Evaluation of Academic grand ward rounds-**

				3		
SI no	Date				Average grade	Signature of faculty
		Patient op/Ip no	Name of the patient	Diagnosis		

### **Evaluation of Academic grand ward rounds- contd.**

SI no	Date	Patient op/Ip no	Name of the patient	e	Diagnosis	Average grade	Sigr of fa	nature aculty

#### contd.

SI no	Date	5		Aver grad	age e	Signature of faculty

# **Evaluation of Academic grand ward rounds- contd.**

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

O: Observed A: Assisted P: Performed

SI no	Date	Patient op/Ip no	Name of the patient	Surgery performed	O/A/P	Signature of faculty

SI no	Date	Patient op/Ip no	Name of the patient	Surgery performed	O/A/P	Signature of faculty
				0.4		

		<u> </u>	

SI no	Date	Patie op/Ip	nt o no	Name of patient	of the	Surgery performed	O/A,	/P	Signature of faculty

SI no	Date	Patient op/Ip no	Name of the patient	Surgery performed	O/A/P	Signature of faculty

SI no	Date	Patient op/Ip no	Name of the patient	Surgery performed	O/A/P	Signature of faculty

	1	1	1	1	1
	1				
-					
	1				
	-				
	1				
	1				
	]				

SI no	Date	Patient op/Ip no	Name of the patient	Surgery performed	O/A/P	Signature of faculty

SI no	Date	Patient op/Ip no	Name of the patient	Surgery performed	O/A/P	Signature of faculty

SI no	Date	Pat op/	ient Ip no	Name patier	of the	Surgery performed	0//	A/P	Signature of faculty

SI no	Date	Patie op/I	nt o no	Name of patient	of the	Surgery performed	O/A,	/P	Signature of faculty

SI no	Date	Procedure performed	Grade	Signature of the faculty

SI no	Date	Patient op/Ip no	Name of the patient	Surgery performed	O/A/P	Sig of	inature faculty

			1

SI no	Date	Procedure performed	Grade	Signature of the faculty
	ı			

SI no	Date	Procedure performed	Grade	Signature of the faculty	
I	I			1 1	
I					

SI no	Date	Procedure performed	Grade	Signature of the faculty
ı	ı			' '
,	ı			

SI no	Date	Procedure performed	Grade	Signatur faculty	e of the
1	ı			1	ı

# 9. Ortho Radiology Meets

(Discussion on interpretation of various imaging modalities amongst orthopaedic and radiology residents under facilitation of faculty)

SI n o	Dat e	Topic discussed	Name of the radiolo gy faculty	Signature of the orthopae dic faculty

**Ortho Radiology Meets--contd** 

SI n o	Dat e	Topic discussed	Name of the radiolo gy faculty	Signature of the orthopae dic faculty

**Ortho Radiology Meets-Contd.** 

SI	Dat	Topic discussed	Name	Signature
n o	е		of the radiolo gy faculty	of the orthopae dic faculty
			racuity	iacuity



# 10.Ortho Radiological Pathological Meets

(The Ortho resident presenting the clinical details of the case, radiology PG student describes the radiological findings and its interpretation and pathology student describes the morbid anatomy and histopathology of the same case)

SI no	Date	Topic discussed	Name of the radiology postgraduate resident	Name of the pathology postgraduate resident	Signature of the orthopaedic faculty

#### OrthoRadiological Pathological meets-Contd

SI no	Date	Topic discussed	Name of the radiology postgraduate resident	Name of the pathology postgraduate resident	Signature of the orthopaedic faculty

# 11. Surgical Audit(Mortality, morbidity meetings)

SI no	Date	IP number	Name of the patient	Topic discussed	Signature of the orthopaedic faculty

### Surgical Audit (Mortality, morbidity meetings) -contd

SI no	Date	IP number	Name of the patient	Topic discussed	Signature of the orthopaedic faculty

### Surgical Audit(Mortality, morbidity meetings) -contd

SI no	Date	IP number	Name of the patient	Topic discussed	Signature of the orthopaedic faculty

Surgical Audit(Mortality, morbidity meetings) -contd

SI no	Date	IP number	Name of the patient	Topic discussed	Signature of the orthopaedic faculty

## 12. UG Teaching Skills

SI no	Points to be considered
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

#### **Evaluation of UG Teaching Skills-contd**

Guidelines for evaluation of teaching skills practice (UG).

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

### **Evaluation of UG teaching skills**

SI. No.	Date	Topic of Teaching	Class/ Clinics / Practicals / Demos.	Average Grade *	Name of the Supervising Faculty	Initials of Guide / Faculty
			$\cap X$			

Evaluation of UG Teaching Skills-contd (Theory Class / Clinics / Practicals / Demonstrations, Tutorials, Group Discussion)

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

SI. No.	Date	Topic of Teaching	Class/ Clinics / Practicals / Demos.	Average Grade *	Name of the Supervising Faculty	Initials of Guide / Faculty

### **Evaluation of UG Teaching Skills-contd**

Evaluation of UG Teaching Skills-contd (Theory Class / Clinics / Practicals / Demonstrations, Tutorials, Group Discussion)

SI. No.	Date	Topic of Teaching	Class/ Clinics / Practicals / Demos.	Average Grade *	Name of the Supervising Faculty	Initials of Guide / Faculty

### **Evaluation of UG Teaching Skills-contd**

Evaluation of UG Teaching Skills-contd (Theory Class / Clinics / Practicals / Demonstrations, Tutorials, Group Discussion)

SI. No.	Date	Topic of Teaching	Class/ Clinics / Practicals / Demos.	Average Grade *	Name of the Supervising Faculty	Initials of Guide / Faculty

-contd
ss / Clinics / Practicals / Demonstrations, Tutorials, Group Discussion

(1	Theory Cla	ss / Clinics / Practicals / Demonstrations, Tut	orials, Gro	up Discussion	1)

#### -contd

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

### **Evaluation of UG Teaching skills**

SI. No.	Date	Topic of Teaching	Class/ Clinics / Practicals / Demos.	Grade *	Name of the Supervising Faculty	Initials of Guide / Faculty

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

 (T	heory Class /	Clinics / Practicals / Demonstrations, Tutori	als, Group	Discussion)	
	•			•	

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

### **Evaluation of UG Teaching Skills**

SI.	Date	Topic of	Class/	Average	Name of	Initials
No.		Teaching	Clinics / Practicals / Demos.	Grade *	the Supervising Faculty	of Guide / Faculty

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

 (1	heory Cla	ss / Clinics / Practicals / Demonstrations, Tut	orials, Gro	up Discussion	1)

#### -contd

(T	heory Clas	ss / Clinics / P	racticals / De	monstrations, Tut	orials, Gro	up Discussior	1)

Evaluation of UG Teaching skills-contd (Theory Class / Clinics / Practicals / Demonstrations, Tutorials, Group Discussion)

SI. No.	Date	Topic of Teaching	Class/ Clinics / Practicals / Demos.	Average Grade *	Name of the Supervising Faculty	Initials of Guide / Faculty

### 13. Dissertation: Periodic evaluation

(To be submitted be 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

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

<sup>\*</sup>Corollary Grading in all Check lists: Poor-0, Satisfactory -1, Average-2, Good-, Very Good-4

Signature of the Candidate

Signature of the Guide

Signature of the HOD With Official Seal

Signature of the Principal & Official Seal

### **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

<sup>\*</sup>Corollary Grading in all Check lists: Poor-0, Satisfactory -1, Average-2, Good-, Very Good-4

#### **Evaluation of Dissertation Work**

Date of Review	Name of the Members of the review Committee	Average Grade *	Initial of Guide
12 <sup>th</sup> month			
18 <sup>th</sup> month			
24 <sup>th</sup> month			
30 <sup>th</sup> month			

#### **DISSERTATION WORK**

(Form to be filled before submitting the dissertation to the University & retained in this book)

Subject :

Name of the guide

Date of Allottement

Date of Registration

of

Dissertation Topic:

Date of 1st

review

Date of 2<sup>nd</sup> review

Date of 3<sup>rd</sup> review

Date of 4th review

Date of approval of Dissertation

Date of Submission of Dissertation

### 14. Leave availed

Date of application	From	То	No. of Days	Remarks	Initial of the HOD / incharge

### 15. Sub specialty postings

	191 Sub specialty postings				
Date	Duration	Durat	ion	Details of	Initials
		From		subspecialty allotted	of the HOD/ Incharge where posted

## 16.Participation in the academic programs

SI no	Name of the academic program and date	Name of the organizers	Nature of participation (delegate/ presentation if any)	Initial of the HOD

## 17. Details of paper and poster presentations

	Title of the presentation	Academic event of presentation	Paper/Poste r	Signatur e Of HOD
0				

### 18. Details of publications

SI no	Title of the paper	Name of the Journal of publication	Volume/ page nos	Signature Of HOD

# 19. Annual overall assessment (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. No.	Faculty Member	Grade

<b>Acader</b> Mean G	nic Year - II rade	
Acader	mic Year -III	
Mean G	rade	Signature of the HOD
SI. No.	Faculty Member	Grade
1101		
Mean G	rade	Signature of the HOD
Grade:-	Poor-0, Satisfactory-1, Average -2, Good-3, V	ery Good -4.
SI. No.	Faculty Member	Grade
		▼

Signature of the HOD

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

