

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**

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Bengaluru, Karnataka 560041



POST GRADUATE STUDENT'S LOG BOOK

MD - ANAESTHESIOLOGY

NAME:

YEAR: _ . . _ . . _

COLLEGE EMBLEM

..... **INSTITUTE OF MEDICAL SCIENCES**
(Affiliated to RGUHS, Karnataka, Bengaluru)

CERTIFICATE

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

Dr....., Post Graduate
Student of Department of Anaesthesiology of..... Institute
of Medical Sciences, for the academic year.....

Signature
Name & Seal
of Guide

Signature
Name & Seal of
Professor &HOD

Signature
Name & Seal of
Director

Date:

Date:

Date

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BIO-DATA OF THE CANDIDATE

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

Student's Name

Date of Birth

MBBS Degree

Year of passing College

University

Medical Registration no 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 includes the overall care given to a patient who is admitted for surgery, where the surgical patient is anaesthetised by the candidate)

SI. No.	Points to be considered
1	Regularity of attendance
2	Punctuality
3	Preoperative evaluation
4	Pre-operative preparation
5	Relevant investigations done pre-operatively
6	Plan of anaesthesia
7	Maintenance of case records
8	Bedside manners and rapport with the patients
9	Interaction with patient (getting informed consent)/ post-operative visit

Evaluation of Clinical Work

SI. No.	Date	IPNo./ OP No.	Name of the patient	Surgery and Anaesthetic procedure	Average Grade*	Initials of Guide/ Faculty

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

**Evaluation during Clinical rounds
(ICU, PAC, Pain Clinic, PACU)**

Sl.No	Date	Patient IP/OP.no	Name of the Patient	Diagnosis	Average grade*	Signature of the Faculty

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

Evaluation of Clinical Case Presentations in the Department

Sl. No	Points to be considered
1	Presentation of the case
2	Ability to manage the case in the preoperative room, OT and postoperative recovery
3	Plan for oxygenation and analgesia POST-OPERATIVELY
4	Day to day management of the admitted patient
5	Maintenance of Anaesthetic records

Guidelines for evaluation of Clinical Case Presentation

Sl. 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
9	Knowledge about recent advances

SEMINAR PRESENTATIONS

Guidelines for evaluation of Seminar Presentation

Sl.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
7	Text book references quoted / How many books referred

SEMINAR PRESENTATIONS

Guidelines for evaluation of Seminar Presentation

Sl. No	Items for observation
01	Whether other relevant publications consulted
02	Whether cross references have been consulted
03	Completeness of preparation
04	Clarity of Presentation
05	Understanding of subject
06	Ability to answer questions
07	Text book references quoted / How many books referred

Evaluation of Seminar Presentations

Sl. No	Date	Seminar Topic	Average Grade*	Name of the Moderator	Initials of Moderator

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

JOURNAL REVIEW PRESENTATION

Guidelines for evaluation of Journal Review Presentation

Sl.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	Overall critical appraisal and clarity of presentation

Commented [rg1]: Critical Appraisal in the institutual context presented

Evaluation of Journal Review Presentation

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

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

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

DISSERTATION

(To be submitted for registration of the demonstration topic within 6 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
6	Ethical issues solved
7	Registration in Clinical Trials Registry (CTR)

DISSERTATION

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

Periodic Evaluation of Dissertation Work

Date of Review	Name of the Members of the review Committee	Average Grade*	Initials of Guide
12 th month			
18 th month			
24 th month			
30 th month			

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

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 2nd 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

Evaluation of Dissertation

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

**Corollary Grading in all Checklists: Poor-0, Satisfactory -1, Average-2, Good-3, Very Good-4*

Signature of the Candidate

Signature of the Guide

Signature of the HOD &
Official Seal

Signature of the Principal &
Official Seal

Evaluation of skill lab sessions

Sl. No	Date	Procedure performed	Grade*	Signature of the faculty
		Endotracheal Intubation Laryngeal mask Airway Drill for failed intubation Endotracheal intubation in Neonates Endotracheal intubation in Paediatric Mechanical ventilation Central Venous line Intra Arterial line Fiberoptic Intubation Infra glottic Invasive Airway Cardiac arrest – CPR incl. defibrillation Double lumen tracheal intubation Placement of endobronchial blocker		
		Others:		

**Corollary Grading in all Checklists: Poor-0, Satisfactory -1, Average-2, Good-3, Very Good-4*

Details of participation in academic programmes/ CME/ Workshop

Sl no	Name of the Academic Programme and Date	Name of the Organizers	Nature of Participation (delegate/ presentation if any)	Initials of HOD

Details of paper and poster presentation and publications

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

UG - Paramedical Teaching Skills

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

Guidelines for evaluation of teaching skills practice (UG - Paramedical)

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 - Paramedical teachingskills

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

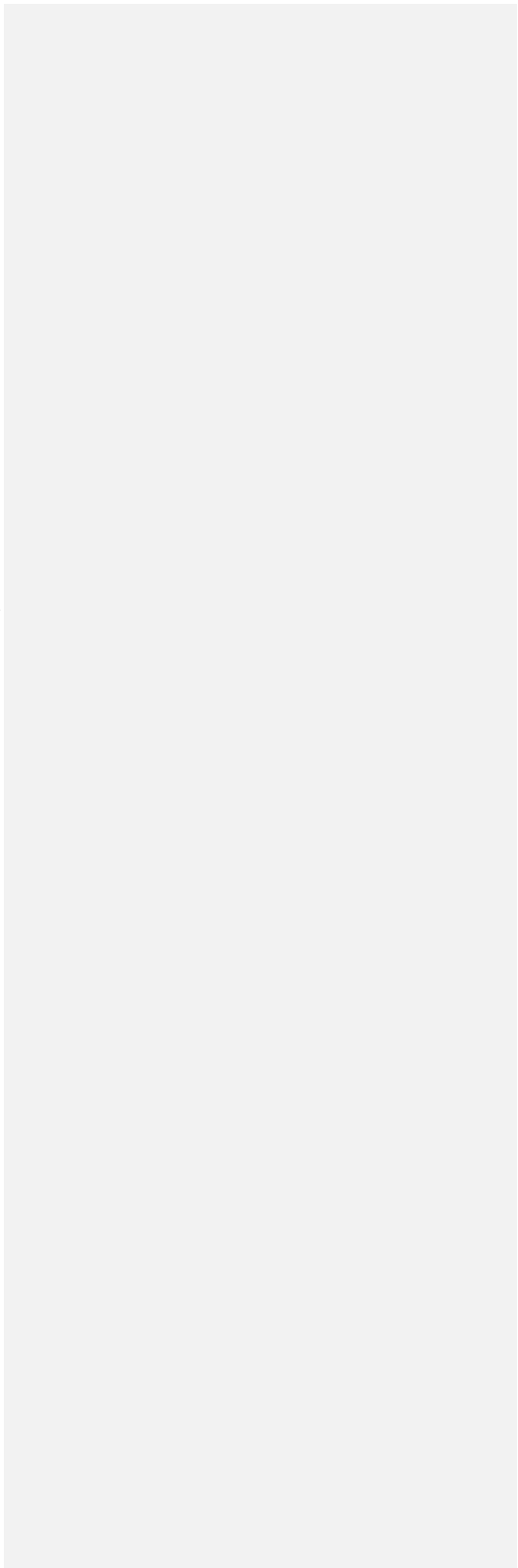
**Corollary Grading in all Check lists: Poor-0, Satisfactory -1, Average-2, Good-3, Very Good-4.*

Clinical Society / Interdepartmental Hospital Presentations

Date	Role: Directly involved / Assisted	Focus of Presentation / Title	Discussion	Outcomes

Anaesthesia Procedures

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



* O: Observed, A: Assisted, P: Performed

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

* O: Observed, A: Assisted, P: Performed

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

* O: Observed, A:Assisted, P: Performed

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

* O: Observed, A: Assisted, P: Performed

Other procedures (intensive care, emergency medicine, pain medicine, etc.)**

SI no	Date	Patient OP/IP no. and ward	Name of the patient	Procedure performed	O/A/P*	Signature of faculty

*O: Observed, A: Assisted, P: Performed

**Egs. Epidural blood patch, epidural steroid, on arrival blocks, diagnostic LP, NGT/ CVP/Intra-arterial line, PA Catheter, dialysis catheter, echocardiography, chest tube insertion, percutaneous tracheostomy, stellate ganglion block, trigger point injection, etc.

SI no	Date	Patient OP/IP no. and ward	Name of thepatient	Procedure performed	O/A/P*	Signature of faculty

*O: Observed, A: Assisted, P: Performed

**Egs. Epidural blood patch, epidural steroid, on arrival blocks, diagnostic LP, NGT/ CVP/Intra-arterial line, PA Catheter, dialysis catheter, echocardiography, chest tube insertion, percutaneous tracheostomy, stellate ganglion block, trigger point injection, etc.

Details of Sub-specialty postings

Date	Duration	Duration		Details of sub- specialtyAllotted	Initials of the HOD/ In- charge - where posted
		From	To		

Departmental Postings*

Date		Posting Area / Section	Remarks and Signature of the Unit chief / I-C of section	Remarks and Signature of the HOD
From	To			

**PAC, PACU, ICU, Pain Clinic, Endoscopy, Radiology suite, etc.,*

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

Academic Year -I

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

Sl. No	Faculty Member	Grade

Mean Grade

Signature of the HOD

Academic Year –III

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

Sl. No	Faculty Member	Grade

Mean Grade

Signature of theHOD

Details of Awards / Special Recognitions (if any)

Sl. No	Date	Details

Achievements in curricular/ extracurricular activities

Sl. No	Date	Field of Achievement	Achievement

PRACTICAL AND CLINICAL TRAINING ENTRY SHEET

Sl. No	Procedure	1 st Year			2 nd Year			3 rd Year		
		Observe	Assist	Perform	Observe	Assist	Perform	Observe	Assist	Perform
1	Endotracheal Intubation									
2	1 st Generation Supraglottic Airway Device (name)									
3	2 nd Generation Supraglottic Airway Device (name)									
4	3 rd Generation / other Supraglottic Airway Device (name)									
5	Drill for failed intubation									
6	DL tracheal intubation									
7	ET intubation in Neonates									
8	ET intubation in Paediatric									
9	Mask ventilation (Spont) Adult									
10	Mask ventilation (Spont) Paediatric									
11	Central Venous line									
12	Intra Arterial line									
13	Subarachnoid Block									
14	Lumbar epidural Block									
15	Thoracic epidural Block									
16	Caudal epidural Block									
17	Combined Spinal- Epidural									
18	Brachial plexus block									
19	TIVA									
20	Non-invasive ventilation									
21	Invasive ventilation									
22	Fibreoptic Intubation									
23	Femoral Nerve Block									
24	Inguinal Field Block									
25	3-in-1 block									
26	Ankle Block									
27	Labour Analgesia									
28										
29										
30										
31										
32										

Signature of the Candidate

Signature of HOD

Notes

DRAFT