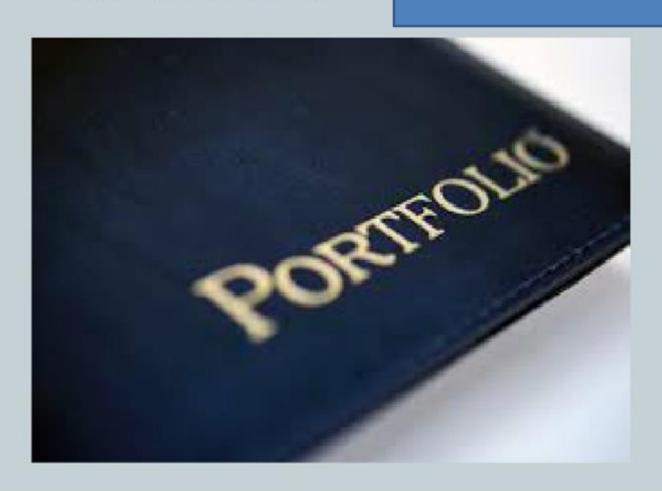


# University Residency Program 2019 Rawalpindi Medical University MS UROLOGY 1st Year Portfolio



#### Introduction of portfolio

#### What is a portfolio?

A collection of a learner's various documents and assessments throughout residency that reflect their professional development over time. May include referral letters and procedure logs (Rider et al., 2007). Portfolios also frequently include self-assessments, learning plans, and reflective essays (Epstein, 2007).

#### What should be included in a portfolio?

resident may include the following components in his or her portfolio:

- Curriculum Vitae (CV)
- Personal Publications
- Research abstracts presented at professional conferences
- Presentations at teaching units/departmental meetings and teaching sessions
- Patient (case) presentations
- Log of clinical procedures
- Copies of written feedback received (direct observations, field notes, daily evaluations)
- Quality improvement project plan and report of results
- Summaries of ethical dilemmas (and how they were handled)
- Chart notes of particular interest
- · Photographs and logs of medical procedures performed
- Consult/referral letters of particular interest
- Monthly faculty evaluations
- 360-degree evaluations
- Copies of written instructions for patients and families
- Case presentations, lectures, logs of medical students mentored
- Learning plans
- Writing assignments, or case-based exercises assigned by program director
- List of hospital/university committees served on
- Documentation of managerial skills (e.g., schedules or minutes completed by resident)
- · Copies of billing sheets with explanations
- Copies of written exams taken with answer sheets

- In-training Evaluation Report (ITER) results
- Format can be as simple as material collected in a three-ringed binder or as sophisticated as information stored in a handheld Pocket PC (PPC).
- Patient confidentiality should be assured when any clinical material is included in the portfolio.
- Should be resident-driven and include a space for residents to reflect on their learning experiences.

#### Why portfolio is required?

Can be used as a:

- Formative learning tool: To help develop self-assessment and reflection skills.
- Summative evaluation tool: To determine if a competency has been achieved.
- Useful for evaluating competencies that are difficult to evaluate in more traditional ways such as:
  - o Practice-based improvement
  - o Use of scientific evidence in patient care
  - o Professional behaviors (Rider et al., 2007)
- Purpose is to highlight for the resident the need for ongoing learning and reflection to achieve and maintain competencies.
- Enormous flexibility in using the portfolio as a learning tool: Portfolio may focus on one area (e.g., assessments pertaining to professionalism in a learner with attitudinal issues) without losing its effectiveness for the broader scope of competencies.
- Number and frequency of entries may vary. Expectations, including minimum standards, should be defined with the resident from the outset.
- Portfolios can be powerful tools for guided self-assessment and reflection (Holmboe & Carracio, 2008).

#### Evidence:

- Evidence suggests that an assessment of skills is most valid when the tool used places the learner in an environment and/or situation that closely mimics that in which the learner will later practice the mastered skill (Wiggins et al., 1998). In that way, portfolios have the advantage of reflecting not just what residents can do in a controlled examination situation but what they actually do at work with real patients (Jackson et al., 2007).
- As an evaluation tool, the reliability and validity of a portfolio are dependent on the psychometric characteristics of the assessment and judging methods used in the portfolio process (Holmboe & Carracio, 2008).
- Research is still needed to determine whether portfolios can be a catalyst for self-directed, lifelong learning (O'Sullivan et al., 2002).

#### Practicality/Feasibility:

Portfolios can be time consuming for the resident to assemble and for the preceptor to assess.

#### References:

- 1. Burch, V. C., & Seggie, J. L. (2008). Use of a structured interview to assess portfolio-based learning. *Medical Education*, 42, 894-900.
- 2. Challis M. (1999). AMEE medical education guide no. 11 (revised): Portfolio-based learning and assessment in medical education. *Medical Teacher*, 21, 370-86.
- 3. Colbert, C.Y., Ownby, A.R., & Butler, P.M. (2008). A review of portfolio use in residency programs and considerations before implementation. *Teaching and Learning in Medicine*, 20(4), 340-345.
- 4. Danner, E.F., & Henson, L.C. (2007). The portfolio approach to competency-based assessment at the Cleveland Clinic Lerner College of Medicine. *Academic Medicine*, 82(5), 493-502.
- 5. David, M.F.B., Davis, M.H., Harden, R.M., Howie, P.W., Ker, J., & Pippard, M.J. (2001). AMEE Medical Education Guide No. 24: Portfolios as a method of student assessment. *Medical Teacher*, *23*(6), 535-551.
- 6. Davis, M.H., Ponnamperuma, G.G., & Ker, J.J. (2009). Student perceptions of a portfolio assessment process. *Medical Education*, 43(1), 89-98.
- 7. Dekker, H., Driessen, E., Ter Braak, E., Scheele, F., Slaets, J., Van Der Molen, T., & Cohen-Schotanus, J. (2009). Mentoring portfolio use in undergraduate and postgraduate medical education. *Medical Teacher*, *31*(10), 903-909.
- 8. Driessen, E., van Tartwijk, J., van der Vleuten, C., & Wass, V. (2007). Portfolios in medical education: Why do they meet with mixed success? A systematic review. *Medical Education*, *41*(12), 1224-1233.
- 9. Epstein, R.M. (2007). Assessment in medical education. New England Journal of Medicine, 356(4), 387-396.
- 10. Gans, R. (2009). Mentoring with a formative portfolio: A case for reflection as a separate competency role. *Medical Teacher*, *31*(10), 883-884.
- 11. Gordon J. (2003). Assessing student' personal and professional development using portfolios and interviews. *Medical Education*, 37(4), 335-40.
- 12. Holmboe, E.S. & Carracio, C. (2008). Portfolios. In E.S. Holmboe & R.E. Hawkins (Eds.), *Practical Guide to the Evaluation of Clinical Competence* (pp 86-101). Philadelphia: Mosby Elsevier.
- 13. Jackson, N., Jamieson, A., & Khan, A. (2007). Assessment in medical education and training: A practical guide. Abingdon, UK: Radcliffe.
- 14. Michels, N.R.M., Driessen, E.W., Muijtjens, A.M.M., Van Gaal, L.F., Bossaert, L.L., & De Winter, B.Y. (2009). Portfolio assessment during medical internships: How to obtain a reliable and feasible assessment procedure. *Education for Health*, 22(3), 313.
- 15. O'Sullivan, P.S., Cogbill, K.K., McClain, T., Reckase, M.D., & Clardy, J.A. (2002). Portfolios as a novel approach for residency evaluation. *Academic Psychiatry*, 26(3), 173-9.
- 16. Pitts J. (2007). Portfolios, personal development and reflective practice. Edinburgh: Association for the Study of Medical Education.
- 17. Rider, E., Nawotniak, R., & Smith, G. (2007). *A Practical Guide to Teaching and Assessing the ACGME Core Competencies*. Marblehead, MA: HCPro Inc.
- 18. Tochel, C., Haig, A., Hesketh, A., Cadzow, A., Beggs, K., Colthart, I., & Peacock, H. (2009). The effectiveness of portfolios for post-graduate assessment and education: BEME Guide No 12. *Medical Teacher*, *31*(4), 299-318.
- 19. Toolbox of Assessment Methods, Version 1.1. (2000). Accreditation Council for Graduate Medical Education (ACGME), & American

- Board of Medical Specialties (ABMS). Available online: <a href="http://www.acgme.org/Outcome/assess/Toolbox.pdf">http://www.acgme.org/Outcome/assess/Toolbox.pdf</a>
- 20. Van Tartwijk, J., & Driessen, E. (2009). Portfolios for assessment and learning: AMEE Guide no. 45. Medical Teacher, 31(9), 790-801.
- 21. Wiggins, G. (1998). Educative Assessment: Designing Assessments to Inform and Improve Student Performance. San Francisco: Jossey-Bass.

### ENROLMENT DETAILS

Program of Admission
Session
Registration / Training Number
Name of Candidate
Father's Name
Date of Birth/ CNIC No
Present Address
Permanent Address
E-mail Address
Cell Phone
Date of Start of Training
Date of Completion of Training
Name of Supervisor
Designation of Supervisor
Qualification of Supervisor
Title of department / Unit
Name of Training Institute / Hospital

#### **INDEX:**

- 1. CURRICULUM VITAE (CV)
- 2. CASE PRESENTATION
- 3. TOPIC PRESENTATION
- 4. JOURNAL CLUB
- 5. EMERGENCY
- 6. INDOOR
- 7. OPD AND CLINICS
- 8. PROCEDURAL SKILLS/DIRECTLY OBSERVED PROCEDURES
- 9. MULTIDISCIPLINARY MEETINGS
- 10. MORBIDITY/MORTALITY MEETINGS
- 11. HANDS ON TRAINING
- 12. RESEARCH PUBLICATIONS/MAJOR RESEARCH PROJECT/ ABSTRACT/SYNOPSIS/DISSERTATION/PAPER PRESENTATION
- 13. ASSESSMENT RECORDS & EVALUATION PROFORMAS
- 14. AWARDS/TESTIMONIALS/APPRECIATION LETTERS
- 15. ANY OTHER SPECIFIC ACHIEVEMENTS
- 16. FUTURE AIMS & OBJECTIVES

# CURRICULUM YITAE (CY)

Brief curriculum vitae encompassing all academic achievements & work experiences should be written or pasted here



	W / 1111 / 1111 / 1111 / -
2	
2	10
1	
000	
2	
1	
1	
0000	
1	
1	
200	
2	
1	
4	
1	
1	
-	
1	
1	
4000	
0000	
4	
2	
9	

### **CASE PRESENTATION**

Interesting and unique case presentations should be written in this section with your own opinion and comments of the supervisor

1000   1000
10
12
8
88

13

# **TOPIC PRESENTATION**

Details of the topic presentations with the comments of the supervisor should be written here

?   (ami   (ami
15
13

400 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 / 1000 /	1 ( ) ( 1   1   1   1   1   1   1   1   1   1
	16
#	
*	
Ì	

# **JOURNAL CLUB**

Details of the selected critical appraisals of research articles discussed in journal club meetings should be written here

que en ence en e		/000/00//-
	1	8
į		
ĺ		
į		
Ì		
į		
Í		
*		
di Na		
1		
8.7		
100		
ė.		
3		
) d		
1		
1		
*		
Í		
į		

	19
V No.	

# **EMERGENCY**

Details of complicated and interesting emergency cases along with comments of the supervisor should written in this section

jun 1000 1	900   1011   1000   1011   1-
B. (1)	21
*	
è	
Ī	
á .	
į	
į	
į	
į	
*	
B. V.	
X BANK	
*	
ì	
į	
è	
į	
į	
į	
į	
į	
i i	
200	
1	
*	
#	
N.	
į	
N.	

22

23
1
1
Î
İ
William
***
1
900
Mi ven
1
Ī
!
***
1
1
1
!
ſ
ne (ane (ane (ane (ane (ane (a)

# **INDOOR**

Memorable cases seen in and managed in the medical ward along with comments of the supervisor should be mentioned in this section

SAMPANA.		
**************************************	2	25
***************************************		
(400.V400.V400		
********		
W. C.		
**********		
WANTED VIEW		
A.V. W.V. W.V. A.		
************		
**************************************		
*********		
(*)		
********		
***********		
W. C.		
AWAN VAN		
×4×4×4.		
200000000000000000000000000000000000000		
**************************************		
AWAN VAN		
(a) (a) (a)		
**************************************		
*********		
400.V400.V400.		
(*)		
***************************************		
W. C.		
***************************************		
(*)		
\$0000000000000000000000000000000000000		
***********		
***************************************		
V400.V400.V400		
NAWA NAWAN		

9/100/1000/100/1000/1000/1000/100/1000/100/100/100/100/100/100/100/100/100/100/100/100/100/100/100/100/100/10
26
20
1
1

# **OPD AND CLINICS**

Outpatient experiences along with supervisor's comments should be written here

/000/001/001/000/001/000/001/-
28
i

	W/WW/WW/WW/
	20
1000	29
600.000.00	
000 / 600 / 60	
0.000	
2000	
0.000	
600.00	
400.00	
400.00	
40000	
000000000000000000000000000000000000000	
***************************************	
200	
600.00	
400	
***************************************	
1000	
600.74	
0.000	
2000	
400.0	
6000000	
600	
1000	
400.0	
- Company	
00.7400.740	
0.000	
- 3	

30

# PROCEDURAL SKILLS/DIRECTLY OBSERVED PROCEDURES

Experiences during learning of procedures and details of directly observed procedures should be written here along with comments of the supervisor

	32
	100 march 100 ma
	Mary Mary Company
***************************************	***************************************
***************************************	***************************************
200.7 200.7 200.7	##. \ ##. \ ##. \ ##. \ ##. \
	***
	and the same of th
	and the same of th
	# 1
	(*m./*m//*m
	(*m./*m//*m
000000000000000000000000000000000000000	(m).m/m
	***************************************
	X 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2 400.2
0.000	# A MARK
	***************************************
	W. C # 10 10 10 10 10 10 10 10 10 10 10 10 10
	W. ( # 10 )
	W. ( # 10 )
	W. ( # 10 )
	W.Cam.Cam.C
***************************************	# (
***************************************	***************************************
	· m.cm.cm.
	X*************************************
Z	ameranerameraneri

33

# MULTI DICIPLINARY MEETINGS

Details of Multidisciplinary meetings attended should be written here with comments of the supervisor

35
33

	100
36	-
30	*
	1
	-
	1
	-
	1
	***
	-
	-
	***
	****
	****
	****
	*
	***************************************
	1
	1000
	***
	***
	***
	****
	1
	W . W
	***************************************
	1
	*
	****
	1
	0.7
	1
	0.000
	****
	1
	j

# MORBIDITY/MORTALITY MEETINGS

Details morbidity/mortality meetings attended should be written here with comments of the supervisor

38
20 / 000 / 000 / 000 / 000 / 000 /

*/##/##/##/- !
39
1

## HANDS ON TRAINING

Brief description of learning outcomes achieved by workshops attended should be written here along with the reason of need to have a specific workshop and also get endorsed the comments of the supervisor for each workshop separately

41
71

1000/1001/1001/1001/1001/1001/1001/1
42
in the second
Ī
III.
1
***
ļ
100
****
in i
100
in the second
***
1
1
100
Í

# RESEARCH PUBLICATIONS/ MAJOR RESEARCH PROJECT/ ABSTRACT/SYNOPSIS/DISSERTATION/PAPER PRESENTATION IN A CONFERENCE

All research experiences should be mentioned in this section along with comments of the supervisor

	9   1881   1882   1883   1883   1883   1883   1883   1883   1883   1883   1883   1883   1883   1883   1883   1
	44
i Interpretation de la composition della composition de la composition della composi	

	(000/000/000/000/000/000/000/
	45
	43
	1
	Ī
t	/ 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888 / 1888

## ASSESSMENT RECORDS/EVALUATION PROFORMAS

Evidence of all available result cards and end of block (four months) evaluation record should mentioned in this section to have a reflection about resident's Medical knowledge, patient care, Interpersonal and Communication Skills, system based learning, practice based learning and professionalism.

47

	/000/000/000/000/-
	48
2000	
2000	
000	
W 1 4000 1	
2000	
000	
000	
000	
000	
2000	
000	
2000	
000	
00000	
2000	
2000	
2000	

# AWARDS/TESTIMONIALS/ APPRECIATION LETTERS

Evidence of awards, testimonials and appreciation letters if any should be given in this section with comments of the supervisor

7/6111/6111/6111/6111/6111/6111/6111/61
51

## ANY OTHER SPECIFIC ACHIEVEMENT

Evidence of any other specific achievement done under forceful circumstances as a compulsion or done by chance without any previous plan or done as a passion should be mentioned in this section along with comments of supervisor



## FUTURE AIMS & OBJECTIVES

Brief overview of the future aims and objectives should mentioned in this section

57
Will be
1
Will be