

(PROPOSED)



Rawalpindi Medical University

Department of Community Medicine & Public New Teaching Block Rawalpindi Medical University Rawalpindi

ENROLLMENT DETAILS

Program of Admission	Session			
RMU Registration Number				
Name of Candidate				
Father's Name				
CNIC No.				
Contact:				
 Mobile #: Email: Address:				
Date of Start of Training:				
Date of Completion of Training:				
Name of Supervisor:				
Designation of Supervisor:				
Title of the Training Department / Unit				
Signature of the trainee:	Date:			
Signature of the Head of the Training Department				

INDEX

- 1. ASSIGNED PRESENTATIONS LOG
- 2. ASSIGNED PUBLIC HEALTH WORK LOG
- 3. JOURNAL CLUB ACTIVITY RECORD
- 4. TEACHINGS TRAINING WORK LOG
- 5. CHC- POPULATION BASED HEALTH INFORMATION COMMUNICATION WORK LOG
- 6. ATTENDING LGIS UNDERGRADUATE TEACHING LOG
- 7. INDEPENDENT UNDERGRADUATE TEACHING & AS TRAINER ACTIVITY LOG
- 8. LOG OF MULTIDISCIPLINARY LERANING SESSIONS / SHORT ROTATIONS (PAEDS, GYNAE & OBS, PSYCHIATRY, INFECTIOUS DISEASES, HOSPITAL ADMINSTRATION ETC)
- 9. PH RELEVANT CONFERENCES/ SEMINARS/ SYMPOSIUM & CPC ETC PARTICIPATION LOG
- 10. PUBLIC HEALTH SKILLS ACQUISITION RECORD
- 11. RESEARCH METHOLOGY WORKSHOPS RECORD
- 12. MEDICAL EDUCATION WORKSHOPS
- 13. PUBLICATIONS / RESEARCH PROJECT (DURING THE PERIOD OF TRAINING) LOG
- 14. ASSESSMENTS RECORD

TOPIC PRESENTATIONS

SR#	DATE	BRIEF DESCRIPTIONOF THE TOPIC	PERFROMANCE GRADE	SIGNATURE OF THE SUPERVISOR

ASSIGNED PUBLIC HEALTH WORK

S.NO	DATE	BRIEF DESCRIPTION OF PH WORK	SITE SUPERV ISION	PERFOR MACNE GRADE	SIG: OF SUPERVI SOR

JOURNAL CLUB

SR#	DATE	DTEAIL OF ARTICLE DEBTED & ROLE	PERFROMA NCE GRADE	SUP. SUPERVISION

TEACHINGS TRAINING WORK

SR #	DATE	BRIEF DESCRIPTION OF SESSION	FACILITATOR'S SUPERVISION	PERFORMANCE GERADE	SUP 'S SUPERVISION

CHC- POPULATION BASED HEALTH INFORMATION COMMUNICATION WORK

SR #	DATE	BRIEF DESCRIPTION OF ASSIGNMENT	SITE SUPER	PERFO. GRADE	SUP. 'S SUPERV
#			SUFER	GRADE	SUFERV

ATTENDANDING LGIS UNDERGRADUATE TEACHING

SR #	DATE	DESCRIPTION OF THE TOPIC ADDRESSED & TEACHING METHODOLOGY USED	FACILIT'S SUPER.	PERFOR- GRADE	SUP. SUPER

INDEPENDENT UNDERGRADUATE TEACHING & AS TRAINER ACTIVITY LOG

SR#	DATE	TOPIC & SUB TOPICS COVERED	TEACHING METHOD USED	SITE SUPERVISION	SIGNATURE OF THE SUPERVISOR

ULTIDISCIPLINARY LERANING SESSIONS / SHORT ROTATIONS (PAEDS, GYNAE & OBS, PSYCHIATRY, INFECTIOUS DISEASES, HOSPITAL

ADMINSTRATION ETC)

SR#	DATE	PARTNER DISCIPLINE	PH RELEVAN CE	FEEDBACK /REPORT SUBMISSION DETAILS	SITE SUP.	SIG.SUPE RVISOR

PH RELEVANT CONFERENCES/ SEMINARS/ SYMPOSIUM & CPC ETC PARTICIPATION LOG

SR#	DATE	TITLE OF ACTIVITY & DETAILS	PARTICIPATION LEVEL	FEEDBACK REPORT DETAILS	SITE CERTIFICATI ON	SIGNATU RE SUP.

PUBLIC HEALTH SKILLS ACQUISITION RECORD (COMMUNICATIONS, IMMUNIZATION, COMPUTER BASED SKILLS, EPIDEIOLOGICAL SKILLS ETC.)

SR#	DATE	DETAIL OF SKILL ACQUIRED	RESOURCES USED	SITE SUPERVISION	SUPERVISOR 'S SUPERVISION

RESEARCH LEARNING RECORD

SR#	DATE	BRIEF DESCRIPTION OF WORKSHOP OR TRAINING COURSE	FEEDBACK REPORT DETAILS	SITE SUPERVISIO N	SUPERVISOR'S SUPERVISION

MEDICAL EDUCATION LEARNING SESSIONS LOG

SR#	DATE	BRIEF DESCRIPTION OF THE TOPIC & RESOURCES USED	FEEDBACK REPORT DETAILS	SITE SUPERVISION	SUPERVISOR'S SUPERVISION

PRESENTATIONS/ PUBLICATIONS / RESEARCH PROJECT (DURING THE PERIOD OF TRAINING)

SR#	DETAILS OF RESEARCH WORK	PRES./ PUBLICATION FORUM	CERTIFICATION	SUPERVISOR'S SUPERVISION

ASSESSMENTS RECORD (CIA)

#	ASSESSMENT BASE	REF	GRADE	SUP.REMOTE	SUPVISOR

SUP: REMARKS

SUP. SIGNATURE

DME / RMU SUPERVISION

HOD