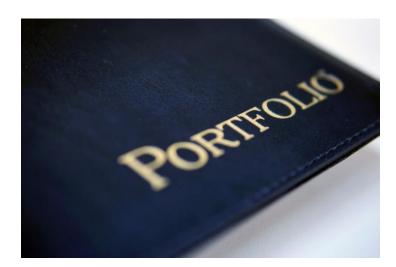


RAWALPINDI MEDICAL UNIVERSITY MD/MS YEAR 1 RESIDENCY PROGRAMME



PREFACE

The horizons of *Medical Education* are widening & there has been a steady rise of global interest in *Post Graduate Medical Education*, an increased awareness of the necessity for experience in education skills for all healthcare professionals and the need for some formal recognition of postgraduate training in Internal Medicine.



We are seeing a rise in the uptake of places on postgraduate courses in medical education, more frequent issues of medical education journals and the further development of e-journals and other new online resources. There is therefore a need to provide active support in *Post Graduate Medical Education* for a larger, national group of colleagues in all specialties and at all stages of their personal professional development. If we were to formulate a statement of intent to explain the purpose of this Portfolio book, we might simply say that our aim is to help students to learn in a better and advanced way. This book is a state of the art book with representation of all activities of the MD Internal Medicine program at RMU. Reflection of the supervisor in each and every section of the logbook has been made sure to ensure transparency in the training program.

The mission of Rawalpindi Medical University is to improve the health of the communities and we serve through education, biomedical research and health care.

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(Sitara-e-Imtiaz)
(MBBS, MCPS, FCPS, FACG,
FRCP (Lon), FRCP (Glasg), AGAF)
Vice Chancellor
Rawalpindi Medical University
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CONTRIBUTIONS

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1.	DR MUHAMMAD KHURRUM M.B.B.S, FCPS, FRCP Dean of Medicine RMU & Allied Hospitals	Over all synthesis, structuring & over all write up of Portfolio of MD Internal Medicine, under guidance of Prof. Muhammad Umar Vice Chancellor, Rawalpindi Medical University, Rawalpindi. Proof reading & synthesis of final print version of Portfolio of MD Endocrinology
2.	DR LUBNA MERAJ M.B.B.S, FCPS Associate Professor of Medicine RMU & Allied Hospitals	Synthesis, structuring and editing of curriculum under guidance of Prof. Muhammad Umar Vice Chancellor and Prof. Muhammad Khurram
3.	DR MUHAMMAD MUJEEB KHAN M.B.B.S, FCPS Associate Professor of Medicine RMU & Allied Hospitals	Assistance of Prof Muhammad Khurram in synthesis and structuring of curriculum
4.	DR MADEEHA NAZAR M.B.B.S, FCPS Senior Registrar of Medicine RMU & Allied Hospitals	Synthesis, structuring, editing of curriculum and assistance in computer work under direct guidance & supervision of Prof. Muhammad Umar Vice Chancellor and Prof. Muhammad Khurram

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/videos and logs of medical procedures performed
- Consultations/referral letters of particular interest
- · Monthly evaluation by faculty
- 360-degree evaluation
- Copies of written instructions for patients and relatives
- 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)/soft, hardcopies.
- Ensuring patient confidentiality in all clinical cases reported upon.
- 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:

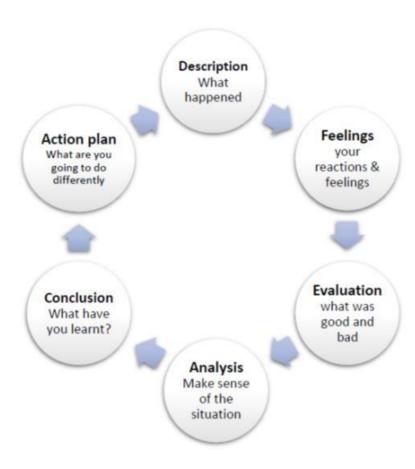
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How to write reflections

In the following sections 2-12 (case presentation, topic presentation, journal club, emergency, indoor, opd and clinics, procedural skills/directly observed procedures, multidisciplinary meetings, morbidity/mortality meetings, hands on training) reflect on the key activities that you have performed throughout the year in according to the 6 stages of Gibb's reflective cycle.



Gibb's Reflective Cycle:

Stage 1- Description

Here you set the scene. What happened? When it occurred? Who was there? What did they do? What was the outcome?

Stage 2- Feelings

Discuss your feelings and thoughts about the experience. Consider questions such as:

How did you feel at the time? What did you think at the time? What impact did your emotions, beliefs and values have? What do you think other people were feeling? What did you think about the incident afterwards?

Stage 3- Evaluation

How did things go? Focus on the positive and negative even if it was primarily one or the other. What was good and what was bad about the experience? What went well? What didn't? Were your contributions positive or negative. If you are writing about a difficult incident, did you feel that the situation was resolved afterwards?

Stage 4- Analysis

This is where you make sense of what happened, using the theory and wider context to develop understanding. Why did things go well? Badly? How can the theory explain what happened? How does my experience compare to the literature? What research/theories/models can help me make sense of this? Could I have responded in a different way? What might have helped or improved things?

Stage 5- Conclusion

What have you learnt? Generally, and specifically. What can I now do better? Could/should you have done anything differently? What skills would I need to handle this better?

Stage 6- Action plan

Action plans sum up anything you need to know and do to improve for next time.

How /where can I use my new knowledge and experience? How will I adapt my actions or improve my skills? If the same thing happened again, what would I do differently?

A Sample Reflection

This sample reflection is written from a Postgraduate medical student's perspective. It will help you write reflections in your portfolio.

Topic: Journal Club Presentation on "xx-xx-xx" at "Conference Room Medical Unit 1"

Description

This was my first journal club presentation on the research title " " published in ". The paper was selected by my supervisor as it was a recent study and relevant to what we practice in our unit. It took me 3 days (9 hours) to prepare for this presentation. For guidance I asked my SR Dr. for help.

Feelings

During the presentation I felt quite nervous. As the presentation progressed, my tone of voice and command over the presentation improved.

Evaluation

The strengths of my presentation were my good grip on the topic.

My weaknesses were that I could not explain the statistical aspects of the study and had to rush through the tables.

Analysis

The Introduction went well because in addition to the paper I also read the topic from the text book and took guidance from my SR.

The methodology and results presentation were weak because I could not understand them myself.

Conclusion

I need to work on my presentation anxiety and need to understand interpretation on methodology and results.

Action plan

I discussed with my supervisor and he informed me that I can self-learn these skills by reading up/attending courses online. However, I have come to know that DME department and Research Unit frequently conducts workshops on presentation skills and research methodology. I intent to register and attend them.

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			

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INDEX:

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- 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**

SECTION-1

CURRICULUM VITAE (CV)

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

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CASE PRESENTATION

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Description		Supervisor's Comments:
Feelings		
Evaluation		
Analysis		
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Action plan		
	CASE PRESENTATION	
		Date & Time: Venue:

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CASE PRESENTATION

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SECTION-3

TOPIC PRESENTATION

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

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SECTION-3	TOPIC PRESENTATION	
Details of the topic presentations with the comments of the supervisor should be written here.		
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TOPIC PRESENTATION

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

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SECTION-3

TOPIC PRESENTATION

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

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Description	Supervisor's Comments:
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Details of the topic presentations with the comments of the supervisor should be written here.

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Title:	Date & Time:
	Venue:
Description	Supervisor's Comments:
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SECTION-4

JOURNAL CLUB

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

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EMERGENCY

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

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

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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

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HANDS ON TRAINING

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HANDS ON TRAINING

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HANDS ON TRAINING

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

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ASSESSMENT RECORDS/EVALUATION PROFORMAS

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

AWARDS/TESTIMONIALS/ APPRECIATION LETTERS

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

ANY OTHER SPECIFIC ACHIEVEMENT

Evidence of any other specific achievement done either under compulsion or voluntarily 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 be mentioned in this section

RAWALPINDI MEDICAL UNIVERSITY SUPERVISOR APPRAISAL FORM FOR TRAINEE

Hospital Name: _____

Evaluator's Name(s): Department : Unit			
	 Use one of the following ratings to describe the performance of the individual in each of the categories. 			
eeds Improvement	Performance sometimes meets expectations for the job			
ood	Performance often exceeds expectations for the job			

Performance consistently meets expectations for the job

Performance consistently exceeds expectations for the job

Resident's Name:

1

2

3

4

5

Merit

Special Merit

I. CLINICAL KNOWLEDGE / TECHNICAL SKILLS	5	4
a) Clinical Knowledge is up to the mark		
b) Follows procedures and clinical methods according to SOPs		
c) Uses techniques, materials, tools & equipment skillfully		
d) Stays current with technology and job-related expertise		
e) Works efficiently in various workshops		
f) Has interest in learning new skills and procedures		
g) Understands & performs assigned duties and job requirements		
II. QUALITY / QUANTITY OF WORK	5	4
a) Sets and adheres to protocols and improving the skills		
b) Exihibts system based learning methods smartly		
c) Exihibts practice based learning methods efficaciously		
d) Actively participates in large group interactive sessions for postgraduate trainees		
e) Actively takes part in morning& evening teaching and learning sessions & noon conferences		
f) Actively takes part in Multidisciplinary Clinic O Pathological Conferences (CPC)		
g)Actively participates in Journal clubs		
h) Uses resources sensibly and economically		

i) Accomplishes accurate management of different medical cases with minimal assistance or supervision		
j) Provides best possible patient care		
III. INITIATIVE / JUDGMENT	5	4
a) Takes effective action without being told		
b) Analyzes different emergency cases and suggests effective solutions		
c) Develops realistic plans to accomplish assignments		
IV. DEPENDABILITY / SELF-MANAGEMENT	5	4
a) Demonstrates punctuality and regularly begins work as scheduled		
b) Contacts supervisor concerning absences on a timely basis		
c) Contacts supervisor without any delay regarding any difficulty in managing any patient		
d) Can be depended upon to be available for work independently		
e) Manages own time effectively		
f) Manages Outdoor Patient Department (OPD) efficiently		
g) Accepts responsibility for own actions and ensuing results		
h) Demonstrates commitment to service		
i) Shows Professionalism in handling patients		
j) Offers assistance, is courteous and works well with colleagues		
k) Is respectful with the seniors		
OVERALL RATINGS/SUGGESTIONS/REMARKS REGARDING PERFORMANCE OF THE TRAINEE		
Total Score/155		
Date Resident's Name & Signatures Date Evaluator's Signature & Stamp		