

UNIVERSITY RESIDENCY PROGRAM -2019 LOG BOOK FOR ENDOCRINOLOGY

RAWALPINDI MEDICAL UNIVERSITY RAWALPINDI



PREFACE

The horizons of Medical Education are widening & there has been a steady rise of global interest in Post Graduate Medical Education, 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 log book, we might simply say that our aim is to help clinical colleagues to teach and to help students to learn in a better and advanced way. This book is a state-of-the-art log book with representation of all activities of the MD Internal Medicine program at RMU.A summary of the curriculum is incorporated in the logbook for the convenience of supervisors and residents. MD curriculum is based on six Core Competencies of ACGME (Accreditation Council for Graduate Medical Education) including Patient Care, Medical Knowledge, System Based Practice, Practice-Based Learning, Professionalism, and Interpersonal and Communication Skills. A perfect monitoring system of a training program including monitoring of teaching and learning strategies, assessment and Research Activities cannot be denied so we at RMU have incorporated evaluation by Quality Assurance Cell and its comments in the logbook in addition to evaluation by *University Training Monitoring Cell (URTMC)*. 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. As an integral part of this mission, importance of research culture and establishment of a comprehensive research structure and research curriculum for the residents has been formulated and a separate journal for research publications of residents is available.

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(MBBS, MCPS, FCPS, FRCP (Lon),

FRCP (Glasg), AGAF)

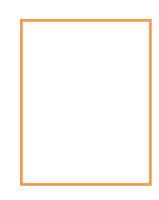
VICE CHANCELLOR

RAWALPINDI MEDICAL UNIVERSITY AND ALLIED



Enrolment Details

Program of Admission	
Session	
Registration / Training Number	
Name of Candidate	<u> </u>
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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Introduction of Log Book:

A structured book in which certain types of educational activities and patient related information is recorded, usually by hand. Logbooks are used all over the world from undergraduate to postgraduate training, in human, veterinary and dental medicine, nursing schools and pharmacy, either in paper or electronic format.

Logbooks provide a clear setting of learning objectives and give trainees and clinical teachers a quick overview of the requirements of training and an idea of the learning progress. Logbooks are especially useful if different sites are involved in the training to set a (minimum) standard of training. Logbooks assist supervisors and trainees to see at one glance which learning objectives have not yet been accomplished and to set a learning plan. The analysis of logbooks can reveal weak points of training and can evaluate whether trainees have fulfilled the minimum requirements of training.

Logbooks facilitate communication between the trainee and clinical teacher. Logbooks help to structure and standardize learning in clinical settings. In contrast to portfolios, which focus on students' documentation and self-reflection of their learning activities, logbooks set clear learning objectives and help to structure the learning process in clinical settings and to ease communication between trainee and clinical teacher. To implement logbooks in clinical training successfully, logbooks have to be an integrated part of the curriculum and the daily routine on the ward. Continuous measures of quality management are necessary.

Reference Brauns KS, Narciss E, Schneyinck C, Böhme K, Brüstle P, Holzmann UM, et al. Twelve tips for successfully implementing logbooks in clinical training. Med Teach. 2016 Jun 2; 38(6): 564–569.

NDOCRINOLOGY

CORE COMPETENCIES

The Clinical Competencies a specialist must possess are varied and complex. A complete list of the same necessary for trainees and trainers is given below. The level of competence to be achieved each year is specified according to the key, as follows:

- 1. Observer status
- 2. Assistant status
- 3. Performed under supervision
- 4. Performed under indirect supervision
- 5. Performed independently

Note: Levels 4 and 5 for practical purposes are almost synonymous

COMPETENCIES FOR POST MTA	yEAR-	-1 & 2	yЕ
FOR POST MTA	level	CASES	lev
PATIENT MANAGEMENT (OUT & IN-PATIENTS)		200	
Formulating A Working Diagnosis	4		5
Deciding About Ambulatory Care / Hospitalization / Referral	3		4
Ordering Investigations And Interpreting Them	4		5
Deciding And Implementing Treatment	4		5
BROAD SPECTRUM OF CASES			
General Diabetic Problems And Complications	3	75	4,5
General Endocrine Problems	3	95	4,5
Paeds Endocrinology Problems	2	10	3
Reproductive Endocrinology Problems	3	10	4
Obesity And Related Problems	3	5	4,5
Gender Confusion/Gender Dysphoria	3	5	4,5

COMPETENCIES FOR POST FCPS/MD MEDICINE	yEAR-1		year-2	
FOR POST FCPS/MD MEDICINE	IEVEI	CASES	level	CASES
PATIENT MANAGEMENT (OUT & IN-PATIENTS)		200		200
Formulating A Working Diagnosis	4		5	
Deciding About Ambulatory Care / Hospitalization / Referral	3		4	
Ordering Investigations And Interpreting Them	4		5	
Deciding And Implementing Treatment	4		5	
Broad Spectrum Of Cases				
General Diabetic Problems And Complications	3	75	4,5	75
General Endocrine Problems	3	95	4,5	95
Pediatric Endocrinology Problems	2	10	3	10
Reproductive Endocrinology Problems	3	10	4	10
Obesity And Related Problems	3	5	4,5	5
Gender Confusion/Gender Dysphoria	3	5	4,5	5

OUT-PATIENT MANAGEMENT (150 CASES/YEAR)

COMPETENCIES FOR POST MTA		yEAR-	1 & 2	уEА	\R-3
FOR POST MTA		IEVEI	CASES	IEVEI	CASES
Management Of Diabetes		1	50		50
Diagnoses & General Management Of Diabetes		4	20	5	20
Diabetes In Relation To Conception And Pregnancy		3	5	4,5	5
Gestational Diabetes		3	5	4,5	5
Manage Diabetes In Elderly		3	5	4,5	5
Macrovascular Complications		4	3	5	3
Diabetic Eye Disease		3	2	4,5	2
Diabetic Nephropathy		3	2	4,5	2
Diabetic Neuropathy		4	2	5	2
Diabetic Foot Disease		3	2	4,5	2
Diabetes And Erectile Dysfunction		3	1	4,5	1

OUT-PATIENT MANAGEMENT (150 CASES/YEAR)

COMPETENCIES FOR POST FCPS/MD MEDICINE	ув	yEAR-1		AR-2
FOR POST FCPS/MD MEDICINE	leve	IEVEI CASES		CASES
	1			
Management Of Diabetes		50		50
Diagnoses & General Management Of Diabetes	4	20	5	20
Diabetes In Relation To Conception And Pregnancy	3	5	4,5	5
Gestational Diabetes	3	5	4,5	5
Manage Diabetes In Elderly	3	5	4,5	5
Macro vascular Complications	4	3	5	3
Diabetic Eye Disease	3	2	4,5	2
Diabetic Nephropathy	3	2	4,5	2
Diabetic Neuropathy	4	2	5	2
Diabetic Foot Disease	3	2	4,5	2
Diabetes And Erectile Dysfunction	3	1	4.5	1

COMPETENCIES YEAR-1 & 2 YEAR-3

FOR POST MTA	level	CASES	IEVEI	CASES
Management Of Hypothalamus & Pituitary Disorders		16		16
Growth Hormone Deficiency	3	2	4,5	2
Ability To Prescribe And Monitor Growth Hormone Administration	3	1	4	1
Diagnose and Manage Secondary Hypo-Adrenalism Including Glucocorticoids Administration & Its Adjustments In Different Situations	3,4	2	5	2
Diagnose and Manage Hypogonadism in Females Including Prescription And	3,4	2	5	2
Monitoring Of Hormone Replacement Therapy				
Diagnose and Manage Hypogonadism in Males Including Prescription And Monitoring Of Testosterone Or Gonadotrophin Administration	3,4	2	5	2
Management of Common Chromosomal Disorders Like Turner's And Klinefelter's Syndromes	3	1	4	1
Assessment And Management Of Infertile Couple	3	4	4	4
Assessment And Management Of Diabetes Insipidus	3	2	4	2
Management Of Adrenal Disorders		8		8
Diagnose And Manage Disorders Of Adrenal Cortex And Medulla	3,4	8	5	8

				- 2
COMPETENCIES FOR POST FCPS/MD MEDICINE	yEAR-1		_	AR-2
FOR POST FCPS/MD MEDICINE	IEVEI	CASES	IEVEI	CASES
Management Of Hypothalamus & Pituitary Disorders		16		16
Growth Hormone Deficiency	3	2	4,5	2
Ability To Prescribe And Monitor Growth Hormone Administration	3	1	4	1
Diagnose and Manage Secondary Hypo-Adrenalism Including	3,4	2	5	2
Glucocorticoids Administration & Its Adjustments In Different Situations				
Diagnose and Manage Hypogonadism in Females Including Prescription	3,4	2	5	2
And				
Monitoring Of Hormone Replacement Therapy				
Diagnose and Manage Hypogonadism in Males Including Prescription And	3,4	2	5	2
Monitoring Of Testosterone Or Gonadotrophin Administration				
Management of Common Chromosomal Disorders Like Turner's And	3	1	4	1
Klinefelter's Syndromes				
Assessment And Management Of Infertile Couple	3	4	4	4
Assessment And Management Of Diabetes Insipidus	3	2	4	2
MANAGEMENT OF Adrenal Disorders		8		8
Diagnose And Manage Disorders Of Adrenal Cortex And Medulla	3,4	8	5	8

MANAGEMENT OF PARATHYROID AND BONE METABOLISM DISORDERS		12		12
Parathyroid Disorders	3,4	4	5	4
Diagnose And Manage Osteoporosis	3,4	3	5	3
Diagnose And Manage Rickets And Osteomalacia	3,4	1	5	1
Diagnose And Manage Hypo/Hyper Calcemic Disorders	3,4	3	5	3
Diagnose And Manage Renal Osteodystropy	3	1	4	1
MANAGEMENT OF Obesity		5		5
Diagnose And Manage Obesity	3,4	5	5	5
Management Of Pediatric Endocrinology Disorders		12		12
Diagnosis And Management Of Short Stature	3	3	4	3
Diagnosis And Management Of Common Chromosomal Abnormalities	3	2	4	2
Disorders Of Sex Differentiation	3	2	4	2
Diabetes	3	5	4	5
MANAGEMENT OF DISORDERS OF SEX DIFFERENTIATION/ GENDER Dysphoria In Adults	3	3	4	3
Management Of Disorders Of Gonads		10		10
Investigate And Manage Primary And Secondary Gonadal Failure	3,4	5	5	5
Perform And Interpret Tests Of The Hypothalamus - Pituitary Gonadal	3,4	3	5	3
Axis				
Evaluation And Interpretation Of Semen Analysis	3,4	2	5	2

COMPETENCIES FOR POST FCPS/MD MEDICINE		AR- 1	year-2	
FOR POST FCPS/MD MEDICINE	level	CASES	level	CASES
Management Of Parathyroid And Bone Metabolism Disorders		12		12
Parathyroid Disorders	3,4	4	5	4
Diagnose And Manage Osteoporosis	3,4	3	5	3
Diagnose And Manage Rickets And Osteomalacia	3,4	1	5	1

	1	1	
3,4	3	5	3
3	1	4	1
	5		5
3,4	5	5	5
	12		12
3	3	4	3
3	2	4	2
3	2	4	2
3	5	4	5
3	3	4	3
	10		10
3,4	5	5	5
3,4	3	5	3
3,4	2	5	2
	3,4 3 3 3 3 3 3 3,4 3,4	3 1 5 3,4 5 12 3 3 3 3 2 3 2 3 5 3 3 10 3,4 5 3,4 3	3 1 4 5 5 3,4 5 5 12 3 3 4 3 2 4 3 2 4 3 5 4 3 3 4 10 3,4 5 5 3,4 3 5

management of emergencies & in-patient care (50 cases/year)

COMPETENCIES FOR POST MTA		. & 2	уEA	AR-3
FOR POST MTA	IEVEI	CASES	IEVEI	CASES
In-Patient Management		50		50
Diabetes		25		25
Diabetic Emergencies (DKA, HHS, Hypoglycemia)	4	6	5	6
Manage Diabetes During Acute Illness And Peri-Operative Period	4	8	5	8
General Management Of Diabetes And Complications	4	11	5	11
Thyroid Disorders		10		10
Diagnose And Manage Thyroid Storm And Myxedema State	3	3	4,5	3
Peri-Operative Endocrine Care During Thyroid Surgery	4	4	5	4
Diagnose Mechanical Compression from Goiter and Refer Appropriately To Surgeons	4	3	5	3

PITUITARY DISORDERS		5		5
Peri-Operative Endocrine Management Of Pituitary Surgery	3	5	4	5
Adrenal Disorders		5		5
Peri-Operative Care Of Adrenal Disorders	3,4	3	5	3
Management Of Adrenal Insufficiency	3,4	2	5	2
Electrolyte Disorders		5		5
Diagnose and Manage Electrolyte Imbalance in Relation To Endocrinological Disorders	3,4	5	5	5

management of emergencies & in-patient care (50 cases/year)

COMPETENCIES FOR POST FCPS/MD MEDICINE	yE/	AR-1	yE/	AR-2
FOR POST FCPS/MD MEDICINE	IEVEI	CASES	IEVEI	CASES
		l	'	
In-Patient Management		50		50
Diabetes		25		25
Diabetic Emergencies (DKA, HHS, Hypoglycemia)	4	6	5	6
Manage Diabetes During Acute Illness And Peri-Operative Period	4	8	5	8
General Management Of Diabetes And Complications	4	11	5	11
Thyroid Disorders		10		10
Diagnose And Manage Thyroid Storm And Myxedema State	3	3	4,5	3
Peri-Operative Endocrine Care During Thyroid Surgery	4	4	5	4
Diagnose Mechanical Compression from Goiter and Refer Appropriately	4	3	5	3
То				
Surgeons				
PITUITARY DISORDERS		5		5
Peri-Operative Endocrine Management Of Pituitary Surgery	3	5	4	5
Adrenal Disorders		5		5
Peri-Operative Care Of Adrenal Disorders	3,4	3	5	3
Management Of Adrenal Insufficiency	3,4	2	5	2

Electrolyte Disorders		5		5
Diagnose and Manage Electrolyte Imbalance In Relation To	3,4	5	5	5
Endocrinological Disorders				

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Perform and interpret Short Synacthen Test Cortisol

17-OH Progesterone

Perform and interpret Corticotrophin Releasing Hormone (CRH)

Stimulation Test

Perform and Interpret Insulin Tolerance Test

Perform and Interpret Water Deprivation Test

Perform and Interpret Glucose Tolerance test for Growth Hormone Excess

Perform and Interpret GNRH Stimulation Test for precious puberty

Interpret data coming after Inferior Petrosal Sinus Sampling

IMAGING TECHNIQUES IN ENDOCRINOLOGY

Adrenals , Orbits and other endocrine organs

Interpretation of Ultrasound of Ovaries and Thyroid

Interpretation of Radioisotope scans of Thyroid and Adrenals

Appropriate Ordering and Interpretation of CT & MRI of Pituitary

Index:

- 1. Morning Report Presentation/Case Presentation (Long and Short Cases)
- 2. Topic Presentation/Seminar
- 3. Didactic Lectures/Interactive Lectures
- 4. Journal Club
- 5. Problem Case Discussion
- 6. Emergency Cases
- 7. Indoor Patients
- 8. OPD and Clinics
- 9. Procedures (Observed, Assisted, Performed Under Supervision & Performed Independently)
- 10. Multidisciplinary Meetings
- 11. Clinicopathological Conference
- 12. Morbidity/Mortality Meetings
- 13. Hands on Training/Workshops
- 14. Publications
- 15. Major Research Project During MD Training/Any Other Major research Project
- 16. Written Assessment Record
- 17. Clinical Assessment Record
- 18. Evaluation Record

Morning Report Presentation / Case Presentation (Long And Short Cases)

Sr#	Date	Reg # of	Diagnosis & brief description	Signatures of the
		patient		supervisor

Topic Presentation/Seminar

Sr#	Date	Name of the topic & brief details of the aspects covered	Signatures of the supervisor

Journal Club

Sr#	Date	Title of the article	Name of journal	Date of publication	Signatures of the supervisor

Problem Case Discussion

Sr#	Date	Reg.# of the patient discussed	Diagnosis	Brief description of the case	Signatures of the supervisor



Didactic Lecture/Interactive Lectures

Sr#	Date	Topic & brief description	Name of the	Signatures of the
			teacher	supervisor

Record of Total Emergency Cases Seen On Emergency Call Days

Sr.#	Date	Total number of cases attended	Signatures of the supervisor
1			
2			
3			
4			
5			
6			
7			
9			

10		
11		
12		
13		
14		
15		
16		
17		
18		
19		

20		
21		
22		
23		
24		
25		
26		
27		

Emergency Cases (Repetition Of Cases Should Be Avoided)

Sr#	Date	Reg # of the patient	Diagnosis	Management	Procedures performed	Signatures of the supervisor

Record of Total Indoor Cases Seen On Call Days In The Ward

Sr.#	Date	Total number of cases attended	Signatures of the supervisor
1			
2			
3			
4			
5			
6			
7			

	1	1
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		

19		
20		
21		
22		
23		
27		
28		

r#	Date	Reg # of the	Diagnosis	Management	Procedures	Signatures of the
		patient			performed	supervisor



Record of Total OPD/Clinic Cases Seen On OPD Call Days

Sr.#	Date	Total number of cases attended	Signatures of the supervisor
1			
2			
3			
4			
5			
6			
7			
9			

	1	
10		
11		
12		
13		
15		
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20		
21		
22		
23		
24		
25		
26		

OPD and Clinics (Repetition Of Cases Should Be Avoided)

Sr#	Date	Reg # of the patient	Diagnosis	Management	Signatures of the supervisor
		patient			Super visor

Procedures

Sr.#	Date	Reg no. Of patient	Name of procedure	Observed/assisted/performed under supervision/performed independently	Place of procedure	Signatures of the supervisor

Multi-Disciplinary Meetings

Sr#	Date	Brief description	Signatures of the supervisor

Clinicopathological Conference (CPC)

Sr#	Date	Brief description of the topic/case discussed	Signatures of the supervisor

Morbidity/Mortality Meetings

Date	Reg. # of the patient discussed	Brief description	Comments/suggestions	Signatures of the supervisor
	Date			

Hands on Training/Workshops

Sr#	Date	Title	Venue	Facilitator	Signatures of the supervisor

Publications

Sno.	Name of publication	Type of publication Original article/editorial/case report etc	Name of journal	Date of publication	Page no.	Signatures of the supervisor

Major Research Project during MD Training/Any Other Major Research Project

Sno.	Research topic	Place of research	Name and designation of supervisor other than md	Brief details	Signatures of the supervisor
			supervisor under whom		Super visor
			research was conducted		

Written Assessment Record

Sno	Topic of written test/examination	Type of the test MCQS or SEQS or both	Total marks	Marks obtained	Signatures of the supervisor

Clinical Assessment Record

Sr.#	Topic of clinical test/ examination	Type of the test & venue OSPE, Minicex, chart stimulated recall, DOPS, simulated patient, skill lab e.t.c	Total marks	Marks obtained	Signatures of the supervisor

Evaluation Records

(Photocopy of consolidated evaluation record at the end of each block should be pasted here)