

**Rawalpindi Medical University**

**Clinical Clerkship Training Program**

**Final Year MBBS**

**PEDIATRICS MODULE**

**BLOCK XVI**

**2025**

Student Name:……………………………………………………………………………………..

Roll No…………………………………………..Batch:………………………………..…………

University Registration No………………………….. PMDC No…………………………

Address:……………………………………………………………………………………………….

Contact:………………………………..Email:…………………………………………………….



**Aims and Objectives**

**Aims:**

1. To provide a structured and comprehensive record of clinical and procedural experiences during undergraduate training in Medicine and Allied specialties.
2. To ensure systematic documentation of the learning process and competencies achieved in alignment with curriculum and training requirements.
3. To serve as a reflective tool for self-assessment, enabling students to identify strengths and areas for improvement in clinical skills and knowledge.
4. To facilitate periodic evaluation by supervisors, fostering constructive feedback and personalized guidance.
5. To promote integration of evidence-based medicine and critical thinking into clinical practice.

**Objectives:**

1. **History Taking and Physical Examination:** a)Develop proficiency in taking detailed and accurate patient histories and conducting thorough physical examinations with appropriate consent and respect for patient dignity, and 2) Understand the relevance of clinical findings in diagnosis and management.
2. **Skill Development:** a) Acquire competency in core medical procedures such as intravenous cannulation, arterial blood gas sampling, lumbar puncture, blood culture collection, and ECG interpretation, and b) Gain exposure to allied medical procedures such as thoracentesis, paracentesis, and central venous catheterization under supervision.
3. **Patient Management:** a) Document detailed history, clinical notes, diagnostic plans, progress notes, and discharge summaries with clarity and precision, b) Develop a structured approach to patient care in both outpatient and inpatient settings, including management of acute and chronic medical conditions, and c) Enhance understanding of multidisciplinary care through collaboration with allied healthcare teams.
4. **Compliance with Training Program:** a) Ensure alignment with the requirements set by the training program and regulatory bodies for successful certification, b) Document clinical exposure and competencies systematically to fulfill assessment and certification criteria.
5. **Assessment and Evaluation:** a) Maintain a transparent, verifiable record of clinical and procedural exposure for supervisors to assess progress and provide structured feedback, and b) Facilitate formative assessments during periodic evaluations to address gaps and enhance learning.
6. **Research and Academic Growth:** a) Promote the application of evidence-based medicine in diagnostic and therapeutic decision-making, and b) Encourage participation in case discussions, journal clubs, and audits to develop critical appraisal skills and contribute to academic learning.
7. **Professional Development:** a) Instill a patient-centered approach to care, emphasizing empathy, communication skills, and ethical medical practice, and b) Foster accountability and responsibility in clinical decision-making, preparing for future roles as competent healthcare professionals.

**SOP’s for filling the logbook**

1. All students should wear White Coat.
2. All students should wear their ID badges during the clinical rotation
3. Please follow RMU attendance policy.
4. Students are required to submit leave application in principal office in case of illness or family emergencies
5. Students will not be permitted to makeup time missed without a leave application
6. Students time schedule for clinical rotation will be set in the time table
7. All students are required to attend the wards in the evening according to their unit schedule
8. The final year clinical rotation will be clinical clerkship and students will stay in the ward according to the unit schedule.
9. Student will have call days according to the unit schedule.
10. Student must write histories of all the patients on their allotted beds.
11. Students are expected at all times to maintain a professional and therapeutic relationship with patients.
12. Ward test at the end of clinical rotation is mandatory.
13. Your internal assessment is based on periodic assessment, ward test, and Mini CXA etc per RMU policy.
14. Please keep a photocopy of this card with you so it can be replaced if lost.

MEDICINE
 **Clinical Clerkship Training Program**

**PAEDS MODULE**

**Four Week**

**Final Year MBBS**

**Unit \_\_\_\_\_\_\_\_\_\_\_\_**

**From \_\_\_\_\_ To \_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Date | Topic | Teacher Name | Sign |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |

2 Morning Reports/Case Presentations, 2 Mini CEX, 5 Case Write Ups on Workbook, Evenings are mandatory. EPAs are to be mandatorily completed

MEDICINE
 **Clinical Clerkship Training Program**

**PAEDS MODULE**

**Four Week**

**Final Year MBBS**

**Unit \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**From \_\_\_\_\_ To \_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Date | Topic | Teacher Name | Sign |
| 11 |  |  |  |  |
| 12 |  |  |  |  |
| 13 |  |  |  |  |
| 14 |  |  |  |  |
| 15 |  |  |  |  |
| 16 |  |  |  |  |
| 17 |  |  |  |  |
| 18 |  |  |  |  |
| 19 |  |  |  |  |
| 20 |  |  |  |  |

2 Morning Reports/Case Presentations, 2 Mini CEX, 5 Case Write Ups on Workbook, Evenings are mandatory. EPAs are to be mandatorily completed

MEDICINE
 **Clinical Clerkship Training Program**

**PAEDS MODULE**

**Four Week**

**Final Year MBBS**

**Unit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**From \_\_\_\_\_ To \_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Date | Topic | Teacher Name | Sign |
| 21 |  |  |  |  |
| 22 |  |  |  |  |
| 23 |  |  |  |  |
| 24 |  |  |  |  |
| 25 |  |  |  |  |
| 26 |  |  |  |  |
| 27 |  |  |  |  |
| 28 |  |  |  |  |
| 29 |  |  |  |  |
| 30 |  |  |  |  |

2 Morning Reports/Case Presentations, 2 Mini CEX, 5 Case Write Ups on Workbook, Evenings are mandatory. EPAs are to be mandatorily completed

MEDICINE
 **Clinical Clerkship Training Program**

**PAEDS MODULE**

**Four Week**

**Final Year MBBS**

**Unit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**From \_\_\_\_\_ To \_\_\_\_\_\_**

**Mini Clinical Skills Assessment (Mini CXA) Record**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Case** | **History**  **(2)** | **Physical Examination (3)** | **Differential Diagnosis**  **(2)** | **Management (3)** | **Total**  **(10)** | **Sign** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Each student will be assessed on two cases.**

**Morning Report**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Case** | **History**  **(2)** | **Physical Examination (3)** | **Differential Diagnosis**  **(2)** | **Management (3)** | **Total**  **(10)** | **Sign** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**Each student will be assessed on two cases.**

**Interpretation of Investigations**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Investigation** | **Case** | **Assessment Marks 5** | **Sign** |
|  | Blood CP |  |  |  |
|  | LFTs/RFTs/Serum Electrolytes Bilirubin Blood Chemistry |  |  |  |
|  | CSF analysis |  |  |  |
|  | C-XR |  |  |  |
|  | CT Scan |  |  |  |

**Procedure Observed / Assisted**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** | **Procedure** | **Case** | **Assessment Marks 5** | **Sign** |
|  | IV Cannulation |  |  |  |
|  | Lumbar Puncture |  |  |  |
|  | Nebulization |  |  |  |
|  | Ascitic/Pleural tap |  |  |  |
|  | Lumbar Puncture |  |  |  |

No. of Histories Written \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Marks \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ward Test Total \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Marks Obtained\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Percentage\_\_\_\_\_\_\_

Remarks\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SR/AP ncharge\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (Head of Unit) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CPC**

**Pediatric Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

MEDICINE
 **CPC Record**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Unit** | **Topic** | **Sign** | **Date** | **Unit** | **Topic** | **Sign** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Total CPC \_\_\_\_\_\_\_\_\_\_\_\_ CPC Attended \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Percentage % \_\_\_\_\_\_\_\_\_\_\_\_\_

Inchrage CPC \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, DME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Procedural Skills

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Should Be Able to Perform (EPA level 2,3) under observation during pediatric rotation** | | | | | |
| ***Date*** | | ***Give Brief Details of The Case- number of cases in bracket*** | ***Signs*** | | |
| Pediatric resuscitation / NRP/BLS (3) | | | | | |
|  | |  |  | | |
|  | |  |  | | |
|  | |  |  | | |
| Inject I/V, I/M, S/C, intradermal injections (5 each) | | | | | |
|  | |  |  | | |
|  | |  |  | | |
|  | |  |  | | |
|  | |  |  | | |
|  | |  |  | | |
|  | |  |  | | |
| Assist Blood transfusion/ Exchange transfusion (2) | | |  | | |
|  | |  |  | | |
|  | |  |  | | |
| Oxygen therapy (02) | | | | | |
|  | |  |  | | |
|  | |  |  | | |
| Nebulization (05) | | | | | |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  |  | | |  | |
| Educate the patient regarding correct inhaler technique with spaser device (2) | | | | | |
|  |  | | |  | |
|  |  | | |  | |
| Pleural tap / Ascitic Tap (2) | | | | | |
|  |  | | |  | |
|  |  | | |  | |
| Urinary catheterization (2) | | | | | |
|  |  | | |  | |
|  |  | | |  | |

|  |  |  |
| --- | --- | --- |
| **Procedures to be Observed/Assisted (EPA level 1,2)** | | |
| ***Date*** | ***Give Brief Details of The Case*** | ***Signs*** |
| Passing the N/G Tube, feeding, suction, and stomach wash (3) | | |
|  |  |  |
|  |  |  |
|  |  |  |
| Endotracheal tube placement (1) | | |
|  |  |  |
| Endotracheal suction/maintenance of airway/nursing on side etc. (2) | | |
|  |  |  |
|  |  |  |
| Lumbar puncture (2) | | |
|  |  |  |
|  |  |  |
| Oxygen therapy (02) | | |
|  |  |  |
|  |  |  |

**Entrustable Professional Activity (EPA)**

|  |  |
| --- | --- |
| **EPA** | **Final Year (Diagnosis & Management Plan)** |
| Obtain a history and perform a physical examination adapted to the patient’s clinical situation | Refine diagnostic skills with a focus on tailoring history and examination to complex cases. Integrate findings into clinical decision-making. |
| Prioritize a differential diagnosis following a clinical encounter | Formulate a comprehensive differential diagnosis with justification based on clinical evidence. |
| Recommend and justify patient management plans | Develop evidence-based and patient-specific management plans and justify decisions. |
| Perform procedural skills under supervision | Independently perform routine procedures with confidence, ensuring patient safety. |
| Provide handovers to transition patient care responsibility | Conduct structured and concise handovers, ensuring care continuity. |
| Educate patients and families about diagnosis and management plans | Provide clear, comprehensive explanations of diagnoses and management plans, ensuring patient understanding and adherence. |

# 

# 

# 

# CLINICAL COMPETENCY PA FOR FINAL YEAR MBBS

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EPA** | **Task** | **Learning Objectives** | **EPA Level**  **/Supervisi on level** | **Level Achieved** |
| History Taking | Students should be able to obtain a comprehensive  History from parents | Students should be able to demonstrate art of history taking including all  components of history from parents including  birth, vaccination  ,feeding and development history | 3 |  |
| General Physical examination | perform a detailed general physical examination. | Students should be able to take vitals accurately and identify common general  physical findings. | 3 |  |
| GIT examination | perform complete GI examination | Students should be able to demonstrate accurate method of abdominal examination including inspection, palpation and auscultation describe  abnormal findings. | 3 |  |
| Respiratory System examination | perform complete respiratory examination | students should be able to demonstrate accurate method of respiratory system examination including inspection, palpation, percussion auscultation and  describe abnormal findings. | 3 |  |
| Cardiovascular System Examination | Perform complete CVS examination | students should be able to demonstrate accurate method of cardiovascular examination including inspection, palpation auscultation and pick abnormal findings. | 3 |  |
| Central Nervous System Examination | perform complete CNS examination | Students should be able to demonstrate accurate method of CNS including higher mental functions, cranial nerves, sensory, motor and cerebellar system  examination. | 3 |  |
| Diagnosis | Make differential diagnosis and final diagnosis | Student should be able to Make differential diagnosis and final diagnosis after taking detailed history and doing detailed examination | 3 |  |
| Summary making | Make a summary of relevant history and erxamination | Student should be able make a brief summary after taking detailed history and doing detailed examination | 3 |  |
| Management Plan | Make management plan  And Do interpretation of investigation | Student should be able make detailed management plan  And can do interpretation of investigation done | 3 |  |
| Educate basic health information to patient and parents | Practice explaining basic health information to patients and parents | Students should be able to communicate effectively with patients and parents provide health information and establish  rapport with them. | 2 |  |
| Basic Life Support | Perform basic life support | Students should be able to perform all  steps of resuscitation as per guidelines | 2 |  |
| Able to write progress notes in SOAP format. | Write progress in SOAP format | Students should be able to write morning progress in the form of Subjective, objective, assessment and plan | 3 |  |
| **EPA level 1 = Observation EPA Level 2 = Direct supervision**  **EPA Level 3= Supervision available EPA Level 4= Performs independently** | | | |  |

# PROCEDURAL SKILLS EPA FOR FINAL YEAR YEAR

**FINAL YEAR**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EPA** | **Task** | **Learning Objectives** | **EPA Level/ Supervision**  **level** | **Level Achieved** |
| I/V, I/M, S/C,  intradermal injections | Observe and perform IV/IM/SC/Intradermal injection after informed consent | Should be able to inject IV/IM/SC/intradermal under direct supervision after obtaining informed  consent. | 2 |  |
| I/V lines | Observe and perform the task of maintaining IV line | Should be able to maintain and IV line under  supervision after taking informed consent | 2 |  |
| Blood transfusion | Observe blood transfusion | Should observe the protocol of blood transfusion and should know the indication sand  contraindications. | 1 |  |
| Oxygen therapy | Observe and attach oxygen to the patient | Should have the knowledge of oxygen delivery devices, their indications and should be able to attach oxygen to patients as per  requirement. | 2 |  |
| Nebulization | Observe how to setup a nebulizer | Counsel the patient regarding nebulization and demonstrate correct nebulization technique. | 1 |  |
| inhaler technique  with spacer device | Observe correct inhaler technique | Should be able to educate and demonstrate correct use of inhaler | 2 |  |
| Pediatric resuscitation / NRP/BLS | Observe how to resusitate  Pediatric patient | Should Observe how to resusitate  Pediatric patient | 1 |  |
| Lumbar puncture | Observe the procedure under aseptic technique | Should have knowledge of indications and must Observe the procedure under aseptic technique | 1 |  |
| Passing the N/G Tube, feeding, suction, and stomach wash | Observe Nasogastric intubation procedure | Should be able to describe the indications and contraindications of NG  tube and its uses. | 1 |  |
| Pass oropharyngeal airway and its maintenance | Observe and assist with oropharyngeal airway placement. | Should be able to describe the indications and contraindications of Oropharyngeal airway and demonstrate how to pass an oropharyngeal airway | 2 |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Endotracheal tube placement | Observe endotracheal tube placement. | Should be able to describe the types, indications and contraindications of ETT. | 1 |  |
| Endotracheal suction/maintenance of airway/nursing on side etc. | Observe and perform endotracheal suctioning/airway maintenance under  supervision. | Should be able to perform endotracheal suctioning/air way maintenance under  supervision. | 1 |  |
| Aspiration of fluids (Pleural, Peritoneal) | Observe aspiration of fluids (Pleural, Peritoneal) | Should know the indications and contraindications of pleural/peritoneal  aspiration | 1 |  |

# 

# 

# MINI CLINICAL EXAMINATION/EVALUATION

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Skill** | **Knowledge (5)** | **Skill assessment (5)** | **Behavior**  **and attitude (2)** | **Total (10)** | **Sign** |
|  | History taking and  GPE |  |  |  |  |  |
|  | Respiratory system exam |  |  |  |  |  |
|  | Gastrointestinal system  examination |  |  |  |  |  |
|  | Cardiovascular system  examination |  |  |  |  |  |
|  | Central nervous system examination |  |  |  |  |  |
|  | Diagnosis making |  |  |  |  |  |
|  | Summary making |  |  |  |  |  |
|  | Management Plan |  |  |  |  |  |

**EPA Evaluation Performa**

**Evaluation Criteria**

|  |  |  |
| --- | --- | --- |
| **EPA** | **Evaluation Components** | **Result** |
| **Obtain a history and perform a physical examination** | 1. Completeness of history-taking (covers all relevant points). | ☐ Pass / ☐ Fail |
|  | 2. Accuracy of history and ability to identify key details. | ☐ Pass / ☐ Fail |
|  | 3. Systematic approach to physical examination. | ☐ Pass / ☐ Fail |
|  | 4. Rapport with the patient (communication and empathy). | ☐ Pass / ☐ Fail |
| **Prioritize a differential diagnosis** | 5. Ability to integrate history and physical findings. | ☐ Pass / ☐ Fail |
|  | 6. Logical formulation of differential diagnoses. | ☐ Pass / ☐ Fail |
| **Recommend and justify management plans** | 7. Ability to suggest basic management options. | ☐ Pass / ☐ Fail |
|  | 8. Justification of chosen management plans. | ☐ Pass / ☐ Fail |
| **Perform procedural skills** | 9. Skill execution (technical accuracy and patient safety). | ☐ Pass / ☐ Fail |
|  | 10. Adherence to proper procedural protocols and aseptic techniques. | ☐ Pass / ☐ Fail |
| **Educate patients and families** | 13. Communication clarity (simple language, understandable explanations). | ☐ Pass / ☐ Fail |
|  | 14. Ability to answer patient/family questions effectively. | ☐ Pass / ☐ Fail |

**Grading Scale**

* **Pass**: Meets expectations for the skill in the respective academic year.
* **Fail**: Does not meet expectations and requires further training.

**Evaluator Feedback**

* **Strengths**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Areas for Improvement**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **Additional Comments**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Evaluator Information**

|  |  |
| --- | --- |
| **Name** |  |
| **Designation** |  |
| **Signature** |  |
| **Date** |  |

**Summary of Clinical Assessment**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Lecture** | **Ward** | **CPC** | **Internal Assessment** | | | | | **Sign** |
| **Attendance** | **Attendance** | **Attendance** | **Total Marks** | **Marks**  **Obtained** | | **Percentage** | |
|  |  |  |  | |  | |  |  |

**Remarks**

Head of Unit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_