Student	

Name:	
Roll No	Batch:
University Registration No	
Address:	
Contact:	Fmail·





Aims and Objectives

Aims and Objectives of the Orthopaedic Surgery Logbook

Aims:

- 1. To provide a structured record of clinical and surgical experiences during undergraduate training.
- 2. To ensure documentation of the learning process and competencies achieved in alignment with the curriculum requirements.
- 3. To serve as a tool for self-assessment, reflection, and skill improvement.
- 4. To facilitate periodic evaluation by supervisors for constructive feedback and guidance.

Objectives:

Fourth Year MBBS Orthopaedics - Core Competencies and Training Objectives

1. History Taking and Examination:

 Develop proficiency in eliciting a focused musculoskeletal history from patients, including pain assessment, trauma history, and functional limitations.

2. Skill Development:

- o Gain hands-on experience in essential orthopaedic procedures, including:
 - Application of splints and casts (Plaster of Paris backslab, full cast application).
 - Joint aspiration and intra-articular injections.
 - Fracture reduction techniques (closed reduction under supervision).
 - Basic wound management and suturing.

3. Patient Management:

- Maintain accurate and structured clinical documentation, including:
 - Consent taking for orthopaedic procedures and surgeries.
 - Pre-operative and post-operative care procols.
- Develop an understanding of non-surgical management of musculoskeletal conditions, including rehabilitation and physiotherapy principles.

4. Assessment and Evaluation:

- Maintain a structured logbook of clinical exposure, surgical procedures assisted/performed, and ward responsibilities.
- o Receive structured feedback from supervisors on surgical competence and decision-making.

5. Research and Academic Growth:

o Integrate evidence-based orthopaedic principles into clinical decision-making.



SOP's for filling the logbook

- 1. All students should wear white coat in the wards
- 2. All students should wear their ID badges during the clinical rotation
- 3. 90 % attendance is mandatory for every student
- 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. The Fourth year clinical rotation will be clinical clerkship and students will stay in the ward.
- 8. Student will have call days according to the unit schedule.
- 9. Student must write histories of all the patients on their allotted beds.
- 10. Students are expected at all times to maintain a professional and therapeutic relationship with patients.
- 11. During a clinical rotation in 5th year student must write 5 histories and clinical examination and should have completed all Mini Clinical Skill Assessment (Mini CXA):
- 12. Ward test at the end of clinical rotation is mandatory.
- 13. Your internal assessment is based on ward test, Mini CXA, Attendance and Behavior.
- 14. Please keep a photocopy of this card with you so it can be replaced if lost.

TIME DISTRIBUTION:

Total Hours	40
LGIS(RMU)	02
Clinical Rotation (02 weeks) Mon – Thu (10:00am to 02:00pm) Friday (10:00 to 12:00pm)	32
Emergency Rotation Every Thursday (5:00pm to 8:00pm)	06



Rawalpindi Medical University Entrustable Professional Activities (EPAs) to be observed in Clinical Clerkship Training Program

Sr.No	Topic	Fourth Year				
		P1	P2	Р3	P4	
1	History Taking			✓		
2	Early & late Complications of Fractures		√			
3	Casting Techniques		✓			
4	Knee Examination		✓			
5	Elbow Examination		✓			
6	Tractions		✓			
7	Hip Examination		✓			
8	Radial Nerve Examination		✓			
9	Ulnar Nerve Examination		✓			
10	Median Nerve Examination		✓			
11	Arthroplasty Implants		✓			
12	Orthopaedic Trauma Implants		✓			
13	Upper Limb Fracture Identification		✓			
14	Lower Limb Fracture Identification		✓			
15	Fracture Non-Unions		✓			

P1: Observation

P2: Under Direct Supervision
P3: Under Indirect Supervision
P4: Perform independently



Checklist for History Taking

- Demographic details
- Chief complaints
- History of Present illness
- Past medical and surgical History Family History
- Personal History
- Gynae Obst. History in case of female patient
- Drug History
- Allergies History

FIRST WEEK OF CLINICAL ROTATION

MONDAY

FRACTURE TYPE:

By the end of this Ward session (small group discussions and ward round), Fourth year MBBS student should be able to:

- a) Identify fracture types and their general classification
- b) Understand early as well as late complications of open and close fracture.

TUESDAY

ARTHROPLASTY:

By the end of this Ward session (small group discussions and ward round), Fourth year MBBS student should be able to:

- a) Recognize the Indications of Arthroplasty
- b) Understand the Types of Arthroplasty
- c) Identify the Complications of Arthroplasty

WEDNESDAY

EPIPHYSEAL INJURIES/ UPPER LIMB TRAUMA:

By the end of this Ward (small group discussions and ward round) session, Fourth year MBBS student should be able to:

- a) Identify classify epiphyseal injuries
- b) Interpret upper limb fracture & their management
- c) understand shoulder and elbow dislocations & their management.



THURSDAY

CTEV/DDH:

By the end of this Ward session (small group discussions and ward round), Fourth year MBBS student should be able to:

- a) Recognized Pathophysiology DDH/CTEV
- b) interpret their Radiological finding
- c) Understand conservative management
- d) Recall steps of PMR and DDH surgery

SECOND WEEK OF CLINICAL ROTATION

MONDAY

By the end of this Ward session (small group discussions and ward round), Fourth year MBBS student should be able to

Basic Orthopedics & Principles

Day/Time: Monday, 10:00 AM - 02:00 PM

- Understand the foundational concepts of orthopedics, including anatomy, biomechanics, and physiology of the musculoskeletal system.
- Identify common orthopedic conditions and their clinical presentations.
- Learn the principles of fracture management, including reduction, immobilization, and rehabilitation.
- Gain an introduction to diagnostic tools such as X-rays and MRIs in orthopedic practice.

TUESDAY

By the end of this Ward (small group discussions and ward round) session, Fourth year MBBS student should be able to:

Metabolic Disorders: Osteoporosis, Rickets, & Osteomalacia

Day/Time: Tuesday, 10:00 AM - 02:00 PM

- Recognize the pathophysiology, risk factors, and clinical manifestations of osteoporosis, rickets, and osteomalacia.
- Understand the diagnostic criteria, including biochemical markers and radiological findings.
- Learn the management strategies, including pharmacological and non-pharmacological treatments.
- Discuss preventive measures and lifestyle modifications for metabolic bone disorders.



WEDNESDAY

By the end of this Ward (small group discussions and ward round) session, Fourth year MBBS student should be able to:

Osteomyelitis & Septic Arthritis

Day/Time: Wednesday, 10:00 AM - 02:00 PM

- Describe the etiology, pathogenesis, and classification of osteomyelitis and septic arthritis.
- Identify clinical signs, symptoms, and diagnostic approaches, including imaging and laboratory investigations.
- Learn about the medical and surgical management of these infections.
- Understand the complications and long-term outcomes of untreated infections.

THURSDAY		
WARD TEST		



Time Table of Fourth Year MBBS Clinical Rotation

01 Week

S.no.	Topics	Day	Time	Name of Faculty	Place
1.	Fracture Types Classifications Complications Open Fractures	Monday	10:00am to 02:00pm		Holy Family Hospital
2.	Arthroplasty	Tuesday	10:00am to 02:00pm		Holy Family Hospital
3.	Epiphyseal Injuries Upper Limb Trauma	Wednesday	10:00am to 02:00pm		Holy Family Hospital
4.	CTEV +DDH	Thursday	10:00am to 02:00pm		Holy Family Hospital

02 week

S.no.	Topics	Day	Time	Name of Faculty	Place
1.	Basic Orthopedics & Principles	Monday	10:00am to 02:00pm		Holy Family Hospital
2.	Metabolic Disorders Osteoposis Rickets & Osteomalcia	Tuesday	10:00am to 02:00pm		Holy Family Hospital
3.	Osteomyelitis Septic Arthritis	Wednesday	10:00am to 02:00pm		Holy Family Hospital
4.	Infections /Tumors	Thursday	10:00am to 02:00pm		Holy Family Hospital



Mini Clinical Evaluation Exercise (Mini-CEX)

Date	Торіс	History 2 marks	General Physical examination 3 marks	Relevant Clinical Examination 3 marks	Diagnosis 2 marks	Total 10 marks	Sign
	Osteoarthritis						
	Non Union						
	Developmental dysplasia of the hip (DDH)						
	Clubfoot (Congenital Talipes Equinovarus)						



Department of Orthopaedic Operative Surgery Log Book Fourth Year MBBS

No.	Date	Operative Procedure	Elective/Emergency	Surgeon	Department	Sign



Direct Observations of Procedural Skills (DOPS)

Minor Surgical Procedures

No.	Date	Skill	Number of Attempts	Competence Obtained	Signs
		Intraarticular Injection (Shoulder Joint and Knee Joints)			
		Colles Casts			
		Tractions			

Total days Percentage History taking scoring					
No. of histories written	Marks per history	Total marks			
	5 marks				
	Ward assessment				
Total marks	Marks obtained	Percentage			
	Signature of HOD				

Level of Competence , O: Observed ; U: Under supervision



Head Of orthopaedics

Department

Rawalpindi Medical University Training Programme Department of Orthopaedic Surgery 4th YEAR MBBS LOG BOOK

Name of stud	lent:		Roll No	Batch.	
Histories marks	Percentage	Ward attendance	Percentage	Ward test	Percentage
		•	hics/ Social Wo		
		Remarks	/ comments:		
		Sign	atures		

DME