

Log Book

For

**DEPARTMENT OF OTOLATYNGOLOGY &
HEAD- NECK SURGERY**



**Bangabandhu Sheikh Mujib Medical University
Shahbagh, Dhaka-1000**

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PARTICULARS

Name of Trainee :	
Academic Period :	
Name of Course :	
BMDC Registration No :	

Certificate

This is to certify that to the best of my knowledge all the entries in the log book of

Dr.

.....
(Name of the Trainee)

Registration No.:.....are correct

Date:.....

INSTRUCTIONS TO TRAINEE

1. This log book has to be maintained by all trainees preparing for DLO Students.
2. Trainees are advised to make the required entries on the same day of the event. All entries must be signed by the immediate supervisor on the day of the event.
3. The trainee is required to maintain the logbook throughout the training period.
4. The log book will form a part of the application for appearing in DLO examination.
5. If necessary extra sheets can be inserted for recording

GUIDELINES FOR SUPERVISORS

1. The log book is a day-to-day record of the clinical and academic work done by the trainee.
2. Its purpose is to assess the overall training of the resident and to determine deficiencies if any, so that they may be corrected.
3. Supervisors should ascertain that the entries in the logbook are made soon after the procedure/seminar/case presentation is completed and then certify it by signing the appropriate column.
4. The head of the unit shall authenticate the entries by signing the certificate. It is suggested that the heads of the unit check the log book at least once a month. So that they can spot any deficiencies or otherwise in the trainee (e.g. the trainee has not rotated through a sub-specialty which he/she should have).

OBJECTIVES

At the end of the training, a trainee should be able to:

1. Initially assess the patients seeking advice for symptoms related to the ear, nose and throat by:

- a. Obtaining pertinent history.
- b. Performing physical examination correctly.
- c. Formulating a working diagnosis.
- d. Deciding whether the patient requires
 - Ambulatory care or hospitalization
 - Referral to other health professionals
2. Manage patients requiring treatment by ENT specialist:
 - a. Plan an enquiry strategy i.e. order appropriate investigations and interpret the results.
 - b. When required perform surgical procedures independently and competently.
 - c. Deal effectively and promptly with any complications, which occur during the course of disease.
 - d. When required arrange for rehabilitation of patients.
 - e. Maintain up to date records of patients
3. Undertake research and publish findings.
4. Acquire new information, assess its utility and make appropriate applications.
5. Recognize the role of team work and function as an effective member/leader of the team.
6. Advise the community on matters related to promoting health and preventing diseases.
7. Train paraprofessionals and other junior members of the team.

Training Programme:

The objectives of the trainee may be achieved through different modes, some of which are listed below:

1. Graded responsibility in patient care e.g.
 - a. Ward duties
 - b. Operation theatre duties
 - c. Emergency duties
 - d. OPD duties
2. Morbidity/Mortality review meetings
3. Journal club
4. Seminars, conferences and lectures
5. Research projects.

The clinical skills, which a specialist must have, are varied and complex. Complete list will be very long and is not considered necessary for organizing a training programme. Some examples, which are a sub-sample of the whole, follow. These are to be taken as guidelines rather than definitive requirements.

Key to competency levels in clinical skills:

	Score
i. Performed independently	5
ii. Performed under indirect supervision (which means that if needed by the trainee the supervisor must be readily available)	4
iii. Performed under direct supervision.	3
iv. Assistant status	2
v. Observer status	1

The training programme comprises the following activities:

A. Academic activities:

Level of competence				
	6 Month	12 Month	18 Month	24 Month
1. Teaching ward rounds	1	2	3	3
2. Surgical outpatient clinics	1	2	3	4
3. Audio-vestibular laboratory	1	1	1	2
4. Clinico-pathological conferences	1	1	2	2
5. Symposia	1	1	1	2
6. Journal club meeting	1	1	2	2
7. Workshops	1	2	2	3
8. Papers presented and published	1	1	1	2

KEY:

	Score
i. Performed independently	5
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iii. Performed under direct supervision.	
iv. Assistant status	
v. Observer status.	

Signature of the Head of the Unit

B. PATIENT MANAGEMENT

Level of competence				
	6 Month	12 Month	18 Month	24 Month
1. Order appropriate investigations	3	4	4	5
2. Preoperative patient preparation	2	2	3	4
3. Post of operative management	1	1	3	4
4. Interpret the results e.g. audiogram and calorie test	1	1	2	3

KEY:

	Score
vi. Performed independently	5
vii. Performed under indirect supervision (which means that if needed by the trainee the supervisor must be readily available).	4
viii. Performed under direct supervision.	3
ix. Assistant status	2
x. Observer status.	1

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C. PROCEDURES IN WARD

Level of competence				
	6 Month	12 Month	18 Month	24 Month
1. Nasogastric intubation	2	3	4	4
2. Tracheostomy	1	2	3	4
3. Postoperative dressing	2	3	4	5
4. Anterior nasal packing	2	3	4	5
5. Posterior nasal packing	1	1	2	2

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iii. Performed under direct supervision.	3
iv. Assistant status	2
v. Observer status.	1

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D. SURGICAL PROCEDURES

In minor O.T. Level of competence				
	6 Month	12 Month	18 Month	24 Month
1. Nasal cautery	1	1	3	3
2. Removal foreign body from Nose, Throat and Ear	1	3	3	4
3. Antral proof puncture	1	3	4	5
4. Drainage of abscesses and boils	1	3	4	5
5. Surgical dressings	1	3	4	5
6. Syringing of ear	1	3	3	4
7. Cervical lymph node biopsy	1	3	4	4

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iv. Assistant status	
v. Observer status.	

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SURGICAL PROCEDURES IN MAJOR O.T

Level of competence				
	6 Month	12 Month	18 Month	24 Month
1. Endoscopic removal of foreign body	1	1	1	1
2. Correction of nasal fractures	1	1	3	3
3. SMR	1	1	3	3
4. Nasal polypectomy	1	1	3	3
5. Intranasal antrostomy	1	1	3	3
6. Caldwell-sinus antrostomy	1	1	1	1
7. Direct laryngoscopy and biopsy	1	1	1	1
8. Tracheostomy	1	1	3	4
9. Simple mastoidectomy	1	1	1	3
10. Adenoidectomy	1	1	3	3
11. Tonsillectomy	1	3	3	3
12. Ethmoidectomy	1	1	1	1
13. Mastoidectomy MR/Rad	1	1	1	3
14. Myringoplasty	1	3	3	4
15. EUM and myringotomy	1	3	4	4
16. Bronchoscopy	1			
17. Oesophagoscopy	1	1	1	1
18. Total Laryngectomy	1	1	1	1
19. Partial Laryngectomy	1	1	1	1
20. Excising cyst/sinus	1	3	4	5
21. Repair of neck injury	1	3	3	4
22. Maxillectomy	1	1	1	1
23. Mandibulectomy	1	1	1	1
24. Partial Thyroidectomy	1	1	3	3
25. Total Thyroidectomy	1	1	1	3
26. Regional of axial flap	1	1	1	1
27. Parotid Surgery	1	1	1	3
28. Submandibular gland excision	1	1	3	3
29. Neck dissection	1	1	1	1
30. Other head and neck procedures	3	3	3	4
31. Other otological procedures	3	3	4	4

E. ADMINISTRATIVE TRAINING

1. Administrative responsibilities	sometime during the 2 nd year	3
2. Organization of seminars, symposia etc	25 th month onwards	3
3. Writing protocols of research projects	30 th month onwards	3

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TRAINEE HAS TO ATTAIN FOLLOWING COMPETENCE LEVEL

OTOLARYNGOLOGY YEAR-I

1. Operative score-200
(Out of which at least 20 activities as observer (1), Assistant (11) & performer (III, IV, V level) each.
2. Academic activities Total 5 activities.

OTOLARYNGOLOGY YEAR-II

1. Operative score-300
2. (Out of which at least 20 activities each from level I-II, III, IV)
3. Academic activities Total 10 activities.

D. OTHER UNITS WHERE TRAINING HAS BEEN DONE

Sl. No	Institution	Discipline	Duration of Training	Name of Head of Unit	Signature of Head of Unit

E. WEEKLY TIME TABLE : FULL TIME RESIDENTIAL

Week Day	A.M.	P.M.
Saturday		
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

F. Clinical meetings devoted to	No. Per Week
1. Journal club	1
2. Morbidity & mortality review	1
3. Clinical case presentation and/or	1
4. Discussion of topics of surgical interest	

Should be held each week and the time spent on them should not be less than 2 hours per week

G. Experience of teaching others (tick appropriate)	
Junior student	
House surgeons	
Under graduate	
Nurses	

F. Clinical meetings devoted to No. Per Week	
Casual	
Study	
Sick	
Maternity	

Out patient management

Date	Name of patient With age & sex	Diagnosis	Procedures performed	Performance of candidate

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In Patient Management (Routine Surgical Procedure)

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ACADEMIC ACTIVITIES:

Cases/papers presented at meetings & seminars

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OTHER ACTIVITIES:

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Signature of the Head of the Unit



Bangabandhu Sheikh Mujib Medical University
Shahbag, Dhaka

Diploma trainee's Block progress report

Name of the trainee : Session :
Name of the course : Reg. No:
Name of the institute :
Period of block :

Performance	Poor	Satisfactory	Good	Excellent
Written*				
Clinical- Practical*				
Oral*				
Attendance*				
Attitude				

* Poor: <50%, Satisfactory: \geq 50-60%, Good: >60-75%, Excellent : >75%

Note: "Poor" grade in more than two performance during a particular block means deficient training and also cause disqualification for appearing in the final examination unless training in particular block is complete.

Signature:

Head of the Department

(Seal)