

# LOG BOOK

MS OTOLARYNGOLOGY AND HEAD-NECK SURGERY

RESIDENCY PROGRAM

*Phase B*



DEPARTMENT OF OTOLARYNGOLOGY AND HEAD-NECK SURGERY

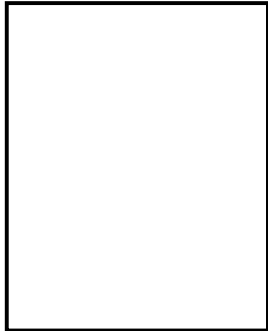
**BANGABANDHU SHEIKH MUJIB MEDICAL UNIVERSITY**

Shahbag, Dhaka-1000, Bangladesh.

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**PARTICULARS OF STUDENTS**



Name of the Student :.....

Father's Name :.....

Mother's Name :.....

Address of the Student :.....

Present :.....

.....

Permanent :.....

.....

Date of Birth :.....

Academic Qualification :.....

Reg. No. in BMDC :.....

Course :.....

Name	Designation	Discipline	Signature
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Session :.....

**FACULTY  
SURROGATE DEPARTMENT**


**INSTRUCTIONS TO STUDENT**

1. This log book has to be maintained by all students preparing for final part of MS Otolaryngology & Head Neck Surgery
2. Students 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 students are required to maintain the log book throughout the training period.
4. The log book will form a part of the application for appearing in MS Otolaryngology & Head Neck Surgery examination.
5. Students have to apply for their thesis topic within three months of joining the department.
6. Within one week of joining the department, the students will receive an orientation and introduction and they will be distributed to specific unit for a specific period and by rotation they will be placed in all the four units.

*MS OTOLARYNGOLOGY & HEAD-NECK SURGERY, RESIDENCY PROGRAM, PHASE-B*

**Guideline for Supervisors**  
**(The Unit Head will act as supervisor of the students)**

1. The log book is a day to day record of the clinical and academic work done by the students.
2. Its purpose is to assess the overall training of the students and determine deficiencies if any, so that they may be corrected.
3. Supervisors should ascertain that the entries in the log book are made soon after the procedure/seminar/case presentation is completed and then certify it by signing it in 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 can spot any deficiencies or otherwise in the students (e.g. the trainee has not rotated through a sub-specialty which he/she should have)
5. The respective unit heads will check the log book on the completion of the course and will make a recommendation for the student to appear in the examination.

**Objective**  
**Phase B**  
Duration Three Years

During the phase B, students will work as full time resident in the Otolaryngology & Head Neck surgery. After the completion of the phase they will be able to:

1. Initially assess the patients seeking for symptoms related to the
  - a. Obtaining problem oriented medical history (POMR)
  - b. Performing physical examination correctly.
  - c. Formulating a working diagnosis
  - d. Deciding whether the patient diagnosis
    - manage acute emergency if necessary
    - ambulatory care or hospitalization
    - referral to other specialty service
2. Manage patients requiring treatment by Otolaryngology & Head Neck specialist:
  - a. Plan an enquiry strategy i.e. order appropriate investigations and interpret the results.
  - b. When required perform surgical procedures under supervision 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 applications.
5. Recognize the role of team work and function as an effective member/leader of the team.
6. Train paraprofessionals and other junior members of the team.



To attain this ability they will be assigned to do the following responsibilities under supervision:

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, Journal club
3. Seminars, conferences and lectures
4. Research projects.
5. Publications (at least one in any journal)
6. Thesis

## Course Contents of Phase B

General ENT care:

Fluid and electrolyte Balance

Hypotensive anaesthesia/Local anaesthesia

Post operative care

ENT pharmacology

OTOLOGY:

Inflammatory condition of external ear:

Otitis externa, Dermatitis of ear, Keratosis obturans, Granular Myringitis, Furunculosis, Otomycosis, Herpetic otitis externa, Pseudocyst of the auricle, Injuries of the auricle, Haematoma auris, Perichondrial effusion, Infections of the auricle, Perichondritis, Chondro dermatitis nodularis chronic helecis, Relapsing polychodritis, Herpes zoster neuralgia, Ramsay Hunt Syndrome, Foreign bodies in ear, Impacted wax.

Inflammatory condition in middle ear:

Acute otitis media, Otitis media with effusion, Barotraumatic otitis media, Congenital cholestatoma, chronic suppurative otitis media, Healed otitis media, Eustacian tube dysfunction, Otagia.

## Course Contents of Phase B (Contd.)

Otological Surgery of middle ear

Tympanoplasty

Canal wall down mastoidectomy

Atticotomy

Modified radical mastoidectomy

Radical mastoidectomy

Canal wall up mastoidectomy

Cortical mastoidectomy

Ear trauma:

Traumatic perforation of the tympanic membrane

Blast injury

Radiation injury

Surgical trauma of chorda tympanic nerve and facial nerve

Fracture temporal bone

Whiplash

Labyrinthine trauma in tympanoplasty & stapes surgery' Traumatic disconnection of ossicular chain

## Course Contents of Phase B (Contd.)

Radiology and Imaging in Otology

Plain X-Ray of temporal bone.

Computerized tomography

MRI, Magnetic resonance angiogram/venogram, Angiography

### Year-2

1. Congenital condition of the auricle
2. Tumours in external ear, middle ear & inner ear:  
Exostosis & osteoma of external auditory meatus
3. Congenital meatal atresia and stenosis:  
Acquired meatal atresia and stenosis, Radio necrosis
4. Otologic surgery of middle ear  
Combine approach tympanoplasty  
  
Revision mastoidectomy  
  
Reconstruction of ossicular chain  
  
Disorder of facial nerve
5. Complications of AOM/COM
6. Otosclerosis
8. Labyrinthine fistula

## Course Contents of Phase B (Contd.)

9. Migraine
10. Sensorineural hearing loss
11. Sudden SNHL
12. Noise induced hearing loss, presbycusis, psychogenic deafness
13. BPPV, Vestibular neuronitis.
14. Vertigo and tinnitus.
15. Meniere's disease
16. Ototoxicity
17. Hearing Aids and Cochlear Implants

### Year-3

1. Biomaterials used in ossiculoplasty
2. Diseases of temporal bone
3. Autoimmune inner ear diseases
4. Temporal arteritis
5. Congenital middle ear abnormalities.
6. Sensorineural hearing loss-Bilateral SNHL, Unilateral SNHL
7. Nystagmas
8. Vestibular Schwannoma
9. Tumours of middle ear
10. Glomous tumours of ear
11. Plastic surgery in ear
12. Syndrome of hearing deafness

## Course Contents of Phase B (Contd.)

### AUDIOLOGY CURRICULUM

#### Year-1:

- Basic acoustics, physiology of hearing
- Principles of different audiological tests e.g., PTA, Impedance, SRT, OAE, ABR, ASSR.
- The physiology of equilibrium and its application to the dizzy patient.
- Audio-vestibular evaluation of otologic diseases.
- Audiometric tests for characterizing hearing loss.
- Assessment of hearing, testing hearing in children.
- Screening and surveillance of hearing impairment in preschool child.

#### Year-2:

- Hearing loss-classification, conductive hearing loss and management sensory neural hearing loss & management, psychogenic hearing loss
- Epidemiology of hearing impairment.
- Pharmacological treatment of hearing and balance disorder.
- Rehabilitation of hearing impaired.
- Rehabilitation & management of balance & vestibular disorder.

#### Year-3:

- Prevention of hearing & balance disorder.
- Social & legal aspect of hearing loss.

## Course Contents of Phase B (Contd.)

### RHINOLOGY CURRICULUM

#### Year-1

Imaging in rhinology: Imaging of nose & paranasal sinuses with detailed study of radiological anatomy.

Diseases/ disorders/ conditions:

Inflammatory diseases of Nose and Paranasal Sinuses:

Classification and differential diagnosis of rhinosinusitis.

Bacterial rhinosinusitis.

Specific chronic infection of nose.

Medical management of Chr. Rhinosinusitis.

Surgical management of Chr. Rhinosinusitis.

Complication of rhinosinusitis.

Diseases of nasal septum.

The nasal polyposis.

Nasal obstruction (Septal, turbinate, nasal valve)

Epistaxis.

Medical negligence in rhinology.

## Course Contents of Phase B (Contd.)

Procedures:

Nasal endoscopy and detailed endoscopic anatomy of nose, sinus & nasopharynx.

Measurement of nasal airway.

Removal of foreign body from nose.

Septal surgery.

Nasal packing with different types of materials.

Surgical management of enlarged turbinates.

EES (Endonasal Endoscopic Surgery) - Uncinectomy, middle meatal antrostomy and anterior ethmoidectomy, medial maxillectomy, reduction of concha bullosa.

Lavage of maxillary sinus.

### Year-2

Diseases/ disorders/ conditions:

Allergic rhinitis

Non-allergic perennial rhinitis.

Atrophic rhinitis.

Vasomotor rhinitis.



## Course Contents of Phase B (Contd.)

Occupational rhinitis.

hormonal rhinitis.

Fungal sinusitis.

Mucocoele of paranasal sinuses.

The frontal sinus and its pathology.

Abnormalities of smell.

Benign condition of nasopharynx.

Nasopharyngeal carcinoma.

Malignancy of nose and sinuses.

Complications of paranasal sinus surgeries.

### **Procedures:**

EES: Posterior ethmoidectomy, Sphenoidotomy, adenoidectomy, endoscopic DCR.

Traditional and endoscopic excision of nasopharyngeal angiofibroma

Image guidance in endonasal endoscopic surgery of nose, nasopharynx, sinuses and skull base.

Lateral rhinotomy.

Intranasal antrostomy.

Caldwell-Luc operation.

## Course Contents of Phase B (Contd.)

Repair of oroantral fistula.

Maxillectomy- partial, total, radical.

### Year-3

Diseases/ disorders/ conditions:

Nasal deformities

Fracture of facial skeleton

Granulomatous conditions of nose.

CSF rhinorrhoea, Grave's exophthalmia, Dacryocystitis.

Pituitary tumorus.

Obstructive sleep apnoea.

Cleft lip.

Cleft palate.

## Course Contents of Phase B (Contd.)

### Procedures:

Management of fracture of maxilla, mandible, zygomatic process and zygomatic bone and blowout fracture of orbit.

Rhinoplasty.

Ligation of the maxillary artery

Ligation of the ethmoid artery.

Osteoplastic flap in frontal sinus surgery.

Orbital and optic N Decompression (endoscopic)

Endoscopic repair of CSF leakage.

Endoscopic approach to frontal sinus.

Surgical management of snoring/ Obstructive sleepapnoea.

## Course Contents of Phase B (Contd.)

### Laryngology

(Oropharynx, hypopharynx, larynx, trachea & cervical oesophagus)

#### Content: (Year-1)

1. Surgical anatomy of Oropharynx, Hypopharynx, Larynx, Trachea, Cervical oesophagus.
2. Physiology of laryngology: Respiration, Phonation, Swallowing- dysphagia, aspiration, odynophagia, Airway protection, Laryngopharyngeal reflux.
3. Endoscopic procedure: Fiberoptic examination, Stroboscopy, Direct (Operative) Laryngoscopy, EMG.
4. Radiology & Imaging of laryngology like plain X-Ray, CT Scan, MRI, PET/CT, Angiography/embolization.
5. Diseases disorder and condition in laryngology like inflammatory condition, congenital benign neoplasm.
6. Others disorders like a neurological, structural, foreign body.
7. Surgical concept (Specific surgical procedure) like tonsillectomy, adenoidectomy, incision and drainage of abscess.

## Course Contents of Phase B (Contd.)

### Content: (Year-2)

1. Surgical concept ( Specific surgical procedure) like internal/Endoscopic procedure, direct laryngoscopy, vocal fold surgery, laser surgery.
2. Tracheostomy.

### Year-3

1. Surgical management of the larynx and trachea
  - a. External surgical approaches
    - i) Laryngofissure
    - ii) Laryngeal framework surgery
      - a) Thyroplasty types 1 to 4
      - b) Arytenoid repositioning surgery

## Course Contents of Phase B (Contd.)

### b. Internal/endoscopic approaches

#### i) Fiberoptic flexible laryngoscopy

##### a) Therapeutic

###### i) Injection

###### ii) Foreign body removal

###### iii) Other

#### ii) Direct laryngoscopy

##### a. Suspension surgical laryngoscopy

##### b. Micro-suspension surgical laryngoscopy

#### iii) Vocal fold surgery

##### a) Injection

##### b) Injection augmentation

##### c) Incisional biopsy

##### d) Excisional biopsy

##### e) Stripping

#### iv) Laser Surgery

##### a) CO<sub>2</sub>

#### v) Microdebrider surgery

## Course Contents of Phase B (Contd.)

c. Tracheostomy

2. Surgical management of oropharynx, hypopharynx, & cervical oesophagus

- i) Tonsillectomy
- ii) Incision and drainage of abscess
- iii) Pharyngoplasty
- iv) Oesophagoscopy

## Course Contents of Phase B (Contd.)

### HEAD AND NECK CURRICULUM

Year-1

History

- Contents:
  - History of present illness
  - Medical history
  - Social history
  - Risk factors
  - Family history
  - Surgical/Radiation/Chemotherapy history
  - Medications
  - Supportive resources/health care providers

❖ Physical Examination

- Contents:
  - General examination (weight, vital signs, Karnofsky status, etc.)
  - Oral cavity/oropharynx (including bimanual palpation)
  - Pharynx/larynx (including endoscopy and mirror examinations), flexible fiberoptic laryngoscopy, transnasaloesophagoscopy
  - Salivary gland (parotid/submandibular etc.)
  - Neck/thyroid gland
  - Face and scalp
  - CN II-XII
  - Other



## Course Contents of Phase B (Contd.)

### ❖ Diagnostic and Therapeutic imaging

#### ➤ Contents:

- Plain X-rays
- CT Scan with/without contrast
- Diagnostic ultrasound of the thyroid and neck
- MRI scan with/without contrast, T1 and T2 weighted images
- PET/CT
- Angiography/embolization

### ❖ Staging of Head and Neck Cancer

#### ➤ Contents:

- Staging criteria for SCC of the oral cavity, oropharynx, nasopharynx, larynx and hypopharynx
- Staging schema for metastatic SCC of the neck

## Course Contents of Phase B (Contd.)

- Staging criteria for differentiated thyroid cancer.
- Staging criteria for malignant tumors of the major salivary glands.



### Preoperative and Postoperative Care

#### ➤ **Contents:**

- Review the assessment of medical co-morbidities, methods of optimization and appropriate medical consultative services.
- Anticoagulant therapy for DVT prophylaxis, insulin use to control postoperative hyperglycemia, antibiotic prophylaxis, fluid replacement, enteral feedings in patients who are tube fed.

## Course Contents of Phase B (Contd.)

### ❖ Diseases, Disorders and Conditions

#### ➤ Contents:

- Lip and Oral cavity
- Mandible
- Oropharynx
- Nasopharynx
- Hypopharynx and cervical esophagus
- Larynx
- Neck mass
- Salivary glands
- Thyroid
- Parathyroids
- Unknown primary
- Cervical metastasis/lymphoma
- Scalp and facial skin
- Unusual tumors of head and neck
  - a. Vascular
  - b. Soft tissue sarcomas
  - c. Bone tumors
  - d. Pediatric

### ❖ Surgical Concepts

#### ➤ Contents (Specific Surgical Procedures):

- Oral cavity
  - i. Partial/total glossectomy (anterior 2/3's)
  - ii. Partial/total glossectomy (base of tongue)
  - iii. Floor of mouth resection

## Course Contents of Phase B (Contd.)

- iv. Marginal/partial/total mandibulectomy
- v. Mandibulotomy
- Neck
  - i. Neck incisions
  - ii. Radical/modified radical neck dissection (including posterolateral and supraclavicular dissection)/selective neck dissections
  - iii. Cervical/scalene node biopsy
  - iv. Drainage of deep neck abscess
  - v. Management of penetratory neck injuries
- Pharynx, trachea, parapharyngeal space
  - i. Tracheotomy
- Thyroid/Parathyroid
  - i. Thyroid lobectomy/subtotal/total thyroidectomy (including paratracheal and/or superior mediastinal lymph node dissection)
- Salivary glands
  - i. Parotidectomy
  - ii. Submandibular gland excision
  - iii. Sublingual gland excision/Ranula marsupialization
  - iv. Salivary gland trauma management/ductal repair
  - v. Sialolith resection
- Endoscopy
  - i. Direct laryngoscopy (fiberoptic and rigid)
- Miscellaneous
  - i. Incisional/excisional biopsy
  - ii. Needle biopsy (guided & unguided)/punch biopsy
  - iii. Endoscopic biopsy

## Course Contents of Phase B (Contd.)

### Year-2

#### Anaesthesia for Head and Neck Procedures

➤ **Contents:**

- Review the current risk assessment schema for general anesthesia including techniques of tracheal intubation: nasotracheal, endotracheal, tracheotomy, cricothyrotomy, laryngeal mask anesthesia
- Pharmacology of commonly used local topical anesthetics.

❖ **Diseases, Disorders and Conditions**

➤ **Contents:**

- Lip and Oral cavity
- Mandible
- Oropharynx
- Nasopharynx
- Hypopharynx and cervical esophagus
- Larynx
- Neck mass
- Salivary glands
- Thyroid
- Parathyroids
- Unknown primary
- Cervical metastasis/lymphoma
- Scalp and facial skin

## Course Contents of Phase B (Contd.)

- Unusual tumors of head and neck
  - e. Vascular
  - f. Soft tissue sarcomas
  - g. Bone tumors
  - h. Pediatric

### ❖ Surgical Concepts

#### ➤ Contents (Specific Surgical Procedures):

- Oral cavity
  - vi. Mandible plating
  - vii. Dental extraction
  - viii. Resection hard/soft palate
  - ix. Mandibular reconstruction
- Nose and maxilla
  - i. Rhinectomy/forehead flap reconstruction
  - ii. Lateral rhinotomy/midfacialdegloving/alotomy
  - iii. Maxillectomy/medial maxillectomy
  - iv. Nasopharyngeal tumor resection
- Larynx
  - i. Laryngofissure and cordectomy
  - ii. Vertical partial laryngectomy
  - iii. Supraglotticlaryngectomy/supracricoid partial laryngectomy
  - iv. Total/near-total laryngectomy
  - v. Pharyngolaryngectomy
  - vi. Traheoesophageal shunt
  - vii. Recurrent laryngeal nerve surgery
- Pharynx, trachea, parapharyngeal space
  - i. Tracheal reconstruction

## Course Contents of Phase B (Contd.)

- ii. Cricopharyngealmyotomy/myectomy
- iii. Partial/total pharyngectomy
- iv. Pharyngeal reconstruction
  
- Thyroid/Parathyroid
  - ii. Parathyroidectomy (with autotransplantation)
  - iii. Recurrent hyperparathyroidism/cancer of the parathyroid
- Endoscopy
  - ii. Esophagoscopy (diagnostic, foreign body removal, dilation)
  - iii. Bronchoscopy (diagnostic, foreign body removal, dilation, laser, fiberoptic)

### Year-3

#### Diseases, Disorders and Conditions

##### Contents:

- Lip and Oral cavity
- Mandible
- Oropharynx
- Nasopharynx
- Hypopharynx and cervical esophagus
- Larynx
- Neck mass
- Salivary glands
- Thyroid
- Parathyroid
- Unknown primary
- Cervical metastasis/lymphoma
- Scalp and facial skin
- Unusual tumors of head and neck

## Course Contents of Phase B (Contd.)

- i. Vascular
- j. Soft tissue sarcomas
- k. Bone tumors
- l. Pediatric

### ❖ Surgical Concepts

Contents (Specific Surgical Procedures):

- Lips
  - i. Vermilionectomy
  - ii. Wedge excision/reconstruction
  - iii. Upper lip resection/reconstruction
  - iv. Lower lip resection/reconstruction
- Oral cavity
  - x. Intraoral reconstruction
- Nose and maxilla
  - v. Craniofacial resection
- Pharynx, trachea, parapharyngeal space
  - ii. Cervical esophagectomy
  - iii. Revision stenotic tracheostoma
- Endoscopy
  - iv. Laser/cold knife microlaryngeal surgery/arytenoidectomy)



## Phase B

3 years

Trainees will be placed in the Otolaryngology & Head-Neck Surgery department in different units and will work as junior and senior residents. They will perform their activities under supervision, take part in surgeries as assistant or do minor/intermediate procedures under supervision.

DEPARTMENT OF OTOLARYNGOLOGY & HEAD-NECK SURGERY

# Records of the students

## Phase B

*MS OTOLARYNGOLOGY & HEAD-NECK SURGERY, RESIDENCY PROGRAM, PHASE-B*



**Otolaryngology & Head-Neck Surgery (Phase B)  
POMR**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Date of admission with hospital Reg.	Diagnosis	Signature of the supervisor

**Otolaryngology & Head-Neck Surgery (Phase B)  
POMR**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Date of admission with hospital Reg.	Diagnosis	Signature of the supervisor



**Otolaryngology & Head-Neck Surgery (Phase B)  
POMR**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Date of admission with hospital Reg.	Diagnosis	Signature of the supervisor

**Otolaryngology & Head-Neck Surgery (Phase B)  
POMR**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Date of admission with hospital Reg.	Diagnosis	Signature of the supervisor



**Otolaryngology & Head-Neck Surgery (Phase B)  
POMR**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Date of admission with hospital Reg.	Diagnosis	Signature of the supervisor





**Otolaryngology & Head-Neck Surgery (Phase B)  
POMR**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Date of admission with hospital Reg.	Diagnosis	Signature of the supervisor

## Otolaryngology & Head-Neck Surgery (Phase B) Procedures

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Diagnosis /indication	Procedure performed	Performance of the trainee*	Signature of the supervisor

\* Observer-O, Assistant-A, Performance under supervision-PS, Performed independently-PI

### Otolaryngology & Head-Neck Surgery (Phase B) Procedures

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Diagnosis /indication	Procedure performed	Performance of the trainee*	Signature of the supervisor

\* Observer-O, Assistant-A, Performance under supervision-PS, Performed independently-PI



## Otolaryngology & Head-Neck Surgery (Phase B) Procedures

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Diagnosis /indication	Procedure performed	Performance of the trainee*	Signature of the supervisor

\* Observer-O, Assistant-A, Performance under supervision-PS, Performed independently-PI





















## Otolaryngology & Head-Neck Surgery (Phase B) Procedures

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Diagnosis /indication	Procedure performed	Performance of the trainee*	Signature of the supervisor

\* Observer-O, Assistant-A, Performance under supervision-PS, Performed independently-PI

**Otolaryngology & Head-Neck Surgery (Phase B)  
Procedures**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Diagnosis /indication	Procedure performed	Performance of the trainee*	Signature of the supervisor

\* Observer-O, Assistant-A, Performance under supervision-PS, Performed independently-PI

**Otolaryngology & Head-Neck Surgery (Phase B)  
Procedures**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Diagnosis /indication	Procedure performed	Performance of the trainee*	Signature of the supervisor

\* Observer-O, Assistant-A, Performance under supervision-PS, Performed independently-PI

**Otolaryngology & Head-Neck Surgery (Phase B)**  
**Clinic attended**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Assessment & diagnosis	Performance of the trainee	Signature of the supervisor

**Otolaryngology & Head-Neck Surgery (Phase B)**  
**Clinic attended**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Assessment & diagnosis	Performance of the trainee	Signature of the supervisor

**Otolaryngology & Head-Neck Surgery (Phase B)**  
**Clinic attended**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Assessment & diagnosis	Performance of the trainee	Signature of the supervisor

**Otolaryngology & Head-Neck Surgery (Phase B)  
Clinic attended**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Assessment & diagnosis	Performance of the trainee	Signature of the supervisor

**Otolaryngology & Head-Neck Surgery (Phase B)**  
**Clinic attended**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex)	Assessment & diagnosis	Performance of the trainee	Signature of the supervisor







**Otolaryngology & Head-Neck Surgery (Phase B)**  
**Case presentation in clinical meetings, grand & ward round**

Block.....Supervisor.....

SL	Date	Name of the patient (age & sex) ward/bed, reg. no.	Diagnosis	Performance of the trainee	Signature of the supervisor















**Otolaryngology – Head & Neck Surgery , Phase-B**

**Thesis**

**Title of the Thesis:**

Approval:

Signature of the Supervisor:.....

Signature of the course coordinator:.....

Signature of the Chairman:.....

## Otolaryngology – Head & Neck surgery, Phase-B

### Summary of activities

Events	Performed Total Nos	Performance status Satisfactory/need to be completed	Remarks	Signature of the course coordinator
Case records(POMR)				
Procedures				
OPD attended				
Emergency managed				
Case presentation				
Journal club				
Presentation in seminar/conference/workshop				
Otological surgeries assisted/performed				
Rhinology surgeries assisted/performed				
Laryngology surgeries assisted/performed				
Head& Neck surgeries assisted/performed				
Thesis				
Lecture attended				
Interpretation of investigations				
X-rays				
CT scan				
MRI				
Audiogram				
Tympanogram				

# **CERTIFICATE OF ACCURACY**

I certify that the information contained in this logbook is true and accurate records of my training experiences.

Signature of the trainee:.....

Date:.....

**CERTIFICATE OF COMPLETION OF PHASE-B TRAINING**

I, to the best of my knowledge, hereby certify that

Dr.....

Has satisfactorily completed this logbook as required by the University.

.....

Signature of the Course coordinator

Name.....

Department of Otolaryngology-Head & Neck Surgery, BSMMU.

Date: .....

**CERTIFICATE OF ELIGIBILITY FOR FINALEXAMINATION**

**(MS IN OTOLARYNGOLOGY & HEAD- NECK SURGERY)**

I hereby certify that

Dr. ....

has satisfactorily completed his activities as a resident in MS otolaryngology-Head & Neck Surgery course as required by the University which are recorded in this logbook and he is now eligible to take part in the final examination.

Name:.....

Date:.....

.....

Signature

Chairman

Department of Otolaryngology- Head & Neck Surgery.

