

LOGBOOK

Residency training program – Phase B

For ----- years training program in

Department of Paediatric Surgery

Faculty of Surgery

Bangabandhu Sheikh Mujib Medical University

Shahbagh, Dhaka.

Index

<u>Contents</u>	<u>Page no.</u>
Personal details of the Resident	3
Profile of the teachers/ supervisors	4
General information	5
Over view of Phase B	6
Objective of Phase B	7
List of the Lecture topics for Difference year of Phase-B	9
Section A: Case records (POMR)	13
Section B: Procedures	14
Section C: OPD consultant	15
Section D: Emergency encountered	16
Section E: Journal Clubs	17
Section F: Case presentation in clinical meeting, grand & ward round	18
Section G: Presentation/ Participation in seminars, symposium/ workshop and conference	19
Section H: Lectures attended	20
Section I: Interpretations of lab data/ Radiology & Imaging/ Nuclear Study	
<i>Section I.a. Interpretations of Lab Data</i>	21
<i>Section I.b. Interpretations of X-ray</i>	22
<i>Section I.c. Interpretations of USG</i>	23
<i>Section I.d. Interpretations of CT scan/ MRI</i>	25
<i>Section I.e. Interpretations of Neuclear Study</i>	26
Section J-1: Operative Procedure (General Surgery)	27
Section J-2: Operative Procedure (Urology)	28
Section J-3: Operative Procedure (Neonatal Surgery)	29
Section J-4: Operative Procedure (Paediatric Onco-surgery)	30
Section J-5: Operative Procedure (Paediatric Plastic and Reconstructive Surgery)	31
Section J-6: Operative Procedure (Paediatric Orthopedic, Non Cardiac Thoracic surgery and Neuro surgery)	32
Section J-7: Operative Procedure (MIS and Laparoscopic Surgery)	33
Section K: Thesis	34
Section L: Leave record	35
Section M: Summary Records	36
Section N: Certificate of Accuracy	37

Personal details of the Residents

Name of the resident :

University Registration No. :

BMDC Registration No. :

Date of entry in the program :

Date of Birth :

Father's Name :

Mother's Name :

Address for communication :

Permanent address :

Telephone No. :

Email :

Nationality :

National ID No. :

Passport No. (for foreign student):

Academic Qualification:

Degree	Year	Board/ University	Division/ Results
S.S.C/ equivalent degree			
H.S.C/ equivalent degree			
M.B.B.S/ equivalent degree			

Profile of the teachers/ supervisors

Name	Designation	Discipline	Specimen signature	Specimen initial

General Information

1. The log book (Daily Training Record) is a day to day record of the clinical and academic work done by the resident.
2. The log book will be a pre-requisite for appearing in the phase B summative examination.
3. This log book has to be maintained by all the residents throughout the period of Phase-B course.
4. The resident will obtain the log book from the course-coordinator of the parent discipline immediately after joining.
5. The resident will make the required entries in the log book on the same day of the event and get it signed.
6. It is the responsibility of the resident to keep the log book safe and secured.
7. Entries in the log book will be year-wise.

Over view of Phase B

Duration of Phase – B

3 years including thesis

Clinical Part of Phase B are segmented into three parts with defined structured training module and content. The student should learn in a steep ladder way i.e year 1 → year 2 → and year 3.

- Year 1
- Year 2
- Year 3

The aim of the phase B is to enable the trainee to further develop the skills knowledge and attitude required to complete training and move to practice as a Consultant Paediatric Surgeon in home and abroad. This final phase of training is when trainees continue to build on the competences achieved in the first phases of the programme, gaining both competences not achieved at earlier stages and further exposure to the more specialized areas of practice. The goals as outlined in previous stages remain pertinent, as it is expected that the trainees will continue to build on their experience and move beyond competent practice to the level of an advanced practitioner, in many of the areas. The planning of these final attachments is important as it provides an opportunity to remedy areas of training deficiency from earlier in the programme, or the development of a special interest. The curriculum goals are again presented in a modular fashion for ease of reference and recording of achievement rather than as a suggested teaching package. There will obviously be areas of duplicate coverage and again this curriculum should be viewed as a framework to aid understanding rather than as a proscriptive document. Though the information on the individual conditions is largely unchanged from the Phase A, the objectives of these ‘modules’ have been altered to reflect the expectation that the trainees will be exhibiting a more advanced level of performance. The different sections will contain a mixture of information on relevant conditions, symptom patterns and associated surgical operations. Overall these goals outlined are simply guides to progress and should be used by trainees, trainers and Programme Directors to help plan rotational placements to ensure a full breadth of training.

Objectives of Phase B

By the end of the phase B the trainees including those who are following an academic pathway will have:

- Achieved the level of an advanced practitioner in the management of the common surgical problems of childhood
- Acquired the skills to practice with integrity, respect and compassion
- Gained sufficient theoretical knowledge and practical experience to be able to enter for the final Phase B examination in paediatric surgery.
- Developed skills and experience in areas of more specialized practice – with a view to developing a sub-speciality interest if appropriate.
- Achieved the level of advanced practitioner in operations common to Paediatric practice, and be developing competence in procedures appropriate to sub-speciality training.
- The list detailed here will not be achieved by all trainees, as many will be looking to specialize in a particular area. Individual circumstance will dictate the experience each trainee will gain. As a guide the trainee will by the end of this phase be expected to both initiate and lead in the operative management. In addition they will be expected to demonstrate the self-awareness of the need for support and advice of senior colleagues.
- Resident should able to interpret the following lab data and investigation reports like - CBC, Liver function test, Renal function test, Urine for R/M/E, E.C.G, X-ray, Ultrasonography, CT scan, MRI, ERCP, Radionucleotide study, IVU, MCU, Upper GI contrast x-ray, Contrast enema, Sinography/ fistulogram,
- Subsequently the trainee can able to perform the following procedures such as –

Neonatal

- Repair of Oesophageal atresia (+/- fistula)
- Colonic interposition/ gastric pull up
- Repair of recurrent fistula
- Aortopexy
- Congenital Diaphragmatic hernia repair
- Repair of eventration of diaphragm
- Duodeno-duodenostomy
- Management of congenital atresias of intestine
- Management of duplications
- Management of necrotising enterocolitis
- Neonatal pull-through for Hirschsprungs disease

General Abdominal

- Achalasia management
- Fundoplication
- Gastric disconnection
- Feeding jejunostomy
- ACE procedure
- Bowel lengthening procedure
- Posterior sagittal anorectoplasty
- Pull through for Hirschsprungs disease
- Management of Crohns disease of small and large intestine
- Colonic resection for Ulcerative colitis and ileoanal pouch formation
- Colonoscopy

Thoracic

- Management of empyema
- Resection of lung lesions
- Management of chest wall deformity
- Management of airway anomalies

Endocrine

- Resection of salivary gland lesions
- Thyroid/parathyroid surgery
- Management of hyperinsulinism

Oncology

- Hepatoblastoma
- Wilms tumour
- Adrenal tumours – benign/malignant
- Soft tissue tumours
- Sacrococcygeal tumour

Hepatobiliary

- Biliary atresia
- Choledochal cyst

Urology

- Pyeloplasty
- Partial Nephrectomy
- Management of renal calculi
- Management of posterior urethral valves
- Bladder exstrophy closure
- Bladder augmentation / artificial sphincter insertion
- Epispadias repair
- Proximal hypospadias repair

The objectives of the training may be achieved through different modes like

- Ward duties
- Emergency duties
- OPD duties
- Academic sessions: Journal Club, clinical meeting, Grand round, Case presentation session, Morbidity/mortality review meeting/ medical audit
- Seminar, Conference, workshops
- Lectures
- Bed side teaching
- Tutorials

List of the Lecture topics for Difference year of Phase-B

Phase- B, Year- 1

1. Child with abdominal pain
2. Child with vomiting
3. Child with constipation
4. Child with abdominal lump
5. Child with umbilical disorder
6. Abdominal wall pathology
7. Neonatal jaundice
8. Neonatal intestinal obstruction
9. Child with groin condition
10. Inguino scrotal swelling
11. Introduction of paediatric urology
12. Child with haematuria
13. Child with recurrent urinary tract infection
14. Child with difficulties in micturation
15. Child with empty scrotum
16. Child with acute scrotum
17. Head and Neck swelling
18. Trauma in children
19. Emergency paediatric surgery
20. Child with congenital heart disease

Phase-B, Year- 2

1. Abdominal swelling
2. Appendicitis
3. Gastrointestinal Haemorrhage
4. Gastrointestinal malignancies
5. Inflammatory bowel disease/ Chroni's disease, ulcerative colitis
6. Diverticular disease of GIT and Meckle's diverticulum
7. Intestinal duplication
8. Mesenteric & Omental cyst
9. Polypoid disease of GIT
10. Intestinal obstruction in children
11. Abdominal hernias
12. Intestinal perforation and peritonitis
13. Benign oesophageal diseases
14. Peptic ulcer disease in children
15. Benign and malignant hepatic, gall bladder and pancreatic diseases.
16. Haemorrhoid and other perineal diseases in children.
17. Abdominal wall stomas
18. Adrenal gland diseases
19. Hydatid cyst
20. Portal hypertension
21. Thalassemia
22. Pancreatic pseudocyst
23. Obstructive Uropathy
24. Renal agenesis, dysplasia and cystic diseases of kidney
25. Renal fusion and ectopia
26. Ureteral duplication and ureterocele
27. Megaureter and Prune belly syndrome
28. Urinary calculus diseases
29. Genitourinary malignancies
30. Renal failure
31. Testicular swelling
32. Lump in the neck
33. Torticollis
34. Thyroid and para thyroid diseases
35. Breast lump and nipple discharge
36. Space occupying lesion of chest
37. Basic principle of inflammatory disease of bones and joint
38. Simple fracture and joint dislocations
39. Fracture around the elbow
40. Compartment syndrome
41. Aneurysmal disease of limb
42. Varicose vein, Leg ulcer

Phase- B, Year- 3

1. Cleft lip and Palate
2. Gastro esophageal reflux
3. Oesophageal atresia and TEF
4. Oesophageal rupture and perforation
5. Oesophageal stricture
6. Disorder of oesophageal function
7. Oesophageal replacement
8. Congenital diaphragmatic Hernia
9. Pyloric Stenosis, Duodenal atresia, Stenosis and anular pancrease
10. Intestinal atresia
11. Necrotizing enterocolitis
12. Meconium ileas
13. Malrotation
14. Short bowel syndrome
15. Omphalocele and Gastroschisis
16. Paediatric Gastrointestinal tumour
17. Hepatoblastoma
18. Wilm's tumour
19. Neuroblastoma
20. Soft tissue tumour
21. Choledochal cyst
22. Biliary Atresia
23. Gall stones
24. Hirschsprung's disease
25. Anorectal malformation
26. Antenatal management
27. Chest wall deformity
28. Congenital and acquired lung anomalies
29. Tracheal anomalies
30. Inhaled foreign bodies
31. Cyst of the lungs and mediastinum
32. Surgical conditions of salivary gland
33. Inguinal hernia
34. Hydrocele and vericocele
35. Undescended testis
36. Umbilical hernia, epigastric hernia, Supra umbilical hernia
37. Abnormalities of penis, scrotum and urethra
38. Hypospadias
39. Bladder exstrophy
40. Epispadias
41. Haematuria
42. Meatal Stenosis and megameatus
43. Pelviureteric and vesico ureteric junction obstruction
44. Posterior urethral valve (PUV)
45. Renal stone
46. Vesical calculus
47. Bladder dysfunction
48. Duplication of urinary tract
49. Vesicourinary reflux (VUR)
50. Urinary diversion and undiversion
51. Foecal diversion
52. Disorder of sex development (DSD)
53. Abnormalities of female genital tract
54. Spina Bifida
55. Meningocele and Meningomyelocele

- 56. Hydrocephalus
- 57. Preauricular sinus
- 58. Thyroglossal cyst and sinus
- 59. Branchial cyst and sinus
- 60. Vascular malformations
- 61. Chest injury
- 62. Head injury
- 63. Abdominal trauma
- 64. Spinal cord injury
- 65. Genitourinary tract trauma
- 66. Musculoskeletal trauma

- 67. Burn
- 68. Child abuse and birth injury
- 69. Basic principles of liver, kidney, intestines and bone marrow transplantation
- 70. Congenital defect of skin, hand and foot.
- 71. Conjoint twin.
- 72. Osteosarcoma
- 73. Telipes equino varus (TEV)
- 74. Teratoma and other Germ cell tumours
- 75. Hodgkin's and Non Hodgkins lymphoma
- 76. Ovarian tumour

Section A: Case records (POMR) of the patients managed by the resident

Year

Supervisor

Sl. no.	Date	Name of Patient (age & sex)	Date of admission with hospital Reg. no., ward & Bed no	Diagnosis	Grading	Signature of supervisor
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						

Grading: Excellent: 4, Good: 3, Satisfactory: 2, unsatisfactory: 1

Section B: Procedures

Year

Supervisor

Sl. no.	Date	Name of Patient (age & sex)	Diagnosis / Indication	Name of procedure performed	Performance of the candidate	Signature of supervisor
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

Key for performance of the candidates:

Observer status – O, Assistant status – A, Performance under supervision – PS, Performed independently – PI

Section D: Emergency encountered

Year

Supervisor

Sl. no.	Date	Name of the patients (age & sex)	Assessment & Diagnosis	Primary management done	Performance of the Resident	Signature of the supervisor
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						

Section E: Journal Clubs

Year

Supervisor

Sl. no.	Date	Topic/ article	Source/ Re-source person	Performance level	Signature of Supervisor
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

Key for performance of the candidates:

Attended – A, Presented himself – PH

Section F: Case presentation in clinical meeting and grand round

Year

Supervisor

Sl. no.	Date	Patient's name (age & sex) ward/ bed, PIN	Diagnosis/ Problem	Level of performance	Signature of Supervisor
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

Key for performance of the candidates:

Attended – A, Presented himself – PH

Section G: Presentation / participation in seminars, symposium/ workshops and conferences

Year

Supervisor

Sl. no.	Date	Topic / article	Source/ Re-source person	Performance	Signature of supervisor
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

Key for performance of the candidates:

Participation – P , Presented himself – PH

Section H: Lectures attended

Year

Supervisor

Sl. No	Date	Topic	Lecturer	Signature

Section I: Interpretations of lab data/ Radiology & Imaging/ Nuclear Study
Section I.a. Interpretations of Lab Data

Year

Supervisor

Sl. no.	Items	Abnormality	Interpretation	Signature of Supervisor

Section I.b. Interpretations of X-ray

Year -----

Supervisor -----

Sl. no.	Date	Type of X-ray	Presented	Performance of the trainee	Signature of Supervisor

Section I.c. Interpretations of USG

Year -----

Supervisor -----

Sl. no.	Date	Type of X-ray	Presented	Performance of the trainee	Signature of Supervisor

Section I.d. Interpretations of CT scan/ MRI

Year

Supervisor

Sl. no.	Date	CT scan/ MRI	Presented	Performance of the trainee	Signature of Supervisor

Section I.e. Interpretations of Neuclear Study

Year -----

Supervisor -----

Sl. no.	Date	Type of Neuclear study	Presented	Performance of the trainee	Signature of Supervisor

Section J-1: Operative Procedure (General Surgery)

Year

Supervisor

Sl. no.	Date	Name of Surgery	Major/ Intermediate	Assisted as 1 st / 2 nd / 3 rd Assistant	Performed under supervision	Signature of Supervisor

Section J-2: Operative Procedure (Urology)

Year -----

Supervisor -----

Sl. no.	Date	Name of Surgery	Major/ Intermediate	Assisted as 1 st / 2 nd / 3 rd Assistant	Performed under supervision	Signature of Supervisor

Section J-3: Operative Procedure (Neonatal Surgery)

Year -----

Supervisor -----

Sl. no.	Date	Name of Surgery	Major/ Intermediate	Assisted as 1 st / 2 nd / 3 rd Assistant	Performed under supervision	Signature of Supervisor

Section J-4: Operative Procedure (Paediatric Onco-surgery)

Year -----

Supervisor -----

Sl. no.	Date	Name of Surgery	Major/ Intermediate	Assisted as 1 st / 2 nd / 3 rd Assistant	Performed under supervision	Signature of Supervisor

Section J-5: Operative Procedure (Paediatric Plastic and Reconstructive Surgery)

Year -----

Supervisor -----

Sl. no.	Date	Name of Surgery	Major/ Intermediate	Assisted as 1 st / 2 nd / 3 rd Assistant	Performed under supervision	Signature of Supervisor

Section J-6: Operative Procedure (Paediatric Orthopedic, Non Cardiac Thoracic surgery and Neuro surgery)

Year -----

Supervisor -----

Sl. no.	Date	Name of Surgery	Major/ Intermediate	Assisted as 1st/ 2nd / 3rd Assistant	Performed under supervision	Signature of Supervisor

Section J-7: Operative Procedure (MIS and Laparoscopic Surgery)

Year -----

Supervisor -----

Sl. no.	Date	Name of Surgery	Major/ Intermediate	Assisted as 1 st / 2 nd / 3 rd Assistant	Performed under supervision	Signature of Supervisor

Section K: Thesis

Title of the Thesis:

Approval:

Signature of the Supervisor

Signature of the course coordinator:

Signature of the Chairman:

Section M: Summary Records

Event	Performed				Signature of the Course manager
	Year- 1	Year- 2	Year- 3	Total	
A. Case records (POMR)					
B. Procedure					
C. OPD consultation					
D. Emergency encountered					
E. Journal Clubs					
F. Case presentation in clinical meeting, grand & ward round					
G: Presentation /attendance in seminars, symposium/ workshops, conferences					
H. Lectures attended					
I.a. Interpretations of Lab Data					
I.b. Interpretations of X-ray					
I.c. Interpretations of USG					
I.d. Interpretations of CT scan/ MRI					
I.e. Interpretations of Neuclear Study					
J.1. Operative Procedure (General Surgery)					
J. 2: Operative Procedure (Urology)					
J-3: Operative Procedure (Neonatal Surgery)					
J-4: Operative Procedure (Paediatric Onco-surgery)					
J -5: Operative Procedure (Paediatric Plastic and Reconstructive Surgery)					
J-6: Operative Procedure (Paediatric Orthopedic, Non Cardiac Thoracic surgery and Neuro surgery)					
J-7: Operative Procedure (MIS and Laparoscopic Surgery)					

Section N. Certificate of Accuracy

I, to the best of my knowledge, certify that Dr. -----

has satisfactory completed this logbook as required by the university.

Signature of the course coordinator

Name:

Discipline:

Date: