

INTERNSHIP LOG BOOK

COLLEGE OF MEDICINE

2021

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Introduction

The training and education of internship doctors requires adequate organization within departments as well as clearly-defined Rules and responsibilities for the involved clinicians, so as to provide balanced exposure to inpatient, outpatient and theater-based experience.

Protected training time on the ward, in the clinic and theater is required to ensure the evolving competence of the house-officer doctor.

They should move through defined educational measurable program created solely to meet service demands.

The educational aims for this year will be to develop generic skills, competencies and attitudes to ensure professional conduct that will reflect good medical practice, which will be relevant to any future medical career. It is a time when career choices are made.

Experience in a variety of specialties will enable doctors to apply for and progress to the basic specialist training (BST) program of their choice.

They will continue to develop learning methods, which are necessary to promote life-long learning and help continuing professional development in the clinical setting.

The core curriculum which the logbook describes their main objective is not all-inclusive but it should define minimum outcomes from the education and training and is not intended to limit the acquisition of knowledge and/or skills.

Assessment of that program should be a continuous regular process to allow the development of a process leading to a record of in-training assessment (roita). This will be developed throughout the training year.

Rules and responsibilities

The principal people involved are:

- The head department consultant
- The supervisor consultant
- The trainee

Training sites

King Fahad Specialist Hospital, King Saud Hospital, Maternity and Children's Hospital, and Buraidah Central Hospital, and other university and teaching hospitals inside & out-side Qassim Region.

Generic skills

History taking, communication skills, team working, well conducted training on different clinical skills with respect of the required level of acquisition etc.

Trainees should be able to demonstrate at the end of their working year that they have developed professional conduct that is appropriate for the career they have entered.

The investigations aim to produce doctors who are competent and confident to select, request and interpret reports of commonly used investigations required for diagnosis and management of patients who present as emergencies

Trainees should also learn to:

- Recognize the need for an investigation result to impact on management, and avoid unnecessary investigations.
- Recognize that investigation reports often require the professional opinion of an individual who therefore needs relevant information on the request form.
- Recognize that reports may need review in the light of changing circumstances. Act on the results in a timely and appropriate fashion.

The log books:

In an attempt to provide an educational framework for the intern's year, a log book is developed. The aim is to encourage an effective dialogue between consultant and interns for setting objectives and assessing progress.

The log book will be small enough to fit in a white coat pocket and contains checklists for self-assessment of practical procedures performed, emergencies managed, and educational topics covered. It also contained evaluation, advice for the consultant about how to set objectives at the beginning of the post and offer structured feedback at intervals thereafter.

Objective:

To provide the trainee with the knowledge and skills to be able to assess and initiate management of patients presenting as out-patient, medical wards or emergencies with the problems most of them outlined in the logbook for different fields of medicine.

CARDIOVASCULAR SYSTEM 1/2

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
1	Ischemic Heart	Doing ECG		A			
2	Pericarditis	Paracentesis		B			
3	Arrhythmia	Fix electrode for monitor		A			
4	Myocardial Diseases	Echocardiography		C			
5	Heart failure	Taking samples for arterial blood gas		A			
6	Heart failure	Monitoring central venous Pressure		A			
7	Heart failure	Apply the Vento mask and adjust the flow rate of O ₂		A			

CARDIOVASCULAR SYSTEM 2/2

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B
8	Dangerous Arrhythmias	Defibrillation		B			
9	Cardiac arrest	C. P. R		A			
10	Myocardial Infarction	Administration of Thrombolytic Drugs		B			
11	Myocardial infarction	Cardiac catheterization		C			
12	Heart block	Pacemaker Temporary or permanent		C			
13	Valvular Disease	Echo and Doppler study		C			
14	Ischemic heart	Isotope scanning (gamma camera)		C			

Pulmonology 1/2

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
1	Bronchial asthma	Proper use of nebulizer		A			
2	Bronchial asthma	Preparation of nebulizer		A			
3	Bronchial asthma	Skin testing for allergens		B			
4	Bronchial asthma	Adjusting O ₂ flow according to ABG. Level		A			
5	Pleural effusion	Plural Paracentesis		A			
6	Pneumothorax	Intercostal tube insertion		B			
7	Pneumothorax	Care of under-water seal		A			

Pulmonology 2/2

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
8	Respiratory failure	Endo-tracheal intubation		A			
9	Respiratory failure	Observation of ventilator		A			
10	Lung cancer	Bronchoscopy		C			
11	Lung cancer	Transcutaneous lung biopsy		C			
12	Mediastinal or pleural mass	Thoracoscopy		C			
13	Reparatory failure	Pulmonary functions tests		B			
14	Cardio-respiratory Failure	Supporting airways by (O.PH.T ,N.PH.T., etc.)		A			

HEPATOLOGY & GASTRO-ENTEROLOGY

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No.	clinical situation	Skill	Frequency	Level	Supervisor	Date	N.B.
1	intestinal Obstruction or feeding	Nasogastric Tube insertion		A			
2	Ascites	Paracentesis		A			
3	Upper GI Bleeding	Upper endoscopy		C			
4	Lower GI Bleeding	Proctoscopy		A			
5	Lower GI Bleeding	Sigmoidoscopy		B			
6	Lower GI Bleeding	Colonoscopy		C			
7	Hepatic tumor	Liver Biopsy		C			

RENAL AND ELECTROLYTE

Requested skills

Level A= independent.

Level B= assistance.

Level C= observation.

S. No.	Clinical Situation	Skill	Frequency	Level	Supervis or	Date	N.B.
1	End stage renal disease (E.S R.D).	Central line; internal jugular.		B			
2	E.S.R.D	Hemo- dialysis		C			
3	E.S.R.D	Peritoneal dialysis		B			
4	Nephrotic Syndrome	Renal biopsy		C			
5	Urine retention	Catheterization		A			
6	Urine retention	Supra-pubic Drainage		B			
7	Hematuria	Cystoscopy		C			

HEMATOLOGY

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
1	Anemia	Blood transfusion		A			
2	Anemia	Cross- matching		A			
3	Bleeding disorders	Bleeding and coagulation time		A			
4	Thrombocytopenia	Platelet Transfusion		A			
5	Thrombocytopenia	Platelet-pheresis		C			
6	Gammopathy	Plasma-pheresis		C			
7	Leukemia and Aplastic Anemia	Bone marrow aspiration and biopsy		B			

Rheumatology

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No.	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
1	Arthritis With effusion	Aspiration		B			
2	Arthritis	Local injection		B			
3	Arthritis	Arthroscopy		C			
4	Entrapment syndromes	Local steroid injection		B			
5	Myopathy	EMG		C			
6	Neuropathy	Nerve conduction velocity (NCV)		C			
7	Paralysis	Physiotherapy		B			
8	Meningitis	Lumber puncture		B			

OB- GYN 1/3

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
1	Labour room	Vaginal Delivery		A			
2	Labour room	Placental Delivery		A			
3	Labour room	Suturing Of Episiotomy		A			
4	Labour room	Breach & Twin Delivery		B			
5	Labour room	Repair Vaginal And Perineal Tears		B			
6	Labour room	Instrumental Delivery Vacuums or Forceps		C			
7	Labour room	CTG		A			

OB- GYN 2/3

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
8	Operation room	Evacuation & curettage		C			
9	Operation room	Cervical circulage		C			
10	Operation room	Caesarean section		B			
11	Operation room	Laparotomy		C			
12	Operation room	Diagnostic & operative Laparoscopy		B			
13	Operation room	Drainage of Bartholin Abscess		B			
14	Operation room	Vaginal Hysterectomy		C			

OB-GYN 3/3

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
15	Ward & Clinic	Vaginal Examination		A			
16	Ward & Clinic	High Vaginal & Cervical swaps		A			
17	Ward & Clinic	IUCD Application		B			
18	Ward & Clinic	Pap. Smear		A			
19	Ward & Clinic	Vaginal Pessary		B			
20	Ward & Clinic	Trans. Abd. & Trans-Vaginal Ultrasound		C			
21	Ward & Clinic	Dressing for Wounds		A			

GENERAL SURGERY 1/2

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
1	Pneumothorax	Intercostals Tube		B			
2	Wounds	Suturing		A			
3	Wounds	Dressing		A			
4	Abscess	Drainage		A			
5	Urinary tract	Urethral Catheterization		A			
6	Urinary tract	Suprapubic Cystostomy		B			
7	Small lipomas	Excision		A			

GENERAL SURGERY 2/2

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
8	I.V .access	Venous Cut-Down		B			
9	Ganglia	S. Removal		B			
10	Local bleeding	Local Hemostasis		A			
11	Varicose veins	Sclerotherapy		B			
12	Male children	Circumcision		B			
13	Operation Room	Assistance in Operations		B			

EMERGENCY, CCU & ICU

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
1	Shock	I.V and Central Lines		A			
2	Arrhythmia	Defibrillation		B			
3	M.I.	Thrombolysis Monitoring		A			
4	Tension Pneumothorax	Needle decompression		A			
5	Hydropneumo-thorax	Intercostal Intubation		B			
6	Cardio respiratory arrest	CPR		A			
7	Respiratory failure	Endo-tracheal Intubation					

FAMILY MEDICINE

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

Skill / Procedure	Date	Med.record No.	Age & Gender	Supervisor Name & Signature
Consultation				
<i>Breaking bad news</i>				
Use and interpretation of growth chart				
ECG interpretation				
Body system examination				
Data interpretation				
Blood pressure measurement				
Peak flow meter measurement				
<i>Inhaler technique education</i>				
Urine dipstick test				
Giving injections				
Visual acuity test				

Skill / Procedure	Date	Med.record No.	Age & Gender	Supervisor Name & Signature
• Approach to patient with cough				
• Approach to patient with fever				
• Approach to patient with diarrhea				
• Approach to diabetic patients				
• Approach to hypertensive patient				
• Approach to patient with dyslipidemia				
• Approach to asthmatic patient				
• Approach to patient with back pain				
• Approach to a patient with anemia				
• Adult and child vaccination				
• Approach to obese patient				
• Approach to patient with musculoskeletal problems				

PEDIATRIC

(N.B-- other skills are mentioned with Internal medicine)

Requested skills in internal medicine

Level A= independent.

Level B= assistance.

Level C= observation.

S. No	Clinical Situation	Skill	Frequency	Level	Supervisor	Date	N.B.
1	Bronchial asthma	Spacer		A			
2	Respiratory failure	Assisted Respiration		B			
3	Foreign body inhalation	Rigid bronchoscopy		C			
4	Dehydration	Scalp needle Application		A			
5	Dehydration	Calculation of fluid and electrolyte dosage		A			
6	U.T.I.	Supra-pubic sampling		B			
7	Renal failure	Pediatric Hemo-dialysis		C			

CASE PRESENTATION AND RECORDS

The intern should present 1+ clinical case WEEKLY in morning round.

S. No	System of Interest	Clinical Case	Relevant History Examination & Follow Up	Evaluation	Supervisor Signature	Date
1						
2						
3						
4						
5						
6						

SCIENTIFIC MEETING AND JOURNAL CLUB

Academic Activities

S. NO.	Attending only	Sharing by a topic in....	Supervisor Signature	Evaluation
1				
2				
3				
4				
5				
6				

Revised and edited..

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