



DEPARTMENT OF EMERGENCY MEDICINE
COLLEGE OF MEDICINE & DENTISTRY AT THE HILLS
ABBOTTABAD

Emergency Medicine Logbook

3rd Year
MBBS

Year

2025-26



NAME	
FATHER NAME	
ROLL NUMBER	
BATCH	
DATES OF ROTATION	

INTRODUCTION

As part of the structured clinical training in **3rd Year Emergency Medicine**, this logbook outlines the learning objectives for each rotation within the Emergency Department. It is designed to help you monitor your developing competencies in acute care, recognize areas needing improvement, and track your progress throughout the rotation. The logbook also defines the minimum level of clinical competence expected from you by the end of your Emergency Medicine posting.

STRUCTURE

This logbook is divided into two major sections:

- 1. **Clinical Assessment Skills:**
This section focuses on core emergency care competencies, including rapid history taking, focused examination, stabilization, and presentation of emergency cases. Various acute care domains are organized into tables, each with clearly numbered competencies. Shaded boxes indicate where assessment at a particular level is *not required*.
- 2. **Procedural Skills:**
This section includes essential Emergency Medicine procedures such as airway management, IV access, basic trauma assessment, wound care, and initial resuscitation skills. All procedural competencies appear together for easy reference. Additional blank tables are provided at the end for reassessment or for documenting repeated attempts.

Some emergency procedures are *not expected* to be performed independently (Level 5) during 3rd year; these are marked with black boxes.

USING THE LOGBOOK

- Each emergency care domain begins on a separate page with numbered competencies.
- Teachers/trainers should assess your performance during direct observation and mark the level of competence achieved for each skill.
- Shaded or black boxes identify levels that are **not applicable** or **not required** for assessment at this stage.
- The assessor must sign and date each completed competency.
- You are expected to review feedback regularly, identify learning gaps, and take steps to improve your skills in managing emergency conditions.
- This logbook should be carried with you during Emergency Medicine rotations and kept updated as part of mandatory competency documentation.

SECTION 1: HISTORY TAKING, EXAMINATION AND PRESENTATION OF A CASE

3 rd Year Emergency Medicine: Mini-Cex 1						
Patient Name:		Diagnosis:			Date:	
COMPETENCIES		LEVEL OF COMPETENCE			Teacher to sign & Date	
		1. Below Expectation 2. Adequate 3. Excellent				
HISTORY / EXAM / MANAGEMENT PLAN		Below Expectation	Adequate	Excellent	Sign	Date
1	Obtain comprehensive history after introduction and informed consent, asking relevant questions in order to reach a history based differential diagnosis.					
2	Perform complete physical examination, with detailed examination of the involved organ system					
3	Skillfully present patient history, physical examination findings in a systematic, coherent and concise manner, which addresses the chief complaint/problem, identifies pertinent positive and negative findings and reach a logical conclusion					
4	Arrange a focused list of differential diagnosis					
5	Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis					
6	Respect the cultural and ethnic diversity of their patient's beliefs					
7	Display honesty, integrity, respect, and compassion for patient & family					

Good points	
Suggestions for improvement	
Sign / Date	

SECTION 2: PROCEDURAL SKILLS EMERGENCY MEDICINE

LEVEL OF COMPETENCE

Each competency has an expected level of competence to be achieved. The level of competence ranges from observation (1) to independent practice (5). The following list specifies what is meant by each level:

Level 1	Observes	Observes the clinical activity performed by a colleague / senior
Level 2	Assists	Assists a colleague / senior perform the clinical activity
Level 3	Direct supervision	Performs the entire activity under direct supervision of a senior
Level 4	Indirect supervision	Performs the entire activity with indirect supervision of a senior colleague
Level 5	independent	Performs the entire activity without need for supervision

SECTION 2: PROCEDURAL SKILLS EMERGENCY MEDICINE

DIRECT OBSERVATION OF PROCEDURAL SKILLS (DOPS)								
COMPETENCIES		LEVEL OF COMPETENCE					CERTIFICATION	
		1	2	3	4	5	Sign	Date
	IV/IM/SC injection							
	Oxygen therapy							
	ECG Recording							
	Defibrillation							
	Cardiopulmonary Resuscitation							
	Blood glucose measurement by glucometer							
	NG tube passing							
	Ascetic fluid aspiration							
	Venous blood sampling							

	Urethral Catheterization							
	Nebulization							
	Chest X-ray reading							