

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

Medicine & Allied Logbook

3rd & 4th Year MBBS

Year

2025-26



NAME	
FATHER NAME	
ROLL NUMBER	
ВАТСН	
DATES OF ROTATION	

INTRODUCTION

This logbook is an essential component of the structured learning program at the **College of Medicine** and **Dentistry at The Hills, Abbottabad**. It outlines the expected learning objectives for each clinical rotation and serves as a tool for monitoring your progress throughout the training period. Its primary purpose is to help you assess your developing clinical competence, identify learning gaps, and guide your efforts for improvement. In addition, the logbook provides a clear framework for the minimum level of competency you are expected to achieve by the end of each rotation.

STRUCTURE

The logbook is organized into two main sections:

1. Clinical Skills Section:

This section focuses on history taking, physical examination, and case presentation. Each organ system is presented separately, beginning on a new page. The rows list specific competencies, and shaded boxes indicate competence levels that do not require assessment. Some skills—such as certain procedures—are *not* expected to reach a level of independent performance (Level 5), and these are marked with black boxes.

2. Procedural Skills Section:

All procedural competencies across organ systems are compiled in one place. Additional blank tables are provided at the end of the logbook for reassessment or repetition of skills, if required.

Competencies are numbered for clarity, and each is associated with expected levels of proficiency.

USING THIS LOGBOOK

- Each organ system begins on a separate page for ease of organization.
- Teachers/trainers should assess the student's performance by marking the achieved level of competence for each listed skill.
- The faculty assessor should sign and date each entry at the time of observation.
- Students should use faculty feedback to reflect on their clinical performance, recognize areas needing improvement, and plan targeted learning strategies.
- Not all competencies require assessment at every level; shaded or blacked-out boxes indicate levels not applicable for that specific skill.
- The ultimate goal is to support progressive skill development—from observation to independent performance—while maintaining safe and supervised clinical learning.

3 rd	Year General Med	dicine: Mini-Cex	1				
Pati	ent Name:	ı	Diagnosis:			Date:	
	COM	IPETENCIES				Teacher to sign & Date	
Н	ISTORY / EXAM / MA PLAN	ANAGEMENT	Below Expect ation	Adequate	Excellent	Sign	Date
1	Obtain comprehensing introduction and information asking relevant quest reach a history based diagnosis.	ormed consent, tions in order to					
2	Perform complete plexamination, with deexamination of the insystem	etailed					
3	Skillfully present pati physical examination systematic, coherent manner, which addre complaint/problem, pertinent positive an findings and reach a	n findings in a t and concise esses the chief identifies ad negative					
4	Arrange a focused lis diagnosis	t of differential					
5	Effectively communic patient / family regardifferential diagnosis investigations & treat and prognosis	rding the s, intended					
6	Respect the cultu diversity of their pati						
7	Display honesty, inte compassion for patie						
	Good points						
	Suggestions for improvement						
	Sign / Date						

3 rd	Year General Med	icine: Mini-Cex	2				
Pat	ient Name:	I	Diagnosis:			Date:	
	СОМ	PETENCIES			_	Teacher to sign & Date	
F	IISTORY / EXAM / MA PLAN	NAGEMENT	Below Expect ation	Adequate	Excellent	Sign	Date
1	Obtain comprehensive introduction and informasking relevant questi reach a history based diagnosis.	med consent, ons in order to					
2	Perform complete phy examination, with det examination of the inv system	ailed					
3	Skillfully present paties physical examination systematic, coherent amanner, which address complaint/problem, is pertinent positive and findings and reach a lo	findings in a and concise sses the chief dentifies I negative					
4	Arrange a focused list diagnosis	of differential					
5	Effectively communicate patient / family regard differential diagnosis, investigations & treatment and prognosis	ding the intended					
6	Respect the cultur diversity of their patie						
7	Display honesty, integ compassion for patier						
	Good points						
	Suggestions for improvement						

Sign / Date

3 rd	Year General Med	icine: Mini-Cex	3				
Pat	ient Name:	[Diagnosis:			Date:	
	СОМ	PETENCIES				Teacher to sign & Date	
ŀ	IISTORY / EXAM / MA PLAN	NAGEMENT	Below Expect ation	Adequate	Excellent	Sign	Date
1	Obtain comprehensiv introduction and infor asking relevant questi reach a history based diagnosis.	rmed consent, ons in order to					
2	Perform complete phrexamination, with determination of the investment	ailed					
3	Skillfully present patie physical examination systematic, coherent manner, which addres complaint/problem, ic pertinent positive and findings and reach a lo	findings in a and concise sses the chief dentifies I negative					
4	Arrange a focused list diagnosis	of differential					
5	Effectively communication patient / family regard differential diagnosis, investigations & treatment and prognosis	ding the intended					
6	Respect the cultur diversity of their patie						
7	Display honesty, integ compassion for patier						
	Good points						
	Suggestions for improvement						

Sign / Date

4 th	Year General Medicine: Mini-C	ex 1					
Pati	ent Name:	Diagnos	is:		Date:		
	COMPETENCIES	COMPET 1. Below	2. Adequate			Teacher to sign & Date	
Н	ISTORY / EXAM / MANAGEMENT PLAN	Below Expect ation	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	Prepare a diagnostic plan, selecting investigations appropriate for the patient						
6	Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis						
7	Respect the cultural and ethnic diversity of their patient's beliefs						
8	Display honesty, integrity, respect, and compassion for patient & family						
	Good points						
	Suggestions for improvement						

Sign / Date

4 th	Year General Medicino	e: Mini-Ce	ex 2				
Pati	ent Name:		Diagnosis:			Date:	
	COMPETENCIES		COI 1. Belo	TED LEVE MPETENC w Expectat quate llent	Œ	Teacher to Date	sign &
Н	ISTORY / EXAM / MANAG PLAN	EMENT	Below Expectati on	Adequate	Excellent	Sign	Date
1	Obtain comprehensive hist introduction and informed asking relevant questions in reach a history based differ diagnosis.	consent, n order to					
2	Perform complete physica examination, with detailed examination of the involve system	l					
3	Skillfully present patient hi physical examination finding systematic, coherent and of manner, which addresses to complaint/problem, identing pertinent positive and neg findings and reach a logical conclusion	ngs in a concise he chief fies ative					
4	Arrange a focused list of did	fferential					
5	Prepare a diagnostic plan, s investigations appropriate patient	•					
6	Effectively communicate w patient / family regarding to differential diagnosis, inter investigations & treatment and prognosis	the nded					
7	Respect the cultural a diversity of their patient's	and ethnic beliefs					
8	Display honesty, integrity, and compassion for patien						
	Good points						
	Suggestions for improvement						
	Sign / Date						

4 th	Year General Medicine: Mini-C	ex 3				
Patio	ent Name:	Diagnosis:			Date:	
	COMPETENCIES	LEVEL OF C 1. Below Exp 2. Adequate 3. Excellent	pectation e	NCE	Teacher to Date	o sign &
Н	ISTORY / EXAM / MANAGEMENT PLAN	Below Expectati on	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	Prepare a diagnostic plan, selecting investigations appropriate for the patient					
6	Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis					
7	Respect the cultural and ethnic diversity of their patient's beliefs					
8	Display honesty, integrity, respect, and compassion for patient & family					
	Good points					
	Suggestions for improvement					
	Sign / Date					

4 th	Year General Medicine: Mini-C	ex 4				
Patio	ent Name:	Diagnosis:			Date:	
	COMPETENCIES	LEVEL OF C 1. Below Ex 2. Adequate 3. Excellent	pectation e	Teacher to Date	Teacher to sign & Date	
Н	ISTORY / EXAM / MANAGEMENT PLAN	Below Expectati on	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	Prepare a diagnostic plan, selecting investigations appropriate for the patient					
6	Effectively communicate with the patient / family regarding the differential diagnosis, intended investigations & treatment options, and prognosis					
7	Respect the cultural and ethnic diversity of their patient's beliefs					
8	Display honesty, integrity, respect, and compassion for patient & family					
	Good points					
	Suggestions for improvement					
	Sign / Date					

SECTION 2: PROCEDURAL SKILLS 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 MEDICINE

COMPETENCIES	E	XPECT CON	TED LE		F	CERTIFICATION	
	1	2	3	4	5	Sign	Date
GENERAL							
IV/IM/SC injection							
Oxygen therapy							
CARDIOLOGY							
ECG Recording							
Echocardiography							
Exercise tolerance test							
Defibrillation							
Cardiac pacemaker							
Central venous line							
Cardiopulmonary Resuscitation							
DERMATOLOGY							
Punch biopsy (skin)							
ENDOCRINOLOGY							
Blood glucose measurement by glucometer							
Fundoscopy							
GASTROENTEROLOGY							
NG tube passing							
Ascetic fluid aspiration							
Upper GI endoscopy							
Lower GI endoscopy							
Rectal enema							
HEMATOLOGY							
IV cannulation							
Venous blood sampling							
Bone marrow aspiration / trephine biopsy							
HEPATOLOGY							

INIEE					
IIVEL	CTIOUS DISEASES				
	Lumbar puncture				
	Blood cultures collection				
	Throat swab				
NEPH	HROLOGY				
	Urethral Catheterization				
	Renal biopsy				
	Double lumen catheter placement (subclavian / jugular / femoral)				
	Hemodialysis				
NEUF	ROLOGY				
	Fundoscopy				
	Electro-encephalogram				
PSYC	HIATRY				
	Electroconvulsive therapy				
PULN	MONOLOGY				
	Nebulization				
	Pulmonary function tests				
	Pleural fluid aspiration				
	Pleural biopsy				
	Chest intubation				
	Oropharyngeal / nasopharyngeal airway insertion				
	Endotracheal intubation				
	Artificial respiration / ventilation				
	Arterial blood gases				
	Bronchoscopy				
	Chest X-ray reading				
RHEU	JMATOLOGY				
	Joint X-ray reading				
	Synovial fluid aspiration				
	Intra-articular injection				