

**Comprehensive**

# **Policy for House Job**

**COLLEGE OF MEDICINE & DENTISTRY AT THE HILLS,  
ABBOTTABAD**



**For the year  
2025-26**

[www.hills.com.pk](http://www.hills.com.pk)

**Copyright 2025**

All rights are reserved. No portion of this manual may be copied, stored in any retrieval system, or transmitted in any form or by any method—electronic, mechanical, photocopying, recording, or otherwise—without prior written permission from the copyright owner.



**House Job Curriculum**  
**College Medicine & Dentistry at the Hills, Abbottabad**

---

# **House Job Policy: A Comprehensive Framework of Core Competencies**

**Prof. Dr. Zakir Ullah – ENT, FCPS**

Head of ENT Department

**Prof. Sajjad Ahmed, (General Surgery)**

Director Operation

**Assistant Prof. Muhammad Junaid Khan**

Director Medical Education

**Asst Prof. Muhammad Nadeem Zafar, (Pathology)**

Medical Director

**Assistant Prof. Bin te Huda (Peads)**

Coordinator of House Job Policy

---

## **Content**

Introduction .....	1
Section 1: House Job .....	2
Section 2: Framework of House Job Competencies .....	4
Section 3: House Job Governance .....	6
Section 4: Objectives .....	13
Section 5: Basic Procedural Competencies .....	16
Section 6: House Job Competencies .....	19
Section 7: Assessment .....	22

## Introduction

Graduating from medical school is not the end of the journey—it is the beginning of a professional career. At the College of Medicine and Dentistry at the Hills, our graduates can be confident that they have received a high-quality medical education. As they move into their house job, they can look forward to some of the best clinical training available in Abbottabad, Pakistan. This House Job Curriculum serves as a practical guide to the learning environment, professional expectations, and clinical responsibilities that house officers will experience throughout the year. It is designed as a bridge between undergraduate education and future residency training. The structured program strengthens the knowledge, skills, attitudes, and professional behaviors developed during our modern MBBS curriculum. Our house officers gain essential competencies—effective communication, strong clinical skills, ethical practice, patient safety, and collaborative teamwork across multiple disciplines. CMDH also implements a structured portfolio that helps each house officer track and demonstrate their progress. To support the program, a dedicated House Job Placement Coordinator manages administrative processes, while the House Job Committee supervises training activities and ensures quality standards throughout the year.

## Section – 1

### House Job

The House Job is a supervised training period completed in various clinical specialties after fulfilling the graduation requirements set by the Pakistan Medical and Dental Council (PMDC). During this year, the house officer is expected to be an active, self-directed learner, achieving the required outcomes by engaging with diverse learning methods. To develop into a competent future physician, each house officer must gain exposure to a broad range of medical and surgical departments. This experience helps them acquire the essential professional skills needed to function effectively and safely within the healthcare system.

#### 1 Medical House Job

The House Job program is built on the principle of gradually increasing responsibility in patient care, moving the house officer from close supervision toward greater independence. This progression is supported through a spiral learning approach, where important topics and skills are revisited at increasing levels of complexity.

Throughout the year, house officers are expected to deliver clinical services that reflect the full range of competencies outlined in modern healthcare education programs. This structured growth ensures that they develop confidence, sound clinical judgment, and the professional maturity required for safe and effective medical practice.

#### Competencies expected from House Officer as a clinical physician

##### 1. Good clinical care:

- History taking and physical examination
- Safe prescription and keeping relevant medical record
- Time management and organized decision-making
- Good quality care and promotion of patient safety
- Reduce risk of cross infection
- Clinical governance and quality improvement
- Basic nutritional care
- Patient education
- Ethical and legal aspects in general practice

##### 2. Good medical practice

- Self-directed life-long learning
- Use evidence and guidelines that will benefit patient care
- Use audit to improve patient care

### **3. Good clinical care:**

- History taking and physical examination
- Safe prescription and keeping relevant medical record
- Time management and organized decision-making
- Good quality care and promotion of patient safety
- Reduce risk of cross infection
- Clinical governance and quality improvement
- Basic nutritional care
- Patient education
- Ethical and legal aspects in general practice

### **4. Good medical practice**

- Self-directed life-long learning
- Use evidence and guidelines that will benefit patient care
- Use audit to improve patient care

### **5. Teaching and Training**

### **6. Good communication**

### **7. Teamwork within the clinical team and medical context**

### **8. Professional behavior**

### **9. Core skills in acute care**

This document describes the House Job curriculum at College of Medicine and Dentistry at the Hills, Abbottabad, and Alfalah International Hospital & Valley Medical Complex, Abbottabad.

## Section – 2

### Framework for House job Competencies

The House Job Framework is designed to ensure high-quality, effective learning and training for house officers through an innovative, competency-based and performance-driven curriculum. By the end of the house job, each house officer should be able to recognize and manage common clinical conditions as well as related non-clinical situations with confidence and professionalism.

The Framework also addresses essential elements such as supervision, organization of training, assessment, and structured feedback. It defines the knowledge, skills, and attitudes required for safe and effective patient care, while providing an educational blueprint that highlights the core competencies and outcomes expected upon completion of the house job.

For educators and clinical supervisors, this Framework serves as a guide for delivering a structured and well-planned training program. It supports the continuous assessment of a house officer's progress and helps shape their ongoing professional development throughout the year.

#### The Domains of the Framework of house job

**Clinical management**

**Medical practice**

**Professionalism**

**Communication skills**

#### Learning Outcomes

At the end of house job, a house officer will be able to:

- Diagnose and manage diseases by applying the basic medical and clinical sciences effectively in practice.
- Provide comprehensive management that includes health care and disease prevention.
- Demonstrate effective role as a team member and apply the principles of multi-disciplinary approach.
- Know when to ask for opinion from clinical supervisors and senior colleagues.
- Deal professionally with the patient and family.
- Apply effective tools in communication, presentation and leadership.
- Apply the principles of clinical governance.
- Demonstrate life-long commitment toward continuing medical education.

## Section – 3

### House job Governance

House job program is governed by house job committee under the umbrella of clinical affairs, College of Medicine and Dentistry at the Hills. The Dean of Academic Affairs will be the chairperson of house job program.

#### Role of house job placement Coordinator

The role of house officer's placement coordinator:

- Runs administrative affairs related to house job program.
- Deals with issues related to house officer.
- Prepares an ideal training and learning environment.
- Conducts educational activities to enhance house officer's skills.
- Promotes research related to house job.
- Ensures the implementation of the Framework of house job.
- Orients house officers for future career choices and opportunities.
- Check duties and activities of on call house officers

The Placement Coordinator is encouraged to gather regular feedback from rotating house officers on the following areas:

- The range and effectiveness of the teaching methods used.
- The usefulness and quality of the clinical teaching and support provided.
- The level of collaboration with the supervisor in planning learning outcomes and the supervision plan.
- The support provided in offering guidance on future training and career development opportunities.
- The support available for managing performance concerns and resolving conflicts.

#### Role of the Clinical Supervisor

A Clinical Supervisor is a qualified clinician in the teaching hospital responsible for organizing, guiding, and supervising the training of house officers. Serving as a key liaison between junior doctors, senior colleagues, and the administration, the Clinical Supervisor ensures smooth communication and effective training. This role must be undertaken by a senior clinician or the head of the department to guarantee appropriate oversight and expertise. The role of the Clinical Supervisor in clinical teaching involves a wide range of responsibilities, including direct observation, case-based discussions, review of clinical problems and notable cases, joint consultations, formal teaching sessions, demonstrations, participation in clinical procedures, and small-group discussions with other members of the clinical team. The supervisor must support the house officer in the following areas:

##### • Orientation to the Clinical Practice

The Clinical Supervisor must ensure that:

- The house officer is properly introduced to all staff members.

- All team members are aware of the house officer's stage of training and defined responsibilities.

### • **Appropriate Supervision**

The supervisor is responsible for providing a level of supervision that matches the house officer's training stage, as outlined below:

- House officers must not assume primary responsibility for individual patients.
- The Clinical Supervisor, Chief Medical Officer, or senior faculty member must remain physically present in the clinical setting at all times while the house officer is providing patient care.
- If the supervisor is temporarily unavailable, their responsibilities must be formally delegated to a qualified colleague in coordination with the Placement Coordinator.

### • **Professional Education and Training**

The Clinical Supervisor is also responsible for delivering ongoing professional development, which includes:

- Clinical teaching and skills training.
- Guidance on ethical and professional conduct.
- Support in career planning and development.
- Encouragement of self-directed learning and continuous education.

## **House Officer Responsibilities and Rights**

House officers are responsible for their own learning, participation in assessments, and attendance at all scheduled educational activities within their assigned rotations. Every clinical encounter and assigned task is an opportunity to gain new competencies or enhance existing skills. Many essential competencies can also be learned from nurses and other healthcare professionals.

Responsibilities may vary across specialties, but the overall focus remains the same: a gradual and structured increase in responsibility that supports the transition from supervised practice to greater independence in patient care.

## **Role of House Officers**

During the house job, every house officer is expected to:

- Act as a professional and effective member of the healthcare team.
- Ensure safe and responsible patient care at all times.
- Follow the rules, regulations, and protocols of the department to which they are assigned.

### **At Clinics:**

House officers are expected to:

- Take a detailed patient history and perform a thorough physical examination.
- Develop a list of differential diagnoses, establish a working diagnosis, and propose appropriate investigations along with a management plan.

- Obtain approval from the Clinical Supervisor before implementing the management plan.
- Follow the approved management plan, document investigation results, and record any changes in the patient's condition.

---

## **Emergency:**

House officers assigned to the Emergency Department are expected to:

- Respond promptly and appropriately to all emergency cases.
- Conduct thorough patient histories and perform complete physical examinations.
- Maintain accurate and up-to-date Emergency Room (ER) registers.
- Initiate an emergency call when required and understand the importance of effective teamwork in a multi-disciplinary emergency care setting.
- Identify critically ill patients, including those with impending or actual circulatory, respiratory, or renal failure, and recognize situations that may lead to such conditions.
- Assess and manage trauma patients according to established clinical protocols.
- Understand altered physiology in critical care scenarios.
- Demonstrate the ability to evaluate acutely ill patients, order urgent and appropriate investigations, and initiate immediate management.
- Demonstrate safe airway management and basic life support skills, including securing a patent airway, administering oxygen therapy, performing external cardiac massage, bag-valve-mask ventilation, and recognizing conditions that require urgent referral.
- Interpret basic clinical investigations within their clinical context, such as cervical spine X-rays, ECGs, chest X-rays, and arterial blood gases.
- Identify which conditions require hospital admission and which can be managed safely without admission.
- Communicate difficult or bad news effectively to patients and their relatives.
- Apply strategies for managing uncooperative or distressed patients and relatives.
- Practice effective time management and prioritize tasks when handling multiple patients in the Emergency Department.
- Be familiar with and demonstrate competence in common procedural skills, including:
  - Airway management
  - Chest tube insertion
  - Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS)
  - Pediatric resuscitation
  - Venipuncture and venous cannulation
  - Blood gas collection
  - Urinary catheterization
  - Suturing and application of Plaster of Paris

## **Ward and ICU**

House officers assigned to ward duties are expected to:

- Participate in morning rounds with the consultants of the assigned department.
- Maintain an orderly ward register and ensure that all medical orders are executed in a timely manner.
- Hand over patient details accurately to the on-call house officers when relieved from duty.
- During on-call duties, complete all case histories for newly admitted patients, manage investigations by sending and collecting reports, counsel patients regarding their treatment plans, obtain

preoperative fitness clearances from the anesthesia department, explain procedures to patients as advised, and prepare discharge summaries.

## Operation Theater

House officers rotating in the surgical department are expected to:

- Attend and assist consultants during surgical procedures.
- Perform minor procedures under direct supervision.
- Explain planned surgical procedures to patients and obtain informed consent.

## House Officer Rights

House officers are entitled to:

- Receive training under the guidance and supervision of qualified faculty members.
- Access a rich academic and clinical learning environment.
- Avail leave as per college or hospital policies.
- Be informed about assessment and evaluation procedures during different rotations.
- Report any disputes or concerns to the Clinical Supervisor and Placement Coordinator for resolution.

## Applying for House job

Completion of a five-year medical graduation program is a prerequisite for applying to the House Job. Placements begin at the start of the year, and all prospective house officers must submit their applications in advance to be considered. Upon successful completion of the House Job, a certificate will be awarded by the hospital administration. The House Job is a one-year (12-month) program, comprising the following rotations:

- **Internal Medicine:** 3 months
- **Medicine Allied Specialty:** 3 months
- **General Surgery:** 3 months
- **Surgical Allied Specialty:** 3 months

The rotations offered, at **Alfalah International Hospital** and **Valley Medical Complex, Abbottabad**.

### Rules and Regulations:

#### **House Officer Duty Hours, Attendance, and Leave Policy**

- Official duty hours for house officers are from 8:00 AM to 4:00 PM (30 hours per week).
- Attendance is recorded through the biometric system.
- House officers will be on on-call duty every third day, starting at 8:00 AM and continuing until 4:00 PM the following day.
- Leave Policy: House officers are entitled to 10 days of leave during a six-month rotation, which must be requested through a formal application. Any additional leave must be made up by the house officer.
- Rotations will include OPD, OT, ICU, and Emergency services as determined by the respective department.

- House officers are expected to remain on hospital premises during duty hours and may only leave with written permission from their departmental supervisor.
- No Inter-Departmental Transfers: Once a house officer joins a department and the placement is submitted, no transfers between departments will be allowed.
- Probation Period: All house officers will undergo a 15-day probation period, during which the supervisor may take action, including discontinuation of the House Job, if performance or conduct is unsatisfactory.
- Limitations on Legal Authority: House officers are not permitted to issue or sign medical certificates, death certificates, or any other legal documents for patients.
- Professional Conduct: The management reserves the right to expel any house officer involved in political activities, drug use, or other inappropriate/indecent conduct within the hospital premises or in professional settings.

### Starting the house job

Before beginning the first rotation, all house officers will participate in an orientation program. This orientation provides essential information about the hospital, departmental structure, duty schedules, and overall expectations for the House Job.

A typical orientation day will include:

- **Introduction to the House Job Program**, covering educational requirements, assessment methods, counseling services, duties and responsibilities, support systems, medical ethics, and medico-legal considerations.
- **Overview of the House Job Framework**, including assessment processes and the use of the educational portfolio.
- **Safe Patient Care Practices** and strategies for minimizing clinical risk.
- **Medication Safety**, including prescribing guidelines and error prevention.
- **Training on the Computerized Patient Record (CPR) System.**
- **Orientation to the Radiology System** and imaging request protocols.
- **Infection Prevention and Control Practices** aligned with hospital policy.

## House Job Completion Requirements

At the end of the House Job, a **House Job Completion Certificate** will be issued. Before the certificate can be granted, the following documents must be submitted and verified:

- Completed **House Competency Assessment Forms** from all departments in which the house officer has rotated.
- A **complete educational portfolio.**
- **Hospital clearance**, confirming that all administrative, academic, and departmental requirements have been fulfilled.

Any **unapproved absences** during the House Job program will result in disciplinary action as per hospital policy. In addition, any **unapproved absence from an on-call duty** will require the house officer to **repeat the affected placement or rotation** to ensure fulfillment of training requirements.

---

## Section – 4

### Objectives

#### Internal Medicine and Allied

By the end of this rotation, the house officer will be able to:

- Conduct a competent clinical assessment of patients presenting with undifferentiated, common medical conditions.
- Apply a systematic approach to evaluating patients with multi-system illnesses, including the ability to prioritize clinical problems appropriately.
- Recognize and use common diagnostic patterns in the evaluation of frequent medical presentations.
- Demonstrate familiarity with common medical emergencies and trauma situations.
- Order and accurately interpret the key investigations relevant to common medical problems.
- Recommend appropriate initial management plans for common medical conditions.
- Maintain comprehensive, accurate, and regularly updated patient records.
- Establish and maintain a professional relationship with patients throughout their illness, providing clear explanations, emotional support, and guidance to patients and their families or caregivers.
- Obtain informed consent for invasive procedures in an ethical and professional manner.
- Perform **Basic Life Support (BLS)** proficiently.

#### General Surgery & Allied

At the completion of this rotation, the house officer will be able to:

- Undertake a competent clinical assessment of patients presenting with undifferentiated **common surgical conditions**, including those related to the **breast, neck, abdomen, testis, joints, bones, and brain**.
- Demonstrate familiarity with **common surgical emergencies and trauma**.
- Apply a **systematic approach** to evaluating patients with **multi-system illnesses**, including the ability to prioritize presenting problems.
- Understand the management and potential complications of conditions such as **hernias, testicular disorders, common endocrine disorders, breast diseases**, and other surgical emergencies.
- Assess and manage **common co-morbidities** in surgical patients, such as **diabetes mellitus, hypertension, and asthma**.
- Recognize and interpret **diagnostic patterns** used in evaluating common surgical conditions.
- Order and interpret **relevant diagnostic tests** for common surgical presentations.
- Formulate recommendations for the **initial management** of common surgical conditions.
- Maintain **comprehensive and accurate clinical records**, including routine progress updates.
- Demonstrate the ability to maintain **professional and empathetic relationships** with patients, providing clear explanations and support to patients and their families or caregivers.
- Demonstrate the ability to obtain **informed consent** for invasive procedures.
- Successfully complete **Basic Life Support (BLS)** training.

---

## Obstetrics and Gynecology

At the completion of this rotation, the House Officer will be able to:

- Perform a thorough and competent clinical assessment of patients presenting with common obstetric and gynecological conditions, including evaluating pregnant women and obtaining detailed menstrual and reproductive histories.
- Communicate with female patients in a respectful, empathetic, and culturally sensitive manner.
- Demonstrate familiarity with common obstetric and gynecological emergencies, including trauma, and respond appropriately.
- Apply a systematic approach in assessing patients with multi-system involvement, prioritizing clinical problems effectively.
- Acquire essential knowledge and hands-on skills related to labor and childbirth.
- Develop the ability to assess fetal well-being using recognized clinical tools and techniques.
- Competently use a Pinard stethoscope and perform cardiotocography (CTG).
- Understand the management pathways and potential complications of labor and delivery, including abnormal labor, postpartum issues, vaginal bleeding, incontinence, prolapse, and infectious conditions.
- Assess and manage common medical co-morbidities in pregnancy, such as diabetes mellitus, hypertension, and asthma.
- Demonstrate familiarity with diagnostic investigations commonly used in obstetrics and gynecology, including urinary pregnancy tests, quantitative hCG, routine antenatal screening, ultrasound assessments, CTG interpretation, and Pap smear techniques.
- Formulate initial management plans for frequently encountered obstetric and gynecological conditions.
- Maintain accurate, complete, and regularly updated patient records.
- Establish and sustain a professional doctor–patient relationship, providing clear explanations, reassurance, and support to patients and their families or caregivers.
- Obtain informed consent appropriately for all invasive procedures.
- Successfully complete Basic Life Support (BLS) certification

## Pediatrics

By the end of this rotation, the house officer will be able to:

- Conduct a complete clinical history and perform a thorough physical examination of infants and children.
- Elicit additional relevant information to refine differential diagnoses.
- Demonstrate understanding of sensitive issues in examining children and adolescents, particularly those at risk.
- Accurately measure a child's temperature using appropriate methods/sites and record it correctly on a chart.
- Perform otoscopic examination safely and effectively.
- Measure blood pressure in infants and older children using a sphygmomanometer and document the results on growth/monitoring charts.
- Perform routine urinalysis.
- Measure and plot head circumference, weight, and height for infants, children, and adolescents.
- Observe and assess the technique of performing a lumbar puncture.
- Measure peak expiratory flow and understand the basic principles of spirometry.
- Collect microbiological specimens such as urine, throat swabs, nasopharyngeal aspirates, and skin swabs using proper technique.
- Interpret full blood count and peripheral blood film findings.
- Interpret pediatric biochemical results.
- Interpret arterial blood gas (ABG) results, identifying normal and abnormal values.
- Interpret microbiological findings from urine, blood, stool, sputum, nasopharyngeal aspirates, and cerebrospinal fluid.
- Interpret and discuss plain radiographs (chest, abdomen, skull, and musculoskeletal system) in pediatric patients.
- Demonstrate foundational knowledge of the management and treatment of common general pediatric conditions and relevant subspecialties.
- Calculate pediatric drug dosages accurately using weight or body surface area and chart medications correctly, using reliable reference sources.
- Communicate investigation plans and results clearly, accurately, and in age-appropriate, parent-friendly language, ensuring understanding by parents/caregivers.
- Provide information to parents regarding the immunization schedule, including indications and contraindications.
- Administer routine vaccinations using correct site selection, equipment, and injection technique.
- Demonstrate knowledge of pediatric resuscitation across all age groups.
- Provide clear, empathetic, and accurate information to parents and caregivers of children with chronic illnesses or disabilities.
- Explain common pediatric conditions—such as asthma, croup, gastrointestinal illnesses, febrile seizures, otitis media, and upper respiratory tract infections—to parents and children in simple, understandable language.
- Demonstrate effective and precise communication regarding ongoing care, management plans, follow-up requirements, and shared responsibilities.
- Understand and fulfill legal and ethical responsibilities related to identifying and notifying relevant authorities about children who are at risk.
- Demonstrate awareness of the unique challenges faced by children from rural and regional families, including barriers to access, continuity of care, and medical management difficulties, and incorporate this understanding into patient care.

## Section –5

### **Basic Procedural Competencies**

To ensure safe and effective patient care, the house officer must demonstrate competency in the following procedures across all major clinical specialties:

#### **1. Medicine – Basic Procedural Competencies**

- Interpret common abnormalities on electrocardiograms (ECG).
- Interpret common abnormalities on chest radiographs.
- Use an ophthalmoscope correctly for fundoscopic examination.
- Perform arterial and venous blood sampling.
- Set up and administer oxygen therapy to patients.
- Perform urinary catheterization.
- Insert a nasogastric (NG) tube.
- Perform pulse oximetry measurement.
- Measure blood glucose using a glucometer.

#### **2. Surgery – Basic Procedural Competencies**

- Perform proper surgical hand scrubbing techniques.
- Perform arterial and venous blood withdrawal.
- Interpret common abnormalities on abdominal radiographs.
- Interpret common abnormalities on cervical spine radiographs.
- Set up and administer oxygen therapy to patients.
- Perform urinary catheterization.
- Insert a nasogastric (NG) tube.
- Perform suturing of minor wounds and remove sutures safely.
- Assist in applying plaster casts.

#### **3. Pediatrics – Basic Procedural Competencies**

- Perform ear examination using an otoscope.
- Assist in performing lumbar puncture.
- Perform arterial and venous blood withdrawal.
- Assist in cardiopulmonary resuscitation (CPR) for children of all ages.
- Perform suturing of minor wounds and removal of sutures.
- Assist in inserting a Foley catheter.
- Assist in inserting a nasogastric (NG) tube.

---

## **Basic Procedural Competencies in Obstetrics & Gynecology**

- Perform fundal height measurement accurately.
- Detect fetal heart sounds using appropriate instruments.
- Apply and interpret cardiotocography (CTG) tracing.
- Assist in low-risk normal vaginal deliveries.
- Assist in performing and suturing episiotomies.
- Perform speculum examinations safely and appropriately.
- Assign neonatal APGAR scores immediately after birth

## **Basic Procedural Competencies in Emergency Services**

- Administer local anesthetics appropriately.
- Set up and administer oxygen therapy to patients.
- Perform nebulizer or inhaler therapy.
- Assess level of consciousness using the Glasgow Coma Scale (GCS).
- Perform examination for neck stiffness.
- Identify focal neurological signs.
- Assist in conducting Advanced Cardiac Life Support (ACLS), Neonatal Resuscitation, Pediatric/Child Resuscitation, and Advanced Trauma Life Support (ATLS).
- Assist in performing endotracheal intubation.
- Assist in performing chest tube insertion.
- Assist in safe transportation of critically ill children.
- Identify indications for urgent CT scans in cases of trauma, severe headache, altered consciousness, or neurological impairment.

## Section –6

### House Officer Competency

**Assessment during the house officer year** will cover knowledge, attitudes, behaviors, and skills across different domains. House officers are encouraged to learn broadly; however, they are **not expected to be exposed to all skills and procedures** listed in the competency framework.

#### I. Clinical Management

House officers are expected to appropriately assess patients presenting with common and important conditions. This includes accurate identification of symptoms, signs, and problems, constructing differential diagnoses, and managing patients according to their level of responsibility.

##### Competencies in Clinical Management include:

##### 1. Acquisition of Clinical Knowledge

- Acquire relevant theoretical and practical clinical knowledge.

##### 2. Patient Assessment and Management Skills

- Take detailed histories and perform thorough physical examinations.
- Construct differential diagnoses and formulate management plans.
- Plan and interpret investigations appropriately.
- Prescribe medications safely and responsibly.
- Maintain accurate, relevant, and up-to-date medical records.
- Apply the **SOAP (Subjective, Objective, Assessment, Plan)** approach for follow-up of patients.

##### 3. Acute Care Skills

- Acquire and demonstrate core skills in the management of acute medical conditions.

#### II. Medical Practice

House officers are expected to understand and participate in continuous quality improvement to enhance patient care, safety, and management. Competencies include:

##### 1. Self-directed Life-long Learning

- Engage in continuous professional development.

##### 2. Evidence-based Practice

- Use current evidence and clinical guidelines to improve patient care.

##### 3. Teaching and Education

- Participate in teaching sessions and presentations.
- Educate patients effectively about:
  - Disease prevention
  - Investigations and therapeutic plans
  - Lifestyle modifications related to environmental and biological factors (e.g., smoking, alcohol).

#### III. Professionalism

House officers are expected to uphold professional behavior in accordance with community and medical standards. This includes understanding the doctor's role within the healthcare system and community.

**Key competencies include:**

1. **Time Management and Decision-Making**
  - Demonstrate punctuality, prioritization, and sound clinical judgment.
2. **Patient Safety and Teamwork**
  - Make patient safety a priority in clinical practice.
  - Recognize the importance of effective teamwork for safe patient care.
  - Understand principles of quality and safety improvement.
3. **Infection Control**
  - Apply standard infection control practices consistently.
4. **Ethical and Legal Awareness**
  - Understand and apply medical ethical principles.
  - Maintain confidentiality and informed consent.
  - Be aware of the legal framework of medical practice.
5. **Professional Development**
  - Maintain an educational portfolio documenting learning and reflective practice.

**IV. Acute Care**

House officers are expected to recognize critically ill patients and initiate immediate management. They must participate in resuscitation, work with the resuscitation team under supervision, and contribute to clinical decisions.

**Acute Care Competencies include:**

1. **Core Acute Care Skills**
  - Acquire and demonstrate essential skills in the management of acute illness.
2. **Assessment and Management of Critically Ill Patients**
  - Manage fluids safely and appropriately.
  - Reassess patients after initiation of treatment.
  - Request senior assistance when required.
  - Use common analgesics safely and effectively.
  - Ensure safe continuation of care during handovers, on-call shifts, or “hospital at night” scenarios.
  - Confidently initiate advanced life support and resuscitation until a senior colleague arrives.
3. **Comprehensive Patient Care**
  - Provide care that considers both acute and chronic conditions from admission through discharge.

## Section –7

### Assessment

At the end of each rotation, the house officer will be assessed by the supervising faculty. The assessment covers **four key domains**:

1. **Clinical Management**
2. **Medical Practice**
3. **Professionalism**
4. **Communication Skills**

#### Assessment Procedure:

- Each house officer is required to review their assessment form and **sign it**.
  - **Note:** Signing confirms that the house officer has been informed of the evaluation; it **does not imply agreement** with the assessment.
- **Performance Evaluation:**
  - A score of **less than 60%** indicates performance below the expected standard.
  - In such cases, the management may recommend **repeating the rotation or specific parts** of it, following appropriate consultations.
- **Disciplinary Action and Grievances:**
  - Any disciplinary concerns or grievances must be submitted to the **Coordinator of the House Job Program**.
  - The coordinator will review the matter and discuss it with hospital management for further action.

### House officer Assessment Criteria

#### 1- Clinical Management

- Acquires clinical knowledge
- Takes History and perform Physical Examination
- Constructs differential diagnosis
- Plans appropriate investigation and management
- Applies SOAP in follow-up of patients
- Maintains quality medical records
- Recognizes and assesses acutely ill patients

#### 2- Medical Practice

- Demonstrates evidence of self-learning
- Gives comprehensive case presentation
- Provides appropriate patient instructions
- Maintains regular attendance
- Demonstrates required technical skills

### **3- Professionalism**

- Manages time appropriately
- Practices the principles of patient safety
- Applies principles of medical ethics
- Demonstrates self-confidence
- Acknowledges own limitations and seeks assistance

### **4- Communication Skills**

- Maintains professional practice
- Communicates well with patient and/or family
- Communicates effectively with the team and others

**APPLICATION FORM FOR HOUSE JOB IN CLINICAL DEPARTMENTS OF CMDH's TEACHING HOSPITAL ALFALAH INTERNATIONAL & VALLEY MEDICAL COMPLEX, ABBOTTABAD**  
**Session: 2025-26**

Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Present Address \_\_\_\_\_

Permanent Address \_\_\_\_\_



Contact No. \_\_\_\_\_

CNIC No. \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Number of attempts and marks in passing each Professional Examination: -

Professional	Attempts	Marks Obtained	Total Marks	Year of Passing
1 <sup>st</sup> Professional				
2 <sup>nd</sup> Professional				
3 <sup>rd</sup> Professional				
Final Professional				

House job (if previously done) with name of Institution and period \_\_\_\_\_

Attested Photocopies of the following documents must be attached with the form: -

- 1. Academic Attempt Certificate
- 2. SSC Certificate/DMC
- 3. Three latest Passport size color photographs
- 4. F.Sc Certificate/DMC
- 5. Character certificate from the institute last attended
- 6. CNIC
- 7. PM&DC provisional registration

I solemnly declare that: -

- a. The above information is correct
- b. That I have read the terms and conditions of the house job in announcement, and am agreeing to abide by them as well as rules and regulations of the Institute implemented from time to time in all respects.

**Note: Please, bring the original Certificates with you at the time of interview.**

**Initial Signature of Candidate**  
(On prescriptions to the patients)

**Full Signature of Candidate**



## HOUSE OFFICER CLINICAL ROTATION EVALUATION FORM

### About this form

The purpose of this form is to provide feedback to the intern on their performance and to support the decision about satisfactory completion of house job. The form should be filled by the supervisor at the end of rotation.

SUPERVISOR INFORMATION						
<b>NAME:</b>	<b>JOB TITLE:</b>					
<b>ORGANIZATION'S NAME:</b>	<b>PHONE NUMBER:</b>					
<b>EMAIL ADDRESS:</b>						
HOUSE OFFICER INFORMATION						
<b>NAME:</b>						
<b>ROTATION STARTING DATE (D/M/Y):</b>				<b>COMPLETION DATE (D/M/Y):</b>		
ABOUT THE HOUSE OFFICER PERFORMANCE						
1. Please evaluate this house officer on the following items by checking the appropriate rating.	<b>Excellent</b>	<b>Very Good</b>	<b>Satisfactory</b>	<b>Needs improvement</b>	<b>Unsatisfactory</b>	<b>Not Applicable</b>
<b>Punctuality:</b> Arrived hospital on-time.						
<b>Professionalism:</b> Behaved in a professional manner						
Demonstrates all aspects of <b>safe patient care</b>						
<b>Communication skills</b> With patients, their family & doctors						
<b>Written communication skills</b> (History taking & Documentation)						
<b>Computer Skills</b>						
<b>Time management</b> on workload demands						
<b>Safely perform common procedures</b> (Dressing , wound suturing, catheterization, blood sampling)						
<b>Do Evidence-based management</b>						

Participate in <b>quality assurance</b> , quality improvement, risk management and incident reporting						
Identify <b>appropriate investigations</b> and interpret it accurately						
<b>Prescribe medications safely</b> and effectively including fluid, electrolytes & blood products						
<b>Emergency management:</b> Identifies deteriorating or critically unwell patients & initiates BLS management						
Demonstrate critical thinking and <b>problem solving skills</b>						
<b>Comorbidities:</b> Identifies all comorbidities and initiates appropriate management.						
<b>Teamwork:</b> Works effectively as a member of the inter-professional team and positively influences team dynamics.						

2.	What do you consider the house officer strengths?				
3.	In what areas do, the house officer needs improvement.				
4.	Overall, how do you rate your experience with <b><u>this house officer</u></b>	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Poor</b>

<b>SPERVISOR'S SIGNATURE</b>	<b>DATE</b>
------------------------------	-------------



**College Medicine & Dentistry at the Hills,  
Abbottabad**