#### PROFORMA

Name of the Institution			
Address		1	
Memo No.	Fax No.	Da	ted:
Internship	Completion Certificate		
-		tad into	the first wear
This is to certify that class of M.B.B.S. course in this college on			the mst year
He / She passed the 3rd Professional M West Bengal University of Health Science and has satisfactorily completed the or	ces, Kolkata, held in the mont	h of	
Housemanship) as a Resident Intern from			
Domanton anta (S.	a a dallat		Duration
Departments/Sp Community Medicine	pecialist		12 weeks
General Medicine			6 Weeks
Psychiatry		**	2 weeks
Pediatrics	*		3 weeks
General Surgery		#3 #3	6 Weeks
Anesthesiology and Critical Care			2 weeks
Obstetrics and Gynaecology including F	amily Welfare and Planning		7 Weeks
Orthopaedics including Physical Medici	The state of the s		2 weeks
Emergency/ Trauma/ Casualty		:	2 weeks
Forensic Medicine and Toxicology		:	1 week
Dermatology, Venereology and Leprolog	Sy.	:	1 week
Otorhinolaryngology		:	2 weeks
Ophthalmology			2 weeks
Respiratory Medicine, DOTS TB, Blood	bank, Geriatric Medicine	:	2 weeks
Lab medicine & Radiodiagnosis		:	2 weeks
He / She is eligible for the award of M.B.I	B.S. degree.		16
He / She performed emergency duties as during Internship training in this Institut		artmen	ts concerned
No acts of indiscipline or misbehavior to		eported	to me
	, and indepting united und it	portea	
	Signature with Seal: DEAN OF STUDENT AFFAIR College Name:	RS:	

#### DURATION and PERIOD OF compulsory rotating medical internship

#### 1. Total Duration

Every candidate shall be required to undergo a compulsory rotating medical internship (CRMI) for a minimum period of twelve months, to the satisfaction of the college authorities and the University concerned after passing the final Bachelor of Medicine and Bachelor of Surgery (MBBS) examination/ National Exit Exam for MBBS (Next), so as to be eligible for the award of the MBBS degree by the respective Universities.

#### 2. Period for Completion

- (a) The Internship shall be completed within two years of passing the final MBBS or Foreign Medical Graduate Examination (FMGE) or Next Step-1 examination, whenever in force.
- (b) The minimum duration of compulsory rotating medical internship may be extended appropriately by a reasonable period on recommendation by the College or University for reasons including but not limited to:
  - (i) insufficient period of attendance; or .
  - (ii) any exigency such as disasters or unforeseen circumstances in the country as notified by the Government of India or any competent authority duly authorized to do so.
- (c) The duration of internship may be curtailed or temporarily suspended or even withdrawn or cancelled at any time by the institution or University according to the prevailing rules or regulations of the relevant authority, provided—
  - (i) the registrant, due to any reason whatsoever, desires not to pursue CRMI; or
  - (ii) the registrant is not found to have fulfilled eligibility requirements; or
  - . (iii) there are proven acts of indiscipline; or
  - (iv) there are proven acts of professional misdemeanor or misconduct; or
  - (v) any other acts or actions including those violating law of the land.
- (d) An intern shall be allowed to avail the following leaves;-

#### A. Normal Leave:

- (i) Interns shall be permitted a maximum of fifteen days leave with prior permission, during the entire period of internship.
- (ii) The entire period of fifteen days cannot be availed during any of the one week or two weeks postings applicable to a single department or specialty

#### 1. SPECIALTIES FOR TRAINING:

(a) Time Distribution for Internship- An intern shall be posted by rotation as specified in the Table below:-

Sr. No.	Nature of Posting	Department / Specialty	Duration		
(1)	(2)	(3)	(4)		
1.	Mandatory Exclusive	Community Medicine	12 weeks		
2.	Mandatory Exclusive	General Medicine	6 Weeks		
3.	Mandatory Exclusive	Psychiatry	2 weeks		
4.	Mandatory Exclusive	Pediatrics	3 weeks		
5.	Mandatory Exclusive	General Surgery	6 Weeks		
6.	Mandatory Exclusive	Anesthesiology and Critical Care	2 weeks		
7.	Mandatory Exclusive	Obstetrics and Gynaecology including Family Welfare and Planning	7 Weeks		
8.	Mandatory Exclusive and Concurrent PMR with Orthopedics	clusive Orthopaedics including tt PMR Physical Medicine and			
9.	Mandatory Exclusive	Emergency/ Trauma/ Casualty	2 weeks		
10.	Mandatory Exclusive	Forensic Medicine and Toxicology	1 week		
11.	Mandatory Exclusive	Dermatology, Venereology and Leprology	1 week		
12.	Mandatory Exclusive	Otorhinolaryngology	2 weeks		
13.	Mandatory Exclusive	Ophthalmology	2 weeks		
14.*	Elective 1 Respiratory Medicine, DOTS TB, Blood bank, Geriatric Medicine		2 weeks		
15.*	Elective 2	Lab medicine & Radiodiagnosis			
16.	Elective AYUSH	Ayurveda/Yoga/Unani/Siddha/ Homeopathy/Sowa Rigpa	1 week		

<sup>\*</sup>Note 1: Electives may be selected by candidates as per their choice:

# Community Medicine- 12 weeks

Name of the Intern:	Batch No	
Academic Year		

Skill	Obser	ved	Assis	ited	Done V	on and a same	Able t		Signature of
OAAA	Date	No	Date	No	Date	No	Date	No	authority
1. An intern must:  a) Be able to diagnose common ailments and advise primary care  b) Demonstrate knowledge on 'Essential drugs' and their usage;  c) Recognize medical emergencies, resuscitate and institute initial treatment and refer to a suitable institution/ suggest to the patient an alternative health care facility if he/ she wants to know about the same	XXXXX	xxxx	XXXXX	XXXX	XXXXX	xxxxx			
An intern must be familiar with all National Health Programmes	xxxxxx	xxxx	xxxxx	XXXX	xxxxx	xxxxx			
Intern must- a) Gain full expertise in immunization against infectious disease; b) Participate in programmes related to prevention and control of locally prevalent endemic diseases including nutritional disorders; c) Learn skills in family welfare planning procedures.	xxxxxx	xxxx	xxxxx	xxxx	XXXXX	XXXXX			
An intern must- Gain capabilities to conduct programme's on health education; a) Gain capabilities to use Audio visual aids; b) Acquire capability of utilization of scientific information for promotion of community health.	XXXXXX	xxxx	XXXXX	xxxx	XXXXX	XXXXX			
An intern must be able to provide health education to and individual/community on- a) tuberculosis; b) small family, spacing, use of appropriate contraceptives; c) applied nutrition and care of mothers and children; d) immunization.	p in	XXXX	XXXXX	xxxx	xxxxx	xxxxx			

Skill	Obse	rved	Assis	sted	Done U		Able indeper		Signature of
	Date	No	Date	No	Date	No	Date	No	authority
An intern will be able to- a) Participate in family composite health care (birth to death), inventory of events; b) Participate in use of the modules on field practice for community	xxxxxx	xxxx	xxxxx	XXXX	xxxxx	xxxxx			
health, e.g., safe motherhood, nutrition surveillance and rehabilitation, diarrheal disorders, etc;		el e	musiki Z						na leen
c) Participate in and maintain documents related to immunisation and cold chain;		Ų							
d) Acquire competence in diagnosis and management of common ailments e.g. malaria, tuberculosis, enteric fever, congestive heart failure, hepatitis, meningitis acute renal failure, etc.			ZI IAI		e i di sala		2000 a s		
An intern should be capable of establishing linkages with other agencies as water supply, food distribution and other environmental or social agencies.		7 8	xxxxxx	xxxx	xxxxxx	xxxx	XXXXXX	xxxxx	
An intern should acquire managerial skills including delegation of duties to and monitoring the activities of paramedical staff and other health care professionals.			xxxxxx	xxxx	xxxxxxx	xxxx	xxxxxx	xxxxx	
An intern shall attend at least one school health programme with the medical officer.	xxxxx	xxxx	xxxxx	xxxx	1 42	1 100	xxxxxxx	xxxxx	
An intern must be able to- a) Acquire proficiency in Family Welfare Programmes (antenatal care, normal delivery, contraception, b) Undergo village attachment of	xxxxx	XXXX	XXXXX	XXXX	2.0	118.	xxxxxx	xxxxx	
at least one week duration to understand issues of community health alongwith exposure to village health centres ASHA c) Participate in Infectious Diseases Surveillance and Epidemic Management						Lymeet		Mr Sa	

mervisor.		Dep	artment/ Specia	altv:	ττ	Unit:		
	]							
		_			a pulle IT			
Place of posting	Departmen	nt	Duration		Signatur	e		
1	Gen Medicii	ne	3 weeks			- 1		
2	Gen Surger	Gen Surgery						
3	Obs- Gyna	e	3 weeks					
4	Community Me	dicine	3 weeks					
(a) (b) (c)	Knowledge Patient Care Procedural Skills	D: Nee	C: Average ds further traini g may be based	1				
(b) (c) (d) (e) (f) (g)	Patient Care Procedural Skills Independent care Communication S System Based Prace Professionalism	D: Need Scoring Skills Skills Stice	ds further traini	1				
(b) (c) (d) (e) (f)	Patient Care Procedural Skills Independent care Communication S System Based Prace	D: Need Scoring	ds further traini g may be based	1				
(b) (c) (d) (e) (f) (g)	Patient Care Procedural Skills Independent care Communication S System Based Prace Professionalism Life-long Learning	D: Need Scoring	ds further traini	1				
(b) (c) (d) (e) (f) (g) (h)	Patient Care Procedural Skills Independent care Communication S System Based Prace Professionalism Life-long Learning Strength	D: Need Scoring	ds further traini g may be based	1				
(b) (c) (d) (e) (f) (g) (h)	Patient Care Procedural Skills Independent care Communication S System Based Prace Professionalism Life-long Learning	D: Need Scoring	ds further traini g may be based	1				

#### General Medicine- 6 weeks

Skill	Obse	rved	Assis	sted	Done l		Able indepen		Signature of
\$1.099M.U.0.0.000	Date	No	Date	No	Date	No	Date	No	authority
Intern must observe/assist – a) Proctoscopy, Ophthalmoscopy/ Otoscopy, Indirect laryngoscopy; b) Therapeutic procedures; c) Urethral catheterization, Insertion of Ryle's Tube, Pleural, Ascitic fluid aspiration; d) Cerebrospinal Fluid (CSF) aspiration, Air way tube installation; e) Oxygen administration, etc.;					XXXX	xxxxx	XXXX	XXXXX	
Intern must observe/assist – Biopsy Procedures: Liver, Kidney, Skin, Nerve, Lymph node, and muscle biopsy, Bone marrow aspiration, Biopsy of Malignant lesions on surface, nasal/nerve/skin smear for leprosy under supervision;				•	XXXXX	XXXXX	XXXXX	XXXXX	
Intern -should be familiar with life-saving procedures, including use of aspirator, respirator and defibrillator, cardiac monitor, blood gas analyser;	xxxxxx	xxxx	xxxxx	xxxx	Si .		xxxx	xxxx	
Intern should be able to advise about management and prognosis of acute & chronic illnesses like viral fever, gastroenteritis, hepatitis, pneumonias, myocardial infarction and angina, TIA and stroke, seizures, diabetes mellitus, hypertension renal and hepatic failure, thyroid disorders and hematological disorders. He should participate in counseling sessions for patients with noncommunicable diseases and tuberculosis, HIV patients, etc.	XXXXX	XXXX	XXXXX	xxxx			XXXX	XXXX	

Skill	Observed		Assisted		Done Under supervision's		Able to do independently		Signature of authority
Skiii	Date	No	Date	No	Date	No	Date	No	authority
Intern should be able to confirm death and demonstrate understanding of World Health Organization cause of death reporting and data quality requirements	xxxxxx	xxxx	xxxxx	xxxx	100		XXXX	XXXX	
Intern should be able to demonstrate understanding of the coordination with local and national epidemic management plans	xxxxx	xxxx	XXXXX	xxxx			XXXX	xxxx	
Intern should be able to demonstrate prescribing skills and demonstrate awareness of pharmaco-vigilance, antibiotics policy, prescription audit and concept of essential medicines list		xxxx	xxxxx	xxxx			XXXX	XXXX	

# Certifiable skills General Medicine, Applied Physiology, Applied Biochemistry, Pharmacology, Pathology & Blood banking & Microbiology

Skill	Obs	erved	Anna de Contro	Under vision's	Able to		Signature of
Skill	Date	No	Date	No	Date	No	authority
a) Blood transfusion b) Pleural & ascetic fluid aspiration c) Dark ground illumination microscopy	1		xxxxx	xxxxx	xxxxx	XXXXX	
d) Perfom, analyse & interpret pulmonary function e) Be able to prepare a list of essential drugs for a health care facility						surber o	
a) Intradermal injection (D) b) Urinary catheterization (D) c) Basic life support (D) d) Ryle's tube insertion (D)	xxxxx	xxxxxx			xxxxx	xxxxx	
e) Cardiac resuscitation (D) f) Bedside urine analysis (D) g) Writing a prescription (D)							
h) Audit of a given prescription (D)  i) Perform, analyze, and interpret measurements of cardiac and vascular function (e.g. HR, BP, ECG) (D)					F 1877		
<ul> <li>j) Perform, analyze, and interpret CNS function (e.g. nerve conduction velocity, EMG, cranial nerve examination) (D)</li> </ul>					1		
k) Estimate glucose, creatinine, urea and total proteins, A:G ratio in serum (D)							
l) Estimate serum total cholesterol, HDL cholesterol, triglycerides(D)							
m)Estimate serum bilirubin, SGOT/SGPT/alkaline phosphatase (D)							
n) Estimate calcium and phosphorous(D)							

OLUM	Obse	rved	Done		Able t		Signature of
Skill	Date	No	Date	No	Date	No	authority
a) Venipuncture (I) b) Intramuscular injection (I) c) Subcutaneous injection (I) d) Intra Venous (IV) injection(I) e) Interpret blood parameters, haematocrit, RBC count, lactate, glucose f) Setting up IV infusion and calculating drip rate (I) g) Oxygen therapy (I) h) Aerosol therapy / nebulization (I) i) Peripheral blood smear interpretation (I) j) Peripheral blood smear preparation, staining and interpretation (I) k) Urine routine and microscopy examination (I) l) Manual blood sugar estimation (I) m) CSF examination (I) n) Blood grouping (I) o) Saline cross match method (I) p) Gram's stained smear interpretation (I) q) KOH examination of scrapings for fungus (I) r) ZN stained smear interpretation (I) s) Wet mount examination of stool for ova and cysts (I) t) Identification of blood parasites	XXXXXX	XXXX	XXXX	XXXX			

Name:	alemberal I mole	overden -			t / Intern ID:	** **
Supervisor:		Depa	rtment/	Specialty:		_Unit:
Dates:		to			Leaves:	days
to						
			RATING			10 - 10
	PLEASE RA	ATE ON A	SCALE	OF A, B, C	, D WITH	
		A: Outs	tanding I	3: Good		
		(	C: Average	e		
		D: Need	s further	training		
		Scoring	may be b	ased on		
(a)	Knowledge					
(b)	Patient Care					
(c)	Procedural Skills					
(d)	Independent care					
(e)	Communication S					
(f)	System Based Prac	ctice				
(g)	Professionalism					
(h)	Life-long Learning	g				
		F	EEDBAC	K		
	Strength					
Area	of improvement	7				
83. 8	Comments					

# Psychiatry- 2 weeks

Skill	Obser	Observed		Assisted		Done Under supervision's		Able to do independently	
(I) (-)	Date	No	Date	No	Date	No	Date	No	authority
a) Intern must be able to- Diagnose and manage common psychiatric disorders;			xxxxx	xxxx	xxxxx	XXXXX	XXXXX	XXXXX	
<ul> <li>b) Identify and manage psychological reactions;</li> </ul>									
c) Diagnose and			-31/1	27.0		500 = 5.5			
d) Manage behavioral	- n -D	21 =			XIV III	BUT SE	EJL159		
disorders in medical and surgical patients;		teati	1 July 1	li e L	00 m				
e) ECT administration;		100	en wi	1-65.05	H 1				
f) Therapeutic counseling and follow-up.		ion h		Trans.	ate 12				

pervisor	and the same of the same of	Dena	rtment/S	pecialty:	T	nit:
*						
ates:		to			Leaves:	days
(hr <u></u>						
			RATING			
	PLEASE RA	ATE ON A	SCALE (	OF A, B, C,	D WITH	
		A: Outs	tanding B	: Good		
		(	C: Average			
		D: Need	s further t	raining		
		Scoring	may be be	ased on		
(a)	Knowledge					
(b)	Patient Care		•			
(c)	Procedural Skills					
(d)	Independent care					
(e)	Communication S					
(f)	System Based Prac	ctice				
(g)	Professionalism					
(h)	Life-long Learning	3				
		101	EEDBACI	7		
		F)	EEDBACI			
	Strength					11 - 1-
Area	of improvement					
	Comments					

Signature of student

Signature of HOD

## Paediatrics- 3 weeks

Skill	Obser	rved	Assis	sted		Under vision's	Able indepen	to do ndently	Signature of
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
Diagnose and manage common childhood disorders including neonatal disorders and acute emergencies, examining sick child making a record of information;					xxxx	xxxxx	xxxxx	xxxxx	
Diagnostic techniques: blood collection (including from femoral vein and umbilical cord), drainage of abscess, collection of cerebrospinal, pleural and peritoneal fluids, suprapubic aspiration of urine;	10	y din	Minas LU -		xxxxx	xxxxx	xxxxx	xxxxx	æ
Techniques related to patient care: immunization, perfusion techniques, nasogastric tube insertion, feeding procedures, tuberculin testing & breastfeeding counselling;					xxxxx	xxxxx	xxxxx	xxxxx	
Use of equipments: vital monitoring, temperature monitoring, resuscitation at birth and care of children receiving intensive care;					xxxxx	xxxxx	xxxxx	xxxxx	
Institute early management of common childhood disorders with special reference to paediatric dosage and oral rehydration therapy;					xxxxx	xxxxx	XXXXX	xxxxx	er e
Screening of new born babies and those with risk factors for any anomalies and steps for prevention in future; detect congenital abnormalities;					xxxxx	xxxxx	xxxxx	xxxxx	
Recognise growth abnormalities; recognise anomalies of psychomotor development;	-111 15				xxxxx	xxxxx	xxxxx	xxxxx	

Skill	Obse	rved	Assi	sted		Under vision's	Able		Signature of
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
Assess nutritional and dietary status of infants and children and organize prevention, detection and follow-up of deficiency disorders both at individual and at community levels, such as:  > protein-energy malnutrition > deficiencies of vitamins especially A, B, C and D;	Y I	moter of	CONTRACTOR		xxxxx	xxxxx	xxxxx	XXXX	
> Iron deficiency  An intern should be familiar with life-saving procedures, including use of aspirator, respirator, cardiac monitor, blood gas analyser.	xxx	xxx	xxx	xxx			xxx	xxx	0, 22
An intern should be able to advise about management and prognosis of acute and chronic illnesses like viral fever, gastroenteritis, hepatitis, pneumonias, congenital heart diseases, seizures, renal and hepatic diseases, thyroid disorders and hematological disorders. She/he should participate in counseling sessions with parents including HIV counseling	XXX	xxx	xxx	XXX			XXX	xxx	

## Certifiable skills - Paediatric Medicine

Skill	Obse	erved		Under vision's	Able to do independently		Signature of authority
	Date	No	Date	No	Date	No	authority
Setting up Pediatric Intraosseous line (O)			xxxxx	xxxxx	xxxxx	xxxxx	
Neonatal resuscitation(D)	xxxxx	xxxxxx			xxxxx	xxxxx	
• Setting up Pediatric IV infusion and calculating drip rate (I)	xxxxxx	xxxx	xxxx	xxxx	ATTI	of contact	

RATING PLEASE RATE ON A SCALE OF A, B, C, D WITH A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement Comments	Name:	- Sud-Mills	I Tanadi	1,00	Student	/ Intern ID: _	
RATING PLEASE RATE ON A SCALE OF A, B, C, D WITH A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement Comments	Supervisor:	46 minuted and	Depa	rtment/S	pecialty:_	1	Unit:
RATING PLEASE RATE ON A SCALE OF A, B, C, D WITH A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement Comments	Dates:		to	Jane 1	1	Leaves:	days
RATING PLEASE RATE ON A SCALE OF A, B, C, D WITH A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement Comments	to						
RATING PLEASE RATE ON A SCALE OF A, B, C, D WITH A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement Comments							
RATING PLEASE RATE ON A SCALE OF A, B, C, D WITH A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement Comments							
PLEASE RATE ON A SCALE OF A, B, C, D WITH  A: Outstanding B: Good  C: Average  D: Needs further training  Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments							
A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments							
C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments		PLEASE R				D WITH	
D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments							
Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments							
(a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments							
(b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments	(-)	V 1. 1	Scoring	may be be	asea on		
(c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments	(3)						
(d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments							
(e) Communication Skills (f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments			2				
(f) System Based Practice (g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments	//4/10/4/						
(g) Professionalism (h) Life-long Learning  FEEDBACK  Strength  Area of improvement  Comments		System Based Pra	ictice				
Strength Area of improvement Comments	(g)	1.5					
Strength Area of improvement  Comments	(h)	Life-long Learnin	ng				
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## General Surgery- 6 weeks

Skill	Obser	rved	Assis	sted	y see a see	Under vision's	G272311	e to do endently	Signature
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
An intern must observe- venesection or venous access; tracheostomy and endotracheal intubation; catheterization of patients with acute retention or trocar cystostomy; drainage of superficial abscesses; basic suturing of wound and wound management (including bandaging); biopsy of surface tumours; perform vasectomy.			XXXX	XXX	XXXXX	XXXXX	XXXXX	XXXX	
Resuscitation of critical patients; Basic surgical procedures for major and minor surgical illnesses; Wound dressings and application of splints; Laparoscopic/ Minimally Invasive surgery; Lymph node biopsy.			•						
Advise about prognosis of acute and chronic surgical illnesses, head injury, trauma, burns and cancer. Counsel patients regarding the same;  Advise about rehabilitation of patients after surgery and assist them for early recovery;  Should be able to demonstrate		xxxxx	XXXXX	XXXX			XXX	XXX	
understanding of World Health Organisation cause of death reporting and data quality requirements; Should be able to demonstrate understanding of the use of national and state/ local cause of death statistics.									

# Certifiable skills - General Surgery, Applied Anatomy, Biomedical waste management

Skill	Obse	erved		Under vision's	Able indeper		Signature of
	Date	No	Date	No	Date	No	authority
Segregation and disposal of sharps, plastics, OT material, HIV/ HBsAg/ HCV/corona virus infected material (O)			xxxxx	xxxxx	XXXXX	xxxxx	
Management of trauma life support(D)	XXXXX	XXXXXX			xxxxx	xxxxx	- 1
<ul> <li>Basic suturing (I)</li> <li>Basic wound care (I)</li> <li>Basic bandaging(I)</li> </ul>	xxxxxx	xxxx	xxxx	xxxx	L'hr		
<ul> <li>Incision and drainage of superficial abscess(I)</li> </ul>		ded pe	bjul al.				
Early management of trauma     (I)							
Identification of structures on X-rays/ ultrasound						o iba ni	

III ARVICA	not the state of t	D	1/6		/ Intern ID: _		
upervisor	011111111111111111111111111111111111111	Dера	artment/ S	pecialty: _	t	nit:	
ates:		to	/		Leaves:	days	
	0 0 000						
			RATING				
	PLEASE RA			FABCI	WITH		
			standing B:		7 11111		
			C: Average	0004			
			ls further tr	aining			
			may be ba				
(a)	Knowledge		.5)				
(b)	Patient Care						
(c)	Procedural Skills						
(d)	Independent care						
(e)	Communication S	kills					
(f)	System Based Prac	ctice					
(g)	Professionalism						
(h)	Life-long Learning	5					
		E	EEDBACK				
	Strength	1	LLDDITCK				
Area	of improvement						
* *	Comments						

Signature of student

Signature of HOD

## Anesthesiology & Critical care - 2 weeks

	Skill	Obse	rved	Assi	sted		Under vision's	Able		Signature of
	An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
(i)	Pre-anaesthetic checkup and prescribe pre-anaesthetic medications;		B			xxxxx	xxxxx	xxxxx	xxxxx	
(ii)	Venepuncture and set up intravenous drip;						-			
(iii)	Laryngoscopy and endotracheal intubation;		,510	Track T						N
(iv)	Lumbar puncture, spinal anaesthesia and simple nerve blocks;		MAR Deng	n'z i d ms	340 i 190-l		126	£ 4		
(v)	Simple general anaesthetic procedures under supervision;			to A.J.	-2	3				
(vi)	Monitor patients during anaesthesia and in the post- operative period;		gand o	Lesti	pitron		-	la lera		4
(vii)	Maintain anaesthetic records;			-			77 -	3 1495		41
(viii	Perform cardio-pulmonary					16	tac'ny	p libro mi		
	resuscitation correctly,					934	e faul	NO TOP		
	including recognition of cardiac arrest.				100	27 m	ule 's	anno aet		(6)
(i)	Anaesthesia for major and				5	art in 1	i gest	PRINT.		
(IX)	minor surgical and other						10	XIBS V		
	procedures.					9-11	11-1			
(i)	Counseling and advise regarding various methods of anaesthesia;	xxxxx	xxxxx	xxxxx	xxxxx			XXX	XXX	
(ii)	Recogniseproblems associated with emergency anaesthesia;					7	fistige.	-70	ita ia	-16
(iii)	Recognise and assist in treating complications in the post-operative period.						P.	Byener	e)	

upervisor		Depa	artment/ S	Specialty:		Unit:
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		_				
			RATING			
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			C: Average			
			ls further may be b	The state of the s		
(a)	Knowledge	Scoring	muy be b	useu on		
(b)	Patient Care					
(c)	Procedural Skills		*			
(d)	Independent care					
(e)	Communication S	kills				
(f)	System Based Prac	tice				
(g)	Professionalism					
(h)	Life-long Learning	g				
1		F	EEDBAC	K		
	Strength					
Area	a of improvement					
	Comments					
	Signature of studen	nt		Si	gnature of HC	D

## Obstetrics & Gynecology including Family Welfare & Planning- 7 weeks

Skill	Obse	erved	Assis	ted	THE RESERVE OF THE PARTY OF THE	Under vision's	And the second	to do ndently	Signature
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	of authority
Diagnosis of early pregnancy and provision of ante-natal care; antenatal pelvic assessment and detection of cephalo-pelvic disproportion;	xxxx	xxxx					xxx	xxxx	
<ul> <li>i) Diagnosis of pathology of pregnancy related to:</li> <li>&gt; abortion;</li> <li>&gt; ectopic pregnancy;</li> <li>&gt; tumours complicating pregnancy;</li> <li>&gt; acute abdomen in early pregnancy;</li> <li>&gt; hyperemesis gravidarum;</li> </ul>	xxxx	XXXX					xxx	xxxx	
Detection of high risk pregnancy cases and give suitable advice e.g. PIH, hydramanios, antepartum haemorrhage, multiple pregnancies, abnormal presentations and intrauterine growth retardation;	XXXX	xxxx			0-		XXX	xxxx	
Induction of labor and amniotomy under supervision, Management of normal labor, detection of abnormalities, post-partum hemorrhage and repair of perennial tears,	xxxx	xxxx					XXX	xxxx	
Assist in forceps delivery;	xxxx	xxxx					xxx	xxxx	
Detection and management of abnormalities of lactation;	xxxx	xxxx					xxx	xxxx	
Evaluation and prescription oral contraceptives with counseling;	xxxx	xxxx					xxx	xxxx	
Per speculum, per vaginum and per rectal examination for detection of common congenital, inflammatory, neoplastic and traumatic conditions of vulva, vagina, uterus and ovaries;	xxxx	xxxx					xxx	xxxx	

Skill	Obse	erved	Assist	ed	7553,754600,650	Under vision's		to do ndently	Signature
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
Medico-legal examination in Gynecology and Obstetrics	xxxx	xxxx			1-11		xxx	xxxx	
Dilatation and curettage and fractional curettage; Endometrial biopsy; Endometrial aspiration; Pap smear collection;	XXXX	xxxx				ane of	xxx	XXXX	
Intra Uterine Contraceptive Device (IUCD) insertion; Mini-lap-ligation; Urethral catheterization; Suture removal in post-operative cases; Cervical punch biopsy.								3	
Major abdominal and vaginal surgery cases; Second trimester Medical Termination of Pregnancy (MTP) procedures e.g. Emcredyl Prostaglandin instillations, Caesarean section.	xxxx	xxxx					xxx	xxxx	

# Certifiable skills - Obstetrics & Gynecology including Family Welfare & Planning

Skill	Obse	erved	Done	Maria Cara Cara Cara Cara Cara Cara Cara	Able to	Consessing.	Signature of authority
F1877	Date	No	Date	No	Date	No	authority
Visual Inspection of Cervix with Acetic Acid (VIA) (O)			xxxxx	xxxxx	xxxxx	xxxxx	
<ul> <li>a) Obstetric examination(I)</li> <li>b) Episiotomy(I)</li> <li>c) Normal labor and delivery (including partogram) (I)</li> </ul>	XXXXXX	XXXX	XXXX	XXXX	9		
d) Per Speculum (PS) and Per Vaginal (PV) examination(I)		TO ET	1	o an	AWA		
e) Pap Smear sample collection & interpretation (I)		ing J. Car	tanusii VA D	O A			
f) Intra- Uterine Contraceptive Device (IUCD) insertion & removal(I)	9/h	man Tari	حاء زين				

Name:			- market	Studen	t / Intern ID:	
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(f)	System Based Prac	ctice				
(g)	Professionalism					
(h)	Life-long Learning	3				
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Area	of improvement					
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Signature of student

Signature of HOD

# Orthopaedics including PMR- 2 weeks

Skill	Obse	erved	Assis	sted		Under vision's		to do ndently	Signature
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
Splinting (plaster slab) for the purpose of emergency splintage, definitive splintage and post- operative splintage and application of Thomas splint;					xxxxx	xxxxx	xxxx	XXXXX	
Manual reduction of common fractures  – phalangeal, metacarpal, metatarsal and Colles' fracture;								1 H 1	
Manual reduction of common dislocations  – interphalangeal, metacarpo-phalangeal, elbow and shoulder dislocations;					la un		No.		
Plaster cast application for un-displaced fractures of arm, fore arm, leg and ankle; Emergency care of a multiple injury patient;		2			a la para	en Ven			
Transport and bed care of spinal cord injury patients.  Drainage for acute osteomyelitis;									
Sequestrectomy in chronic osteomyelitis; Application of external fixation;									
Advise about prognosis of poliomyelitis,	xxx	xxx			xxxxx	xxxxx	xxxxx	xxxxx	
cerebral palsy, CTEV and CDH;  Advise about rehabilitation of amputees and mutilating traumatic and leprosy deformities of hand.		10							

Skill	Obse	rved	Assis	sted		Under vision's	Able	to do ndently	Signature
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
Diagnosing and managing with competence clinical diagnosis and management	622	s met	-/-	steri	xxxxx	xxxxx	xxxxx	xxxxx	
based on detailed history and assessment of common disabling conditions like						70			
poliomyelitis, cerebral palsy, hemiplegia, paraplegia, amputations, etc.;					lu If	7			
Participation as a team member in total		m =							jė.
rehabilitation including appropriate follow up of common disabling conditions;					Sen la				
Procedures of fabrication and repair of artificial limbs and appliances.					iz-yn		recorbina	in and and	
Use of self-help devices and splints and						1		in the	
mobility aids;  Accessibility problems and home-making  for disabled;					tmile)	(VISANCE	Mellub		Lang di
Simple exercise therapy in common conditions like prevention of deformity in					1.00				
polio, stump exercise in an amputee, etc.; Therapeutic counselling and follow-up.							- II-		
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## Certifiable skills - Orthopaedics including PMR

Skill	Observed		06 - 50 00 000	Under vision's	Able indeper		Signature of authority
	Date	No	Date	No	Date	No	authorny
Basic fracture and dislocation management (O)			xxxxx	xxxxx	xxxxx	xxxxx	
<ul> <li>Application of basic splints and slings(I)</li> <li>Compression bandage (I)</li> </ul>	xxxxxx	xxxx	xxxx	xxxx			

PLEASE I vledge nt Care dural Skills	RATE ON A: Ou D: Nee	RATING A SCALE tstanding C: Averageds further	G E OF A, B, C, B: Good	Leaves:U	Jnit:days
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## Otorhinolaryngology (ENT)- 2 weeks

Skill	Obse	erved	Assi	isted		Under vision's		to do ndently	Signature of
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
Ear syringing, antrum puncture and packing of the nose for epistaxis; Nasal douching and packing of the external canal;					XXXXX	XXXXX	XXXXX	XXXXX	
Removing foreign bodies from nose and ear;			= 1 1						
Observing or assisting in various endoscopic procedures and tracheostomy									
Intern shall acquire skills in the use of head mirror, otoscope and indirect laryngoscopy and first line of management of common Ear Nose and Throat (ENT) problems.									
Intern shall have participated as a team member in the diagnosis of various ENT-related diseases and be aware of National programme on prevention of deafness; Intern shall acquire knowledge of various ENT related rehabilitative programmes.	XXXXX	xxxxx	xxxx	XXXXX			xxx	xxx	

# Certifiable skills - Otorhinolaryngology (ENT)

Skill	Obse	erved	1000	Under vision's	Able indeper	Signature of	
indu ve minimum	Date	No	Date	No	Date	No	authority
Anterior nasal packing (D)	xxxxx	xxxxxx			xxxxx	xxxxx	Tuestes 1
Otoscopy (I)	XXXXXX	xxxx	xxxx	xxxx			0110100

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			C: Average			
		D: Need	ds further to	raining		
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(b)	Patient Care		¥			
(c)	Procedural Skills					
(d)	Independent care					
(e)	Communication Sl					
(f)	System Based Pract	tice				
(g)	Professionalism					
(h)	Life-long Learning					
		D	EEDBACK			
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	Strength					
Are	ea of improvement					
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Signature of student

Signature of HOD

## Ophthalmology - 2 weeks

Skill	Obse	rved	Assi	sted		Under vision's		to do ndently	Signature of
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
a) Sub-conjunctival injection;					xxxxx	xxxxx	xxxxx	xxxxx	
b) Ocular bandaging;									- 1
c) Removal of concretions;									
d) Epilation and electrolysis;									
e) Corneal foreign body removal;									
f) Cauterizationofcorneal ulcers;		. 1164	11.5						
g) Chalazion removal;			. 12 1	Second	ren.				-
h) Entropion correction;									
i) Suturing conjunctival tears;			11134	The same					
j) Lids repair;									
k) Glaucoma surgery (assisted);		SATI DE							
l) Enucleation of eye in cadaver		total of							
m) Assessment of refractive errors and advise its correction;				20					
n) Diagnose ocular changes in common systemic disorders;					-82				
o) Perform investigative procedures such as tonometry, syringing;				==	120	ite nu			
p) direct ophthalmoscopy, subjective refraction and fluorescin staining of cornea					2.517				
Advise regarding methods for rehabilitation of the blind	xxxxx	xxxxx	xxxxx	xxxxx			xxx	ххх	

## Certifiable skills - Ophthalmology

Skill	Observed		Done Under supervision's		Able t	Signature of	
	Date	No	Date	No	Date	No	authority
<ul> <li>Digital tonometry(O)         Indirect ophthalmoscopy (O     </li> <li>Epilation (O)</li> </ul>			xxxx	xxxx	XXXXX	xxxxx	
<ul> <li>Visual acuity testing (I)</li> <li>Eye irrigation(I)</li> <li>Instillation of eye medication (I)</li> <li>Ocular bandaging(I)</li> </ul>	xxxxx	XXXX	xxxx	xxxx			

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Signature of HOD

Signature of student

# Forensic Medicine & Toxicology - 1 week

Skill of or se	Observed		Assisted		The state of the s	Under vision's	-30,000,000,000	to do ndently	Signature of
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
Documentation and certification of trauma;					xxxxx	xxxxx	xxxxx	xxxxx	ontina +
Diagnosis and certification of death;						ar ±	16		hapt t
Legal documentation related to emergency cases;						le s	ardeni rose	in yi	The state of
Certification of medical-legal cases e.g. Age estimation, sexual assault, etc.;	-				a b	28 20 20 20			
Establishing communication in medico-legal cases with police, public health authorities, other concerned departments, etc.				27.1	THE S				en e e
An intern must have observed a medico-legal autopsy/ post-mortem									

# Certifiable skills - Forensic Medicine & Toxicology

Skill	Observed		Done Under supervision's		Able t		Signature of authority
Complete to the in-	Date	No	Date	No	Date	No	authority
<ul> <li>Diagnosis and certification of death(D)</li> <li>Legal documentation related to</li> </ul>	xxxx	xxxx			xxxxx	xxxxx	
emergency cases (D)     Certification of medical-legal cases e.g. Age estimation, sexual assault etc.(D)						DE ROR	1000
Establishing communication in medico-legal cases with police, public health authorities, other concerned departments, etc (D						- 5-	
Documentation and certification of trauma (I)	xxxxx	xxxx	xxxx	xxxx			

upervisor:								
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Dates:		to			Leaves:	days		
0								
			RATING					
	PLEASE RA	TE ON A	SCALE (	OF A, B, C,	DWITH			
		A: Outst	tanding B	: Good				
		C	: Average					
		D: Needs	s further t	raining				
		Scoring	may be bo	ised on				
(a)	Knowledge							
(b)	Patient Care		2					
(c)	Procedural Skills							
(d)	Independent care							
(e)	Communication Sl	cills						
(f)	System Based Pract	tice						
(g)	Professionalism							
(h)	Life-long Learning							
		FF	EDBACK					
	Strength							
Area	of improvement							
	Comments							

Signature of student

# Casualty Services/Emergency Medicine/Trauma - 2 weeks

Skill	Obse	erved	Ass	isted		Under vision's	11000000	to do	Signature of authority
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	
Identification of acute emergencies in various disciplines of medical practice; Management of acute anaphylactic shock;	XXX	xxx			xxxxx	xxxxx	xxxxx	xxxxx	
Management of peripheral- vascular failure and shock;									
Management of acute pulmonary edema and Left Ventricular Failure (LVF);		E Su	A LIV	Z.JI   P. A.	HÓ EI HO A	A III Z	o e ju		
Emergency management of drowning, poisoning and seizure;							DC		
Emergency management of bronchial asthma and status asthmaticus;		n less							
Emergency management of hyperpyrexia;			2				prediction of		100
Emergency management of comatose patients regarding airways, positioning, prevention of aspiration and injuries;							- Stars	read a	19.
Assessment and administering emergency management of burns;						1 = 1			
Assessing and implementing emergency management of various trauma victims;				3 / 14			10		
Identification of medico-legal cases and learn filling up of forms					-		NT.	dining	
as well as complete other medico- legal .formalities in cases of injury, poisoning, sexual offenses, intoxication and other unnatural conditions.					_		1 1 107	ijeze bi	
Resuscitation of critical patients; documentation medico legal cases; management of bleeding and application of splints	301 P		XXXX	xxxx	xxxxx	xxxxx	xxxxx	xxxxx	
Advise about prognosis of acute surgical illnesses, head injury, trauma and burns. Counsel patients regarding the same; Electrocardiogram(ECG); Routine radiographs of chest, abdomen, skull, etc	xxx	xxx	XXX	XXX			xxxxx	xxxxx	

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(e)		inication						
(f)	•	Based Pra	actice					
(g)	Professi							
(h)	Life-lon	g Learnir	ng					
			FE	EEDBACK	(			
	Strengtl	h						
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Signature of student

#### Dermatology, Venerology & Leprosy - 1 week

Skill	Observed		Assi	sted	1 5 5 5 5 5	Under vision's	Able indeper	to do	_ Ox
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
Conduct proper clinical examination; elicit and interpret physical findings, and diagnose common disorders and emergencies; Manage common diseases recognizing the need for referral for specialized care in case of inappropriateness of therapeutic response.	XXX	xxx	xxx	xxx	xxxxx	xxxxx			
Perform simple, routine investigative procedures for making bedside diagnosis, specially the examination of scraping for fungus, preparation of slit smears and staining for AFB for leprosy patient and for STD cases; Skin biopsy for diagnostic purpose		e sin	XXX	xxx	XXXXX	XXXXX	XXX	XXX	

#### Certifiable skills - Dermatology, Venerology & Leprosy

Skill	Obse	rved		Under vision's	1 2020	to do ndently	Signature of authority
(44) and (5)	Date	No	Date	No	Date	No	
Gram's stained smear interpretation (I)	xxxxxx	xxxx	xxxx	xxxx			
KOH examination of scrapings for fungus (D)	xxxx	xxxx			xxxxx	xxxxx	
<ul><li>Slit skin smear for leprosy(O)</li><li>Skin biopsy(O)</li></ul>		NG.	xxx	xxx	xxx	xxx	
<ul><li>Dark ground illumination (O)</li><li>Tissue smear (O)</li></ul>		ne Meto	lanzulu vä. L				
Cautery - Chemical and electrical (O)			nid = v	97. CI 15032			

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(b)	Patient Care											
(c)	Procedural Skills											
(d)	Independent care											
(e)	Communication S											
(f)	System Based Prac	tice										
(g)	Professionalism											
(h)	Life-long Learning											
		FE	EDBACK									
	Strength					75						
Area	of improvement											
	Comments											

# (Any two electives to be opted out, duration 2 weeks each)

#### Elective 1 - Lab services consisting of Clinical Pathology, Lab medicine, Biochemistry & Hematology Services along with Blood Banking - 2 weeks

	Skill	Obse	rved	Assi	sted		Under vision's		to do ndently	- OI
	An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
i)	Blood: Complete blood count including Platelet count, peripheral blood smear preparation and examination including malarial parasites;	xxx	XXX	xxx	XXX	xxxxx	xxxxx			V
ii)	Urine: (Routine chemical and microscopic examination);	samb		luul su	,					
iii)	Stool: (for ova/cyst and occult blood);	114 -71		() the				Mar Di Lin		, -
iv)	Blood Banking: Blood grouping (manual), saline cross-matching;			*			HE.	100		
v)	Sputum and throat swab for Gram stain and acid-fast stain;						ine i			
vi)	Cerebrospinal Fluid (CSF) for proteins, sugar and smear;					M. re.	i estr	(file) (hid		
vii)	Performing blood sugar test by glucometer;						-100	un vy	-	
viii)	Pleural and ascitic fluid for routine chemistry and microscopy;							01-93		
ix)	Draw blood by venepuncture independently and collect samples in appropriate bottles in proper order	2	NOVE NOVE NOVE NOVE NOVE NOVE NOVE NOVE			5				
x)	Correctly collect and transport samples and specimens for blood tests, culture, histopathology and								=	
xi)	Fill requisition forms appropriately									

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(b)	Patient Care										
(c)	Procedural Skills										
(d)	Independent care										
(e)	Communication S										
(f)	System Based Prac	tice									
(g)	Professionalism										
(h)	Life-long Learning	Ĝ.									
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	Strength					- 1 //11					
Area	of improvement										
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Signature of student

Elective 2 - Respiratory Medicine & DOTS - TB Centre - 2 weeks

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Pates:		_/	to		_/	Leaves:	days
			7	RATING			
	PI	LEASE R	ATE ON A	SCALE O	F A, B, C	D WITH	
			A: Outs	tanding B:	Good		
				C: Average			
				s further tra			
			Scoring	may be bas	ed on	8	
(a)	Knowled						
(b)	Patient C	T. T. S.		*			
(c)	Procedu						
(d)	Independ						
(e)	Commun						
(f)	System B		ctice				
(g)	Professio						
(h)	Life-long	Learnin	g				
			FI	EEDBACK			
	Strength						
Area	of improv	ement					
	Comment						

Signature of student

# Elective 3 – Radiodiagnosis – 2 weeks

Skill	Obse	erved	Assi	isted	1000000	Under vision's	The second second	to do ndently	Signature
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
(i) Identifying and diagnosing acute abdominal conditions clinically and choose appropriate imaging modality for diagnosis;	xxx	XXX	xxx	xxx	xxxxx	xxxxx			-
(ii) Identifying and diagnosing acute traumatic conditions in bones and skull using X rays / CT Scans with emphasis on fractures and head injuries;			De Cit		o I In	n wal	1.278		
(iii) Recognising basic hazards and precautions in radio-diagnostic practices specially related to pregnancy;									
(iv) Demonstrating awareness of the various laws like Pre-				,				767E	
conception and Prenatal Diagnostic Techniques (Prohibition of Sex Selection) Act, 1994 (57 of 1994).						101 4/10 2011 201	i Design	24	

Supervisor			Depa	artment/ S	pecialty:	υυ	nit:
Dates:						Leaves:	days
to							
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				RATING			
		PLEASE I	RATE ON A			, D WITH	
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	2000		Scoring	may be b	ased on		
(a)	Knowle						
(b)	Patient						
(c)		ural Skills					
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(e)	O CENTER OF THE PERSON OF THE	unication					
(f)	170	Based Pr	actice				
(g·)		ionalism					
(h)	Life-lo	ng Learni	ng				
			F	EEDBAC	K		
	Streng	th	-				
Area	a of impr						2.7
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# Elective 4 - Geriatric Medicine - 2 weeks

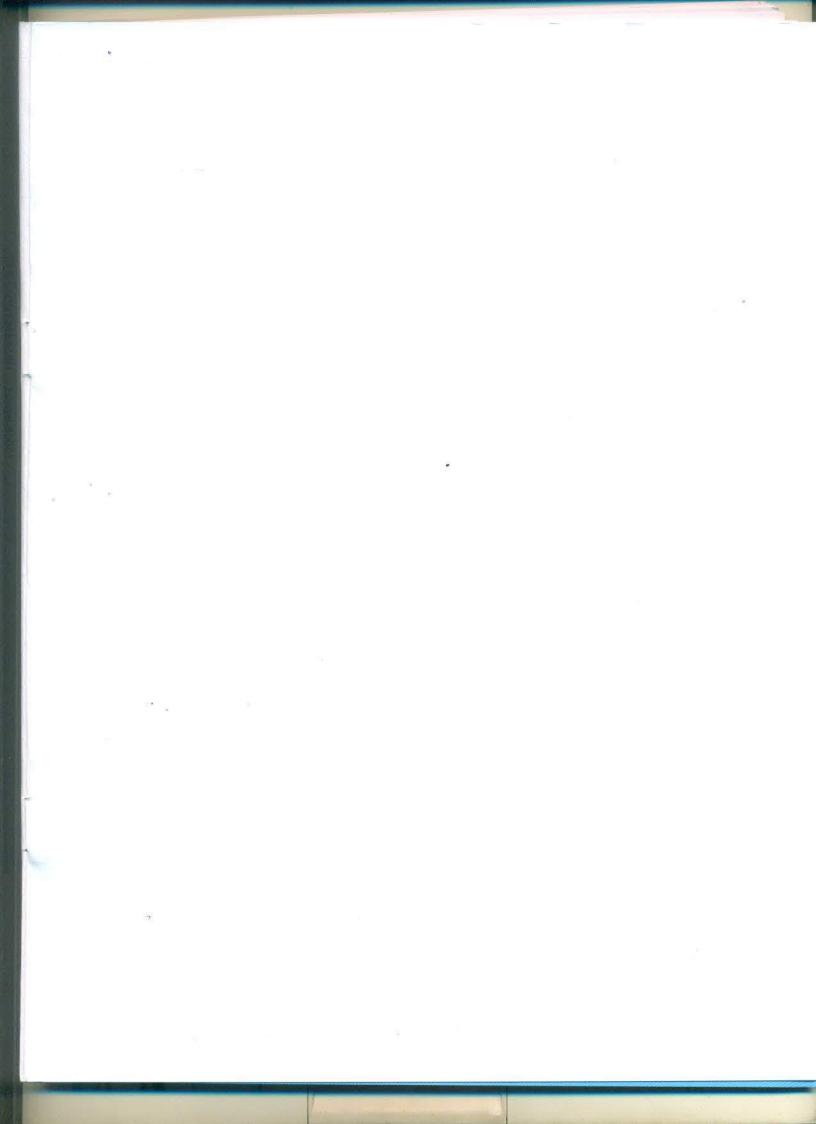
Skill	Obse	rved	Assi	sted	Done		Able indepen		Signature of
An intern must be able to-	Date	No	Date	No	Date	No	Date	No	authority
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lame:		and a			_ Studen	t / Intern ID:	11177
upervisor	: the beautiful property	De	partr	nent/Sp	ecialty:_	10	Unit:
ates:		to_	677	J	1	Leaves:	days
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			R A	TING			
	PLEASE RA	ATE ON			FA.B.C.	D WITH	
				ding B:		2 111111	
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				y be bas			
(a)	Knowledge		0				
(b)	Patient Care						
(c)	Procedural Skills						
(d)	Independent care						
(e)	Communication S	kills					
(f)	System Based Prac	ctice					
(g)	Professionalism						
(h)	Life-long Learning	5					
			FEED	BACK			
	Strength						
Area	of improvement						
-	Comments						

# Elective AYUSH(Ayurveda/Yoga/Unani/Siddha/Homeopathy/Sowa Rigpa) - 1 week

Skill  An intern must be able to-		erved	Ass	isted	Donel	Under ision's	Able		Signature
and meet it must be able to-	Date	No	Date	No	Date	No	Date	No	authority
		n ,a		lace)	- (19)				

RATING PLEASE RATE ON A SCALE OF A, B, C, D WITH A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism	RATING A SCALE OF A, B, C, D WITH standing B: Good C: Average ds further training
RATING PLEASE RATE ON A SCALE OF A, B, C, D WITH A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism	RATING A SCALE OF A, B, C, D WITH standing B: Good C: Average ds further training
RATING PLEASE RATE ON A SCALE OF A, B, C, D WITH A: Outstanding B: Good C: Average D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism	A SCALE OF A, B, C, D WITH standing B: Good C: Average ds further training
PLEASE RATE ON A SCALE OF A, B, C, D WITH  A: Outstanding B: Good  C: Average  D: Needs further training  Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism	A SCALE OF A, B, C, D WITH standing B: Good C: Average ds further training
PLEASE RATE ON A SCALE OF A, B, C, D WITH  A: Outstanding B: Good  C: Average  D: Needs further training  Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism	A SCALE OF A, B, C, D WITH standing B: Good C: Average ds further training
PLEASE RATE ON A SCALE OF A, B, C, D WITH  A: Outstanding B: Good  C: Average  D: Needs further training  Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism	A SCALE OF A, B, C, D WITH standing B: Good C: Average ds further training
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D: Needs further training Scoring may be based on  (a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism	ls further training
(a) Knowledge (b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism	
<ul> <li>(a) Knowledge</li> <li>(b) Patient Care</li> <li>(c) Procedural Skills</li> <li>(d) Independent care</li> <li>(e) Communication Skills</li> <li>(f) System Based Practice</li> <li>(g) Professionalism</li> </ul>	
(b) Patient Care (c) Procedural Skills (d) Independent care (e) Communication Skills (f) System Based Practice (g) Professionalism	
<ul> <li>(c) Procedural Skills</li> <li>(d) Independent care</li> <li>(e) Communication Skills</li> <li>(f) System Based Practice</li> <li>(g) Professionalism</li> </ul>	:-
<ul> <li>(d) Independent care</li> <li>(e) Communication Skills</li> <li>(f) System Based Practice</li> <li>(g) Professionalism</li> </ul>	
(e) Communication Skills (f) System Based Practice (g) Professionalism	
<ul><li>(f) System Based Practice</li><li>(g) Professionalism</li></ul>	
(g) Professionalism	
(h) Life-long Learning	
FEEDBACK	EEDBACK
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Area of improvement	ή,
Comments	· · · · · · · · · · · · · · · · · · ·



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