#### **Logbook**

(Undergraduate Competency Based Curriculum)



**Paediatrics** 

### **Logbook**

#### **Department of Paediatrics**

Name of student:
Admission Batch:
Name of the College
College Roll No
University Registration number

#### **Glossary & General Instructions**

#### **Logbook:**

Logbook is defined as a verified record of the progression of the learner documenting the acquisition of the requisite knowledge, skills, attitude and or competencies. Logbook is the most important tool that will help us to achieve successful implementation of the key aspects of New Undergraduate Competency based curriculum. It forms an integral part of internal assessment/formative assessment and the eligibility to appear in the summative assessment conducted by the concerned University. Successful documentation and submission of logbook is a pre requisite for being allowed to appear in the final summative examination.

#### Points to be noted by the student:

- 1. The logbook is a record of the academic/ co curricular activities of the designated student, who is responsible for maintaining his/her logbook.
- 2. The student is responsible for getting the entries in the logbook and verified by designated faculty on regular basis.
- 3. Entries in the logbook will reflect the activities undertaken in the department and have to be scrutinized by the concerned Head of the department.
- 4. The logbook should be verified from the college before submitting the application to the student for University examination.

Activity: Predefined task performed by the learners that contribute to the achievement of objectives and competencies.

Remedial: A planned activity aimed at correcting deficits that prevent a learner from achieving an intended outcome.

Feedback: A formal active interaction performed at the completion of an observed activity intended to facilitate positive change, growth and improvement of the learner through guided reflection of the activities performed.

#### Understanding the logbook activity table:

S No.	Competency # addressed	Name of Activity	Date completed: dd-mm- yyyy	Attempt at activity: First (F) Repeat (R) Remedial (Re)	Rating: Below (B) expectations Meets (M) expectations Exceeds (E) expectations OR Numerical Score	Decision of faculty: Completed (C) Repeat (R) Remedial (Re)	Initial of faculty and date	Feedback Received: Initial of Learner and date
1.								
2.								
3.								
4.								
5.								
6.								
7.								

- The number of the competency addressed, includes the subject initial and number (from Volume III of the UG Curriculum) e.g. OG 2.1
- 2. Name of activity: Seminar / Small Group Discussion/ Skills Lab / Drill / Role Play
- 3. Date the activity gets completed
- 4. Attempt at activity by learner, indicate if:
  - a. First attempt (or) only attempt
  - Repeat (R) of a previously done activity
  - c. Remedial activity (Re) based on the determination by the faculty
- Rating, use one of the following three grades:
  - a. Below expectations (B)
  - b. Meets expectations (M)
  - c. Exceeds expectations (E)
- 6. Decision of faculty
  - a. C: activity is completed, therefore closed and can be certified, if needed
  - b. R: activity needs to be repeated without any further intervention
  - Re: activity needs remedial action (usually done after repetition did not lead to satisfactory completion)
- 8. Initial (Signature) of faculty indicating the completion or other determination
- Initial (Signature) of the learner if feedback has been received.

#### **CERTIFICATE OF COMPLETION**

This	is	to	certify	that	the	candidate	Mr/
Ms				, Regn.	No		,
Admitte	ed in t	he yea	r	. in			
			•••••				•••••
has sat	tisfacto	orily co	mpleted/	not com	pleted a	ll	
the ass	ignme	nts /re	quiremen	ıts ment	ioned in	this logboo	k in
the sub	oject	of	Paedia	atrics	during	the	period
from		.to	Sł	ne/ He is	s/is not	eligible to	appear
for 3 <sup>rd</sup>	Prof F	Part II	examinat	ion(Sum	ımative)	conducted	by the
WBUHS	5.						
Cianati	umo of I	Init ha	ad.	Ciana	tura of L	load of the	Instituto
Signau	ire or c	Jiiit iie	ad:	Sigila	iture or r	lead of the With seal	
Counte	ersigne	d by					
Head o	of the d	epartn	nent:				

#### ATTENDANCE RECORD- CLINICAL POSTING

		Classes held	Classes attended	Percentage	Faculty signature
	Phasel				
Clinical Posting	Phase II				
_	Phase III				
Theory	PY3P1				
Attendance	PY3P2				
Small group	PY3P1				
discussions	PY3P2				

#### **DOCUMENTATION OF CASE PRESENTATIONS**

S. No	Date	Patient Name and ID	Diagnosis	Case Presented / Attended (P/A)	Year/ Phase	Grade (B/M/E)	Teacher's Signature

## PHASE II

#### 1<sup>st</sup> CLINICAL POSTING (2 WEEKS)

Competencies addressed	of activity completed	Attempt at Activity	Rating (B,M,E)	of Faculty	Initial of faculty	Feedback Initial of learner and date
1. Doufour outline and the	(DD/MM/YY)	(F, R, Re)		(C, R, Re)		
Perform anthropometric						
measurements, document in growth						
chartsand Interpret						
2. Identify deviations in growthand plan						
appropriate referral.						
3. Perform developmental assessment						
and interpret						
4. Calculate BMI, document in BMI						
chart and interpret						
5. Assess the patient for fitness for						
immunization and prescribe an age						
appropriate immunization schedule						

#### Competency 1: Perform anthropometric measurements, document in growth chartsand Interpret

#### Minimum number required to certify-3

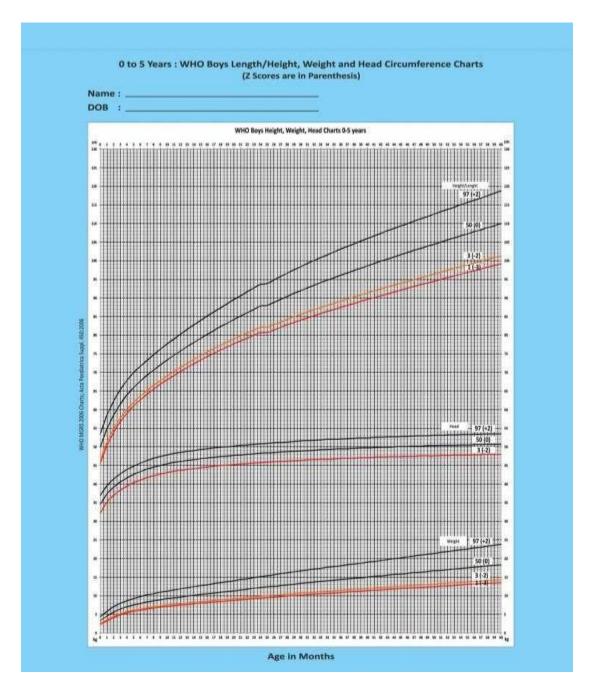
#### **Growth assessment**

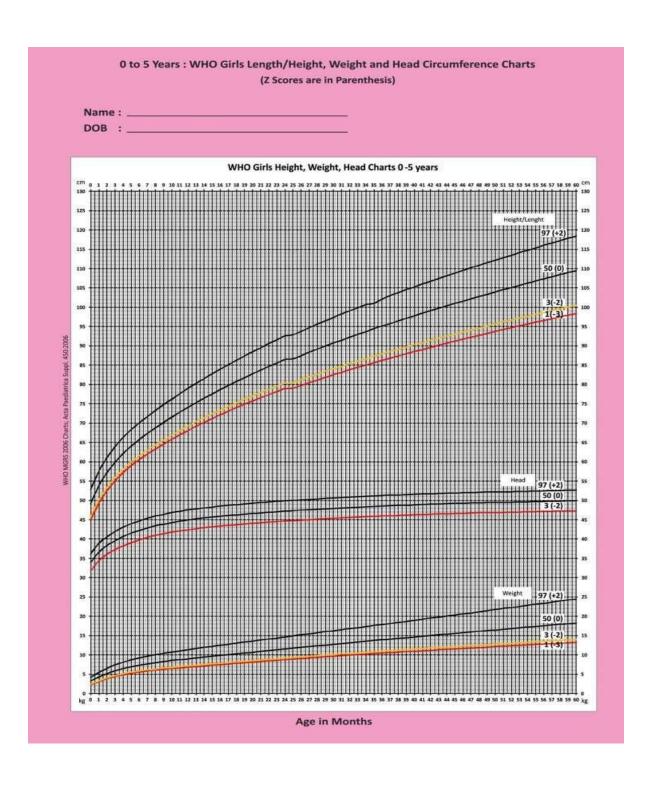
No	Name	Age	Sex	We	ight		Heigl	Height/Length MAC			НС			Wt Ht	for			
				Α	E	I	A	E	I	A	E	Ι	A	E	1	Α	E	I
1																		
2																		
3																		

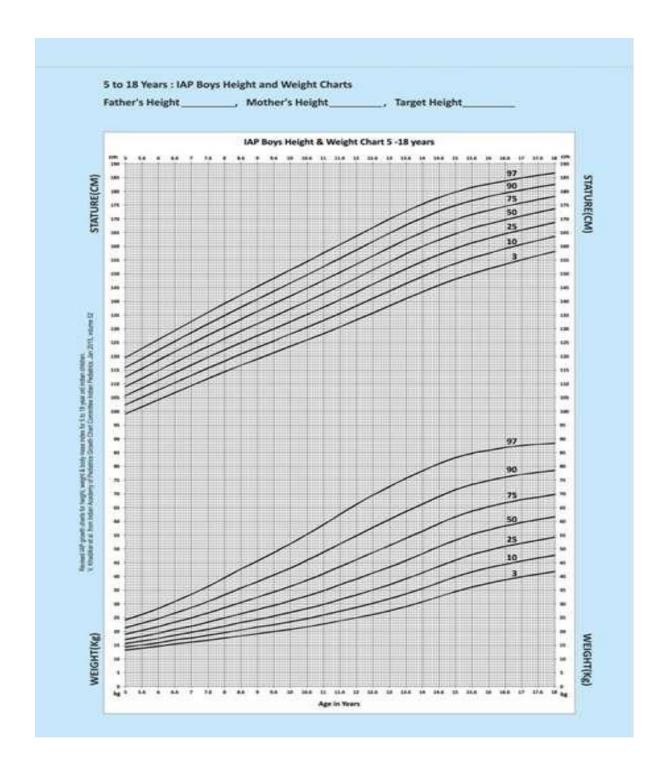
A – Actual E – Expected I – Inference

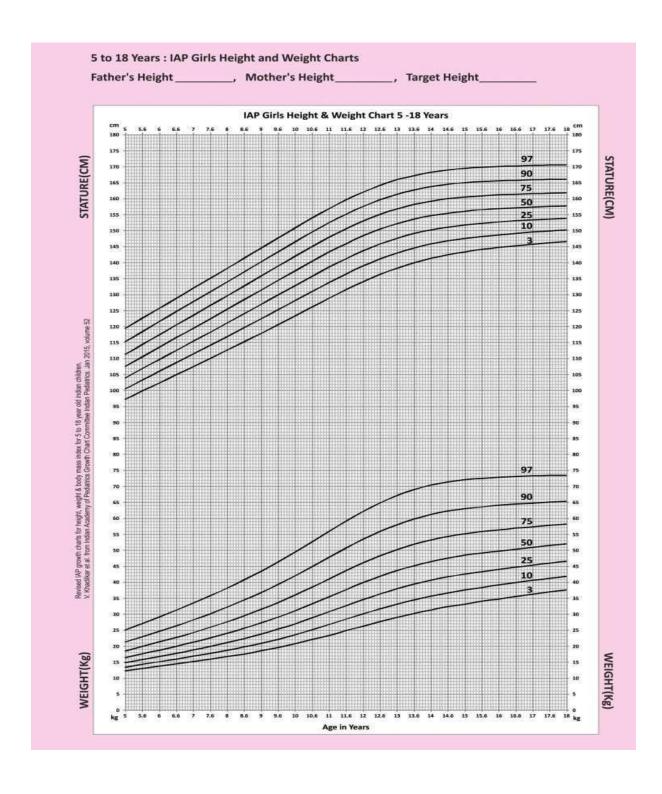
#### **Use of growth charts**

- Anthropometric values to be given here for each batch.
- They have to mark the values in the growth chart and interpret.









Competency 2: Identify deviations in growth (Using the above growth charts)and plan appropriate referral.

#### Minimum number required to certify-2

If requiring referral, mention the reasons for referral:

CASE 1	CASE 2
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

#### Competency 3. Perform developmental assessment and interpret

#### Minimum number required to certify-3

- Take a detailed developmental history and perform developmental assessment.
- Indicate the present milestone attained in each category.
- Calculate the developmental age for each domain.

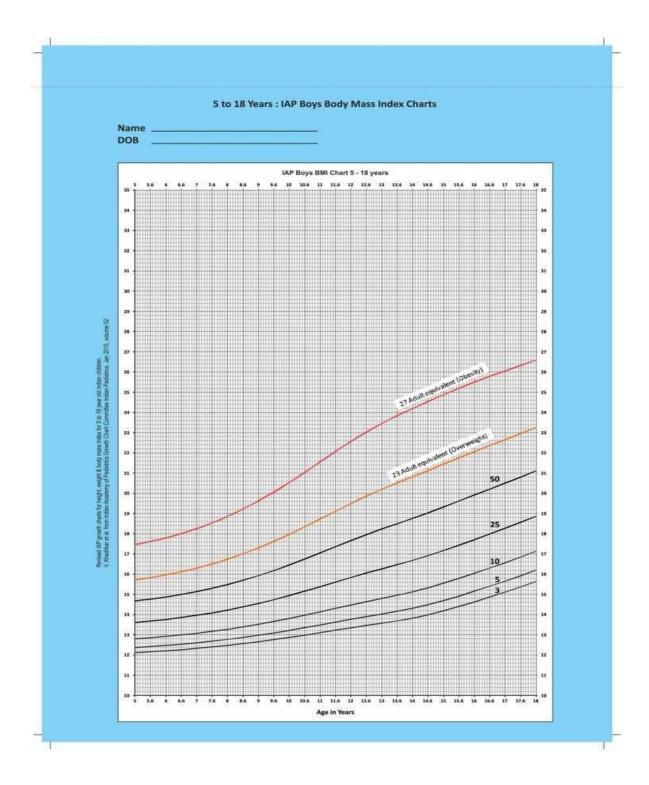
S.No	Name	Age	Sex	Gross Motor	Fine Motor	Language	Social	Developmental age			Inference	
								GM	FM	L	S	
1												
2												
3												

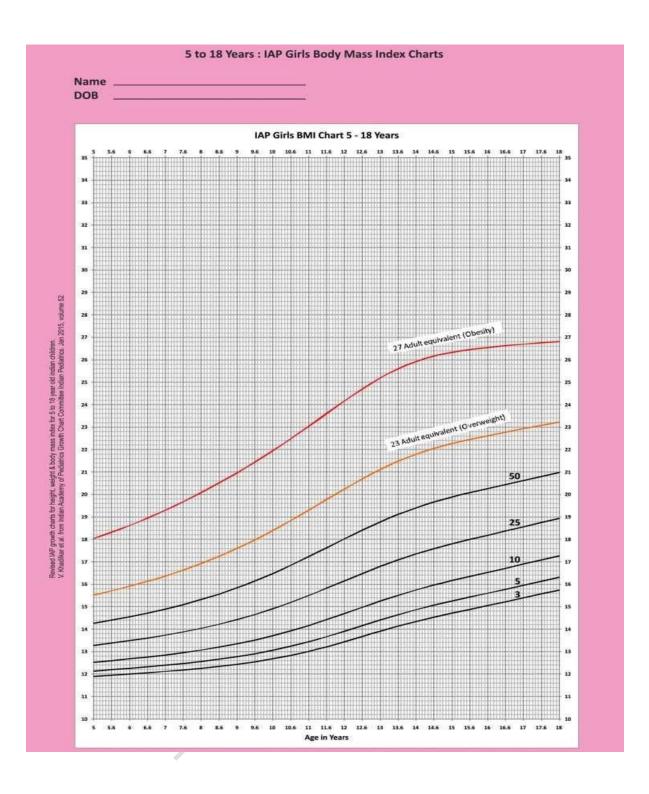
#### Competency 4. Calculate BMI, document in BMI chart and interpret

#### Minimum number required to certify-3

- Calculate the BMI for 3 children (above 5 years) and enter in this table.
- Mark in the appropriate graph.

S. No	Name	Age	Sex	Weight	Height	BMI	Normal	Inference
1								
2								
3								





Competency 5. Assess the patient for fitness for immunization and prescribe an age-appropriate immunization schedule

#### Minimum number required to certify-5

#### **Assessment of immunization status:**

S. No	Name	Age	Sex	Vaccines received till date	Plan for further Immunization

# PROFESSIONAL YEAR III PHASE I

Competencies addressed	Date of activity completed (DD/MM/YY)	Attempt at Activity (F, R, Re)	Rating (B,M,E)	of Faculty (C, R, Re)	Initial of faculty	Feedback Initial of learner and date
1. Observe the correct technique of						
breast feeding and distinguish right						
from wrong techniques						
2. Perform NG tube insertion in a						
manikin						
3. Perform and interpret urine dip stick						
for sugar						
4. Identify a BCG scar and interpret finding						
5. Interpret a Mantoux test						
6. Perform AFB Staining and interpret						
finding						

## Competency 1. Observe the correct technique of breast feeding and distinguish right from wrong techniques

#### Minimum number required to certify-3

- Observe the process of breast feeding (under supervision) and note the following points:
- i. Position of mother.
- ii. Position of the baby.

S. No	Position of mother	Position of child	Attachment (latching)	Comments

#### Competency 2: Perform NG tube insertion in a manikin

#### Minimum number required to certify-3

• Demonstrate the following steps in inserting a NG tube in a manikin

S. No	Identify size of nasogastric tube as per age of child	Demonstrate landmarks for measurement of length of NG tube to be inserted on a manikin	Correctly measure the length of NG tube to be inserted	Insert the tube and check its position

#### **Competency 3: Perform and interpret urine dip stick for sugar**

#### Minimum number required to certify- 3

- Demonstrate the steps to perform
- Interpret the urine dip stick for sugar

S. no	Urine sugar by dipstick	Interpretation

#### Competency 4: Identify a BCG scar and interpret finding

#### Minimum number required to certify- 3

- Demonstrate the steps to identify a BCG scar
- Interpret the findings

S.No	Age of the child	Size of BCG scar	Quality of the scar
1			
2			
3			

#### **Competency 5: Interpret a Mantoux test**

#### Minimum number required to certify- 3

• Demonstrate the following steps to interpret a Mantoux test

S. No	Age	Measure induration (horizontal/transverse)	Interpretation
1			
2			
3			

#### **COMPETENCIES REQUIRING DOCUMENTATION**

(To be observed in ward/PICU/NICU/LT)

S. no	Competency addressed	Minimum No. to be done	Date completed	Faculty signature
1	Provide intra-natal care and observe the conduct of a normal delivery	3		
2	Observe different methods of administering Oxygen	3		
3	Observe administration of nebulization	3		

#### **COMPETENCIES REQUIRING DOCUMENTATION**

(As part of seminar, demonstration, case presentation)

S. no	Competencyaddressed	Minimum No. to be done	T/L Method	Date compl eted	Faculty signature
1	Plan an appropriate diet in health and disease	3			
2	Assessment of a child with obesity with regard to eliciting history	3			
3	Identify theclinical features of dietary deficiency /excess of Vitamin A	3			
4	Diagnose patients withVitamin A deficiency (VAD), classify and plan the management	3			
5	Identify the clinical features of dietary deficiency of vitamin D	3			
6	Assess patientswith Vitamin D deficiency, diagnose, classify and plan management	3			
7	Identify theclinical features of Vitamin B complex deficiency	3			
8	Diagnose patients with vitamin B complex deficiency andplan management	3			
9	Identify theclinical features of Vitamin C deficiency	3			
10	Identify the clinical features of dietary deficiency of Iron and make a diagnosis	3			

S.	Competency addressed	Minimum	T/L	Date	Faculty
no		No. to be	Method	completed	signature
		done			
11	Assess child for signs ofabuse				
		3			
12	Identify the clinical features of				
12	Identify theclinical features of				
	Down Syndrome	3			
13	Identify theclinical features of	3			
	Turner Syndrome				
14	Identify theclinical features of	2			
	Klinefelter Syndrome				
15	Recognize precocious and delayed	2			
	Puberty and refer				
16	Explain the follow-up care for	3			
	neonates including breastfeeding,				
	temperature maintenance,				
	immunization, importance of				
	growth monitoring and				
	red flags.				

#### **COMPETENCIES REQUIRING DOCUMENTATION**

## (To be done by giving actual blood reports/case scenarios/x-rays/CT/MRI /EEG/ECG reports)

S. no	Competency Addressed	Minimum No. to be done	T/L method	Date completed	Faculty signature
1	Interpret blood tests relevant to upper respiratory problems	3			
2	Perform and Interpret peripheral smear	3			
3	Interpret normal Karyotype and recognize Trisomy 21	2			
4	Interpret normal Karyotype and recognize Turner Karyotype	2			
5	Interpret normal karyotypre and recognize the Klinefelter karyotype	2			
6	Interpret bloodtests in the context of laboratory evidence for tuberculosis	2			

## COMPETENCIES REQUIRING DOCUMENTATION (To be done as part of AETCOM)

S. No	Competency addressed	Minimum No. to be done	Date completed	Faculty signature
1	Counseling a parent with failing to thrive child	3		
2	Counsel a parent of a child with developmental delay	3		
3	Respecting patient privacy and maintaining confidentiality while dealing with adolescence	3		
4	Educate mothers on antenatal breast care and prepare mothers for lactation	3		
5	Educate and counselmothers for best practices in Breastfeeding	3		
6	Respect patientprivacy	3		
7	Counsel and educatemothers on the best practices in complementary feeding	3		
8	Counsel parents of children with SAM and MAM	3		

S. No	Competency Addressed	Minimum No. to be done	Date completed	Faculty signature
9	Educate and counsela patient for immunization	3		
10	Demonstrate willingness to participate in the national and subnational immunization days	3		
11	Counsel/educate mothers on the care of neonates	3		
12	Counsel / educate apatient for referral appropriately	3		
13	Counsel a patient with chronic illness	3		
14	Demonstrate empathy while dealing with children with cardiac diseases in every patient encounter	3		
15	Counsel and educatepatients about prevention and treatment of anemia	3		
16	Counsel parents regarding 1. Present child, 2. Risk in the next pregnancy (Down syndrome)	2		
17	Counsel parents regarding 1. Present Child, 2. Risk in the next pregnancy (Turner syndrome)	2		

#### **SELF- DIRECTED LEARNING**

	Impression

#### **ELECTIVE POSTING (If in Pediatrics)**

Name of block	Name of elective	Location of elective	Attendance	Daily rounds	Assignments	Case presentation	Signature & Remarks of the faculty

## PROFESSIONAL YEAR III PHASE II

Competencies addressed	Date of activity completed (DD/MM/YY)	Attempt at Activity (F, R, Re)	Rating (B,M,E)	Decision of Faculty (C, R, Re)	Initial of faculty	Feedback Initial of learner and date
1. Assess airway and breathing: recognize						
signs of severe respiratory distress. Check						
for cyanosis, severe chest indrawing,						
grunting						
2. Assess airway and breathing:						
Demonstrate the method of positioning of						
an infant & child to open airway in a						
simulated environment						
3. Assess airway and breathing: Administer						
oxygen using correct technique and						
appropriate flow rate						
4. Assess airway and breathing: Perform						
assisted ventilation by Bag and mask in a						
simulated environment						
5. Check for signs of shock						
6. Choose the type of fluid and calculate the fluid requirement in shock						
7. Assess the level of consciousness & provide emergency treatment to a child with convulsion/coma						
8. Assess signs for severe dehydration						
9. Provide BLS in a children with manikin						

Competency 1: Assess airway and breathing: recognize signs of severe respiratory distress. Check for cyanosis, severe chest indrawing, grunting

#### Minimum number required to certify- 3

• Check for the following signs in a child with respiratory distress

S.no	Respiratory rate	Intercostal retractions	Alae nasi flaring	Drowsiness	Grunt or stridor	Cyanosis
1						
2						
3						

Competency 2: Assess airway and breathing. Demonstrate the method of positioning of an infant & child to open airway in a simulated environment

#### Minimum number required to certify- 3

• Assess whether the student performs the steps in a correct manner

S.no	Head tilt manoeuvre performed	Chin lift manoeuvre performed	Jaw thrust manoeuvre performed	Remarks of the facilitator
1				
2				
3				

## Competency 3: Assess airway and breathing: administer oxygen using correcttechnique and appropriate flow rate

#### Minimum number required to certify- 3

 Demonstrate the various methods of administering oxygen and at specific rates

S. no	Head box	Nasal cannula	High flow nasal cannula	Face mask	Non re-breathing mask	Rate of delivery ofoxygen
1						
2						
3						

Competency 4: Assess airway and breathing: Perform assisted ventilation by Bagand mask in a simulated environment

#### Minimum number required to certify- 3

• Demonstrate assisted ventilation using bag and mask in a simulated environment

S. no	Chosen the correct size mask	Chosen the correctbag	Head and neck in proper position	Used the correct pressure to inflate	Looked for chest rise	Used the correct rate of ventilation
1						
2						

### Competency 5: Check for signs of shock i.e., Pulse, Blood Pressure, Capillary Refilltime

#### Minimum number required to certify- 3

• Check for the signs of shock

S. no	Check for volume of pulse	Check BP	Check for saturation	Check for CRT	Check for skin colour and temperature	Check for sensorium
1						
2						
3						

#### Competency 6: Choose the type of fluid and calculate the fluid requirement in shock

#### Minimum number required to certify- 3

- Choose appropriate fluid according to different types of shock.
- Calculate the fluidfor managing different types of shock at different age/size of the child.

S.no	Type of shock	Assess weight of child	Choose the appropriate fluid for bolus administration	Calculate the amount of fluid to be administered for bolus and continuation	Remarks
1	Hypovolemic				
2	Septic				
3	Cardiogenic				
4	Obstructive				
5	Burns				

## Competency 7: Assess level of consciousness & provide emergency treatment to a child with convulsion/coma

#### Minimum number required to certify- 3

S. no	Assess level of consciousness (Glasgow or AVPU)	Position a child in coma correctly	Position a child with head/spine trauma correctly	Assess ABCD	Demonstrate how to give rectal diazepam	Administer nasal midazolam spray
1						
2						
3						

#### **Competency 8: Assess for signs of severe dehydration**

#### Minimum number required to certify- 3

S.no	Thirst	Urine output	Sensorium	Mucus membrane	Skin turgor	Pulse	Blood pressure	AF if open
1								
2								
3								

#### Competency 9: Provide BLS for children in manikin

#### Minimum number required to certify- 3

• Demonstrate the steps of providing BLS for children

S.No	Check for response	Call for help	Check pulse and breathing simultaneously	Start chest compressi on	Make airway patent and give to rescue breaths	Repeat above CPR
1						
2						
3						

## <u>COMPETENCIES REQUIRING DOCUMENTATION</u> (To be done as part of seminar, demonstration, case presentation)

Competencies Addressed	Minimum	T/L	Date	Faculty
	No. to be	method	completed	signature
	done			
1. Analyze symptom and interpret the physical	3			
findings and arrive at an appropriate provisional				
differential diagnosis				
2. Recognize common surgical conditions of the	3			
abdomen and genitourinary system and enumerate				
the indications for referral				
3. Counsel / educate a patient forreferral	3			
appropriately				

#### **COMPETENCIES REQUIRING DOCUMENTATION**

#### (To be done as part of IMNCI assessment)

S. no	Competency Addressed	Minimum No. to be done	Date completed	Faculty signature
1	Identify children with under nutrition as per IMNCI criteria and plan referral	3		
2	Assess children <2 months using IMNCI guidelines	3		
3	Assess children >2 months to 5 years using IMNCI guidelines and stratify risk	3		
4	Identify and stratify risk in a sick neonateusing IMNCI guidelines	3		
5	Apply the IMNCI guidelines in risk stratification of children with diarrheal dehydration and refer	3		
6	Stratify risk in children with stridorusing IMNCI guidelines	3		

#### **COMPETENCIES REQUIRING DOCUMENTATION**

#### (To be done in a simulated environment)

S.	Competency Addressed	Minimum	Date	Faculty
no		No. to be	complete	signatu
		done	d	re
1	Provide intra-natal care and conduct a			
	normal delivery in asimulated environment	3		
2	Demonstrate the correct administration of			
	different vaccines in a mannequin	3		
3	Perform Neonatalresuscitation in a			
	manikin	3		
4	Demonstrate the technique of liver biopsy in			
	a manikin Perform Liver Biopsyin a simulated			
	environment	2		
5	Demonstrate performance of bonemarrow			
	aspiration inmannequin.	2		

#### **COMPETENCIES REQUIRING DOCUMENTATION**

## (To be done by giving actual blood reports/case scenarios/x-rays/CT/MRI/ EEG/ECG reports)

S.N	Competency Addressed	MinimumNo.	T/L	Date	Faculty
0		to be done	method	completed	signature
1	Interpret report of Plain X Ray (KUB)	3			
2	Enumerate the indications for and	3			
	Interpret the written report of USG (				
	KUB)				
3	Interpret a chest X ray and recognize	3			
	Cardiomegaly				
4	Choose and Interpret bloodreports in	3			
	Cardiac illness				
5	Interpret Pediatric ECG	3			
6	Interpret RFT and electrolytereport	3			
7	Interpret and explain the findings	3			
	in a CSF analysis				
8	Enumerate the indication and discuss	3			
	the limitations of EEG, CT, MRI				
9	Interpret the reports of EEG, CT, MRI	3			
10	Interpret blood tests in the context	3			
	of laboratory evidence for				
	tuberculosis				

## COMPETENCIES REQUIRING DOCUMENTATION (To be done as part of AETCOM)

S. no	Competency Addressed	Minimum No. to be done	Date completed	Faculty signature
1	Demonstrate empathy while dealing with children with cardiac diseasesin every patient encounter	3		
2	Counsel and educatepatients and their family appropriately on liver diseases	3		
3	Counsel parents of dangerously ill/terminally ill child tobreak a bad news	2		
4	Obtain Informed consent	2		
5	Willing to be a part of the ER team	3		
6	Attends to emergency calls promptly	3		

#### **SELF-DIRECTED LEARNING**

SI. No.	Topics	Objectives	Tasks	Impressions
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

#### **CLINIC/FIELD VISITS**

S.	Visit to	Competency	Year	Date	Report	Faculty
no			/Phase	completed	submitted	signature
1	Child	Visit a Child				
	development	Development Unit and				
	unit	Observe its				
		functioning				
3	Adolescent	Visit to the Adolescent				
	clinic	clinic				
4	Rural health	Observe the				
	centre	implementation				
		of the program by				
		visiting the Rural				
		Health Center				
5	Immunization	i. Observe the handling				
	clinic	andstoring of vaccines				
		ii. Document				
		Immunizationin an				
		immunization record				
		iii. Observe the				
		administrationof UIP				
		vaccines				
		iv. Practice Infection				
		control measures and				
		appropriate handling				
		of the sharps				