

LOG BOOK: PHASE B

MD (ANAESTHESIOLOGY) RESIDENCY PROGRAMME
Session: March 2012-February 2015



Department of Anaesthesia, Intensive Care and Pain Medicine
Bangabandhu Sheikh Mujib Medical University
Shahbag, Dhaka-1000

Email: anaesthesia.dept@bsmmu.edu.bd

PERSONAL DETAILS

Name		Photo									
Date of birth	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>										

ADDRESSES	Permanent Address	Contact Address (if different)
Telephone Home		Telephone Mobile
e-mail		

REGISTRATION NUMBER																			
BMDC																			
Date Reg										Renewal Date									
BSMMU Reg							Session												

QUALIFICATIONS			
	Medical College	University	Year of Awarded
MBBS			

General Information

1. The Log Book (Daily Training Record) is a day to day record of the clinical and academic work done by the Resident.
2. The log book will be pre-requisite for appearing End Block Assessment
3. This log book has to be maintained by all the resident throughout the period of training
4. The resident will obtain the log book from the course Co-Ordinator of the parent Institute immediately after joining
5. The resident will make the required entries in the logbook on the same day of the event and get it signed by the supervisor / instructor.
6. It is the responsibility of the resident to keep the logbook safe and secured
7. Entries in the log book will be rotation wise.

Block Rotation in phase B

SL. No.	Name of Block	Duration	SL. No.	Name of Block	Duration
1.	General Surgery and Liver Transplant Anaesthesia Rotation	Three months	2.	Orthopaedic and Dental / Fasciomaxillary Anaesthesia Rotation Orthopaedic Surgery Emergency Anaesthesia Dental and Fasciomaxillary	One month One month One month
3.	Genitourinary Surgery and Renal Transplant Anaesthesia	Three month			
4.	Paediatric Surgery Anaesthesia Rotation	Three month			
5.			5.	Neurosurgery & Anaesthesia & Neuro ICU Rotation	Three months
6.	Gynaecological and Obstetrical anaesthesia -analgesia Rotation Obstetrics Gynaecology	Two month one month	7.	Pain and Palliative Care rotation Acute Chronic Pain Palliative Care	One month One month One month
8.	Cardiothoracic Anaesthesia and Cardiac ICU Rotation Cardiovascular Thoracic Cardiac ICU	one month one month one month	9.	Otolaryngology, Ophthalmology / ECT Anaesthesia Rotation Otolaryngology Ophthalmology ECT	Two month Fifteen days Fifteen days
10.	Intensive Care Medicine Medical ICU Surgical ICU Neonatal ICU	Two month Fifteen days Fifteen days			

(Residents will be placed for a period of six months in his / her desired subspecialty for completion of his / her thesis work)

Profile of Supervisor (s)

Name	Designation	Supervisor of Block Rotation	Specimen Signature	Specimen Initial
Prof MA Hye	Professor and Chairman			
Prof AKM Akhtaruzzaman	Professor and Course Co-ordinator			
Prof Nezamuddin Ahmad	Professor			
Prof Debabrata Banik	Professor			
Prof Moinul Hossain	Professor			
Dr Iqbal Hossain Chowdhury	Associate Professor			
Dr AK Qumrul Huda	Associate Professor			
Dr Debasish Banik	Associate Professor			
Dr. Md. Mustafa Kamal	Associate Professor			
Dr. Dilip Kumar Bhowmick	Assistant Professor			
Dr. AKM Faizul Hoque	Assistant Professor			
Dr. Sabina Yeasmeen	Assistant Professor			
Dr. Md. Shafiqul Islam	Assistant Professor			
Dr. Montosh Kumar Mondal	Assistant Professor			

Rotation Summary Form

Blocks	Supervisor / Facilitator	Starting Date	Finishing Date	Remarks
1. General Surgery and Liver Transplant Anaesthesia Rotation				
2. Orthopaedic and Dental / Fasciomaxillary Anaesthesia Rotation				
Orthopaedic Surgery				
Emergency Anaesthesia				
Dental and Fasciomaxillary				
3. Genitourinary Surgery and Renal Transplant Anaesthesia				
4. Paediatric Surgery Anaesthesia Rotation				
5. Neurosurgery Anaesthesia & Neuro ICU Rotation				
6. Gynaecological and Obstetrical Anaesthesia Analgesia Rotation				
Obstetrics				
Gynaecology				
7. Pain and Palliative Care rotation				
Acute Pain				
Chronic Pain				
Palliative Care				
8. Cardiothoracic Anaesthesia and Cardiac ICU Rotation				
Cardiovascular				
Thoracic				
Cardiac ICU				
9. Otolaryngology, Ophthalmology, ECT Anaesthesia Rotation				
Otolaryngology				
Ophthalmology				
ECT				
10. Intensive Care Medicine				
Medical ICU				
Surgical ICU				
Neonatal ICU				

LEAVE ACCOUNTS

Policy:

1. Maximum 20 x 03 = 60 days as casual leave is allowed during the period phase –B. **Not more than 20days in a year.**
2. Prior leave permission should always- be sought from Chairman of the Department only after being allowed by the Respective Rotation Supervisor and forwarding letter from Course Co-ordinator of the Department
3. Leave account must be recorded in the enclosed format with duly signed and approved by respective assigned Head of the department / Supervisor / Consultant

From	To	Duration of leaves	Reason (s)	SIGNATURE		
				Supervisor	Course Co-ordinator	Chairman

ASSESSMENT DOCUMENTATIONS

Assessment documentation should include:

- Specific workplace assessments for each of the training units
- Any clinical assessment tools used and a summary list

SUMMARY OF CLINICAL ASSESSMENT TOOLS USED

Work place based Assessment			
Date	Training sub-speciality	Remarks	Signature

DATE	DOPS ASSESSMENT (Directly observed procedural skill assessment)	

DATE	Anaesthesia mini-CeX Assessment

DATE	CbD Assessment(Case based discussion)

LEARNING OUTSIDE THE CLINICAL ENVIRONMENT

Clinical meeting attended

Date	Title	Signature of chairperson

CLINICAL GOVERNANCE

Journal Club Meeting

Date	Title / Speaker	Signature of Chairperson

Morbidity and mortality meeting

Date	Title / Speaker	Signature of Chairperson

EMERGENCY SKILLS

Name of Skill	Date	Particulars of patient	Performance of the student	Signature of Instructor	Signature of Supervisors

Legend: Performance Level: Excellent, good, satisfactory, unsatisfactory

GENERAL SKILLS

Name of Skill	Date	Particulars of patient	Performance of the student	Signature of Instructor	Signature of Supervisors

Performance Level: Excellent, good, satisfactory, unsatisfactory

ANAESTHETIC SKILLS

Name of Skill	Date	Place of assessment	Performance level	Signature of Facilitator	Signature of Supervisor

Performance Level: Excellent, good, satisfactory, unsatisfactory

CRITICAL INCIDENT (S) ENCOUNTERED:

Name of incidents	Date	Place	Maneuver and outcome (s)	Signature of Facilitator
Difficult intubation				
Failed intubation				
Cyanosis				
Bradycardia				
Tachycardia				
Neurological deficit				
Aspiration				

Cardiac arrest				
Dental injury				
Anaphylactic reaction				
Delayed recovery				

CLINICAL ROTATION

Name of rotation: General Surgery and Liver Transplant Anaesthesia (Block-01)

Facilitator/Supervisor:

A. Teaching at PACU (Pre anaesthetic checkup) / operating room

Date	Topic	Name of Facilitator	Signature
	Preoperative Evaluation, Preparation and Premedication		
	Concomitant Disease		
	Anaesthesia Considerations: Cholecystectomy, Appendectomy, Bowel Obstruction and Perforation		
	Bowel Resection, Colorectal and anal canal		
	Acute Gastrointestinal Bleeding, Splenectomy, Pancreatic and Hepatic Resection		
	Portal Shunting Procedures		
	Adrenal Surgery		
	Postoperative Management		
	Transplant anaesthesia		
	ERCP		
	Teaching to junior resident & student		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
1				
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Record 5 full anaesthetic sheet:



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WORK PLACE BASED ASSESSMENT SUMMARY FORM

Name of Resident:

Batch:

Reg no:

Name of Rotation:

Facilitator:

Duration of placement:

Inspection of log book:

Attendance: days, out of (percentage:); Attainment of required skills: **Y / N** Direct involvement in sufficient clinical cases: **Y / N**

Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
Anaes-CEx		
CbD		

COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

- 1.
- 2.

Facilitator/ Supervisor

Signed

Seal

NB:

1. Worked place based assessment is an important part for teaching in anaesthesia. It consists of taking attendance, performing of minimum two Anaes-CEx, DOPS and CbD in any rotation. The supervisor plays a pivotal role in this assessment tools. You are requested to rates your trainee in the area of communication skills, attitudes and behaviour before **signing off** from this rotation.
2. Please attach attendance sheet and individual assessment form

CLINICAL ROTATION

Name of rotation: Orthopaedic and Dental / Fasciomaxillary Anaesthesia and Emergency Anaesthesia (Block-02)

Facilitator:

A. Teaching at Operating Room/Pre anaesthetic checkup room

Date	Topic (s)	Name of Facilitator	Signature
	Anaesthesia for Orthopaedic Surgery		
	Preoperative Assessment and preparation of the Patient for Orthopedic Surgery		
	Concomitant Disease		
	DVT prophylaxis		
	Choice of Anaesthetic Technique – Risks/Benefits of GA vs Regional		
	Anaesthetic Considerations: Major Lower Extremity Arthroplasty Surgery, Shoulder Surgery		
	Fractures		
	Surgery under Tourniquet, Cement implantation syndrome		
	Postoperative Pain Management, Postoperative Complications		
	Fat Embolism, Pulmonary Embolism		
	Compartment Syndrome		
	Emergency anaesthesia(Trauma)		
	Trauma Protocol and Role of Anaesthesia		
	Assessment and Management Principles in Acute Blunt Penetrating and Airway trauma		
	Head and Spinal Cord Injury, Thoracic, CVS, Abdominal Trauma, Major Orthopedic Trauma		
	Hypotension in the trauma patient		
	Management of the Acutely Traumatized Patient in the OR, for Repeated Surgical Procedures.		
	Dental & Fasciomaxillary Surgery		
	Preoperative Assessment & Preparation		
	Anaesthetic Considerations in: Maxillary / Mandibular surgery		
	Anaesthesia in a dental office, Dental surgery in an uncooperative patient		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
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Emergency anaesthesia (Trauma)

Dental & Fasciomaxillary Surgery

Record 5 full anaesthetic sheet:



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Name of Resident:

Batch:

Reg no:

Name of Rotation:

Facilitator:

Duration of placement:

Inspection of log book:

Attendance: days, out of (percentage:); Attainment of required skills: **Y / N** Direct involvement in sufficient clinical cases: **Y / N**

Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
Anaes-CEx		
CbD		

COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

- 1.
- 2.

Facilitator/ Supervisor

Signed

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2. Please attach attendance sheet and individual assessment form

CLINICAL ROTATION

Name of rotation: Genitourinary Surgery and Renal Transplant Anaesthesia (Block-03)

Facilitator:

A. Teaching at operating room/Pre anaesthetic checkup room

Date	Topic (s)	Name of Facilitator	Signature
	Preoperative Evaluation, Preparation, Premedication and Concomitant Disease		
	Renal protection		
	Anaesthetic Considerations for <ul style="list-style-type: none"> • Nephrectomy 		
	Lithotripsy <ul style="list-style-type: none"> • Percutaneous lithotripsy • Extracorporeal shock wave lithotripsy (ESWL) • potential problem 		
	Prostate surgery <ul style="list-style-type: none"> • Transurethral Resection of the Prostate • Anaesthesia for TURP • List the complications of TURP • Describe the TURP syndrome and its treatment • Recognize and treat hyponatremia; • Know different anesthetic options • Irrigation fluid options: know advantages and disadvantages of each • Prostatectomy: Open and Laparoscopic 		
	Complex urological cases <ul style="list-style-type: none"> • renal tumour resection and LN clearance with extensive dissection; • radical cystectomy and conduit reconstruction - 4-6 hours. • Complications anaesthesia related- i) regional ii) general iii) procedure related 		
	Endourologic Procedures <ul style="list-style-type: none"> • Urethral • Bladder • Ureteral 		
	Kidney transplant <ul style="list-style-type: none"> • Preoperative Assessment, Preparation and Management of Recipient for Kidney • Major problems in patients with renal disease • Monitoring • Drugs • Management of Transplant Patient for Non-transplant surgery • Transplantation Immunology • Management of Cadaver Organ Donor 		

	Cystoscopy		
	Circumcision		
	Postoperative Management		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
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WORK PLACE BASED ASSESSMENT SUMMARY FORM

Name of Resident:

Batch:

Reg no:

Name of Rotation:

Facilitator:

Duration of placement:

Inspection of log book:

Attendance: days, out of (percentage:); Attainment of required skills: **Y / N** Direct involvement in sufficient clinical cases: **Y / N**

Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
Anaes-CEx		
CbD		

COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

- 1.
- 2.

Facilitator/ Supervisor

Signed

Seal

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2. Please attach attendance sheet and individual assessment form

CLINICAL ROTATION

Name of rotation: Paediatric Surgery Anaesthesia (Block-04)

Facilitator:

A. Teaching at operating room

Date	Topic (s)	Name of Facilitator	Signature
	Preoperative Assessment		
	Monitoring and Specialized Equipment for Paediatric Anaesthesia		
	Perioperative Fluid and Electrolyte Management – Fasting Guidelines		
	Perioperative Temperature Management		
	Anaesthetic Management of the Paediatric Patient		
	Common Paediatric Syndromes and Emergencies:		
	TE fistula, FB in airway, epiglottitis, pyloric stenosis		
	Child with Recent URTI, Difficult Airway, Trauma		
	Congenital Heart Disease for non-cardiac surgery		
	Pain Management and Regional Anaesthesia		
	Anaesthesia outside the OR		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
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Record 5 full anaesthetic sheet:



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WORK PLACE BASED ASSESSMENT SUMMARY FORM

Name of Resident:

Batch:

Reg no:

Name of Rotation:

Facilitator:

Duration of placement:

Inspection of log book:

Attendance: days, out of (percentage:); Attainment of required skills: **Y / N** Direct involvement in sufficient clinical cases: **Y / N**

Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
Anaes-CEx		
CbD		

COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

- 1.
- 2.

Facilitator/ Supervisor

Signed

Seal

NB:

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2. Please attach attendance sheet and individual assessment form

CLINICAL ROTATION

Name of rotation: Neurosurgery Anaesthesia (Block-05)

Facilitator:

A. Teaching at operating room

Date	Topic (s)	Name of Facilitator	Signature
	Neurosurgery Anaesthesia		
	Preoperative Evaluation, Appropriate Investigations, Preoperative Optimization		
	Monitoring, EEG, Evoked Potentials, ICP, Transcranial Doppler		
	Anaesthetic Consideration: Increased ICP, Supratentorial Masses, Posterior fossa surgery		
	Cerebral Aneurysms, Occlusive Cerebrovascular Disease, AVM, Spinal Cord Surgery		
	Interventional neuroradiology, Epilepsy Surgery, Pediatric Neurosurgery		
	Neuroendocrine Disease, Induced Hypotension		
	Severe head injury, Spinal cord injury, Subarachnoid hemorrhage, Seizures Complications		
	Electrolyte Disorders – SIADH, Cerebral salt-wasting syndrome		
	Air embolism, intracranial hypertension		
	Methods of Brain Protection, Postoperative Management		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
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WORK PLACE BASED ASSESSMENT SUMMARY FORM

Name of Resident:

Batch:

Reg no:

Name of Rotation:

Facilitator:

Duration of placement:

Inspection of log book:

Attendance: days, out of (percentage:); Attainment of required skills: **Y / N** Direct involvement in sufficient clinical cases: **Y / N**

Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
Anaes-CEx		
CbD		

COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

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- 2.

Facilitator/ Supervisor

Signed

Seal

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2. Please attach attendance sheet and individual assessment form

CLINICAL ROTATION

Name of Rotation: Gynaecological and Obstetrical anaesthesia -analgesia (Block-06)

Facilitator:

A. Teaching at operating room

Date	Topic (s)	Name of Facilitator	Signature
	Gynaecological and Obstetrical anaesthesia -analgesia		
	Gynaecological surgeries anaesthesia		
	Laparoscopic assisted procedures & anaesthesia		
	Obstetrical anaesthesia		
	Preop Assessment, Medical Diseases in the Parturient		
	Principles of Fetal Assessment and Monitoring		
	Informed Consent in the Obstetrical Patient		
	Methods of Pain Management for Labour and Delivery		
	Regional Anaesthesia, Pharmacologic Agents, Other modalities		
	Effects of Anaesthesia/Analgesia on uterine blood flow/uterine activity		
	Management of Preterm Labour, Prolapsed cord, Pre-eclampsia, Eclampsia, HELLP syndrome		
	Abnormal Presentations, Shoulder dystocia		
	Pre and Post-partum Hemorrhage, Uterine Dehiscence, Uterine Inversion,		
	Cesarean Section, Non-obstetrical Surgery in the Pregnant Patient		
	CPR in the Pregnant Patient, Neonatal resuscitation ,amniotic fluid embolism		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
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WORK PLACE BASED ASSESSMENT SUMMARY FORM

Name of Resident:

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Attendance: days, out of (percentage:); Attainment of required skills: **Y / N** Direct involvement in sufficient clinical cases: **Y / N**

Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
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COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

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2. Please attach attendance sheet and individual assessment form

CLINICAL ROTATION**Name of Rotation:** Pain and Palliative Care (Block-07)

Facilitator:

A. Teaching at Bed side

Date	Topic (s)	Name of Facilitator	Signature
	Pain		
	Principles and Techniques of Acute Pain Management, Systemic Opioids		
	Non-opioid analgesics, PCA, Regional techniques & Nerve blocks		
	Principles and Techniques of Chronic Pain Management		
	Medications, Psychological Support		
	Neuroablative techniques		
	Neuroaugmentative techniques - spinal cord stimulation		
	TENS, Organization of a multi-disciplinary pain service		
	Palliative Care		
	Introduction to palliative care : The basic principles of palliative care		
	By the end of the section the student should be able to learn.		
	The basic skills in communicating with a patient		
	Strategy for breaking bad news handling the responses		
	Ethical issues in palliative care		
	Concept of spiritual distress		
	Management of Palliative Care Emergencies and Non-Malignant Disease By the end of the section the student should be able to:		
	Recognize the following common urgent problems and propose appropriate management for spinal cord compression, superior vena cava obstruction, haemorrhage, convulsion and hypercalcemia.		
	Demonstrate how increased knowledge and understanding of the following conditions like end-stage respiratory disease, chronic heart failure, multiple sclerosis and motor neuron disease can improve the palliative management of patients.		
	The Last 48 Hours of Life , Practical Issues and Bereavement By the end of the section the student should be able to:		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
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Duration of placement:

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Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
Anaes-CEx		
CbD		

COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

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Facilitator/ Supervisor

Signed

Seal

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CLINICAL ROTATION**Name of Rotation:** Cardiothoracic Anaesthesia and Cardiac ICU (Block-08)

Facilitator:

A. Teaching at operating room

Date	Topic (s)	Name of Facilitator	Signature
	Cardiac Anaesthesia		
	Preoperative evaluation, appropriate Investigations, risk Stratification, monitoring, Use of Hemodynamic Monitoring, TEE		
	Anaesthetic Considerations in Patients with CAD, CHF - Right and Left ventricular dysfunction, Hypertension, Cardiomyopathies, Tamponade, Valvular Disease, Dysrhythmias, Pacer, Defibrillator. Congenital Heart Disease, Minimally invasive CABG, Management of CPB, Ventricular Assist Devices		
	Postoperative Management, Pain Management		
	Postoperative Complications - Ischemia, MI, Arrhythmias, LVF, RVF, Neurological Complications		
	Cardiogenic Shock - Pathophysiology and Management, ACLS Protocol		
	Thoracic Anaesthesia		
	Preoperative Assessment, Appropriate Investigations, Risk Stratification		
	Specific Considerations in Pulmonary Malignancies		
	Preoperative Optimization,		
	Considerations in Specific Respiratory Diseases: Asthma, COPD, Cystic Fibrosis, Pulmonary Fibrosis, Pulmonary Hypertension		
	Anaesthetic Considerations: One Lung Anaesthesia, Bronchoscopy, Mediastinoscopy, Lobectomy, Pneumonectomy, Tracheal Resection, Thoracoscopic Surgery,		
	Postoperative Management, Techniques of Post-Thoracotomy Analgesia		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
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Name of Resident:

Batch:

Reg no:

Name of Rotation:

Facilitator:

Duration of placement:

Inspection of log book:

Attendance: days, out of (percentage:); Attainment of required skills: **Y / N** Direct involvement in sufficient clinical cases: **Y / N**

Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
Anaes-CEX		
CbD		

COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

- 1.
- 2.

Facilitator/ Supervisor

Signed

Seal

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2. Please attach attendance sheet and individual assessment form

CLINICAL ROTATION

Name of Rotation: Otolaryngology, Ophthalmology, ECT Anaesthesia Rotation (Block-09)

Facilitator:

A. Teaching at operating room

Date	Topic (s)	Name of Facilitator	Signature
	Otolaryngology		
	Preoperative Assessment, Preparation and Concomitant Disease		
	Anaesthetic Considerations for Ear and Nasal Surgery Tonsillectomy/Adenoidectomy		
	Laryngoscopy / laryngeal surgery, bronchoscopy		
	ENT tumors, ENT infections, tracheostomy		
	Postoperative Care, Postoperative Complications, Pain Management		
	Anaesthesia for Ophthalmological surgery Preoperative Assessment, Preparation and Concomitant Disease		
	Considerations of intraocular pressure		
	Effects of ophthalmologic medications		
	Technique of and Complications of Retrobulbar and Peribulbar Block		
	Anaesthetic Considerations in open eye injuries, cataract Surgery, retinal Surgery, strabismus Surgery		
	Postoperative Complications		
	Electroconvulsive therapy (ECT)		
	Preoperative assessment		
	Anesthetic techniques and drug effects on seizure duration		
	Hemodynamic responses and appropriate treatment		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Record 5 full anaesthetic sheet:



MD Residency Programme
Dept. of Anaesthesia, Analgesia and Intensive Care Medicine
Bangabandhu Sheikh Mujib Medical University
Shahbag, Dhaka-1000

WORK PLACE BASED ASSESSMENT SUMMARY FORM

Name of Resident:

Batch:

Reg no:

Name of Rotation:

Facilitator:

Duration of placement:

Inspection of log book:

Attendance: days, out of (percentage:); Attainment of required skills: **Y / N** Direct involvement in sufficient clinical cases: **Y / N**

Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
Anaes-CEx		
CbD		

COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

- 1.
- 2.

Facilitator/ Supervisor

Signed

Seal

NB:

1. Worked place based assessment is an important part for teaching in anaesthesia. It consists of taking attendance, performing of minimum two Anaes-CEx, DOPS and CbD in any rotation. The supervisor plays a pivotal role in this assessment tools. You are requested to rates your trainee in the area of communication skills, attitudes and behaviour before **signing off** from this rotation.
2. Please attach attendance sheet and individual assessment form

Name of Rotation: Intensive Care Unit (Block-10)

Facilitator:

A. Teaching at Intensive Care Unit

Date	Topic (s)	Name of Facilitator	Signature
	Intensive Care Unit		
	Knowledge of indications, techniques used and complications of invasive and noninvasive monitoring in critical care setting		
	CT insertion-Blakemore/Linton tube		
	Pathophysiology and management of pain and sedation in ICU		
	Respiratory failure, methods of mechanical ventilation, modes of weaning		
	Shock, Sepsis, MODS / SIRS, Coma, Status		
	Epilepticus, Burn, Hypothermia, Acute Intoxications		
	Endocrine dysfunction, nutritional support & NPO Criteria		
	Transport of Critically Ill Patients Brain Death		
	Organization, Design, Staffing and delivery of Critical Care Services High dependence unit		

B. Clinical Competence (skills) at Operating room

Sl. no	Name of competence (required number)	Performance level	Signature of Instructor	Signature of Supervisors
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Record 5 full anaesthetic sheet:



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WORK PLACE BASED ASSESSMENT SUMMARY FORM

Name of Resident:

Batch:

Reg no:

Name of Rotation:

Facilitator:

Duration of placement:

Inspection of log book:

Attendance: days, out of (percentage:); Attainment of required skills: **Y / N** Direct involvement in sufficient clinical cases: **Y / N**

Satisfactory communication skills, attitudes and behavior: **Y / N**

Skills assessment:

Tools	Number	Area covered
DOPS		
Anaes-CEx		
CbD		

COMMENTS: SATISFACTORY / REQUIRED IMPROVEMENT IN THE FOLLOWING AREA

- 1.
- 2.

Facilitator/ Supervisor

Signed

Seal

NB:

1. Worked place based assessment is an important part for teaching in anaesthesia. It consists of taking attendance, performing of minimum two Anaes-CEx, DOPS and CbD in any rotation. The supervisor plays a pivotal role in this assessment tools. You are requested to rates your trainee in the area of communication skills, attitudes and behaviour before **signing off** from this rotation.
2. Please attach attendance sheet and individual assessment form

Didactic Lecture (Department of Anaesthesiology)

Date	Topic (s)	Facilitator	Signature

Didactic Lecture (Department of Anaesthesiology)

Date	Topic (s)	Facilitator	Signature

Didactic Lecture (Department of Anaesthesiology)

Date	Topic (s)	Facilitator	Signature

CERTIFICATE OF LOG BOOK COMPLETION

TO WHOM IT MAY CONCERN

I, to the best of my knowledge and belief certify that Dr. _____,
BSMMU Registration no: _____ session March 2012 to February 2015 has been completed his assign work and recorded as
directed by his / her supervisor (s). He / She is attended _____ classes out of _____. Dr _____
has shown care and respect for the patient, demonstrate eagerness to learn and practice during this period.
He / She may be allowed to appear final examination in this session.

Course Co-ordinator

Chairman