

**LIAQUAT INSTITUTE OF MEDICAL
AND HEALTH SCIENCES THATTA, SINDH,
PAKISTAN**

THIRD PROFESSIONAL (FOURTH YEAR) MBBS



***STUDENT LOG BOOK
OPHTHAMOLOGY SUBJECT***

**LIAQUAT INSTITUTE OF MEDICAL & HEALTH
SCIENCES (LIMHS), Thatta, Sindh, Pakistan
STUDENT LOG BOOK**

**THIRD PROFESSIONAL
(Fourth Year) MBBS**

Ophthalmology



Info of the student

Name of the student:

Father`s name:

Class:

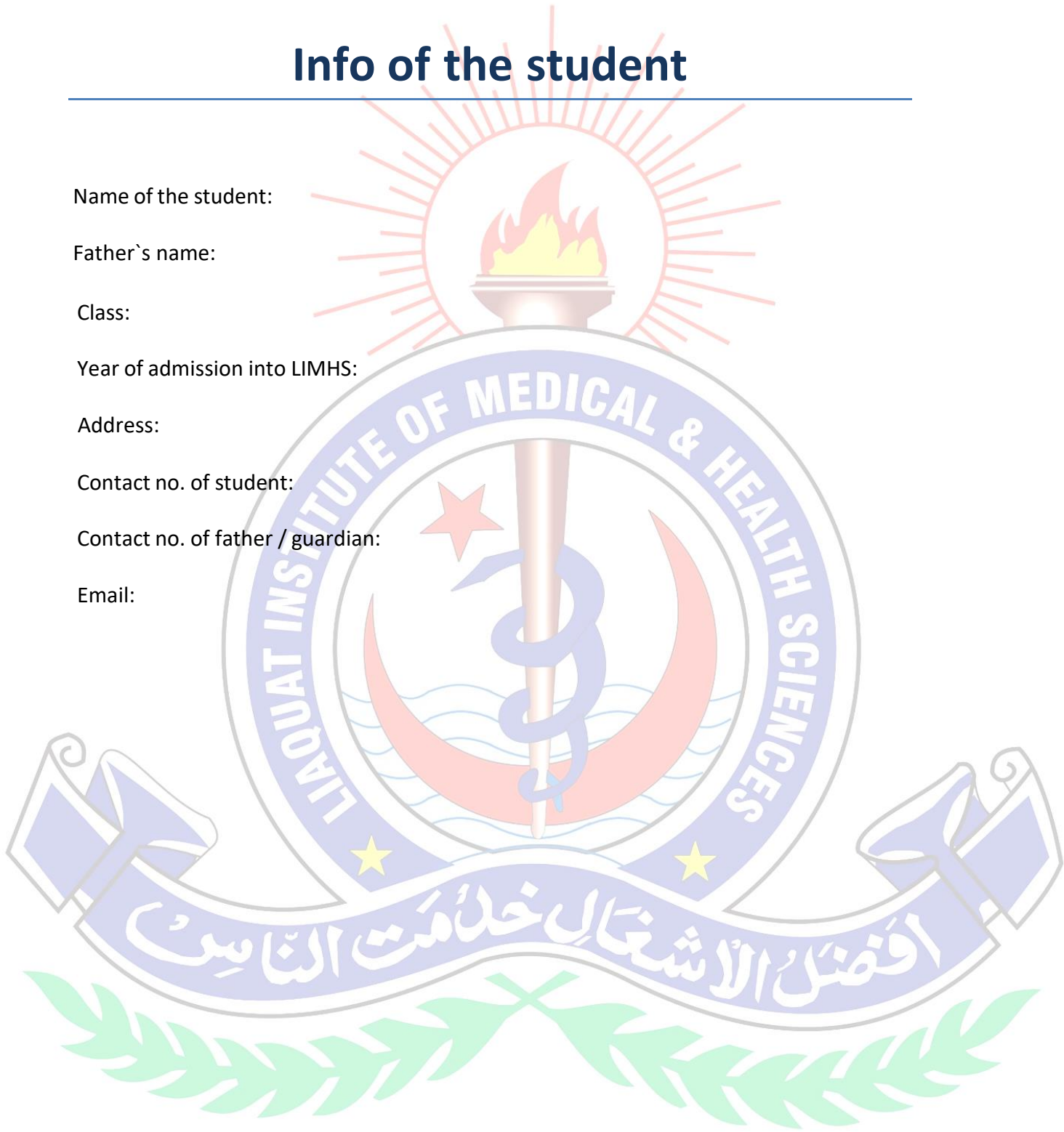
Year of admission into LIMHS:

Address:

Contact no. of student:

Contact no. of father / guardian:

Email:





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MESSAGE FROM VICE CHANCELLOR, LUMHS

Liaquat Institute of Medical and Health Sciences (LIMHS) is a constituent college of Liaquat Institute of Medical and Health Sciences (LUMHS) Jamshoro, Sindh, Pakistan. It has been established with the intention to educate the male candidates to fill the gap of male medical graduate serving the rural areas in Sindh as females are reluctant to serve the rural population despite of their increasing ratio in admission in medical colleges in Sindh comparing to male candidates.

LIMHS aims to provide quality education as per the guidelines of Pakistan Medical Commission (PMC) formerly called as Pakistan Medical and Dental Council (PMDC) and Higher Education Commission (HEC) Pakistan under the umbrella of LUMHS. LIMHS followed the updated curriculum of LUMHS being a constituent institute of LUMHS but intends to bring innovation in its Implementation regarding teaching/learning and assessment methods. Furthermore, it implements & started integrated modular hybrid curriculum from third batch.

The updated integrated modular hybrid curriculum covers the credit hours filling of log books prescribed by the PMC and HEC.

I believe the graduate of LIMHS will be competent to cater the healthcare needs of community.

Professor Dr. Ikram din Ujjan
Vice Chancellor, LUMHS

Message from Administrative and Academic head of LIMHS

The observation and assessment of performance of medical students is an integral part of curriculum. It can be accomplished by different modalities of assessments. Similarly, exposing the students to different clinical activities during the undergraduate medical training is essential. Supervising these activities is mandatory. For that purpose, keeping record of these events is important for student's evaluation and inclusion of these activities in grading student's performance. Logbooks system is in use for many decades in the field of medicine throughout the world, and has some weaknesses like falsification of data, but still it is considered to be a useful checklist in assessing the performance of students and record keeping of different activities.

For this purpose, the Liaquat Institute of Medical and Health Sciences is introducing the LOG BOOK for students of 4th year and beyond to help the students as well as the faculty in streamlining the teaching, assessment and certification of student's performance. This activity will ensure structuring and recording student's activities during their clinical rotations based on the learning objectives assigned, and will help the faculty in assessing student's performance. The logbook system will be converted to a portfolio system in future.

Liaquat Institute of Medical and Health Sciences
Administrative and Academic Head LIMHS



Purpose of Logbook

This Logbook is intended to develop, record, assess and certify student`s activities during clinical and other rotations. These activities are based on the learning objectives defined in the curriculum document. Recording and certification of clinical and educational activities provides an objective evidence of assessment of student and evaluation of the overall performance of students. Adding reflection by students during activity log enhances the academic performance of students. A section of reflection has been added to this log book with the intent to convert this document into a reflective portfolio in future. Record of these activities will ultimately improve patient safety, as the students will be aware of their limits, duties and responsibilities.

Principal

Liaquat Institute of Medical and
Health Sciences

Clinical Exposure

Clinical exposure is one of the integral parts of undergraduate medical education that usually start at 3rd year. However, in contemporary programs, rotations in clinical activities starts right at the start of training called as an early clinical exposure as part of integration attempt. This document will be extended in future amongst students of early years. Clinical skills learning requires the exposure of students into clinical environment. This exposure should be preceded by skill laboratory training, and should be gradual. It has to be according to the learning objectives defined in the curriculum.

The objectives of these rotations include:

- 1) Application of concepts in real life situations which is being presented in lectures, books and other reading materials
- 2) Acquisition of clinical skills relevant to the level and understanding of students
- 3) Understanding the concepts of patient safety, hospital organization and roles of doctors in clinical situations
- 4) Developing communication skills, counseling skills, patient management skills, team work, time management skills, critical thinking skills, decision making skills and interdepartmental collaboration at workplace
- 5) Developing and enhancing professionalism in medical students

It is important to mention that this logbook is not only intended for the above- mentioned purposes, but include other activities and accomplishments of students like research, presentations and record of participation in co-curricular activities.

Director Medical Education
Liaquat Institute of Medical
and Health Sciences

How to use this Logbook

The log book is divided into sections according to the specialties and units whom the students visit. Rotation in each unit is represented into 3 parts; 1st part represents clinical skills required of students, 2nd part relates to other activities like knowledge imparted during rotation, record of history taking, field visits, assessment marks and student's reflection. The 3rd part includes attributes of communication skills and professionalism. All students are required to duly attest each activity in the log book. The log book also includes record of activities not related to clinical rotations. Those activities include, presentation skills, record of research publications, co-curricular activities and many others. At the end, there is record of student's attendance, and end of module assessment score that should be completed by the student affairs / examination section. This log book will have an important weightage in final assessments of students and students who fail to present this log book in final assessment will not be considered for promotion to next class. Students are advised to make a copy of all these activities so that it can be retrieved in times of loss of log book at the end of the year. It is important to mention that level of competence has been shown in individual rotations as follows:

Level A: Observer status

Level B: Assistant status

Level C: Performed part of the procedure under supervision

Level D: Performed whole procedure under supervision

Level E: Independent performance

Third year students will achieve only level A and B in most of the situations except a few where patient's safety is not endangered. Students of 4th and 5th year are required to achieve level C and D and in some cases level E (where patient safety is not endangered).

Methods of writing Reflection in the Logbook

Reflective thinking and writing demands that student recognizes that every student brings valuable knowledge to every experience. It helps students therefore to recognize and clarify the important connections between what student already knows and what student is learning. It is a way of helping student to become an active, aware and critical thinker and learner.

It is mandatory for students to write about his / her experience and reflective thinking of clinical rotation in each unit in the space given in logbook. The reflective document includes the description about the following points:

- 1) Description of an event (one paragraph)
- 2) Thinking and feeling of student (one paragraph)
- 3) Good and bad about the experience (one paragraph)
- 4) How to avoid bad experiences and pursue good experiences in future (a few words to a paragraph).

The whole reflection document should be about between 200-300 words

Contents of clinical rotations

In 4th year, the MBBS students are rotated in following departments in groups of about students:

- 1) Ophthalmology
- 2) ENT
- 3) Gynecology & Obstetrics
- 4) Pediatrics
- 5) Medicine and Allied Departments
- 6) Surgery and Allied Departments
- 7) Skills laboratory

In the next sections, a list of competencies, level of achievement, professionalism attributes and supervisor`s observations / approval with dates are mentioned.

WAYS OF TEACHING AND LEARNING IN Ophthalmology

Locations For Learning

- Lecture hall
- OPD clinics
- Ward
- Operation theatre

Learning in Operation Theater

Students should learn about:

- Sterilization

Observe the case of

- Canalization surgery
- Excision of pterygium
- Extra Capsular Cataract Surgery
- Phacoemulsification Surgery
- Dacryocystorhinostomy

LEARNING OBJECTIVES FOR KEY CONDITIONS in Ophthalmology

Abnormalities of lids

- Chalazion
- Sty
- Blepharitis
- Ptosis

Abnormalities of lacrimal system

- Acute Dacryocystitis
- Chronic Dacryocystitis
- Nasolacrimal duct blockage

Conjunctiva

- Conjunctivitis
- Pterygium
- Pingucula
- Conjunctival cyst

Differential diagnosis of Red eyes cornea

- Corneal ulcers
- Keartoconus
- Corneal degenerations

Sclera

- Episcleritis
- Anterior Scleritis
- Posterior scleritis

Pupil

- Pupillary reactions
- Pupillary abnormalities

Glaucoma

- Acute angle closure glaucoma
- Chronic open angle glaucoma

Lens abnormalities

- Congenital cataract
- Senile Cataract
- Secondary cataract
- Ectopia lentis

Endophthalmitis

- Acute endophthalmitis
- Chronic endophthalmitis

Uveitis

- Anterior uveitis
- Posterior uveitis
- Acute and chronic uveitis

Squint

- Esotropia
- Exotropia

Macular diseases

- Age related macular diseases
- Central serous chorioretinopathy

Optic nerve diseases

- Optic neuritis
- Papilloedema

Diabetic retinopathy

Hypertensive retinopathy

Trauma of eye ball and orbit

Learning objectives in Ophthalmology Clinics

A. History Taking

1. Particular of the patients
2. Chief complaints
3. History of present illness
4. Past history
5. Drug History
6. History of allergy
7. Personal history
8. Family history

B. Examination

- i. visual acuity
- ii. color vision
- iii. Tests of optic nerve functions
- iv. Tests of macular functions
- v. Torch examination
- vi. Examination of orbit
- vii. Examination of lacrimal system
- viii. Examination of anterior chamber with torch
- ix. Slit lamp examination

C. Overview of Instruments used in Ophthalmic clinics

- Direct ophthalmoscope
- Indirect ophthalmoscope
- Slit lamp

D. Different diagnostic lenses used in ocular examination

E. Common medications used during ocular examination

F. Provisional Diagnosis/Differential Diagnosis

G. Drugs used for common conditions

H. When to refer patient to specialist

Skills laboratory

S. No	Date	Competencies	Level					Supervisor's comments	Signature
			A	B	C	D	E		
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

- A: Observer status**
- B. Assistant Status**
- C. Performed part of the procedure under supervision**
- D. Performed whole procedure under supervision**
- E. Independent Performance**

Details of other activities in Ophthalmology

Competencies	Details	Supervisor`s comments / signature
Introduction to Common symptoms and diseases in Ophthalmology	Presented by:	
Details of history and examination * You have to write 2 histories in each ward along with examination, provisional diagnosis, relevant investigations, results of procedures, final diagnosis, treatment and follow-up protocol	*Mention 3 symptoms and system involved 1) 2) 3)	
Case Based Discussion (CBD)		
End of the ward assessment	Marks: _____ out of _____	
Any other event that you want to record during your stay in the unit (provide details)		
Reflection by student		

Comments about professionalism and behaviors of students in Ophthalmology

(To be filled by the supervisor)

S. No	Statement	Supervisor comments		
		Yes	No	Any other point
1	Was polite with patients, nurses, paramedical staff, seniors and colleagues			
2	Was ready to take responsibility			
3	Kept calm in difficult situations			
4	Maintained an appropriate appearance / dress			
5	Avoided derogatory remarks in the unit			
6	Presentation skills were up to the mark			
7	Total attendance		Out of=	
7	Overall assessment of professional conduct		A: High	B: Moderate C: Low

Other academic and co-curricular activities In Ophthalmology

List of presentations*

S. No	Title of presentation / lecture	Venue	Date	Signature of supervisor / organizer

*The student can paste photocopies of certificates of presentations on this

List of certificates of participation in other academic and co-curricular activities* in Ophthalmology

S. No	Name of activity / society / other	Position	From --- to (date)	Signature of organizer / in-charge

*Student can paste the proof / certificate / office order of the activities / events

Evaluation / Assessment Chart in Ophthalmology

S. #	Date	Duration	Activity	Performance	Assessed By	Student Sign	Teachers Sign

For student affairs / examination section

Details of marks of internal assessments in Ophthalmology

S. No	Assessment module	Marks obtained	Total marks	MCQ	SAQ	OSCE / viva / practical	%age	Pass / Fail	
	Total marks of all modules								
	Total marks of log book					Out of: 50			
	%age								

Deputy / Controller of examination

Director Medical Education

Sign _____

Sign

