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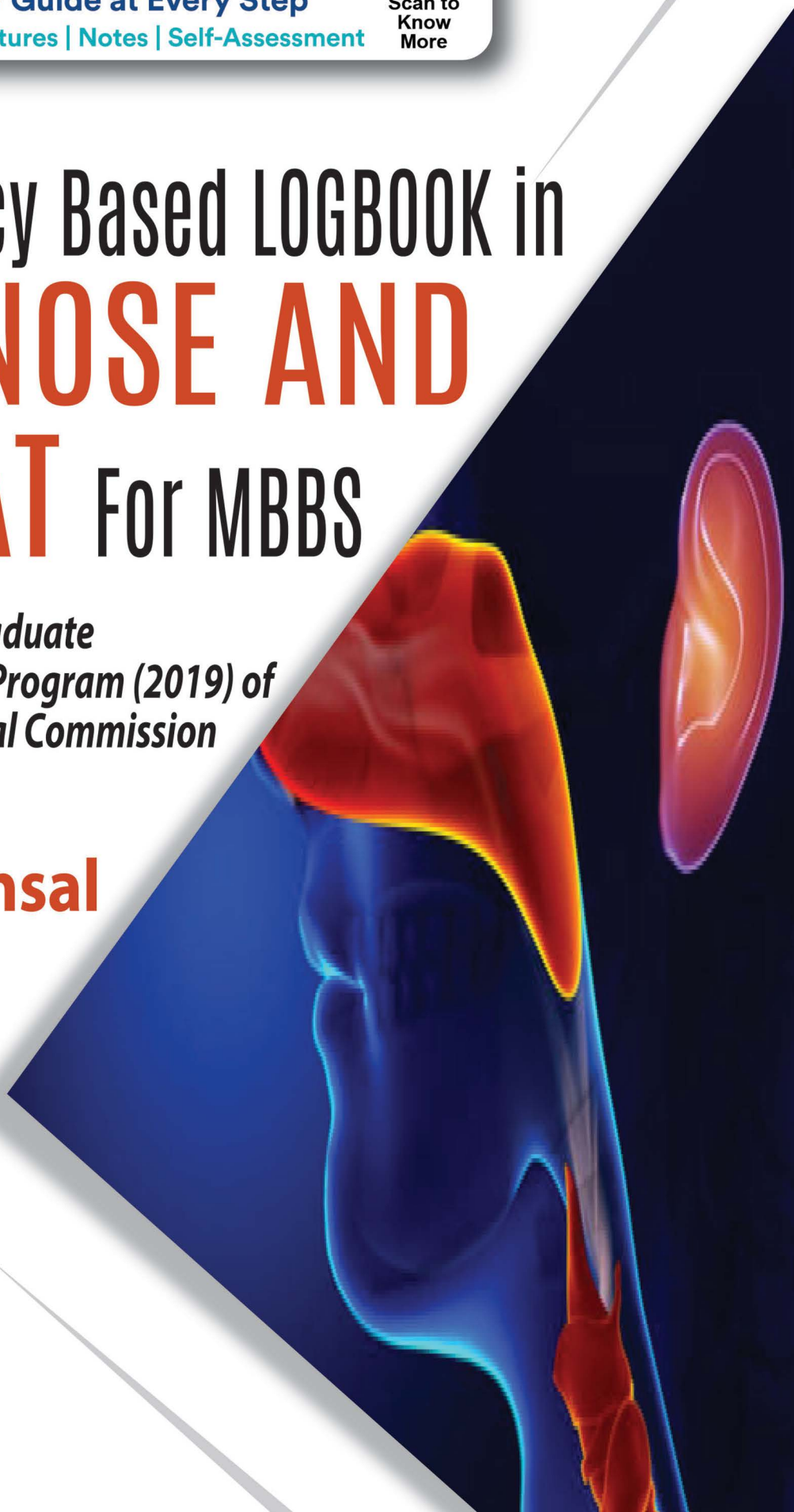
Competency Based LOGBOOK in EAR, NOSE AND THROAT For MBBS

As per the Undergraduate Medical Education Program (2019) of the National Medical Commission



Mohan Bansal

JAYPEE

Contents

1. General Instructions 1
2. Attendance and Leaves Records 3
3. Distribution of Marks in the Internal Assessment 4
4. Distribution of Teaching Hours 5
5. Competencies Tables 6
   a. Template of Competencies' Tables *7*
   b. Competencies of Perform (P) Level and Certification *8*
   c. E.N.T. Competencies During Internship *9*
   d. `Show How' Level Clinical Examination Competencies *11*
   e. 'Show How' Level Small Group Discussion (SGD) *13*
   f. 'Show How' Level Surgical Competencies *16*
6. Lectures and Seminars 18
   a. Interactive Theory Lectures *19*
   b. Integrated Learning Sessions *21*
   c. Self-directed Learning *22*
7. Clinical Learning 25
   a. Clinical Case Presentations *26*
   b. Standard format of History Taking and Examination *28*
   c. Clinical Posting Schedule *33*
8. Departmental Activities 37
9. AETCOM Modules 38
10. Reflections 39
11. Daily Notes with Dates 42

CHAPTER

1 General Instructions

The older I grow, the more everything seems to me to lie in manliness. This is my new gospel. Men should be taught to be practical, physically strong. A dozen such lions will conquer the world, not millions of sheep.

— Swami Vivekananda

This booklet has been prepared as per the guidelines of National Medical Commission (NMC) erstwhile MCI for recording logbook entries, recommended to be followed for the MBBS students from the academic year 2019-20 onwards. The logbook is an integral part of the formative/continuous assessment program. The logbook reflects the spirit and purpose of the competency driven curriculum, captures and documents the acquisition of chosen competencies and the progress of the student without being unwieldy and inefficient.

This module aims to create a standard protocol for documenting the achievement of selected competencies listed in the Competency Based UG Curriculum (2018) and the Regulations on Graduate Medical Education, 2019, Part II. These guidelines can be adapted/modified as per requirements of the college/universities. The main emphasis of the competency driven curriculum is on the acquisition of predefined set of attitude, knowledge, skills and values. This suggested format can be modified as per the requirement of the college/universities.

The logbook, an academic document is a verified record of the student's progressive learning, documenting the acquisition of required competencies (Knowledge, skills, attitude and values). It is a prerequisite for passing and going to the next phase of learning and getting degree of the course. This booklet will guide for the planning and components of activities and criteria for successful completion, remedial and feedback into the log table.

Evidence of the activities mentioned in this logbook can be maintained in a portfolio or as an annexure to this logbook. A portfolio keeps the evidences of events documented in the logbook and includes assignments, self-assessment, feedback, work-based and in-training formative assessments, reflections and learning from the planned activity. Activity refers to a predefined task performed by students which will contribute to the achievement of mentioned competencies. Remedial refers to a planned activity that is aimed at correcting deficits that prevent the students from securing intended outcome. Feedback is an active interaction (through guided reflection of activities) that is performed by the teacher to the student at the completion of an observed activity, which is intended to facilitate positive change, growth and improvement of the student.

The booklet is based on the needs of competency driven curriculum. Skill competencies having Performance '(P)'/ Shows How '(SH)' in the psychomotor and communications domains need logbook entry. Documentation of self-directed learning (reflections, narrative and creative writing experiences, participation in seminars, symposia) may be maintained in the separate portfolios registers. Competencies needing documentation of collected clinical experiences, predetermined patient may also be included in the logbook. Successful documentation and submission of the logbook is a prerequisite for being allowed to take the final summative examination (GMER 11.1.1.b.7). Overall logbook assessment includes 20% marks.

The logbook must reflect the spirit and purpose of the competency driven curriculum and should document the acquisition of selected competencies and the progress of the student. AETCOM modules should find a place in the logbook. Many 'K' (Knows) and 'KH' (Knows How) competencies are usually not included in the logbook unless they lead to some activities.

The faculty will determine the criteria determining satisfactory (meets expectations) completion of the activity. The faculty may use a numerical score that would decide the pass or satisfactory score. The faculty will determine what to do if a learner does not meet the expectations and does not successfully complete the activity, i.e., should the student repeat the activity or remedial training after predetermined number of repetitions.

In Otorhinolaryngology, there are 5 hours for self-directed learning (SDL) which has to be certified in Third Professional Part I. Skill competencies having Performance '(P)' and require certification is included in the logbook. Skill competencies with Shows How '(SH)' in the psychomotor and communications domains are also included in the logbook. The competencies of self-directed learning, such as seminars, symposia, etc., have entries in the logbook. Competencies that require clinical experiences and redetermined patient are also included in the logbook. Each student should present minimum 6 cases (1 each from Ear, Nose, Oral Cavity, Pharynx, Larynx, and Neck) in the clinical postings.

To the Students

To restrict the size and cost of this Logbook no blank pages are given for case taking, self-directed learning, reflections and extracurricular and departmental activities and Daily Notes, so their details are to be maintained by the students in separate portfolios registers/files. The format of maintaining those activities in the portfolios are given in this Logbook. The summary of all those activities are also included in the logbook so if the examiner demands the evidences for any activity, students will have to show those portfolios registers/files.

Eligibility Criteria to Appear for Summative University Examination

❖ **Attendance:**

1. Attendance requirements are 75% in theory and 80% in practical/clinical for eligibility to appear for the summative university examinations in each phase of posting.
2. About 75% attendance in Professional Development Program (AETCOM module) is required for eligibility to appear for summative final university examination in each professional year.

❖ **Internal assessment:**

3. About 50% internal assessment marks combined in theory and practical (not less than 40% in each) is eligibility criteria for appearing for university examinations. Internal assessments marks will not be added to the university examinations marks but will be displayed separately in the grade card/final mark-sheet.

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CHAPTER

2 Attendance and Leave Records

What we want is strength, so believe in yourselves... Make your nerves strong. What we want is muscles of iron and nerves of steel. We have wept long enough. No more weeping, but stand on your own feet and be men.

—Swami Vivekananda

TABLE 1: Attendance record of the student in clinics and lectures.

Sl. No.	*Clinical posting*	*Duration in weeks*	*Duration*		*Attendance*		*Faculty's initial*
			From	*To*	*Total*	*Present*	
1.	II MBBS	4 Weeks					
2.	III MBBS, Part-I	4 Weeks					
3.	Lectures						
4.	AETCOM Module						
5.	Extracurricular activities						
6.	Sports/physical education						

TABLE 2: Leave Record of the students.

Sl. No.	*From*	*To*	*Reason for leave*	*Signature of faculty*
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				

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CHAPTER

3 Distribution of Marks in the Internal Assessment

Non-injury is right; is a great thing – these are indeed grand principles; but the scriptures say, "…. If anyone smites you on your cheek, and you do not return him an eye for eye, a tooth for a tooth, you will verily be a sinner.

—Swami Vivekananda

TABLE 3: Distribution of marks in the internal assessment (IA) examinations*.

MBBS phase	*Element*	*Theory marks*	*Clinical/Practical marks including viva*
Phase-2	**First Ward-ending Exam**		/100
	First Internal Theory Exam	/100	
	Logbook		
Phase-3, Part-1	**Second Ward-ending Exam**		/100
	Second Internal Theory Exam	/100	
	Prelim Theory Exam	/200	
	Prelim Practical Exam		/100
	Logbook		
	Internal Assessment Marks	/400	/300
	Betterment Exam	/200	/100
Total Final Assessment Marks		/400	/300

*Marks and numbers of assessment may vary from college to college but the net internal marks will be out of 100 (in percentage)

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CHAPTER

4 Distribution of Teaching Hours

I beg you to understand this one fact – no good comes out of the man who day and night thinks he is nobody. If a man day and night thinks he is miserable low and nothing, nothing he becomes... This is the great fact which you ought to remember.

—Swami Vivekananda

TABLE 4: Distribution of teaching hours in otorhinolaryngology (ENT) total 202 hours.

Phase	*Activity*	*Hours*
MBBS Phase-2	First clinical postings; 9 AM to 12 noon 2 + 2 or 4 weeks*	60
MBBS Phase-3, Part-1	Second clinical postings 9 AM to 12 noon 2 + 2 or 4 weeks**	72
	Lectures (1 hour per week)	25
	Small group discussions (SGD)	40
	Self-directed learning (SDL)	5
Total		**202**

* Monday to Friday; ** Monday to Saturday.

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CHAPTER

5

Competencies Tables

A. Template of Competency Tables
B. Competencies of Perform (P) Level and Requiring Certification
C. Competencies to be Observed/Assisted during Internship
D. SH (Show How) Competencies taught by 'Demonstration—Observation-Assistance-Performance (DOAP)' and assessed with OSCE
E. SH (Show How) Competencies taught in Small Group Discussion (SGD) and conducted bed side
F. SH (Show How) Competencies (Surgical Procedures) and Instruments

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CHAPTER

5A

Template of Competencies' Tables

Be strong. Be manly. I have respect even for a wicked person so long as he is manly and strong, for his strength will someday make him give up his wickedness, and even renounce all work for selfish ends. It will thus eventually bring him to the truth.

—Swami Vivekananda

Subject: Otorhinolaryngology (ENT) MBBS II and MBBS III, Part-1

Subitem (Settings): Outpatient Department (OPD)/Operation Theater (OT)/Indoor—Bedside Teaching/Casualty—Emergency Medicine/Audiology/ENT Museum/Skill—Simulation Lab/Seminar Room/Lecture Hall

TABLE 5: Template of Competencies' Tables in Logbook.

Sl. No.	*Competency number and activity*[1]	*Date*[2] *completed: dd-mm-yyyy*	*Attempt*[3] *at activity first (F) or only; repeat (R) remedial (Re)*	*Rating*[4] *below (B) expectations; meets (M) expectations; exceeds (E) expectations or numerical score*	*Decision*[5] *of faculty completed (C) repeat (R) remedial (Re)*	*Initial*[6] *and name of faculty and date*	*Date*[7] *feedback received and initial of learner*

Explanation of each column in the logbook table:

1. **Number and name of competency:** It includes the subject's initial and number of the competency (from Vol. III of the UG Curriculum),
   EN: ENT
   AN: Anatomy
   Py: Physiology
   CM: Community Medicine
   DE: Dentistry
   IM: Internal Medicine
   PE: Pediatrics
   SU: Surgery.
   So except EN all the initials indicate integrated subjects.
2. **Date** on which activity gets completed
3. **Attempt at activity by learner**: First **(F)** only attempt; Repeat **(R)** of a previously done activity; Remedial **(Re)** activity based on the decision of the faculty
4. **Rating: Use one of the following three grades**—Below **(B)** expectations; Meet **(M)** expectations; Exceeds **(E)** expectations
5. **Decision of faculty:** Activity completed **(C)** can be closed and certified, if needed; Activity needs to be repeated **(R)** without any further intervention; Activity needs remedial **(Re)** action (usually when repetition did not lead to satisfactory completion)
6. **Initial (Signature) of faculty** indicating the completion or other determination
7. **Date on which feedback received** by the learners with their Initial (Signature)

Note: Separate sheet(s) for AETCOM, sports, extracurricular activities, subjects (as in the index), needed. (This table can be replicated in as many pages, as needed.

From now onward only abbreviations will be used in the columns of the tables.

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CHAPTER

5B Competencies of Perform (P) Level and Certification

First step in getting strength is to uphold the Upanishads, and believe – "I am the soul," "Me the sword cannot cut; nor weapons pierce; me the fire cannot burn; me the air cannot dry; I am the omnipotent, I am the Omniscient." So repeat these blessed saving words and be strong.

—Swami Vivekananda

Settings: Simulation Lab/OPD/Indoor/Casualty (Emergency Medicine)

TABLE 6: Competencies of perform (P) level and requiring certification (psychomotor and affective).

Sl. No.	*Number and competency The student should be able to*	*Date completed: dd-mm-yyyy*	*Attempt (F); (R); (Re)*	*Rating (B); (M); (E)*	*Decision of faculty (C); (R); (Re)*	*Name and Initial of faculty*	*Date Feedback Received and Initial of learner*	*Number required to certify*
1.	**PY 10.20*:** In volunteer/ simulated environment • Demonstrate hearing • Testing for smell and taste sensation							1 each
2.	**PE 28.17*:** Interpret following Pediatric X-rays. May use written report in case of management 1. Paranasal sinuses 2. Mastoid 3. CXR: Foreign body aspiration and lower respiratory tract infection, and understand the significance of thymic shadow							3
3.	**DE 4.4*:** Counsel patients to risks of oral cancer with respect to tobacco, smoking, alcohol and other causative factors*							2
4.	**EN 2.3:** Demonstrate the correct technique of examination of the ear including otoscopy**							
5.	**EN 2.13:** Identify, resuscitate and manage epistaxis emergencies by anterior nasal packing in a simulated environment**							
6.	**PE 28.12:** Perform examination of the nose in children***							-

*As such there are no certifiable competencies in ENT but subjects with vertical integration (Physiology, Pediatrics and Dentistry) have 3 such competencies.

** Certifiable competencies during internship.

*** Perform (P) level competencies which do not need certification

Signature of the Teacher **Signature of the HOD**

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CHAPTER

5C

E.N.T. Competencies During Internship

There is no help for man. None ever was, none is, and none will be.... But you are spirit. Pull yourself out of difficulties by yourself! Save yourself by yourself! There is none to help you – never was. To think that there is, is sweet delusion. It comes to no good.

—Swami Vivekananda

Settings: Simulation Lab/OPD/Indoor/Operation theater/Casualty (Emergency medicine)

TABLE 7: Competencies to be observed/Assisted during Internship.

Sl. No.	*Number and competency The student should be able to*	*Date completed: dd-mm-yyyy*	*Attempt (F); (R); (Re)*	*Rating (B); (M); (E)*	*Decision of faculty (C); (R); (Re)*	*Name and Initial of faculty*	*Date Feedback Received and Initial of learner*
An intern must have observed or preferably assisted in:							
1.	**EN 3.4:** Observe and describe the indications for and steps involved in the removal of foreign bodies from ear and nose						
2.	**EN 2.13:** Identify, resuscitate and manage ENT emergencies in a simulated environment • Tracheostomy, • Anterior nasal packing, • Removal of foreign bodies in ear, nose, throat and upper respiratory tract)						
3.	**EN 4.49:** Elicit document and present a correct history, demonstrate and describe the clinical features, choose the correct investigations and describe the principles of management of foreign bodies in the air and food passages						
4.	**EN 4.50:** Observe and describe the indications for and steps involved in tracheostomy						
5.	**EN 4.51:** Observe and describe the care of the patient with a tracheostomy						
6.	**EN 3.2:** Observe and describe the indications for and steps involved in the performance of diagnostic nasal endoscopy (DNE)						
7.	**EN 3.3:** Observe and describe the indications for and steps involved in the performance of rigid/flexible laryngoscopy						

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Sl. No.	*Number and competency The student should be able to*	*Date completed: dd-mm-yyyy*	*Attempt (F); (R); (Re)*	*Rating (B); (M); (E)*	*Decision of faculty (C); (R); (Re)*	*Name and Initial of faculty*	*Date Feedback Received and Initial of learner*
8.	**EN 4.9:** Demonstrate the correct technique for syringing wax from the ear in a simulated environment						
Skill that an intern should be able to perform under supervision:							
9.	**EN 2.15:** Describe the National Programme for Prevention of Deafness						
An intern must have observed or preferably assisted during the following operations/procedures:							
10.	**EN 2.2:** Demonstrate the correct use of a headlamp/Head mirror in the examination of the ear, nose and throat						
11.	**EN 2.3:** Demonstrate the correct technique of examination of the ear including otoscopy						
12.	**PE 28.10:** Perform otoscopic examination of the ear in children						

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CHAPTER

5D 'Show How' Level Clinical Examination Competencies

If the whole responsibility is thrown upon our own shoulders, we shall be at our highest and best; when we have nobody to grope towards, no devil to lay our blame upon, no personal god to carry our burdens, when we are alone responsible, and then we shall rise to our highest and best.

—Swami Vivekananda

Settings: OPD/Audiology/Indoor/Casualty (Emergency Medicine)/Simulation Lab

TABLE 8: 'SH (Show How)' Competencies, which usually have DOAP (Demonstration–Observation-Assistance-Performance) as learning method and conducted bedside during the clinical postings and are assessed with OSCE (Objective Structured Clinical Examination).

Sl. No.	*Number and competency The student should be able to*	*Date completed: dd-mm-yyyy*	*Attempt (F); (R); (Re)*	*Rating (B); (M); (E)*	*Decision of faculty (C); (R); (Re)*	*Name and Initial of faculty*	*Date Feedback Received and Initial of learner*
OPD Procedures:							
1.	**EN 2.4:** Demonstrate the correct technique of performance and interpret tuning fork tests						
2.	**EN 2.5:** Demonstrate the correct technique of examination of the nose and paranasal sinuses including the use of nasal speculum						
3.	**EN 2.6:** Demonstrate the correct technique of examining the throat including the use of a tongue depressor						
4.	**PE 28.11:** Perform throat examination using tongue depressor in children						
5.	**EN 2.7:** Demonstrate the correct technique of examination of neck including elicitation of laryngeal crepitus						
6.	**EN 2.8:** Demonstrate the correct technique to perform and interpret • Pure tone audiograms and • Impedance audiograms						
7.	**EN 2.9:** Choose correctly and interpret (1) radiological, (2) microbiological and (3) histological investigations relevant to the ENT disorders						
8.	**EN 2.10:** Identify and describe the use of the common instruments used in ENT surgery						
9.	**EN 4.4:** Demonstrate the correct technique to hold, visualize and assess the mobility of the tympanic membrane and its mobility and interpret and diagrammatically represent the findings						

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Sl. No.	*Number and competency The student should be able to*	*Date completed: dd-mm-yyyy*	*Attempt (F); (R); (Re)*	*Rating (B); (M); (E)*	*Decision of faculty (C); (R); (Re)*	*Name and Initial of faculty*	*Date Feedback Received and Initial of learner*
10.	**EN 4.17:** Enumerate the indications and interpret the results of an audiogram						
11.	**DE 4.3:** Identify potential pre-cancerous/cancerous lesions						
12.	**PE 28.9:** Elicit, document and present age appropriate history of a child with upper respiratory problem including Stridor						
Simulation/Skill Lab:							
1.	**EN 2.14:** Demonstrate the correct technique of instilling topical medications into the ear, nose and throat in a simulated environment						
2.	**EN 2.12:** Counsel and administer informed consent to patients and their families in a simulated environment						
3.	**EN 2.13:** Identify, resuscitate and manage ENT emergencies in a simulated environment (including tracheostomy, anterior nasal packing, removal of foreign bodies in ear, nose, throat and upper respiratory tract)						
4.	**EN 3.1:** Observe and describe the indications for and steps involved in the performance of Otomicroscopic examination in a simulated environment						

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Competency Based LOGBOOK in EAR, NOSE AND THROAT For MBBS

Salient Features

- The first and the only ENT logbook that is developed on the basis of the Competency-Based Medical Education (CBME) of Graduate Medical Education Regulations (GMER) 2019 of National Medical Commission (NMC)/Medical Council of India (MCI).
- Competencies and their numbers included in the competency's tables.
- Competencies mentioned in the new Interns Logbook included.
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