

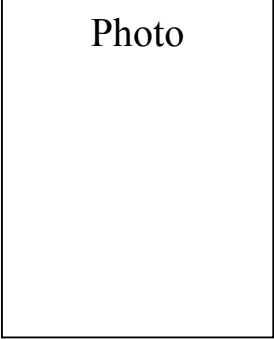


Oman Medical Specialty Board

A close-up, shallow depth-of-field photograph of a silver stethoscope resting on a white surface. The chest piece is in sharp focus in the foreground, while the tubing and ear pieces are blurred in the background.

Family & Community Medicine

**Logbook
2008**



NAME: _____

OMSB No: _____

Year Joined: _____

Advisor's Name: _____

Sponsor: _____

FAMILY & COMMUNITY MEDICINE RESIDENCY TRAINING PROGRAM

MISSION

- To graduate caring, competent and collaborative family physicians who are well oriented to the problems and needs of the community in Oman

VISION

- Our program will achieve excellence in training future family physicians with the skills, values and attitudes to practice high quality Family Medicine

GENERAL OBJECTIVES

At the end of the program, the graduate will be able to do the following:

1. To form good relationships with patients, families and the community and meet their needs and fulfill their expectations.
2. To diagnose and manage medical conditions commonly encountered in primary care.
3. To provide effective comprehensive and continuing care for individuals, families and community.
4. To deal in a balanced way with physical, psychological and social problems of patients.
5. To use available community resources, secondary and/or tertiary health care systems effectively and efficiently.
6. To provide and organize primary and preventive care for individuals, families and designated population groups.
7. To teach and learn effectively from colleagues, patients, families and community.
8. To apply the principles and practice of health service planning, organization, administration and evaluation.
9. To conceptualize, plan, implement and evaluate research programs in the area of family and community medicine.

The Log Book:

The Objectives:

- To guide the trainee to the minimum procedures required to be a competent family physician.
- To help in the assessment of the trainee.

How to fill up the Log Book:

- Take your log book always with you whatever rotations you join.
- Observe and/or do the required procedures.
- Ask the trainers to countersign for the procedures that you perform.
- If you observe or do procedures that are not mentioned in the log book, please document them in the empty blocks provided at the end of the log book.

CORE STRUCTURE OF FOUR YEARS ROTATION

	1	2	3	4	5	6	7	8	9	10	11	12	13
R1, R2, R3	Introductory Month 1 block	Internal Medicine 6 blocks						Obstetrics & Gynecology 4 blocks				Research 1 block	VACATION
	Child Health 4 blocks				Family Medicine 3 blocks			Elective 3 blocks		Community Medicine (I & II) 2 blocks		VACATION	
	Emergency Medicine 2 blocks	Psychiatry 2 blocks	Dermatology 2 blocks	ENT 2 blocks		Surgery 2 blocks		Ophthalmology 1 block	Orthopedics 1 block	VACATION			
R4	Family Medicine 12 blocks												VACATION

INTRODUCTORY MONTH

Duration: 1 block

Presentations in Seminars and CME's

Title	Date	Supervisor's Signature

FAMILY MEDICINE

Duration: 15 blocks

Presentations of Seminars and CME's

Title	Date	Supervisor's Signature

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Cryotherapy	1)			
	2)			
	3)			
Skin biopsy	1)			
	2)			
Joint aspiration and injection	1)			
	2)			
	3)			
Removal of wax	1)			
	2)			
	3)			
Visual acuity	1)			
	2)			
	3)			
Insertion and removal of IUD	1)			
	2)			
ECG and interpretation				
Peak flow meter				
IUCD Insertion	1)			
	2)			
	3)			

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Chest x-ray interpretation	1)			
	2)			
	3)			
Inhaler technique	1)			
	2)			
	3)			
Arterial puncture and Interpretation of arterial blood gases	1)			
	2)			
	3)			
Lumbar puncture	1)			
	2)			
ECG taking				
Stress test interpretation	1)			
	2)			
	3)			
Insertion of nasogastric tubes	1)			
	2)			
Gastric lavage (OB-Gyn)	1)			
	2)			
Insertion of Foley catheters	1)			
	2)			
	3)			
Needle thoracocentesis	1)			
	2)			
Intercostal catheter insertion	1)			
	2)			

CHILD HEALTH

Duration: 4 Blocks

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Venipuncture	1)			
	2)			
	3)			
Starting IV line	1)			
	2)			
	3)			
Lumbar puncture	1)			
	2)			
	3)			
Resuscitation of the newborn and older children	1)			
	2)			
	3)			
Bladder tap (Observe)	1)			
	2)			

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Insertion of nasogastric tubes	1)			
	2)			
	3)			
Arterial puncture & Interpretation	1)			
	2)			
	3)			
Inhaler technique	1)			
	2)			
	3)			
Chest x-ray interpretation	1)			
	2)			
	3)			

OBSTETRICS & GYNECOLOGY

Duration: 4 blocks

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Obtaining vaginal and cervical cytology	1)			
	2)			
	3)			
Dilatation and Curettage	1)			
	2)			
	3)			
Ultrasound	1)			
	2)			
	3)			
Normal delivery	1)			
	2)			
	3)			
	4)			
	5)			

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Normal delivery	6)			
	7)			
	8)			
	9)			
	10)			
Induction of labor	1)			
	2)			
	3)			
Episiotomy repair	1)			
	2)			
	3)			
Assistance in cesarean section	1)			
	2)			
Pudendal and local anesthesia (observed)	1)			
	2)			
Neonatal resuscitation	1)			
	2)			
IUCD Insertion	1)			
	2)			
	3)			
Cervical biopsy, polypectomy (observation)				
Cryosurgery/ cautery for benign lesions (observation)	1)			
	2)			
	3)			
Colposcopy (observation)	1)			
	2)			
	3)			

EMERGENCY MEDICINE

Duration: 2 blocks

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Venipuncture	1)			
	2)			
	3)			
Insertion of intravenous cannula (adult and pediatric)	1)			
	2)			
	3)			
Set up intravenous delivery line/drip	1)			
	2)			
	3)			
Administer IV, injections	1)			
	2)			
	3)			
Administer SC, IM injections	1)			
	2)			
	3)			
Cardiopulmonary resuscitation				

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Airway management				
Urethral catheterization (male and female)				
Arterial blood gases				
Suturing of wounds				
Stitch removal				
Drainage of abscesses				
Lumbar puncture				
ECG interpretation				
X-ray and other radiological films interpretation				

Procedure Name	Dates	Observed	Performed	Supervisor's Signature

E. N. T. (OTORHINOLARYNGOLOGY)

Duration: 2 blocks

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Ear wax removal				
Wick application & removal				
Ear syringing				

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Nasal packing for epistaxis control				
Audiogram interpretation				
Foreign body removal from ENT tracts	1)			
	2)			
	3)			
Observation of tracheostomy	1)			
	2)			

DERMATOLOGY

Duration: Two Blocks

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Thermal cautery	1)			
	2)			
Cryotherapy	1)			
	2)			
KOH preparation , (microscopy)	1)			
	2)			
Skin biopsy (Observation)	1)			
	2)			
Use of Wood's light	1)			
	2)			
	3)			
Intra lesional injection	1)			
	2)			
PUVA therapy (observed)	1)			
	2)			

OPHTHALMOLOGY

Duration: 1 Block

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Measuring IOP				
Fundoscopic examination (identify normal fundus and major abnormalities e.g. Papilloedema, cupping, nerve head, Diabetic retinopathy, Hypertension and retinal detachment, etc.)				
Irrigation of an eye	1)			
	2)			
	3)			

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Use of a loupe	1)			
	2)			
Eversion of an eyelid	1)			
	2)			
	3)			
Fluoresce in staining of cornea	1)			
	2)			
	3)			
Test visual acuity	1)			
	2)			
	3)			
Application of eye drops, eye ointment,	1)			
	2)			
Removal of corneal foreign body (Observe)	1)			
	2)			
	3)			

ORTHOPEDICS

Duration: 1 Block

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Joint and spine examination				
Casting, splinting and bandaging				
X-ray reading and interpretation				

Procedure Name	Dates	Observed	Performed	Supervisor's Signature
Joint aspiration and injection of joints and sheathes				
Pre-exercise exam				
Physical activity prescription				

ELECTIVE ROTATIONS

Elective I

Period:

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature

Procedure Name	Dates	Observed	Performed	Supervisor's Signature

Elective II

Period:

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature

Elective III

Period:

Seminars and CME's

Title	Date	Presented/ Attended	Supervisor's Signature

Procedures Observed or Done

Procedure Name	Dates	Observed	Performed	Supervisor's Signature

