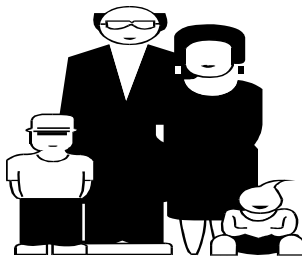


AMERICAN UNIVERSITY OF BEIRUT - MEDICAL CENTER

DEPARTMENT OF FAMILY MEDICINE

RESIDENTS LOG BOOK



Name of Resident: _____ Training Years: _____

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Updated: September 2014

Family Medicine Program

1. Personal Data

First (PGY1)

Second (PGY2)

Third (PGY3)

Fourth (PGY4)

Resident Name: _____

Date of Birth: --/--/----

Gender: €Male

€Female

Nationality: _____

Marital Status: Single Married

No. of children: _____

Address: _____

Telephone #: _____

E-mail: _____

Place of Graduation: _____

Date of Joining AUB training program: --/--/----

2. Rotations Schedule

Block# & Duration	Rotation Name	PGY 1	PGY 2	PGY 3	PGY 4
Block					
Block					
Block					
Block					
Block					
Block					
Block					
Block					
Block					
Block					
Block					
Block					
Block					
Block					
Block					

3. Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Health Care Maintenance (Promotion, Prevention, Immunization)

<i>Health Care Education/counseling</i>		

Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Constitutional		
<i>1. Fatigue</i>		

2. *Weight loss*

3. *Fever(list infectious and non infectious diagnosis)*

2 Ischemic Heart Disease

3. Heart Failure

<i>4. Valvular Heart Disease</i>		

5. <i>Peripheral vascular Disease/Phlebitis</i>		

6. Arrhythmias

7. Others

Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Respiratory		
<i>1. Asthma</i>		

2. COPD

3. *URTI*

4. Lower Respiratory Infection

5. Chronic cough

6.Others		

Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Gastrointestinal		
<i>1. Functional dyspepsia</i>		

2. Irritable Bowel Syndrome

3. Peptic ulcer disease

5. GERD		

6. Inflammatory Bowel Disease

7. Constipation

8. Diarrhea		

9. Gastroenteritis		

<i>10. GI tumors</i>		

11. Liver/gallbladder Disease

12. Others

<p align="center">Care Takers Seen in the Family Medicine Setting Health Issue/ Gender/ Age</p>

Gynecology / Obstetrics

<i>1. Contraceptive guidance</i>

2. Vaginitis/cervicitis/PID

3. Irregular menses

5.Prenatal Care/Delivery/ postnatal care

6. Breast Disease

7. Others

Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Hematological

I. Anemia

3. Thalassemia / sickle cell disease		
---	--	--

4. ITP/TTP		
-------------------	--	--

5. Others

Care Takers Seen in the Family Medicine Setting Health Issue/ Gender/ Age
--

Endocrine		
<i>1. Diabetes</i>		

5. others

Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Genitourinary		
<i>1. UTI</i>		

2. Prostate Diseases

4. Nephrolithiasis

5.others		

Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Musculoskeletal		
<i>1.Arthritis (other than back)</i>		

3. Sprains / Strains

5. Osteoporosis

6. Back pain/cervical spine syndromes

7.Fibromyalgia

9. Other		

Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Dermatologic

1. Dermatitis (contact, eczema, seborrheic)

2. Skin Infections(Bacterial & Fungal)

3. viral skin rash		

4. Lacerations / Burns /Skin Ulcers

6.Pruritis/others

Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Ophthalmologic		
<i>1. Red Eye/eyelid infections</i>		

2. *Visual Disturbance*

3. Refractive errors

4. Others

Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age

Ear / Nose / Throat		
<i>1. Ear Problems</i>		

2. Sinus Problems		
--------------------------	--	--

<i>3. Nasal problems</i>		

4. Others		

**Care Takers Seen in the Family Medicine Setting
Health Issue/ Gender/ Age**

Neurological

1. Headache

2. Dizziness

4.. Dementia

6. Epilepsy

7. Other

2. Anxiety disorders

3. Substance Abuse

4. Family Dynamic Problems

6. Behavior/Personality Disorder

4. Rotations outside Family Medicine Department

4.1 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.2 Rotation: _____ **From** / / **To** / /

Health Issue(s)	# of cases seen

4.4 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.6 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.8 Rotation: _____ **From** / / **To** / /

Health Issue(s)	# of cases seen

4.10 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.11 Rotation: _____ **From** / / **To** / /

Health Issue(s)	# of cases seen

4.12 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.13 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.14 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.15 Rotation: _____ **From** / / **To** / /

Health Issue(s)	# of cases seen

4.16 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.17 Rotation: _____ **From** / / **To** / /

Health Issue(s)	# of cases seen

4.18 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.19 Rotation: _____ From / / To / /

Health Issue(s)	# of cases seen

4.20 Rotation: _____ **From** / / **To** / /

Health Issue(s)	# of cases seen

4.21 Rotation: _____ **From** / / **To** / /

Health Issue(s)	# of cases seen

5. Procedural skills for the family physician

There are a number of minor procedures with which all family medicine residents should be familiar and competent indicated as core (c). You need to do the procedure three times by yourself without guidance under supervision before you can do it independently. It is obligatory to log your procedures in My Evaluation. Failure to do this means that you can not perform a procedure independently.

Core procedures(c)

Urinalysis - dipstick and microscopic (C)
Stool for occult blood (C)
Taking swabs - throat, cervix, urethra, abscess(C)
Taking blood (C)
Skin scraping for fungus(C)
Visual acuity, colour vision (C)
Injections - intradermal, subcutaneous, intramuscular (C)
Management of hyposensitizing injections
Wood's Light examination (C)
ECG(C)
Simple Spirometry (C)
Abscess incision and drainage (C)
Laceration repair; suture and gluing(C)
Skin biopsy; shave, punch and excisional(C)
Release subungual hematoma(C)
Drainage acute paronychia
Partial toenail removal(C)
Infiltration of local anesthetic(C)
Digital block in finger or toe(C)
Instillation of Fluorescein(C)
Removal of Cerumen(C)
Nasogastric tube insertion(C)
Insertion of Intrauterine Device(C)
Placement of transurethral catheter(C)
Pap smear (C)
Splinting of injured extremities(C)
Application of sling – upper extremity (C)
Oral airway insertion(C)
Bag and Mask ventilation(C)
Endotracheal intubation(C)
Cardiac defibrillation(C)
Cardioversion
Peripheral intravenous line; adult and child(C)
Peripheral venous access; infant
Anterior nasal packing(C)

There are many other procedures which are less frequently performed in practice and require more advanced training. All of these procedures are within the realm of family medicine practice but may be less commonly performed by some family physicians. You will have the opportunity to become familiar with these procedures during your training but you may not become fully competent in all of them.

Advanced Skills

Integumentary Procedures:

- Wound debridement(C)
- Insertion of sutures; simple, mattress and subcuticular(C)
- Excision of dermal lesions eg. Papilloma, nevus or cyst
- Cryotherapy of skin lesions(C)
- Electrocautery of skin lesions
- Removal of foreign body eg. Fish hook, splinter, or glass
- Pare skin callus

Eye Procedures:

- Removal of corneal or conjunctival foreign body
- Application of eye patch

Ear Procedures:

- Removal of foreign body

Nose and Throat Procedures:

- Removal of Foreign Body
- Freeing of tongue tie

Gastrointestinal Procedures:

- Incise and drain thrombosed external hemorrhoid
- Gastric Lavage

Genitourinary Procedures:

- Aspirate of hydrocele
- Aspirate breast cyst
- Circumcision
- Diaphragm fitting and insertion
- Endometrial aspiration biopsy

Obstetrical Procedures:

- Normal vaginal delivery
- Episiotomy and repair
- Artificial rupture of membranes

Musculoskeletal Procedures:

- Reduction of dislocated finger
- Reduce dislocated radial head (Pulled elbow)
- Reduce dislocated shoulder
- Application of forearm cast
- Application of Scaphoid cast
- Application of ulnar gutter splint
- Application of below-knee cast
- Aspiration and injection knee joint(C)
- Aspiration and injection shoulder joint(C)
- Injection of Lateral Epicondyle, (Tennis elbow)/trigger finger/carpal tunnel(C)
- Aspiration and injection of bursae; eg. patellar, sub-acromial

It is recommended that you keep a record of procedures and clinical experiences such as obstetrical deliveries, resuscitations, etc. that you participate in and discuss this with your family medicine preceptor at the time of your evaluation.

PROCEDURAL SKILLS FOR THE FAMILY PHYSICIAN

Date	Procedure	Rotation	Your Role	Supervisor
	See list	IM, Surg, FM, ED etc.	observed, assisted, done yourself	

PROCEDURAL SKILLS FOR THE FAMILY PHYSICIAN

Date	Procedure	Rotation	Your Role	Supervisor
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Date	Procedure	Rotation	Your Role	Supervisor
	See list	IM, Surg, FM, ED etc.	observed, assisted, done yourself	

PROCEDURAL SKILLS FOR THE FAMILY PHYSICIAN

Date	Procedure	Rotation	Your Role	Supervisor
	See list	IM, Surg, FM, ED etc.	observed, assisted, done yourself	

6. Journal Club Articles Presented:

Title	Journal	Issue	Date

7. Core Content Topics Presented

Topic	Date

Overall evaluation of the rotations

Date of evaluation:

On a Likert scale from 1 to 5, indicate your choice. One is the least favorable. NA=not applicable.

1.Family Medicine:

1.a. FMPC:

- | | | | | | |
|---|---|---|---|---|---|
| -Patient's load: | 1 | 2 | 3 | 4 | 5 |
| -Variety of cases: | 1 | 2 | 3 | 4 | 5 |
| -Beneficial supervision by preceptors: | 1 | 2 | 3 | 4 | 5 |
| -Continuity of care & patient's follow up: | 1 | 2 | 3 | 4 | 5 |
| -Teaching value: | 1 | 2 | 3 | 4 | 5 |
| -Overall organization of clinics sessions & patient's services: | 1 | 2 | 3 | 4 | 5 |
| -Comments & suggestions for improvement: | | | | | |
-
-

1.b. Tahaddi's clinic:

- | | | | | | |
|---|---|---|---|---|---|
| -Patient's load: | 1 | 2 | 3 | 4 | 5 |
| -Variety of cases: | 1 | 2 | 3 | 4 | 5 |
| -Beneficial supervision by preceptors: | 1 | 2 | 3 | 4 | 5 |
| -Continuity of care & patient's follow up: | 1 | 2 | 3 | 4 | 5 |
| -Teaching value: | 1 | 2 | 3 | 4 | 5 |
| -Overall organization of clinics sessions & patient's services: | 1 | 2 | 3 | 4 | 5 |
| -Comments & suggestions for improvement: | | | | | |
-
-

1.c. Badaro's clinic:

- | | | | | | |
|---|---|---|---|---|---|
| -Patient's load: | 1 | 2 | 3 | 4 | 5 |
| -Variety of cases: | 1 | 2 | 3 | 4 | 5 |
| -Beneficial supervision by preceptors: | 1 | 2 | 3 | 4 | 5 |
| -Continuity of care & patient's follow up: | 1 | 2 | 3 | 4 | 5 |
| -Teaching value: | 1 | 2 | 3 | 4 | 5 |
| -Overall organization of clinics sessions & patient's services: | 1 | 2 | 3 | 4 | 5 |
| -Comments & suggestions for improvement: | | | | | |
-
-

1.d. FGC:

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Continuity of care & patient's follow up: 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of clinics sessions & patient's services: 1 2 3 4 5
 - Comments & suggestions for improvement:
-
-

1.e. Family Medicine in-patients team:

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Team work (Faculty, residents & students) 1 2 3 4 5
 - Continuity of care & patient's follow up: 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Comments & suggestions for improvement:
-
-

2. Internal Medicine:

2.a. Internal Medicine in-patients team:

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Team work (Faculty, residents & students) 1 2 3 4 5
 - Continuity of care & patient's follow up: 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

2.b. ER medicine rotation:

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Team work (Faculty, residents & students) 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

2.c. Cardiology rotation:

- Teaching value of shadowing in private clinics: 1 2 3 4 5
 - Mention names of faculty members with whom shadowing is most beneficial:
-

- Teaching value of OPD sessions: 1 2 3 4 5
 - Teaching value of rounds and consultations on floors 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

2.d. Pulmonary rotation:

- Teaching value of shadowing in private clinics: 1 2 3 4 5
 - Mention names of faculty members with whom shadowing is most beneficial:
-

- Teaching value of OPD sessions: 1 2 3 4 5
 - Teaching value of rounds and consultations on floors 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

2.e. Endocrinology rotation:

- Teaching value of shadowing in private clinics: 1 2 3 4 5
 - Mention names of faculty members with whom shadowing is most beneficial:
.....
 - Teaching value of OPD sessions: 1 2 3 4 5
 - Teaching value of rounds and consultations on floors 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

2.f. ID rotation:

- Teaching value of shadowing in private clinics: 1 2 3 4 5
 - Mention names of faculty members with whom shadowing is most beneficial:
.....
 - Teaching value of OPD sessions: 1 2 3 4 5
 - Teaching value of rounds and consultations on floors 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

2.g. Neurology rotation:

- Teaching value of shadowing in private clinics: 1 2 3 4 5
 - Mention names of faculty members with whom shadowing is most beneficial:
.....
 - Teaching value of OPD sessions: 1 2 3 4 5
 - Teaching value of rounds and consultations on floors 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

2.h. Rheumatology rotation:

- Teaching value of shadowing in private clinics: 1 2 3 4 5
- Mention names of faculty members with whom shadowing is most beneficial:

-
- Teaching value of OPD sessions: 1 2 3 4 5
 - Teaching value of rounds and consultations on floors 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-

2.j. GI rotation:

- Teaching value of shadowing in private clinics: 1 2 3 4 5
- Mention names of faculty members with whom shadowing is most beneficial:

-
- Teaching value of OPD sessions: 1 2 3 4 5
 - Teaching value of rounds and consultations on floors 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-

3. Pediatrics:

3.a. ER pediatrics

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Team work (Faculty, residents & students) 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-

3.b. Pediatrics floor rotation / Makassed General Hospital

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Team work (Faculty, residents & students) 1 2 3 4 5
 - Continuity of care & patient's follow up: 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Comments & suggestions for improvement:
-
-

3.c. OPD pediatrics

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Team work (Faculty, residents & students) 1 2 3 4 5
 - Continuity of care & patient's follow up: 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

4.Surgery

4.a. Minor surgery / Military hospital

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Beneficial supervision by preceptors: 1 2 3 4 5
 - Comments & suggestions for improvement:
-
-

4.b. Surgery clinics- AUB-MC

- Teaching value of shadowing in private clinics: 1 2 3 4 5
- Mention names of faculty members with whom shadowing is most beneficial:

-
- Teaching value of OPD sessions: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

5. Ob-GYN

5.a. Delivery suite-AUB-MC:

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Team work (Faculty, residents & students) 1 2 3 4 5
 - Continuity of care & patient's follow up: 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

5.b. Delivery suite-RHUH:

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Team work (Faculty, residents & students) 1 2 3 4 5
 - Continuity of care & patient's follow up: 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-

5.c. OPD-AUB-MC:

- Patient's load: 1 2 3 4 5
 - Variety of cases: 1 2 3 4 5
 - Team work (Faculty, residents & students) 1 2 3 4 5
 - Continuity of care & patient's follow up: 1 2 3 4 5
 - Teaching value: 1 2 3 4 5
 - Overall organization of rotation: 1 2 3 4 5
 - Overlap of FM continuity clinic time with rotation requirements Y N
 - Comments & suggestions for improvement:
-
-