

Promoting Compliance in Healthcare and Training Standards

# HEALTH PROFESSIONS COUNCIL OF ZAMBIA

# APPROVED LOG BOOK FOR CLINICAL ANAESTHETISTS

Regulating Professional Conduct of Health Practitioners, Health Facilities and Health Training Programmes to Quality Healthcare Service Provision for the wellbeing of the Public is our Prime Concern

1st Edition, 2024

#### Foreword

Internship training plays a vital role in a Clinical Anaesthetist's career. This legal requirement allows a practitioner to acquire critical practical skills that cannot be acquired within the precincts of a lecture room. During university training, an individual will acquire scientific knowledge and skills from various avenues.

Internship training provides a platform for the intern to apply the skills learnt practically under the supervision of a specialist practitioner who is a mentor and a coach. Indeed the intern's attitude during this period will determine the knowledge and skills acquired and subsequently bring out a well-grounded and competent doctor.

The Council has designed a logbook to standardise Internship training with a particular emphasis on core competencies and skills to be acquired during this period. The assessment report is useful feedback to the Council, which determines whether or not an intern qualifies for full registration Clinical anaesthetist Surgeon Practitioner.

These internship logbooks cover what the Council considers important areas to be covered to ensure adequate knowledge and skills are acquired. They were developed and compiled by a team of experienced clinicians, teachers and other key stakeholders in the medicine and dentistry field.

The Council has made numerous legal strides to protect all interns during training. The Guidelines for Approval of Internship Sites, Issued under **Section 76** of the Health Professions Act Number 24 of 2009 of the Laws of Zambia, defines internship training and lays down the framework for internship training in Zambia a mandatory requirement before full registration as a clinical anaesthetist surgeon practitioner.

It is important also to take note of "The Code of Professional Conduct and Discipline", which outlines the conduct expected of all health practitioners, including clinical anaesthetist surgeons and subsequent

disciplinary action in the event of any transgression of this code.

On behalf of the Council, I wish all users of this Logbook (interns and supervisors alike) an exciting and fruitful time during the internship training period.

Prof. Mulindi Mwanahamuntu Council Chairperson Health Professions Council of Zambia

#### Acknowledgements

The Health Professions Council of Zambia gratefully acknowledges the parties who diligently and committed to developing the Log Book for Advanced Paramedic Anaesthetist Interns. The Council further recognizes the valuable contribution and input from the leadership of the Society of Anaethetists of Zambia, Clinical Anaesthetist Association of Zambia, Internship training sites across the country, and other Regulatory Bodies in Zambia involvement in practice of dental. The Council also wishes to express profound gratitude to the following individuals and institutions who provided input to the development of the of the logbook:

- 1. Dr Geofrey Phiri Ministry of Health
- 2. Ms Mukelabai Chita Ministry of Health
- 3. Mr Wisdom Chelu- Ministry of Health
- 4. Dr Sompwe Mwansa- Society of Anaethetists of Zambia
- 5. Mr Gift Mukubesa- Clinical Anaethetist Association of Zambia
- 6. Mr John Chama-Representative of the Emergency Care Officers
- 7. Mr Chipoya Chipoya- Levy Mwanawasa Medical University
- 8. Dr Kalenga Kyungu National Heart Hospital
- 9. Dr Biete Luke- Pharmaceutical Society of Zambia
- 10. Ms Martha Chuulu- Pharmaceutical Society of Zambia
- 11. Dr Oliver Kaoma- Zambia Medical Association
- 12. Dr Innocent Ngwila- Zambia Medical Association
- 13. Mr Mukubesa Gift- Clinical Anaesthetist Association of Zambia
- 14. Ms Clementina Mukelabai- Zambia Medical Licentiate Practitioners Association
- 15. Ms Monde Wamunyima- Zambia Medical Licentiate Practitioners Association
- 16. Mr Musonda Kamfwa- Clinical Officers Association of Zambia
- 17. Dr Priscilla Phiri Zambia Dental Association
- 18. Mr Grandson Kelvin Jere- Zambia Association of Optometrists
- 19. Dr David Kasongole- Zambia Ophthalmological Society
- 20. Mr Fyatilani Chirwa- Health Professions Council of Zambia
- 21. Mr Andrew Mwamba- Health Professions Council of Zambia
- 22. Ms Ennie Chipabika- Health Professions Council of Zambia
- 23. Ms Cynthia Sautu Kachamba- Health Professions Council of Zambia
- 24. Mr Lloyd Bwalya- Health Professions Council of Zambia
- 25. Mr Donald Kalolo- Health Professions Council of Zambia
- 26. Mr Jon Kasalika Masiku- Health Professions Council of Zambia
- 27. Mr Fannwell Daka Health Professions Council of Zambia
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#### 1 Introduction

An internship is a prescribed employment period during which graduates work under supervision to fulfil full registration requirements. During this period, the graduates can consolidate their knowledge, skills and attitudes to be competent practitioners. This Logbook will be used to document the progress of the Internship. It is an official document with an intern's collective performance, a record of all the work done, procedures conducted, and targets achieved provides criteria for the continuous assessment program of an internship. It is a snapshot of all the progress that the learner has had to move to the next phase in his clinical anaesthetist surgery practice journey.

#### 1.1 Intruction for the Intern

This Logbook will help to record your experiences and achievements on this placement. It is required to be filled in completely for you to be fully registered by the Council as a Clinical Anaesthetist. You are expected to spend specified rotation time in the following clinical anaesthetist service areas translating into 12 months for inservice and 24 months for direct entry for you to complete the Internship:

Sn	Rotation Site	Duration for in-	<b>Duration</b> for
		service	Direct Entry
1.	Operating Theatre (Emergency and Elective) -	8 months	16 months
	Remote sedation to be undertaken during this rotation		
2.	Intensive Care Unit	3 months	6 months
3.	Emergency Department	1 months	2 months

As a Clinical Anaesthetist Intern, your responsibilities include the following: -

- 1. Clerking patients for admission in ICU, pre-induction Assessment and pre operative Assessment
- 2. Performing relevant investigations
- 3. Guiding patients and relatives with regard to diagnosis, treatment and follow-up
- 4. Documenting and regularly updating patients' notes
- 5. Writing accurate and informative case summaries.
- 6. Appropriate handing over of patients
- 7. Presenting cases concisely, coherently and competently during ward rounds, grand rounds or any other appropriate fora.
- 8. Participating in the development and implementation of Anaesthetic plans under the supervision
- 9. Reporting to and consulting with the intern Supervisor
- 10. Participating in continuing professional development activities
- 11. Maintaining professional demeanour and conduct
- 12. Participating in the activities of the relevant committees in the rotation sites
- 13. Performing any other relevant duties assigned by the Supervisor

The following as some the Hints & Tips: Your Internship:

- 1. Get there in plenty of time
- 2. Dress smart
- 3. Make sure that you take this Logbook with you
- 4. Ask about your weekly roster
- 5. Check what work you will be doing
- 6. Make a note of your Supervisor's contact details
- 7. Regarding health and safety, here are a few common-sense rules you should follow while on your Internship to ensure that you do not become involved in an accident at work or that you are not the cause of an accident.
  - a. **Obey Any Safety Rules**: Find out if there are any particular rules where you work, such as wearing the correct clothing, where the fire exits are, etc., to know the rules and obey them. Listen carefully to the advice or instructions of your Supervisor, and don't be afraid to ask questions.
  - b. **First Aid:** If you injure yourself in any way, report it to your Supervisor immediately and obtain treatment.
  - c. **Cleanliness:** Always keep your work area clean and tidy. Remember to wash your hands regularly.
- 8. Help: What if the unexpected happens? For instance, Phone your Supervisor as soon as you know you will be late. It is the polite, professional thing to do

# 1.2 Instruction for the Supervisor

Please help the Interns to complete the appropriate pages of this Logbook to enable them to reflect on their experiences and to have a record of the progress of the Internship. As a Supervisor, you are responsible for the overall supervision of the interns in that rotational or placement unit or department and shall:

- 1. Maintains intern Progression Records for the rotation site
- 2. Update Internship Coordinator regularly on intern progress
- 3. Update Management and Internship Coordinator on matters administrative issues touching on interns, intern supervisors or departments within the institution that hinder the implementation of the programme
- 4. Ensure the interns comply with ethics in the health profession as required by statutory laws
- 5. Ensure there is an appropriate orientation for the interns upon reporting to the rotation site
- 6. Organise minutes of monthly progress meetings with interns
- 7. Ensure objective and fair Assessment of the intern. Further, ensure that interns are evaluated, and internship logbooks are filled appropriately during and at the end of each rotation.
- 8. Identify and recommend to management or internship coordinator exceptional interns for recognition or award
- 9. Participate in disciplinary proceedings for interns

# 1.3 Objectives

At the end of the Internship Training programme, a Clinical Anaesthetist Intern should be able to:

- 1. Perceive the nature of the problems presented to them by the patients and make appropriate decisions.
- 2. Communicate effectively with the patients, their relatives, doctors and other health care providers at their working places
- 3. Perform a comprehensive preanaesthetic evaluation competently.
- 4. Use laboratory and other diagnostic facilities efficiently.
- 5. Plan and carry out conduct of anaesthesia and follow-up in the critical care unit or post anaesthesia care unit
- 6. Adopt safe practices in the theatre, ICU, wards and X-ray room, during patient care with due regard to all concerned.
- 7. Recognise his/her limitations in patient care with an appropriate referral.
- 8. Behave appropriately (attitude) with the patients and with their relatives-
- 9. Considering Ethical and legal issues.
- 10. Continuing Profesional Development (CPD) & improve skills to deliver.
- 11. Diagnose the patient problem and suggest appropriate measures.
- 12. Recognise emergencies and handle them appropriately.

## 2 Outline of the Logbook

#### 2.1 Personal Details Of The Intern

Interns Name	HPCZ Registration No
Internship Centre	HPCZ Licence No
Period of Rotation: Start:	End:
Name of Supervisor	Signature and Stamp:

## 2.2 Purpose of the Logbook

This log book is a documentary of the structured Internship Training Program. The Logbook aims to help you monitor your competence, recognise gaps, and address them. Further, it helps to describe the minimum competence level expected of you by the end of your internship rotation.

#### 2.3 The sections of the Logbook

The Logbook contains Three (3) sections representing the disciplines covered in the internship training period. Each section is laid out in to cover the following domains:

- 1. Requirements of the discipline
- 2. The level of competence required and their interpretation:
  - a. Level 1: Observe the activity being carried out by a supervisor
  - b. Level 2: Assist in the procedures
  - c. Level 3: Carry out the whole activity/procedure under the direct supervision of a senior colleague, i.e. the senior colleague is present throughout
  - d. Level 4:Carry out the whole activity under indirect supervision, i.e. the senior colleagues need not be present throughout but should be available to provide assistance and advice
  - e. Level 5: Independent competence, no need for supervision
- 3. A log of the procedures to be completed
- 4. Assessment of the monthly progress in each discipline
- 5. Evaluation of the rotation performance and recommendations made

#### 2.4 Using the Logbook

The interns are expected to fill the competence levels daily as they achieve them and enter the appropriate date. The Supervisor shall sign off on all accomplished targets. Every month, the intern, the Supervisor and the intern coordinator shall review progress in the rotation to ensure the intern is on course to achieving the set requirements for the rotation. At the end of the rotation, the intern shall be assessed by the Supervisor, the intern coordinator and the medical director/superintendent on the performance during the rotation.

# **3** Operating Theatre (Emergency and Elective) Rotation

# 3.1 Assessments for Operating Theatre Rotation

#### 3.1.1 Basic Information

Interns Name	HPCZ Registration No
Internship Centre	HPCZ Licence No
Period of Rotation: Start:	End:
Name of Supervisor	Signature and Stamp:

#### 3.1.2 Grading:

- 3- The intern meets most of the criteria without assistance
- 2- The intern requires some assistance to meet the stated criteria
- 1- The intern requires considerable assistance to meet the stated criteria
- 0- Unable to meet the criteria completely

NB: Where the grading shall be on a scale of 0 or 1 above, the Supervisor shall be required to give reasons for the said finding and make recommendations in the best interest of the intern and the public.

#### 3.1.3 Intern Involvement

- Performed (P)- The intern does the work as the primary anaesthetist
- Assisted (A)- The Intern assisted the primary anaesthetist in the conduct of anaesthesia
- Observed (**O**)- The Intern observed the conduct of anaesthesia

# 3.1.4 Rotation Area Requirements:

In this rotation, the Advanced paramedic anaesthetist Intern shall:

- 1. Be able to clerk, investigate and present patients during anaesthesia rounds or clinics
- 2. Be able to prepare patients undergoing various anaesthesia procedures
- 3. Be able to follow up with the patients after surgery till post anaesthesia and be able to write a proper post anaesthesia summary
- 4. Participate in daily anaesthesia rounds, attend theatres and attend surgical outpatient clinics
- 5. Attend and participate/present in all weekly departmental.
- 6. In addition to the above, at the end of the rotation, one is expected to have participated in the following procedures:

# 3.2 Anaesthesia for emergency surgery

Operations	# of Cases	File No.	Date	Intern involvement	Supervisors Name	Supervisors Signature
	1.					
	2.					
	3.					
Pre induction	4.					
assessment	5.					
A5	6.					
P5	7.					
	8.					
	9.					
	10.					
	1.					
	2.					
	3.					
<b>D</b>	4.					
Resuscitation	5.					
A7	6.					
P 3	7.					
	8.					
	9.					
	10.					
	1.					
	2.					
	3.					
1heater	4.					
preparation	5.					
A 2	6.					
P 8	7.					
	8.					
	9.					
	10.					
	1.					
	2.					
	3.					
Danid assumes	4.					
Rapid sequence induction	5.					
A 3						
P 7	6.			1		
Г /	7.					
	8.					
	9.					
	10.					
37	1.					
Naso gastric tube	2.					
insertion	3.			1		
A3 & P7	4.			1		
	5.					

Operations	# of Cases	File No.	Date	Intern involvement	Supervisors Name	Supervisors Signature
	6.					
	7.					
	8.					
	9.					
	10.					

# 3.3 Other Procedures-The intern assists treatment of all conditions/procedures below

Procedures/	# of	File No.	Date	Intern	Supervisors Name	Supervisors
Diagnosis	Cases	1101101	Dute	involvement	Super visors i tunic	Signature
	1.					
	2.					
C . 1. (	3.					
Sedation for diagnostic	4.					
procedures	5.					
A5	6.					
P 5	7.					
	8.					
	9.					
	10.					
	1.					
	2.					
	3.					
Venous access	4.					
consultations	5.					
In wards	6.					
A5 P 5	7.					
ГЭ	8.					
	9.					
	10.					
	10.					
	2.					
	3.					
Trauma patient						
resuscitation in	4.					
A&E	5.					
A5	6.					
P 5	7.					
	8.					
	9.					
	10.					
Anaesthesia for	1.					
MRI	2.					
A5	3.					
P 5	4.					

	5.		
	6		
	7		
	8		
	1.		
	2.		
	3.		
Anaesthesia for	4.		
electroconvulsive therapy	5.		
A5	6.		
P 5	7.		
	8.		
	9.		
	10.		
Participate in	1.		
major incident management	2.		
	3.		
A2	4.		
P 3	5.		

# 3.4 Anaesthesia for ObstetricS and Gynaecology

Scaling and Polishing	# Of Cases	File #	Intern involvement	Date	Supervisor Name	Supervisor Signature
	1. 2. 3.					
	4. 5.					
	6. 7.					
Pre Anaesthetic Assessment of a	8. 9. 10.					
pregnant woman A 5 &P 15	10. 11. 12.					
	13. 14.					
	15. 16.					
	17. 18. 19.					
Intubation of a	20.					
pregnant woman A 4 &P6	2					

	3			
	4			
	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
	5			
Spinal A2 &P8	6			
	7			
	8			
	9			
	10			

# 3.5 Evaluation of the Operating Theatre (Emergency and Elective) Rotation

# 3.5.1 Monthly review of the performance

Month	Comment by Intern	Comment by Supervisor	Comment by Intern Coordinator
ONE (1)	Sign_	Sign	Sign
ONE (1)	Date	Date	Date
	STAMP		
TIMO (A)	Sign_	Sign	Sign
TWO (2)	Date	Date	Date
	STAMP		
	Sign_	Sign	Sign
THREE (3)	Date	Date	Date
	STAMP		
EOUD (4)	Sign_	Sign	Sign
FOUR (4)	Date	Date	Date
	STAMP		
FIVE (5)			
	Sign_	Sign	Sign
	Date	Date	Date
	STAMP		

Sign				
Date				
Date	SIV (6)	Sign	Sign	Sign
Sign	51.4 (0)	Date	Date	Date
Date		STAMP		
Date				
Date	SEVEN (7)	Sign	Sign	Sign
Sign	SEVEN (7)	Date	Date	
Date Date     STAMP		STAMP		
Date Date     STAMP				
Date	FIGUE (9)	Sign	Sign	Sign
Sign   Sign     Date   Date     Date_   Date_   Sign     TEN (10)   STAMP   Date     Date   Date_   Date_     Date   Date_   Date_     Date_   Date_   Date_   Date_     Date_   Date_   Date_   Date_     Date_   Date_   Date_   Date_     Date_   Date_   Date_   Date_     Date_   Date_   Date_   Date_     Date_   Date_   Date_   Date_     Date_   Date_   Date_   Date_   Date_     Date_   Date_   Date_   Date_   Date_     Date_   Date_   Date_   Date_   Date_     Date_   Date_   Date_   Date_   Date_   Date_   Date_     Date_	EIGHT (8)	Date	Date	Date
Date   Date		STAMP		
Date   Date				
Date   Date     Sign   Sign     TEN (10)   STAMP   Date     Date   Date   Date     Date   Date   Date     Date   Date   Date     Date   Date   Date     Date   Date   Date   Date     Date   Date   Date   Date	NINE (0)	Sign	Sign	
Date Date Sign   STAMP   Date	NINE (9)	Date	Date	
Date Date Sign   STAMP   Date				
STAMP Date		Sign	Sign	
STAMP Date	TEN (10)	Date	Date	Sign
STAMP	TEN (10)	STAMP		Date
		STAMP		
ELEVEN (11)         Sign	ELEVEN (11)	Sign	Sign	Sign
Date Date <b>Date</b>		Date	Date	Date

	STAMP		
	Sign	Sign_	Sign
TWELVE (12)	Date	Date	Date
	STAMP		,
THIRTEEN	Sign	Sign_	Sign
(13)	Date	Date	Date
	STAMP		,
FOURTEEN	Sign	Sign	Sign
(14)	Date	Date	Date
	STAMP		
	Sign	Sign	Sign
FIFTEEN (15)	Date	Date	Date
	STAMP		
	Sign	Sign	Sign
SIXTEEN (16)	Date	Date	Date
	STAMP		ı
SEVENTEEN			
(17)	Sign	Sign	Sign

	Date	Date	Date
	STAMP		
EIGHTEEN	Sign	Sign	Sign
(18)	Date	Date	Date
	STAMP		

# 3.5.2 Overall Assessment at the end of the rotation

# Key

- 1. Grade shall be as provided 5.1.2
- 2. Remarks (Satisfactory or Unsatisfactory)

Assessment Area	Competence	Grade	Remarks
	Basic Sciences		
Knowledge	Theoretical Knowledge in the Discipline		
	Participation in CPD		
	History Taking		
	Clinical examination		
	Interpretation of laboratory Data and X-Ray Findings		
	Basic Sciences		
Clinical Skills	Theoretical Knowledge in the Discipline		
	Participation in CPD		
	Patient notes		
	Use of drugs		
	Patient Management		
	To patients and caregivers		
	To seniors, colleagues and other health workers		
Professional Conduct	Manifests sincerity, integrity and honest in acts and deeds		
	To the public		
	Punctuality, availability and Time management		
	Takes initiative		
Leadership qualities	Knowledge and adherence to institutional policies and regulations		
	Mentorship of juniors and other professionals		
Overall Score			

**Note:** Overall Score of 30 and below is unsatisfactory performance and the resident's rotations shall be extended.

Supervisor's Comment		
Name	Qualification	HPCZ. No
Signature_		Date Stamp
Coordinator's Comment		
Grading		Tick what Applies
Successfully Completed Rot	ation	
Unsuccessful -(State Extensi	ion Period Recommended)	
then after completion of the nex	en graded as "Unsatisfactory", the resident shat department, shall be required to return l only be for the competencies where the Resi	the that departments considered
Name	Qualification	HPCZ. No
Signature	Date	
		Date Stamp

#### 4 Critical Care Unit (ICU) Rotation

#### 4.1 Assessments for Critical Care Rotation

#### 4.1.1 Basic Information

Interns Name	HPCZ Registration No
Internship Centre	HPCZ Licence No
Period of Rotation: Start:	End:
Name of Supervisor	Signature and Stamp:

#### 4.1.2 Grading:

- 3- The intern meets most of the criteria without assistance
- 2- The intern requires some assistance to meet the stated criteria
- 1- The intern requires considerable assistance to meet the stated criteria
- 0- Unable to meet the criteria completely

NB: Where the grading shall be on a scale of 0 or 1 above, the Supervisor shall be required to give reasons for the said finding and make recommendations in the best interest of the intern and the public.

#### 4.1.3 Intern Involvement

- Performed (P)- The intern does the work as the primary anaesthetist
- Assisted (A)- The Intern assisted the primary anaesthetist in the conduct of anaesthesia
- Observed (O)- The Intern observed the conduct of anaesthesia

#### 4.1.4 Rotation Area Requirements:

In this rotation, the Clinical Anaesthetists Intern shall:

- 1. Be able to clerk, investigate and present patients during ICU rounds
- 2. Be able to prepare patients adquately undergoing various ICU procedures
- 3. Be able to follow up with the patients after ICU post anaesthesia and be able to write a proper post anaesthesia summary
- 4. Participate in daily ICU rounds,
- 5. Attend and participate/present in all weekly departmental.
- 6. In addition to the above, at the end of the rotation, one is expected to have participated in the following procedures:

Skill	# Of Cases	File #	Intern involvement	Date	Supervisor Name	Supervisor Signature
	1.					
	2.					
Admissions	3.					
A 2 & P3	4.					
	5.					
Putting of patient	1					
on the vent	2					
A 2 &P3	3					
	4					
	5					
Weaning patient	1					
from	2					
A 2 &P3	3					
	4					
	5					
Instructing	1					
Patient on the	2					
care of	3					
Removable	4					
appliance	5					
01 &P4						
Skill	# Of Cases	File #	Intern involvement	Date	Supervisor Name	Supervisor Signature
	1.					
	2.					
	3.					
	4.					
Sedation	5.					
A 3 &P7	6.					
	7.					
	8.					
	9.					
	10.					
	1.					
	2.					
	3.					
	4.					
Setting a vent	5.					
A 3 &P7	6.					
	7.					
	8.					
	9.					
	10.					
	1.					
	2.					
ICU Round	3.					
A 2 &P3	4.					
11 2 001 3	5.					
	6.					
	7.					

8.			
9.			
10.			

# 4.2 Paediatric Anaesthesia assessment

# Of Cases	File No.	Date	Supervisor Name	Supervisor Signature
1.				
2.				
4.				
5.				
	Cases  1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.	Cases  1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 1. 2. 3. 4. 5. 4. 5. 1. 2. 3. 4. 5. 4.	Cases     File No.     Date       1.     2.       3.     4.       5.     1.       1.     2.       3.     4.       5.     1.       2.     3.       4.     5.       1.     2.       3.     4.       5.     1.       1.     2.       3.     4.       5.     1.       1.     2.       3.     4.       5.     1.       2.     3.       4.     5.       1.     2.       3.     4.       4.     5.       1.     2.       3.     4.       4.     3.       4.     4.	Cases         File No.         Date         Supervisor Name           1.         2.         3.         4.         5.         1.

# 4.3 Evaluation of the Critical Care Unit (ICU) Rotation

# 4.3.1 Monthly review of the performance

Month	Comment by Intern	Comment by Supervisor	Comment by Intern Coordinator
ONE (1)	Sign	Sign	Sign
ONE (1)	Date	Date	Date
	STAMP		
TIMO (A)	Sign_	Sign	Sign
TWO (2)	Date	Date	Date
	STAMP		
	Sign_	Sign	Sign
THREE (3)	Date_	Date	Date
	STAMP		
FOUR (A)	Sign_	Sign	Sign
FOUR (4)	Date	Date	Date
	STAMP		
	Sign	Sign	Sign
FIVE (5)	Date	Date	Date
	STAMP		

SIX (6)			
	Sign	Sign	Sign
	Date	Date	Date
	STAMP		

# 4.3.2 Overall Assessment at the end of the rotation

# Key

- 1. Grade shall be as provided under 4.1.2
- 2. Remarks (Satisfactory or Unsatisfactory)

Assessment Area	Competence	Grade	Remarks
	Basic Sciences		
Knowledge	Theoretical Knowledge in the Discipline		
	Participation in CPD		
	History Taking		
	Clinical examination		
	Interpretation of laboratory Data and X-Ray Findings		
	Basic Sciences		
Clinical Skills	Theoretical Knowledge in the Discipline		
	Participation in CPD		
	Patient notes		
	Use of drugs		
	Patient Management		
	To patients and caregivers		
	To seniors, colleagues and other health workers		
Professional Conduct	Manifests sincerity, integrity and honest in acts and deeds		
	To the public		
	Punctuality, availability and Time management		
	Takes initiative		
Leadership qualities	Knowledge and adherence to institutional policies and regulations		
	Mentorship of juniors and other professionals		
Overall Score			

**Note:** Overall Score of 30 and below is unsatisfactory performance and the resident's rotations shall be extended.

Supervisor's Comment		
Name	Qualification	HPCZ. No
Signature_		Date Stamp
Coordinator's Comment		
Grading		Tick what Applies
Successfully Completed Rot	ation	
Unsuccessful -(State Extensi	ion Period Recommended)	
then after completion of the nex	en graded as "Unsatisfactory", the resident shat department, shall be required to return l only be for the competencies where the Resi	the that departments considered
Name	Qualification	HPCZ. No
Signature	Date	
		Date Stamp

#### 5 Emergency Care Rotation

# 5.1 Assessments for Emergency Care Rotation

#### **5.1.1** 'Basic Information

Interns Name	HPCZ Registration No
Internship Centre	HPCZ Licence No
Period of Rotation: Start:	End:
Name of Supervisor	Signature and Stamp:

#### 5.1.2 Grading:

- 3- The intern meets most of the criteria without assistance
- 2- The intern requires some assistance to meet the stated criteria
- 1- The intern requires considerable assistance to meet the stated criteria
- 0- Unable to meet the criteria completely

NB: Where the grading shall be on a scale of 0 or 1 above, the Supervisor shall be required to give reasons for the said finding and make recommendations in the best interest of the intern and the public.

#### **5.1.3** Intern Involvement

- Performed (P)- The intern does the work as the primary anaesthetist
- Assisted (A)- The Intern assisted the primary anaesthetist in the conduct of anaesthesia
- Observed (O)- The Intern observed the conduct of anaesthesia

#### **5.1.4** Rotation Area Requirements:

In this rotation, the Advance Paramedic Anaesthetists Intern shall:

- 7. Be able to clerk, investigate and present patients during ICU rounds
- 8. Be able to prepare patients adquately undergoing various ICU procedures
- 9. Be able to follow up with the patients after ICU post anaesthesia and be able to write a proper post anaesthesia summary
- 10. Participate in daily ICU rounds,
- 11. Attend and participate/present in all weekly departmental.
- 12. In addition to the above, at the end of the rotation, one is expected to have participated in the following procedures:

Skill	# of Cases	File No.	Intern involvement	Date	Supervisors Name	Supervisors Signature
	1.					
	2.					
	3.					
	4.					
	5.					
	6.					
	7.					
	8.					
Use of pulse	9.					
oximeter	10.					
A 3 &P7	11.					
Blood pressure	1.					
measurements	2.					
A 5 &P15	3.					
110 001 10	4.					
	5.					
	6.					
	7.					
	8.					
	9.					
	10.					
	11.					
	12.					
	13.					
	14.					
	15.					
	16.					
	17.					
	18.					
	19.					
	20.					
Peripheral	1.					
intravenous	2.					
cannulation	3.					
A 2 &P3	4.					
	5.					
Intravenous	1.					
drug	2.					
administration	3.					
A 2 &P3	4.					
	5.					
Intramuscular	1.					
drug	2.					
administration	3.					
A 2 &P3	4.					
	5.					
CPR	1.		1			
A 2 &P3	2.					
	3.					
	4.		1			
	· +.	1	1			1
	5.					

Subcutaneous	1.			
drug	2.			
administration	3.			
A 2 &P3	4.			
112 613	5.			
Use of ECG	1.			
A 2 &P3	2.			
AZAFS	3.			
	4.			
	5.			
F'				
Finger prick and	1.			
glucose	2.			
measurement A 3 &P7	3.			
A 3 &P/	4.			
	5.			
	6.			
	7.			
	8.			
	9.			
	10.			
	11.			
Administration	1.			
of glucose 12%	2.			
A 3 &P7	3.			
	4.			
	5.			
	6.			
	7.			
	8.			
	9.			
	10.			
Finger sweep	1			
A 1				
Jaw thrust	1.			
A 1 &P2	2.			
	3.			
Suction of	1.			
airway	2.			
A 1 &P2	3.			
General Patient	1.			
Treatment	2.			
A 2 &P3	3.			
AZWIS	4.			
	5.			
Vital sign				
Vital sign	1.			
observation A 2 &P3	2.			
AZARS	3.			
	4.			
	5.			
Airway	1.			
obstruction	2.			
removal	3.			
technique	4.			
A 1 &P3				

# **5.2** Evaluation of the Emergency Care Rotation

# **5.2.1** Monthly review of the performance

Month	Comment by Intern	Comment by Supervisor	Comment by Intern Coordinator
ONE (1)	Sign	Sign	Sign
ONE (1)	Date	Date	Date
	STAMP		
TWO (A)	Sign	Sign	Sign
TWO (2)	Date	Date	Date
	STAMP		

# 5.2.2 Overall Assessment at the end of the rotation

# Key

- 1. Grade shall be as provided under 5.1.2
- 2. Remarks (Satisfactory or Unsatisfactory)

Assessment Area	Competence	Grade	Remarks
	Basic Sciences		
Knowledge	Theoretical Knowledge in the Discipline		
	Participation in CPD		
	History Taking		
	Clinical examination		
	Interpretation of laboratory Data and X-Ray Findings		
	Basic Sciences		
Clinical Skills	Theoretical Knowledge in the Discipline		
	Participation in CPD		
	Patient notes		
	Use of drugs		
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	To patients and caregivers		
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Professional Conduct	Manifests sincerity, integrity and honest in acts and deeds		
	To the public		
	Punctuality, availability and Time management		
Leadership qualities	Takes initiative		
	Knowledge and adherence to institutional policies and regulations		
	Mentorship of juniors and other professionals		
Overall Score			
		1	1

**Note:** Overall Score of 30 and below is unsatisfactory performance and the resident's rotations shall be extended.

Supervisor's Comment		
Name	Qualification	HPCZ. No
Signature		
Coordinator's Comment		Date Stamp
Grading		Tick what Applies
Successfully Completed Rot	tation	
Unsuccessful -(State Extens	ion Period Recommended)	
then after completion of the nex	en graded as "Unsatisfactory", the resident sh at department, shall be required to return I only be for the competencies where the Resi	the that departments considered
Name	Qualification	HPCZ. No
Signature	Date	
		Date Stamp

# Clinical Presentations

Date	Topic	Mark*	Supervisor's Name/ Signature
		l	

All interns should at least make 15 clinical presentations

	HPCZ Licence No	
Internship Centre:	HPCZ Licence	No
Period of Internship: Start:	End:	
Coordinator's Comment		
Coordinators Recommendatio	ons	
Grading		Tick what Applies
Successfully Completed Rotati	on	
Unsuccessful		
Irremediable		
Name	Qualification	Reg. No
Signature	Date	
Head of Internship Site/Medic	al Director/Superintendent's Comm	Stamp
Grading		Tick what Applies
Successfully Completed Rotati	on	
Unsuccessful		
Irremediable		
Name	Position	
Signature	_	Date Stamp