



Undergraduate Academic Record

Oto-Rhino-Laryngology



The TN Dr.M.G.R Medical University, Chennai

The TN Dr. M.G.R. Medical University Chennai



Under Graduate Academic Record Department of Oto-Rhino-Laryngology



“I thank all the illustrious faculty of Oto-Rhino-Laryngology in the Affiliated Medical Institutions of this University for their conscientious effort”

Dr. K. Narayanasamy, M.D., D.M.(Gastro.)

Preface

The new GMER attempts to stand on the shoulder of the contributions and the efforts of resource persons, teachers and students (past and present). It intends to carry forward the process of learning to enable the Indian Medical Graduate, a consummate provider of health care aligned to the evolving needs of the patients in every socio- economic setting. The thrust in the new regulations is the continuation and evolution of thought in medical education making it more learner-centric, patient-centric, gender sensitive, outcome - oriented and environment appropriate. The result is an outcome driven curriculum which conforms to global trends. Emphasis is made on alignment and integration of subjects both horizontally and vertically while respecting the strengths and necessity of subject-based instruction and assessment. The importance of ethical values, responsiveness to the needs of the patient and acquisition of communication skills is underscored by providing dedicated curriculum time in the form of a longitudinal program based on Attitude, Ethics and Communication (AETCOM) competencies. Great emphasis has been placed on collaborative and interdisciplinary teamwork, professionalism, altruism and respect in professional relationships with due sensitivity to differences in thought, social and economic position and gender. In addition to the above, an attempt has been made to allow students from diverse educational streams and backgrounds to transition appropriately through a Foundation Course. Dedicated time has been allotted for self-directed learning and co- curricular activities. With this view in mind the log book has been designed as per the guidelines of competency-based curriculum. This Academic Record for Undergraduate Medical Students is to be maintained by the student and is part of the learner's personal progress assessment toolkit. The learner shall present the Academic Record to the staff facilitator / mentor at the end of all class room learning / practical sessions / integrated learning sessions / ECE / SDL / AETCOM sessions and feedback sessions as called for by the faculty facilitators / mentors. The progress shall be recorded in the various segments of the record and signed by the facilitator / mentor.

Certificate

This is to certify that

Mr. / Ms. _____

University Roll No: _____

Has satisfactorily attended and completed all academic activities as assigned in this record under the guidelines prescribed under the Tamil Nadu Dr. M.G.R. Medical University for the subject of Oto-Rhino-Laryngology.

Head of Department

Date:

Place

Content

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1. Background of the Course

GOAL AND OBJECTIVES

GOAL

The broad goal of the teaching of undergraduate students in Otorhinolaryngology is that the undergraduate student have acquired adequate knowledge and skills for optimally dealing with common disorders and emergencies and principles of rehabilitation of the impaired hearing.

OBJECTIVES

a. KNOWLEDGE

At the end of the course, the student should be able to:

1. describe the basic pathophysiology of common ENT diseases and emergencies.
2. adopt the rational use of commonly used drugs, keeping in mind their adverse reactions.
3. suggest common investigative procedures and their interpretation.

b. SKILLS:

At the end of the course, the student should be able to:

1. examine and diagnose common ENT problems including the pre-malignant and malignant disorders of the head and neck.
2. manage ENT problems at the first level of care and be able to refer whenever necessary.
3. Assist/carry out minor surgical procedures like ear syringing, ear dressings, nasal packing etc.
4. assist in certain procedures such as tracheostomy, endoscopies and removal of foreign bodies.

c. INTEGRATION

The undergraduate training in ENT will provide an integrated approach towards other disciplines especially neurosciences, ophthalmology and general surgery.

2. Curriculum Vitae

| | |
|-------------------------------|--|
| 1. Name of the Student | |
| 2. Date of Birth | |
| 3. Permanent Address | |
| | |
| | |
| 4. Contact Details | |
| i. Residential Address | |
| | |
| | |
| ii. Mobile No | |
| iii. Land Line No | |
| iv. Email ID | |
| 5. Name of Parent/Guardian | |
| 6. Residential Address | |
| | |
| | |
| 7. Land Line No (Home) | |
| 8. Mobile No Parents/Guardian | |

| |
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| |
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Signature

4. Out Patient Record

Note:

1. This section captures the attainment of the various competency mile-stones attained through Oto-Rhino-Laryngology OPD Clinical work.
2. The learner shall make observation in the lab and makes entries as mandated in the concerned record book
3. The record books shall be verified by the faculty facilitator periodically / at the end of each session or module and the completion of each such activity shall be recorded in this section by the learner and signed by the facilitator.
4. The end of each session shall be appended by an end of training formative assessment in the topic / session / module. eg: DOPS, Mini Cex, OSCE etc. Such sessional outcomes and feed for such outcomes may be suitably entered in the concerned documents.

| No | Clinical Diagnosis | Date of Presentation / Observation | Initials of Facilitator |
|----|--------------------|------------------------------------|-------------------------|
| 1 | | | |
| 2 | | | |
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CASE RECORD: 1

| | | |
|-------------|-------------|-------------------------------|
| Date | Time | Initial of Facilitator |
|-------------|-------------|-------------------------------|

| | |
|-----------------------------|--|
| Objective of Session | |
|-----------------------------|--|

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 2

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 3

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 4

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 5

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 6

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 7

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 8

Date

Time

Initial of Facilitator

**Objective of
Session**

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 9

| | | |
|-------------|-------------|-------------------------------|
| Date | Time | Initial of Facilitator |
|-------------|-------------|-------------------------------|

| | |
|-----------------------------|--|
| Objective of Session | |
|-----------------------------|--|

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 10

| | | |
|-------------|-------------|-------------------------------|
| Date | Time | Initial of Facilitator |
|-------------|-------------|-------------------------------|

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| Objective of Session | |
|-----------------------------|--|

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

5. In-Patient Record

Note

1. This section includes academic mile stones attained through observation of patients, their clinical presentations, differential diagnosis, interpretation of tests, final diagnosis, management, prognosis and outcomes.
2. The learner shall make observation entries as mandated in the record book
3. The record note books shall be verified by the faculty facilitator at the end of each session or module.
4. The completion of each such activity shall be recorded in this section by the learner and signed by the facilitator
5. The end of each session shall be appended by an end of training formative assessment in the topic / session / module. eg: MiniCex, OSCE, DOPS etc. Such sessional outcomes and feed for such outcomes may be suitably entered in the concerned documents.

| No | Diagnosis | Date of Presentation / Observation | Initials of Facilitator |
|-----------|------------------|-------------------------------------------|--------------------------------|
| 1 | | | |
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| 10 | | | |

CASE RECORD: 1

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 2

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 3

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 4

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 5

| | | |
|-------------|-------------|-------------------------------|
| Date | Time | Initial of Facilitator |
|-------------|-------------|-------------------------------|

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| Objective of Session | |
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Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 6

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|-------------|-------------|-------------------------------|
| Date | Time | Initial of Facilitator |
|-------------|-------------|-------------------------------|

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| Objective of Session | |
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Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 7

| | | |
|-------------|-------------|-------------------------------|
| Date | Time | Initial of Facilitator |
|-------------|-------------|-------------------------------|

| | |
|-----------------------------|--|
| Objective of Session | |
|-----------------------------|--|

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 8

| | | |
|-------------|-------------|-------------------------------|
| Date | Time | Initial of Facilitator |
|-------------|-------------|-------------------------------|

| | |
|-----------------------------|--|
| Objective of Session | |
|-----------------------------|--|

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 9

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

CASE RECORD: 10

Date

Time

Initial of Facilitator

Objective of Session

Synopsis of Learning

Clinical History:

Diagnosis

Summary of Discussion:

6. Clinical Procedures Record

Note

1. This section includes academic mile stones attained through observation of operative procedures, preoperative and post-operative clinical care and therapeutic and diagnostic procedures.
2. The learner shall make observation entries as mandated in the record book
3. The record note books shall be verified by the faculty facilitator at the end of each session or module.
4. The completion of each such activity shall be recorded in this section by the learner and signed by the facilitator
5. The end of each session shall be appended by an end of training formative assessment in the topic / session / module. eg: OSCE, DOPS , Viva etc. Such sessional outcomes and feed for such outcomes may be suitably entered in the concerned documents.

Observation of Procedures

| No | Name of Surgery | Date of Observation | Initials of Facilitator |
|----|-----------------|---------------------|-------------------------|
| 1 | | | |
| 2 | | | |
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| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |

Performance under Supervision

| No | Name of Procedure | Date of Presentation / Observation | Initials of Facilitator |
|-----------|--------------------------|-------------------------------------------|--------------------------------|
| 1 | | | |
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7. Clinical-Pathology Correlation

Note

1. This section includes academic mile stones attained through clinical observation and diagnosing pathological conditions by observation of gross and microscopic features
2. The learner shall make observation entries as mandated in the record book
3. The record note books shall be verified by the faculty facilitator at the end of each session or module.
4. The completion of each such activity shall be recorded in this section by the learner and signed by the facilitator
5. The end of each session shall be appended by an end of training formative assessment in the topic / session / module. eg: OSCE. Such sessional outcomes and feed for such outcomes may be suitably entered in the concerned documents.

| No | Gross Specimens / Microscopic Slide | Date of Demonstration | Initials of Facilitator |
|-----------|--------------------------------------------|------------------------------|--------------------------------|
| 1 | | | |
| 2 | | | |
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8. Clinical-Radiology Correlation

Note

1. This section includes academic mile stones attained through clinical observation and correlation with radiological features
2. The learner shall make observation entries as mandated in the record book
3. The record note books shall be verified by the faculty facilitator at the end of each session or module.
4. The completion of each such activity shall be recorded in this section by the learner and signed by the facilitator
5. The end of each session shall be appended by an end of training formative assessment in the topic / session / module. eg: OSCE. Such sessional outcomes and feed for such outcomes may be suitably entered in the concerned documents.

| No | Radiology Image – Xray / USG/ CT scan / MRI Scan | Date of Demonstration | Initials of Facilitator |
|-----------|---------------------------------------------------------|------------------------------|--------------------------------|
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9. Assignment Record

Note

1. This section includes academic milestones attained through assignments / out of class academic work.
2. The learner shall be given an assignment based on the "Nice to know" areas of the curriculum and any other such topics as deemed necessary.
3. The learner shall submit the assignment in the offline / online module as deemed by the individual institutions, which shall be assessed and graded by the faculty facilitator.
4. The completion of such activity shall be recorded in this section by the learner and signed by the facilitator

| No | Title of Assignment | Date of Submission | Initials of Facilitator |
|----|---------------------|--------------------|-------------------------|
| 1 | | | |
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| 8 | | | |
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10. Integrated Learning Record

Note

1. This section includes academic milestones attained through horizontal and vertical integrated sessions.
2. The learner shall attend all such integrated sessions and observe, interact and understand the topic.
3. The learner shall submit the end of session assessment (eq: MCQ session of 15- 20 MCQ questions)
4. The completion of such activity shall be recorded in this section by the learner and signed by the facilitator

| No | Topic of the Integrated Session | Date of Session | Initials of Facilitator |
|----|---------------------------------|-----------------|-------------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

11. Self-Directed Learning

SDL helps in empowering the student to perform an objective self-assessment of knowledge and skills, continue learning, refine existing skills and acquire new skills, to apply newly gained knowledge or skills to the care of the patient, to introspect and utilize experiences, to enhance personal and professional growth and learning, to search (including through electronic means), and critically evaluate the medical literature and apply the information in the care of the patient and to identify and select an appropriate career pathway that is professionally rewarding and personally fulfilling.

Note:

1. **This section includes academic milestones attained through self-directed learning.**
2. **The learner shall be assigned a specific learning objective for each session.**
3. **The learner shall be given an assignment based on the "Desirable to know" areas of the curriculum and any other such topics as deemed necessary.**
4. **They shall record a detailed synopsis of the learning in this section. The student shall also record a list of the books/journals referred in Vancouver format.**
5. **The completion of such activity shall be recorded in this section by the learner and signed by the facilitator**

SDL Session 01:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

SDL Session 02:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

SDL Session 03:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

SDL Session 04:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

SDL Session 05:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

SDL Session 06:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

SDL Session 07:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

SDL Session 08:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

SDL Session 09:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

SDL Session 10:

Date

Time

Initial of Facilitator

Topic of SDL

Synopsis of the Study

Bibliography

12. Attitudes Ethics & Communication

The "Indian Medical Graduate" (IMG) shall possess requisite knowledge, skills, attitudes, values and responsiveness, so that he or she may function appropriately and effectively *as a doctor of first contact of the community* while being globally relevant. In order to fulfill this goal, the IMG must be able to function in the following ROLES appropriately and effectively:

1. Clinician who understands and provides preventive, promotive, curative, palliative and holistic care with compassion.
2. Leader and member of the health care team and system with capabilities to collect, analyze, synthesize and communicate health data appropriately.
3. Communicator with patients, families, colleagues and community.
4. Lifelong learner committed to continuous improvement of skills and knowledge.
5. Professional, who is committed to excellence, is ethical, responsive and accountable to patients, community and profession.

Note:

1. This section includes academic mile stones attained AETCOM learning. The learner shall be assigned a specific learning objective for each session.
2. The learner shall be given an assignment based on the AETCOM topics of the curriculum.
3. They shall record a detailed synopsis of the skill learnt in this section. The student shall also record a reflection of the learning and learning process.
4. The completion of such activity shall be recorded in this section by the learner and signed by the facilitator

AETCOM Session 01:

Date

Time

Initial of Facilitator

Topic of AETCOM

Synopsis of the Skill Learnt

Reflections

AETCOM Session 02:

Date

Time

Initial of Facilitator

Topic of AETCOM

Synopsis of the Skill Learnt

Reflections

13. Formative Feedback Record

Note:

1. This section captures the process of formative support of the faculty mentors of the department during the learning and at the end of each section of study / module of learning.
2. The mentor shall peruse the academic performance, progression and specific academic needs of the learner.
3. The learner shall record in this section the type of formative assessment, topic for which it was done, the performance and the feedback given by the learner to the mentor on the performance, problems in learning, remedial required if any and the feedback of the mentor.

Formative Feedback Session No:

| Date | Time | Initial of Facilitator | | | | | | |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-----|-----|-----|-----|-----|
| Type of Formative Assessment | <ol style="list-style-type: none">1. Classroom Learning2. Clinical Learning3. Integrated Learning4. Assignment5. Self-Directed Learning6. AETCOM | <table border="0"><tr><td>[]</td></tr><tr><td>[]</td></tr><tr><td>[]</td></tr><tr><td>[]</td></tr><tr><td>[]</td></tr><tr><td>[]</td></tr></table> | [] | [] | [] | [] | [] | [] |
| [] | | | | | | | | |
| [] | | | | | | | | |
| [] | | | | | | | | |
| [] | | | | | | | | |
| [] | | | | | | | | |
| [] | | | | | | | | |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | | | | | | | |
| Feedback Given by the Learner | | | | | | | | |
| Feedback given by the Facilitator | | | | | | | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 7. Classroom Learning 8. Clinical Learning 9. Integrated Learning 10. Assignment 11. Self-Directed Learning 12. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 13. Classroom Learning 14. Clinical Learning 15. Integrated Learning 16. Assignment 17. Self-Directed Learning 18. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 19. Classroom Learning 20. Clinical Learning 21. Integrated Learning 22. Assignment 23. Self-Directed Learning 24. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 25. Classroom Learning 26. Clinical Learning 27. Integrated Learning 28. Assignment 29. Self-Directed Learning 30. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 31. Classroom Learning 32. Clinical Learning 33. Integrated Learning 34. Assignment 35. Self-Directed Learning 36. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 37. Classroom Learning 38. Clinical Learning 39. Integrated Learning 40. Assignment 41. Self-Directed Learning 42. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 43. Classroom Learning 44. Clinical Learning 45. Integrated Learning 46. Assignment 47. Self-Directed Learning 48. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 49. Classroom Learning 50. Clinical Learning 51. Integrated Learning 52. Assignment 53. Self-Directed Learning 54. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 55. Classroom Learning 56. Clinical Learning 57. Integrated Learning 58. Assignment 59. Self-Directed Learning 60. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 61. Classroom Learning 62. Clinical Learning 63. Integrated Learning 64. Assignment 65. Self-Directed Learning 66. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 67. Classroom Learning 68. Clinical Learning 69. Integrated Learning 70. Assignment 71. Self-Directed Learning 72. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 73. Classroom Learning 74. Clinical Learning 75. Integrated Learning 76. Assignment 77. Self-Directed Learning 78. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 79. Classroom Learning 80. Clinical Learning 81. Integrated Learning 82. Assignment 83. Self-Directed Learning 84. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 85. Classroom Learning 86. Clinical Learning 87. Integrated Learning 88. Assignment 89. Self-Directed Learning 90. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 91. Classroom Learning 92. Clinical Learning 93. Integrated Learning 94. Assignment 95. Self-Directed Learning 96. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 97. Classroom Learning 98. Clinical Learning 99. Integrated Learning 100. Assignment 101. Self-Directed Learning 102. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 103. Classroom Learning 104. Clinical Learning 105. Integrated Learning 106. Assignment 107. Self-Directed Learning 108. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 109. Classroom Learning 110. Clinical Learning 111. Integrated Learning 112. Assignment 113. Self-Directed Learning 114. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 115. Classroom Learning 116. Clinical Learning 117. Integrated Learning 118. Assignment 119. Self-Directed Learning 120. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 121. Classroom Learning 122. Clinical Learning 123. Integrated Learning 124. Assignment 125. Self-Directed Learning 126. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 127. Classroom Learning 128. Clinical Learning 129. Integrated Learning 130. Assignment 131. Self-Directed Learning 132. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 133. Classroom Learning 134. Clinical Learning 135. Integrated Learning 136. Assignment 137. Self-Directed Learning 138. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 139. Classroom Learning 140. Clinical Learning 141. Integrated Learning 142. Assignment 143. Self-Directed Learning 144. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 145. Classroom Learning 146. Clinical Learning 147. Integrated Learning 148. Assignment 149. Self-Directed Learning 150. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 151. Classroom Learning 152. Clinical Learning 153. Integrated Learning 154. Assignment 155. Self-Directed Learning 156. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 157. Classroom Learning 158. Clinical Learning 159. Integrated Learning 160. Assignment 161. Self-Directed Learning 162. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 163. Classroom Learning 164. Clinical Learning 165. Integrated Learning 166. Assignment 167. Self-Directed Learning 168. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 169. Classroom Learning 170. Clinical Learning 171. Integrated Learning 172. Assignment 173. Self-Directed Learning 174. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 175. Classroom Learning 176. Clinical Learning 177. Integrated Learning 178. Assignment 179. Self-Directed Learning 180. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 181. Classroom Learning 182. Clinical Learning 183. Integrated Learning 184. Assignment 185. Self-Directed Learning 186. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

Formative Feedback Session No:

| Date | Time | Initial of Facilitator |
|--------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Type of Formative Assessment | 187. Classroom Learning 188. Clinical Learning 189. Integrated Learning 190. Assignment 191. Self-Directed Learning 192. AETCOM | [] [] [] [] [] [] |
| Formative Assessment Done For: (Topic / Section / Module of Learning) | | |
| Feedback Given by the Learner | | |
| Feedback given by the Facilitator | | |

14.A. Formative Assessment Record - Theory

Note:

1. This section captures the process of Assessment data of the learner at the end of each section of study / module of learning.
2. The learner shall record their performance and get it verified by the facilitator

| Name of Institute : | | | | | | | | | | | | |
|----------------------------------------------------|----------|-----------------|-----------------------------|----------------|-------------------------------|---------------------------------------|-----------------------------|-------------------------------|-------------------|---------------------|-------------------|-------|
| Faculty : Final MBBS | | | | | | Year/Phase- Part - II | | | Date : dd/mm/yyyy | | | |
| DEPARTMENT OF Paediatrics/ENT/Ophthalmology | | | | | | | | | | | | |
| S.No. | Roll No. | Name of Student | Formative Assessment_Theory | | | Continuous Internal assessment_Theory | | | | | | Total |
| | | | Ist PCT Theory | 2nd PCT Theory | Prelims Theory (Paper I & II) | Home Assignment | Continuous Class Test (LMS) | Seminar | Museum study | Library assignments | Attendance Theory | |
| | | | | | | | | <i>Self Directed Learning</i> | | | | |
| | | | 100 | 100 | 100 | 10 | 25 | 10 | 10 | 10 | 10 | 375 |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

14. B. Formative Assessment Record – Clinical

Note:

1. This section captures the process of Assessment data of the learner at the end of each section of study / module of learning.
2. The learner shall record their performance and get it verified by the facilitator

| Name of Institute : | | | | | | | | | | | | |
|---------------------------------------------|----------|-----------------|--------------------------------------------------|----------------------------------------------------|-------------------|-------------------------------------------------------------------------------|---------------------|------------------|----------|---------------------------------|------------------------|-------|
| Department of Paediatrics/ENT/Ophthalmology | | | | | | | | | | | | |
| Faculty : Final MBBS | | | Year/Phase- Part -II | | | | Date : dd/mm/yyyy | | | | | |
| | | | Formative Assessment | | | Continuous Internal Assessment (Practical) | | | | | | |
| S.No. | Roll No. | Name of Student | 1st PCT Practical/First Ward Leaving Examination | 2nd PCT Practical /Second Ward Leaving Examination | Prelims Practical | Log book (150) | | | | Journal (Record book/Portfolio) | Attendance (Practical) | Total |
| | | | | | | Certifiable skill based competencies (Through OSPE/OSCE/Spots/Exercise/Other) | AETCOM competencies | SVL Lab activity | Research | | | |
| | | | 100 | 100 | 100 | 60 | 30 | 50 | 20 | 40 | 10 | 500 |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

15. Certification of Skills

Note:

1. This section captures the skills and competencies obtained by the learner during the course work in the department.
2. The facilitator shall assess the learner for the specific certifiable competency and those certifiable competencies which the learner has acquired shall be entered in this section. A record of these is also maintained in the assessment record. (certifiable competencies for which the learner has not successfully passed the assessment shall not be recorded here)

| No | List of Skills to be certified | Initials of the Facilitator |
|-----------|---------------------------------------|------------------------------------|
| 1 | | |
| 2 | | |

Certification of Skills - Competency : ____

| | | | | | | | | |
|------------------------------|---------|---|-------------|--|---------------|--|--|--|
| Type of Skill | | | | | | | | |
| Type of Assessment | | | | | | | | |
| Performance of Student | | | | | | | | |
| Feed Back of Learner | | | | | | | | |
| Feed Back of Facilitator | | | | | | | | |
| Remedial Action Suggested | | | | | | | | |
| Remedial Assessment | | 1 | Date | | | | | |
| Performance of Student | | | | | | | | |
| Remedial Assessment | | 2 | Date | | | | | |
| Performance of Student | | | | | | | | |
| Remedial Assessment | | 3 | Date | | | | | |
| Performance of Student | | | | | | | | |
| Remedial Assessment | | 4 | Date | | | | | |
| Performance of Student | | | | | | | | |
| Certification of Skill (COS) | | | Certified | | Not Certified | | | |
| Date of COS | | | | | | | | |
| Signatures | Learner | | Facilitator | | Professor | | | |
| | | | | | | | | |

Certification of Skills - Competency : ____

| | | | | | | | | |
|------------------------------|---------|---|-------------|--|---------------|--|--|--|
| Type of Skill | | | | | | | | |
| Type of Assessment | | | | | | | | |
| Performance of Student | | | | | | | | |
| Feed Back of Learner | | | | | | | | |
| Feed Back of Facilitator | | | | | | | | |
| Remedial Action Suggested | | | | | | | | |
| Remedial Assessment | | 1 | Date | | | | | |
| Performance of Student | | | | | | | | |
| Remedial Assessment | | 2 | Date | | | | | |
| Performance of Student | | | | | | | | |
| Remedial Assessment | | 3 | Date | | | | | |
| Performance of Student | | | | | | | | |
| Remedial Assessment | | 4 | Date | | | | | |
| Performance of Student | | | | | | | | |
| Certification of Skill (COS) | | | Certified | | Not Certified | | | |
| Date of COS | | | | | | | | |
| Signatures | Learner | | Facilitator | | Professor | | | |
| | | | | | | | | |

16. Record of Projects

Note:

1. The learner may undertake a scholastic project of 1-2 months in the form of a clinical project or community project or research project.
2. These are based on the preferences of individual institutes.
3. The projects are voluntary activity and not included for internal assessment.

| | |
|-----------------------------|------------------------------|
| Type of Project | Clinical Project [] |
| | Community Project [] |
| | Research Project [] |
| Title of Project | |
| Synopsis of the Work | |
| | |

| | |
|--|--|
| | |
|--|--|

**Signature of
Facilitator**

| |
|--|
| |
|--|

17. Photo Story

Note:

1. This section shall include the important moments of the process of development which shall be documented for the student and the department
2. These may be eg: prizes won, competitions attended, department activities etc.
3. These are based on the preferences of individual institutes.
4. The projects are voluntary activity and not included for internal assessment.

18. Record of Co-Curricular Activities

Note:

1. This section shall include the important co-curricular activities in which the student is involved during the academic year which shall be documented for the student and the department
2. These may be eg: prizes won, competitions attended, etc.
3. These are based on the preferences of individual institutes.
4. The projects are voluntary activity and not included for internal assessment.