House Job Curriculum

United Medical and Dental College & Creek General Hospital

2020 House Job Curriculum

www.umdc.edu.pk

Copyright 2020

All rights reserved. No part of this manual may be reproduce, stored in retrievable system, or transmitted I any form or by any means , electronic , mechanical , photocopying, recording or otherwise , without the prior permission of the copyright holders.

United Medical & Dental College

umdc.edu.pk United-Medical-Dental-College
admission@umdc.edu.pk 0346-8280070, 0346-8280071
United Medical & Dental College, Korangi Creek Road, behind C.B.M., Karachi Pakistan.

House Job Curriculum:
Framework of House Job Competencies

Dr. Shanila Feroz, FCPS (Otolaryngology)
Associate Prof. ENT-Head & Neck Surgery
Head of Clinical Skills Department
Chairperson, Department of Continuing Medical Education and Professional Development
United Medical and Dental College &
Creek General Hospital, Karachi, Pakistan.

Prof. Bilal Faiz Khan, M.D. (Ophthalmology)
Dean, Academic Affairs
Chairperson, House job program
United Medical & Dental College &
Creek General Hospital, Karachi, Pakistan.

Dr. Danish Muhammad Khan, M.D. (Medicine)
Director Operation
Creek General Hospital, Karachi, Pakistan.

Content

Introduction 1
Section 1: House Job 2
Section 2: Framework of House Job Competencies 4
Section 3: House Job Governance 6
Section 4: Objectives 13
Section 5: Basic Procedural Competencies 16
Section 6: House Job Competencies 19
Section 7: Assessment 22

Introduction

Graduating from the medical school is not the end of journey; it is the start of a career. The graduates of United Medical and Dental College should be assure that they have received a high quality medical education and they should look forward to receive some of the best training available in Karachi, Pakistan during their house job program.

This Curriculum of house job is a guide for the learning and working environment during house job and is a stepping-stone for future residency training. The structured training program is necessary to enhance house officer skills, attitudes, and professional behavior learned through the innovative undergraduate medical program. United Medical and Dental College house job program includes key professional skills needed to ensure best and safest patient care through outstanding communications skills, clinical skills, and multi-disciplinary teamwork. The UMDC also introduces a portfolio of achievements that demonstrates the progress in each of these areas. The program includes House Job placement coordinator who will be responsible for the house Job program administratively, whilst the House Job Committee will oversee the various other activities during the year.

Section – 1

House Job

House Job is a supervised period spent in different specialties, following the completion of graduation required from Pakistan Medical and Dental College (PMDC). During house job, the house officer should be an active learner, achieving learning outcomes independently by demonstrating a variety of learning styles. To become future competent physician, the house officer required exposure to a wide variety of medical and surgical departments to learn variety of professional skills considered essential for working in the health care system.

1 Medical HouseJob

The concept that has been introduced in house job program is the gradual escalation of responsibilities toward patient care by progressing from the status of supervision to independence. This can be achieve by spiral approach through revisiting any topic at different levels of difficulties and by progressive learning. House officers are supposed to provide service in the expanse of competencies expected from health care educational programs.

Competencies expected from House Officer as a clinical physician

1. Good clinicalcare:

- History taking and physical examination
- Safe prescription and keeping relevant medical record
- Time management and organized decision-making
- Good quality care and promotion of patient safety
- Reduce risk of cross infection
- Clinical governance and quality improvement
- Basic nutritional care
- Patient education
- Ethical and legal aspects in general practice

2. Good medical practice

- Self-directed life-long learning
- Use evidence and guidelines that will benefit patient care
- Use audit to improve patient care

3. Teaching andTraining
4. Good communication
5. Teamwork within the clinical team and medical context
6. Professional behavior
7. Core skills in acute care

This document describes the House Job curriculum at United Medical and Dental College and Creek General Hospital.

Section – 2

Framework for House job Competencies

The Framework of house job aims to ensure high quality and effective learning and training of house officers during house job period through an innovative competency and performance based curriculum. Upon completion of house job, a house officer will be able to recognize and deal successfully with common clinical and related non-clinical scenarios. **The Framework also includes aspects of supervision, organization, assessment and feedback.** It outlines the knowledge, skills and attitude that are require by house officer's to deliver safe patient care and provides an educational template identifying the core competencies and outcome expected at the end of house job.

The Framework for house job competencies will assist educators and clinical supervisors in providing a structured and well-planned program of education for house officers. It assesses house officer's development in learning and training and plans their professional development.

The Domains of the Framework of house job

Clinical management
Medical practice
Professionalism
Communication skills

Learning Outcomes

At the end of house job, a house officer will be able to:

- *Diagnose and manage diseases by applying the basic medical and clinical sciences effectively inpractice.*
- *Provide comprehensive management that includes health care and disease prevention.*
- *Demonstrate effective role as a team member and apply the principles of multi-disciplinary approach.*
- *Know when to ask for opinion from clinical supervisors and senior colleagues.*
- *Deal professionally with the patient and family.*
- *Apply effective tools in communication, presentation and leadership.*
- *Apply the principles of clinical governance.*
- *Demonstrate life-long commitment toward continuing medical education.*

Section – 3

House job Governance

House job program is govern by **house job committee** under the umbrella of clinical affairs, United Medical and Dental College. **The Dean of Academic Affairs** will be the chairperson of house job program.

Role of house job placement Coordinator

The role of house officer's placement coordinator:

- *Runs administrative affairs related to house job program.*
- *Deals with issues related to house officer.*
- *Prepares an ideal training and learning environment.*
- *Conducts educational activities to enhance house officer's skills.*
- *Promotes research related to housejob.*
- *Ensures the implementation of the Framework of house job.*
- *Orients house officers for future career choices and opportunities.*
- *Check duties and activities of on call house officers*

The placement coordinator is encouraged to receive feedback from rotating house officer on the following aspects:

- *The range and effectiveness of teaching methods.*
- *The usefulness and effectiveness of teaching and clinical support provided.*
- *The degree of collaboration with the supervisor in planning learning outcomes and program of supervision.*
- *The degree of support in the provision of information on further training opportunities.*
- *The degree of support on addressing performance issues and conflict resolution.*

Role of Clinical Supervisor

Clinical supervisor is defining as a clinician in the teaching hospitals who is responsible to organize and supervise the training of house officers. He serves a liaison role between junior doctors, administration and senior colleagues. **The clinical supervisor must be senior clinician or head of the department.**

The role of a clinical supervisor in clinical teaching includes a range of responsibilities such as direct observation, discussions on clinical problems and interesting cases, joint consultations, formal teaching on specific topics, demonstrations, participation in clinical procedures and in small group discussions with other members of the practice. The supervisor is required to offer support to the house officer in the following aspects:

- Provide orientation to the practice ensuring that the house officeris:
    - o *Introduced to all members of staff and the stage of training and responsibilities of the house officer is known by all.*
- Provide supervision to the house officer at a level appropriate to their level of training as indicated below:
    - *o House officer should not take the principal responsibility of individual patient.*
    - *o The clinical supervisor or the chief medical officer/ senior faculty must be physically present in the workplace at all times whilst the house officer is providing clinical care.*
    - *o If the supervisor is absent from the medical practice, his/her duties should be delegated to a colleague after coordinating with the coordinator.*
- The Clinical Supervisor will provide professional education and clinical training of house officer including ethical issues, career guidance, self-education etc.

House officer Responsibilities and Rights

House officer is responsible for their learning, assessment and attendance at structured learning sessions in their placement. Each activity is an opportunity to learn something new such as a competency or a clinical skill. Some competencies can be learn from nurses or other health care workers. The precise arrangements and responsibilities will vary by specialties. There will be emphasis on gradual increasing responsibilities for patient care that facilitates the progress from being supervise to independence.

Role of House officers

During house job, house officer are expected:

- Be a professional and effective team member.
- Provide safe patient care.
- Adhere to the rules and regulations of the assigned department.

At Clinics:

- *Conduct a history and perform a physical examination.*
- *Prepare a list of differential diagnoses, working diagnoses,appropriate investigations, and a management plan.*
- *Seek approval from the clinical supervisor prior to executing the management plan.*
- *Follow and document the management plan, results of investigations, and any changes in the patient's condition.*

Emergency:

- *House officers posted in emergency needs to address all emergencies.*
- *Conduct a history and perform a physical examination.*
- *Maintain ER register*
- *Generate emergency call if needed. Understand the importance of working in a multi-disciplinary team in the Emergency Department.*
- *Recognize critically ill patients (impending or actual circulatory, respiratory and renal failure and situations that are likely to lead to them).*
- *Assess the trauma patient.*
- *Understand the disturbed physiology reflected in critical care situations.*
- *Demonstrate the ability to recognize and assess acutely ill patients, arrange appropriate urgent investigations and initiate immediate management.*

- *Understand indications for change to a palliative approach to management.*
- *Be able to practice safe airway management and to have skills for basic CPR, secure patent airway, apply oxygen therapy, conduct external cardiac massage, bag valve mask ventilation and identify conditions requiring urgent referral.*
- *Interpret basic clinical investigations in their clinical context such as cervical spine x-ray, ECG, chest x-ray, arterial blood gases.*
- *Recognize which illnesses require/do not require hospital admission.*
- *Communicate bad news to patients and relatives.*
- *Demonstrate strategies for dealing with uncooperative patients and relatives.*
- *Understand the importance of time management.*
- *Prioritize issues when dealing with patients in the Emergency department.*
- *Be familiar with common Procedural Skills: Airway management, chest tube insertion, BLS, ACLS, and Pediatrics Resuscitation, venipuncture and venous cannulation, blood gas collection, urinary catheterization, suturing and application of Plaster of Paris.*

Ward and ICU

- *House officer posted in ward should do morning rounds with assigned department consultants.*
- *Maintain order register and carried out orders on time.*
- *He should handover patient's details to the on call house officers reliving him from his/her duties inward.*
- *It is on call doctor duty to complete all the case histories of newly admitted patients in the ward, send and collect investigation reports as required, council them regarding treatment plan, take preoperative fitness from anesthesia department and explain procedure to patient advised,and make discharge summaries.*

Operation Theater

- *House officers during their surgery rotation will attend and assist consultants of concerned department during surgical procedures.*
- *Perform minor procedures under supervision.*
- *Explain surgical procedure planned to patient and take consent.*

House officer rights include:

- *Training under the supervision of a faculty staff.*
- *Availability of a rich training and academic environment.*
- *Enjoying leaves as per college or hospital policy*
- *Awareness of assessment and evaluation in different placements.*
- *Any dispute should be bringing into knowledge of the supervisor & coordinator.*

Applying for House job

Completion of five years graduation program is pre-requisite for house job application. Placement will start at the beginning of the year for which house officers need to submit their application in order to start house job. Once house job is successfully completed, a house job certificate be award by hospital administration.
The house job is one year, 12 months program include rotations 3 months in Internal Medicine & 3 months in any one medicine allied and 3 months in General Surgery & 3 months in any one surgical allied department. The rotations offers in Creek General Hospital includes:

Internal Medicine	3months	(Compulsory)
Neurology	3months	}
Nephrology	3months	}
Cardiology	3months	}
General Surgery	3months	(Compulsory)
Obstetrics and Gynecology	3months	}
Pediatrics'	3months	}
Otolaryngology	3months	}
Ophthalmology	3months	}
Orthopedics	3months	}

Rules and Regulations:

- *The official duty hours of house officers starts at 8 am to 4 pm (30 hours).*
- *For attendance, biometric system is available.*
- *There will be every third day on-call from 8 am to 4 pm next day.*
- *10 days of leaves can be avail in six months rotation time by submitting an application. Upon taking further leaves, the deficit should be fulfill by the house officer.*
- *The house officer will rotated in OPD, OT, ICU and Emergency services as per departmental decision.*
- *The house officers should be available in hospital premises during their duty hours and can only leave by taking written permission from their departmental supervisor.*

- There will be no inter departmental transfer once joining done and submitted.
- There will be 15 days probation period in which supervisor can take action against house officer for discontinuation of house job.
- House officers cannot issue or sign a medical certificate, death certificate or any legal document to the patients.
- The management reserve the rights to expel house officer if he/she is observe involved in political activities, drug use, or any indecent activities.

Starting the house job

Before the commencement of the first placement, there will be an orientation course for the house job program. This will include information about the hospital, time table and further information.

A typical orientation day would include:

- Introduction to house job that includes educational needs and requirements, appraisal methods, counseling, duties and responsibilities, support services, medical ethics and medico-legalissues.
- Overview of the Framework of house job , including assessment in house job and educational portfolio
- Safe patient practice
- Medication safety
- Computerized Patient Record(CPR)
- Radiology system
- Infection prevention & control

Completing house job program

At the end of house job, the **house job Completion Certificate will be issue.** The following should be available prior to issuing completion certificate:

- "House Competency Assessment" forms of all departments rotated.
- Complete portfolio
- Clearance

Any non-approved absences from the program will be subject to disciplinary actions. Any non-approved on-call absences will be subject to the repetition of placement/rotation.

Section – 4

Objectives

Internal Medicine and Allied

At the completion of this rotation, the house officer will be able to:

- Undertake a competent clinical assessment of a patient with an undifferentiated presentation of common medical conditions.
- Have a systematic approach to the evaluation of a patient with multi-system illnesses, including the ability to prioritize the different problems present.
- Be familiar with the diagnostic patterns used in the evaluation of patients with common medical conditions.
- Be familiar with common medical emergencies and trauma.
- Order and interpret the results of the main tests relevant to the investigation of the presentation of common medical problems.
- Make recommendations for the initial phases of management of common medical conditions.
- Maintain comprehensive records of care provided to patients, including regular updates.
- Demonstrate the ability to maintain a professional relationship with patients during the course of their illness, including the provision of full explanation and support to both patients and their families or care providers.
- Demonstrate the ability to obtain informed consent for invasive procedures.
- Complete Basic Life Support (BLS)

General Surgery & Allied

At the completion of this rotation, the house officer will be able to:

- Undertake a competent clinical assessment of a patient with an undifferentiated presentation of common surgical conditions, including conditions related to the breast, neck, abdomen, testis, joints and bone, brain etc.
- Be familiar with common surgical emergencies and trauma.
- Have a systematic approach to the evaluation of a patient with multi-system illnesses, including the ability to prioritize the different problems present.
- Understand the management and possible complications, including hernia, testicular problems, common endocrine conditions, breast, and common surgical emergencies.
- Evaluate common co-morbid conditions in patients with a surgical condition, including diabetes mellitus, hypertension, and asthma.
- Be familiar with the diagnostic patterns used in the evaluation of patients with common surgical conditions.
- Order and interpret the results of the main tests relevant to the investigation of the presentation of common surgical problems.
- Make recommendations for the initial phases of management of common surgical conditions.
- Maintain comprehensive records of care provided to patients, including regular updates.
- Demonstrate the ability to maintain a professional relationship with patients during the course of their illness, including the provision of full explanationand support to both patients and their families or careproviders
- Demonstrate the ability to obtain informed consent for invasive procedures.
- Complete Basic Life Support (BLS)

Obstetrics and Gynecology

At the completion of this rotation, the house officer should be able to:

- Undertake a competent clinical assessment of a patient with presentation of common obstetrical and gynecological conditions, including pregnant women, menstrual history etc. .
- Demonstrate sensitive communication with female patients.
- Be familiar with common surgical emergencies and trauma.
- Have a systematic approach to the evaluation of a patient with multi-system illnesses, including the ability to prioritize the different problems present.
- Acquire knowledge and skills of a woman in labor and delivery.
- Acquire skills to assess fetalwell-being.
- Demonstrate ability to use Pinard stethoscope and take CTG.
- Understand the management and possible complications, including abnormal labor and delivery, abnormal postnatal care, vaginal bleeding, incontinence and prolapse and treat ment ofinfections.
- Evaluate common patients co-morbid with a pregnancy condition, including diabetes mellitus, hypertension and asthma.
- Be familiar with the diagnostic patterns used in the evaluation of patients with common obstetrical and gynecological conditions, including urinary pregnancy test, quantitative HCG assessment, routine antenatal screening investigations, use of ultrasound techniques, abnormal CTG traces and Pap Smear.
- Make recommendations for the initial phases of management of common obstetrical and gynecological conditions.
- Maintain comprehensive records of care provided to patients, including regular updates.
- Demonstrate the ability to maintain a professional relationship with patients during the course of their illness, including the provision of full explanation and support to both patients and their families or care providers.
- Demonstrate the ability to obtain informed consent for invasive procedures.
- Complete Basic Life Support (BLS)

Pediatrics

At the completion of this rotation, the house officer will be able to:

- Obtain a full history and perform physical examination of an infants and child.
- Seek further relevant information related to differential diagnosis.
- Demonstrate awareness of issues in examination of child and adolescent at risk.
- Take a child's temperature and record on chart demonstrating correct useof different methods/sites.
- Perform ear examination using the otoscope.
- Measure blood pressure by using sphygmomanometer and plot a chart for infant and older child.
- Perform urinalysis.
- Measure and plot a chart of head circumference, weight and height for an infant, older child and adolescent.
- Observe and assess on performing lumbar puncture.
- Measure peak expiratory flow and understand principles of spirometry.
- Collect specimens for microbiological examination such as urine, throat swabs, nasopharyngeal aspirates and skin swabs.
- Interpret results of full blood count and blood film.
- Interpret results of blood biochemistry report.
- Interpret results of arterial blood gas report recognizing normal and abnormal findings.
- Interpret microbiological analyses of specimens of urine, blood, stool, sputum, nasopharyngeal aspirate and cerebrospinal fluid.
- Interpret and discuss plain x-rays of the chest, abdomen, skull and musculoskeletal system in achild.
- Acquire the basic knowledge in the management and therapies of common general pediatric problems and of the different sub specialties.
- Calculate and chart a pediatric drug dosage correctly using weight or surface area. Recognize and use sources of recommended dosages and chart correctly.
- Convey information about investigations required and investigation results in appropriate language and with accuracy based on evidence and verify patient/parents/caregiver understanding.
- Convey information to parents about immunization schedule, indications and contraindications.
- Perform routine immunization confirming appropriate site, equipment and technique.
- Should know how to perform resuscitation in children of all ages.

- Provide information to parents and caregivers of chronically ill and disabled children.
- Provide explanations of common conditions to parents and children such as asthma, croup, gastro intestinal illness, febrile seizures, otitis media and upper respiratory tractinfections.
- Demonstrate ability to communicate effectively and accurately regarding ongoing care, man agement plans and responsibilities.
- Understand responsibilities regarding notification of children atrisk.
- Demonstrate awareness of the issues in ongoing care for children of families living in rural and regional areas and the medical management difficulties for these families.

Section –5

Basic Procedural Competencies

The house officer is to be competent in the following procedures in each specialty to provide safe treatment to patient.

Basic Procedural Competencies in Medicine Specialty:

- *Interpret common abnormalities of ECG.*
- *Interpret common chest x-rays abnormalities.*
- *Use ophthalmoscope.*
- *Perform arterial and venous blood withdrawal.*
- *Set up and administer oxygen to a patient.*
- *,Perform urinary catheterization.*
- *Insert Nasogastric tube.*
- *Perform Pulse Oximetry measurement.*
- *Perform blood sugar measurement using Glucometer*

Basic Procedural Competencies in Surgery Specialty:

- *Perform the techniques of surgical scrubbing.*
- *Perform arterial and venous blood withdrawal.*
- *Interpret common abdomen x-rays abnormalities.*
- *Interpret common cervical spine x-rays abnormalities.*
- *Set up and administer oxygen to apatient.*
- *Perform urinary catheterization.*
- *Insert Nasogastrictube.*
- *Perform suturing of minor wounds and removal of sutures.*
- *Assist in applying a plastercast.*

Basic Procedural Competencies in Pediatrics Specialty:

- *Perform ear examination using the Otoscope.*
- *Assist in performing lumbarpuncture.*
- *Perform arterial and venous blood withdrawal.*
- *Assist in performing CPR in children of all ages.*
- *Perform suturing of minor wounds and removal of sutures.*
- *Assist in inserting Foley catheter.*
- *Assist in inserting Nasogastric tube.*

Basic Procedural Competencies in Obstetrics and Gynecology Specialty:

- *Perform Fundal height assessment.*
- *Perform fetal heart sound detection.*
- *Apply and interpret CTG tracing.*
- *Assist in low risk normal vaginal delivery.*
- *Assist in episiotomy performance and suturing.*
- *Perform speculum examination.*
- *Assign neonatal APGAR score.*

Basic procedural competencies in emergency service:

- *Perform localanesthetics.*
- *Set up and administer oxygen to apatient.*
- *Perform nebulizer /inhalertherapy.*
- *Assess level of consciousness using Glasgow ComaScore.*
- *Perform neck stiffnesstesting.*
- *Identify focal neurologicalsign.*
- *Assist in conduction of ACLS, Neonatal and Child Resuscitation,ATLS.*
- *Assist in performing intubation.*
- *Assist in performing chest tube insertion.*
- *Assist in transporting sickchildren.*
- *Identify indications for urgent CT-Scan in trauma, headache and impaired*

Section –6

House officer Competencies

Assessment during house officer will cover knowledge, attitudes, behaviors, skills in different domains. House officer are encouraged to learn as much as they can. However, they are not expected to be exposed to all the skills and procedures listed in the framework for house officer competencies.

I- Clinical Management

The House officer are expected to appropriately assess patients presenting with common, important conditions, including the accurate identification of symptoms, signs and/or problems and their differential diagnosis and then use that information to further manage the patient, consistent with their level of responsibility. The clinical management domain will cover the following competencies:

1. Acquire relevant clinical knowledge.
2. To be able to:
   - Take history and perform physical examination.
   - Construct differential diagnosis.
   - Plan investigations and management
   - Prescribe medications safely.
   - Keep an accurate and relevant medical record.
   - Apply SOAP approach (Subjective, Objective, Assessment and Plan) in follow-up of patients.
   - Maintain Medical records
3. Acquire core skills in acute care.

II- Medical Practice:

House officers are expected to understand and be involved in continuous quality improvement as it relates to the enhancement of patient care, safety and management. They will demonstrate the knowledge, skills, attitudes and competencies needed:

1. To start self-directed life-long learning.
2. To use evidence and guidelines that will benefit patient care.
3. To undertake a role in teaching and presentation
4. To educate patients effectively about:
   Disease prevention, investigations and therapy, Life style modification related to environmental and biological factors i.e. smoking and alcohol.

III- Professionalism

House officers are expected to reflect and maintain a level of behavior that is appropriate with the community standard of the medical profession. House officers are expected to understand the doctors' role within the context of the health care system and the community. This domain will cover the following competencies:

1. Demonstrate appropriate time management and decision-making.
2. Ensure and promote patient safety:
   - Make patient safety a priority in clinical practice.
   - Understand the importance of good team work for patient safety.
   - Understand the principles of quality and safety improvement.
3. Apply principles of infection control.
4. Understand the principles related to ethical and legal issues:
   - Medical ethical principles.
   - Confidentiality.
   - Informed consent.
   - Legal framework of medical practice.
5. Maintain educational portfolio to reflect personal professional development.

V- Acute Care

House officers are expected to recognize critically ill patients and initiate immediate management as needed. They will be required to take part in life support, be competent to participate with a resuscitation team under supervision and be able to contribute to discussion and decisions regarding resuscitation of patients. The domain of acute care will cover the following competencies

1. Acquire core skills in relation to acute illness
2. Assessment and management of acutely ill patient.
   - Management of fluid safely in acute patients.
   - Reassessment of ill patients after initiation of treatment.
   - Request senior or more experienced help when appropriate.
   - Uses common analgesic drugs safely and effectively.
   - Ensures safe continuing care of patients on hand over between shifts, on- call staff or with "hospital at night" team by meticulous attention to detail and reflection on performance.
   - Recognize advanced life support with confidence to initiate resuscitation until a more senior colleague arrives.
3. Provide comprehensive care from the point of admission and taking into account the effects of any chronic disease.

Section –7

Assessment

The house officer will be assess at the end of rotation by supervisor. Assessment includes four domains i.e. **clinical management, medical practice, professionalism, communication skills** (Box). Each house officer should review his/her assessment form and sign it. Signing this form indicates that the house officer is informed but does not necessarily mean that they agree with the assessment. A score of less than 60% indicates that the performance is below average. The management may advise to repeat the rotation or part of it after conducting appropriate consultations. Any disciplinary action or grievance should be submit to the coordinator of house job program who will then discussed with hospital management for further action to be taken.

House officer Assessment Criteria

1- Clinical Management

- Acquires clinical knowledge
- Takes History and perform Physical Examination
- Constructs differential diagnosis
- Plans appropriate investigation and management
- Applies SOAP in follow-up of patients
- Maintains quality medical records
- Recognizes and assesses acutely ill patients

2- Medical Practice

- Demonstrates evidence of self-learning
- Gives comprehensive case presentation
- Provides appropriate patient instructions
- Maintains regular attendance
- Demonstrates required technical skills

3- Professionalism

- Manages time appropriately
- Practices the principles of patient safety
- Applies principles of medical ethics
- Demonstrates self-confidence
- Acknowledges own limitations and seeks assistance

4- Communication Skills

- Maintains professional practice
- Communicates well with patient and/or family
- Communicates effectively with the team and others

HOUSE OFFICER CLINICAL ROTATION EVALUATION FORM

About this form

The purpose of this form is to provide feedback to the intern on their performance and to support the decision about satisfactory completion of house job. The form should be filled by the supervisor at the end of rotation.

SUPERVISOR INFORMATION	
NAME:	**JOB TITLE:**
ORGANIZATION'S NAME:	**PHONE NUMBER:**
EMAIL ADDRESS:	

HOUSE OFFICER INFORMATION	
NAME:	
ROTATION STARTING DATE (D/M/Y):	**COMPLETION DATE (D/M/Y):**

ABOUT THE HOUSE OFFICER PERFORMANCE						
1. Please evaluate this house officer on the following items by checking the appropriate rating.	**Excellent**	**Very Good**	**Satisfactory**	**Needs improvement**	**Unsatisfactory**	**Not Applicable**
Punctuality: Arrived hospital on-time.						
Professionalism: Behaved in a professional manner						
Demonstrates all aspects of **safe patient care**						
Communication skills With patients, their family & doctors						
Written communication skills (History taking & Documentation)						
Computer Skills						
Time management on workload demands						
Safely perform common procedures (Dressing , wound suturing, catheterization, blood sampling)						
Do **Evidence-based management**						

Participate in **quality assurance**, quality improvement, risk management and incident reporting						
Identify **appropriate investigations** and interpret it accurately						
Prescribe medications safely and effectively including fluid, electrolytes & blood products						
Emergency management: Identifies deteriorating or critically unwell patients &initiates BLS management						
Demonstrate critical thinking and **problem solving skills**						
Comorbidities: Identifies all comorbidities and initiates appropriate management.						
Teamwork: Works effectively as a member of the inter-professional team and positively influences team dynamics.						

2.	What do you consider the house officer strengths?				
3.	In what areas do, the house officer needs improvement.				
4.	Overall, how do you rate your experience with **thishouse officer**	**Excellent**	**Good**	**Average**	**Poor**
SPERVISOR'S SIGNATURE		**DATE**			

United Medical & Dental College

umdc.edu.pk United-Medical-Dental-College
admission@umdc.edu.pk 0346-8280070, 0346-8280071
United Medical & Dental College, Korangi Creek Road, behind C.B.M., Karachi Pakistan.