NATIONAL POSTGRADUATE MEDICAL COLLEGE OF NIGERIA
LOG BOOK FOR THE JUNIOR RESIDENCY TRAINING IN OBSTETRICS AND GYNAECOLOGY

NAME OF RESIDENT:……

TRAINING INSTITUTION…….

DATEOF COMMENCEMENT OF RESIDENCY TRAINING:…….

LEVEL OF COMPETENCY FOR OBSTETRICS AND GYNAECLOGY TRAINING

LEVEL OF COMPETENCY	DEFINITION
1	Learner only observe modelled behaviour, because they do not have the skills or knowledge to perform a specific EPA, **even with full supervision**
2	Learner practice the EPA **under controlled circumstances with full supervision**
3	Learner practice the EPA **with supervision on demand**
4	Unsupervised practice is allowed, with the **caution** that learners will seek help when their capabilities are insufficient to competently complete the task
5	Able to supervise others and teach them through entrusting

A. LABOUR WARD POSTING

SPONTANEOUS VERTEX DELIVERIES

S/no	Hospital number	Low/high risk pregnancy	Hours in labour	Level of competence	Supervised by	Date	Remarks
1							
2							
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S/no	Hosp no	Low/high risk pregnancy	Hours in labour	Level of competence	Supervised by	Date	Remarks
38							
39							
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S/no	Hosp no	Low/high risk pregnancy	Hours in labour	Level of competence	Supervised by	Date	Remarks
77							
78							
79							
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100							

Minimum = 100

BREECH DELIVERY

S/no	Hosp no	Type of breech	Hours in labour	Mode of delivery	Level of competence	Supervised by	Date	Remarks
1								
2								
3								
4								
5								

Minimum = 5

MULTIPLE GESTATION DELIVERY

S/ no	Hosp no	Presentation of Twin 2	Hours in labour	Mode of delivery	Level of competence	Supervised by	Date	Remarks
1								
2								
3								
4								
5								

Minimum = 5

FORCEPS DELIVERY

S/no	Hosp no	Indication	Outcome	Level of competence	Supervised by	Date	Remarks
1							
2							
3							
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9							
10							

Minimum = 10

CAESAREAN SECTION

S/no	Hosp no	Indication	Outcome	Level of competence	Supervised/assisted by	Date	Remarks
1							
2							
3							
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5							
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Minimum = 20

VENTOUSE EXTRACTION

S/no	Hosp no	Indication	Outcome	Level of competence	Supervised by	Date	Remarks
1							
2							
3							
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6							
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Minimum = 10

MANUAL REMOVAL OF PLACENTA

S/no	Hosp no	Procedure	Outcome	Level of competence	Supervised by	Date	Remarks
1							
2							
3							
4							
5							

Minimum = 5

REPAIR OF 2ND DEGREE PERINEAL TEAR/ EPISIOTOMY

S/no	Hosp no	Outcome	Level of competence	Supervised by	Date	Remarks
1						
2						
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Minimum = 20

POSTPARTUM & NEWBORN CARE

Normal Postpartum Care

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
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Minimum =25

Neonatal resuscitation

S/no	Hosp no	Procedure	Outcome	Level of competence	Supervised by	Date	Remarks
1							
2							
3							
4							
5							

Minimum = 5

Puerperal Pyrexia

S/no	Hosp no	Procedure	Outcome	Level of competence	Supervised by	Date	Remarks
1							
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10							

Minimum = 10

B. ANTENATAL POSTING

UNCOMPLICATED ANTENATAL CASES

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
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Minimum = 25

COMPLICATED ANTENATAL CASES

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
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3							
4							
5							
6							
7							
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Minimum = 25

FETAL BIOPHYSICAL PROFILE

S/no	Hosp no	Procedure	Outcome	Level of competence	Supervised by	Date	Remarks
1							
2							
3							
4							
5							
6							
7							

Minimum = 7

NORMAL ANTENATAL SCAN

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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Minimum = 25

FETAL PRENATAL SCREENING

S/no	Hosp no	Procedure	Outcome	Level of competence	Supervised by	Date	Remarks
1							
2							
3							
4							
5							
6							
7							

Minimum = 7

C. GYNAECOLOGY POSTING

BENIGN OUTPATIENT GYNAECOLOGY (UNCOMPLICATED GYNAECOLOGY CASES)

S/no	Hosp no	Indication	Outcome	Level of competence	Supervised by	Date	Remarks
1							
2							
3							
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5							
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25							

Minimum = 25

BENIGN OUTPATIENT GYNAECOLOGY (COMPLICATED GYNAECOLOGY CASES)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
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Minimum = 15

BENIGN OUTPATIENT GYNAECOLOGY (MANUAL VACUUM ASPIRATION FOR INCOMPLETE ABORTION)

S/no	Hosp no	Indication	Outcome	Level of competence	Supervised by	Date	Remarks
1							
2							
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Minimum = 25

BASIC REPRODUCTIVE MEDICINE (GENERAL ULTRASOUND SCAN)

S/no	Hosp no	Indication	Outcome	Level of competence	Supervised by	Date	Remarks
1							
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23							
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25							

Minimum = 25

BASIC REPRODUCTIVE MEDICINE (ULTRASOUND FOR FOLLICULAR TRACKING)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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13							
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Minimum = 15

BASIC SURGERY (DIAGNOSTIC LAPAROSCOPY)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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Minimum = 15

BASIC SURGERY (DIAGNOSTIC HYSTEROSCOPY)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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Minimum = 15

BASIC SURGERY (OVARIAN CYSTECTOMY)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
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Minimum = 10

BASIC SURGERY (HYSTEROSCOPIC ADHESIOLYSIS)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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Minimum = 10

BASIC SURGERY (TRANSCERVICAL REMOVAL OF POLYP)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
5							

Minimum = 5

BASIC SURGERY (TRANSCERVICAL REMOVAL OF MYOMA)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
5							

Minimum = 5

BASIC SURGERY (BARTHOLIN'S GLAND MASURPIALIZATON)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
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Minimum = 5

BASIC SURGERY (VULVAL DISEASES)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
5							

Minimum = 5

BASIC SURGERY (PROLAPSE SURGERY)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
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Minimum = 15

BASIC SURGERY (CONE BIOPSY)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
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Minimum = 5

BASIC SURGERY (MYOMECTOMY)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
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Minimum = 15

BASIC SURGERY (ABDOMINAL HYSTERECTOMY)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
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Minimum = 10

BASIC SURGERY (VAGINAL HYSTERECTOMY)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
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Minimum = 5

BASIC SURGERY (LAPARATOMY)

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
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8							
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Minimum = 10

BASIC UROGYNAECOLOGY AND PELVIC FLOOR CASES

S/no		Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1								
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Minimum = 15

BASIC ONCOLOGY

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
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Minimum = 10

C. EMERGENGY OBSTETRICS & GYNAECOLOGY POSTING

EMERGENCY CAESAREAN SECTION

S/no	Hosp no	Indication	Outcome	Level of competence	Supervised by	Date	Remarks
1							
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Minimum = 25

POSTPARTUM HAEMORRHAGE

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
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Minimum = 10

ECLAMPSIA

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
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Minimum = 10

SALPINGECTOMY FOR RUPTURED ECTOPIC

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
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12							
13							
14							
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Minimum = 15

D. GENERAL SURGERY POSTING

LAPARATOMIES

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
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18							
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Minimum = 10

APPENDECTOMY

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
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HERNIORRHAPHY

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
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POST OPERATIVE WOUND CARE

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
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INTESTINAL RE-ANASTOMOSIS

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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15							

CERTIFICATION BY THE HEAD OF DEPARTMENT

DATE COMMENCED _____

DATE ENDED _____

SIGNATURE/STAMP _____

NAME _____

E. UROLOGY POSTING

SUPRAPUBIC CYSTOSTOMY

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
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6							
7							
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REPAIR OF URETERIC INJURIES

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
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13							
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15							

MANAGEMENT OF MALE INFERTILITY

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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URETERIC RE-IMPLANTATION

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
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10							

CERTIFICATION BY THE HEAD OF DEPARTMENT

DATE COMMENCED _____

DATE ENDED _____

SIGNATURE/STAMP _____

NAME _____

F. NEONATOLOGY POSTING

CARDIOPULMONARY RESUSCITATION IN THE NEWBORN

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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EXCHANGE BLOOD TRANSFUSION

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
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5							

MANAGEMENT OF NEONATAL JAUNDICE

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
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5							

CERTIFICATION BY THE HEAD OF DEPARTMENT

DATE COMMENCED _____

DATE ENDED _____

SIGNATURE/STAMP _____

NAME _____

G. ANAESTHESIA POSTING

REGIONAL ANAESTHESIA

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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9							
10							

GENERAL ANAESTHESIA

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							

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5							
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7							
8							
9							
10							

TOTAL INTRAVENOUS ANAESTHESIA

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
5							

Minimum = 5

EPIDURAL ANAESTHESIA

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
5							

Minimum = 5

CERTIFICATION BY THE HEAD OF DEPARTMENT

DATE COMMENCED _____

DATE ENDED _____

SIGNATURE/STAMP _____

NAME _____

H. RADIOLOGY POSTING

ABDOMINAL SCANS

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
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30							

TRANSVAGINAL SCANS

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
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18							
19							
20							

ANOMALY SCANS

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							

3							
4							
5							
6							
7							
8							
9							
10							

DOPPLER SCANS

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
5							
6							
7							
8							
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10							

INTERVENTIONAL RADIOLOGY

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
5							

Minimum = 2

CERTIFICATION BY THE HEAD OF DEPARTMENT

DATE COMMENCED _____

DATE ENDED _____

SIGNATURE/STAMP _____

NAME _____

I. FAMILY PLANNING POSTING

IUCD INSERTIONS

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
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8							
9							
10							

Minimum = 10

JADELLE INSERTION

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							

2							
3							
4							
5							

MIRENA INSERTION

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
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5							

BILATERAL TUBAL LIGATION

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date
1							
2							
3							
4							
5							

VASECTOMY

S/no	Hosp No	Diagnosis	Brief description of case	Outcome	Level of competence	Supervised by	Date

1							
2							

CERTIFICATION BY THE HEAD OF DEPARTMENT OF OBSTETRICS AND GYNAECOLOGY

DATE COMMENCED _____

DATE ENDED _____

SIGNATURE/STAMP _____

NAME _____