# NATIONAL POSTGRADUATE MEDICAL COLLEGE OF NIGERIA



# JUNIOR RESIDENCY LOGBOOK FOR SUBSPECIALTY OF ANATOMICAL PATHOLOGY

# **FACULTY OF PATHOLOGY**

APPROVED BY THE SENATE ON 1<sup>ST</sup> JUNE, 2023

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COLLEGE REGISTRAR



# National Postgraduate Medical College of Nigeria (NPMCN)

FACULTY OF PATHOLOGY
ANATOMICAL PATHOLOGY

# JUNIOR RESIDENCY TRAINING LOGBOOK

# Resident's name: Registration Number: Training Centre:

# TABLE OF CONTENTS Cut off from page 45 (Senior Residency)

# Contents

TABLE OF CONTENTS	3
INTRODUCTION	5
AIM	5
OBJECTIVES	5
JUNIOR RESIDENCY	Error! Bookmark not defined.
SUMMARY OF TRAINING ACTIVITY FOR JUNIOR RESIDENTS IN AN	NATOMICAL PATHOLOGY5
Introductory Laboratory Posting	6
Surgical Pathology	13
Records of Autopsy	18
Records of Autopsy - Records of Museum Techniques	23
Academic activities	24
Records of Seminar Presented/Attended	24
Records of Resident's Seminars/Tutorials	25
Records of Slide Seminars Presented/Attended	26
Records of Clinicopathological activities	28
Quality management activities	32
FORMAL TEST ASSESSMENT	33
JUNIOR RESDENCY ROTATIONS	34
CHEMICAL PATHOLOGY LOG SHEET	34
HAEMATOLOGY ROTATION LOG SHEET	39
MEDICAL MICROBIOLOGY ROTATION LOG SHEET	42
SENIOR RESIDENCY	Error! Bookmark not defined.
SUMMARY OF TRAINING ACTIVITY FOR SENIOR RESIDENTS IN AN <b>not defined.</b>	NATOMICAL PATHOLOGY. Error! Bookmark
Senior Surgical Pathology	Error! Bookmark not defined.
Autopsy records	Error! Bookmark not defined.
Gathering of clinical information from the case notes and resuinvestigations (20 performed)	,
Academic records	Error! Bookmark not defined.
Special Organ Surgical Pathology	Error! Bookmark not defined.
Cytopathology	Error! Bookmark not defined.

Quality management activities	Error! Bookmark not defined
ANATOMICAL PATHOLOGY LECTURES AND PRESENTATIONS C	N PROGRESS OF PART II RESEARCH/
DISERTATION	Error! Bookmark not defined
Assessment of attitude for senior residents	Error! Bookmark not defined

#### INTRODUCTION

The logbook is intended for the resident trainee to document training activities regularly. It is a mandatory requirement of the Faculty of Pathology NPMCN in which all trainees should sincerely and judiciously record all training activities carried out or observed by the trainee.

Each record of activity needs to be endorsed by the assessor at the time of activity and counter-signed by the consultant in-charge.

The logbook will be assessed to determine the progression of the trainee to other stages of the training including eligibility for Fellowship Examinations. Additionally, it is the baseline for inputs for Annual Residents Evaluation Report.

#### **AIM**

To enable the residents learn the basic principles and acquire the desired knowledge, skills and competences in the various aspects of Anatomical Pathology in a measurable way, including Autopsy, Surgical Pathology, Cytopathology, Special Histochemical and Immunohistochemical Techniques, Frozen Section and other aspects of tissue processing through observership and hands-on experience.

#### **OBJECTIVES**

The objectives of the Training Logbook are:

- 1. To provide information about the various procedures and minimum number of cases that are required to be performed in the various stages of training.
- 2. To guide the resident on the training activities to be pursued including grading of the specific activity carried out.
- 3. To monitor the performance of the resident and possible areas for remediation.

#### SUMMARY OF TRAINING ACTIVITY FOR JUNIOR RESIDENTS IN ANATOMICAL PATHOLOGY

Module 1	Task/activity	Observed	Performed
Introductory	Accession and surgical pathology reception procedures	20	75
Laboratory	Surgical cut-up techniques for the various organs	40	75
Techniques	Performance of manual and automated tissue processing- embedding and microtomy	2	2
	Staining of tissue sections	10	10
	Trouble shooting/quality control of tissue sections (identification of technical defects and determination of corrective measures in histology).	20	15
	Performance of histochemical techniques (special stains) in diagnosis	10	2
	Evaluation of histochemical techniques (special stains) in diagnosis	10	10
	Performance of Immunohistochemical Techniques and the use in diagnosis and clinical management	10	-
	Evaluation of Immunohistochemical Techniques and the use in diagnosis and clinical management	10	10
Surgical Pathology (remaining period of Pre-Part 1 training)	Surgical cut-up techniques for the various organs	300	200

Module 2	Task/activity	Observed	Performed
Autopsy	Gathering of clinical/premorbid information from the case	5	20
Pathology	notes/informants (including results of radiological and laboratory		
	investigations)		
	Experience in performing general autopsies including good dissection		20
	techniques and appropriate use of instruments.		
	Full reports of autopsies performed to accompany logbook		20
	Museum Techniques	5	-

Module 3	Task/activity	Attendance	Presentation
Academic/Clinical Presentations	Postgraduate Seminar	35	5
	Resident Seminars/Tutorials	100	15
	(breakfast meeting)		
	Slides seminars	35	20
	Clinicopathological conference	20	5
	Multidisciplinary Team meetings	15	3
	Gross conference	35	5
	Journal Club	15	10
	Guest lecture	6	-
	Autopsy round/review	30	10
Hospital grand round		5	-
	Slide Club	5	=
	Update/Revision Course	1	-

# Introductory Laboratory Posting

Record of Accession/Surgical Pathology Reception Procedures (20 observed, 75 performed)

		u of Accession/Surgical Accession	on/ Reception Pro					
Date	Lab Number		Assessor's Name & Signature		Date Date		Remarks/Diagnosis	Assessor's Name & Signature
		Accessio	n/ Reception Pro	<u>ced</u> i	<u>ures (7</u> 5 <u>)</u>	<u>performe</u>	<b>d</b> )	
Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature		Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature

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Date	Lab Number	Accession/ Rece	Assessor's	cedi	ures (75 p	Derforme Lab Number	Remarks/Diagnosis	Assessor's
Date	Lab Number	Remarks/Diagnosis	Name &		Date	Lab Number	Remarks/Diagnosis	Name &
			Signature					Signature
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Records of Surgical Cut-up Techniques for the various organs (40 observed, 75 performed)

			<b>Cut-up Procedu</b>	res	(40 observ	ved)		
Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature		Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature

		Cut-up	Procedur	es (	75 perforr	ned)		
Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature		Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature
			Signature					Jigilatare
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Date	Lab Number	Cut-up	Procedur  Assessor's	es ('	75 perforn	ned)	Remarks/Diagnosis	Assessor's
Date	Lab Number	Cut-up Remarks/Diagnosis	Procedur Assessor's Name & Signature	res ('	75 perforn	ned) Lab Number	Remarks/Diagnosis	Assessor's Name & Signature
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	res ('	75 perforr	ned) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	res ('	75 perforr	ned) Lab Number	Remarks/Diagnosis	Name &
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Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	res ('	75 perforr	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	res ("	75 perforr	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	res ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	res ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
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Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
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Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Cut-up Remarks/Diagnosis	Assessor's Name &	es ('	75 perfort Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Remarks/Diagnosis	Assessor's Name &	es ('	75 perforr Date	med) Lab Number	Remarks/Diagnosis	Name &
Date	Lab Number	Remarks/Diagnosis  Cut-up  Remarks/Diagnosis	Assessor's Name &	es ('	75 perform Date	med) Lab Number	Remarks/Diagnosis	Name &

Date	Lab	Number	Rei	marks/Diagnosis	Grade	e of	Assesso	r's		ate	Lab Number	 	Grade of	f Assessor's
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	1		M	anual and automated tis	sue p	roce	essing 	-em	be	dding a	nd micro	otomy (2 performed	d) 	
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						<u> </u>	<u> </u>							
	1			Haematoxylene	/Eosii	n Sta	aining 	of '	Tis	sue Se	ctions (10	observed)	1	
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	<u> </u>													
	1			Haematoxylene/l	Eosin	Sta	ining	of T	iss	ue Sec	tions (10	performed)	1	
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Т	rou	ıble sl	100	ting/quality control of ti correcti	ssue s	secti easu	ons (i	den his	tifi tol	cation ogy) (2	of techni 0 observe	cal defects and dete ed)	rmina	tion of

1	rouble sl	nooting/quality control of ti	ssue secti	ions (iden	tifi	ication	of techn	ical defects and deter	minati	on of
				es in hist						
			1							
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			d tasks	Signature					perfor med	Signature
									tasks	
		Performance of histochen	nical tech	niques (s	pec	cial sta	ins) in di	agnosis (10 observed	)	
		Performance of histochem	ical tech	nianes (ci	nec	ial stai	ing) in di	agnosis (2 parformad	)	
		1 cromance of instochen		inques (s)		lai sta		agnosis (2 performed	,	
		<b>Evaluation of histochemi</b>	ical techn	iques (sp	eci	al staiı	ıs) in dia	gnosis (10 observed)		
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	I I	Evaluation of histochemic	al techni	unes (spe	cio	l stoin	c) in diec	mosis (10 nerformed	\	<u> </u>
		L'aluation of instochemic	<u> </u>	ques (spe	LIA	ı stam	o, in uiaş	mosis (10 periorineu	,	
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		e of Immunohistochemical								

Eva	aluation	of Immunohistochemistry S	lides and	d the use	in (	diagno	sis and o	clinical management	(10 obs	erved)
Eva	luation	of Immunohistochemistry Sl	ides and	the use in	n d	iagnos	is and cl	inical management (	10 perfo	ormed)

# Surgical Pathology

(Remaining period of Pre-Part 1 training)
Surgical cut-up techniques for the various organs

Cut-up Procedures (300 observed)  Date Lab Number Remarks/Diagnosis Assessor's Date Lab Number Remarks/Diagnosis Assessor's								
Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature		Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature
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								-

Cut-up Procedures (300 observed)									
Date	Lab Number	Remarks/Diagnosis	Ass	sessor's Name & Signature	3 (3	Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature

Cut-up Procedures (300 observed)								
Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature		Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature
			-					
			<del></del>					

		Cut-up	Procedure	s (20	00 perfori	ned)			
Date	Lab Number	Remarks/Diagnosis	Procedures Assessor's Name & Signature		Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature	
								1	
						1			
						1			
						1			
							-		
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						1			

		Surgical cut-	Procedure: Assessor's	s (20	00 perforr	ned)		
Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature		Date	Lab Number	Remarks/Diagnosis	Assessor's Name & Signature
								<u> </u>

#### **Records of Autopsy**

Gathering of clinical/premorbid information from the case notes/informants (including results of relevant clinical and laboratory investigations) (5 observed, 20 performed)

G	Gathering of clinical/premorbid information from the case notes/informants (including results of relevant clinical and laboratory investigations) (5 observed)							
S/No.	PM No.	Cause of Death (fill in recommended WHO format)	Assessor's Name and Signature					
1.		1a						
		1b						
		1c						
		2						
2.		1a						
		1b						
		1c						
		2						
3.		1a						
		1b						
		1c						
		2						
4.		1a						
		1b						
		1c						
		2						
5.		1a						
		1b						
		1c						
		2						

Ga	thering of	clinical/premorbid information from the case notes/informants (laboratory investigations) (20 performe	(including results of red)	elevar	nt clinical and
S/No.	PM No.	Cause of Death (fill in recommended WHO format)		ade	Assessor's Name and Signature
1.		1a			
		1b			
		1c			
		2			
2.		1a			
		1b			
		1c			
		2			
3.		1a			
		1b			
		1c			
		2			
4.		1a			
		1b			
		1c			
		2			
5.		1a			
		1b			
		1c			
		2			
6.		1a			
		1b			
		1c			
		2			
7.		1a			

	16.	1	<u> </u>
	1b		
	1c		
	2		
8.	1a		
	1b		
	1c		
	2		
9.	1a		
	1b		
	1c		
	2		
10.	1a		
	1b		
	1c		
	2		
11.	1a		
	1b		
	1c		
	2		
12.	1a		
	1b		
	1c		
	2		
13.	1a		
	1b		
	1c		
	2	1	
14.	1a		
	1b		
	1c		
	2		
15.	1a		
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	2	1	
19.	1a		
	1b	1	
	1c	1	
	2	1	
20.	1a		
	1b	1	
	1c	1	
	2	1	
	nt B- Very good, C- Good, D-Fair, F-Poor	<u> </u>	l

Grading: A-Excellent, B- Very good, C- Good, D-Fair, E-Poor

Records of Experience in performing general autopsies including good dissection techniques and appropriate use of instruments (5 observed, 20 performed)

Experience in performing general autopsies including good dissection techniques (5 observed)							
S/No.	PM No.	Cause of Death (fill in recommended WHO format)	Assessor's Name and Signature				
1.		1a					
		1b					
		1c					
		2					
2.		1a					
		1b					
		1c					
		2					
3.		1a					
		1b					
		1c					
		2					
4.		1a					
		1b					
		1c					
		2					
5.		1a					
		1b					
		1c					
		2					

Experience in performing general autopsies including good dissection techniques (20 performed)								
S/No. PM N		Grade	Assessor's Name and Signature					
1.	1a							
	1b							
	1c							
	2							
2.	1a							
	1b							
	1c							
	2							
3.	1a							
	1b							
	1c							
	2							
4.	1a							
	1b							
	1c							
	2							
5.	1a							
	1b							
	1c							
	2							
6.	1a							
	1b							
	1c							
	2							
7.	1a							
	1b							
	1c							
	2							
8.	1a							
	1b							

	1c		
	2		
9.	1a		
	1b		
	1c		
	2		
10.	1a		
	1b		
	1c	1	
	2	1	
11.	1a		
	1b		
	1c		
	2		
12.	1a		
	1b	1	
	1c	1	
	2	1	
13.	1a		
	1b	1	
	1c	_	
	2	_	
14.	1a		
	1b	1	
	1c	_	
	2	1	
15.	1a	_	
	1b		
	1c		
	2	1	
16.	1a		
	1b	-	
	1c	1	
	2	1	
17.	1a		
	1b	_	
	1c	1	
	2	1	
18.	la		
	1b	1	
	1c	1	
	2	1	
19.	la		
	1b	1	
	1c	1	
	2	1	
20.	la		
	1b	1	
	1c	1	
	2	1	
Cuadina	A-Excellent R- Very good C- Good D-Egir F-Poor		l

Grading: A-Excellent, B- Very good, C- Good, D-Fair, E-Poor

	Records of full autopsies performed and reported to accompany	logbook (0 observed, 20 perform	ned)
S/No. PM	No. Cause of Death (fill in recommended WHO format)	Grade	Assessor's Name and Signature
1.	1a		Signature
	1b		
	1c		
	2		
1.	1a		
	1b		
	1c		
	2		
2.	1a		
	1b		
	1c		
	2		
3.	1a		
	1b		
	1c 2		
4.	1a		
٦.	1b		
	10 1c		
	2		
5.	1a		
5.	1b		
	1c		
	2		
6.	la		
	1b		
	1c		
	2		
7.	1a		
	1b		
	1c		
	2		
8.	1a		
	1b		
	1c		
	2		
9.	1a		
	1b		
	1c		
	2		
10.	1a		
	1b		
	1c		
	2		
11.	1a		
	1b		
	1c		
12	2		
12.	la		
	1b		
	1c		
12	2		
13.	1a		
	1b 1c		
	2		
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1b			
1c   2   1a   1b     1c   2     2	14.	1a	
15.		1b	
15.		1c	
1b   1c   2     18     18     19   19     19		2	
1c       2       16.     1a       1b     1c       2     1b       1c     2       18.     1a       1b     1c       1c     2	15.	1a	
16.		1b	
16.		1c	
1b   1c   2     1a     1b       1c		2	
17.	16.	1a	
17.		1b	
17.		1c	
1b 1c 2  18.		2	
18.	17.	1a	
18.		1b	
18.		1c	
1b 1c 2		2	
1c 2	18.	1a	
2		1b	
19 19		2	
	19.	1a	
1b		1b	
1c		1c	
2		2	

Grading: A-Excellent, B- Very good, C- Good, D-Fair, E-Poor

Records of Autopsy - Records of Museum Techniques

# (Museum pot making) (5 observed, 0 performed)

S/No.	Surgical/Post	Description of potted organ with diagnosis	Assessor's Name and
	Mortem No.		Signature
1.			
2.			
3.			
4.			
5.			
6.			
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18.			
19.			
20.			

#### Academic activities

# Records of Seminar Presented/Attended

(35 observed, 5 presented)

	Records of Postgraduate Seminar Presented (5 required)					
S/N o	Date	Торіс	Grade (for present topics)	Assessor's Name & Signature		
1.			topics)	- 6		
2.						
3.						
4.						
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7.						
8.						
		Records of Postgraduate Seminar Attended (35 required)				
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#### Records of Resident's Seminars/Tutorials

(breakfast meetings) (100 observed, 15 performed)

	Resident's Seminars/Tutorials (breakfast meetings) Presented (15 required)					
S/No	Date	Торіс	Grade (for present topics)	Assessor's Name & Signature		
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15. 16.						
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	Re	ecords of Resident's Seminars/Tutorials (breakfast meetings) Attended (100	required)	T		
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# Records of Slide Seminars Presented/Attended (35 observed, 20 presented)

	Records of Slide Seminars Presented (20 required)				
S/No	Date	Topic/Diagnosis/Description	Grade (for	Assessor's Name & Signature	

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	Records of Slide Seminars Attended (35 required)		
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# Records of Clinicopathological activities

S/No	Date	Topic/Diagnosis/Description	Indicate Presented or Attended	Grade (for present topics)	Assessor's Name & Signature
		Records of Clinicopathological conf	erence (20 observed, 5	performed)	
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		Multidisciplinary Team meeting	gs (15 observed, 3 perf	ormed)	
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	Gross conference (35 obs	servea, 5 performea)	
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	Journal Club (15 obser	ved, 10 performed)	
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	Guest lecture (6 observe	ed, 0 performed)	
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	Autopsy review (30 observ	ved, 10 performed)	·
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	Hospital grand round (5 o	bserved, 0 performed)	
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	Slide Club (5 observe	d, 0 performed)	
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5.			
	Update/Revision Course (1 o	bserved, 0 performed)	
1.			
2.			

# Quality management activities

# (To be assessed before each exam stage)

YEAR IN TRAINING	Trainee level		
Please comment on whether these aspects of the trainee's performa	ance are as expected for the stage	of training	
SKILLS/COMPETENCIES		YES	NO
SOP development and review			
Process Workflow/Test Algorithm development			
Performance and Interpretation of Quality control			
Development/review of audit tool/checklist for conduct of Laboratory	<i>r</i> audit		
Performance of Laboratory Audit			
Preparation of schedule/roster for bench duties or description of duti	es		
Conduct of a customer satisfaction survey			
Participation in preparation for accreditation			
Assessment of personnel competency			
Development of SOP/protocol for Equipment use/maintenance/valida	ation		
Conduct lab safety audit/development of SOP for safety in the lab			
Occurrence management			
Review of records/archiving system of the laboratory			
Evaluation of inventory management system			
Please comment on other relevant aspects, especially on aspects for i	mprovement		·
NAME OF ASSESSOR		SIGNATU	IRE
NAME OF HOSPITAL/CLINIC/WARD		DATE	

Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail - E

#### FORMAL TEST ASSESSMENT

ACTIVITY		DATE		SCORE	
PRE-TEST (at the start of residency training)					
POST TEST (before proceeding	g on rotations)				
	Name		Sig	gnature	Date
Chief resident					
Academic coordinator					
Head of Department					
HOD Remarks					

#### JUNIOR RESDENCY ROTATIONS

#### CHEMICAL PATHOLOGY LOG SHEET

Junior residents in other specialties of Pathology rotating for 3 months in Chemical Pathology will be introduced to the department, expected to understand the theoretical bases, attend and make seminar presentations, observe, as well as perform some activities as applicable. Stated below are the minimum numbers expected to be assessed for completion of the posting.

#### 1. GENERAL CHEMICAL PATHOLOGY LABORATORY ACTIVITY

Activity	Duration	Exposure needed/ Minimum No of Samples Handled	Supervisor Comments(s)	Grade (A – E, or NA)	Supervising Consultant's Signature & Date
Introduction to workings of Chemical Pathology Department		NA			
Laboratory Reception Workflow	2 weeks	20			
Sample/Specimen Collection		20			
Completed Result Management and Dispatch		20			
Emergency Laboratory Requests Handling		20			
Clinicopathological Review and Interpretation (General Tests)	12 weeks	40			
Clinicopathological Review and Interpretation (Specialized Tests/Hormones)		10			

<sup>\*</sup> NA – Not Applicable. Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail – E

#### 2. CHEMICAL PATHOLOGY SEMINAR PRESENTATIONS

SECTIONS	Attend	Present	SEMINAR TOPIC	Attended/ Presented	Grade (A – E, or NA)	Supervising Consultant's Signature & Date
Principles of Laboratory Medicine	2	1				
Analytical Techniques and	2	1				
Instrumentati on						

Analytes	2	1		
Molecular Diagnostics and Genetics	2	1		
and Genetics				
Pathophysiol ogy	2	1		

<sup>\*</sup> NA – Not Applicable. Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail – E

3. CHEMICAL PATHOLOGY WET PRACTICAL (CALIBRATION CURVES)

Proficiency in developing Calibration Curves	Observe	Perform	WET PRACTICAL (CALIBRATION CURVES) WET PRACTICAL SESSION	Observed/ Performed	Grade (A – E, or NA)	Supervising Consultant's Signature & Date
One-Step Endpoint Assay Calibration Curves eg. Glucose	2	2				
Two Steps Endpoint assay Calibration Curves eg. Creatinine	2	1				
Kinetic Assay Calibration Curves e.g. creatinine	2	1				
ELISA Based Assay Calibration Curves	1	1				

\* NA – Not Applicable. Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail - E

4. CHEMICAL PATHOLOGY WET PRACTICAL (ASSAYS ESTIMATION)

Assays Estimatio n	Observ e	Perfor m	WET PRACTICAL SESSION	Observed/ Performed	Grade (A – E, or NA)	Supervising Consultant's Signature & Date
Glucose	2	2				

Creatinin e	2	1		
Urea	2	1		
Calcium	1	1		
Total Cholester ol	1	1		
Total Protein	1	1		

<sup>\*</sup> NA – Not Applicable. Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail – E

#### 5. CHEMICAL PATHOLOGY LABORATORY BENCH WORK

Bench	Observe	Perform	BENCH WORK SESSION	Observ ed/ Perfor med	Grade (A – E, or NA)	Supervising Consultant's Signature & Date
Glucose/OGTT/	4	4				
HbA1c	4	+ 4				
Electrolytes/Ur ea/Creatinine	2	2				
Lipid profile	2	NA				
Liver enzymes	2	NA				

Cardiac	2	NA		
Markers				
CSF Analysis	2	NA		
Haemoglobin	2	NA		
Quantitation				
Dynamic Function Tests	1	NYA		
(OGTT, Water Deprivation	1	NA		
Test,				
Dexamethasone				
Suppression				
Test, etc)				

<sup>\*</sup> NA – Not Applicable. Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail – E

# 6. CHEMICAL PATHOLOGY LABORATORY BENCH CALL

Bench	Obser ve	Perfor m	BENCH CALL SESSION	Observe d/ Perform ed	Grade (A – E, or NA)	Supervising Consultant's Signature & Date
Glucose/OG TT/ HbA1c	4	4				
Electrolytes/ Urea/Creatin ine	2	2				
Lipid profile	2	NA				
Liver Enzymes	2	NA				
Bilirubin	2	NA				
Cardiac Markers	2	NA				
CSF Analysis	2	NA				

Haemoglobi	2	NA		
n Quantitation				

<sup>\*</sup> NA – Not Applicable. Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail – E

# 7. CHEMICAL PATHOLOGY WEIGHT & OBESITY/ NUTRITION (METABOLIC) CLINICS ACTIVITIES & JOURNAL CLUB/ ARTICLE REVIEW/ CASE PRESENTATIONS

Activity	Attend	Present	ARTICLE TITLE/CASE	Attended/ Presented	Grade (A – E, or NA)	Supervising Consultant's Signature & Date
Journal Club/Article Review	1	2				
Metabolic Clinic	10	NA				

<sup>\*</sup> NA – Not Applicable. Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail – E

#### **FORMAL TEST ASSESSMENT**

ACTIVITY	DATE	SCORE			
PRE-TEST					
POST TEST					
Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail - E					

NAME, SIGNATURE & DATE OF RESIDENCY TRAINING COORDINATOR
NAME, SIGNATURE & DATE OF HEAD OF DEPARTMENT

#### HAEMATOLOGY ROTATION LOG SHEET

For residents in other specialties of Pathology rotating for 3 months in haematology, they will be expected to carry out the following activities as enumerated below with an understanding of the theoretical basis. The numbers stated below are the minimum numbers expected to be assessed for completion of the posting.

#### LIST OF PROCEDURES/ ACTIVITIES

S/N	SPECIFIC LABORATORY PROCEDURE	Observed	Performed
	Specimen reception and handling (10)	5	5
	Preparation & Staining of peripheral blood smears	5	15
	(20)		
	Preparation & Staining of Bone marrow smears	15	5
	(20)		
	Manual Leucocyte count (20)	14	6
	Manual platelet count (20)	14	6
	Automated full blood count (10)	5	5
	Identification and interpretation of	5	5
	haemoglobinopathy slides (10)		
	ABO and RH grouping (15)	5	10
	Cross matching (4)	3	1
	Seminar presentation (3)		3
	Case Presentation (5)		5
	Haemaocrit estimation (20)	10	10
	Prothrombin time (8)	2	6
	Activated partial thromboplastin time (8)	2	6
	Bone marrow aspiration and Trephine biopsy (2)	1	1
	Erythrocyte Sedimentation rate (5)	3	2

Procedure/ Activity signing sheet

	SPECIFIC LABORATORY	GRADE	Observed/	DATE	ASSESSORS
	PROCEDURE / ACTIVITY	GRUDE	Performed	Dille	NAME &
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#### FORMAL TEST ASSESSMENT

ACTIVITY	DATE	SCORE
PRE-TEST		
POST TEST		

Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail - E

Chief resident name/sign/date
Academic coordinator name/sign/date
Head of Department name/sign/date
HOD Remarks

<sup>\*</sup> NA – Not Applicable. Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail – E

#### MEDICAL MICROBIOLOGY ROTATION LOG SHEET

This section will be used to assess the Anatomical Pathology junior resident during the 3-month rotation in Microbiology. It details what the person is expected to do as well as the grading system to be carried out.

#### **PRACTICAL ASSESSMENT**

	ASITOLOGY SECTIO				Trair	nee level	·····		
SPEC	IFIC LABORATORY	PROCEDURE;	THIN BLOOD	FILM – PREPARATION, EX	AMINATI	ON AND REPORTI	NG		
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRAD E	ASSESSORS NAME/ SIGNATURE/DATE
1.					6.				
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SPEC	IFIC LABORATORY	PROCEDURE;	THICK BLOOK	FILM - PREPARATION, EX	KAMINAT	ION AND REPORT	NG		
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRAD E	ASSESSORS NAME/ SIGNATURE/DATE
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2.					7.				
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SPEC	IFIC LABORATORY	PROCEDURE;	URINE WET I	MOUNT - PREPARATION,	EXAMINA	TION AND REPOR	TING	I	I .
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRAD E	ASSESSORS NAME/ SIGNATURE/DATE
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SPEC	IFIC LABORATORY	PROCEDURE;	STOOL WET	MOUNT - PREPARATION,	EXAMINA	TION AND REPOR	TING	1	Į.
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SPEC	IFIC LABORATORY	PROCEDURE;	CONCENTRA	TION TECHNIQUES STOOL	AND UR	INE	l	•	•
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FIC LABORATORY PROCEDURE; OTHERS (ZN, Fluorescent)), Culture – liquid, solid, automated, Molecular tion/Sensitivity

ASSESSORS NAME/

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Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail - E

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Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail - E

#### **ACADEMIC ASSESSMENT**

	RTMENT	DURATION			
5/N	SEMINAR PRESENTATION/DATE	GRADE	ASSESSORS NAME & SIGNATURE/DATE		
	CLINICAL ACTIVITIES E.G. PRESENTATIONS/DATE				

Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail – E

# **FORMAL TEST ASSESSMENT**

ACTIVITY	DATE	SCORE
PRE-TEST		
POST TEST		

Grade level could be either Excellent - A, Good - B, Average -C, Borderline - D, Fail - E

Chief resident name/sign/date
Academic coordinator name/sign/date
Head of Department name/sign/date
HOD Remarks

		GRADES							
ATTRIBUTE	A	В	С	D	Е				
Punctuality									
Ability to work unsupervised									
Zeal to learn									
Initiative									
Interpersonal relationship									
Attitude to Work									
Sense of responsibility									
Reliability									