

NATIONAL POSTGRADUATE MEDICAL COLLEGE OF NIGERIA



**SENIOR RESIDENCY LOGBOOK FOR SUBSPECIALTY  
OF MEDICAL MICROBIOLOGY AND PARASITOLOGY**

**FACULTY OF PATHOLOGY**

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

A handwritten signature in blue ink, appearing to be 'F. A. Arogundade', is centered below the approval text.

**DR F. A. AROGUNDADE, MD FMCP  
COLLEGE REGISTRAR**



**National Postgraduate Medical College of Nigeria  
(NPMCN)**

**FACULTY OF PATHOLOGY**

**Medical Microbiology and Parasitology**

**SENIOR RESIDENCY TRAINING  
LOGBOOK**

**NAME:** \_\_\_\_\_ **AF Number** \_\_\_\_\_

**INSTITUTION:** \_\_\_\_\_

**PERIOD COVERED: From** \_\_\_\_\_ **To** \_\_\_\_\_

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# TRAINING LOG-BOOK FOR SENIOR RESIDENCY TRAINING PROGRAMME IN PATHOLOGY BY THE NATIONAL POSTGRADUATE MEDICAL COLLEGE OF NIGERIA

## SECTION ONE: INTRODUCTION

### SCOPE OF THIS MANUAL

This logbook is designed to provide a record of the training received by residents admitted into the residency training programme in Medical Microbiology of the Faculty of Pathology during the whole of their 5-year minimum training period.

It is intended to assist both the resident and the supervising consultant in considering the whole range of skills and competencies required of a newly appointed Consultant Pathologist in any hospital or laboratory. In view of the diverse nature of pathology and the required expertise of a pathology consultant, the subject, the list of procedures and activities here is not all inclusive but is meant to provide guidance on what is expected to be covered during the training process and period

This logbook is to be submitted to the College during the process of application for the fellowship examinations, and serves as a screening tool to determine eligibility to sit for the examinations or otherwise. In addition to this logbook, the resident needs to keep a training portfolio which will be presented during the fellowship examinations and will also be assessed.

There is a comprehensive description of the training programme in Pathology available as a separate document known as the Pathology Training Handbook and curriculum.

### LABORATORY INFORMATION SHEET (CHECK LIST)

Every trainee is expected to go through this section with the trainer before going into the Laboratory. This is to educate the trainee on the workings of the Laboratory and safety precautions that are observed in the laboratory. The trainee should:

- Participate in the laboratory safety induction session organized by the training coordinator
- Read and discuss the laboratory safety manual with the trainer.
- Be vaccinated for hepatitis B and have shown evidence of such.
- Wear appropriate protective clothing (ward coat, gloves, mask, goggles) and always remove it before leaving the laboratory.
- Wash his/her hands or use alcohol-based hand rub (ABHR) after all procedures in the laboratory.
- Cover all cuts with plaster before entering the laboratory.
- Not eat, drink, smoke, undertake made-up or rub or wipe my face with my hands while in the laboratory.
- Be careful when handling blood and other body fluids to prevent transmission of infections.
- Report all needle pricks in the Laboratory and immediately report to the infectious clinic or staff clinic or infection control unit to get PEP prophylaxis.
- Set up my workspace and ensure correct posture and lifting techniques to avoid strain and injury.
- Clean up myself after each practical session.
- Have read, discussed with the trainer and fully understand the Laboratory rules and regulations.
- Have been given an opportunity to ask questions and is satisfied with the responses.

Trainee name (print)..... Signature.....

Training coordinator/ Head of Department: Name (print).....

Signature..... Date: .....

## SECTION TWO: COMPETENCY AND SKILLS

Areas in which competency and skills are required during the training include but not limited to the following: Laboratory skills, Seminars/Tutorials presentations, appropriate clinical skills, Quality Management System Activities, Infection prevention and control activities, antimicrobial stewardship practices, public health activities, teaching skills, research, management and academic abilities.

The trainees should note that the number of tests stipulated for each section is the minimum number expected and they are expected to do more than this number to improve proficiency and skill.

It is obligatory for the trainers to give trainee feedback immediately after the procedure is carried out or after formative assessment has been carried out.

It is important residents fill out their level of training and year carefully when completing the log book.

### GRADING

Grading is from A-E.

A = Excellent  $\geq 70\%$ .

B = Good 60 - 69%.

C= average 50 - 59%.

D= Borderline 40 - 49%

E = Fail 39 and below

### SEMINAR/TUTORIALS REQUIREMENTS –

Minimum of 12 should be presented per year of training

### CLINICAL SKILLS REQUIREMENTS

Infections to be noted: blood stream, cardiovascular, respiratory, bone/joint, wound/soft tissue, gastrointestinal, central nervous system, intra-abdominal, urinary tract, burns/plastics, sexually transmitted infections, infections in pregnancy, in the ICU, in neonates etc.

History taking and clinical examinations, making a clinical diagnosis, collection of appropriate specimens, correlation of clinical and laboratory findings, confirmation of diagnosis, appropriate management of cases with particular emphasis on antimicrobial therapy are where the emphases should be placed.

During the period of senior residency training period, each resident is expected to present a minimum of 4 clinical cases per year making a total minimum of 12 clinical case presentations during the programme.

Residents must take clinical and bench calls in order to acquire skills, competencies and experience in handling microbiological emergencies during call hours

### INFECTION PREVENTION AND CONTROL/ANTIMICROBIAL STEWARDSHIP/OUTBREAK INVESTIGATION REQUIREMENTS

Areas to be covered include surveillance for healthcare associated infections, participation in IPC team and committee activities, risk assessment and implementation of standard and additional precautions as necessary, training and education on IPC activities including knowledge of health and safety at work. Antimicrobial stewardship programmes are also a focus of the training and residents are expected to participate actively in such activities. During the period of senior residency, residents should partake actively in a minimum of 3 cases during the programme.

### RESEARCH AND ACADEMIC SKILLS REQUIREMENTS

Especially during the senior residency period, good knowledge of data management skills, including the statistical evaluation of data is important. The necessity to develop skills in independent and team-

driven problem-solving while having good experience in research and developmental activities and familiarity with the use of spreadsheets, databases and statistical packages. They are also encouraged to present abstracts at conferences. As a future trainer, good oral and written presentation skills are also important. The need to acquire a life-long habit of reading and learning is also crucial. Residents should be involved in Journal review and publication critiques.

### QUALITY MANAGEMENT SYSTEMS REQUIREMENTS

The quality principles (i. e. the 12 quality system essentials) are organized under three main categories: quality infrastructure, laboratory operations, and quality assurance and continual improvement and the resident is trained to be familiar with theory and practice in these areas. The aim is to acquire the roles and responsibilities involved in establishing and sustaining QMS activities for microbiology laboratory staff, laboratory management personnel, and the institution's leadership.

### MANAGEMENT SKILLS REQUIREMENTS

The training should provide opportunities for the development of management and communication skills, including experience, under supervision, in formulating departmental policies and applying leadership and team-work skills necessary to implement them, report writing and presentation, preparing budgets and knowledge of due process in contracting procedures among others.

### PRACTICAL LABORATORY SKILLS REQUIREMENTS

Residents during their training will be expected to understand the theoretical basis as well as perform the following procedures.

Find in the table below the minimum number for the different modules in Medical Microbiology.

The indicated number refers to the minimum number of passable procedures to be performed.

<b>Parasitology</b>		
<b>Specimen</b>	<b>Procedure</b>	<b>Minimum no to process</b>
		<b>Core resident</b>
Blood	Thin film	20
Blood	Thick film	20
Urine	Wet prep	30
Stool	Wet prep/ Staining	20
Others e. g. HVS	Wet prep/Staining	10
Stool & Urine	Concentration method	5
Skin snip	Microscopy	2
Ectoparasite	Identification	2

<b>Bacteriology</b>		
<b>Specimen</b>	<b>Procedure</b>	<b>Minimum no to process</b>
Urine	M/C/S	30
Stool	M/C/S	20
CSF	M/C/S	5
Blood	M/C/S	10
Swabs	M/C/S	10
Sputum	M/C/S	10
Aspirates	M/C/S	10
	Media preparation	10
	Disinfection/Sterilisation	3
	Antimicrobial assay	10

<b>Mycobacteriology</b>		
<b>Specimen</b>	<b>Procedure</b>	<b>Minimum no to process</b>
Sputum	Microscopy (ZN, Fluorescent))	30
	Culture – liquid, solid, automated	3
	Molecular detection/Sensitivity	10
Others	Molecular detection/Sensitivity	20
	M/C/S	5

<b>Mycology</b>		
<b>Specimen</b>	<b>Procedure</b>	<b>Minimum no to process</b>
Skin/nail scrapings	M/C/S	10
Tissue	M/C/S	5
Fluids	M/C/S	3

<b>Immunology/Virology</b>	
<b>Procedure</b>	<b>Minimum no to process</b>
Rapid test kits – different tests e. g. HIV, pregnancy, malaria, hepatitis etc	30
Agglutination tests e. g. RPR, TPHA	10
ELISA test (using reader and washer)	5
Immunoblotting techniques	3
Conventional PCR	5
Real time PCR	5
Phase contrast/Darkfield/Fluorescent microscopy	2



# SECTION THREE: ASSESSMENT LOGS

## LABORATORY SKILLS AND COMPETENCIES - LIST OF PROCEDURES PERFORMED

PARASITOLOGY SECTION					Trainee level .....				
<b>SPECIFIC LABORATORY PROCEDURE; THIN BLOOD FILM – PREPARATION, EXAMINATION AND REPORTING</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
1.					12.				
2.					13.				
3.					14.				
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5.					16.				
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11.					22.				
<b>SPECIFIC LABORATORY PROCEDURE; THICK BLOOD FILM - PREPARATION, EXAMINATION AND REPORTING</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
1.					12.				
2.					13.				
3.					14.				
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6.					17.				
7.					18.				
8.					19.				
9.					20.				

<b>10.</b>					<b>21.</b>				
<b>11.</b>					<b>22.</b>				

**SPECIFIC LABORATORY PROCEDURE; URINE WET MOUNT – PREPARATION, EXAMINATION AND REPORTING**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>12.</b>				
<b>2.</b>					<b>13.</b>				
<b>3.</b>					<b>14.</b>				
<b>4.</b>					<b>15.</b>				
<b>5.</b>					<b>16.</b>				
<b>6.</b>					<b>17.</b>				
<b>7.</b>					<b>18.</b>				
<b>8.</b>					<b>19.</b>				
<b>9.</b>					<b>20.</b>				
<b>10.</b>					<b>21.</b>				
<b>11.</b>					<b>22.</b>				

**SPECIFIC LABORATORY PROCEDURE; STOOL WET MOUNT – PREPARATION, EXAMINATION AND REPORTING**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>12.</b>				
<b>2.</b>					<b>13.</b>				
<b>3.</b>					<b>14.</b>				
<b>4.</b>					<b>15.</b>				
<b>5.</b>					<b>16.</b>				
<b>6.</b>					<b>17.</b>				
<b>7.</b>					<b>18.</b>				
<b>8.</b>					<b>19.</b>				
<b>9.</b>					<b>20.</b>				
<b>10.</b>					<b>21.</b>				

<b>11.</b>					<b>22.</b>				
<b>SPECIFIC LABORATORY PROCEDURE; CONCENTRATION TECHNIQUES ON STOOL AND URINE</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>6.</b>				
<b>2.</b>					<b>7.</b>				
<b>3.</b>					<b>8.</b>				
<b>4.</b>					<b>9.</b>				
<b>5.</b>					<b>10.</b>				
<b>SPECIFIC LABORATORY PROCEDURE; EXAMINATION AND IDENTIFICATION OF ECTOPARASITES</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>4.</b>				
<b>2.</b>					<b>5.</b>				
<b>3.</b>					<b>6.</b>				
<b>SPECIFIC LABORATORY PROCEDURE; EXAMINATION OF SKIN SNIPS</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>3.</b>				
<b>2.</b>					<b>4.</b>				

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

GENERAL MICROBIOLOGY SECTION					Trainee level .....				
<b>SPECIFIC LABORATORY PROCEDURE; MEDIA PREPARATION</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>6.</b>				
<b>2.</b>					<b>7.</b>				
<b>3.</b>					<b>8.</b>				
<b>4.</b>					<b>9.</b>				

<b>5.</b>					<b>10.</b>				
<b>SPECIFIC LABORATORY PROCEDURE; DISINFECTION/STERILISATION</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>6.</b>				
<b>2.</b>					<b>7.</b>				
<b>3.</b>					<b>8.</b>				
<b>4.</b>					<b>9.</b>				
<b>5.</b>					<b>10.</b>				
<b>SPECIFIC LABORATORY PROCEDURE; ANTIMICROBIAL ASSAYS – PREPARATION AND INTERPRETATION</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>6.</b>				
<b>2.</b>					<b>7.</b>				
<b>3.</b>					<b>8.</b>				
<b>4.</b>					<b>9.</b>				
<b>5.</b>					<b>10.</b>				

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

<b>BACTERIOLOGY SECTION</b>					Trainee level .....				
<b>SPECIFIC LABORATORY PROCEDURE; URINE MICROSCOPY, CULTURE, IDENTIFICATION AND SUSCEPTIBILITY</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>17.</b>				
<b>2.</b>					<b>18.</b>				
<b>3.</b>					<b>19.</b>				
<b>4.</b>					<b>20.</b>				
<b>5.</b>					<b>21.</b>				
<b>6.</b>					<b>22.</b>				
<b>7.</b>					<b>23.</b>				

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15.					31.				
16.					32.				

**SPECIFIC LABORATORY PROCEDURE; STOOL MICROSCOPY, CULTURE, IDENTIFICATION AND SUSCEPTIBILITY**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
1.					12.				
2.					13.				
3.					14.				
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5.					16.				
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10.					21.				
11.					22.				

**SPECIFIC LABORATORY PROCEDURE; BLOOD CULTURE (manual, automated)/IDENTIFICATION AND SUSCEPTIBILITY (conventional, automated)**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
1.					17.				
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16.					32.				

**SPECIFIC LABORATORY PROCEDURE; SWAB MCS**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
1.					7.				
2.					8.				
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5.					11.				
6.					12.				

**SPECIFIC LABORATORY PROCEDURE; ASPIRATE MICROSCOPY, CULTURE, IDENTIFICATION, SUSCEPTIBILITY**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
1.					7.				
2.					8.				
3.					9.				
4.					10.				

5.					11.				
6.					12.				

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

MYCOBACTERIOLOGY SECTION					Trainee level .....				
SPECIFIC LABORATORY PROCEDURE; SPUTUM MICROSCOPY - (ZN, FLUORESCENT))									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
1.					16.				
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15.					30.				
SPECIFIC LABORATORY PROCEDURE; SPUTUM – CULTURE IDENTIFICATION (liquid, solid, automated)/MOLECULAR DETECTION/SENSITIVITY									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
1.					8.				
2.					9.				
3.					10.				

<b>4.</b>					<b>11.</b>				
<b>5.</b>					<b>12.</b>				
<b>6.</b>					<b>13.</b>				
<b>7.</b>					<b>14.</b>				

**SPECIFIC LABORATORY PROCEDURE; OTHER SPECIMENS – CULTURE/MOLECULAR DETECTION/SENSITIVITY**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>15.</b>				
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<b>8.</b>					<b>22.</b>				
<b>9.</b>					<b>23.</b>				
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<b>12.</b>					<b>26.</b>				
<b>13.</b>					<b>27.</b>				
<b>14.</b>					<b>28.</b>				

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

MYCOLOGY SECTION					Trainee level .....				
<b>SPECIFIC LABORATORY PROCEDURE; SKIN/NAIL SCRAPINGS FUNGAL STUDIES (MCS)</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>7.</b>				
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<b>6.</b>					<b>12.</b>				

**SPECIFIC LABORATORY PROCEDURE; TISSUE FUNGAL STUDIES (MCS)**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>4.</b>				
<b>2.</b>					<b>5.</b>				
<b>3.</b>					<b>6.</b>				

**SPECIFIC LABORATORY PROCEDURE; ASPIRATE FUNGAL STUDIES (MCS)**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>4.</b>				
<b>2.</b>					<b>5.</b>				
<b>3.</b>					<b>6.</b>				

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

IMMUNOLOGY/VIROLOGY SECTION					Trainee level .....				
<b>SPECIFIC LABORATORY PROCEDURE; RAPID TEST KITS – DIFFERENT TESTS e. g. HIV, PREGNANCY, MALARIA, HEPATITIS ETC.</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>26.</b>				
<b>2.</b>					<b>27.</b>				
<b>3.</b>					<b>28.</b>				
<b>4.</b>					<b>29.</b>				
<b>5.</b>					<b>30.</b>				
<b>6.</b>					<b>31.</b>				
<b>7.</b>					<b>32.</b>				

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24.					49.				
25.					50.				

**SPECIFIC LABORATORY PROCEDURE; AGGLUTINATION TESTS e. g. RPR, TPHA, TPPA**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
1.					7.				
2.					8.				
3.					9.				
4.					10.				
5.					11.				
6.					12.				

**SPECIFIC LABORATORY PROCEDURE; ELISA**

S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>4.</b>				
<b>2.</b>					<b>5.</b>				
<b>3.</b>					<b>6.</b>				
<b>SPECIFIC LABORATORY PROCEDURE; IMMUNOBLOTTING TECHNIQUES e. g. Western blot for HIV, syphilis etc</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>3.</b>				
<b>2.</b>					<b>4.</b>				
<b>SPECIFIC LABORATORY PROCEDURE; POLYMERASE CHAIN REACTION TECHNIQUES – REAL TIME, CONVENTIONAL</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>7.</b>				
<b>2.</b>					<b>8.</b>				
<b>3.</b>					<b>9.</b>				
<b>4.</b>					<b>10.</b>				
<b>5.</b>					<b>11.</b>				
<b>6.</b>					<b>12.</b>				
<b>SPECIFIC LABORATORY PROCEDURE; PHASE CONTRAST/DARKFIELD/FLUORESCENT MICROSCOPY</b>									
S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE	S/N	PATH ID	DATE	GRADE	ASSESSORS NAME/ SIGNATURE/DATE
<b>1.</b>					<b>4.</b>				
<b>2.</b>					<b>5.</b>				
<b>3.</b>					<b>6.</b>				

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

ASSESSMENT OF ANTIMICROBIAL STEWARDSHIP/INFECTION CONTROL/OUTBREAK INVESTIGATION ACTIVITIES

ANTIMICROBIAL STEWARDSHIP ACTIVITY			
S/N	ACTIVITY (MEETINGS/AUDITS/INTERVENTIONS/SURVEYS)	DATE	SUPERVISORS NAME/ SIGNATURE/DATE
1.			
2.			
3.			
4.			
5.			

INFECTION CONTROL ACTIVITY			
S/N	ACTIVITY (MEETINGS/AUDITS/INTERVENTIONS/SURVEYS)	DATE	SUPERVISORS NAME/ SIGNATURE/DATE
1.			
2.			
3.			
4.			
5.			

OUTBREAK/NOSOCOMIAL SURVEILLANCE ACTIVITY			
S/N	ACTIVITY (INVESTIGATIONS/REPORTING)	DATE	SUPERVISORS NAME/ SIGNATURE/DATE
1.			
2.			
3.			
4.			
5.			

ASSESSMENT OF SEMINARS/TUTORIALS/JOURNAL REVIEW

Trainee level .....

S/NO	TOPIC	DATE	GRADE	NAME/SIGNATURE OF CHAIR/DATE
1.				
2.				
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45.				

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

CASE/CLINICAL SKILLS ACTIVITIES

ASSESSMENT OF SKILLS/COMPETENCIES IN CASE/CLINICAL PRESENTATIONS

YEAR ONE			
Please comment on whether these aspects of the trainee's performance are as expected for the stage of training			
SKILLS/COMPETENCIES		GRADE	N/A
History taking and physical examination skills			
Initial assessment of clinical, pathological, microbiological aspects of case			
Appropriate initial and follow up investigation/s selected			
Interpretation of findings			
Clinical management advice (regarding therapy, prophylaxis)			
Infection control			
Public Health Advice/prevention			
Overall laboratory and clinical judgment			
Reporting of findings			
Ability to present and discuss case	To Colleagues		
	To other health staff		
	non-medical person (e. g. patient, lawyer)		
Please comment on other relevant aspects, especially on aspects for improvement			
NAME OF ASSESSOR		SIGNATURE	
NAME OF HOSPITAL/CLINIC/WARD		DATE	

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

N/A = not applicable

YEAR TWO			
Please comment on whether these aspects of the trainee's performance are as expected for the stage of training			
<b>SKILLS/COMPETENCIES</b>		<b>GRADE</b>	<b>N/A</b>
History taking and physical examination skills			
Initial assessment of clinical, pathological, microbiological aspects of case			
Appropriate initial and follow up investigation/s selected			
Interpretation of findings			
Clinical management advice (regarding therapy, prophylaxis)			
Infection control			
Public Health Advice/prevention			
Overall laboratory and clinical judgment			
Reporting of findings			
Ability to present and discuss case	To Colleagues		
	To other health staff		
	non-medical person (e. g. patient, lawyer)		
Please comment on other relevant aspects, especially on aspects for improvement			
NAME OF ASSESSOR		SIGNATURE	
NAME OF HOSPITAL/CLINIC/WARD		DATE	

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

N/A = not applicable



<b>YEAR THREE</b>			
<b>Please comment on whether these aspects of the trainee's performance are as expected for the stage of training</b>			
<b>SKILLS/COMPETENCIES</b>		<b>GRADE</b>	<b>N/A</b>
History taking and physical examination skills			
Initial assessment of clinical, pathological, microbiological aspects of case			
Appropriate initial and follow up investigation/s selected			
Interpretation of findings			
Clinical management advice (regarding therapy, prophylaxis)			
Infection control			
Public Health Advice/prevention			
Overall laboratory and clinical judgment			
Reporting of findings			
Ability to present and discuss case	To Colleagues		
	To other health staff		
	non-medical person (e. g. patient, lawyer)		
Please comment on other relevant aspects, especially on aspects for improvement			
NAME OF ASSESSOR		SIGNATURE	
NAME OF HOSPITAL/CLINIC/WARD		DATE	

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

N/A = not applicable

CASE PRESENTATION LOGBOOK

Trainee level .....						
	Date	Description of meeting (Ward round/Clinic/Clinical meeting)	Case Presented by trainee	Grade	Comment	Assessors/Signature/Date
1.						
2.						
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18.						
19.						
20.						

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

## QUALITY MANAGEMENT ACTIVITIES LOG

<b>YEAR ONE</b>		
<b>Please comment on whether these aspects of the trainee's performance are as expected for the stage of training</b>		
<b>SKILLS/COMPETENCIES</b>	<b>YES</b>	<b>NO</b>
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 audit		
Performance of Laboratory Audit		
Preparation of schedule/roster for bench duties or description of duties		
Conduct a customer satisfaction survey		
Participation in preparation for accreditation		
Assessment of personnel competency		
Develop SOP/protocol for Equipment use/maintenance/validation		
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 improvement		
NAME OF ASSESSOR	SIGNATURE	
NAME OF HOSPITAL/CLINIC/WARD	DATE	

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

<b>YEAR TWO</b>			
<b>Please comment on whether these aspects of the trainee's performance are as expected for the stage of training</b>			
<b>SKILLS/COMPETENCIES</b>		<b>YES</b>	<b>NO</b>
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 audit			
Performance of Laboratory Audit			
Preparation of schedule/roster for bench duties or description of duties			
Conduct a customer satisfaction survey			
Participation in preparation for accreditation			
Assessment of personnel competency			
Develop SOP/protocol for Equipment use/maintenance/validation			
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 improvement			
NAME OF ASSESSOR		SIGNATURE	
NAME OF HOSPITAL/CLINIC/WARD		DATE	

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

<b>YEAR THREE</b>		
<b>Please comment on whether these aspects of the trainee's performance are as expected for the stage of training</b>		
<b>SKILLS/COMPETENCIES</b>	<b>YES</b>	<b>NO</b>
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 audit		
Performance of Laboratory Audit		
Preparation of schedule/roster for bench duties or description of duties		
Conduct a customer satisfaction survey		
Participation in preparation for accreditation		
Assessment of personnel competency		
Develop SOP/protocol for Equipment use/maintenance/validation		
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 improvement		
NAME OF ASSESSOR		SIGNATURE
NAME OF HOSPITAL/CLINIC/WARD		DATE

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

## ACADEMIC AND RESEARCH ACTIVITIES LOG

Assessor should write name and sign under relevant column as applies to competence being assessed	YEAR ONE				
SKILLS/COMPETENCIES	Theoretical Knowledge	Can perform under supervision	Can perform without supervision	Competent	ASSESSOR/SIGN/DATE
Understands the various methods of collecting data about communicable diseases, and the limitations of such data					
Is able to develop basic data collection questionnaires					
Understands the various study designs that can be used in the conduct of research/studies					
Understands how to perform basic statistical analyses					
Able to use using appropriate software packages, e. g. epi-info, SPSS, Stata etc					
Learns how to use a reference manager and write short reports					
Has had experience of training junior medical and scientific staff					
Understands the various components of a published article					
Preparation of a good power point presentation					
Oral presentation abilities					
Please comment on other relevant aspects, especially on aspects for improvement					Head of Department name/sign/date  .....  .....

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

Assessor should write name and sign under relevant column as applies to competence being assessed	YEAR TWO					
	SKILLS/COMPETENCIES	Theoretical Knowledge	Can perform under supervision	Can perform without supervision	Competent	ASSESSOR/SIGN/DATE
Understands the various methods of collecting data about communicable diseases, and the limitations of such data						
Is able to develop basic data collection questionnaires						
Understands the various study designs that can be used in the conduct of research/studies						
Understands how to perform basic statistical analyses						
Able to use using appropriate software packages, e.g. epi-info, SPSS, Stata etc						
Learns how to use a reference manager and write short reports						
Has had experience of training junior medical and scientific staff						
Understands the various components of a published article						
Preparation of a good power point presentation						
Oral presentation abilities						
Please comment on other relevant aspects, especially on aspects for improvement					Head of Department name/sign/date  .....  .....	

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

Assessor should write name and sign under relevant column as applies to competence being assessed	YEAR THREE			Competent	ASSESSOR/SIGN/DATE
	Theoretical Knowledge	Can perform under supervision	Can perform without supervision		
Understand the basis of research and how to formulate research questions					
Journal review and publication critiques					
Understands the various methods of collecting data about communicable diseases, and the limitations of such data					
Is able to develop basic data collection questionnaires					
Understands the various study designs that can be used in the conduct of research/studies					
Understands the methods of searching the literatures for publications					
Understands how to perform basic statistical analyses					
Able to use using appropriate software packages, e. g. epi-info, SPSS, Stata etc					
Learns how to use a reference manager and write short reports					
Has had experience of training junior medical and scientific staff					
Understands the various components of a published article					
Preparation of a good power point presentation					



Please comment on other relevant aspects, especially on aspects for improvement

Head of Department  
name/sign/date

.....

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

ASSESSMENT OF SENIOR MEDICAL MICROBIOLOGY RESIDENT ON EXTERNAL ROTATION

<b>DEPARTMENT</b> .....		<b>DURATION</b> .....		
<b>S/N</b>	<b>SPECIFIC PROCEDURE/DATE</b>	<b>DATE</b>	<b>GRADE</b>	<b>ASSESSORS NAME &amp; SIGNATURE/DATE</b>
	<b>SEMINAR PRESENTATION/DATE</b>			
	<b>CLINICAL ACTIVITIES/DATE</b>			





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

DEPARTMENT .....					DURATION .....				
S/N	SPECIFIC PROCEDURE/DATE			DATE	GRADE	ASSESSORS NAME & SIGNATURE/DATE			



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

## ASSESSMENT OF ATTITUDES

This section is used to assess the attitude of the resident. It is compulsory for core residents. It is to be filled by the primary specialty only.

### GRADES

ATTRIBUTE	A	B	C	D	E
Punctuality					
Ability to work unsupervised					
Zeal to learn					
Initiative					
Interpersonal relationship					
Attitude to Work					
Sense of responsibility					
Reliability					

Supervisor's Name:.....

Signature and Date: .....

Name of Resident .....Signature.....

Note: (A) Outstanding means far exceeds expectations. (B) Above average means often exceeds expectations; (C) Average means meets reasonable expectations; (D) Below average means often falls short of reasonable expectations. (E) Unsatisfactory means falls far short of reasonable expectations.

If the resident is considered ready for the fellowship examination head of department should indicate below and any other remarks for note by Faculty and College

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HOD name/sign/date.....