

المجلس العربي للاختصاصات الصحية

ARAB BOARD OF HEALTH SPECIALIZATIONS

المجلس العلمي لأختصاص طب الأطفال

الاختصاص الفرعي في الامراض المعدية لدى الاطفال

SCIENTIFIC COUNCIL OF PEDIATRICS

PEDIATRIC INFECTIOUS DISEASES SUBSPECIALITY



السجل العلمي والعملية للمتدرب

LOG BOOK OF ACADEMIC ACTIVITIES

FOR PEDIATRIC INFECTIOUS DISEASES TRAINING

PROGRAM

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

ARAB BOARD OF HEALTH SPECIALIZATIONS



Log Book of Academic Activities  
For Pediatric Infectious Diseases Training Program

**Personal Information:**

- Name of Candidate: .....

- Candidate No.: .....

- Program Director: .....

- Training Institute: .....

- Starting Date of Training: .....

## **Introduction**

**This log book serves as a guide for objective evaluation of the fellows during their training period by recording different academic activities that should be signed by the supervisor or trainer.**

## Certificate

**This is to certify that to the best of my knowledge all the entries in the log book are correct.**

**Signature of trainee: -----**

**Center of Training: -----**

## **Instruction to Trainee**

- 1- This logbook has to be maintained by all trainees enrolled in a program of the Arab Board of Pediatric Infectious Diseases subspecialty.**
- 2- Trainees are advised to make the required entries of the event.**
- 3- All entries must be signed by the supervisor**
- 4- The trainee is required to maintain the logbook throughout the training period.**
- 5- The logbook will form a part of the eligibility requirements for the examinations.**

## **Instruction for the trainer**

- 1- The logbook is a day-to-day record of the clinical and academic work done by the trainee.**
- 2- Its purpose is to evaluate the overall training of the candidate and determine deficiencies if any, so that they may be corrected.**
- 3- The program director should check regularly the logbook so that he/she can spot any deficiencies in the training (e.g. the trainee has not rotated through the required rotations in the different units and subdivisions).**

## TRAINING PROGRAM

### First year rotations:

Rotation	No. of blocks*	Period	Supervisor name and signature
Pediatric infectious ward	5		
Neonatal care unit	1		
Gastroenterology ward	1		
Neurology ward	1		
Respiratory ward	1		
Microbiology lab.	1		
Research	1		
Infection control unit	1		
Annual leave	1		
<b>Total</b>	<b>13</b>		
Pediatric infectious diseases outpatient clinic	Once / week		

\* 1 block=4 weeks

## Second year Rotations:

Rotation	No. of blocks*	Period	Supervisor name and signature
Pediatric infectious word	4		
Neonatal care unit	1		
Nephrology ward	1		
Hemato-oncology ward	1		
Pediatric Surgery ward	1		
Microbiology lab.	1		
Research	1		
Adult infectious disease	1		
Public health unit (community medicine)	1		
Annual leave	1		
<b>Total</b>	<b>13</b>		
Pediatric infectious diseases outpatient clinic		Once / week	
Tuberculosis clinic		Once / month	

\* 1 block=4 weeks



### Third year rotations:

Rotation	No. of blocks*	Period	Supervisor name and signature
Pediatric infectious ward	4		
Cardiology ward	1		
Neurology ward	1		
Hemato-oncology ward	1		
Intensive care unit	1		
Microbiology lab.	1		
Research	1		
Adult infectious disease	1		
Immunology unit	1		
Annual leave	1		
<b>Total</b>	<b>13</b>		
Pediatric infectious diseases outpatient clinic	Once / week		
ENT outpatient clinic	Once / month for 3 months		
Ophthalmology outpatient clinic	Once / month for 3 months		
Dermatology outpatient clinic	Once / month for 3 months		
Travel clinic	Once / month for 3 months		

\* 1 block=4 weeks

## EDUCATIONAL PROGRAMS AND TEACHING EXPERIENCES

<b>Activity</b>	<b>Frequency</b>
General Pediatrics Morning reports	Daily
Clinical case conference	Once per week
Pediatrics Grand Round	Once per week
Case presentation with literature review	Twice per month
Journal club	Twice per month
Combined ID and Microbiology Rounds	Once per month
Mortality and morbidity meeting	Once per month
Radiology meeting	Once per month
Clinical research methodology course	At least once per fellowship
BLS course	Once per fellowship training
PALS course	Once per fellowship training

### Attendance of Courses & Workshops

Course / workshop	Date From To	Location	Supervisor signature

**Published Research / Ongoing Research Projects**

<b>No</b>	<b>Title / Authors</b>	<b>Name of journal</b>	<b>Date of Publication / acceptance</b>
1			
2			
3			
4			
5			
6			

## Record of Practical procedures

<b>Procedure/ skill</b>	<b>Minimum required No.</b>	<b>Number performed</b>	<b>Number observed</b>	<b>Supervisor signature</b>
CSF collection	40			
Performing and interpreting Mantoux test	10			
Gastric lavage for Acid fast stain	15			
Assigning vaccination schedule for subjects with interrupted or delayed vaccination	20			
Bone marrow aspirate and biopsy	5			
Specimen collection by thoracentesis	5			
Specimen collection by bronchoscope	2			
Specimen collection by arthrocentesis	2			
Aspiration of abscess cavities	5			

## Summative Evaluation

**5: excellent    4: very good    3: good    2: poor    1: unacceptable**

<b>Clinical and technical skills</b>	5	4	3	2	1
Problem identification					
Patient management					
Emergency treatment					
Procedural skills					
<b>Descriptive evaluation</b>					

<b>Personal and professional maturity</b>	5	4	3	2	1
Punctuality					
Emotional and professional maturity					
Relationship with other medical personnel					
Applying ethical principles in patient care					
Communication skills					
<b>Descriptive evaluation</b>					

<b>Overall Performance</b>					

Recommendation to set for exam:  Yes  No

If No why?

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Program director: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_

Arab Board representative for country: \_\_\_\_\_

Chairperson Signature  
/ member of the pediatric scientific board: \_\_\_\_\_

Note:

The candidate eligibility for the exam should include the following:

- 1- Overall evaluation should not be less than good (3).
- 2- Lack of any document misconduct or unethical behavior.