



Royal Medical Services

Professional Training Division

Logbook for Gynecology Residents

Explanatory Notes

This is an important document. The logbook is an integral part of basic training and it will provide a record of your experience and your academic and educational activities. It will be part of your assessment as you move through basic training and it will be required for the final year of residency and Board examination.

This logbook is intended to be a record of all procedures you perform or participate in as part of your training.

Training Posts Held

On this page you are required to list, in chronological order, the posts which you have held during residency program at the completion of each post, the trainer or consultant to whom you have been attached must sign to indicate that you have satisfactorily completed the post. When you apply to sit the final assessment, the trainer or consultant with whom you are attached will verify that the log book is complete and authenticated.

Educational and Academic Activities

You must record the fact that you have sat for and succeeded the basic board examination. A copy of the Jordan Medical Council Primary board certificate should be included with your logbook. On this sheet, records of attendance at other training courses, meetings, and lectures should be recorded. It is not intended that you record educational activities within the unit to which you are attached. Publications and other personal contributions should be included as well as any involvement in research projects.

The logbook is divided into numbered segments, corresponding to the training posts held. Details of your record of practical procedures should be completed for each of these posts. There is a consolidation page to summarize the record of procedures performed.

Personal details:

Full Name in Arabic:

Full name in English:

National number:

Start date of your residency program:

Your signature: _____

Head of the Department: _____

Signature & Stamp: _____ Date: _____

Training Posts Held

Post Number	Hospital	Residency Year	Start Date	Finish Date	Consultant	Consultant signature
1 st						
2 nd						
3 rd						
4 th						
5 th						
6 th						
7 th						
8 th						
9 th						
10 th						
11 th						
12 th						
13 th						
14 th						
15 th						
16 th						
17 th						
18 th						
19 th						
20 th						

This form should only be signed by the consultant or trainer at the end of the post, provided that the trainee has finished the period of the training satisfactorily.

Educational and Academic Activities

Mandatory Certificate (s):

Jordan Medical Council First Part Board Examination Certificate:

Date of Issuing the Certificate:

Certificate Number:

Other Courses:

Course	Date	Location	Course Director

Other activities, including CME hours:

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PROCEDURES ASSISTED / UNDER SUPERVISION
Minimum Requirement

OBSTETRICS

Monitoring 1 st stage of labour, assessment of Partogram	20
Assessment of Cardiotocograph (CTG) & management of fetal distress	20
Amniotomy	20
Management of 3 rd Stage and complications	10

GYNECOLOGY

Papanicouleau Smear	10
Wet Vaginal Smear, Fern test	5

**Minimum Levels of Experience / Procedures
Performed at level 4* (Required over 5
Years of Residency)**

Normal deliveries with episiotomy	100
Breech deliveries	10
Instrumental deliveries	50
Twin deliveries	10
Caesarean sections	100
Cervical Cerclage	10
Manual removal of placenta	10
Obstetric procedures (others)	20
Evacuation of retained parts of conception	50
EUA/D&C	50
Laparoscopy	30
Colposcopy (required at level 1)	10
Hysteroscopy	50
Hystero-Salpingo-Gram	20
Other minor Gynecological OPD procedures	30
Invasive fetal procedures (required at level 1)	10
Major abdominal surgeries (required at LIII)	25
Major vaginal surgeries (required at L III)	25
Gynecological clinics	100 (number of clinic sessions)
Obstetric clinics	100 (number of clinic sessions)
Obstetrics Ultrasound experience in OPD's	100 hours
Gynecology Ultrasound experience in OPD's	50 hours

* Exceptions are recorded beside each item

Procedure	Times	Level *	Comments
Normal deliveries with episiotomy	20+ 20	I, II, III IV	
Breech deliveries	5+ 2	I, II III	Including second twin breech
Instrumental deliveries	10+ 10	1, 11 111	
Twin deliveries	5+ 2	I,II III	
Caesarean sections	10	I, II	
Manual removal of placenta	5	I, II, III	
Extended/ 3 rd degree Tear Repair Postpartum Haemorrhage	2 2	I, II I, II	
Evacuation of retained parts of conception	10	I, II, III	
EUA/D&C	5	I, II, III	
Laparoscopy	5	I, II	
Hystero-Salpingo-Gram	5+ 10	I, II, II IV	
IUCD insertion	5+ 10	I,II, III IV	
Major abdominal surgeries (required at LIII)	10	I, II	
Gynecological clinics	20		
Obstetric clinics	20		
Obstetrics Ultrasound experience in OPD's	20		
Gynecology Ultrasound experience in OPD's	10		

*Level 1: Assistant status, Level 2: Needs direct supervision, Level 3: Indirect Supervision, Level 4: Competent unsupervised

SECOND YEAR SYLLABUS

Procedure	Times	Level *	Comments
Normal deliveries with episiotomy	80	IV	
Breech deliveries	5	IV	Including second twin breech presentation
Instrumental deliveries	10+ 10	III IV	
Twin deliveries	5	III	
Caesarean sections	10	II, III	
Manual removal of placenta	5	IV	
Extende/3rd Degree Tear Repair	2	II	
Postpartum Haemorrhage	2	III	
Evacuation of retained parts of conception	20	IV	
EUA/D&C	10+ 10	III IV	
Laparoscopy	5	II	
Cervical cerclage	5	I, II, II	
Hystero-Salpingo-Gram	10	IV	
IUCD insertion	10	IV	
Major abdominal surgeries (required at level III)	10	I, II	Level IV experience is a specialist doctor requirement
Gynecological clinics	20		
Obstetric clinics	20		
Obstetrics Ultrasound experience in OPD's	20		
Gynecology Ultrasound experience in OPD's	10		

*Level 1: Assistant status, Level 2: Needs direct supervision, Level 3: Indirect Supervision, Level 4: Competent unsupervised

THIRD YEAR SYLLABUS

Procedure	Times	Level *	Comments
Breech deliveries	5	IV	
Instrumental deliveries	20	IV	
Twin deliveries	5	IV	
Caesarean sections	20	IV	
Manual removal of placenta	5	IV	
Extended/3rd Degree Tear Repair	5	III	
Postpartum Haemorrhage	5	IV	
Evacuation of retained parts of conception	30	IV	
EUA/D&C	20	IV	
Laparoscopy	10	III	
Cervical Cerclage	5	IV	
Hysteroscopy	10	IV	
IUCD insertion	10	IV	
Abdominal surgeries (required at LIII)	5	III	Level IV experience is a specialist doctor requirement
Major vaginal surgeries (required at LIII)	5	III	Level IV experience is a specialist doctor requirement
Gynecological clinics	20		
Obstetric clinics	20		
Obstetrics Ultrasound experience in OPD's	20		
Gynecology Ultrasound experience in OPD's	10		

*Level 1: Assistant status, Level 2: Needs direct supervision, Level 3: Indirect Supervision, Level 4: Competent unsupervised

FORTH YEAR SYLLABUS

Procedure	Times	Level *	Comments
Instrumental deliveries	20	IV	
Twin deliveries	5	IV	Including second twin breech presentation
Caesarean sections	40	IV	
Manual removal of placenta	5	IV	
Extended /3 rd degree Tear Repair Postpartum Hemorrhage	5 5	IV IV	
EUA/D&C	20	IV	
Laparoscopy	15	IV	
Cervical Cerclage	5	IV	
Colposcopy	5	III	
Hysteroscopy	20	IV	
Invasive fetal procedures (at level I)	5	I	
Abdominal surgeries (required at LIII)	10	III	Level IV experience is a specialist doctor requirement
Major vaginal surgeries (required at LIII)	10	III	Level IV experience is a specialist doctor requirement
Gynecological clinics	20		
Obstetric clinics	20		
Obstetrics Ultrasound experience in OPD's	20		
Gynecology Ultrasound experience in OPD's	10		

*Level 1: Assistant status, Level 2: Needs direct supervision, Level 3: Indirect Supervision, Level 4: Competent unsupervised

FIFTH YEAR SYLLABUS

Procedure	Times	Level *	Comments
Twin deliveries	5	IV	Including second twin breech presentation
Caesarean sections	40	IV	
4 rd degree Tear Repair	5	IV	
Laparoscopy	15	IV	
Colposcopy	5	III	
Invasive fetal procedures(at level I)	5	I	
Hysteroscopy	20	IV	
IUCD insertion	10	IV	
Abdominal surgeries (required at LIII)	10	III	Level IV experience is a specialist doctor requirement
Major vaginal surgeries (required at LIII)	10	III	Level IV experience is a specialist doctor requirement
Gynecological clinics	20		
Obstetric clinics	20		
Obstetrics Ultrasound experience in OPD's	20		
Gynecology Ultrasound experience in OPD's	10		

*Level 1: Assistant status, Level 2: Needs direct supervision, Level 3: Indirect Supervision, Level 4: Competent unsupervised

OBSTETRIC PROCEDURES – VAGINAL DELIVERY WITH EPISIOTOMY

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Achieved Level 4			Supervisor / Consultant Signature					Date

OBSTETRIC PROCEDURES – BREECH DELIVERY

Date	Hosp.	Procedure	Episiotomy	Level 1 Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date

OBSTETRIC PROCEDURES – VENTOUSE/FORCEPS DELIVERY

Date	Hosp.	Procedure	Episiotomy	Level 1 Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4			Supervisor/Consultant Signature					Date

OBSTETRIC PROCEDURES – TWIN DELIVERY

Date	Hosp.	Procedure	Episiotomy	Level 1 Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4			Supervisor/Consultant Signature					Date

OBSTETRIC PROCEDURES – CAESAREA SECTIONS

Date	Hosp.	Procedure	Episiotomy	Level 1 Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4			Supervisor/Consultant Signature					Date

OBSTETRIC PROCEDURES – CERVICAL CERCLAGE

Date	Hosp.	Procedure	Indication	Level 1 Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4			Supervisor/Consultant Signature					Date

**OBSTETRIC PROCEDURES – MANUAL REMOVAL
OF PLACE NTA**

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4		Supervisor/Consultant Signature						Date

OBSTETRIC PROCEDURES – OTHERS

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4		Supervisor/Consultant Signature						Date

3rd or 4th Degree Tear Repair
 Examination Under Anaesthesia
 Postpartum Haemorrhage
 Cervical Tear Repair
 External Cephalic Version

EUA
 PPH
 ECV

EVACUATION OF RETAINED PARTS OF CONCEPTION

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date

EXAMINATION UNDER ANESTHESIA - D&C

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date

DIAGNOSTIC LAPAROSCOPY

Date	Hosp.	Procedure	Indication	Level 1 Assistant status Level	Level 2 direct	Level 3 Indirect	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4		Supervisor/Consultant Signature						Date

COLPOSCOPY
(level 1 only)

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date

Hysteroscopy

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date

HYSTEROSALPINGOGRAM

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4			Supervisor/Consultant Signature					Date

OTHER MINOR GYNECOLOGICAL OPD PROCEDURES

Date	Hosp.	Procedure	Indication	Level 1 Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/Supervisor
Training Supervisor (name)								Date
Achieved Level 4			Supervisor/Consultant Signature					Date

IUCD insertion
 Cervical Diathermy
 Intrauterine Insemination
 Endometrial sampling / biopsy

OTHER MINOR VAGINAL – CERVICAL PROCEDURES

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Achieved Level 4 Supervisor/Consultant Signature								Date

Minor / Intermediate Vaginal Procedures

- Excision / Diathermy / Cryotherapy
- Incision and Marsupialisation of Bartholins Cyst / Abscess / Gartner’s
- Perineorrhaphy

Other Cervical Procedures

- LLETZ / LEEP / Cryocautery
- Cone Biopsy
- Cervical Diathermy

INVASIVE FETAL PROCESURES

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4			Supervisor/Consultant Signature					Date

Amniocentesis, CVS. Cordocentesis.

MAJOR VAGINAL SURGERIES (up to level III)

Date	Hosp.	Procedure	Indication	Level 1 : Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent	Signature of Assistant/ Supervisor
Training Supervisor (name)							Date	
Achieved Level 4							Supervisor/Consultant Signature	

Anterior vaginal repair, posterior vaginal repair, vaginal hysterectomy and others

MAJOR ABDOMINAL SURGERIES (up to level III)

Date	Hosp.	Procedure	Indication	Level 1 Assistant status Level	Level 2 direct supervision	Level 3 Indirect Supervision	Level 4 Competent unsupervised	Signature of Assistant/ Supervisor
Training Supervisor (name)								Date
Achieved Level 4								Supervisor/Consultant Signature

TAH/BSO-Total Abdominal Hysterectomy/Bilateral Salpingo-Oophorectomy,
laparotomies and Other Obstetrics Procedure

OBSTETRIC ULTRASOUND

Name of Procedure	Procedures Observed (min. 5)	Procedures Performed Under Supervision (min. 15)
Trans-vaginal first trimester early pregnancy		
Trans-abdominal first trimester dating		
Second / third trimester biometry		
Determine presentation		
Determine placental site		
Measure AFI		

IMPORTANT NOTES:

The procedures listed in the Procedures Performed column can be done in the delivery suit, in antenatal clinic or in antenatal wards, as long as the procedures are appropriately supervised. Supervision of ultrasound training should be provided by a trained sonographer or other suitably qualified practitioner.

Training Supervisor.....

Sign:

Date:

**PELVIC ULTRASOUND (GYNECOLOGY
PROCEDURE)**

Name of Procedure	Procedures Observed (min. 5)	Procedures Performed Under Supervision (min. 15)
Trans-abdominal USG with full bladder		
Trans-vaginal Pelvic USG (Normal Anatomy)		
Trans-vaginal Pelvic USG (Pelvic Pathology)		
Trans-vaginal Pelvic USG (Follicular Study)		

IMPORTANT NOTES:

The procedures listed in the Procedures Performed column can be done in the accident & emergency, clinics or in the wards, as long as the procedures are appropriately supervised. Supervision of ultrasound training should be provided by a trained sonographer or other suitably qualified practitioner.

Training Supervisor

Sign:

Date:

WORKSHOP / COURSE CERTIFICATION

Communication Skills Course
Neonatal Resuscitation Course
Basic Surgical Skills Course
Basic Cardiac Life Support Course
Advanced Cardiac Life Support Course
Advanced Life Support in Obstetrics Course
Basic Obstetrics & Gynecology Ultrasound Course

Name of workshop:

Year of Training Year 1 Year 2 Year 3 Year 4

Hospital /

Venue: Dates of

training:

Workshop Certificate submitted date:

Please provide a copy of certificate of attendance of any workshop you are attending.

Name of workshop:

Year of Training Year 1 Year 2 Year 3 Year 4

Hospital /

Venue: Dates of

training:

Workshop Certificate submitted date:

Please provide a copy of certificate of attendance of any workshop you are attending.

Name of workshop:

Year of Training Year 1 Year 2 Year 3 Year 4

Hospital /

Venue: Dates of

training:

Workshop Certificate submitted date:

Please provide a copy of certificate of attendance of any workshop you are attending.

Summative evaluation:

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

	5	4	3	2	1
Clinical and technical skills					
Problem identification					
Patient management					
Emergency treatment					
Procedure skills					
Descriptive evaluation :					
Personal and professional maturity	5	4	3	2	1
Punctuality					
Emotional and professional maturity					
Relationship with other medical personnel					
Applying ethical principles in patient care					
Communication skills					
Descriptive evaluation :					

	5	4	3	2	1
Overall performance					
Descriptive evaluation :					

Recommended to sit for exam:	Yes	No
If No why:		

The resident eligibility for exam should include:

1. Overall evaluation should not be less than 3
2. Lack of any documented misconduct or unethical behavior

Supervisor name and signature

Program director signature

Chief of Gynecology department name and signature
