INDIAN COLLEGE OF OBSTETRICIANS AND GYNAECOLGISTS

The Federation of Obstetric and Gynaecological Societies of India (FOGSI) office. Trade World, C-5,6,7,9,12,13, 1st Floor, D wing Entrance, Kamala City, Senapati Bapat Marg, Lower Parel (W), Mumbai-400013. Tel Nos. 022-2302 1648/1654/1343 Email: icogoffice@gmail.com/icog@fogsi.org; Website: http://www.icogonline.org



Founded 1984

LOG BOOK for Certificate Course in Fetal Medicine

Candidate Name:-----

Examination Reg. No:-----

Declaration

I,	hereby	do
solemnly declare that all information contained in this	LOG BOOK	is a
true and accurate record of my professional experience	e, education	and
training from to	representing	the
period of training for the Certificate Course in Fetal Medi	icine.	

Signature of (Candidate:	
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Trainee Number:

Date:....

Signature of Guide:

GENERAL INSTRUCTIONS TO CANDIDATES

The purpose of the Log Book is:

- i) To help the candidate record his training so that identified and remedied.
- ii) To help both consultants and the college to assess overall training and provide the extra experience for trainees in the areas where it is most needed.

The timing of the Log Book:

Logbooks should be completed during training in centres recognized by the College. Any queries concerning log book/training should be referred to the Examination Department (Chairman/Secretary) of the Indian College of Obstetricians and Gynaecologists.

The candidate should bring to the examination completed Log Books.

Candidates are strongly advised to carry the Log Book with them at all times and to fill it in on a daily basis. This will avoid much retrospective record hunting. Candidates should discuss the progress of the Log Book with their Consultant at least every week and a summary of experience must be signed by the consultant.

Confidentiality:

Candidate must not identify patients by name. Cases should be recorded by hospital number and /or patient's initials.

INSTRUCTIONS:

BY THE END OF THE COURSE THE CANDIDATE SHOULD HAVE SEEN/ASSISTED IN

- 20 First trimester scans
- 20 Anomaly scans
- 20 Growth and Doppler scans
- 10 Cervical length scans
- 5 Multiple pregnancy scans
- 10 Counselling sessions for High Risk pregnancies & Invasive procedures
 - in Fetal medicine
- 20 Prenatal invasive procedures with report from lab attached

BY THE END OF THE COURSE THE CANDIDATE MUST HAVE DONE-

15 Sonographies (supervised)

TO BE FILLED:

Seminars Attended:

- 1> 2>
- 2> 3>
- 3> 4>
- 6>

Seminars Presented

1>	
2>	
3>	
4>	
_	

5>

Conferences attended

1> 2>

3>

4>

5>

Paper/Poster presented

1> 2> 3> 4>

5>

Total Attendance :

Signature of Director:

	PERSONAL
1.	Name (in full):
2.	Date of Birth:
3.	Permanent Address:
4.	Address for communication:
5.	Centre : Guide :
6.	Date of the joining for this course:
7.	Qualifications: Degree Year of Passing University
8.	Experience :
9.	Title of research conducted (if any) :

MEDICAL PROCEDURES

PROCEDURES	SEEN	ASSISSTED	PERFORMED
1. Investigative Approach			
to a High risk fetus			
2. Dating scans			
3. Nuchal scans			
4. Anomaly scans			
5. Growth Scans			
6. Multiple pregnancy scans			
7. Counselling sessions			
8. Invasive procedures			
9. Audit of 10 cases			

Ultrasound in Fetal Medicine

USG	SEEN	PERFORMED

Dating Scan	
 First trimester Scan 	
Anomaly Scan	
Growth Scan	
 Doppler scan 	

OPD PROCEDURES

	Seen	Performed
History taking		
Investigations		
Counseling		
Planning follow up visits		
Correlation of scans to clinical findings		
Specialty referrals if any		
Outcome		

CLINICAL CASES

Month wise tables and cases to be put according to date. 10 interesting cases with details of -History, Examination, Investigations, & Outcome.

SEEN/ASSISTED (should be mentioned in tabular forms) -

- 20 First trimester scans
- 20 Anomaly scans
- 20 Growth and Doppler scans
- 10 Cervical length scans
- 5 Multiple pregnancy scans
- 10 Counselling sessions for High Risk pregnancies & Invasive procedures

in Fetal medicine

10 Prenatal invasive procedures

TO BE PERFORMED (should be mentioned in tabular form) -

S No	Date	Case No/ Initials	Indication	Finding	Outcome
1					
2					
3					
4					
5					

Table 1 First trimester scans

6			
7			
8			
9			
10			

Table 2 – Anomaly scans

Serial No	Date	Case no / Initials	Indication	Finding	Outcome
1					
2					
3					
4					
5					

Table 3 – Growth and Doppler scans

Serial No	Date	Case No / Initials	Indication	Finding	Outcome
1					
2					
3					
4					
5					

Table -4 Cervical length Scans

Serial No	Date	Case No / Initials	Indication	Findings	Outcome
1					
2					
3					
4					
5					

Table -5 Multiple pregnancy scans

Serial No	Date	Case No/ Initials	Indication	Findings	Outcome
1					
2					
3					
4					
5					

Table -6 Prenatal invasive procedures

Serial	Date	Name of	Case	Indication	Findings	Outcome
No		procedure	-			
			Initials			
1						
1						
2						
3						

4			

Table -7 Counselling Sessions

Serial No	Date	Case No / Initials	Indication	Findings	Outcome
1					
2					
3					
4					
5					

Complications Observed and Management

Table 7

Serial	Date	Case	Complication	Management	Outcome
No		no /			
		Initials			
1					
2					
3					
4					
5					

Local SEMINARS PRESENTED and ATTENDED

<u>Table 8</u>

<u>Serial</u> <u>No</u>	<u>Date</u>	<u>Topic</u>	<u>Presenter</u>	<u>Sig of</u> guide
<u>1</u>				
2				
<u>3</u>				
<u>4</u>				
<u>5</u>				
<u>6</u>				
<u>7</u>				
<u>8</u>				
<u>9</u>				

CONFERENCES ATTENDED (Mention Paper or Poster

Presented & Awards if any)

Table 9

<u>Serial</u>	Date	<u>Conference</u>	<u>City</u>	Paper	ICOG
<u>No</u>				<u>/Poster</u>	<u>credit</u>
					<u>points</u>
1					
2					
<u>3</u>					
<u>4</u>					
<u>5</u>					
<u>6</u>					

REMARKS BY THE GUIDE

<u>Table 10</u>

<u>Regularity</u>	
<u>Knowledge</u>	
<u>Practical skills</u> <u>USS</u>	
<u>Practical Skills</u> <u>Mat Medicine</u>	
<u>Practical Skills</u> <u>Neonatal</u>	
Counselling Skills	
<u>Overall</u> <u>Performance</u>	