

# Learner Doctor Program

Student is assigned to general medicine, general surgery, pediatrics, obgyn and orthopedic units during clinical rotation in Phase II..

Functions as a supervised member of the health care team.

Orientation is provided to students roles in the clinical posting of II professional year

Student should focus on History taking, Physical Examination, Assessment of change in clinical status, Communication and Patient Education.

NO	Competency
IM1.10	Elicit document and present an appropriate history that will establish the diagnosis, cause and severity of heart failure including: presenting complaints, precipitating and exacerbating factors, risk factors exercise tolerance, changes in sleep patterns, features suggestive of infective endocarditis
IM1.11	Perform and demonstrate a systematic examination based on the history that will help establish the diagnosis and estimate its severity including: measurement of pulse, blood pressure and respiratory rate, jugular venous forms and pulses, peripheral pulses, , jugular venous forms and pulses, peripheral pulses, conjunctiva and fundus, lung, cardiac examination including palpation and auscultation with identification of heart sounds and murmurs, abdominal distension and splenic palpation in heart failure
IM2.6	Elicit document and present an appropriate history that includes onset evolution, presentation risk factors, family history, comorbid conditions, complications, medication, history of atherosclerosis, IHD and coronary syndromes
IM2.7	Perform, demonstrate and document a physical examination including a vascular and cardiac examination that is appropriate for the clinical presentation of atherosclerosis, IHD and coronary syndromes
IM3.4	Elicit document and present an appropriate history including the evolution, risk factors including immune status and occupational risk in pneumonia.
IM3.5	Perform, document and demonstrate a physical examination including general examination and appropriate examination of the lungs that establishes the diagnosis the complications and severity of disease in pneumona,
IM7.11	Elicit document and present a medical history that will differentiate the aetiologies of disease n rheumatological problems.

IM9.3	Elicit document and present a medical history that includes symptoms, risk factors including GI bleeding, prior history, medications, menstrual history, and family history n anemia
IM9.4	Perform a systematic examination that includes : general examination for pallor, oral examination, DOAP session of hyper dynamic circulation, lymph node and splenic examination in a case of anemia.
SU5.2	Elicit, document and present a history in a patient presenting with wounds.
SU3.2	Observe blood transfusions.
SU18.3	Demonstrate the clinical examination of surgical patient including swelling in cutaneous and subcutaneous infections.
SU22.3	Demonstrate and document the correct clinical examination of thyroid swellings
SU27.2	Demonstrate the correct examination of the vascular system and enumerate and describe the investigation of vascular disease
SU27.8	Demonstrate the correct examination of the lymphatic system
SU28.9	Demonstrate the correct technique of examination of a patient with disorders of the stomach
SU28.18	Demonstrate clinical examination of abdomen
OG8.2	Elicit document and present an obstetric history including menstrual history, last menstrual period, previous obstetric history, comorbid conditions, past medical history and surgical history
OG8.3	Demonstrate, document and perform an obstetrical examination including a general and abdominal examination and clinical monitoring of maternal and fetal well-being;
OR1.6	Participate as a member in the team for closed reduction of shoulder dislocation / hip dislocation / knee dislocation
OR3.3	Participate as a member in team for procedures like drainage of abscess, sequestrectomy/ saucerisation and arthrotomy
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PE8.4	Elicit history on the Complementary Feeding habits
PE9.4	Elicit, Document and present an appropriate nutritional history and perform a dietary recall
PE34.5	Able to elicit, document and present history of contact with tuberculosis in every patient encounter
PE2.2	Assessment of a child with failing to thrive including eliciting an appropriate history and examination
PE2.5	Assessment of a child with short stature: Elicit history, perform examination, document and present

PE3.3	Assessment of a child with developmental delay - Elicit document and present history
PE8 4	Elicit history on the Complementary Feeding habits Elicit history on the Complementary Feeding habits
PE29.10	Elicit, document and present the history related to Hematology
PE29.11	Identify external markers for hematological disorders e.g.. Jaundice, Pallor, Petechiae purpura, Ecchymosis, Lymphadenopathy, bone tenderness, loss of weight, Mucosal and large joint bleed