

**Odisha University of Health Sciences
Dhanwantari Bhavan, Bhubaneswar, Odisha**

**LOG BOOK
For
POST GRADUATE STUDENTS**

Department of: MICROBIOLOGY

Name of the Institution: _____

**Prepared by:
Log book Committee (Broad Specialties) 2023
OUHS, Bhubaneswar**

**ODISHA UNIVERSITY OF HEALTH SCIENCES,
DHANWANTARI BHAVAN, BHUBANESWAR.**

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for
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Department of: MICROBIOLOGY

Name of the Institution: _____

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CERTIFICATE

This is to certify that, this logbook contains bonafide work of

Dr. _____, a Post-
Graduate student of the Department of **MICROBIOLOGY**, of
_____, Odisha for the session
_____.
_____.

Date:

Post Graduate Guide

Head of the Department

Dean & Principal

GENERAL INSTRUCTIONS:

This log book is intended to be a record of all the activities of Postgraduate students, as they perform and participate in the course, including training.

1. It shall solely be the responsibility of the student to ensure that, the desired entries are made in day-to-day basis and relevant documents if any are kept.
2. It shall be the responsibility of the HOD to ensure that, all students maintain their log books in an orderly manner.
3. Each student shall enter his/her leave record in the concerned section immediately after returning from leave.
4. The learners feedback form should be filled up before submitting the log book for the University Examination. It is expected that, students should give their feedback with all seriousness and help the University in improving and strengthening the Postgraduate education.
5. Submission of Logbook: The up-to-date log book is a pre-requisite for fill up of forms for the University Examination and hence the completed Logbook shall be submitted to the department when the same is asked for.

6. **INSTRUCTIONS FOR FILLING THE LOG BOOK:**

Please Note: All assessments would be in Likert's 5-pointscale/score:	
Score	Interpretation
0	Poor
1	Below average
2	Average
3	Good
4	Very good

- a. All entries should be properly entered and duly signed from the Supervisor / Unit In charges / Guide / HOD, as required.
- b. Under Instructions from the Head of Department, suitable corrections can be incorporated.
- c. Research participation pertaining to Conferences, Poster / Oral presentation and publication shall be entered directly in a Consolidated form.
- d. At the end of training, it's mandatory to fill up the feedback form and submit it to Postgraduate Office.
- e. It is an integral part of practical evaluation in the University examination.
- f. After the practical examination it shall be returned back to the student.
- g. There would be periodic evaluation regarding maintenance of log book by Postgraduate education office, and in case of any deficiency, the student would be responsible and suitable action may be taken against them for the same.
- h. Additional pages [if required] can be added.

PERSONAL PROFILE OF THE STUDENT:

Name:		
Address:		
E-mail ID:		
Phone No.:		
DOB (dd/mm/yy):		
Blood group:		
Vaccination status:		
Paste your PP size Photograph		

Registration Number:	Name of the Medical Council:	Valid up to:

OUHS Registration Number:	
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Qualification Details	College	University	Month & Year of completion
MBBS			

Experience before joining:

Designation	Department	Institution	From	To

Date:

Signature of the PG student

COURSE DETAILS:

Degree / Diploma			
Date of Joining		Date of completion	

Details of Postings [as per Curriculum by NMC]:

PARTICIPATION IN RESEARCH METHODOLOGY TRAINING:

Name of the Institution	From	To	Signature of the Guide / HOD

PARTICIPATION IN BCBR COURSE

Name of the institute	Date of registration	Date of the examination	Date of publication of result	Signature of the HOD

PARTICIPATION IN BCME TRAINING:

Name of the Institution	From	To	Signature of the HOD

PARTICIPATION IN BCLS / ACLS TRAINING:

Name of the Institution	From	To	Signature of the HOD

LEAVE RECORD:

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Signature & Seal of the Head of Department

DETAILS OF PARTICIPATION IN ACADEMIC PROGRAMS:						
SI. No.	Date	Name of the Academic Program	International / National / State / Institutional Event	Organized by	Nature of participation [Delegate / Presentation if any]	Initials of the HOD
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PUBLICATIONS	
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Name of the journal:	
Indexed in [NMC approved agency only]:	
Status of publication:	
Citation if published:	
Title:	
Authors:	
Name of the journal:	
Indexed in [NMC approved agency only]:	
Status of publication:	
Citation if published:	
Title:	
Authors:	
Name of the journal:	
Indexed in [NMC approved agency only]:	
Status of publication:	
Citation if published:	

Internal Assessment Results:

Year		Theory [100]	Practical/Clinical/Oral [100]	Total out of 200 [%]
1 ST	I			
	II			
	III			
2 ND	I			
	II			
	III			
3 RD	I			
	Prelims			

Date:

Signature & Seal of the Head of Department

DETAILS OF THE DRP SCHEDULE [AS PER CURRICULUM BY NMC]:

Name of the Institution	Year of PGT	From	To	Duration

Sl. No.	Day / Date	Place of work	Nature of work	Activity learn [Should include: 1. Patient care / Diagnostic services as per the subject. 2. Health care Management activities both HR & Logistics, Communication skill. 3. Team work]	Level of participation [Observation / Performs under observation / Performs independently]	Signature of the DRPC
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REFLECTIONS

CERTIFICATE OF COMPLETION OF DISTRICT RESIDENCY PROGRAM

It is certified that Dr. _____ has satisfactorily completed the District Residency program w.e.f. _____ to _____ . During his/her District Residency Program training at _____ District, his / her performance has been reported to be _____ .

Department:

Date:

Place:

Signature of Guide / Mentor

Signature of Head of Department

Signature of the District Residency Program Coordinator

Signature of the Medical Superintendent

Signature of the CDM PHO

STRUCTURED TRAINING PROGRAM:

Teaching learning methods:

1. Lectures: at least 10 per year.
2. Student Seminar [Topic]: once in 1 – 2 weeks.
3. Journal club: once in 1 – 2 weeks.
4. Laboratory work / Bedside clinic: once in 1 – 2 weeks.
5. Student symposium: once quarterly.
6. Interdepartmental colloquium [Clinical combined rounds – CCR, Clinico-pathologic correlation conferences – CPC, Autopsy conferences]: once monthly.
7. Rotational clinical / community / institutional postings:

Sl. No.	Schedule of rotation	Duration	Suggested specific learning objectives
1	Microbiology laboratory a. Different sections of Bacteriology b. Media preparation c. Mycobacteriology d. Serology/Immuno logic e. Mycology f. Virology g. Parasitology h. Molecular lab i. Hospital Infection Control including BMW management	Distributed in various section depending upon training & departmental needs	As per the specific objectives in each section, a student is expected to acquire skills from basic to the most recent ones in diagnostic microbiology.
2	Sample Collection area	2 weeks	To learn pre-analytical parameters & procedures at sample collection area. To communicate effectively with patients at sample collection area. Learn to demonstrate respect, empathy & confidentiality when dealing with patients, samples and reports. Demonstrate leadership skills in managing the functioning of the lab (staff management, preparing duty roster)
3	Clinical Pathology i. Hematology ii. Histopathology iii. Blood Bank	2 weeks	Basic knowledge of clinical pathology (as applied to Microbiology) Inflammation and repair Intercellular substances and reaction

			<p>Pathological changes in the body in bacterial, viral, mycotic and parasitic infections.</p> <p>Clinical Pathology skills:</p> <ul style="list-style-type: none"> Peripheral smear examination CBC interpretation Urine examination Pathological investigations and their significance in infectious disease diagnosis. <p>Blood Bank skills:</p> <ul style="list-style-type: none"> Transfusion transmitted infection Blood grouping Screening of blood & blood donors Counseling skills <p>Histopathology skills:</p> <ul style="list-style-type: none"> Various stains and staining techniques used in histopathology examination of infectious agents Identification of pathogen and/or pathological changes in tissue sections in infectious diseases.
4	Clinical Biochemistry	1 week	<p>Basic understanding of biochemistry as applied to immunological/ molecular methods for study of microbial diseases and pathogenesis of infections.</p> <p>Significance of biochemical markers/profile in diagnosis, prognosis and monitoring of infective syndromes like sepsis.</p>
5	ICTC/PPTCT/ART	2 weeks	<p>HIV counseling skills</p> <p>HIV Testing strategies</p> <p>HIV Surveillance strategies</p> <p>Treatment regimens in HIV positive case, management of drug resistance, and prophylaxis PEP, prevention & management of opportunistic infection</p>
6	Tuberculosis and RNTCP	2 weeks	<p>Diagnosis of Pulmonary and extrapulmonary TB.</p> <p>Fluorescent Microscopy for TB</p> <p>Molecular diagnosis</p> <p>National tuberculosis Elimination Program</p> <p>Treatment regimens in susceptible and drug resistant TB cases</p>
7	District hospital postings (mandatory) 3 rd or 4 th semester for 3 months	3 months	<p>Identify types of infections seen in Community.</p> <p>Identify lacuna in KAP in community that promote development of infections.</p> <p>Choice of antimicrobials and treatment plan for</p>

			<p>infections in community Infection control in community Should contribute to strengthen the services of the district health system, the diagnostic laboratory services. Participate in public health programs & research activities</p>
8	Clinical locations: Medicine & allied (General Medicine, Respiratory Disease, Skin & Venereal Disease) Pediatrics Surgery & allied (General Surgery, Orthopedic) Obstetric and Gynecology	2 weeks Posting to be done for morning half of the day.	<p>Depending on the area of posting: History taking and physical examination skills Sample collection and transportation skills Identification of common infections and make a differential diagnosis Choose the appropriate laboratory investigations required for confirmation of diagnosis Interpret the laboratory results and correlate them clinically. Learn common treatment plan, particularly choice of antimicrobials and identify factors that influence choice of antimicrobials. Acquire reasoning and critical thinking required in decision making when dealing with an infectious disease case Infection control practices</p>
9	Critical care units: Medical ICU Surgical ICU Neonatal/Pediatric ICU	3 weeks (in morning half day)	<p>All above in a critical setting along with availability and choice of specialized investigations necessary for optimum management of a critical patient with ID. Significance and adherence to antibiotic policy and antibiotic stewardship program Infection control in ICU</p>
10	Institutional Superspecialty wing if available Dialysis, Oncology, Cardiology etc	1 week (in morning half day)	To study infections seen in special situations along with their management & prevention approach
	Total duration of posting outside microbiology laboratory	33 weeks	

8. UG Teaching:

Evaluation of STUDENTS SEMINAR PRESENTATION:					
Guidelines for evaluation of Seminar Presentation					
SI. No.	Points to be considered				
1	Whether other relevant publications consulted				
2	Whether cross references have been consulted				
3	Completeness of preparation				
4	Clarity of Presentation				
5	Understanding of subject				
6	Ability to answer questions				
Corollary Grading in all checklists: Poor-0, Satisfactory-1, Average-2, Good-3, Very Good-4.					
SI. No.	Date	Seminar Topic	Presented / Participated	Average Grade*	Name of the Moderator
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Evaluation of JOURNAL REVIEW PRESENTATION:						
Guidelines for evaluation of Journal Review Presentation						
SI. No.	Points to be considered					
1	Article chosen is relevant and appropriate					
2	Extent of understanding of scope & objectives of the paper by the candidate					
3	Whether understood the Material, Methods, Observation and statistical analysis					
4	Whether cross references have been consulted					
5	Ability to respond to questions on the paper / subject					
6	Ability to analyse the paper and co-relate with the existing knowledge					
7	Ability to defend the paper					
8	Clarity of presentation					
Corollary Grading in all checklists: Poor-0, Satisfactory-1, Average-2, Good-3, Very Good-4.						
SI. No.	Date	Journal Topic	Presented / Participated	Average Grade*	Name of the Moderator	Initials of the Moderator
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Evaluation of LABORATORY WORK / BEDSIDE CLINIC:						
Guidelines for evaluation of Laboratory work / Bedside clinic						
SI. No.	Points to be considered					
1	Clarity of Presentation					
2	Completeness of history					
3	Ability to arrive at a differential diagnosis & diagnosis					
4	Ability to defend the diagnosis					
5	Ability to answer questions					
6	Understanding of subject					
Corollary Grading in all checklists: Poor-0, Satisfactory-1, Average-2, Good-3, Very Good-4.						
SI. No.	Date	Topic	Presented / Participated	Average Grade*	Name of the Moderator	Initials of the Moderator
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Evaluation of STUDENTS SYMPOSIUM:						
Guidelines for evaluation of Students symposium						
SI. No.	Points to be considered					
1	Whether other relevant publications consulted					
2	Whether cross references have been consulted					
3	Completeness of preparation					
4	Clarity of Presentation					
5	Understanding of subject					
6	Ability to answer questions					
Corollary Grading in all checklists: Poor-0, Satisfactory-1, Average-2, Good-3, Very Good-4.						
SI. No.	Date	Topic	Presented / Participated	Average Grade*	Name of the Moderator	Initials of the Moderator
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Evaluation of INTERDEPARTMENTAL COLLOQUIUM [CCR / CPC / Autopsy conference:					
Guidelines for evaluation:					
SI. No.	Points to be considered				
1	Completeness of history				
2	Clarity of presentation				
3	Logical order				
4	Accuracy of general physical examination				
5	Diagnosis				
6	Ability to defend diagnosis				
7	Ability to justify differential diagnosis				
8	Ability to plan management of the case				
Corollary Grading in all checklists: Poor-0, Satisfactory-1, Average-2, Good-3, Very Good-4.					
SI. No.	Date	Case History	Diagnosis	Presentation / Participation	Initial of the Guide / HOD
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Evaluation of UG Teaching Skills:						
Guidelines for evaluation of UG Teaching skills:						
SI. No.	Points to be considered					
1	Communication of the purpose of the talk					
2	Evokes the interest of audience in the subject					
3	Introduction & Sequence of ideas					
4	Speaking style [enjoyable / monotonous etc., specify]					
5	Attempts audience participation					
6	Answer the questions asked by the audience					
7	Summary of the main points at the end					
8	Rapport of speaker with his audience					
9	Effectiveness of the talk					
10	Use of AV aids appropriately					
Corollary Grading in all checklists: Poor-0, Satisfactory-1, Average-2, Good-3, Very Good-4.						
SI. No.	Date	Topic of teaching	Class / Practical / Clinics / Demos	Average Grade*	Name of the Supervising faculty	Initials of Guide/ Faculty
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THESIS

(To be submitted for registration of the Thesis topic within six months from the date of joining the course.)

Title of the Topic:

Name of the Guide:

Name of the Co-guide(s) if any:

Guidelines for evaluation of Thesis [Synopsis]				
SI. No.	Points to be considered			
1	Interest shown in selecting a topic			
2	Appropriate review of literature			
3	Discussion with guide and other faculty			
4	Quality of protocol			
5	Preparation of proforma			

Corollary Grading in all checklists: Poor-0, Satisfactory-1, Average-2, Good-3, Very Good-4.

Evaluation of Thesis [Synopsis]:				
SI. No.	Date	Average Grade*	Name of the Faculty & Designation	Initials of the Faculty

Signature of the Candidate:

Signature of the Guide

Signature of the HoD:

THESIS WORK

(To be filled before submitting the dissertation to the University & retained in this book)

Name of the Topic:

Name of the Guide(s):

Date of Registration of Thesis Topic:

Date of approval of the Thesis:

Date of Submission of Thesis:

PERIODIC EVALUATION OF THESIS WORK

Guidelines for periodic evaluation of Thesis			
SI. No.	Points to be considered		
1	Periodic consultation with guide / co-guide		
2	Regular collection of case material		
3	Discussion with guide / co-guide		
4	Departmental presentation of progress of work		
5	Assessment of final output		
6	Others		

Corollary Grading in all checklists: Poor-0, Satisfactory-1, Average-2, Good-3, Very Good-4.

Evaluation of Thesis:			
Date of the review	Average Grade*	Name of the members of the review committee	Initials of the Guide
12 th month			
18 th month			
24 th month			
30 th month			

Signature of the Candidate:

Signature of the Guide

Signature of the HoD:

COMPETENCIES TO BE LEARNT:

C1. The postgraduate student should be able to *perform the following and/or interpret the results independently or as a part of a team*:

Laboratory skills:

- Collect, transport and store appropriate specimens for microbiological investigations.
- Receive and process clinical specimens after appropriate preparation of samples for the appropriate investigation (centrifugation, extraction, mincing concentration etc.) • Processing of samples by various methods like:
 - o Macroscopic/gross examination of samples.
 - o Choose the most appropriate microscopic method for demonstration of pathogens.
 - o Prepare, examine, and demonstrate microbes in direct smears for diagnosis of infectious disease/s.
 - o Isolate and identify pathogenic microbe from clinical specimens (by conventional & automated methods).
 - o Perform, interpret & record antimicrobial susceptibility testing of the isolate.
 - o Perform rapid, conventional and automated serological techniques for diagnosis of infectious diseases and immunological diseases.
- Maintain records and ensure quality control in microbiology.
- Maintain and preserve microbial cultures.
- Operate and maintain instruments used in the laboratory for sterilization and disinfection and patient care with quality control.
- Operate and maintain common laboratory equipment like microscopes, water bath, centrifuge, incubator, automated culture system, micro-centrifuge, ELISA washer and reader etc.
- Perform and assess significance of microbial contamination of food, water and air.
- Biosafety measures - biosafety cabinets, chemical material safety data sheet (MSDS), fire safety, needle stick injury management.
- iv. Gram Staining
- v. Acid Fast staining (with modifications).
- vi. Leishman & Giemsa for demonstration of intracellular pathogen bacteria, parasite, fungi etc.
- vii. Albert staining.
- c. Fluorescent staining
 - i. Auramine staining - Mycobacterium tuberculosis.
 - ii. QBC – for malaria.
 - iii. Calcoflor white staining for fungus
- d. Isolation of pathogens
 - i. Preparation of glass wares
 - ii. Sterilization procedures
- iii. Media preparation-required for isolation & identification
- iv. Quality check of all media - functional as well as sterility check and CRE etc.
- iii. Broth microdilution methods for bacteria and fungi.
- **Immunological tests**
 - i. Collection, preparation and storage of samples
 - ii. Perform Rapid tests / /Latex agglutination/ ICT/ELISA etc
 - Molecular tests

- i. PCR/RTPCR – all steps till interpretation
- ii. CBNAAT
- Biomedical waste management skills.
- Quality control skills in all areas.
- **Clinical Microbiology skills**

(Infectious Disease Case Based Skills)

- i. ability to take and interpret the history of infectious disease case.
- ii. Be able to clinically examine the case and diagnose.
- iii. Take decision for choice of samples to be collected for diagnosis
- iv. Suggest optimum choice of antimicrobial agent to be prescribed with reasons.

- **Infection Prevention and Control Skills-**

- Hand hygiene skills
- Donning and doffing of PPE
- Transmission based precautions in care
- Segregation and disposal of biomedical waste in hospital
- Handling of sharps
- Post-exposure prophylaxis when exposed to blood and body fluids
- Spillage management
- Sterilization policy of environment and devices in the hospital as per guidelines.
- Calculation of HAI infection rates.
- Plan & conduct HAI surveillance & infection control audits.

C 2. Should be able to perform under supervision and/or interpret the results of *the following desirable procedures independently or as a part of a team*:

- Demonstration of microbe by:
- i. IF – autoimmune diseases
- ii. IF – antigen demonstration in fungi/viral infection /cellular changes
- Isolation & Identification using newer automated systems for bacterial identification, Mycobacterial culture and Mycobacterial susceptibility
- Immunological test
- Nephelometry/ turbidometry method for quantitative CRP/ASO/RA test
- Chemiluminescence Immune Assay
- Perform molecular & newer diagnostic tests for diagnosis of infectious disease.

C 3. Should observe the following procedures independently or as a part of a team and/or interpret the results (optional)

- Demonstration of microbes by Electron microscope
- Viral culture & identification of growth of viruses
- Immunological test
- Flowcytometry

- Molecular -
- Genome Sequencing methods
- Molecular typing.

Note: If any of the above facilities are not available in the institute effort to collaborate and post the students in nearby laboratory to acquire the skills shall be made.

Sl. No.	Competency addressed	Nature of Activity	Level of competency achieved}			Signature of the Faculty
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FEEDBACK BY THE STUDENT

(To be filled up at the time of filling up of forms for University Examination. The filled up form is to be sent in a sealed envelope addressed to the Vice-Chancellor, OUHS, Bhubaneswar. It will be opened only after the student has passed.)

Name of Student:

Department:

Period of study: From to

Due date of examination:

Date of submission of Thesis/Topic:

Name of Guide:

Name of H.O.D.:

- i. Do you think that, your goal of pursuing post-graduate education in the subject is achieved: Yes/No
- ii. Do you think that, you have been trained adequately by the department in:
 - a. Professional experience Yes/No
 - b. Academic teaching Yes/No
 - c. Recent advances Yes/No
 - d. Exposure to specialist from outside the institution Yes/No
 - e. Interaction with the patients Yes/No
 - f. Interaction with the colleagues Yes/No
 - g. Interaction with seniors Yes/No
 - h. Thesis/Research Yes/No
 - i. Article preparation Yes/No
 - j. Workshop Yes/No
 - k. Conferences Yes/No
 - l. C M E Yes/No
- iii. Do you think that, you have been trained as a fairly competent consultant: Yes/No
- iv. Were you harassed by your guide during the training period: Yes/No, if yes Name &Type:
- v. What was the attitude of HOD?:

- vi. What was attitude of other staff members:
- vii. Were you forced for anything by anybody: Money/Tuition/Gifts/Other/None, if yes then by Whom:
-
- viii. Any comment about interaction with other depts./colleague:
- ix. Hostel:
- x. Extra-curricular activity
- a. Sports
 - b. Cultural
- xi. Teaching aids:
- xii. Library:
- a. Central
 - b. Department
- xiii. Work place safety:
- xiv. Deficiencies you would like to point out particularly:
- xv. Brief comments:

Signature & Date

Student appraisal form for MD in Microbiology

	Elements	Less than Satisfactory			Satisfactory			More than satisfactory			Comments
		1	2	3	4	5	6	7	8	9	
1	Scholastic aptitude and learning										
1.1	Has knowledge appropriate for level of training										
1.2	Participation and contribution to learning activity (e.g., Journal Club, Seminars, CME etc)										
1.3	Conduct of research and other scholarly activity assigned(e.g Posters, publications etc)										
1.4	Documentation of acquisition of competence (eg Log book)										
1.5	Performance in work based assessments										
1.6	Self-directed Learning										
2	Work related to training										
2.1	Practical skills that are appropriate for the level of training										
2.2	Respect for processes and procedures in the work space										
2.3	Ability to work with other members of the team										

2.4	Participation and compliance with the quality improvement process at the work environment									
2.5	Ability to record and document work accurately and appropriate for level of training									
3	Professional attributes									
3.1	Responsibility and accountability									
3.2	Contribution to growth of learning of the team									
3.3	Conduct that is ethically appropriate and respectful at all times									
4	Space for additional comments									
5	Disposition									
	Has this assessment pattern been discussed with the trainee?	Yes	No							
	If not explain.									
	Name and Signature of the assesee									
	Name and Signature of the assessor									
	Date									