



**GENERAL MEDICINE LOGBOOK
YEAR 3 - BDS**

NAME: _____

ROLL NUMBER #: _____

Student Information

Purpose of Clinical Rotation

The purpose of the clinical rotation is to provide students with supervised exposure to real patients to integrate theoretical knowledge with clinical practice, develop basic clinical skills, and understand the medical conditions that influence dental treatment.

Aim of Log Book Maintenance

The aim of maintaining the log book is to ensure systematic documentation of clinical learning, patient encounters, and skill development, to promote reflective learning, and to provide a record for assessment and faculty feedback.

Learning Outcomes of clinical rotations

Clinical rotation is one of the integral parts of undergraduate dental students that start in the 3rd year of their program. Clinical skills learning requires the exposure of students to clinical environment. This exposure is preceded by skill laboratory training according to a set of learning objectives defined in the curriculum. The objectives of these rotations include:

- Elicit relevant medical history and perform focused physical examinations.
- Identify common medical conditions affecting dental treatment.
- Integrate theoretical knowledge from lectures and books into clinical reasoning.
- Evaluate patient fitness for dental procedures and recognize high-risk patients.
- Adapt dental treatment plans according to systemic illnesses and medications.
- Detect and manage common medical emergencies in dental practice.
- Communicate effectively with patients and healthcare professionals.
- Demonstrate professionalism, ethical conduct, and respect in patient care.
- Apply principles of patient safety and understand hospital organization and the role of doctors in clinical settings.

Module-based Learning Objectives

Module 1 Foundation

By the end of this module, the student shall be able to:

- Elicit, record and present a focused and complete medical history in the ward.
- Communicate and counsel patients using simple language and appropriate verbal and non-verbal skills.
- Assess patient understanding and respect autonomy and cultural beliefs.
- Demonstrate empathy, professionalism, privacy, and confidentiality during patient interaction.
- Elicit and classify cardinal medical symptoms and relate them to common diseases during case presentation.
- Demonstrate a structured and compassionate approach to breaking bad news under supervision.
- Measure and record vital signs accurately using appropriate instruments.

- Perform general physical examination according to a proper scheme.
- Identify and present abnormal general physical signs using standard medical terminology.
- Seek informed consent and maintain patient dignity during examination.

Module 2 Blood and Immunology

By the end of this module, the student shall be able to:

- Elicit, present and document focused history in patients with anemia, leukemia, lymphoma, HIV, SLE, pulmonary embolism, hypersensitivity reaction and bleeding disorders.
- Identify relevant clinical features including pallor, shock, lymphadenopathy, petechia, butterfly rash etc.
- Interpret CBC reports of different types of anemia, leukemia and platelet disorders.
- Interpret coagulation profile.
- Recognize common clinical features of SLE, hemophilia, ITP and HIV.
- Identify drugs interfering with hemostasis, including antiplatelets, anticoagulants and thrombolytic agents.
- Elicit drug history related to blood thinners and assess bleeding risk.
- Counsel patients with SLE, HIV and bleeding disorders regarding disease, treatment and follow-up.
- Demonstrate appropriate communication skills while dealing with chronic and serious illnesses.
- Demonstrate a structured and compassionate approach to breaking bad news in leukemia, lymphoma and HIV.
- Observe blood transfusion, understand principal of management of anaphylactic and cardiogenic shock.
- Apply infection control and safety precautions while examining patients with HIV and bleeding disorders.
- Recognize and explain dental implications and precautions in patients with hematological, bleeding disorders, and those on blood thinners.
- Plan post exposure prophylaxis after needle stick injury from HIV positive patient

Module 3: Craniofacial

By the end of this module, the student shall be able to:

- Elicit and present focused history in patients with headache , trigeminal neuralgia (TN), giant cell arteritis (GCA), epilepsy, cerebrovascular accident (CVA), Guillain-Barré syndrome (GBS), metabolic bone disease and acromegaly.
- Identify the red flags in neurological history.
- Perform relevant general and neurological examination including assessment of consciousness, motor power, reflexes and cranial nerves.
- Identify clinical features of seizures, stroke, and facial nerve weakness.
- Demonstrate examination of facial nerve function and differentiate between upper and lower motor neuron facial palsy.
- Identify drugs and their side effects used epilepsy and metabolic bone disease
- Counsel patients and attendants regarding epilepsy, stroke, metabolic bone disease and acromegaly.
- Demonstrate appropriate communication skills while dealing with chronic neurological and disabling conditions.
- Apply precautions in patients with seizures and stroke in dental practice.

Module 4: Cervicofacial

By the end of this module, the student shall be able to:

- Elicit and present focused history in patients with thyroid disorders, meningitis, Parkinson's disease, tetanus, rheumatoid arthritis, ankylosing spondylitis and other seronegative arthritides.
- Perform relevant general, neurological and musculoskeletal examination in ward patients.
- Identify clinical features of meningitis, Parkinsonism, tetanus and thyroid dysfunction.
- Identify clinical features of arthritis and differentiate between different types of arthritis based on history and clinical examination.
- Identify immunosuppressants, biologics and steroids and recognize their side effects.
- Counsel patients regarding chronic rheumatological and thyroid disease and importance of treatment adherence.
- Demonstrate appropriate communication skills while dealing with disabling and long-term illnesses.
- Modify dental treatment and chair positioning to accommodate limited joint mobility and ensure patient comfort.

- Recognize drug interactions and precautions related to arthritis medications (NSAIDs, corticosteroids, DMARDs) during dental procedures.

Module 5 Cardiopulmonary

By the end of this module, the student shall be able to:

- Elicit and present focused history in patients with IHD, heart failure, hypertension, valvular heart disease, rheumatic heart disease and infective endocarditis.
- Elicit and present focused history in patients with asthma, COPD, pneumonia, tuberculosis, bronchiectasis, lung cancer, COVID-19.
- Perform relevant cardiovascular and respiratory system examination in ward patients.
- Identify clinical features of important cardiopulmonary pathologies.
- Recognize and document chest signs of consolidation, effusion, pneumothorax, Asthma/COPD, heart failure, and valvular heart disease.
- Interpret CXR of Pneumothorax, pleural effusion, consolidation, infiltrates, pulmonary edema, lung mass
- Interpret normal ECG. Waves, Rate rhythm etc
- Recognize ECG changes of MI and Tachyarrhythmias
- Interpret ABGs and Pulmonary function tests
- Identify the main instruments present in cardiology and pulmonology ward e.g. ECG machine, defibrillator, nebulizer, nasal prongs, oxygen mask, NRM, venturi mask. air way, ETT, CVP etc
- Perform nebulization and insertion of airway under supervision.
- Observe ECG, Pleural fluid aspiration.
- Perform Basic life support on manikin.
- Counsel patients of IHD, TB, OAD, VHD regarding disease course, drug compliance and side effects, and relevant lifestyle modification.
- Apply infection control and safety precautions in patients with TB and COVID-19.
- Recognize red-flag signs requiring urgent referral (severe chest pain, hypo/hypertension, cyanosis, altered consciousness).
- Identify high-risk patients requiring prophylactic antibiotics prior to dental procedures.
- Assess cardiovascular risk before dental treatment in patients with hypertension and ischemic heart disease.
- Demonstrate safe use and dose limitation of local anesthetics containing adrenaline in hypertensive and cardiac patients.

- Assess dental patients with angina and asthma in the ward and dental setting using appropriate precautions.
- Identify common drugs used in IHD (antiplatelets, anticoagulants, beta-blockers, nitrates) and their side effects and dental implications.
- Assess bleeding risk and drug interactions in patients receiving antiplatelet and anticoagulant therapy.
- Identify patients on long-term steroid therapy and assess the need for steroid cover before dental procedures.

Module 6 Genitourinary

By the end of this module, the student shall be able to:

- Elicit and present focused history in patients with hepatitis, chronic liver disease and its complications, peptic ulcer disease, acute gastroenteritis, malabsorption, celiac disease and inflammatory bowel disease.
- Elicit and present focused history in patients with diabetes mellitus, Addison's disease and Cushing's syndrome.
- Elicit and present focused history in patients with acute kidney injury, chronic kidney disease and glomerulonephritis.
- Perform relevant general physical examination to identify jaundice, dehydration, edema and signs of CLD and CKD and malabsorption, Cushing's syndrome
- Perform Abdominal examination and relevant GPE.
- Recognize clinical features of ascites, portal HTN, acute hepatitis and renal disease.
- Interpret the important lab reports pertaining to GU disorders e.g metabolic disorders in ABGs, viral serology, LFTs, RFTs, HBA1c, urine analysis
- Observe ascitic fluid aspiration and NG tube insertion
- Identify NG tube, double lumen catheter, foley's catheter, urine bag.
- Counsel patients regarding diet, drug compliance and follow-up in chronic liver, diabetic and renal disease.
- Demonstrate appropriate communication skills while dealing with chronic and serious illnesses.
- Apply infection control and safety precautions in patients with hepatitis and renal disease.
- Identify systemic complications that may affect dental treatment (bleeding tendency in CLD, delayed healing in DM, steroid dependence in Addison's/Cushing's, uremia in CKD).

- Recognize oral manifestations associated with systemic diseases (e.g., mucosal pallor in anemia, xerostomia in CKD/DM, bleeding gums in liver disease).
- Assess drug interactions in patients with hepatic, renal or endocrine disorders.
- Modify dental treatment and drug prescriptions according to patient's renal/liver condition.
- Plan post exposure prophylaxis after needle stick injury from HCV and HBV positive patient

History Sheet

Patient Identification

Name	Age
Gender	Ward/Unit
Residence	Profession
Hospital No	Date of Admission

Chief Complaints (chronological order)

History of Present Illness

Review of Systems

CARDIOVASCULAR • Chest pain? (site, radiation, exertional?) • Shortness of breath? (on exertion / at rest / PND / orthopnea) • Palpitations? • Swelling of feet? • Fainting or dizziness?	RESPIRATORY • Cough? (dry/productive) • Sputum? (color, amount, blood?) • Shortness of breath? • Wheeze? • Chest pain on breathing? • Night sweats?	GASTROINTESTINAL • Appetite? • Nausea or vomiting? • Abdominal pain? • Change in bowel habits? • Blood in stool or black stools? • Jaundice or itching? • Abdominal distension?
CENTRAL NERVOUS SYSTEM • Headache? • Fits or loss of consciousness? • Weakness of limbs? • Speech difficulty? • Visual problems? • Altered behavior or memory loss? • Tingling or numbness?	GENITOURINARY • Burning micturition? • Increased frequency or urgency? • Blood in urine? • Decreased urine output? • Flank pain? • Incontinence?	MUSCULOSKELETAL • Joint pain or swelling? • Morning stiffness? • Restricted movement? • Muscle pain or weakness? • Deformities?
ENDOCRINE (if weight change, fatigue, polyuria) • Weight gain or loss? • Heat or cold intolerance? • Excessive thirst or urination? • Tremors? • Excessive sweating? • Menstrual irregularities?	GENERAL / CONSTITUTIONAL • Fever? • Weight loss? • Loss of appetite? • Night sweats? • Fatigue?	

Examination

Vital signs

Pulse	BP
Temperature	Respiratory Rate
SpO2	

General Physical Examination

General Appearance • Conscious level: Alert / Drowsy / Unconscious • Orientation: Time / Place / Person • Build: Thin / Average / Obese • Muscle wasting • Posture: • Gait: • Distress: Comfortable / In pain / Dyspneic • Body movements: Tremors / Tics / Rigidity • Hydration	Skin • Color: Pallor/ cyanosis • Texture: Smooth / Dry / Rough • Temperature: Warm / Cold • Rash / Petechiae / Purpura • Bruises / Ecchymosis • Scar / Surgical marks	Face • Facial puffiness • Plethoric face • Malar rash • Moon face • Sunken eyes • Facial asymmetry
Eyes • Conjunctiva: Pink / Pale • Sclera: White / Icteric • Pupils: Equal & reactive to light • Proptosis • Xanthelasma	Mouth & Oral Cavity • Lips: Normal / Cyanosed / Cracked • Tongue: Moist / Dry / Coated / Smooth (glossitis) • Gums: Normal / Bleeding • Oral ulcers: Present / Absent • Teeth: Normal / Caries	Neck • Jugular venous pressure (JVP): • Thyroid • Neck veins • Neck rigidity • Lymph nodes • Anterior cervical • Posterior cervical • Preauricular • Post auricular • Mental • Submandibular • supraclavicular

Hands • Pallor • Clubbing • Cyanosis • Koilonychia • Leukonychia • Splinter hemorrhages • Tremors • Palmar erythema • Dupuytren's contracture	Lower Limbs • Edema • Varicose veins • Calf tenderness • Skin discoloration/ulcers: • Peripheral pulses:	
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Systemic Examination

CARDIOVASCULAR SYSTEM Inspection • Precordial bulge • Visible pulsations • Surgical scars • Apex beat visible Palpation • Apex beat: site, character • Parasternal heave • Thrills Percussion • Cardiac borders • Cardiac dullness Auscultation • Heart sounds: S1 / S2 (normal / soft / loud) • Added sounds: S3 / S4 • Murmurs: site, timing, radiation	RESPIRATORY SYSTEM Inspection • Shape of chest • Symmetry of movements • Use of accessory muscles • Scars / deformities Palpation • Tracheal position • Chest expansion • Vocal fremitus Percussion • Resonant / dull / hyper-resonant Auscultation • Breath sounds: vesicular / bronchial • Added sounds: crepitations / wheeze / rhonchi • Vocal resonance	ABDOMEN Inspection • Shape & contour • Movement with respiration • Scars / striae / dilated veins • Umbilicus Palpation • Tenderness • Liver • Spleen • Kidneys • Masses Percussion • Liver span • Splenic dullness • Ascites (shifting dullness / fluid thrill) Auscultation • Bowel sounds • Bruits
CENTRAL NERVOUS SYSTEM Higher Mental Functions • Consciousness	CN I – Olfactory • Sense of smell CN II – Optic • Visual acuity	CN VIII – Vestibulocochlear • Hearing • Balance • Rinne & Weber tests

• Orientation • Memory • Speech Motor System • Bulk • Tone • Power (grade 0–5) Reflexes • Deep tendon reflexes • Plantar response Sensory System • Pain • Touch • Temperature • Proprioception Cerebellar Signs • Gait • Finger-nose test • Heel-shin test • Nystagmus	• Visual fields • Fundoscopy • Pupillary reflex CN III, IV, VI – Oculomotor, Trochlear, Abducent • Eye movements • Ptosis • Pupil size & reaction CN V – Trigeminal • Facial sensation • Muscles of mastication • Corneal reflex CN VII – Facial • Facial symmetry • Forehead wrinkling • Eye closure	CN IX & X – Glossopharyngeal & Vagus • Palatal movement • Gag reflex • Voice quality • Swallowing CN XI – Accessory • Shoulder shrug • Head turning CN XII – Hypoglossal • Tongue protrusion • Deviation • Fasciculations MUSCULOSKELETAL SYSTEM • Joint swelling • Deformities • Tenderness • Range of motion • Muscle power
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Investigations

Provisional Diagnosis

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Differential Diagnosis

Final Diagnosis

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Management Plan

Workplace evaluation (after every history presentation)

Ward

Tutor Name

Time

Date

Date	Competency	Level of competency A: Observer status(Imitation) B: Under supervision(Manipulation) C: Do independently(Precision) D: Integrated skills(combine skill with communication and interpretation)				Supervisor's Comments and signature
		A	B	C	D	
	History Taking					
	Counselling					
	Breaking bad news					
	Examination					
	Vital signs					
	General Physical					
	Cardiovascular					

	Respiratory system					
	GIT					
	CNS					
	Cranial Nerves					
	Procedures					
	IV cannula insertion					
	Venesection					
	NG insertion					
	Airway insertion					
	Nebulization					
	Oxygen therapy					
	nasal prongs					
	Face mask					
	NRM					
	Venturi mask					
	ECG					
	Ascitic fluid aspiration					
	Pleural fluid aspiration					
	Others (Specify)					

MINI-CEX (Mini Clinical Evaluation Exercise) (At the end of each module)

Student Name: _____

Roll No: _____

Ward/Unit: _____

Date: _____

Case/Problem: _____

Setting: OPD / Ward / ER

AREAS ASSESSED

Domain

NI OS DS I

History taking	☐	☐	☐	☐
Physical examination	☐	☐	☐	☐
Clinical reasoning (Dx C plan)	☐	☐	☐	☐
Communication skills	☐	☐	☐	☐
Professionalism	☐	☐	☐	☐

Overall performance

☐ NI ☐ OS ☐ DS ☐ I

Feedback

Strengths: _____

Areas for improvement: _____

Observer/Supervisor Name: _____

Signature: _____

Designation: _____

Time spent observing: ____ min

Time spent in feedback: ____ min

Performance levels scaling

NI - Needs Instruction

 Unable to perform task, requires full guidance

OS - Under Supervision

 Performs with frequent help and correction

DS - With Minimal Supervision

 Performs most steps correctly, needs occasional help

I - Independent

 Performs correctly without help