



## Patient Encounter Log

### Clerkship rotation in Obstetrics and Gynecology

Name \_\_\_\_\_

Period of rotation \_\_\_\_\_ to \_\_\_\_\_, 20\_\_\_\_

Please track the clinical encounters as they occur (in the adjacent boxes, two encounters per item), and **log these into the Assess.med** as you go along the rotation. These are the minimal requirements for satisfactory completion of the clerkship rotation in Obstetrics and Gynecology. If any areas are deficient midway through the rotation, please inform your preceptor so that modifications in your schedule may be made as needed.

**Assessment of a patient with the following conditions:**

First prenatal visit (clinic)		
GHTN/preeclampsia (labor ward)		
Preterm labor/PPROM (labor ward)		
Urinary incontinence /infertility/menopause/malignancy (clinic)		
Menstrual disorder (clinic)		
Postpartum exam/contraception counselling (clinic)		

**Performance of/participation in the following:**

Pelvic exam/PAP smear		
Laparoscopy/laparotomy		
Vaginal delivery		
Cesarean delivery		