الهيئة السعودية للتخصصات الصحية
Saudi Commission for Health Specialties

Transplant Hepatology

@SchsOrg
www.scfhs.org.sa | مجتمع صحي بكفاءة

2018

بسم الله الرحمن الرحيم

الهيئة السعودية للتخصصات الصحية
Saudi Commission for Health Specialties

SAUDI FELLOWSHIP
TRANSPLANT HEPATOLOGY CURRICULUM

PREPARTION

Curriculum Scientific Group

DR. FAISAL BATWA
DR. ABDULRAHMAN ALROBAYAAN
DR. ABDULRAHMAN ALFADDA
DR. MOHAMMED ALGHAMDI
DR. ABDULLAH ALGHAMDI
DR. RAED SULIMAN
DR. MOHAMMED ALBISHR
DR. ADEL QUTUB
DR. AYMAN ALQRAIQRI
DR. MAJED ALMADI

SUPERVISION

Curriculum Specialist

PROF. ZUBAIR AMIN
DR. SAMI ALSHAMMARI

REVIEWED & APPROVED

Scientific Council

DR. ADEL QUTUB
DR. FAISAL BATWA
DR. MOHAMMED ALGHAMDI
DR. HUMOUD ALGHAMDI

2018

All rights reserved. © 2018 Saudi Commission for Health Specialties.

This material may not be reproduced, displayed, modified, distributed, or used in any other manner without prior written permission of the Saudi Commission for Health Specialties, Riyadh, Kingdom of Saudi Arabia.

Any amendment to this document shall be approved by the Specialty Scientific Council and the Executive Council of the commission and shall be considered effective from the date the updated electronic version of this curriculum was published on the commission Web site, unless a different implementation date has been mentioned.

We would also like to acknowledge that the CanMEDS framework is a copyright of the Royal College of Physicians and Surgeons of Canada, and many of the description's competencies have been acquired from their resources (Please refer to: CanMEDS 2015 physician competency framework; Frank JR, Snell L, Sherbino J, editors. CanMEDS 2015 Physician Competency Framework. Ottawa: Royal College of Physicians and Surgeons of Canada; 2015.).

Correspondence:
Saudi Commission for Health Specialties
P.O. Box: 94656
Postal Code: 11614
Contact Center: 920019393

E-mail: systemadmin@scfhs.org
Website: www.scfhs.org.sa

Formatted and Designed by:
Manoj Thomas Varghese, CMT (SCFHS)

ACKNOWLEDGEMENTS

All members of the Adult Gastroenterology Scientific Committee and the Transplant Hepatology Curriculum Committee actively participated in the development of this curriculum. The Transplant Hepatology Curriculum Committee members wish to extend their gratitude to Associate Professor Zubair Amin and Dr. Sami Alayed for their valuable advice.

The Adult Gastroenterology Scientific Committee members extend their gratitude to the following national experts for their role in guiding the development of this curriculum as members of the national advisory committee:

Dr. Abdulrahman Aljomaah
Dr. Ibrahim Alturaif
Dr. Naser Almasri
Dr. Faisal Abalkhail
Dr. Khaled Alsuwat
Dr. Faisal Sanai
Dr. Abdullah Saeed Alghamdi
Dr. Hamad Alashqar
Dr. Mohammed Alghamdi
Dr. Adel Qutub

TABLE OF CONTENTS

I. INTRODUCTION 4
II. PROGRAM REQUIREMENTS 5
Fellowship Eligibility Criteria 5
Faculty & Medical Center Qualifications 5
III. PROGRAM STRUCTURE 6
Rotations 1 & 2 (8 blocks) 6
Rotation 3 (2 blocks) 6
Rotation 4 (2 blocks) 6
Vacation 6
IV. CLINICAL AND ACADEMIC RESPONSIBILITIES 7
Clinical Duties 7
Academic Conferences 7
Research Requirements 7
Medical Expertise 7
A. Core specialty topics 8
B. Trainee-selected topics 9
V. EVALUATION AND ASSESSMENT 10
VI. CANMEDS OBJECTIVES 12
Medical Expert 12
Communicator 12
Collaborator 13
Healthcare Leader 13
Health Advocate 13
Scholar 13
Professional 13
VII. LEARNING RESOURCES 14
Suggested Resources 14
VIII. LOGBOOKS & PORTFOLIO 16
Liver Transplantation Fellow Portfolio 16
Introduction 16
Ten Tips For New Transplant Hepatology Fellows 16
Personal Information 17
Curriculum Vitae: Suggested Template 18
Personal Development Plan (PDP) 19
Educational Training Events 21
Logbook 23
Logbook Form 23
Reflections 25

I. INTRODUCTION

The field of Clinical Hepatology continues to develop and expand resulting in an increased number of liver transplantations performed in the Kingdom of Saudi Arabia where the average number of new cases per year has risen to 150. Liver transplants are most commonly performed for the treatment of hepatitis C and B-related liver cirrhosis and hepatoma. The introduction of effective hepatitis screening, vaccination, and treatment has led to the need for an increased number of physicians specialized in clinical hepatology and transplant medicine. These physicians must be qualified to manage a variety of liver diseases and provide perioperative care for patients who require liver transplantation. This need can be met by an accredited fellowship training program that allows physicians to gain proficiency in the fields of general hepatology and liver transplantation.

The primary aim of the Transplant Hepatology Fellowship Training Program is to produce gastroenterologists specialized in the treatment of disorders of the liver and both short- and long-term management of liver transplant cases. This one-year fellowship is offered to physicians who have completed a three-year fellowship in gastroenterology and certified gastroenterologists who wish to pursue further training. The program is designed to promote expertise in the field of general hepatology with a focus on liver transplantation.

The Canadian Medical Education Directives for Specialists (CanMEDS) framework is applied in postgraduate training programs in many countries. This system provides a model of physician competencies that emphasizes not only medical expertise but also many non-medical roles with an aim to better serve society's needs. Therefore, the Saudi Commission For Health Specialties (SCFHS) is adopting the CanMEDS framework to establish the core curriculum of all medical training programs.

II. PROGRAM REQUIREMENTS

Please refer to the updated executive policy of SCFHS on admission and registration.
Website: www.scfhs.org.sa

III. PROGRAM STRUCTURE

This one-year program is composed of four rotations divided into thirteen 4-week blocks. Currently, two accredited liver transplant centers are actively participating in the fellowship program, and the core of liver transplant training is conducted at these facilities. Up to two fellows are accepted per year, and one rotates at each center during the same period.

Trainees have the opportunity to supervise a general hepatology outpatient clinic service, provide inpatient care, and staff pre- and post-transplant clinics. Fellows will gain experience in the treatment of the hepatic diseases that most commonly lead to liver transplantation in Saudi Arabia, including fatty liver, hepatitis B and C, and hepatocellular carcinoma.

Rotations 1 & 2 (8 blocks)

Each rotation is four blocks and will be performed at one of the two accredited liver transplant centers. The fellow will be scheduled to perform inpatient and outpatient services (pre-and post-transplant clinics).

Rotation 3 (2 blocks)

The fellow will perform eight weeks of elective rotations at an accredited training program in a specialty area selected from the following list:

1. Transplant Hepatology
2. General Hepatology
3. Hepatic Pathology
4. Hepatic Radiology
5. Pediatric Hepatology
6. Pediatric Liver Transplant

Alternatively, the trainee may work on a research project.

Rotation 4 (2 blocks)

The fellow will have eight weeks of dedicated Hepatology Clinic time (no inpatient care) during which time the trainee can complete his or her research.

Vacation

- Vacation (1 block + one Eid holiday)
- Vacation time may be taken at any period throughout the year.

IV. CLINICAL AND ACADEMIC RESPONSIBILITIES

Clinical Duties

- Inpatient coverage
- Outpatient clinic (pre- and post-transplant and general hepatology clinics)
- Endoscopy
- Liver biopsy
- Fibroscan/ Elastography
- Case presentation
- Consultations
- On-call coverage (minimum one week every four weeks, maximum one every two weeks)

The fellow is expected to progress toward independent management of all aspects of hepatology and liver transplantation including disease workup, diagnosis, and treatment, and planning for acute and chronic care. The fellow is required to attend a minimum of five transplant surgeries.

Academic Conferences

- Hepatology grand rounds (weekly)
- Tumor board meetings (weekly)
- Hepato-pathology meetings (biweekly)
- Radiology meetings (biweekly)
- Hepatology journal club (monthly)

Academic and clinical activities during rotations include grand rounds; ward rounds; journal clubs; radiology, liver pathology, and tumor board meetings; and transplant selection. Trainees are required to participate and share case presentations at conferences and lectures actively. Attendance at all training center conferences, including grand rounds, is encouraged.

Research Requirements

Trainees are required to participate in available research opportunities and attend local, national, and international conferences actively. By the end of the program, the trainee is expected to have conducted a supervised research project and submitted a final draft of their study report for publication. This report should be an abstract at the minimum.

Medical Expertise

In keeping with their background in Internal Medicine and General Gastroenterology, fellows will emphasize the acquisition of knowledge, clinical and technical skills, and attitudes appropriate to the practice of Hepatology and liver transplantation.

A. Core specialty topics

Upon successful completion of the training program, fellows will demonstrate a competent understanding of the core specialty topics:

1. Viral hepatitis

- In-depth knowledge of the assessment and management of acute and chronic viral liver diseases
- Understand the biochemical, histologic, and serologic tests used to diagnose and monitor disease progression and assess treatment efficacy
- Knowledge of the implications of co-infection with two or more viral diseases

2. Non-alcoholic fatty liver and steatosis

- Knowledge of the assessment and management of non-alcoholic fatty liver disease
- (NAFLD) and non-alcoholic steatohepatitis (NASH)
- Understand the pathogenesis of NAFLD and NASH and risk factors for progression to cirrhosis
- Familiarity with the available treatment options and the importance of counseling patients regarding lifestyle modifications and risk reduction

3. Diagnosis and treatment of alcoholic liver disease

- In-depth knowledge of the proper assessment and management of patients with alcoholic liver disease
- Understand the effects of alcoholic liver disease in the context of hepatic diseases and other conditions
- Develop awareness of the cultural and psychosocial factors of alcoholism and liver disease.

4. Hepatic cirrhosis

- Understand the initial assessment of patients with cirrhosis and workup for causes and complications
- Recognize the importance of follow-up and demonstrate knowledge of the complications and therapeutic options

5. Autoimmune hepatitis

- Knowledge of the prevalence and clinical manifestations of autoimmune hepatitis
- Knowledge of the diagnostic criteria and indications for treatment and cessation of therapy

6. Management of liver transplant patients

- Understand the pre- and post-transplant needs of patients who require a liver transplant
- Detailed knowledge about the liver transplant indications guidelines and outcomes in patients with different liver diseases
- Familiarity with the risk of post-transplant primary disease recurrence and the appropriate preventive and treatment measures

B. Trainee-selected topics

Fellows will select a list of topics relevant to their needs to be delivered to the local hospital. The list requires the approval of the local education committee and the institution might work with the fellows on topic selection as well.

Examples of topics include:

- Congenital disorders of bilirubin metabolism
- Transplant immunology and management
- Ethical considerations in the management of chronic liver diseases and liver transplantation

V. EVALUATION AND ASSESSMENT

Clinical performance will be monitored throughout the year. Within two weeks of the end of each rotation, the site program director in charge of the rotation will submit a written evaluation. The end-of-rotation evaluation will be discussed with and signed by the trainee. The trainee is also entitled to receive verbal mid-rotation feedback from the site program director.

The fellow is required to maintain a continuously updated portfolio. This record of progress will be reviewed with the program director at the end of each 4-week block. The fellow is expected to document attendance at a minimum of five liver transplant surgeries. At least 50 gastroscopic banding and sclerotherapy procedures (combined total) are required and should be logged in the portfolio by the end of the training period.

Longitudinal assessment of each trainee's progress will be regularly reviewed by the local program director. The following tools will be used to progress within the training program:

Assessment Tool	Evaluator	Timing and Frequency	Subject of Assessment
Monthly rotation evaluations	Site program director/local program director	Collected at the end of the year and averaged	Global performance
Case-based discussions	Site program director/site consultant	Once a month (10 sets in total)	Clinical skills: problem-solving; data interpretation; history-taking; physical examination Depth of knowledge
Portfolio	Site program director	Reviewed monthly	Procedure competency; reflections
Research	Scientific Committee	Oral/poster presentation at an annual meeting	Data collection; analysis; synthesis; research skills
End-of-year structured oral examination	SCFHS examination committee	End of the academic year	Depth of Knowledge, decision-making skills
End-of-year written examination	SCFHS examination committee	End of the academic year	Knowledge

The supervising consultant/team will provide the training committee and program director with the results of trainee evaluations. A score of 60 % or more by the various assessment tools is required for passage. Fellows will be awarded a Saudi Council for Health Specialties Certificate of Fellowship Training upon satisfactory completion of the program requirements.

The trainee should receive verbal feedback at the end of each week and a written evaluation at the end of each month by individual supervisors. A final written evaluation will be provided to the fellow that addresses each section of the CanMEDS objectives. This report will be a composite of the evaluations from all supervisors directly involved in the individual's training. Fellows will also have an opportunity to evaluate each supervisor's teaching and clinical direction and assess the overall training experience.

The “Case-based Discussion” is one method used to evaluate the trainee’s management of a complex case and is designed to enable the clinical supervisor to provide structured feedback on a recent clinical case. The discussion consists of a focused, structured interview of the trainee conducted by a supervisor and based on the trainee’s written case records. It is neither an informal conversation nor a formal examination, but rather a process that has both a grading element and a feedback function.

VI. CANMEDS OBJECTIVES

By the end of the fellowship, the trainee is expected to demonstrate proficiency in each of the following competencies:

Medical Expert

- Discuss the approach to patients with abnormal liver enzymes, including transaminitis and cholestatic enzyme abnormalities
- Integrate all the CanMEDS roles and apply medical knowledge, clinical skills, and professional attitudes to the provision of patient-centered care
- Acquire knowledge of the epidemiology, natural history, diagnosis, treatment, and prognosis of liver diseases including:
  - Viral hepatitis (A, B, C, D, E, and Epstein-Barr virus) with or without human immunodeficiency virus coinfection
  - Alcoholic liver disease and alcoholic hepatitis
  - Non-alcoholic fatty liver disease (NAFLD) and non-alcoholic steatohepatitis (NASH)
  - Autoimmune hepatitis, primary biliary cirrhosis (PBC), primary sclerosing cholangitis (PSC), and overlap syndromes
  - Inherited liver diseases – hemochromatosis, Wilson's disease, Alpha-1 antitrypsin disease
- Discuss the approach to and diagnostic criteria and management of benign and malignant liver masses
- Discuss the management of patients with decompensated liver cirrhosis, including the indications, contraindications, and workup for liver transplantation
- Discuss post-liver transplantation management focusing on hepatic and non-hepatic complications both in the acute and chronic setting
- Describe the indications for liver biopsy; hepatic imaging modalities including computed tomography, magnetic resonance-based techniques (magnetic resonance imaging, magnetic resonance angiography, magnetic resonance cholangiography), hepatic angiography, and ultrasound (including Doppler evaluation of hepatic vasculature); and transjugular intrahepatic portosystemic shunt (TIPS) in the evaluation and management of liver diseases

Communicator

- Communicate difficult diagnoses to patients in a professional manner
- Facilitate healthy patient-doctor and medical team relationships
- Communicate risk reduction strategies to patients with a communicable disease
- Create and sustain a therapeutic and ethically sound relationship with patients who have advanced liver disease and their families
- Counsel and educate patients and families about liver disease-related health issues and organ transplantation
- Work with others as an effective team member

Collaborator

- Develop an awareness of the multidisciplinary management of hepatobiliary diseases
- Establish a collaborative relationship between the hepatobiliary surgery, radiology, and hepatology teams
- Develop the ability to skillfully manage patients in collaboration with another medical institution such as a liver transplant center

Healthcare Leader

- Develop an awareness of community resources available to assist hepatology patients
- Effectively utilize consultants and diagnostic services (radiology and pathology)
- Understand liver disease resource allocations, especially as they affect liver transplantation
- Appreciate the complexity of the processes for obtaining government funding for medications used to treat viral hepatitis

Health Advocate

- Develop an awareness of the process for evaluating liver transplantation candidates
- Effectively enhance and promote the health of patients and communities.
- Institute necessary preventative measures in patients with liver disorders, including hepatitis A and B vaccinations and other appropriate adult inoculations and prophylactic antibiotics in patients with cirrhosis and gastrointestinal bleeding or a history of spontaneous bacterial peritonitis
- Provide hepatoma screening when appropriate

Scholar

- Utilize medical literature, especially relevant clinical trials, to guide treatment recommendations
- Identify clinical research trials based on patient diagnosis and history
- Author at least one published research abstract or article

Professional

- Demonstrate strategies that maintain and advance professional competence
- Effectively self-evaluate one's professional knowledge, skills, and limitations
- Provide patient care in a manner that demonstrates integrity, respect, compassion, and empathy
- Interact with team members in a punctual, dutiful, and respectful manner

VII. LEARNING RESOURCES

Suggested Resources

Suggested Textbooks		
Name	**Authors**	**ISBN**
Sleisenger and Fordtran's Gastrointestinal and Liver Disease Pathophysiology, Diagnosis, Management (10th Edition)	Mark Feldman, Lawrence S. Friedman, and Lawrence J. Brandt	ISBN 978-1-4557-4692-7
Zakim and Boyer's Hepatology: A Textbook of Liver Disease (7th Edition)	Arun J. Sanyal, MBBS, MD; Thomas D. Boyer, MD; Norah A Terrault, MD, MPH; and Keith D Lindor, MD	ISBN-13: 978-0323375917
Medical Care of the Liver Transplant Patient	Edited by Paul G. Killenberg and Pierre-Alain Clavien by Blackwell Publishing Ltd	ISBN: 9781405130325

Suggested Professional Societies	
Society	**Official Website**
Saudi Association for the Study of Liver diseases and Transplantation (SASLT)	http://www.saslt.org
American Association for the Study of Liver Diseases (AASLD)	http://www.aasld.org
Canadian Society of Transplantation (CST)	http://www.cst-transplant.ca/
American Society of Transplantation (AST)	https://www.myast.org/
European Association for the Study of the Liver	http://www.easl.eu/
The Pan Arab Liver Transplantation Society	http://www.palts.org/

Suggested Hepatic Medicine Journals	
Journal	**Link**
Liver Transplantation	https://www.aasld.org/publications/liver-transplantation
American Journal of Transplantation	http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1600-6143
Hepatology	http://aasldpubs.onlinelibrary.wiley.com/hub/journal/10.1002/(ISSN)1527-3350/
Journal of Hepatology	http://www.journal-of-hepatology.eu/
Clinical Gastroenterology and Hepatology	http://www.cghjournal.org
Saudi Journal of Gastroenterology	http://www.saudijgastro.com
Other Journals	
Clinics in Liver Disease	http://www.liver.theclinics.com/
Canadian Journal of Gastroenterology and Hepatology	https://www.hindawi.com/journals/cjgh/
European Journal of Gastroenterology & Hepatology	http://journals.lww.com/eurojgh/pages/default.aspx
Journal of Gastrointestinal and Liver Diseases	http://www.jgld.ro/wp/
Journal of Gastroenterology and Hepatology	http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1440-1746/issues
Hepatology Journals	
Hepatology	http://aasldpubs.onlinelibrary.wiley.com/hub/journal/10.1002/(ISSN)1527-3350/
Journal of Hepatology	http://www.journal-of-hepatology.eu
Journal of Viral Hepatitis	http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1365-2893/issues
Liver International	http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1478-3231/issues
Liver Transplantation	http://aasldpubs.onlinelibrary.wiley.com/hub/journal/10.1002/(ISSN)1527-6473/
General Medical Journals	
Annals of Internal Medicine	http://annals.org/aim
The Lancet	http://www.thelancet.com
The New England Journal of Medicine	http://www.nejm.org

VIII. LOGBOOKS & PORTFOLIO

Liver Transplantation Fellow Portfolio

Introduction

A portfolio is a collection of a trainee's work that evidences their achievement of knowledge, skills, appropriate attitudes, and professional growth through a process of self-reflection over time. It differs from a curriculum vitae and career logs in that it must contain self-reflection on the elements necessary for professional development.

Ten Tips For New Transplant Hepatology Fellows

Congratulations on beginning your Transplant Hepatology Fellowship! Here are the top ten takeaway messages for a successful fellowship.

1. Make friends: Connect on a personal level with your attending physicians. This practice will make your fellowship more enjoyable, and you will need this network during your early post-fellowship years. It is likely that friendships formed during your fellowship will be lifelong.

2. Stay flexible: Be open to opportunities that allow you to gain a skill, meet people, or attend a workshop on an unfamiliar topic. Take advantage of your protected time to explore diverse topics in hepatology and liver transplantation.

3. Be a sponge: Conversations with attending physicians may give you ideas about how to approach patients and research questions or even inspire you to consider new areas of interest. Be a fly on the wall during physician-patient encounters and absorb all the verbal and non-verbal communication that makes this relationship successful.

4. Find a mentor (or two or three): Identify potential mentors early in your fellowship. While it is important to have mentors with research and clinical interests similar to yours, it is also valuable to have a career mentor who operates outside your niche. This individual can advise you about the trajectory or shape of your career path and help you attain an appropriate work/life balance.

5. Have a plan: Start thinking about a roadmap for your fellowship and career. Include specific goals you want to accomplish as you move through the fellowship year, such as gaining experience in managing specific diseases, learning a new procedure or skill, preparing an institutional review board (IRB) submission, or publishing a research article.

6. Publish: Scientific writing skills and experience with the editorial process are critical to your career. Start with a straightforward project, such as a case report, and work toward performing a review and original research.

7. Emphasize quality over quantity: Focus on learning the right way to conduct evidenced-based patient care and management. You will be taking care of many fragile patients with complicated diseases during your fellowship training. Thus, it is important to gain experience and achieve or even surpass the required objectives. Long-term, it is vital to learn to conduct a highly professional, high-quality practice.

8. Get involved in the Hepatology and Liver Transplant communities early: Attend regional journal club activities and the SASLT annual meetings. These events allow you to meet others in the field and discuss topics which may not be presented in fellowship-related conferences.

9. Be generous: Assist your colleagues when they need your help or advice. This practice will improve your relationship with colleagues you will likely encounter throughout your professional career.

10. Have fun: Fellowship provides a fantastic opportunity to learn from those around you and fine-tune your skills. The year will fly by, so enjoy the ride.

Personal Information

Personal Information	Paste your photograph here
Trainee name	
Date of birth (DD/MM/YY)	
Place and country of birth	
National ID	
Medical school/university	
Country and year of graduation	
Internal medicine training (dates and institution)	
Dates of gastroenterology training	
Name of tutor(s) and supervisor(s)	
Trainee contact details: Address: E-mail:	

Curriculum Vitae: Suggested Template

Personal Data
Name
Sex
Date of birth
Place of birth
Nationality
Marital status
Address
Mobile phone No.
Home phone No.
E-mail address
Current Position
Education
Honor and Awards
Certification
Training and Experience
Extracurricular Activities
Symposia and Workshops
Research Experience
Presentations, and Publications
Professional Memberships
Languages

Personal Development Plan (PDP)

What is a PDP?

- An individual plan to suit you
- A systematic way of identifying and addressing your educational and professional development needs
- A tool that can identify areas for further development and encourage lifelong learning
- A tool that can identify goals for the upcoming year and methods for achieving these goals

What makes a good PDP?

- Time, thought, and personal reflection
- It identifies your learning needs and skills and knowledge that you want to develop for your current or future role
- It is realistic

Tips for developing a useful PDP

- For each competency, ask yourself:
- What do I want and need to learn?
- What will I need to do to achieve my educational goals?
- What resources and support will I need to improve my knowledge?
- How will I know I have been successful? What are my learning outcomes?
- What are my target dates for completion and review?

Your PDP must be:

- Personal to you
- A working document that you regularly review and continuously update
- Flexible (used as a guide only)
- Supported by evidence

Good personal development planning will help you to achieve your potential by identifying your skills gaps and improvement areas/learning needs.

Competencies	Plan	Rotation Self-Evaluation (Out of 100%)	
Medical Expert		1	
		2	
		3	
Communicator		1	
		2	
		3	
Collaborator		1	
		2	
		3	
Manager		1	
		2	
		3	
Health Advocate		1	
		2	
		3	
Scholar		1	
		2	
		3	
Professional		1	
		2	
		3	
Others		1	
		2	
		3	

Trainee Comments:

……

……

……

Supervisor Comments:

……

……

Educational Training Events

Academic Half-day Activities

SN	Date	Topic	Supervisor
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Case and Oral Presentations

SN	Date	Case	Supervisor
1			
2			
3			
4			
5			

Journal Club Articles

SN	Date	Article/Journal	Supervisor
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Courses, Conferences, and Meetings Attended

SN	Date	Name of activity	Supervisor
1			
2			
3			
4			
5			
6			
Total			

Poster Presentations

SN	Date	Meeting	Title	Supervisor
1				
2				

Publications

SN	Journal	Title	Tutor
1			
2			

Logbook

The logbook for Transplant Hepatology trainees is intended to serve as a curriculum guide and a way to document appraisals and assessments.

The logbook is used to record the fellow's training experiences and the supervisor's assessment of their trainee's competencies. It documents the number and types of procedures performed by the trainee together with the fellow's level of competence and success in providing high-quality patient care. In brief, this document will be used to prove that all competencies necessary for progress and, ultimately, certification have been attained.

Experience acquired related to individual patients must be verifiable through hospital records, when needed.

The tutor will evaluate their trainee's logbook and overall progress at three-month intervals.

The total number of procedures performed should be summarized at the end of the logbook by the trainee for the tutor's review and signature.

Logbook Form

No.	Date	Patient MRN	Procedure	Findings	Therapy Performed	Complications	Supervisor Signature

No.	Date	Patient MRN	Procedure	Findings	Therapy Performed	Complications	Supervisor Signature

Reflections

If you are new to reflecting on past learning experiences, you may find this short guide to be useful.

Reflecting will aid your learning; The more you think about the concepts and issues involved in your role and connect these to what you know and see around you, the more you will remember and learn. Reflective writing is the expression of some of the mental processes of reflection. It is a technique that will be invaluable when completing your e-portfolio.

Reflective writing usually involves: Looking back at an event, for example, something that has happened at work or during one of your assessments. It is often also useful to "reflect forward" to the future, as well as "reflecting back" on the past.
Analyzing events or ideas, thinking in-depth and from different perspectives, and trying to explain outcomes. Reflective writing is an exploration and explanation of events, not just a description of them.

Thinking carefully about what an event or idea means to you and how it affects your ongoing progress as a practicing professional. When considering an event, this process includes thinking about what you would do differently, if anything, next time.

Reflective writing is, therefore, more personal than other types of academic writing.

Write your reflections as a:

- Clinician
- Communicator
- Collaborator
- Manager
- Health Advocate
- Scholar
- Professional
- Person

Patient Feedback:

.....
.....
.....

Clinical Audit

.....
.....
.....

References:

- Frank JR, Snell L, Sherbino J, editors. CanMEDS 2015 Physician Competency Framework. Ottawa: Royal College of Physicians and Surgeons of Canada; 2015.).