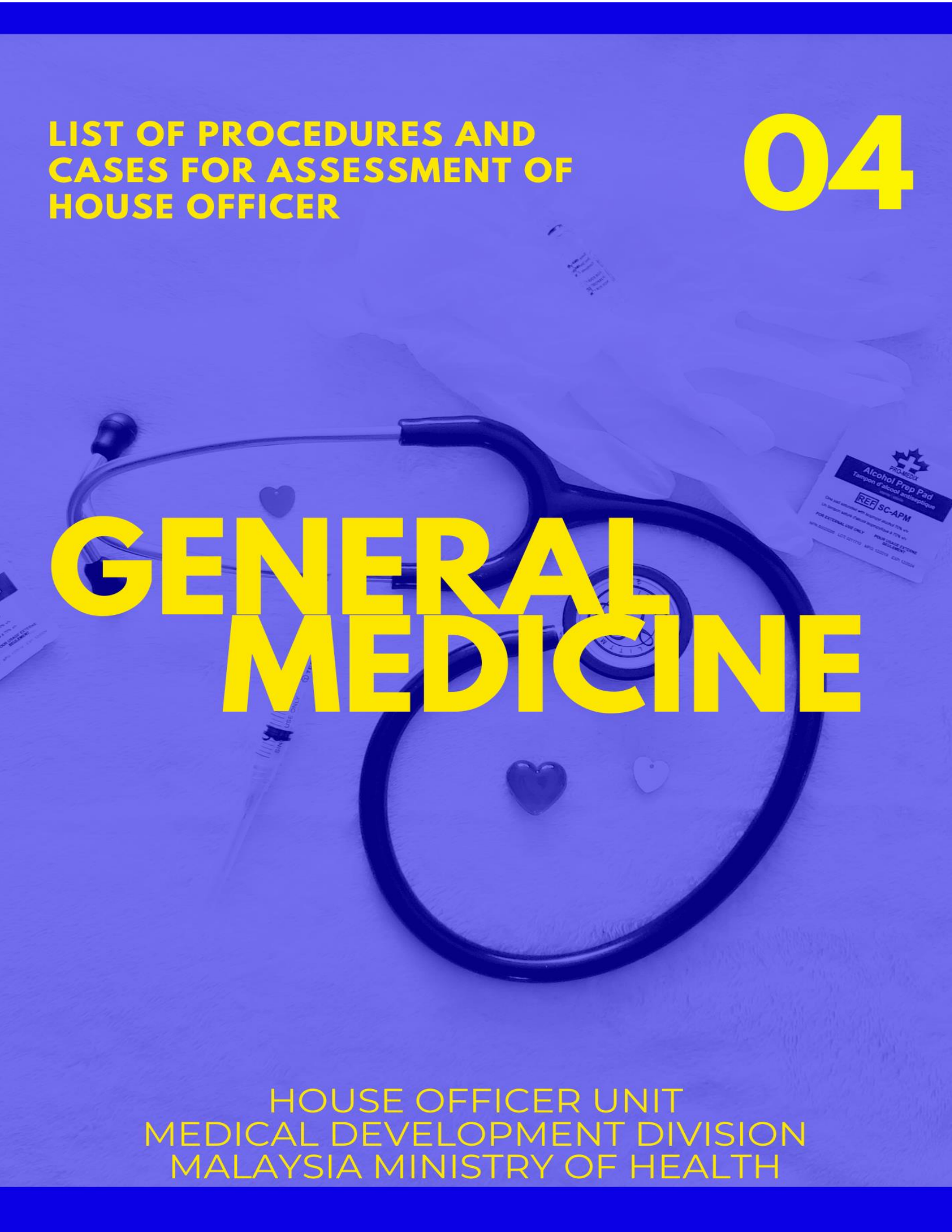


**LIST OF PROCEDURES AND
CASES FOR ASSESSMENT OF
HOUSE OFFICER**

04

A blue-tinted background image featuring medical equipment: a stethoscope, a pair of white gloves, and a syringe. There are also small heart-shaped objects scattered around. The title 'GENERAL MEDICINE' is overlaid in large, bold, yellow capital letters.

GENERAL MEDICINE

**HOUSE OFFICER UNIT
MEDICAL DEVELOPMENT DIVISION
MALAYSIA MINISTRY OF HEALTH**

Component A

List Of Procedures For Component A	
Subcomponent	Procedures
Performed Procedures	1. Insertion of intravenous (IV) cannula 2. Venipuncture 3. Blood culture & sensitivity 4. Arterial blood gas sampling and interpretation 5. Insertion of nasogastric tube 6. Insertion of a urinary catheter (female) 7. Insertion of a urinary catheter (male) 8. Performing ECG and interpretation 9. Cardiopulmonary resuscitation 10. Writing a referral letter 11. Satisfactory discharge summary 12. Written consent taking
Assisted Procedures	1. Thoracocentesis 2. Abdominal paracentesis 3. Lumbar puncture 4. Insertion of central venous catheter (jugular/subclavian) 5. Insertion of femoral venous catheter 6. Insertion of chest tube
Observed Procedures	(Same list as Assisted Procedures) 1. Thoracocentesis 2. Abdominal paracentesis 3. Lumbar puncture 4. Insertion of central venous catheter (jugular/subclavian) 5. Insertion of femoral venous catheter 6. Insertion of chest tube

Component B

List Of CME Topics For Component B (Attendance / Presentation)
1. Dengue and Other Common Infections (e.g.: Leptospirosis, Cholera, Malaria, Melioidosis, Typhus, Typhoid Covid-19, Emerging New Infectious Diseases). 2. Sepsis and Rational Use Of Antibiotics 3. Tuberculosis 4. Diabetes Mellitus (Including Diabetic Emergencies) 4.1. Capillary glucose monitoring and insulin therapy 5. Hypertension (Including Hypertensive Urgency And Emergencies) 6. Acute Chest Pain (Focus On Acute Coronary Syndrome) 7. Management of Acute And Chronic Heart Failure 8. ECG Interpretation And Management Of Cardiac Arrhythmias 9. Acute Breathlessness (focus on Bronchial Asthma, COPD, Pulmonary Oedema and Pulmonary Embolism) 10. Approach to Common Respiratory Diseases (Pneumonia, Pneumothorax and Pleural Effusion) and Chest X-ray Interpretation 11. Management of Bronchial Asthma and COPD 11.1. Peak flow / FEV1 monitoring and use of inhalers should be discussed. 12. Acute Confusion (focus on causes including meningoencephalitis) 13. Fluid and Electrolyte Disorders 14. Acute Kidney Injury and Chronic Kidney Disease 15. Shock 16. Counselling and Communication Skills 16.1. Breaking Bad News 16.2. Obtaining Consent And Handling Complaints 16.3. Suggested Scenarios: HIV Disease, Viral Hepatitis, Renal Replacement Therapy, Do Not Resuscitate (DNR) Orders

Component C

Subcomponent	Procedures/Cases
DOPS	1. Insertion of IV cannula 2. Venipuncture 3. Blood culture & sensitivity 4. Insertion of urinary catheter (female) 5. Insertion of urinary catheter (male) 6. Arterial blood gas sampling 7. Insertion of nasogastric
Mini-CEX	- Same list as CME topics -
CBD	- Same list as CME topics -

Component D

Domain 1 : Clinical Practice

Name of Assessor	:	
Designation	:	
Date of assessment	:	

NO.	ASPECT	DESCRIPTION	POINTS & GUIDANCE	
1.	Patient Safety	The candidate places the needs and safety of patients at the center of the care process. The candidate also demonstrates safety skills including effective clinical handover, graded assertiveness, delegation and escalation, infection control, and adverse event reporting.	5	Demonstrates all aspects of safe patient care at all times.
			4	Demonstrates most aspects of safe patient care at all times.
			3	Demonstrates some aspects of safe patient care at all times.
			2	Demonstrates safe patient care after being reprimanded once and without the presence of a major critical event that may lead to patient morbidity or mortality.
			1	Demonstrates safe patient care after being reprimanded more than once with/without the presence of a major critical event that may lead to patient morbidity or mortality.
			0	Demonstrates unsafe patient care at all times. / Not observed.

2.	Communication	The candidate communicates with patients, their families or caretakers, doctors, and other health professionals in a clear, sensitive, and effective manner.	5	Communicates effectively in all routine and difficult situations.
			4	Communicates effectively in all routines and some difficult situations.
			3	Communicates effectively in most routine situations.
			2	Communicates effectively in routine situations but requires assistance .
			1	Does not communicate effectively in routine situations even after assistance.
			0	Does not communicate at all. / Not observed.
3.	Investigation	The candidate arranges common, relevant, and cost-effective investigations, and interprets their results accurately.	5	Identifies and arranges appropriate investigations and interprets investigations accurately and is able to anticipate further investigations needed .
			4	Identifies and arranges appropriate investigations and interprets investigations accurately.
			3	Arranges appropriate investigations and require some guidance on interpretation .
			2	Arranges appropriate investigations and always require guidance on interpretation .
			1	Frequently arranges inappropriate investigations OR frequently interprets incorrectly .
			0	Unable to arrange appropriate investigations or interpret correctly at all. / Not observed.

4.	Patient assessment and management	The candidate performs a patient assessment that includes a problem-oriented medical history and a relevant physical examination, as well as a valid differential diagnosis. The candidate also makes evidence-based management decisions in patient treatment.	5	Perform focused patient assessment and able to apply protocols and guidelines for all routine and complex patients.
			4	Perform focused patient assessment and able to apply protocols and guidelines for all routine patients and some complex patients .
			3	Perform focused patient assessment and able to apply protocols and guidelines for all routine patients only but not for complex patients .
			2	Perform focused patient assessment and able to apply protocols and guidelines for most of the routine patients and not for complex patients .
			1	Perform focused patient assessment and able to apply protocols and guidelines for some of the routine patients and not for complex patients .
			0	Unable to apply evidence, protocols, and guidelines in patient management at all. / Not observed.
5.	Prescribing and administering medication	The candidate prescribes and administers medications safely, effectively, and economically.	5	Consistently prescribes and administers medication safely with adherence to all relevant protocols.
			4	Prescribes and administers medications safely and adheres to relevant protocols in most situations and seeks assistance when needed.
			3	Prescribes and administers medications safely and adheres to relevant protocols in most situations and frequently need assistance .
			2	Makes prescription error and/or medication administration error once during the posting but not causing patient morbidity or mortality .

			1	Makes prescription errors and/or medication administration errors more than once during the posting but not causing patient morbidity or mortality.
			0	Makes prescription errors and/or medication administration errors (once or more) during the posting and causing patient morbidity or mortality. / Not observed.
6.	Emergency care	The candidate recognizes and assesses deteriorating and critically unwell patients who require immediate care. The candidate also performs basic emergency and life support procedures, including caring for the unconscious patient and performing cardiopulmonary resuscitation.	5	Able to identify deteriorating or critically unwell patients, initiate management, seek appropriate help, AND actively anticipate additional measures needed.
			4	Able to identify deteriorating or critically unwell patients, initiate basic management, and seeks appropriate help.
			3	Able to identify deteriorating or critically unwell patients and able to initiate basic management but does not seeks appropriate help.
			2	Able to identify deteriorating or critically unwell patients but unable to initiate basic management. However, the candidate seeks for help.
			1	Able to identify deteriorating or critically unwell patients but unable to initiate basic management and the candidate does not seek for help.
			0	Not able to identify deteriorating or critically unwell patients / Unable to initiate basic management correctly and does not seek appropriate help. / Not observed
			Total points obtained for Domain 1:	
Assessor's comment				

Domain 2: Professionalism And Leadership

Name of Assessor	:	(Must be the same assessor of Domain 1)
Designation	:	(Must be the same assessor of Domain 1)
Date of assessment	:	

NO.	ASPECT	DESCRIPTION	POINTS					
			NOT OBSERVED	VERY WEAK	WEAK	AVERAGE	GOOD	EXCELLENT
1.	Professionalism	Provide care to all patients in accordance with Good Medical Practice, and demonstrate ethical behaviors and professional values including integrity, compassion, empathy, and respect for all patients, society, and the profession.	0	1	2	3	4	5
2.	Self-management	Optimize their personal health and well-being, including responding to fatigue, managing stress, and adhering to infection control to mitigate health risks of professional practice.	0	1	2	3	4	5
3.	Self-education	Self-evaluate their professional practice, demonstrate lifelong learning behaviors, and participate in educating colleagues.	0	1	2	3	4	5

