

## Clinical Examination and Procedural Skills Logbook

Participant Name:

RACGP Number:

The range of procedures that are appropriate for general practice are included in this logbook. Also included are some clinical examination techniques that you need to consider, although the list is not comprehensive.

An explanation of some of the procedures is given and skills have been categorised as **Essential**, **Desired** and **Extended**. Make a note of the last time you performed this skill as well as your confidence in performing it.

Next identify additional procedural skills that you need to gain through reflection on your own learning needs and taking into account your practice setting, patient demographics and community needs.

Consider what actions you will need to take to learn any new skills, when you will complete this by, what support and resources will be required and how you will measure your progress. This can be added to your learning plan as part of your ongoing self-reflection and learning planning.

You may like to consider the following approaches to learning a new skill:

- Reflect on your learning style and ensure you are making the most of your preference, e.g. if you are a visual learner, watch another doctor performing the skill, or practice on a model or with simulation;
- Let your colleagues in the practice know of the skills you would like to practice more, so that they can assist;
- Sit in with a colleague who practices that skill regularly and observe them;
- On learning the skill, teach it to another to embed your knowledge;
- Consider using resources such as Murtagh's Practice Tips (6<sup>th</sup> Edition) which is available from the RACGP Library. The AFP article [Teaching procedural skills in general practice](#) is also useful.

There is no requirement for sign-off of competence being achieved since this logbook is for your own learning and improvement. The degree of coverage of skills in the logbook is an important marker of progress.

You are responsible for maintaining your logbook and ensuring that each entry is accurate and up to date. It is important that you obtain informed consent for all procedures that you undertake; and document procedures performed, and their outcome and any follow up arrangements made.

You might review your log book with a Medical Educator to discuss your progress and plans for subsequent terms. At this stage you can review the procedures list and consider if you need to add any to your Learning Plan.

You can use this word document to help complete the Logbook in the PEP Portal.



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Skill	Date Last Performed	Needs to acquire skill	Can perform but needs support	Confident with skill	Plan for learning this skill
<b>General</b>					
■ Venepuncture					
■ Intravenous cannulation					
■ Collection of swabs for pathology including post-nasal					
■ Fungal scraping and specimen collection					
■ Advise patients how to appropriately collect faecal, urine and sputum specimens					
■ Intramuscular injections					
■ Subcutaneous injections					
■ Sterile technique for procedures					
■ Wound care (dressings)					
<b>Cardiovascular</b>					
■ ECG recording and interpretation ( <i>including lead placement on the patient and operation of practice equipment to record ECG</i> )					



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<b>Respiratory</b>					
■ Peak flow recording and interpretation					
■ Perform and interpret spirometry ( <i>including providing instructions to patient</i> )					
■ Give instructions for use of asthma inhalers					
■ Apply nebulisation therapy					
<b>Gastrointestinal</b>					
■ Drainage of thrombosed external haemorrhoid					
<b>Neurology</b>					
■ Cranial nerve examination					
■ Upper and lower limb neurological examination					
■ Use of dementia screening tools					
<b>Renal/ Urology</b>					
■ Insertion of indwelling catheter for male					
■ Insertion of indwelling catheter for female					



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<b>Endocrine</b>					
■ Finger-prick blood sugar level					
<b>Haematology</b>					
■ Venesection for haemachromatosis					
■ Intravenous iron infusion					
<b>Nose and Throat</b>					
■ Use of nasal speculum					
■ Removal of foreign body from nose					
■ Epistaxis management – packing					
■ Epistaxis management – silver nitrate cauterisation					
<b>Ear</b>					
■ Use of auroscope					
■ Removal of foreign body from ear canal					
■ Insertion and removal of ear wick					



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■ Ear syringing					
■ Micro suctioning of ear wax					
■ Interpretation of audiogram					
■ Pneumotoscopy					
<b>Eye</b>					
■ Visual acuity assessment					
■ Visual fields					
■ Eyelid eversion					
■ Irrigation of eye					
■ Corneal reflexes					
■ Fluorescein staining of eye					
■ Colour vision assessment using Ishihara charts					
■ Use of ophthalmoscope					
■ Use of slit lamp					
■ Topical anaesthetic administration to eye					
■ Removal of corneal foreign body					
■ Removal of sub-tarsal foreign body					



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■ Tonometry					
<b>Dental</b>					
■ Management of avulsed tooth					
<b>Women's Health</b>					
■ Pelvic examination					
■ Cervical screening test					
■ STI specimen explanation and collection					
■ Hormonal (eg Implanon) insertion and removal					
■ Intrauterine contraceptive device removal					
■ Breast examination					
<b>Men's Health</b>					
■ Hormone (eg Zoladex) implant insertion					
■ STI specimen explanation and collection					
<b>Pregnancy</b>					





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■ Foetal heart rate determination					
■ Fundal height assessment					
■ Determine foetal positioning					
■ Urine pregnancy testing					
<b>Child Health</b>					
■ 6-week baby check					
■ Developmental assessment					
■ Assessment of hydration status					
■ Vaccination of infants and children					
■ Suprapubic aspirate/ catheterisation for clean urine sample					
<b>Rheumatology/ Musculoskeletal</b>					
■ Ankle sprain strapping					
■ Shoulder joint aspiration/ injection					
■ Knee joint aspiration/ injection					
■ Bursae injection eg patella or subacromial					



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■ Lateral epicondyle injection					
■ Application of back slab for undisplaced common fractures					
■ Application of full plaster for undisplaced common fractures					
■ Removal of plaster					
■ Splinting of musculoskeletal injuries					
■ Reduce dislocated radial head (pulled elbow)					
■ Digital nerve block					
<b>Dermatology</b>					
■ Use of dermatoscope					
■ Punch biopsy					
■ Shave biopsy					
■ Excisional biopsy					
■ Therapeutic excisions eg sebaceous cyst					
■ Electrocautery					
■ Cryotherapy					
■ Repair of simple laceration – sutures					





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■ Repair of simple laceration – glue					
<b>Dermatology cont.</b>					
■ Drainage of subungual haematoma					
■ Incision and drainage of abscess					
■ Removal of ingrown toenail					
■ Advanced skin cancer techniques eg flaps, grafts					
<b>Trauma</b>					
■ Removal of superficial foreign body					
■ Wound debridement					
■ Deep laceration repair					
■ Localised wound infiltration with anaesthetic					
■ Dressing application including burns					
<b>Resuscitation</b>					
■ Bag and mask ventilation					
■ Oral airway insertion					



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■ Use of automatic external defibrillator					