

The Log Book of Internship Training for B. Sc in Nursing Programme



Bangladesh Nursing Council

Published : September 2013

Re-Print : September 2016

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By

Bangladesh Nursing Council
(Ordinance No. LXI of 1983)

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PREFACE

After completion of 4-year B.Sc in Nursing programme Internship is pre-requisite for having registration or license with Bangladesh Nursing Council (BNC). It is expected that practice during internship will help and assist the intern to be equipped with the knowledge and skills essential to serve people having health problems. Though the existing curriculum provides the scope of practice on medical, surgical, pediatric, midwifery /obstetrical nursing personal. It is better to have the internship & which will be mandatory for all B. Sc Nursing student for prerequisite of Registration.

B.Sc in Nursing program is practice-oriented course that puts the emphasis on hands on care. Theoretical knowledge is provided on various subjects to develop students with strong knowledge-base, then they have given the opportunity to acquire or develop skills on different nursing procedures by practicing in different nursing laboratories, before clinical placement. Demonstration and return demonstration are the usual process that is used to help and assist students to acquire skills on various nursing procedure and care required by different categories of patients or clients. By this way students come across with the point that they have to be skilled enough to handle the patients in different health care settings with different health problems.

Building the competencies require correct practice to do frequently which requires enough time and scope to follow. The period of internship may provide students the scope of improving further knowledge and skills essential for them.

The log book is designed according to the syllabus of B.Sc in nursing course and is developed in such a way by which all interns will have the same opportunity to practice or work on the major discipline. In this connection, interns must take the responsibility by themselves to maintain punctuality, sincerity and honesty in dealing with patients.

The main objective of the internship program is to make students able to understand, comprehend and correlate the theory into practice and develop various skills in performing a number of activities related to nursing & midwifery.

Appreciation goes to all those who contributed in developing this log book.

I hope that internship program will have a strong role in equipping the future generation with appropriate knowledge and skills essential for meeting the health care demands of the country and the nation.



11.11.13

M, M, Niaz Uddin
President
Bangladesh Nursing Council &
Secretary
Ministry of Health & Family Welfare
Government of the People's Republic of Bangladesh

Internship Log Book

Name of the Intern	
Temporary Registration No. of BNC	
Year of Graduation	
Name of Nursing College	
Medical College Hospital/ GH/ SH	
Placement period	From to
Duration of Internship	
Signature of Intern Date	
Signature of Observer Date Detail	

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Goal

After successful completion of Internship the interns will become competent nurse-midwife and be able to demonstrate the competency of using knowledge-based practice for the provision of quality holistic client-centered nursing care to meet the needs/expectations and to promote, maintain, restore the health of individuals, families, and communities within and outside the country independently.

Objectives:

Upon completion of the internship an intern will be able to :

1. Communicate effectively and efficiently with the patients, their relatives, nurses, doctors and other health care providers at their workplaces;
2. Record nursing notes based on the patients history and physical examinations efficiently and accurately;
3. Analyze & interpret the laboratory findings and take necessary actions required;
4. Use nursing process competently to assess, plan, intervene and evaluate the health problems of individuals, families and communities across the life span and health illness continuum in order to promote, maintain and restore health;
5. Consider ethical and legal issues involve with the part of nursing care;
6. Provide client-centered and holistic nursing care/evidence-based care;
7. Carry out practice that demonstrates positive attitudes, ethical behaviors and accountability in accordance with the BNC rules and regulations and professional standards;
8. Recognize his /her own limitations in providing patient care and find out the way to fill this up;
9. Demonstrate knowledge and skills in delegating or discharging the professional roles and responsibilities to others independently and effectively;
10. Practice with positive attitudes for uplifting the professional image and dignity as a whole.

Course Structure

Total duration - 06 months = 182 days

Duration of practice - 26 wks × 6 days = 156 days

Weekly holidays - 26 wks × 1 day = 26 days

Working hours for each of the individual day = 8 hours/12 hrs.

Hours per week – 8 × 6 = 48 hours

Total hours within the internship period are 48 hrs. × 26 wks. = 1248 hours

Students will be placed in the following clinical areas for 26 weeks/156 days/1248 hrs.

Medical Nursing	Surgical Nursing	Pediatric Nursing	Mid/Obs/Gynae
07 weeks/336 hrs.	08 weeks/384 hrs.	04 weeks/192 hrs.	07weeks/336 hrs.

Department/Areas to be covered within the prescribed time

Sl. No.	Major Fields	Areas/department/wards/units
1	Medicine	Medicine, OPD, emergency, ICU and CCU, psychiatric and nephrology ward.
2	Surgery	Surgery, surgery OPD, general OT, post operative, burn unit, orthopedic, casualty, eye and ENT ward
3	Pediatric	Pediatrics wards, OPD,
4	Midwifery, Obs. and Gynae	Antenatal, antenatal OPD, labour, postnatal, newborn/SCABU, caesarian OT, Eclampsia and Gynae ward

Schedule for clinical practice [the interns will be placed in evening shift after night duty]

Name of department	Duration		
	Weeks/days	Working Days	Weekly Holiday
Medicine including Psychiatric ward	4 weeks/28 days	24days	04 days
Emergency ward	1 week/7 days	06 days	01 day
ICU and CCU	1 week/7 days	06 days	01 day
Nephrology ward	1 week/7 days	06 days	01 day
	7 wks/49 days	42 days	07 days
Surgery ward	4 weeks/28 days	24 days	04 day
General OT and Post operative ward	1 week/7 days	06 days	01 day
Burn Unit	1 week/7 days	06 days	01 day
Orthopedic ward	1 week/7 days	06 days	01 day
Eye and ENT ward	1 week/7 days	06 days	01 day
	8 wks/56 days	48 days	08 days
Pediatric ward	4 wks/ 28 days	24 days/192 hrs	04 days
Antenatal ward including OPD	1 week/ 7 days	06 days	01 day
Labour ward	3 week/ 21 days	18 days	03 day
Postnatal and Newborn ward	2 weeks/ 14 days	12 days	02 days
Scissor OT	3 days	03 days	01 days
Eclampsia ward	3 days	03 days	
Gynae ward	1 week/7 days	06 days	01 day
	8 wks/56 days	48 days	08 days
Total	26 wks/182 days	156 days	26 days

N.B: If there is any discipline/area mentioned in the logbook is non-existed in any Medical College Hospital, Intern will be placed in the major discipline/area for that period.

Tasks should be accomplished by the Interns:

1. Receiving of newly admitted/transferred/post-operative patient(s) on the ward;
2. Performing health assessment;
3. Developing nursing care plan for ill/seriously ill patient(s);
4. Utilizing/considering laboratory findings in developing/preparing nursing care plan(s)
5. Establishing nurse-client and nurse-doctor relationship;
6. Maintenance of personal and environmental hygiene;
7. Maintenance of cleanliness and sterilization of equipments, linen and others;
8. Utilization of available resource materials to ensure cost effective care/services;
9. Providing holistic and client centered care to the patients in adult medical, surgical, gynae and obstetrical units by using nursing process;
10. Providing holistic and client centered care to the patients in child medical, surgical and neonate units by using nursing process;
11. Providing special nursing care (ICU/CCU/Neonate unit);
12. Providing pre and post-operative care;
13. Administering medication/drugs and using 6 rights to minimize medication error;
14. Providing bedside nursing care for an individual patients emphasizing on basic nursing procedure;
15. Keeping nursing notes and other documentation essential for patients/clients
16. Collecting and sending specimen to different laboratories;
17. Preparing patients for diagnostic tests and procedures;
18. Preparing patients undergo for surgery;
19. Conducting health education session(s);
20. Assisting dying patients with peaceful death;
21. Joining with ward/physician round;
22. Conducting pre and post conference with nursing staff.

Interns should acquire the generic skills/competencies (applicable to all the disciplines/areas to be placed) on the followings:

1. Receiving newly admitted/transferred/post-operative patients;
2. History taking (physical, psychological, social and spiritual aspects);
3. Physical assessment;
4. Cleanliness of the patients & their environment;
5. Maintenance of personal hygiene/assisting patients in maintaining personal hygiene;
6. Providing nursing care to all categories of patients followed by nursing care plan;
7. Specimen collection;
8. Preparation for diagnostic tests and procedures
9. Interpretations of laboratory findings;
10. Dealing with common emergencies e.g. High fever, CPR, Shock, ARI, Hemorrhage etc;
11. Sterilization/disinfection (instruments, linen, rubber goods etc) in wards/OT;
12. Correct and safe administration of drugs/medications;
13. Maintenance of intake and output chart, medication chart, diabetic chart etc;
14. Induction of catheter/ryles tube/flatus tube;
15. Application of enema simplex/glycerin suppository;
16. Application of analgesic per rectum;
17. Operating sucker machine and oxygen cylinder/meter/central supply;
18. Operating Mechanical Ventilation;
19. Assisting with blood transfusion;
20. Discharge planning;
21. Documenting records;
22. Keeping proper death note(s).

Topics to be used for group discussion/case conference

Sl/No	Name of Topic	Name of Resource Person with Designation	Signature of Resource Personnel with date
1.	Communication		
2.	Pain management		
3.	Care of dying patient		
4.	Behavior change communication		
5.	Impact of psychological and social factors in disease condition		
6.	Nursing notes/record keeping/ reporting		
7.	Occupational hazards (HBsAg, HIV, Radiation, nosocomial infections)		
8.	Over view on nursing management/ procedures		
9.	Patients' right		
10.	Discharge plan and health education		

Management of Internship

The internship program will be implemented by the Nursing superintendent/Dy. Nursing Superintendent of the concerned Hospital. S/he is responsible to organize an orientation programme for the interns with the consultation of nursing representatives from medicine, surgery, pediatric, and Mid/Obs/Gynae departments. In-charge of the concerned ward will be responsible for signing the logbooks after successful completion of assigned tasks within his /her jurisdiction. Here responsible in-charge should check the activities of interns carefully with due attention. If any intern becomes unauthorized absent for any discipline/area, his/her logbook will not be signed before regularization of his/her absent period.

The monitoring committee is responsible to check the tasks & competencies identified for the Interns and sign in the appropriate column based on the observation. The committee is also accountable to grade the individual interns according to the prescribed parameters and submit to the Nursing Superintendent/Dy. Nursing Superintendent for issuing the completion certificate.

Nursing superintendent/Dy. Nursing Superintendent should form a monitoring committee (with nursing supervisors and graduate nurses) and assign to:

- allocate interns at the prescribed departments/units,
- supervise, guide and monitor the activities of interns time to time.

ToR of the Monitoring Committee

The Committee should

- maintain a register of the interns;
- make the rotation plan and ensure the placement;
- check the attendant register of the interns on regular basis;
- check that all interns are assigned the activities by the ward in-charge based on the tasks as mentioned in the logbook;
- ensure that Interns have accomplished all the tasks identified for them;
- provide the necessary guidance and support towards the accomplishment of assigned task/competencies when required;
- ensure that Interns have achieved all the generic skills/competencies identified for them;
- sign against the tasks and competencies after keen observation/examination;
- check that the ward in-charge noted the reason/s in the remark column against the task/s which has not been accomplished by the interns within the prescribed period;
- check that logbook is properly signed by the ward in-charge in time;
- collect the grading forms and grade the interns according to the prescribed parameters;
- organize small group discussion/case conference on the prescribed topic(s) for the Interns;
- Submit the completed grading forms to the concerned Nursing superintendent/Dy. Nursing Superintendent and assist her/him in issuing the completion certificate.

Activities related to Grading and Certification

No.	Activities	Responsible person
1	Allocation of interns to the different departments/ units;	Member of the Monitoring Committee
2	Supervise, guide and monitor the activities of Interns	
3	Signing against the tasks; and skills/ competencies identified for the Interns	
4	Signing the logbook	In-charge of the concerned ward
5	Grading the Interns based on parameters	Member of the Monitoring Committee
	Certification	Nursing superintendent/ Dy. Ng. Superintendent of concerned hospital

Grading Parameters and Marks Distribution

Concerned authority should consider the following parameters in grading the individual Intern. Parameters carry 1 to 2.5 marks and marks may be given from 0-2.5 based on the personal judgment of concerned authority .

The parameter number 1 (one) is compulsory to be achieved by all of the individual interns.

No. of Parameters	Parameters	Marks
1	Completion of the number of assigned tasks (Log book)	2.5
2	Knowledge and skills (competency) regarding Generic Skills	2.5
3	Attitude and behavior	1.0
4	Punctuality	1.0
5	Responsibility and accountability	2.0
6	Dressed up with proper uniform	1.0
Total		10

NOTE:

If any Intern unable to perform any assigned task or failed to achieve any competency, the number will be deducted from the parameter number 1 and 2.

Grading

Very good	Good	Satisfactory	Unsatisfactory
9-10	7-8	5-6	< 4

SPECIAL NOTE:

- For easy identification of the intern, one passport size photograph should be attached on the logbook and another one on the grading sheet.
- Nursing Superintendent /Dy. Nursing Superintendent will issue the completion certificate based on the grading numbers and comments on logbook.
- Nursing Superintendent/Dy. Nursing Superintendent will not issue any completion certificate against interns if there is any unsatisfactory grading number achieved by the intern.
- Logbook must be surrendered /submitted to the Nursing Superintendent/Dy. Nursing Superintendent for issuing the completion certificate.

Code of Conduct, Rules, Regulations and Leave

The code of conduct, rules, regulations and leave will be applicable to intern as per GO for Interns' program of MOH&FW. In addition the Govt. Service Rules are also applicable to interns.

1. If any intern remains absent due to the unavoidable circumstances for more than the allowed casual leave and an extra period of work is required to complete the task in the relevant unit, he/she will have to complete the absent period in the same placement unit after the completion of scheduled internship. For absent period pay of intern will be suspended. After performing duty for absent period intern will be allowed to draw his/her pay.
2. If an intern remains unauthorized absent, he/she has to work extra double time to make the absent period or his/her previous training in the respective discipline will be cancelled which ever decided by concerned committee in consultation with In-charge of concerned major discipline and Nursing Superintendent of hospital.
3. Duty of absent period should be completed within one month of completion of scheduled internship; failing of his/her training in concern major discipline will be cancelled.

Instructions for Intern

The bona fide entries of the task mentioned in the logbook is entirely responsibility of the intern. The intern should

- wear the prescribed uniform on duty;
- sign on the attendant registrar at the time of arrival and departure from duty;
- maintain a notebook correctly after achieving the targets identified in the logbook everyday;
- collect the logbook, fill it up properly (according to the notebook) and get counter sign [in the column number 9 (nine) of the logbook] from the concerned ward in-charge after completion of all assigned tasks;
- get counter sign from the concerned members of the monitoring committee
 - at the appropriate column in ANNEX-3 against the tasks s/he need to perform during his/her placement;
 - at the appropriate column in ANNEX-4 concerning generic skills or competencies s/he need to achieve during his/her placement;
- attend group discussion session/case conference arranged by the concerned personnel (may be the member of the committee or assigned graduate nurse) and sign on the attendance register;
- seek support and assistance from the monitoring committee in achieving generic skills or competencies when required;
- conduct pre and post conference with nursing staff.

Guidelines for Concerned Personnel (committee member or assigned graduate nurse/ ward in-charge)

1. Concerned Personnel of the major departments -
 - will organize the small discussion session/case conference on the prescribed topics either in the morning or evening in their responsible unit at least once in a week;
 - should ensure the participation of the interns in a small group discussion/case conference by keeping the register;
 - may invite resource person(s) (Doctors/Nurses) to observe the discussion sessions/case conference;
 - should maintain the register where resource person will sign against the session s/he observed;
2. Ward In-charge of the **major disciplines**/departments will try to ensure the accomplishment of tasks mentioned in the generic skills within 1st two weeks of placement.

Guidelines for the Interns:

- The interns should attend the small group sessions and participate in discussion;
- The interns should acquire competencies required for performing tasks listed on the generic skills by observing other nurses activities, assisting others in performing tasks and practicing these activities independently;
- They should get signature on the logbook from the concerned ward in-charge after completion of tasks mentioned in the logbook.

Induction Course at the Hospital

On the first day of joining at hospital, the interns should undergo one day induction course by the guidance of Nursing Superintendent.

Objectives:

At the end of induction course the new interns should acquire knowledge about the health care delivery system of that hospital and understand the code of nursing ethics.

Contents

1. Nursing ethics;
2. Nurse-patient relationship;
3. Code of conduct, rules and regulations related to nursing services;
4. Leave and instructions must be followed by interns;
5. Introduction to Bangladesh health services and linkage with other hospitals;
6. Organogram of Medical College Hospital and roles and responsibilities of different categories of Hospital staff;
7. Role of nurses and doctor-nurse relationship;
8. Hospital procedures.

Teaching methodology

- Lectures & presentation, and discussions;

Teaching Aids:

- Flip chart/OHP and multimedia

Resource persons:

1. Nursing Superintendent/Dy. Ng. Superintendent of the concerned Hospital;
2. Member/s of the concerned committee;
3. Nursing Supervisor of the concerned Hospital;
4. In-charge of the ward where interns will be placed.

Log Book

Group of Tasks	Targeted numbers			Number achieved			Remarks	Sign of the In-charge
	Observe activities performing by Nurse/ Doctor	Assist Nurse/ Doctor in performing tasks	Perform tasks independently	Observed activities performed by Nurse/ Doctor	Assisted Nurse/ Doctor in performing tasks	Performed tasks independently		
1	2	3	4	5	6	7	8	9
General Procedure (applicable in all discipline/ departments/units)								
Receiving of newly admitted pts.	10	10	20					
History taking and recording	10	10	20					
Performing health assessment	10	10	20					
Receiving of transferred in patients	05	05	10					
Checking and recording vital signs	20	20	20					
Maintenance of personal hygiene	10	10	20					
Maintenance of environmental hygiene	10	10	10					
Specimen collection	10	10	20					
Administering I/M injection	10	10	20					
Administering I/V injection	10	10	20					
Opening of I/V channel	10	10	20					
Maintaining I/V channel	10	10	20					
Administering oral medications	10	10	20					
Administering suppository in anal route	05	05	10					
Providing mouth care	10	10	20					
Providing back care	10	10	20					
Administering Oxygen inhalation	05	05	10					
Administering Inhaler/ Nebulizer	10	10	20					
Tube feeding	05	05	10					
Performing catheterization	05	05	10					
Caring of dying patient	05	05	10					
Caring of dead body	05	05	05					
Medical Nursing and Allied (07 weeks)								
Attend patient at MOPD	-	-	20					
Special Procedure								
Assist in lumbar puncture	02	02	02					
Assist in sternum puncture	02	02	02					
Assist in fluid aspiration	02	02	02					
Nursing Management based on Nursing Process								
Management of	04	05	06					
• Hypertension								
• Heart failure								
• Peptic ulcer								
• Rheumatic fever								
• Typhoid fever								
• Dengue fever								
• Nephrotic syndrome								
• UTI								
• Anemia								
• Diabetes mellitus								
• Hepatitis								

Group of Tasks	Targeted numbers			Number achieved			Remarks	Sign of the In-charge
	Observe activities performing by Nurse/ Doctor	Assist Nurse/ Doctor in performing tasks	Perform tasks independently	Observed activities performed by Nurse/ Doctor	Assisted Nurse/ Doctor in performing tasks	Performed tasks independently		
1	2	3	4	5	6	7	8	9
• Meningitis								
• Tuberculosis								
• Pneumonia								
• COPD								
Psychiatric Nursing								
Management of	03	03	01					
• Schizophrenia								
• Anxiety disorder								
• Mood disorder								
• Psychotic disorder								
• Obsessive compulsive disorder								
• Substance abuse								
Nursing Management (Emergency Unit)								
Management of	04	03	03					
• Acute asthma								
• Diabetic coma								
• Poisoning								
• Snake bite								
• Shock								
• Hemorrhage								
• Haematemesis malena/epistaxis/ Haemoptysis								
• Unconscious patient								
• Fracture								
• Epilepsy								
Intensive and Coronary care unit								
Performing ECG	03	03	04					
Using/operating	05	05	00					
• Cardiac monitor								
• Mechanical ventilator								
• Defibrillator	02	02	00					
CPR	05	05	00					
Palliative care	02	02	01					
Management of	03	03	03					
• IHD								
• CVD								
• MI								
• Stroke								
• Coma								
Nephrology Nursing								
Management of	02	02	01					
• Chronic renal failure								
• Acute renal failure								
• Nephrotic syndrome								
Surgical Nursing and Allied (08 weeks)								

Group of Tasks	Targeted numbers			Number achieved			Remarks	Sign of the In-charge
	Observe activities performing by Nurse/ Doctor	Assist Nurse/ Doctor in performing tasks	Perform tasks independently	Observed activities performed by Nurse/ Doctor	Assisted Nurse/ Doctor in performing tasks	Performed tasks independently		
1	2	3	4	5	6	7	8	9
Attend patient at SOPD			20					
Care of surgical wound	05	05	05					
Aseptic dressings	05	05	05					
Colostomy care	02	02	02					
Preoperative care	05	05	05					
Postoperative care	05	05	05					
Stitching and removing of suture	05	05	02					
Nursing Management based on Nursing Process								
Management of	05	05	05					
• Acute appendicitis								
• Acute Cholecystitis/ cholelithiasis								
• Acute abdomen								
• Intestinal obstruction								
• Hernia								
• Hydrocele								
• Bleeding per rectum								
• Carcinoma								
Operation Theater (OT) skill								
Cleaning and decontamination of OT	03	03	03					
Sterilization of	04	04	04					
• Linen								
• sharp instruments								
• blunt instruments								
• rubber goods								
Scrubbing , gowning, and gloving	05	05	10					
Preparation of operation trolley	03	02	01					
Maintenance of records	03	03	03					
Maintenance of stock ledger	03	03	00					
Post operative (PO) patient Management								
Receiving post operative pts by checking/examining	03	03	03					
• position								
• secretion								
• vital signs								
• bleeding								
• I/V cannulation drainage								
Provide immediate PO care	03	03	01					
Orthopedic & Traumatology Unit								
Special procedure for orthopedic nursing								
Application of roller bandage	06	06	02					
Application of triangular sling								
Application of cast	06	06	01					

Group of Tasks	Targeted numbers			Number achieved			Remarks	Sign of the In-charge
	Observe activities performing by Nurse/ Doctor	Assist Nurse/ Doctor in performing tasks	Perform tasks independently	Observed activities performed by Nurse/ Doctor	Assisted Nurse/ Doctor in performing tasks	Performed tasks independently		
1	2	3	4	5	6	7	8	9
Removal of cast	06	06	01					
Assist in traction	06	06	01					
Nursing Management								
Management of	04	04	03					
• fracture								
• dislocation								
• amputation								
• osteoarthritis								
• osteomyelitis								
• congenital disorders								
• clients with traction								
• immobility								
Assist patient in performing active and passive range of motion	02	03	01					
Eye and ENT ward								
Attend patients in OPD			20					
Nursing management of	05	05	03					
• corneal ulcer								
• cataract								
• retinal detachment								
• Eye injury								
• acute otitis media								
• chronic otitis media								
• Hearing impairment								
• Acute rhinitis								
• chronic rhinitis								
• Acute sinusitis								
• chronic sinusitis								
• Acute tonsillitis								
• chronic tonsillitis								
• tonsillectomy	02	02	01					
• tracheostomy								
• thyroidectomy								
• mastoidectomy								
• septoplasty								
Removal of foreign body from Ear / Nose	02	02	00					
Performing Ear toileting	02	02	00					
Application of Nasal pack in case of epistaxis	02	02	00					
Applying eye/bandage	02	02	01					
Nursing management of patients with burn								
Nursing management of	01	01	01					
• first degree burn								
• second degree burn								
• third degree burn								
Dressing	02	03	01					

Group of Tasks	Targeted numbers			Number achieved			Remarks	Sign of the In-charge
	Observe activities performing by Nurse/ Doctor	Assist Nurse/ Doctor in performing tasks	Perform tasks independently	Observed activities performed by Nurse/ Doctor	Assisted Nurse/ Doctor in performing tasks	Performed tasks independently		
1	2	3	4	5	6	7	8	9
Pediatric Nursing								
Attend patients in POPD			20					
Nursing management of	10	10	03					
• ARI/pneumonia								
• Meningitis								
• Encephalitis								
• Fibrile convulsion								
• Epilepsy								
• Congenital anomalies CHD/Chromosomal Abnormalities/spina bifida/Hydrocephalus								
• Anaemia								
• Hemophilia								
• leukemia								
• Thalassimia								
• diarrhoea								
• Juvenile DM								
• Diabetic insipidus								
• Phimosis								
• Tonsillitis								
• Congenital abnormalities-telepes/ cleft palate/cleft lip								
Midwifery and Obstetrical Nursing								
Attend antenatal patients in OPD	05	05	05					
History taking and documentation	05	05	05					
Antenatal assessment	05	05	05					
• General examination								
• Abdominal examination								
• Per vaginal examination								
Counseling	05	05	05					
Birth plan	05	05	05					
Nursing management of	03	03	03					
• APH								
• rupture membrane								
• premature/low birth weight babies								
Monitoring of labor by using partograph	05	05	05					
Conduction of normal delivery	05	05	05					
Active management of third stage labor	05	05	05					
• Perform episiotomy								
• Examination of placenta								
Immediate newborn care	05	05	05					
• Newborn assessment								
• Newborn resuscitation								
Nursing management of baby with	03	03	01					

Group of Tasks	Targeted numbers			Number achieved			Remarks	Sign of the In-charge
	Observe activities performing by Nurse/ Doctor	Assist Nurse/ Doctor in performing tasks	Perform tasks independently	Observed activities performed by Nurse/ Doctor	Assisted Nurse/ Doctor in performing tasks	Performed tasks independently		
1	2	3	4	5	6	7	8	9
• Birth asphyxia								
• Neonatal sepsis								
• Neonatal jaundice								
• Convulsion								
• Congenital anomalies								
• Birth Injury								
Management of	03	03	01					
• PPH								
• Purperial sepsis								
• Breast engorgement								
• Mastitis								
Management of eclampsia	02	02	00					
Preparation of patient for C/S	02	02	01					
Preparation of C/S trolley	02	02	01					
Management of	04	04	01					
• Abortion								
• Ectopic pregnancy								
• Molar pregnancy								
• Uterine prolapsed								
• Fibroid uterus								
• Hysterectomy								
• VVF/RVF								

Special Note:

- Every Intern should fill up the logbook based on their performance categorized in the logbook.
- Competencies should be acquired through observing, assisting and performing tasks, so every single task should be accomplished by the interns either by observation or assisting others or performing independantly.
- Interns should write the actual number against each of the every single tasks (have been assigned/identified in the main column named NUMBER ACHIEVED), according to her/his actions done through observation/assisting or independent performance.
- **Intern should achieve the number of tasks assigned for them in the column 7 (Seven) of the logbook.**

Explanation of Grading

Unsatisfactory:

Unsatisfactory means an internee's performance is constantly unsatisfactory and does not measure up to the requirements of the job. Intern failed to accomplish the assigned job in a timely manner, so that, some tasks are generally incomplete.

Satisfactory:

Satisfactory means intern's performance occasionally meets the standards required for the job. Performance slightly below what is considered acceptable. Improvement is necessary in many aspect of the job. Assigned tasks are not generally completed on time and are lacking in several respects. There is a lacking in understanding many of the job functions and overall objectives of the jobs.

Good:

Performance of the Intern is adequate. Consistently meets most of the standards in an acceptable manner. Rarely exceeds the required standard. Some improvement is necessary in certain aspect of the job. Assigned tasks are generally completed on time and in a comprehensive manner and understand most of the duties and overall objectives of the job. Intern is able to make meaningful contributions without his or her sphere of operation.

Very good:

As intern performed all the assigned duties and carried out responsibilities in a comprehensive and efficient manner. The Intern performed all the assigned tasks according to the prescription. Performance consistently goes above the standard. Very occasionally standard of work is not met. Generally, skills performed independently.

Monogram of respected Hospital

Certificate on completion of 6th month internship Training

This is to certify that

.....D/O

has completed the Scheduled Internship Course (after successful completion of BSc in Nursing) held from to 2020 at the
..... Hospital,..... under the supervision of approved Committee.

During the internship she/he has achieved the following score against the identified parameters for the selected departments.

Name of the Departments	Period	Grading number (out of 10)	Signature of the competent authority
Medical Nursing	7 (Seven) weeks		
Surgical Nursing	8 (Eight) weeks		
Pediatric Nursing	3 (Three) weeks		
Obstetrical Nursing	7 (Seven) weeks		

S/he acted as a Registered Nurse of the concerned wards/ departments during the placement.

Nursing Superintendent/Dy. Nursing Superintendent
.....Hospital,
Dhaka, Bangladesh

Tasks accomplished by the Intern

Checklists to be filled by the member of the monitoring committee/concerned Ward In-charge

[Please put the tick mark (✓) and write the comment(s) in the appropriate column]

Sl. No	Tasks	Yes	No	Comments
1.	Receiving of newly admitted patients;			
	Receiving of transferred in patients;			
	Following up the patient's conditions,			
	Making discharge plan,			
	Keeping proper death note.			
2.	Performing health assessment			
3.	Maintenance of personal hygiene			
4.	Maintenance of environmental hygiene			
5.	Developing nursing care plan based on nursing process			
6.	Establishing nurse-client relationship			
	Establishing nurse-doctor relationship			
7.	Providing holistic and client centered care to the patients in adult medical units by using nursing process			
	Providing holistic and client centered care to the patients in adult surgical units by using nursing process			
	Providing holistic and client centered care to the patients in gynecological department by using nursing process			
	Providing holistic and client centered care to the patients in obstetrical units by using nursing process			
8.	Providing holistic and client centered care to the patients in child medical units by using nursing process			
	Providing holistic and client centered care to the patients in child surgical units by using nursing process			
	Providing holistic and client centered care to the patients in neonate units by using nursing process			
9.	Maintenance the cleanliness and sterilization of equipments,			
	Maintenance the cleanliness and sterilization of linen,			
	Maintenance the cleanliness and sterilization of rubber goods			
10	Utilization of available resource materials to ensure the cost effective care/services			
11	Providing bedside care for an individual patients emphasizing on basic nursing procedure			
12	Providing special nursing care			
13	Providing bedside care for an individual patients emphasizing			

Sl. No	Tasks	Yes	No	Comments
	on basic nursing procedure			
14	Providing pre-operative care			
15	Assisting patients undergo for surgery			
16	Providing post-operative care			
17	Administering medication/drugs by following 6 rights to minimize any medication error			
18	Considering laboratory findings during the development/ preparation of nursing care plan			
19	Collecting specimen according to the physician orders			
20	Sending specimen to the concerned laboratories			
21	Preparing patients for different diagnostic tests and procedures			
22	Sending patients to the concerned diagnostic department			
23	Keeping nursing notes and other documentation properly			
24	Conducting health education sessions			
25	Assisting dying patients with peaceful death			
26	Caring for dead body			
27	Joining with ward/physician round			
28	Conducting pre and post conference with nursing staff.			

Signature of the concerned Member of the Committee

Full Name :
Designation :
Date :

Generic skills/competencies (applicable to all the disciplines/areas to be placed) achieved on the followings:

Checklists to be filled by the member of the monitoring committee/concerned Ward In-charge

[Please put the tick mark (√) and write the comment(s) in the appropriate column]

Sl. No	Skills/Competencies	Yes	No	Comments
1.	Cleanliness of the patients & their environment;			
2.	Maintenance of personal hygiene;			
3.	Sterilization of instruments (wards/OT);			
	Sterilization of linen (wards/OT);			
	Sterilization of rubber goods (wards/OT);			
4.	Receiving of newly admitted patients;			
	Receiving of transferred in patients;			
	Receiving of post-operative patients;			
5.	History taking (physical, psychological, social and spiritual aspects);			
6.	Physical assessment;			
7.	Specimen collection;			
8.	Preparation for diagnostic tests and procedures			
9.	Interpretations of laboratory findings;			
10.	Nursing care to all categories of patients followed by nursing process;			
11.	Dealing with common emergencies e.g. High fever, CPR, Shock, ARI, Hemorrhage etc;			
	Dealing with common emergencies e.g. High fever;			
	Dealing with CPR;			
	Dealing with Shock;			
	Dealing with ARI;			
	Dealing with Hemorrhage etc;			
12.	Maintenance of intake and output chart;			
	Maintenance of medication chart;			
	Maintenance of diabetic chart etc;			
13.	Administering drugs/medication correctly and safely;			
14.	Induction of catheter;			
	Induction of ryles tube;			
	Induction of flatus tube;			
15.	Operating sucker machine			
	Operating oxygen cylinder/ meter/ central supply;			
16.	Operating Mechanical Ventilation;			
	Operating cardiac monitor			
17.	Assisting with blood transfusion;			
18.	Discharge planning,			
19.	Keeping proper death note,			
20.	Documenting records			
21.	Enema simplex.			

Signature of the concerned Member of the Committee

Full Name :
Designation :
Date :

Grading Sheet

Name of the Intern :

Roll No :

Year of Internship :

No.	Parameters	Marks Allocated	Marks Obtained	Score Obtained
1	Completion of the number of assigned tasks (Log book)	2.5		
2	Knowledge and skills (competency) regarding Generic Skills	2.5		
3	Attitude and behavior	1.0		
4	Punctuality	1.0		
5	Responsibility and accountability	2.0		
6	Dressed up with proper uniform	1.0		
Total		10		

Signature of the concerned Member of the Committee

Full Name :

Designation :

Date :

Sample of Observation Checklists (General)

Check list for observer/evaluator

Procedure One : Techniques of taking health history (Adult, Child)

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate boxes]

Tasks	Performed	Not performed
1	2	3
Greet patient/attendant/parents		
Explain what s/he is going to do and why		
Seek required cooperation/assistance		
Maintain privacy		
Keep the patient in comfortable position		
Use nonthreatening gesture during communication		
Consider ethical issue during data collection		
Obtain data related to history of health		
Organize/record collected data accordingly		
Thanks patient/attendant/parents for her/his cooperation		

Signature of evaluator -----

Date -----

Procedure Two : Back care for helpless patient (Bedside Nursing care)

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Tasks	Performed	Not performed
1	2	3
Collect necessary equipments		
Identified the patient to provide back care according to procedure		
Greet the patients and explain the procedure		
Ensure privacy		
Turn the patient lateral position with the back towards		
Place the rubber sheet, covered with draw sheet, along length of the patient tucked in closely to back		
Wash hands properly		
Expose the patients back from the shoulder to buttock		
If the back of the patients is dirty wash the back first with warm water and soap water		
Using sponge cloth and warm water, gently massage the back, shoulder, hip and buttock in a circular motion		
Dry the back with towel		
Apply lotion on the palm and gently rub the back, shoulder hip and buttocks		
Apply powder on the buttock to prevent moist skin		
Assist the patient to change cloth and keep him in a comfortable position		

Signature of evaluator -----

Date -----

Procedure Three : Surgical Dressing (Special procedure)

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Tasks	Performed	Not performed
1	2	3
Greet the patients and explain the procedure		
Collect and take trolley with sterilized equipments to the patient's bedside.		
Maintain privacy		
Keep the patient in comfortable position and instruct patient not to touch wound or dressing materials		
Wash hand		
Pour cleaning solution as prescribed into the dressing cup and clean the wound by using right technique		
Apply sterile dressing to incision or wound and secure dressing with adhesive/ bandage		
Keep the patient in comfortable position		
Record the procedure		
Clean and dry all used articles and replace them in the proper place		

Signature of evaluator -----

Date -----

Procedure Four : Assist with Lumber Puncture (Nursing Procedure)

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Tasks	Performed	Not performed
1	2	3
Arrange all articles in a tray and bring them to the patient's bed side properly		
Greeting the patient and explain the procedure		
Maintain privacy		
Assist in proper positioning		
Wash hand properly		
Cover patient with top sheet and exposed only the backside		
Check vital signs before administering procedure		
Assist physician throughout the procedure accordingly and observe the patient		
Collect specimen in sterile and prescribed container		
Ensure the seal in punctured area		
Place the patient in supine position at least 6-12 hours and observe for any danger sign		
Send the specimen immediately		
Clean all used articles, dry and replace in the proper place		

Signature of evaluator -----

Date -----

Procedure Five : Catheterization

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Tasks	Performed	Not performed
1	2	3
Collect all required equipments bring to the patient bed side		
Greeting the patient and explain the procedure		
Maintain proper position		
Maintain privacy with screen		
Wash hand properly		
Clean genital area with antiseptic solution and apply jelly and wait 3-5 minutes		
Wearing surgical gloves, open the catheter pack and hold the catheter by artery forceps		
Introduce inner end in to the urethra up to the neck of outer end		
Observe the urine flow and client's condition		
Attached the urine bag with catheter, fixed with adhesive plaster in thigh, remove all articles and records urine volume		
Clean all used articles, dry and replace in the proper place		

Signature of evaluator -----

Date -----

Procedure Six : Nebulization

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Tasks	Performed	Not performed
1	2	3
Collect all required equipments bring to the patient bed side		
Greeting the patient and explain the procedure		
Maintain proper position		
Wash hand properly		
Check the medication and take right solution		
Connect the nebulizer switch		
Check vapor production and explain the technique of taking vapor		
Nebulize patient until finished the solution		
Replace equipments after procedure		
Evaluate and document the progress of therapy		

Signature of evaluator -----

Date -----

Procedure Six : Nebulization

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Tasks	Performed	Not performed
1	2	3
Collect all required equipments bring to the patient bed side		
Greeting the patient and explain the procedure		
Maintain proper position		
Wash hand properly		
Check the medication and take right solution		
Connect the nebulizer switch		
Check vapor production and explain the technique of taking vapor		
Nebulize patient until finished the solution		
Replace equipments after procedure		
Evaluate and document the progress of therapy		

Signature of evaluator -----

Date -----

Sample of Observation Checklists for Midwifery

Check list for observer/evaluator

Procedure One : ANC - Per abdominal examination

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Task	Performed	Not performed
1	2	3
Prepare all necessary equipment		
Wash hand		
Ask the women to empty her bladder		
Explain procedure to mother		
Keep the patient in comfortable position		
Measurement of fundal height & identify foetal pole at fundus		
palms are placed on either side of abdomen to determine large part (back) & small part(fetal extremities) by lateral palpation		
Grasp just above symphysis pubis using thumb & fingers of one hand to determine presenting part) 1st pelvic palpation		
The examiner faces the mother's feet & with tips of the first three fingers of each hand, exerts deep pressure in the direction of the axis of pelvic inlet to determine engagement. 2 nd pelvic palpation.		
Check fetal heart sound full 1 minute		
Record all findings		

Name of Observer

Date.....

Procedure Two : Management of 2nd stage of labour
 Name of Intern :
 Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Task	Performed	Not performed
1	2	3
Prepare all necessary equipment		
Put on protective barrier & wash hand		
Greet mother & explain the procedure		
Maintain privacy		
Provide continual emotional support & reassurance		
Allow the mother about choice of birth position		
Clean the perineum		
Use one hand to support the perineum with pad		
Assess the perineum whether an episiotomy is necessary or not		
Gently feel around the newborn neck for the cord		
Allow restitution & external rotation		
Apply gently downward traction on the head to allow the anterior shoulders to slip beneath the symphysis pubis		
Guide the head & trunk in an upward curve to allow the posterior shoulder to escape over the perineum		
Grasp the newborn around the chest to aid the birth of the trunk & lift it toward the woman's abdomen		
Note the time of birth		
Dry the newborn quickly & thoroughly with a clean, dry towel/cloth immediately after birth		
Wipe the newborn's eyes with a clean piece of cloth		
Place the newborn in skin-to-skin on the mother's abdomen & cover with a clean, dry towel/cloth		
Observe the newborn's breathing		
Wash hand thoroughly		
Record all findings on woman's record		

Name of Observer

Date.....

Procedure Three : Active management of 3rd stage of labour

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Task	Performed	Not performed
1	2	3
Prepare all necessary equipment		
Wash hand thoroughly		
Provide continual emotional support & reassurance the woman		
Place a sterile receptacle against the woman's perineum		
Palpate the mother abdomen to exclude the second baby		
Give 10 unit oxytocin intramuscularly		
Clamp the cord close to the perineum with forceps		
Use one hand to grasp the forceps		
Wait for the uterus to contract		
Place the other hand on mother's abdomen, with the palm facing towards the mother's umbilicus & gently apply pressure in an upward direction (counter traction).		
Firmly apply traction to the cord, in a downward direction, using the hand that is grasping the forceps.		
Apply steady tension by pulling the cord firmly & maintaining pressure.		
When the placenta is visible at the vaginal opening, cup it in both hands.		
Use a gentle upward & downward movement or twisting action to deliver the membranes		
Place the placenta in the receptacle provided e.g kidney tray		
Gentle massage the uterus & make sure that the uterus is well contracted.		
Immerse both gloved hands in 0.5% chlorine solution. Remove gloves by turning them inside out		
Wash hands thoroughly with soap & water & dry with a clean, dry cloth or air dry		
Record all findings on record sheet		

Name of Observer

Date.....

Procedure Four : Clamping & cutting the cord

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Task	Performed	Not performed
1	2	3
Prepare all necessary equipment		
Wash hand		
Greet mother & explain the procedure		
Put high level disinfected surgical gloves on both hands		
Palpate the cord & feel pulsation is stop or not		
Once the pulsation is stop tie the cord 2 fingers away from the umbilicus		
Tie the 2 nd knot 1 finger away from the 1 st knot		
Tie the 3 rd knot 4 finger away from the 2 nd knot		
Cut the cord 1 finger away from the 2 nd knot		
Clean & maintain aseptic technique		
Observe any bleeding from the cord or not		
Advise the mother about care of cord		
Record all findings		

Name of Observer

Date.....

Procedure Five : Placenta Examination

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Task	Performed	Not performed
1	2	3
Put clean gloves on both hand		
Hold the placenta in the palms of the hands, with maternal side facing upwards.		
Check all of the lobules are present and fit together.		
Hold the cord with one hand & allow placenta & membranes to hang down.		
Insert the other hand inside the membranes, with fingers spread out.		
Inspect the membranes for completeness.		
Note the position of insertion of the cord.		
Inspect the cut end of the cord for the presence of two arteries and one vein.		
Measuring placenta		
Place the placenta in a leakproof container for dispose after asking women about cultural practices.		
Immerse both gloved hands in 0.5% chlorine solution. Remove gloves by turning them inside out.		
Wash hands thoroughly with soap & water & dry with a clean, dry cloth or air dry		
Record all findings on record sheet		

Name of Observer

Date.....

Procedure Six : New born physical examination (normal)

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Task	Performed	Not performed
1	2	3
Prepare all necessary equipment		
Explain procedure to the mother		
Wash hand thoroughly		
Place new born on a clean, warm surface		
Remove the new born's clothing		
Check the newborn's general appearance, cry, breathing, heart rate & temp.		
Weight the newborn		
Measure the head circumference		
Examine head, checking for abnormality		
Examine the upper limbs, checking the skin, soft tissues and bones for abnormality		
Examine the chest for symmetrical movement		
Examine the umbilicus for bleeding and tightness of cord tie.		
Examine the genitalia for abnormalities		
Ensure the anus is patent		
Examine the lower limbs, checking the skin, soft tissues and bones for abnormality		
Examine the spine for abnormalities		
Wash hand thoroughly		
Inform mother of findings & ask the mother if she has additional question		
Record all relevant findings from the physical examination.		

Name of Observer

Date.....

Procedure Seven : Postpartum examination

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Tasks	Performed	Not performed
1	2	3
Prepare all necessary equipment		
Observe the women's general appearance		
Wash hands thoroughly		
explain each step of the physical examination		
Take the women vital signs		
Check the women's conjunctiva and palms for pallor		
Examine the breasts for engorgement and cracked/sore nipples.		
Examine the abdomen to check the uterus and detect tenderness.		
Examine legs for pain and tenderness.		
Examine perineum and genitalia for signs of trauma and infection.		
Observe color, odor and amount of lochia.		
Immerse both gloved hands in 0.5% chlorine solution. Remove gloves by turning them inside out		
Wash hands thoroughly		
Record all relevant findings from the physical examination on the women's record.		

Name of Observer

Date.....

Procedure Eight : P/V Examination

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Task	Performed	Not performed
1	2	3
Prepare all necessary equipment		
Greet mother & explain the procedure		
Wash hands thoroughly with soap & dry		
Put high level disinfected surgical gloves on both hands		
Observe the vulva for the presence of blood, mucus, amniotic fluid & other discharge.		
Cleanse the vulva with an antiseptic solution		
Gently insert two lubricated fingers of the examining hand into the vagina		
Direct the fingers along the anterior wall of the vagina and note vaginal temp. moisture & texture		
Palpate around the fornices & sense the proximity of the presenting part of the fetus to the examining fingers.		
Note the length, consistency & dilatation of the cervix		
Note the membrane are intact or rupture, ensure the cord has not prolapsed		
Measure the level of the presenting part in cm. above or below the women's ischial spines (station)		
Identify the presentation & determine position by feeling the feature of the presenting part		
Immerse both hands in 0.5% chlorine solution		
Remove gloves by turning them inside out		
Record all findings from the vaginal examination.		

Name of Observer

Date.....

Procedure Nine : Manual Removal of Placenta

Name of Intern :

Roll no :

[Please observe the intern's activities and tick in the appropriate box]

Task	Performed	Not performed
1	2	3
Prepare necessary equipment		
Provide continual emotional support & reassurance		
Ask the women to empty her bladder or insert a catheter		
Give medication to relieve pain		
Give prophylactic antibiotic		
Put on personal protective barriers		
Wash hands & forearms thoroughly & put on high-level disinfected elbow gloves		
Hold the umbilical cord with a clamp & pull the cord gently		
Place the fingers of one hand into the uterine cavity & locate the placenta		
Provide counter-traction abdominally		
Move the hand back & forth in a smooth lateral motion until the whole placenta is separated from the uterine wall.		
Withdraw the hand from the uterus, bringing the placenta with it while continuing to provide counter-traction abdominally		
Give oxytocin in IV fluid		
Massage the fundus of the uterus		
Examine the uterine surface of the placenta to ensure that it is complete		
Examine the women carefully & repair any tears to the cervix or vagina or repair episiotomy		
Remove gloves & discard them in a		
Wash hands thoroughly		
Monitor vaginal bleeding, & make sure that the uterus is firmly contracted		

Name of Observer

Date.....

Structure of the Committee [for the implementation of internship course]

- | | |
|-----------------|--|
| 1. Chairman – | Director of Hospital |
| 2. Secretary -- | Nursing Superintendent |
| 3. Member -- | Deputy Nursing Superintendent |
| 4. Member -- | Ward in-charge of the medicine ward |
| 5. Member -- | Ward in-charge of the surgery ward |
| 6. Member -- | Ward in-charge of the pediatric ward |
| 7. Member -- | Ward in-charge of the ANC/Postnatal/gynae ward |

Responsibility of the Committee

Committee should

- Observe the interns skill/competency
- Grading the Interns by using given parameters
- Monitoring, guiding and supporting when required
- Perform duty from 8am---4pm every day

Criteria of forming the Committee

- Register Nurse-Midwives
- B.Sc Nurse/B.Sc in Public Health Nurse
- M.Sc Nurse/M.PH
- 10 years service experience minimum
- Energetic & enthusiastic
- Committed to professional development

List of Contributors

- 1. Shuriya Begum**
Registrar
Bangladesh Nursing Council
- 2. Ira Dibra**
Principal
Dhaka Nursing College, Dhaka
- 3. Must. Salma Khatun**
Assistant Professor
College of Nursing, Mohakhali
Deputed to Directorate of Nursing Services
- 4. Sufia khatun**
Nursing Instructor (Own pay)
Dhaka Nursing College, Dhaka
- 5. Surayia Begum**
Nursing Instructor (Own pay)
Dhaka Nursing College, Dhaka
- 6. Halima Aktar**
Nursing Instructor (Own pay)
Dhaka Nursing College, Dhaka
- 7. Farida Begum**
Assistant Director (Edu), (Act as a Resource Person)
Directorate of Nursing Services, Dhaka

THE END