

Sample Log Entries

Example 1

Brief Description	15 year old boy with asthma. Coughing at night and using salbutamol 2 times a day. He was smoking 5 cigarettes per day.
Reflection: What will I maintain, improve or stop?	I will discuss with my trainer if I am not sure. I learned how to manage asthma. I will ask about smoking history and inhaler technique
Learning needs identified from this event	Read NICE guidelines on asthma

Example 2

Brief Description	<p>A 15 year old boy with asthma since primary school was brought by his mum as his sleep was disturbed by coughing at night. In the last 4 weeks, he had been using his salbutamol more and needed it 2 times a day. He was also short of breath when playing football. His repeat medications were Clenil Modulite MDI 50mg 2 puffs twice daily and salbutamol MDI 2 puffs prn. On examination his chest was clear and there was no respiratory distress. His heart rate and respiratory rate were normal. His peak flow was slightly lower than at his last review 9 months ago.</p> <p>After discussing with my trainer, I asked about smoking and inhaler use. The boy was smoking 5 cigarettes per day and didn't like taking his brown inhaler with the spacer. His inhaler technique was poor so he was changed to a breath-actuated device. We also discussed smoking cessation and using his Clenil regularly.</p>
Reflection: What will I maintain, improve or stop?	<p>I learned that inhaler technique is important and how to check it. It can be difficult to ask about sensitive things like smoking in front of parents.</p> <p>I will ask about medication use. I will be able to check inhaler technique and am aware of the different inhaler devices.</p>
Learning needs identified from this event	Spend time with the asthma nurse in the chronic disease clinic and read the guideline in the next month.

Example 3

Brief Description	I saw a 15 year old boy who was brought by his mum due to night cough and shortness of breath on running. He was reluctant to take his inhalers with a spacer but his technique was poor without one.
Reflection: What will I maintain, improve or stop?	<p>I found it awkward to ask him about smoking and initially did not do so until prompted by my trainer. He seemed embarrassed when admitting to smoking in front of his mum. It was difficult to re-establish rapport after this. I felt like I was lecturing him at the end of the consultation when I was explaining the breath-actuated device and I am uncertain whether he will use it.</p> <p>Some questions which seem routine to me may be sensitive areas for patients, especially adolescents. I need to be aware of this and develop strategies for either sign-posting these questions or speaking to adolescents without their parents.</p> <p>When I felt uncomfortable in the consultation, I started telling the patient and his mum rather than involving them.</p> <p>In future I would try to discuss sensitive things with an adolescent without their parent. One way I could do this is during the examination.</p> <p>I could have arranged for the patient to have follow-up with the asthma nurse to further discuss inhaler technique and asthma management.</p>
Learning needs identified from this event	<ol style="list-style-type: none"> 1. Practice discussing sensitive information with adolescents. I will practice this the next time I see an adolescent, and reflect on it in my learning log. 2. I need to learn more about adjusting asthma treatment and explaining asthma management to patients. I have arranged to spend an afternoon with the asthma nurse next week, and I will do a mini CEx with my trainer focusing on explanation to patients. 3. Find out about local smoking cessation services. I will discuss this with my trainer at my next tutorial.