



Practice-Based Individual Learning Program (PBIL) INDIVIDUAL LOG SHEET

Module Topic:

Name: *(Please print)*

Date: ____ / ____ / ____
 dd mm yy

**This reflective log sheet (Review 1 and 2)
must be completed in order to be awarded MAINPRO-C Credits**

Overall rating of PBSG module: poor 1 - 2 - 3 - 4 - 5 excellent

Key issues identified:

IMPORTANT: REVIEW 1 (to be completed immediately after finishing the module)

Here are a few questions to consider when completing Review 1:

Will this module change your current practice? *Please give a specific procedure, policy, or patient as an example, and reference your decision to the information in the module. (The Clinical Commentary in the Module provides an example of one way of doing this.) Also, indicate what barriers you foresee to this change if any?*

OR Are you considering changes in your current approach to this condition? *Please describe.*

OR Did this module confirm your current practice? *Please describe. (Also indicate what actions will you take to reinforce your current practice).*



Time spent reviewing the module and writing Review 1: _____

The information from this log sheet will be handled in a confidential manner and used only in summarized form for research purposes and to improve future workshops for the Practice Based Learning Programs. For more details, please go to: www.fmpe.org/en/documents/privacy.html

(Please turn over and complete side 2 before submitting)

REVIEW 2 (***Ideally you should have encountered this module's topic in your practice within three months of finishing this module. However, this section can only be completed after having experienced it in your practice.***)

State time since module completed: _____

Please review the first part (Review 1) of the log sheet. Then reflect on your practice experiences since first having read the module and summarize your reflections below.

Here are a few questions to consider when completing Review 2:

What impact has this module had on your practice generally? How do you feel about decisions you have made?

If you have made changes to your practice have they been successful?

If you have identified any further areas of practice change, how will you plan to address these?

TOTAL TIME (spent reading the module *and* writing both parts of the log sheet): _____

Date: _____ **Signature:** _____

Comments or future module topic suggestions ?

Please make a copy for your files then either (1) return the original copy to The Foundation office in the envelope provided **or** (2) fax to (905) 540-4988 to the attention of The Practice Based Individual Learning Program. Please note that all of your PBIL log sheets must be received at The Foundation's office within 60 days following your one year membership anniversary date.

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