



ASSESSMENT FORM FOR MEDICAL INTERNSHIP TRAINING CENTER

I. GENERAL INFORMATION

I.1 Name of facility/Institution.....

I.2 Address

I.3 ProvinceDistrict

I.4 Telephone No.....

I.5 E-Mail.....Website

I.6 Name of Hospital Director.....

I.7 Name of Clinical Director

I.8 Name of Appointed Internship coordinator

I.9 Nursing Officer In-charge.....

I.10 Category of Institution:

- a. Referral Hospital
- b. Provincial
- c. District Hospital
- d. Private Hospital
- e.

I.11 Brief summary of the institution

Catchment area (Total number of population served):

Department	Number of beds	Monthly Occupancy (%)	Outpatient visit/month
Surgery			
Internal Medicine			
Pediatrics (Including Neonatology)			
Obstetrics and Gynecology			
Procedure	Number per year		
Normal Deliveries per year			
Cesarean Section			
Major Surgeries per year			
Minor Surgeries per year			

II. CORE VALUES

Availability of a clear statement on the vision, mission and strategic plan that is relevant to the training and supervision of interns and ensuring evidence based practice: YES NO

III. FACILITIES

Department	YES (available)	NO (Not Available)
Mandatory		
Internal Medicine		
Surgery + Anesthesia		
Pediatrics		
Obstetrics and Gynecology		
Necessary		
Outpatient clinics		
Accident and Emergency		
Dental		
Medical laboratory		
Diagnostic Imaging		
Pharmacy		
Other desirable		
Mental Health		
Critical care		
ENT		
Ophthalmology		
Dermatology		
Rehabilitation		
Orthopedics and Trauma,		
One stop center and counseling services		

IV. HUMAN RESOURCES

Category	Names	RMDC Registration Number
Internists		
Pediatricians		
Obstetricians and Gynecologists		
Surgeons		
Other Specialists (Specify)		
TOTAL NUMBER OF SPECIALISTS		
Medical Officers		
TOTAL NUMBER OF MEDICAL OFFICERS		
Other Health Cadres (Numbers Only)		
Pharmacists		
General Clinical Officers		
Higher Diploma Clinical Officers		
Nurses		
Pharmaceutical Technologists		
Radiographers		
Sonographer		
None physicians Anesthetist		
Laboratory technologists/technicians		
Physiotherapists		
Occupational Therapists		

Plaster Technicians		
Public Health Officer		
Social Workers		
Nutritionists		
Others(<i>specify</i>):		
CPD Focal Point and clear CPD action Plan		

V. THE STRUCTURES

Structure	YES (Available)	NO (Not Available)
A resource center/medical library with internet access		
Suitable and secured accommodation for interns (within the Hospital or close proximity)		
Secure duty/call room for interns		
Availability of food and communication facilitations (Common User Group) on duty		
Medical ward		
Pediatric ward		
Neonatal unit		
Maternity unit		
Gynecology ward		
Dental Unit		
Functional operating theater		
Accident and emergency		
Pharmacy		

Laboratory		
x-ray		
Ultrasound		

Electricity and Energy back-up		
Enough water flowing		
Serviceable ambulances		

GENERAL OBSERVATION AND RECOMMENDATIONS OF THE AUDITOR

1. **Does the Hospital fulfill the requirements of being accredited as an Internship Training Center?**

YES NO

YES with Comments Comment:

2. **Recommendations to the Internship Committee**

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.....**END**.....