Mandatory Teaching Log

Foundation doctor

First name:*	
Last name:*	
GMC Number:*	
Training period	
Training period to:*	
Date completed:*	
Teaching Details	
Title:*	
Date of teaching:*	
Teaching type:*	o Core
	O Non-core
Teaching Setting:*	Consideration of the state of t
reaching Setting.	Seminar/tutorial/small group teaching
IMPORTANT NOTES: 1) Do not include - statutory and mandatory training - induction sessions	O Grand round
	O Balint group
	Schwartz round
	○ Simulation
	o E-learning
- ILS/ALS/equivalent	Other If Other (please specify)*:
-	
Number of hours:*	Round to the nearest half hour. Do not include lunch breaks/networking etc.
Maria	Do not include functi breaks/networking etc.
Notes:	
Optional, to record any brief details you haven't already recorded elsewhere.	
Uploads are optional and it is not required to upload evidence of attendance.	
Upload additional evidence	
Attachment(s)	
Details	