Trainee’s Name: ________________________  Institution: _______________________

<table>
<thead>
<tr>
<th>Item</th>
<th>Has this item been completed?*</th>
<th>Remarks / Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learning Log</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>Prescribing Log 5</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>Mini-CEX 2</td>
<td>☐ Yes ☐ No</td>
<td></td>
</tr>
<tr>
<td>Others:</td>
<td>☐ Yes ☐ No</td>
<td></td>
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<tr>
<td></td>
<td>☐ Yes ☐ No</td>
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<tr>
<td></td>
<td>☐ Yes ☐ No</td>
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</tr>
</tbody>
</table>

*If the item is not completed please provide an explanation

This portfolio has been reviewed on _______________ (date) by the following faculty:

Name: ________________________________  Signature: _______________________

Name: ________________________________  Signature: _______________________

Name: ________________________________  Signature: _______________________

Name: ________________________________  Signature: _______________________

Name: ________________________________  Signature: _______________________

Name: ________________________________  Signature: _______________________

Name: ________________________________  Signature: _______________________

Name: ________________________________  Signature: _______________________