



Trainee's name:		GMC N°:		Stage of training:	A	B	C	D
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Assessor's name:		Please circle one	Consultant Clinical scientist	SAS Trainee	Senior BMS Other
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Brief outline of procedure, indicating focus for assessment (refer to topics in curriculum). Tick category of case or write in space below.

<input type="checkbox"/> Specimen cut up (state specimen or scenario)	<input type="checkbox"/> Autopsy procedures (state aspect)	<input type="checkbox"/> Set up and use of microscope	<input type="checkbox"/> Systematic assessment of biopsy/cytology case (state type)
<input type="checkbox"/> Reporting procedures	<input type="checkbox"/> Use of camera and specimen photography	<input type="checkbox"/> Taking a fine needle aspirate	<input type="checkbox"/> Handling and reporting of frozen section
<input type="checkbox"/> Observation of trainee led teaching event	<input type="checkbox"/> Please specify		

Complexity of procedure: Low Average High

Please grade the following areas using the scale provided. This should relate to the standard expected for the end of the appropriate stage of training:		Below expectations		Borderline	Meets expectations	Above expectations	Unable to comment	
		1	2	3	4	5		6
1	Understands principles of procedure							
2	Demonstrate appropriate preparation pre-procedure							
3	Ensures patient safety (identification checks, adheres to SOP etc.)							
4	Complies with health and safety requirements (e.g. assessment of risk, use of personal protective equipment, aseptic technique where appropriate)							
5	Technical ability and correct use of equipment							
6	Communication skills (written and/or verbal)							
7	Consideration of patient focus and professional issues (e.g. respect for patient dignity, consent, compliance with Human Tissue Act)							
8	Seeks help where appropriate							
9	Overall ability to perform procedure							

PLEASE COMMENT TO SUPPORT YOUR SCORING:

SUGGESTED DEVELOPMENTAL WORK:
(particularly areas scoring 1-3)

Outcome: Satisfactory Unsatisfactory
(Please circle as appropriate)

Date of assessment:

Time taken for assessment:

Signature of assessor:

Signature of trainee:

Time taken for feedback: