



Anaesthesia Clinical Evaluation Exercise (Anaes-CEx) Assessment Form

Please complete the question using a cross (x). Please use black ink and CAPITAL LETTERS

Trainee's surname			
Trainee's forename(s)			
GMC number		GMC NUMBER MUST BE COMPLETED	

Observation			
Code number			

Observed by			
GMC number		GMC NUMBER MUST BE COMPLETED	
Date			
Signature of supervising doctor			

Clinical Setting:

Theatre ICU A&E Delivery Suite Pain Clinic Other

Assessment:

	Practice was satisfactory	Assessor's signature
	Practice was unsatisfactory	Assessor's signature

If the performance was judged to be unsatisfactory, you must tick the boxes on the reverse of this form to indicate which areas of performance you judged to be unsatisfactory.

Example of good practice were:

Areas of practice requiring improvement were:

Further learning and experience should focus on:

Domains	Unacceptable
Did not plan and prepare satisfactorily	
Did not make a clear plan for the patients care	
Is unaware of the particular hazards and problems of this procedure	
Did not consider all the important relevant information or fails to organise additional appropriate investigation	
Did not modify plans to avoid problems or mitigate their effects	
Did not prepare necessary drugs and equipment before starting the case	
Did not consider some important management options	
Did not recognise the potential hazards	
Did not request necessary additional equipment and resources in advance	
Did not request appropriate assistance	
Did not make satisfactory clinical decisions	
Decisions did not reflect a clear understanding of underlying principles of medical science and practice	
Did not initiate monitoring and observation appropriate to the clinical situation	
Did not reassess the options as the patient's condition changes	
Did not attend to critical events in the patient's progress	
Did not take into account the urgency of the situation in responding to events	
Did not know how to correctly operate the equipment	
Did not anticipate the need for interventions and slow to respond to the need for intervention	
Did not recognise obvious hazards	
Slow to review the effects of interventions	
Did not seek all relevant data before formulating responses	
Did not respond to incipient difficulty by increasing the intensity of monitoring and observation	
Did not focus sufficiently on safe practice	
Careless of patient identification, correct procedure (and site of surgery) and formal record of risk factors	
Did not abide by published standards, guidelines and protocols	
Did not abide by protocols for checking drugs and equipment and critical actions	
Breached procedures for avoiding healthcare associated infections	
Did not record having encountered difficulties	
Did not keep timely, accurate comprehensive records	
Exhibited poor standards of professional behaviour	
Insensitive to the patients opinions, hopes and fears	
Did not respect confidentiality	
Did not protect patients dignity	
Knowledge was below expectation	
Did not clearly explain plans and risks in a way that the patient could understand	
Poor team working was observed	
Did not discuss potential problems with the team	
Did not understand the importance of the concerns expressed by other team members	
Fails to demonstrate necessary leadership	
Fails to follow the lead of others when appropriate	
Made assumptions about capability of team members and did not act upon any poor performance	
Acts without consideration of the affects on others and fails to co-operate to achieve joint goals	
Displays panic and anxiety. Did not inspire confidence	
Did not give clear timely instructions	
Is rude to colleagues	
Practical work was poorly carried out	
Was clumsy	
Handled tissues and uses instruments roughly	
Did not follow an appropriate sequence in practical procedure	
Procedure failed due to the operators lack of skill	
Cannot explain how to operate equipment or makes mistakes	