

Independent Assessment Form: Rigid Ureteroscopy

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|--|-----------|----------|
| Trainee: | Assessor: | Surgery: |
| Hospital: | Duration: | |
| Operation more difficult than usual? Yes / No (If yes, state reason) | | |

| Competencies | | Rating N / F / P / E | Comments |
|--------------|---|-------------------------|----------|
| I. | Pre operative planning | | |
| 1 | Recognition of anatomical and pathological abnormalities (and relevant co-morbidities) and selects appropriate operative strategies / techniques to deal with | | |
| 2 | Demonstrates ability to make reasoned choice of appropriate equipment, materials or devices (if any) | | |
| 3 | Checks materials, equipment and device requirements with operating room staff | | |
| 4 | Ensures the operation site is marked | | |
| 5 | Checks patient records, personally reviews investigations | | |
| II. | Pre operative preparation | | |
| 1 | Checks in theatre that consent has been obtained | | |
| 2 | Gives effective briefing to theatre team | | |
| 3 | Ensures proper and safe positioning of the patient on the operating table | | |
| 4 | Demonstrates careful skin preparation and draping of the patient's operative field | | |
| 5 | Ensures general equipment and materials are deployed safely (e.g. catheter, operative energy source) | | |
| 6 | Ensures appropriate drugs administered | | |
| 7 | Arranges for and deploys specialist equipment (e.g. Irrigation system/ monitors/ Laser/ lithoclast) effectively | | |
| III. | Intra operative technique | | |
| 1 | Demonstrates safe passage of instrument per urethra including using dilator/ Otis urethrotome | | |
| 2 | Follows an agreed, logical sequence or protocol for the procedure | | |
| 3 | Consistently handles tissue well with minimal damage | | |
| 4 | Uses instruments appropriately and safely | | |
| 5 | Proceeds at appropriate pace with economy of movement | | |
| 6 | Anticipates and responds appropriately to variation e.g. anatomy | | |
| 7 | Deals calmly and effectively with unexpected events/complications | | |
| 8 | Performs cystoscopy and identifies ureteric orifice | | |
| 9 | Is able to perform retrograde ureterogram where appropriate | | |
| 10 | Is able to pass appropriate guidewire | | |
| 11 | Is able to pass ureteroscope to stone | | |

| Competencies | | Rating N / F / P / E | Comments |
|--------------|---|-------------------------|----------|
| 12 | Fragments or removes stone by appropriate method (usage of laser, lithoclast, basket) | | |
| 13 | Awareness of safety precaution in using laser | | |
| 14 | Prevents flush back of stone | | |
| 15 | Inserts stent or catheter where appropriate | | |
| 16 | Uses assistant(s) to the best advantage at all times | | |
| 17 | Communicates clearly and consistently with the scrub team | | |
| 18 | Communicates clearly and consistently with the anaesthetist | | |
| 19 | Asks for mentor for help and/or converts to open where appropriate | | |
| IV. | Post operative management | | |
| 1 | Ensures the patient is transferred safely from the operating table to bed | | |
| 2 | Constructs a clear operation note | | |
| 3 | Records clear and appropriate post operative instructions | | |
| 4 | Deals with specimens if applicable. Labels and orientates specimens appropriately | | |

Rating:

N = Not appropriate

F = Fail

P = Pass

E = Excellent

Overall Rating

| | Tick as appropriate | Comments |
|------------------|---------------------|----------|
| Fail | | |
| Pass | | |
| Excellent | | |

Signatures:

| | |
|-----------------|------------------|
| Trainee: | Assessor: |
|-----------------|------------------|

N.B.

*Assessors are normally consultants/ professor.

*The trainee should explain what he/she intends to do throughout the procedure. The Assessor should provide verbal advice if required, and intervene if patient safety is at risk.