



# Assessment of Procedural and Surgical Skills (APSS)

<b>Trainee Name:</b>	<b>Training Supervisor Name:</b>
<b>Year level of training:</b> <input type="checkbox"/> Year 1 <input type="checkbox"/> Year 2 <input type="checkbox"/> Year 3 <input type="checkbox"/> Year 4 <input type="checkbox"/> Year 5 <input type="checkbox"/> SIMG	<b>Date:</b>

**Procedure being assessed: Select only ONE**

<p><b>GYNAECOLOGY</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Endometrial sampling, outpatient (post Dec 2013 only)</li> <li><input type="checkbox"/> IUCD insertion/removal (post Dec 2013 only)</li> <li><input type="checkbox"/> Diagnostic hysteroscopy, dilation &amp; curettage</li> <li><input type="checkbox"/> Suction D&amp;C for retained products of conception</li> <li><input type="checkbox"/> Endometrial ablation (pre Dec 2013 only)</li> <li><input type="checkbox"/> Laparoscopic surgery: RANZCOG/AGES Skill levels 1-2</li> <li><input type="checkbox"/> Laparoscopic surgery: RANZCOG/AGES Skill level 3+</li> <li><input type="checkbox"/> Laparotomy: Basic (e.g. oophorectomy, ovarian cystectomy)</li> <li><input type="checkbox"/> Laparotomy: Intermediate (hysterectomy)</li> <li><input type="checkbox"/> Cystoscopy (post Dec 2013 only)</li> <li><input type="checkbox"/> Vaginal surgery: Basic (anterior+/-or posterior repair)</li> <li><input type="checkbox"/> Vaginal surgery: Intermediate (hysterectomy)</li> <li><input type="checkbox"/> Vulval biopsy (diagnostic) (post Dec 2013 only)</li> <li><input type="checkbox"/> Minor perineal surgery</li> </ul>	<p><b>OBSTETRICS</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> External cephalic version (post Dec 2013 only)</li> <li><input type="checkbox"/> Intrapartum procedures (including fetal scalp blood sampling) (post Dec 2013 only)</li> <li><input type="checkbox"/> Administration of local anaesthesia including pudendal block (post Dec 2013 only)</li> <li><input type="checkbox"/> Spontaneous vaginal birth</li> <li><input type="checkbox"/> Vaginal birth: Complex</li> <li><input type="checkbox"/> Instrumental birth: low/outlet vacuum</li> <li><input type="checkbox"/> Instrumental birth: low/outlet forceps</li> <li><input type="checkbox"/> Instrumental vaginal birth: midcavity or rotational</li> <li><input type="checkbox"/> Caesarean section: Basic</li> <li><input type="checkbox"/> Complicated caesarean section: fully dilated</li> <li><input type="checkbox"/> Complicated caesarean section: e.g. placenta praevia</li> <li><input type="checkbox"/> Repair of episiotomy or second degree perineal tear</li> <li><input type="checkbox"/> Repair of third and fourth degree tears</li> <li><input type="checkbox"/> Manual removal of placenta</li> <li><input type="checkbox"/> Management of PPH &gt;=1000ml: Examination under anaesthetic</li> </ul>
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<b>Degree of difficulty</b>	<input type="checkbox"/> Simple	<input type="checkbox"/> Complex
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**Reason for any added degree of difficulty (e.g. obesity, diabetes):**

Assessment	Significant input required from assessor			Some input required from assessor			Minimal input required from assessor			Not Assessable
	1	2	3	4	5	6	7	8	9	NA
<b>Consent</b>	<b>Confirms that specific informed consent has been obtained</b>									
	1	2	3	4	5	6	7	8	9	NA
<b>Preparation</b>	<b>Prepares appropriately for the procedure. Ensures assisting staff are present; checks correct instruments, equipment and suture material are available</b>									
	1	2	3	4	5	6	7	8	9	NA
<b>Clinical Knowledge</b>	<b>Demonstrates knowledge of specific procedure, including risks, outcomes, potential complications and their incidence</b>									
	1	2	3	4	5	6	7	8	9	NA
<b>Surgical Procedure and Care</b>	<b>Demonstrates effective handling and respect of tissue</b>									
	1	2	3	4	5	6	7	8	9	NA
	<b>Demonstrates appropriate management of surgical instruments and disposables</b>									
	1	2	3	4	5	6	7	8	9	NA
	<b>Demonstrates manual dexterity and confidence; correct procedural sequence with clear economy of movement and maximum efficiency (time and motion)</b>									
	1	2	3	4	5	6	7	8	9	NA
	<b>Demonstrates effective planning and progression of procedure (flow of operation)</b>									
	1	2	3	4	5	6	7	8	9	NA
	<b>Demonstrates an understanding of management of operative complications</b>									
	1	2	3	4	5	6	7	8	9	NA
<b>Patient interaction</b>	<b>Provides reassurance and checks for discomfort, concerns and complications</b>									
	1	2	3	4	5	6	7	8	9	NA
<b>Insight</b>	<b>Knows when to seek assistance, abandon procedure or arrange alternative care to prevent harm to patient</b>									
	1	2	3	4	5	6	7	8	9	NA
<b>Professional behaviour</b>	<b>Demonstrates appropriate and professional interaction with theatre staff, provides clear and concise instructions and conveys relevant information to team members</b>									
	1	2	3	4	5	6	7	8	9	NA



# Assessment of Procedural and Surgical Skills (APSS)

<b>Trainee Name:</b>	<b>Date:</b>
<b>Procedure being assessed: (as per page 1)</b>	

Complete only **ONE** of the following two sections (formative **OR** summative) dependent upon the purpose of this assessment. The assessor must discuss this assessment with the trainee following the procedure and before signing the form. The **summative** assessment must be submitted to the College through the online portfolio. Formative assessments may be uploaded to the online portfolio for storage or kept as hard copies by the trainee.

Formative Assessment	
Number of times procedure has been previously completed by trainee:	
<b>Formative Assessment</b>	<input type="checkbox"/> Performed this procedure with significant input <input type="checkbox"/> Performed this procedure with some input <input type="checkbox"/> Performed this procedure with minimal input ( <i>For a summative assessment, please use the section below</i> )
<b>Formative Feedback</b>	
<b>Assessor Signature:</b>	<b>Date:</b>

**OR**

Summative Assessment	
Before undertaking a summative assessment, trainees are strongly encouraged to complete a minimum of 3 formative assessments, including feedback. Number of times procedure has been formatively assessed:	
<b>FINAL Assessment</b> This form must be submitted to RANZCOG	<input type="checkbox"/> Performed the procedure with "minimal input" from assessor <i>To be assessed as 'performed the procedure with 'minimal input from assessor'; a trainee must achieve a score of at least of 7 in all listed skill areas.</i>
<b>Comments</b>	
<b>Assessor name:</b>	<b>Relationship to trainee:</b> <input type="checkbox"/> Training Supervisor <input type="checkbox"/> Consultant <input type="checkbox"/> Advanced Trainee (see instructions) <input type="checkbox"/> Senior Midwife (see instructions)
	<b>Assessor signature (if not Supervisor):</b>
	<b>Date:</b>
<b>Trainee signature:</b>	<b>Training Supervisor signature (please ensure this field is signed before submitting):</b>
<b>Date:</b>	<b>Date:</b>