

Certification in Obstetrical and  
Gynaecological Ultrasound (COGU)  
In-Hospital Clinical Assessment (IHCA)  
12 Week Ultrasound Assessment



The Royal Australian  
and New Zealand  
College of Obstetricians  
and Gynaecologists  
*Excellence in Women's Health*

**TRAINEE DETAILS**

Trainee Name: ..... Hospital: .....

Formative  Summative

|   |  |   |  |   |   |
|---|--|---|--|---|---|
| 1. Introduces self to patient and obtains relevant clinical details<br><b>ESSENTIAL</b> | 1<br>No introduction or history                          | 2 | 3<br>Minimal introduction and incomplete history                 | 4 | 5<br>Proper introduction and relevant history   |
| 2. Explain examination<br><b>ESSENTIAL</b>  | 1<br>Incomplete or misinformation                        | 2 | 3<br>Explanation complete but brief                              | 4 | 5<br>Full succinct explanation with indication and limitations. Include informed consent for NT |
| 3. Enter patient details into machine<br><b>ESSENTIAL</b>                               | 1<br>Unable to complete task correctly                   | 2 | 3<br>Accurate but not familiar with machine                      | 4 | 5<br>Excellent knowledge of machine and accurate data input                                     |
| 4. Selection of probe and routine examination pre-sets                                  | 1<br>Inappropriate probe or inability to select settings | 2 | 3<br>Correct but some hesitancy in use of equipment              | 4 | 5<br>Correct and confident use of equipment   |
| 5. Use grey scale controls including gain, depth, focus and zoom                        | 1<br>Suboptimal image quality                            | 2 | 3<br>Optimises image but uncertainty in use of machine functions | 4 | 5<br>Optimises image appropriately with familiarity   |
| 6. Assess cervix and uterine contents including fetal number and amniotic fluid volume  | 1<br>Incomplete demonstration                            | 2 | 3<br>Structures demonstrated but unsystematic approach           | 4 | 5<br>Systematic approach in both transverse longitudinal planes                                 |
| 7. Assess placenta including location and appearance                                    | 1<br>Incorrect placental location                        | 2 | 3<br>Some uncertainty in assessing placental site                | 4 | 5<br>Confident recognition of placental site  |
| 8. Assess chorionicity and amnionity in case of multiple pregnancy                      | 1<br>Incorrect assessment                                | 2 | 3<br>Some uncertainty  | 4 | 5<br>Confident assessment   |
| 9. Measure CRL, BPD and FL  | 1<br>Incorrect plane and measurement                     | 2 | 3<br>Hesitancy in image acquisition and calliper placement       | 4 | 5<br>Systematic image acquisition and measurement   |
| 10. Measure NT  | 1<br>Incorrect plane and measurement                     | 2 | 3<br>Hesitancy in image acquisition and calliper placement       | 4 | 5<br>Systematic image acquisition and measurement   |

|   |   |   |  |   |   |
|---|---|---|--|---|---|
| 11. Assess nasal bone   | 1<br>Incorrect plane and assessment         | 2 | 3<br>Some uncertainty in assessment                    | 4 | 5<br>Confident assessment and demonstration                         |
| 12. Use Doppler controls for Spectral, Colour and Power   | 1<br>Incomplete demonstration               | 2 | 3<br>Structures demonstrated but unsystematic approach | 4 | 5<br>Systematic approach longitudinal plane                         |
| 13. Assess with Doppler either one of:<br>• Ductus venosus<br>• Tricuspid regurgitation   | 1<br>Incorrect technique and assessment     | 2 | 3<br>Hesitancy in image acquisition and assessment     | 4 | 5<br>Systematic image acquisition and assessment                    |
| 14. Assess with Doppler:<br>• Uterine artery  | 1<br>Incorrect technique and assessment     | 2 | 3<br>Hesitancy in image acquisition and assessment     | 4 | 5<br>Systematic image acquisition and assessment                    |
| 15. Assess fetal brain and face including:<br>• Cranium<br>• Falx<br>• Choroid plexus<br>• Orbits<br>• Intracranial translucency  | 1<br>Incomplete demonstration               | 2 | 3<br>Structures demonstrated but unsystematic approach | 4 | 5<br>Systematic approach in both transverse and longitudinal planes |
| 16. Assess fetal heart and chest including:<br>• Situs<br>• 4 chambers<br>• AV valves<br>• Left outflow tract<br>• Right outflow tract<br>• Fetal heart rate                        | 1<br>Incomplete demonstration               | 2 | 3<br>Structures demonstrated but unsystematic approach | 4 | 5<br>Systematic approach in both transverse and longitudinal planes |
| 17. Assess fetal abdomen including:<br>• Stomach<br>• Kidneys<br>• Bladder  | 1<br>Incomplete demonstration               | 2 | 3<br>Structures demonstrated but unsystematic approach | 4 | 5<br>Systematic approach in both transverse and longitudinal planes |
| 18. Assess all limbs including:<br>• Humerus<br>• Radius, ulna<br>• Hand, 5 digits<br>• Femur<br>• Tibia, Fibula<br>• Foot  | 1<br>Incomplete demonstration               | 2 | 3<br>Structures demonstrated but unsystematic approach | 4 | 5<br>Systematic approach in both transverse and longitudinal planes |
| 19. Assess fetal spine in at least two of coronal, sagittal and aerial plane  | 1<br>Incomplete demonstration               | 2 | 3<br>Structures demonstrated but unsystematic approach | 4 | 5<br>Systematic approach in both transverse and longitudinal planes |
| 20. Recognise and assess abnormal pregnancy findings (aneuploidy markers, amniotic fluid, fetal size and anatomy), demonstrating a skill level appropriate to the level of training | 1<br>Skill level well below that expected   | 2 | 3<br>Appropriate skill level demonstrated              | 4 | 5<br>Skill level well above that expected                           |
| 21. Assess maternal anatomy:<br>• Uterus<br>• Ovaries, Adnexa<br>• Free fluid   | 1<br>Incomplete demonstration               | 2 | 3<br>Structures demonstrated but unsystematic approach | 4 | 5<br>Systematic approach both in transverse and longitudinal planes |
| 22. Recognise and assess maternal pathology (such as congenital anomaly of the uterus, ovarian cyst, fibroids), demonstrating a skill level appropriate to the level of training    | 1<br>Skill level well below that expected   | 2 | 3<br>Appropriate skill level demonstrated              | 4 | 5<br>Skill level well above that expected                           |
| 23. Strategies when poor views including offering a transvaginal scan   | 1<br>No strategies, accepting of poor views | 2 | 3<br>Good strategies but poor implementation           | 4 | 5<br>Good strategies, well implemented                              |

|   |  |   |   |   |  |
|---|--|---|---|---|--|
| 24. Explain findings to patient and counsel patient accordingly<br><b>ESSENTIAL</b>   | 1<br>Incomplete or misinformation  | 2 | 3<br>Explanation complete but brief                         | 4 | 5<br>Full succinct explanation with limitations                                    |
| <b>Report Writing</b>   |  |   |   |   |  |
| 25. Personal details and clinical indication included<br><b>ESSENTIAL</b>             | 1<br>Deficient   | 2 | 3<br>Mostly correct (minor omission)                        | 4 | 5<br>Accurate and correct  |
| 26. Organised and well structured; Relevant structures and measurements included      | 1<br>Deficient and disorganised; Relevant structures and measurements not included | 2 | 3<br>Mostly correct (mild disorganisation); Mostly included | 4 | 5<br>Organised and well structured; Accurate and all relevant information included |
| 27. Diagnosis or summary clearly stated (with relevant recommendations if applicable) | 1<br>Deficient   | 2 | 3<br>Adequate summary                                       | 4 | 5<br>Stated clearly with relevant recommendations                                  |
| 28. Addresses the clinical scenario<br><b>ESSENTIAL</b>                               | 1<br>Poorly addresses the clinical scenario  | 2 | 3<br>Clinical scenario partially addressed                  | 4 | 5<br>Addresses the clinical scenario well  |

**TRAINEE TO COMPLETE**

For summative assessments only:

Number of summative assessments required to achieve this outcome: .....

Number of satisfactorily completed weeks of clinical training: .....

Number of formative assessments performed: .....

Number of prior 12 week scans performed: .....

Aspects I think I performed well:

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Aspects I think need to be improved:

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**ASSESSOR TO COMPLETE**

Number of criteria boxes assessed as '4' or more: .....

All essential items assessed as '4' or more: Y / N

On assessment the trainee has:

- Achieved Above MAPS required for this 12 Week Ultrasound Assessment
- Achieved MAPS required for this 12 Week Ultrasound Assessment.
  - o (MAPS: a minimum of 21 of the 28 criteria to be scored at '4' or higher, which must include all essential items)
- Not Achieved MAPS required for 12 Week Ultrasound Assessment.

Aspects performed well:

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Aspects to be improved:

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**SIGNATURES**

Assessor: ..... Qualification: .....

Signature: ..... Date: .....

Trainee: ..... Date: .....

Signature: .....