

Assessment of Procedural Surgical Skills (APSS)



Ultrasound Assessment of Cervical Length

Trainee name		RANZCOG ID#
Training Supervisor name		Date

Procedure being assessed

OBSTETRICS (*the required level of supervision for satisfactory assessments*)

☐ Ultrasound assessment of cervical length (D)

Rating Key: Applies to the demonstration of the level of awareness, behaviour or technical skills

Level	1 Requires substantial input from assessor	2 Requires some assistance	3 Safely completes, but without mastery	4 Consistent with independent practice	Not Assessable
Relevant clinical information	Indication for ultrasound scan.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Relevant clinical history.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Checked correct patient name and date of birth				
Practical aspects of ultrasound scanning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Explanation to women regarding the scan procedure.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Machine settings required to optimise image.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Probe orientation and manipulation.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Systematic scanning approach to the examination.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Probe cleaning and/or sterilization.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Consent for transvaginal scan.				
Cervical length scan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Identified uterus and cervix				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Measured cervical length transvaginally				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Commented on funnelling or beaking				
Documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Commented on presence or absence of cervical sludge.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Demonstrated adequate documentation with all relevant/necessary information.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assessment Outcome	Interpreted the ultrasound scan findings in the context of the clinical scenario.				
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Formulated a management plan in the context of the scan findings.				
Assessment Outcome	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Assessment Outcome

Trainee name		Date
Number of times the procedure has been previously completed by the trainee		
Purpose of assessment	<input type="checkbox"/> Advanced Obstetrics ATM	

Assessment of Procedural Surgical Skills (APSS)



Ultrasound Assessment of Cervical Length

Global Rating: Please make an overall assessment based on your observation of the trainee.

- ☐ A [Performs with direct supervision (in room/assisting with procedure)]
☐ B [Able to perform with onsite supervision immediately available]
☐ C [Able to perform with offsite supervision / assistance in complicated cases]
☐ D [Able to perform independently and supervise others performing uncomplicated cases]

Global Rating - *the required level of supervision must be obtained for satisfactory assessments*

Procedure	Global Rating
Ultrasound assessment of cervical length	D

Assessment ☐ Satisfactory as per the above Global Rating
(*Summative assessment - upload in My.RANZCOG*) ☐ Not yet at the required level (*Formative assessment*)

Comments

Sign-off

Assessor name		
Assessor signature		Date
Assessor status	<input type="checkbox"/> Training Supervisor <input type="checkbox"/> Consultant <input type="checkbox"/> Senior Radiologist <input type="checkbox"/> Senior Sonographer	
Training Supervisor name		
Training Supervisor signature ¹		Date
Trainee signature		Date

¹ If the Assessor and Training Supervisor are the same person, only one signature is required.