



REGISTRAR/SRMO TERM ASSESSMENT FORM – 2023

Trainee Name:	Speciality/Unit/Term:
Rotation Date:	Hospital:

Guidelines for Unit Surgeon: Please enter a number (scored 1-5) in the “SCORE – ASSESSOR” column, which best reflects your assessment using the prompts below as a guide. Each row must contain a number or indicate unable to assess by writing “N/A”. It is expected that the majority of trainees would fall into the “satisfactory” category 3.

Guidelines for Trainee: Please enter a number (scored 1-5) in the “SCORE – TRAINEE” column, which best reflects your self-assessment of term performance using the prompts below as a guide. Each row must contain a number or indicate unable to assess by writing “N/A”.

You are required to complete one DOPS and Mini-CEX per mid/end of term assessment. You are required to organise this and it can be signed off by a supervising consultant, fellow or senior registrar.

Prompts:

EXCELLENT = 5, ABOVE AVERAGE = 4, SATISFACTORY = 3, DEFICIENT = 2, POOR = 1

DOMAIN	SCORE – TRAINEE	SCORE - ASSESSOR	POOR	SATISFACTORY	EXCELLENT
A. CLINICAL SKILLS					
Assessment History Examinations			Incomplete or inaccurate. Poorly recorded. Poor basic skills.	Usually complete, orderly and systematic.	Precise, thorough and perceptive.
Oral Presentation			Jumbled/disorganised.	Usually satisfactory.	Well organised. Systematic/focused.
Use of investigations			Inappropriate, poor ability to select/interpret.	Usually appropriate. Selective. Can read x-rays/understand results.	Almost always best choice of tests. Excellent at interpretation.
Judgement			Fails to grasp significance of findings or respond accordingly. Under or overreacts to emergencies.	Reliable. Competent under pressure. Asks for advice appropriately.	Outstanding clinician, who is aware of his/her limits.
Post-operative Care			Disinterested. Fails to notice complications and act appropriately.	Conscientious. Good awareness of complications. Reliable follow-up.	Excellent care. Notices problems early. Outstanding in follow-up.
B. TECHNICAL SKILLS					
(Please show completed DOPS and Mini-CEX to term supervisor, 1 each required per mid/end of term assessment. This can be signed off by a supervising consultant, fellow or senior registrar.)					
Surgical Laparoscopy/ Endoscopy			Too hasty or too slow. Slow learner. Poor hand/eye coordination.	Good hand/eye coordination. Sound skills for level of training.	Excellent and unusual ability at access procedures and endoscopic technique.
Open Surgery			Rough with tissues. “Near enough is good enough”. Hesitant.	Mastered basic skills. Well-ordered approach, careful with tissues.	Outstanding technician.
As Surgical Assistant			Fails to follow the operation.	Follows the operation with guidance from the operator.	Anticipates the needs of the operator.



C. ACADEMIC PERFORMANCE					
Knowledge of Subject			Poor knowledge base. Significant deficiencies or poor perspective.	Adequate fund of knowledge and relates it satisfactorily to patient care.	Outstanding knowledge of the subject. Knows common areas in depth. Aware of the unusual.
Case Presentations			Wordy or inaccurate on history, signs or diagnosis. Poor discussion.	Competent, concise and correct on clinical details. Good deductions.	Accurate and succinct case presentation, good perspective in case discussions.
Learning			Little evidence of reading texts or journals. Needs direction to study.	Reads appropriately, asks for information and follows-up.	Always keen to discover new knowledge. Takes extra courses.
Teaching			Avoids if possible. Poorly prepared, poorly delivered.	Competent and well prepared in teaching others.	Enthusiastic teacher. Logical and clear. Can inspire.
D. ATTITUDE					
Communication with Patients			Bad listener and communicator. Disliked by patients. Increases patient anxieties.	Listens well, explains well. Trusted by patient.	Excellent rapport. Inspires confidence. Patients delighted to be looked after by him/her.
Cooperation with Staff			Refuses to help out. Poor relationship with peers and may undermine.	Good rapport with nursing and other medical staff. Willing to help.	Always willing to help even if personally inconvenient. Diffuses any problems in the surgical team.
Self Motivation/ Organisation			Idle, lacking in any work enthusiasm. Behind with letters or summaries.	Hard-working, keen to learn, self-organises waiting list.	Full of energy. Performances go far beyond the "call of duty".
Reliability Punctuality			Poor time management. Forgets to do things. Unreliable.	Dependable. Efficient in use of his/her time.	Highly conscientious. Always completes tasks, anticipates well.
Stress Response			Copes poorly. "Disappears" when problems arise.	Responds appropriately, seeks help when needed, copes well.	Thinks ahead, still efficient when the going gets tough.
Acceptance of Criticism/Feedback			Responds poorly to criticism. Angry. "Turns off".	Adequate response. Work to correct the problem area.	Prompt response, marked improvement and positive change.

ACTIVITIES DURING CURRENT TERM (circle appropriate)

1) Presentations/Teaching	1. No current teaching or presentations 2. Teaching/presentations being prepared 3. Active teacher/presenter	_____ _____ _____
2) Continuing research	1. No research project 2. Research project in progress 3. Active researcher	_____ _____ _____
3) Publications	1. No current project 2. Project being prepared for submission for publication 3. Article(s) accepted for publication	_____ _____ _____
4) Clinical Development	1. 1 x Mini-CEX completed 2. 1 x DOPS completed	_____ _____



OVERALL PERFORMANCE RATING:

POOR 1	DEFICIENT 2	SATISFACTORY 3	ABOVE AVERAGE 4	EXCELLENT 5
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Additional/Explanatory Comments (If insufficient space, attach separate document)

Were deficiencies identified?

YES / NO

If Yes

Have the identified deficiencies been discussed with the trainees?

YES / NO

Have the identified deficiencies during the term been corrected?

YES / NO

Recommendations regarding future training/employment (Circle appropriate number)

1. Trainee should pursue training position or continued employment.
2. Obtaining position in training program needs identified deficiencies to be addressed.

SURGEON: _____ Print name: _____ Date: _____
(Signature)

TRAINEE: _____ I have sighted this assessment Date: _____
(Signature)

IMPORTANT: This form is invalid if not signed by both the Surgeon and Registrar/SRMO