



Direct Observation of Procedural Skills in Endoscopy (Endoscopic DOPS)

Please complete the questions

Trainees admitted between 1 July 2010 – 30 June 2014 must complete at least 1 during 2 years of BST training; Trainees admitted between 1 July 2014 – 30 June 2016 must complete at least 2 during 2 years of BST training; And staple it to your record of curriculum

Trainees admitted from 1 July 2016 onwards must complete at least 1 of Endoscopic or Surgical DOPS in every 3 months of surgical training; AND Trainees must complete at least 2 Endoscopic DOPS during the first 2 years of basic training; AND submit the forms together with the half-yearly assessment during January and July.*

** For trainees rotating to **A&E** and **ITU** who are unable to complete the DOPS assessment, they are required to **compensate the deficit** during other rotations in surgical specialties by **performing additional DOPS assessments** so as to achieve the total number of assessment forms required.*

^ Copy of this form should be made and retained by the trainee for his / her personal record of curriculum.

Trainee's name:

Date:

Parent Hospital:

Current Hospital:

Specialty/Subspecialty:

Declared Specialty if any:

CTS

Ped Surg

Plastic Surgery

NS

Urology

Vascular Surgery

O&T

ENT

A&E

ICU

Trainee level:

ST1

ST2

Term:

1st half

2nd half

Others (please state level):

Name of procedure:

Number of times procedure performed by trainee:

Case Number (HNO):

Location:

Endoscopy Suite

OT

Ward

Difficulty of procedure:

Easier than usual

Average difficulty

More difficult than usual

Please grade the areas below using the scale 1-6:

Standard: The assessment should be judged against the standard expected at completion of this stage of training (e.g. initial stage ST1/ST2). Stages of training are defined in the curriculum. Some specialties have also indicated standards associated with each training level (e.g. ST1, ST2 etc) which can also be applied.

Below expectations		Borderline	Meets expectations	Above expectations		U/C ¹
1	2	3	4	5	6	

1. Describes indications, relevant anatomy, & details of procedure						
2. Obtains informed consent, after explaining procedure & comps						
3. Prepares for procedure, check for endoscope, patient monitoring & O ₂						
4. Gets patient history, administers effective analgesia or safe sedation						
5. Proper positioning and demonstrates good communication with nurses						
6. Handles endoscope gently, enter correct lumen, maintain luminal views						
7. Aware of position; proper use of distension, suction & lens washing						
8. Demonstrates good technique of in/out and torque of endoscope						
9. Accurate identification and management of pathology						
10. Deals with any unexpected event or seeks help when appropriate						
11. Completes required documentation (written or dictated)						
12. Issues clear post-procedure instructions to patient and/or staff						

¹ Please mark this if you have not observed this aspect and therefore feel unable to comment.

Please use this space to record areas of strength or any suggestions for development.

Time taken for observation (mins):

Time taken for feedback (mins):

	Not at all									Highly
Trainee satisfaction with Endo_DOPS	1	2	3	4	5	6	7	8	9	10
Assessor satisfaction with Endo_DOPS	1	2	3	4	5	6	7	8	9	10

Assessor's name:

Assessor's position:

Consultant

SMO/AC

Assessor's signature:

Assessor's institutional e-mail address:

Trainee's initial