ADULT MEDICINE LONG CASE

CRITERIA FOR ASSESSMENT OF PERFORMANCE



	ASSESSMENT DOMAINS >		ACCURACY OF HISTORY	ACCURACY OF THE CLINICAL EXAMINATION	SYNTHESIS & PRIORITISATION OF CLINICAL PROBLEMS	UNDERSTANDING THE IMPACT OF THE ILLNESS ON THE PATIENT AND FAMILY	DEVELOPMENT AND DISCUSSION OF AN APPROPRIATE MANAGEMENT PLAN
	Excellent Performance		 Sophisticated interpretation of the history Focuses on key issues Shows perceptiveness in extracting difficult information 	 Actively seeks subtle signs that might enhance diagnosis Superior organisation of difficult examination 	 Identifies all major and minor problems Very careful prioritisation which includes a long term view Recognises social impact of disease 	 Shows mature understanding of subtle, difficult, or intimate aspects of patient's functioning Demonstrates balance when discussing issues and sophisticated use of external social support 	 Superior construction of management plan, including long term impact Highly developed and discriminating use of investigations Mature recognition and interpretation of inconsistent results
	5	Better than Expected Standard	 Emphasis on appropriate details Appreciates subtleties Interprets significant aspects of the history 	 Includes important relative negative signs Appreciates significance of more subtle signs 	 Confidently identifies essential problems Shows maturity in recognising lesser issues 	 Shows persistence in exploring subtle psychological issues, or issues that impact on the patient or family 	 Proposes appropriate management plan with good understanding of social impact lifestyle and psychological aspects of disease Good use of discriminating investigations Accurate interpretation of results
	4	Expected Standard	 Complete and accurate history Minimal need to clarify details Timely and well structured Some interpretation 	 Correctly identifies all important physical signs 	 Identifies all key problems Arranges problems in order of priority 	 Understands patient's physical and psychological functioning in relation to disease Appreciates impact of treatment and prognosis on patient and family 	 Proposes an appropriate management plan for the major issues Provides a sensible, balanced approach to investigations Interprets investigations appropriately Recognises important side effects of proposed treatment
	3	Below Expected Standard	 Poorly organised Omission of some key issues Need to clarify important details 	Omission and/or incorrect reporting of some important signs	 Problems poorly prioritised Significant problems undervalued 	 Fails to recognise some important aspects of the disease on patient or family Misses some aspects affecting functioning or reaction to illness 	 Some errors in arranging a management plan Erratic and non-discriminatory use of investigations Errors in the interpretation of tests Lacking some appreciation of complications of treatment
1	2	Well Below Expected Standard	 Omission of many key points Inaccuracies or lack of detail Repetitive, poorly structured Historical details not clarified 	Many significant signs not recognised	 Poor understanding of significant problems Requires substantial prompting 	 Poor understanding of the impact of disease on patient and family Shows little concern about psychological aspects 	 Inappropriate or poorly directed management plan Poor understanding of useful investigations Inability to interpret investigations Major inability to appreciate side effects of treatment
	1	Very Poor Performance	 No clear structure Focused only on single problem Minimal detail 	 Minimal attention to detail with the examination 	 Most key management issues unidentified No attempt to establish priority 	 Impact of disease not explored at all, or unable to be discussed 	 Poorly directed management plan without consideration of major issues Very poor ordering of investigations without consideration of expense or potential complications No attempt to interpret investigations No understanding of side effects of treatment
	EPA		EPA 1, EPA2	EPA 1	EPA 1	EPA 1, EPA2	EPA 1, EPA4, EPA 6
Competencies		es	Medical expertise, communication, (cultural competence)	Medical expertise	Medical expertise, judgement and decision making	Medical expertise, communication, ethics and professional behaviour, judgement and decision making, (cultural competence)	Medical expertise, communication, ethics and professional behaviour, judgement and decision making

ADULT MEDICINE SHORT CASE

CRITERIA FOR ASSESSMENT OF PERFORMANCE



	ASSESSMENT DOMAINS >		INTERACTION WITH PATIENT/FAMILY	EXAMINATION TECHNIQUE	EXAMINATION ACCURACY	INTERPRETATION AND SYNTHESIS OF PHYSICAL FINDINGS	INVESTIGATIONS/ MANAGEMENT
	Excellent Performance		Candidates SHOULD achieve the expected standard in terms of their interaction with the patient/family • Exceeds expected standard	 Fluent and accurate and within time Makes adjustment to routine where appropriate 	 Correctly identifies all essential and desirable signs 	 Establishes most likely diagnosis on basis of examination. Considers all likely alternatives 	 Correctly interprets investigations and integrates with examination findings without prompting Recognises and discusses areas of doubt Uses results to support differential diagnosis and discussion
	5	Better than Expected Standard	Candidates SHOULD achieve the expected standard in terms of their interaction with the patient/family • Meets expected standard	 Fluent and accurate and within time Makes adjustment to routine where appropriate 	 Correctly identifies all essential and most desirable signs 	 Identifies most likely diagnosis and provides reasonable differential diagnoses based on physical findings 	Correctly interprets all major findings
LEVEL OF PERFORMANCE	4	Expected Standard	Candidates SHOULD achieve the expected standard in terms of their interaction with the patient/family Introduces him/herself to the patient Shows respect for patient as indicated by preservation of patient's modesty, seeking permission for sensitive aspects of examination Recognises and modifies examination when painful 	 Undertakes systematic examination of required area or system without unnecessary duplication Demonstrates confidence in the examination Completes assigned tasks in appropriate time 	 Detects all essential signs Reports significant negative findings Does not find major signs that are not present 	 Provides appropriate interpretation of signs Recognises inconsistences in interpretation and findings Provides sensible priorities in diagnosis Discusses appropriate alternative diagnoses 	 Accurately interprets in context of investigations Suggests appropriate line of investigation and integrates them with examination findings
	3	Below Expected Standard	Candidates SHOULD achieve the expected standard in terms of their interaction with the patient/family • Inappropriate and insensitive approach to patient	Examination incomplete or lacking fluency or systematic approach	 Misses essential signs Fails to look for or mention important negative findings 	 Not confident with a diagnosis List of differential diagnoses poorly developed Unable to consider alternative explanations for findings Requires more than minor prompting to reconsider options 	 Does not offer appropriate investigations Misinterprets or is unable to integrate investigations with examination findings
	2	Well Below Expected Standard	Candidates SHOULD achieve the expected standard in terms of their interaction with the patient/family • Unduly rough, clumsy or causes pain without adjustment or apology	Very slow and requires substantial prompting and guidance	 Misses essential signs Finds abnormalities that are not present Fails to look for important negative findings 	 Unable to suggest a reasonable diagnosis May advance diagnoses inconsistent with signs Requires substantial prompting Unable to reconsider additional information which may alter diagnosis 	 Unable to use investigations to assist in diagnosis Inappropriate dependence on investigations
	1	Very Poor Performance	Candidates SHOULD achieve the expected standard in terms of their interaction with the patient/family • Requiring examiners to intervene	 Slow examination not completed in appropriate time Cannot perform appropriate examination of system 	 Misses all essential signs Finds abnormalities that are not present Fails to look for important negative findings 	 Unable to suggest a reasonable diagnosis Unable to interpret the physical signs elicited 	 Unable to suggest reasonable investigations Misinterprets information provided
	EPA		EPA 1, EPA 2	EPA 1	EPA 1	EPA 1	EPA 1, EPA 6
	•		Medical expertise, communication, ethics and professional behaviour	Medical expertise, judgement and decision making	Medical expertise, judgement and decision making	Medical expertise, judgement and decision making	Medical expertise, judgement and decision making

NOTE: In coming to an overall assessment score, not all domains will be equally weighted or always applicable due to variability of patient cases