## 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	
EVEL OF PERFORMANCE	6	Excellent Performance	Sophisticated interpretation of the history     Focuses on key issues     Shows perceptiveness in extracting difficult information	<ul> <li>Actively seeks subtle signs that might enhance diagnosis</li> <li>Superior organisation of difficult examination</li> </ul>	<ul> <li>Identifies all major and minor problems</li> <li>Very careful prioritisation which includes a long term view</li> <li>Recognises social impact of disease</li> </ul>	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	<ul> <li>Understands patient's physical and psychological functioning in relation to disease</li> <li>Appreciates impact of treatment and prognosis on patient and family</li> </ul>	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	
EVEL OF PER	3	Below Expected Standard	<ul><li>Poorly organised</li><li>Omission of some key issues</li><li>Need to clarify important details</li></ul>	Omission and/or incorrect reporting of some important signs	Problems poorly prioritised     Significant problems undervalued	<ul> <li>Fails to recognise some important aspects of the disease on patient or family</li> <li>Misses some aspects affecting functioning or reaction to illness</li> </ul>	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	
7	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	<ul> <li>Inappropriate or poorly directed management plan</li> <li>Poor understanding of useful investigations</li> <li>Inability to interpret investigations</li> <li>Major inability to appreciate side effects of treatment</li> </ul>	
	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	<ul> <li>Poorly directed management plan without consideration of major issues</li> <li>Very poor ordering of investigations without consideration of expense or potential complications</li> <li>No attempt to interpret investigations</li> <li>No understanding of side effects of treatment</li> </ul>	
	EPA		EPA 1, EPA2	EPA 1	EPA 1	EPA 1, EPA2	EPA 1, EPA4, EPA 6	
	Competenci	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	

## CRITERIA FOR ASSESSMENT OF PERFORMANCE



	ASSESSMENT DOMAINS >		INTERACTION WITH PATIENT/FAMILY	EXAMINATION TECHNIQUE	EXAMINATION ACCURACY	INTERPRETATION AND SYNTHESIS OF PHYSICAL FINDINGS	INVESTIGATIONS/ MANAGEMENT
LEVEL OF PERFORMANCE	6	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
	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	<ul> <li>Unable to suggest reasonable investigations</li> <li>Misinterprets information provided</li> </ul>
	EPA		EPA 1, EPA 2	EPA 1	EPA 1	EPA 1	EPA 1, EPA 6
(	Competencie	es	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