

**NB This is a short and incomplete version*

Communicate:

1	2	3	4
Unsatisfactory	Borderline	Satisfactory	Excellent

Define the problem systematically:

1	2	3	4
Unsatisfactory	Borderline	Satisfactory	Excellent

Develop appropriate management plan that incorporates relevant contextual factors:

1	2	3	4
Unsatisfactory	Borderline	Satisfactory	Excellent

Be flexible in response to new information:

1	2	3	4
Unsatisfactory	Borderline	Satisfactory	Excellent

Demonstrates rural context:

1	2	3	4
Unsatisfactory	Borderline	Satisfactory	Excellent

OVERALL IMPRESSION:

1	2	3	4
Unsatisfactory	Borderline	Satisfactory	Excellent

Significant prompting required

Critical Incident Reported *1. No High Flow O2
2. Wanting to proceed straight to intubation*

Provisional Grade Awarded/Second Opinion Required

Comments (essential for borderline or unsatisfactory):

Registrar started out reasonably well in discussion how to assess severity and recognised the sever/critical nature of this attack.

NO mention of high flow oxygen despite prompting NO monitoring. Leapt straight to intubation scenario. Clearly an inexperienced registrar

Unsafe to practice independently and unsupervised

CONSIDERATIONS:

PASS:

- ✓ Recognises that this is a severe to life threatening presentation of acute asthma
- ✗ Calm and reassuring response
- ✗ Starts O2 with salbutamol immediately
- ✗ Demonstrates competence with treatment of acute asthma – salbutamol/ipratropium/steroid/adrenaline
- ✗ Arranges for safe transfer to hospital and recognises need for admission
- Involves team approach to acute management – patient requires continual monitoring
- Discusses situation with either emergency physician or paediatrician
- Manages discharge planning appropriately with provision of asthma management plan
- Arranges for appropriate follow up – clinic, respiratory/school nurse

BORDERLINE:

- Hesitant in recognising severity of attack
- ✓ Poor structure to the emergency management
- Doesn't adequately explore reasons behind current acute attack

EXCELLENT:

- Rapidly recognises the severity of the attack and immediately proceeds to appropriate treatment and monitoring
- Demonstrates a calm and composed demeanour throughout
- Considers treatment with Magnesium and/or aminophylline (consults with specialist first)
- Transfers patient to hospital in a timely and safe manner
- Recognises and address the Father's distress
- Demonstrates an empathetic and holistic approach to the adolescent patient.

FAIL:

- Fails to recognise severity of attack
- ✓ Fails to demonstrate understanding of acute management
- Fails to engage with adolescent issues
- Fails to provide follow up arrangements

Sample Marking

Were there any technical issues with the videoconference equipment?

Yes/No (please delete accordingly)

If yes, please describe overleaf the problems experienced.