All trainees must be able to….

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| Trainee name: | LEAVE BLANK |
| Trainee GMC number: | LEAVE BLANK |
| Training year: | Choose an item. |
| Assessor name: | LEAVE BLANK |
| Assessor status: | Choose an item. |
| Assessor status – if Other, please specify: | Click or tap here to enter text. |
| Date: | Click or tap to enter a date. |

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| **Brief description of case** | Click or tap here to enter text. |

**Please grade the following areas using the scale below**

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| **Attitude and manner** |
| **Very good trainees** introduce themselves and establish the identity of the patient and any other attendant (e.g. spouse, parent, carer). They will be able to explain the purpose of the test and how it will be carried out. They are sympathetic and respond to any distress felt by the patient. **Poor trainees** fail to introduce themselves and do not identify the patient. They appear to hurry or ignore what the patient is saying, concerns or discomfort. They do not explain the test in an appropriate manner. |
| **Topic** | **Please choose major concerns, minor concerns, meets expectations or exceeds expectations from the drop-down list** |
| Introduction and explanation of examination | Choose an item. |
| Rapport with patient, empathy and sensitivity | Choose an item. |

| **Knowledge** |
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| **Very good trainees** carry out an examination in an appropriate environment, in a dim room and with suitable height adjustment. They start with slit lamp anterior chamber depth assessment by Van Herick grading system. They use appropriate lens and apply coupling agent if required. They apply topical anaesthesia to the eye and stabilise the lids with fingers. They advise the patient to look up or down then place the lens on the eye. They proceed with 360° examination, starting with the inferior angle. They visualise and identify key structures if present such as corneal wedge, Schwalbe’s line, non-pigmented and pigmented trabecular meshwork, scleral spur, ciliary body. Other features should be commented including iris approach, pigmentations, synechiae. They proceed to dynamic examination with attention to physiological variation e.g. change in angle and pupil size according to light levels. They apply indentation with appropriate pressure. They document and interpret findings with good understanding of grading method e.g. Shaffer, Spaeth system.**Poor trainees** position the patient or themselves poorly. They do not attend to the room environment (patient comfort, lighting, etc.). Gonioscopy is chaotic with poor manipulation of lens. Notation of findings and grading is unclear or incorrect. |
| **Topic** | **Please choose major concerns, minor concerns, meets expectations or exceeds expectations from the drop-down list** |
| **Slit lamp** |
| Room set up and patient position | Choose an item. |
| Anterior chamber depth assessment and grade with Van Herick system | Choose an item. |
| **Gonioscopy** |
| Lens choice, cleaning and preparation | Choose an item. |
| Application of topical anaesthesia and lens placement | Choose an item. |
| Identification of corneal wedge and other structures and features | Choose an item. |
| Examination in 360° of angle and iris | Choose an item. |
| Care of patient and lens | Choose an item. |
| **Dynamic assessment** |
| Use appropriate lens | Choose an item. |
| Adjustment of slit lamp, light exposure and eye position | Choose an item. |
| Indentation technique | Choose an item. |
| **Interpretation** |
| Understanding of angle grading system | Choose an item. |
| Interpretation and documentations of results | Choose an item. |

**Please use the boxes below for any further comments and recommendations for further training.**

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| Please note any aspects which were especially goodClick or tap here to enter text. | Please note any suggestions for improvement and action pointsClick or tap here to enter text. |
| Agreed action planClick or tap here to enter text. |

***This form should now been linked to the appropriate EPA***

**Signature of assessor: Signature of trainee:**

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| **PLEASE EMAIL COMPLETED FORM TO** **CURRICULUM2024@RCOPHTH.AC.UK** |