

DITs



Summative Clinical Assessment

I have completed a formative clinical assessment, and after discussion with my mentor, agree to undertake the Summative Clinical Assessment. I understand that, in the case of referral, the University of Cumbria Academic Regulations will apply to the clinical portfolio, meaning that only ONE reassessment opportunity is allowed per summative assessment and that this must be achieved in time for the portfolio to go through the next MAB. In the event of referral, or of incomplete portfolios, one further reassessment opportunity will be offered.

Student (name): Emily Davies

Signed: E. Davies

Date: 8/12/22

Witness: F. Burrows & KATJA NORCE

Name of Student: E. DAVIES

Name of Hospital: UHSM

Clinical Practice Module Module Name/Code:
HMSU9.....

Name of Supervisor: F. Burrows & KATIA NORSE
(Hospital Assessor – who has been approved/moderated by the course
leader/course team in the rolling moderation programme)

Name of Assessor/Moderator (University assessor – if present):

..... N/A

Date of Assessment: 8/12/22 & 13/12/2022

For each summative clinical assessment the following patients **must** be examined.

A separate summative assessment form must be completed for each area listed below e.g. for Obstetrics complete one form for 1st Trimester, one form for 2nd trimester and one form for 3rd Trimester.

HMSU9064 (Obstetric Ultrasound Clinical Practice Module) – 2 patients must be scanned in each section	Tick appropriate box
1. First Trimester (<i>routine dating assessment</i>) (<i>Does NOT need to include NT</i>)	
2. Second Trimester (<i>routine anomaly scan</i>) (<i>high risk/difficult/twin anomaly scan</i>)	
3. Third Trimester Growth Scan (<i>1 must be high risk or more complex, with Doppler of UA</i>)	
HMSU9065 (Gynaecological Ultrasound Clinical Practice Module) – 2 patients must be scanned in each section	Tick appropriate box
1. Non-pregnant female pelvis (<i>complex case or acute ward patient – TVS must be performed in one</i>)	
2. Non-pregnant female pelvis (<i>GP/OPD Referral – TA & TVS must be performed</i>)	
First Trimester/EPA/Complex non-pregnant gynae case (<i>threatened miscarriage or RPOC or non-pregnant gynae case TVS must be performed in one</i>)	
HMSU9066 (General Medical Ultrasound Clinical Practice Module) -2 patients must be scanned in each section	Tick appropriate box
1. Abdominal Scan (<i>one must be an acute/ ward patient</i>)	
2. Renal Tract & Prostate (<i>male</i>)	
3. Small parts/superficial structure: e.g. Testes or Thyroid (<i>GP/OPD referral</i>)	
HMSU9067 (Vascular Ultrasound Clinical Practice Module) -2 patients must be scanned in each section	Tick appropriate box
1. DVT assessment (<i>upper or lower limb</i>)	✓
2. Carotid Assessment	
3. Complex Arterial/ Venous Assessment (<i>upper or lower limb</i>)	

HMSU9068 (Musculoskeletal Ultrasound Clinical Practice Module) - 3 patients must be scanned in each section		Tick appropriate box
1. Joint/Anatomical Region (upper or lower limb)		
2. Joint/Anatomical Region (upper or lower limb must be a different region to assessment 1)		
HMSU9069 (Breast Ultrasound Clinical Practice Module) - (3 patients must be scanned in each section, at least 3 out of the 6 cases must be pathological)		Tick appropriate box
1. Negotiated cases		
2. Negotiated cases		
HMSU9070 (Negotiated Ultrasound 1 Clinical Practice Module) - (6 patients must be scanned in total -this can be divided into 3 separate summative assessments if required. This must be outlined in the student learning contract)		Tick appropriate box
HMSU9071 (Negotiated Ultrasound 2 Clinical Practice Module) - (6 patients must be scanned in total -this can be divided into 3 separate summative assessments if required. This must be outlined in the student learning contract)		Tick appropriate box
HMSU9072 (Negotiated Ultrasound 3 Clinical Practice Module) - (6 patients must be scanned in total -this can be divided into 3 separate summative assessments if required. This must be outlined in the student learning contract)		Tick appropriate box

Clinical Indication:

Patient I: Unilateral swelling, raised D-dimer

Patient II: Wells score 5

1. Preparation for the Ultrasound Examination

This part of the assessment is discussed with the student prior to the ultrasound examination. *To be completed by the supervisor.*

** = compulsory. The examination will be a fail if 'Yes' is not achieved during the examination

In order to tick "YES" the student must demonstrate to the assessor that they are working at Level 4 from the following statements for EACH patient scanned:

Level 1 Observes or is able to assist in the activity
 Level 2 Participates under direct supervision, in the application of the skill, showing an understanding of the underlying rationale behind the skill and an appropriate attitude.
 Level 3 Consistently applies the skill, knowledge and attitude to routine situations.
 Level 4 Consistently and competently applies the skill, knowledge and attitudes acquired to new or complex situations, should they arise.

Does the student:

Yes

No

- i) Understand why the request has been made? **
Include: comprehensiveness of request, understanding of terminology used in the request or ask for advice if appropriate.
- ii) Understand the implications of the clinical history
Include: review of available information and previous investigations, discuss possible ultrasound findings
- iii) Prepare the room for examination and all ensure equipment is prepared **
Including: selecting appropriate transducer and Preset, ensuring the correct client identification is entered into the machine or on PACS, hand hygiene
- iv) Understand the preparation needed for the examination and any limitations due to the nature of the examination or patient's condition



2. The Ultrasound Examination

The assessor is advised to take notes (overleaf) during EACH of the TWO ultrasound examinations in order to assist them in coming to a final decision on each aspect of the assessment sheet below

Assessors are advised to fill in the following AFTER they have observed the student performing the ultrasound examinations required for EACH assessment.

Does the student:

		Yes	No
i)	Positively identify the patient, in accordance with local protocols **	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ii)	Introduce those present in the room to the patient	<input checked="" type="checkbox"/>	<input type="checkbox"/>
iii)	Explain the procedure fully to obtain informed consent <i>Include: explaining the value and limitations of ultrasound, alternatives, if applicable, allow the patient time to ask questions & respond accordingly</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
iv)	Clarify clinical details and obtain further information, if required	<input checked="" type="checkbox"/>	<input type="checkbox"/>
v)	Position themselves and the patient in a way that reduces the hazards to themselves and the client. <i>Include: adapting scanning position to clients needs and ensuring their own posture is sufficient to reduce strain and the risk of WRULD(work related upper limb disorders)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
vi)	Perform the examination using a technique appropriate to the clinical condition of the patient and following the departmental protocols **	<input checked="" type="checkbox"/>	<input type="checkbox"/>
vii)	Select and operate equipment correctly during the examination. <i>Include: manipulation of equipment settings i.e. gain, TGC, focus, pre-processing, considering safety & length of time scanning</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- viii) Correctly demonstrate the relevant anatomy / pathology, during scanning procedure **
Include: demonstration of anatomy and pathology, assessing related areas, if required, and recording appropriate images, appropriate use of a second opinion if required



Does the Student:

Yes

No

- ix) Perform the scan in a safe and competent manner **

Includes: appropriate scan time, consideration of safety indices and output power



- x) Communicate appropriately with the patient and companions during the examination **

Include: clarity and accuracy of explanation, response to questions, body language, tone of voice



- xi) Discuss the results appropriately with the client or inform them of how to obtain the results, depending on local protocols

Include: clarity of explanation, accuracy of results, follow-up arrangements, adaptation to suit the needs of the client



- xii) Attend to the aftercare of the patient/client



3. After the Examination

Can the Student:

Yes

No

- I) Identify the anatomy and pathology they have demonstrated on the hard copy **



- II) Discuss the appearances of the anatomy/pathology that they have demonstrated.



- III) Write a written report, according to departmental protocols
Include: charts and graphs, where appropriate, language, style, accuracy, ask for assistance if required



4. Viva post examination

To be completed by the supervisor at the time of the assessment or by the University assessor (if present)

Can the student:

Yes

No

- i) Discuss the normal range of measurements for the organs assessed
- ii) Explain the significance of their observations
Include: plotting of graphs, impact on further management of client
- iii) Come to the correct conclusion from their observations and formulate a differential diagnosis
- iv) Discuss a range of management options relating to the type of examination performed
Include: viva discussion of possible scenarios which may include abnormal ultrasound appearances & associated ultrasound findings
- v) Explain the usefulness of ultrasound in this case & how the results might affect management
- vi) Discuss any relevant further investigations
Include: other imaging modalities, Alternative ultrasound investigations, surgical intervention, blood tests etc



- vii) Discuss/review the hard copy images and their equipment settings
Include: image quality relating to equipment settings i.e. focus, TGC presets selected, harmonics



Can the student:

Yes

No

i)

Evaluate safety indices and discuss the safe use of ultrasound

Include: MI and TI, output power, scan time



ii)

Explain a range of equipment settings demonstrated on the hard copy image

Include: identification of labels around image, discuss transducer frequency, evaluate the role of a range of settings i.e. dynamic range, focus, gain, gray scale, harmonics



iii)

Recognise and discuss artefacts that are present on the image

Include: identification of artefacts and ways to minimise them or use them in the diagnosis of pathology



If "NO" is ticked in 6 or more boxes –the student will FAIL the assessment. If "NO" is ticked in any box marked with ** the student will automatically fail the assessment.

Final mark:

PASS / REFER
 (delete as appropriate)

Supervisors Comments on the Examination

Did the student experience any difficulties with this examination? YES / NO
If yes, please state what they were and how the student coped with them:

Patient I: Easy Pt → Young girl with leg swelling.

Patient II: Poor mobility elderly patient. Required help to transfer. Painful leg. Emily coped well - no issues.

Patient III:

In your opinion do you feel that the student performed the scan in a competent and professional manner?
If no, please justify with comments:

YES / NO

- Patient I:
- Good Valsalva.
 - Get pt to breath for colouring.
 - Good popl competency checks.
 - Good curve probe use.
- Patient II:
- Excellent use of machine controls to optimise image.
 - Good pace. Caring for patient wellbeing.
- Patient III:
- Follow protocol at all times.
- EASY PT.

Signature of Supervisor (hospital assessor)

University Staff comments (if necessary):

Signature of University Assessor

In the event of a student failing the assessment, please state what action will be taken to help the student achieve clinical competence:

Patient comments

(Please comment below about any aspects of the examination you feel is relevant)

Please do NOT include personal details

Patient II

- Clear understanding of anatomy
- understands referral and discusses limitations especially if/when leg is swollen and painful
- Excellent control at probe and scanner controls - makes frequent changes to optimise images.
- Confident scan, clearly ~~clear~~ cares for patient wellbeing.

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