



Mini-CEX Guidelines (EMC/EMD/EMAD)

1. Introduction

A Mini Clinical Evaluation Exercise (Mini-CEX) is a snapshot of doctor-patient interaction observed and assessed by the Approved Assessor. The Mini-CEX is an opportunity for the trainee to be observed during a patient encounter to identify strategies to improve their clinical practice.

Mini-CEX cases are not pre-selected to “test” a trainee. The assessor is to see the patient “de novo” with the trainee, in real time, as part of normal work.

The Mini-CEX must be assessed by an Approved Assessor (see assessment summary page for Approved Assessor Matrix).

2. Instructions

To achieve an overall competent standard for each mini-CEX, trainees must be assessed as being at a competent standard in all six (6) criteria for each Mini-CEX.

2.1 EMC curriculum

Complete five (5) Mini-CEX assessments to a competent standard for the following presentations:

- Paediatric
- Trauma (with primary survey)
- Chest pain
- Abdominal pain
- Mental health (examination)

2.2 EMD curriculum

Complete five (5) Mini-CEX assessments to a competent standard for the following presentations:

- Obstetrics and gynaecology
- Multi-trauma
- Neurology
- Toxicology
- Renal/Endocrine/Metabolic

2.3 EMAD curriculum

Complete three (3) Mini-CEX assessments to a competent standard for any high complexity and different presentations relating to the themes of the EMC, EMD or EMAD.

2.4 Assessor

- Use the criteria on the assessment form and the descriptors where applicable to assess the Mini-CEX. Note: Paediatric can be indicated when the patient is under 16 years of age.
- Assessor may ask for feedback from the patient and other staff present.
- For the Global Assessment, to be assessed as ‘Competent’ the trainee must not have been assessed as ‘Not yet competent’ for any individual criteria.
- Assessment (including feedback comments) can be recorded in hard copy initially, however, it also needs to be entered and saved in the assessment area of the ACEM Educational Resources website.



3. Additional information/ tips

- Trainee to introduce themselves to the patient and explain their role and the role of the assessor.
- Assessor to observe as much of the encounter as practicable.
- Assessor should not interrupt trainee, unless deemed necessary to ensure safe patient care.
- Trainee to be allowed access to any relevant documentation as they would in routine, time-efficient practice.
- Trainee to synthesise the case at the end as they would on the floor at work.
- Assessor may corroborate the trainee's clinical findings by performing a brief focused assessment after the encounter as part of everyday clinical practice.

Mini-CEX Assessment Form (EMC, EMD, EMAD)



<p>Professionalism</p> <ul style="list-style-type: none"> Exhibit honesty, integrity, compassion and respect Participate effectively and appropriately in an inter-professional healthcare team Appropriately manage conflicts of interest Aware of own limitations Comply with relevant legislation, codes of conduct and requirements 	○	○
<i>Rationale:</i>		
<p>Organisation and Efficiency</p> <ul style="list-style-type: none"> Set priorities and manage time efficiently Manage competing demands and stress Use resources appropriately Manage resources appropriately 	○	○
<i>Rationale:</i>		

GLOBAL ASSESSMENT

Select the ONE best option that describes the trainee's overall performance in this Mini-CEX	Not Yet Competent	Competent
	○	○

Areas of strength:

Areas learning goals for next encounter:

Any other Primary Supervisor comments about this assessment (optional):

Trainee comments about this assessment (optional) – entered by Primary Supervisor:

(end of assessment)