Direct Observation of Procedural Skills (DOPS)



TRAINEE DATA		ASSESSOR	DATA							
Trainee First Name:		ssor First Name:		Hospital	l: (
Trainee Last Name:	Assess	or Last Name:		Date o Assessment						
Trainee ACEM ID:	Assessor	ACEM		Assessment						
PATIENT CASE DETAILS		ID:								
Brief Case Summary*										
Core Procedure* Name of (see end of p.2 for list)	of procedure	Non-Core Procedure*	Name of proce		Patient Adult Type*	Paediatric				
COMPONENT ASSESSMENT										
Select the ONE best option that describes the level of input required on this observed occasion:	Trainee performed; senior clinician input required for majority of task	Trainee performed; senior clinician input required for minority of task	Trainee performed independently; senior clinician observed and advised for trouble shooting	Trainee performed independentl senior clinicia required to ch	in junior FACEM	N/A Not Applicable				
Please rate the following task:	T	T		T						
Technical Skill Performing the Procedure	0	0	0	0	0					
Knowledge, technique, efficiency, safety	Rationale:									
Please rate as many of the following co	mponents as observ	ed:								
Indications and Contraindications	0	0	0	0	0	0				
Specific to patient and procedure	Rationale:									
Informed Consent Risks, benefits, carers, local guidelines	0	0	0	0	0	0				
where applicable	Rationale:									
Preparation and planning	0	0	0	0	0	0				
Setting, equipment (including monitoring), staff, patient positioning, medications	Rationale:									
Situational Awareness	0	0	0	0	0	0				
Procedure, patient, and surrounding environment	Rationale:					,				
Communication and Consultation	0	0	0	0	0	0				
Patient, carer/s, team	Rationale:									
Prevention and Management of Complications	0	0	0	0	0	0				
During and after procedure	Rationale									

Post Procedure Management Follow up investigations, clinical care	0	0	0		0		0		0		
and documentation	Rationale										
Discharge Advice to Patient/Carers	0	0	0 (0		0		0		
	Rationale:										
GLOBAL ASSESSMENT											
Select the ONE best option that describes the level of input required on this observed occasion:	Trainee performe senior clinician inp required for major of task	out senior clinician	Trainee performed; senior clinician input required for minority of task		Trainee performed independently; senior clinician observed and advised for trouble shooting				ainee performed dependently at nior FACEM level		
	0	0			0		0		\circ		
Areas of strength:	1										
Areas for development and/or agre	ed learning goals	for next encounts	ır.								
Areas for development analysis agree	ed rearring godis	ioi next encounte									
Any other Assessor comments about	ıt this assessment	(optional):									
Trainee comments about this assess	sment:										
Time taken for observation: Minu		Fime taken for feedl	back:	Minutes			(end	of ass	sessment)		
	c	ore DOPS Proce	dure L	ist:							
1. Advanced Airway			6	i. Lumbar	Puncture						
2. Use of non-invasive ventilati	ion device		7	7. Administration of procedural sedation							
3. Tube thoracostomy					venous acce						
4. DC Cardioversion			g). Arterial	line insertio	n					
5. Emergent fracture/ dislocati	1		Performance of Focused Assessment Sonography in Trauma (FAST or e-FAST).								