

RCP annual RITA summary of DOPS completed

This form is to be completed by the educational supervisor prior to each RITA

Complete this form using the generic forms from each assessment. A separate one of these forms should be used for each type of procedure assessed. If there are concerns a trainee's additional section forms (found in the trainee's logbook) can be reviewed at the RITA.

Trainee's GMC number: _____ Year of SpR training: _____

Hospital: _____ Name of educational supervisor: _____

Number of DOPS completed: _____ Name of procedure being assessed: _____

Total number of judges assessing these: _____

	Range of scores	Mean 'raters' score	Any score of 1-3?
Indications for procedure			
Obtaining informed consent			
Appropriate analgesia or safe sedation			
Technical ability			
Professionalism and consideration for patient including during the procedure			
Clinical Judgement			
Awareness and management of complications			
Interpreting diagnostic information			
Drawing up an appropriate management plan			
Counselling and communication of results to patient/relatives			
Overall Clinical Competence			
Comments:			
Future recommendations for training:			
	Signature:	Date:	
Trainee			
Educational supervisor			