

## ACCS ARCP 2020 Checklist: CT2/ST2

Trainee Name: \_\_\_\_\_

Date: \_\_\_\_\_

### 1) EVIDENCE TO BE SUBMITTED:

|   | Yes | No |
|---|-----|----|
| • Structured Training Report (STR)                                      |     |    |
| • Multisource Feedback (MSF)  |     |    |
| • OR STR explicitly states no concerns in the domains covered by an MSF |     |    |
| • Form R  |     |    |

### 2) EVIDENCE OF CURRICULUM COVERAGE ACCORDING TO PLACEMENTS IN YEAR:

#### Emergency Medicine

|   | Yes | No |
|---|-----|----|
| Assessments in any 2 Major Presentations:                       |     |    |
| • CMP1 Anaphylaxis  |     |    |
| • CMP2 Cardio-respiratory arrest (or current ALS certification) |     |    |
| • CMP3 Major trauma   |     |    |
| • CMP4 Septic patient   |     |    |
| • CMP5 Shocked patient  |     |    |
| • CMP6 Unconscious patient                                      |     |    |
| Assessments in each of the following 5 Acute Presentations:     |     |    |
| • CAP1 Abdominal pain   |     |    |
| • CAP6 Breathlessness   |     |    |
| • CAP7 Chest pain   |     |    |
| • CAP18 Head injury   |     |    |
| • CAP30 Mental health   |     |    |
| Assessments in each of the following 4 Practical Procedures:    |     |    |
| • PP11 Airway Maintenance                                       |     |    |
| • PP16 Fracture/joint manipulation                              |     |    |
| • PP18 Wound care   |     |    |
| • PP19 Primary survey   |     |    |
| Safeguarding to Level 2   |     |    |

### Acute Medicine

|  | Yes | No |
|--|-----|----|
| Assessment in any 1 Major Presentation:                              |     |    |
| • CMP1 Anaphylaxis   |     |    |
| • CMP2 Cardio-respiratory arrest                                     |     |    |
| • CMP3 Major trauma  |     |    |
| • CMP4 Septic patient  |     |    |
| • CMP5 Shocked patient   |     |    |
| • CMP6 Unconscious patient   |     |    |
| Assessments in any 6 Acute Presentations using mini CEX, CbD or ACAT |     |    |

### Anaesthetics

|  | Yes | No |
|--|-----|----|
| Assessments in each of the following 5 Anaesthetic-CEX:      |     |    |
| • IAC A01 Preoperative assessment                            |     |    |
| • IAC A02 Management of the spontaneously breathing patient  |     |    |
| • IAC A03 Anaesthesia for laparotomy                         |     |    |
| • IAC A04 Rapid sequence induction                           |     |    |
| • IAC A05 Recovery   |     |    |
| Assessments in each of the following 8 Anaesthetic CbDs:     |     |    |
| • IAC C01 Patient identification                             |     |    |
| • IAC C02 Post-op nausea & vomiting                          |     |    |
| • IAC C03 Airway assessment                                  |     |    |
| • IAC C04 Choice of muscle relaxants & induction agents      |     |    |
| • IAC C05 Post-op analgesia                                  |     |    |
| • IAC C06 Post-op oxygen therapy                             |     |    |
| • IAC C07 Emergency surgery                                  |     |    |
| • IAC C08 Failed intubation                                  |     |    |
| Assessments in each of the following 6 Anaesthetic DOPS:     |     |    |
| • IAC D01 Demonstrate function of anaesthetic machine        |     |    |
| • IAC D02 Transfer/positioning of patient on operating table |     |    |
| • IAC D03 Demonstrate CPR on a manikin                       |     |    |
| • IAC D04 Technique of scrubbing up, gown & gloves           |     |    |
| • IAC D05 Competencies for pain management including PCA     |     |    |
| • IAC D06 Failed intubation practical drill on manikin       |     |    |
| Logbook of cases encountered                                 |     |    |

**Intensive Care**

|  | Yes | No |
|--|-----|----|
| Assessments in each of the following 11 Practical Procedures:  |     |    |
| • ICM 1 Peripheral venous cannulation                          |     |    |
| • ICM 2 Arterial cannulation                                   |     |    |
| • ICM 3 ABG sampling & interpretation                          |     |    |
| • ICM 4 Central venous cannulation                             |     |    |
| • ICM 5 Connection to ventilator                               |     |    |
| • ICM 6 Safe use of drugs to facilitate mechanical ventilation |     |    |
| • ICM 7 Monitoring respiratory function                        |     |    |
| • ICM 8 Managing the patient fighting the ventilator           |     |    |
| • ICM 9 Safe use of vasoactive drugs and electrolytes          |     |    |
| • ICM 10 Fluid challenge in an acutely unwell patient (CbD)    |     |    |
| • ICM 11 Accidental displacement ETT / tracheostomy            |     |    |

**3) EVIDENCE OF MINIMUM CURRICULAR ELEMENTS FOR CT2/ST2 AS A WHOLE:**

|   | Yes | No |
|---|-----|----|
| • Common Competencies -13/25 to Level 2         |     |    |
| • <i>OR</i> compensatory evidence in STR        |     |    |
| • Major Presentations - 5/6                     |     |    |
| • Acute Presentations - 20/38                   |     |    |
| • Practical Procedures - 16/25 (incl. ICM 1-11) |     |    |
| • IAC Sign-off and Anaesthetic Logbook          |     |    |

**Scope of practice** – Educational Supervisor to record below any changes to rotations/placements or other factors affecting trainee’s clinical exposure, curriculum coverage or supervision (continue overleaf if necessary):

ES name and signature

Trainee name and signature

Date:

Date: