# WEST MIDLANDS ACCS CT2 Checklist

#### Summary of Year

All 6 Major Presentations completed (year 1+2) – upload signed list from ES of completed procedures	Date
All 38 Acute Presentations completed (year 1+2) – upload signed list from ES of completed procedures	Date
All 45 Practical procedures completed (year 1+2) – upload signed list from ES of completed procedures	Date
Common Competencies >50% completed by ALL trainees to Level 2 (year 1+2) - upload signed list from ES of completed competencies	
Initial Assessment of Competence Certificate	
Structured Training Report (Can accept 1 for whole year, or separate STR for Anaesthesia and ICM).	YES / NO (please circle)
MSF – minimum of 12 responses (annual) with spread of participants as agreed with Educational Supervisor	YES / NO (please circle)
Evidence of Audit or Quality Improvement Project (one every 12 months)	YES / NO (please circle)
Progress in relevant post graduate examinations:	Exams achieved
Ensure ALS up to date:	Date
Safeguarding Children Level 2 (upload certificate to ePortfolio)	Date
ACCS AM trainees only - Multi Consultant Review x 4	
EM Trainees only – Upload certificates of ACCS teaching attended	
ANAESTHESIA or ICM trainees: Complete core ICM progression grid (see Anaesthesia Workbook)	
Learning Agreement, PDPs and IPR (IPR minimum 3 per year)	
Educational activity, CPD activity & Reflective practice	
Logbook of Anaesthetic cases – to cover whole ARCP period	
JEST and GMC Survey completion (evidence uploaded)	YES / NO (please circle)

## To be completed by trainee and countersigned by Educational Supervisor

Trainee signature:	Date:	
Education Supervisor signature:	Date:	
Education Supervisor name PLEASE PRINT		

## <u>Anaesthesia</u>

Initial Assessment of Competence – 0-3 months	Date of assessment	Assessor's name
IAC A01 Preoperative assessment	Date	Name
IAC A02 Management of the spontaneously breathing patient	Date	Name
IAC A03 Anaesthesia for laparotomy	Date	Name
IAC A04 Rapid Sequence Induction	Date	Name
IAC A05 Recovery	Date	Name
IAC C01 Patient identification	Date	Name
IAC C02 Post op nausea & vomiting	Date	Name
IAC C03 Airway assessment	Date	Name
<ul> <li>IAC C04 Choice of muscle relaxants &amp; induction agents</li> </ul>	Date	Name
IAC C05 Post op analgesia	Date	Name
IAC C06 Post op oxygen therapy	Date	Name
IAC C07 Emergency surgery	Date	Name
IAC C08 Failed Intubation	Date	Name
<ul> <li>IAC Basic and advanced life support</li> </ul>	Date	Name
IAC D01 Demonstrate function of anaesthetic machine	Date	Name
IAC D02 Transfer and positioning of patient on operating table	Date	Name
IAC D03 Demonstrate CPR on a manikin	Date	Name
IAC D04 Technique of scrubbing up, gown & gloves	Date	Name
IAC D05 Competences for pain management including PCA	Date	Name
<ul> <li>IAC D06 Failed Intubation practical drill on manikin</li> </ul>	Date	Name
<ul> <li>PLUS – Introduction to Anaesthesia (Basis of anaesthesia)</li> </ul>		
Pre-operative assessment	Date	Name
Pre-medication	Date	Name
Induction of GA	Date	Name
Intra-operative care	Date	Name
Post-operative recovery	Date	Name
Anaesthesia for emergency surgery	Date	Name
<ul> <li>Management of cardio-respiratory arrest (adult and children)</li> </ul>	Date	Name
Infection Control	Date	Name
Further modules: (complete in ICM or anaesthesia)		
Sedation	Date	Name
Transfer Medicine (transfer course mandatory)	Date	Name

#### Intensive Care Medicine

	mative assessments in 2 remaining Major Prese			
•	CMP1 Anaphylaxis		Date	Name
•	CMP2 Cardio-respiratory arrest		Date	Name
•	CMP3 Major Trauma		Date	Name
•	CMP4 Septic patient (ideally assessed in ICM)		Date	Name
•	CMP5 Shocked patient		Date	Name
•	CMP6 Unconscious patient		Date	Name
Mar	ndatory additional WPBA for ICM. (cover any ou	tstanding Acute prese	entations)	
		CAP Number	Date	Assessor
1.	CBD			
2.	CBD			
3.	CBD			
4.	Mini-CEX			
5.	Mini- CEX			
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	Mini-CEX			
6.				
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6. 7. For	Mini-CEX Mini-CEX mative assessment of 13 practical procedures a	s DOPS (may be ass	essed as Mini ( Date	CEX or CbD if
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