General Surgery IMGs on Pathway to Fellowship
Mini-Clinical Examination (Mini-CEX)

First Name: ______________________  Surname: ______________________  Id Number: ______________________

Term: (circle)  1  2  3  4  5  6  7  8  9  10  11  12

Hospital: ______________________  Unit: ______________________

Date: ______________________  Supervisor Name: (completing form) ______________________

Setting:  ☐ Ward  ☐ HDU/ICU  ☐ ED  ☐ Outpatient  ☐ Other ______________________

Focus:  ☐ History  ☐ Diagnosis  ☐ Consent  ☐ Management  ☐ Examination

Complexity:  ☐ Low  ☐ Average  ☐ High

Please assess and mark the following areas:
(tick one rating only for each area below)

1. Communicates in an orderly, clear and concise manner; avoids jargon; checks for understanding.
2. Actively listens; duly acknowledges questions, concerns and comments from the patient; shows empathy.
3. Accommodates for cultural, linguistic and emotional needs of the patient.
4. Elicits and recognises key features of a presentation.
5. Examination technique is orderly, correct, safe and complete; signs are elicited.
6. Considers and weighs up all available information; applies knowledge; has an evidence-based approach.
7. Reaches appropriate diagnosis; formulates a safe & appropriate management plan.
8. Addresses material risks when obtaining informed consent.
9. Documentation is legible, contemporaneous, orderly, clear, concise and complete.

<table>
<thead>
<tr>
<th>Overall Rating (Circle one rating)</th>
<th>Significant Improvement Required</th>
<th>Some Improvement Required</th>
<th>Competent</th>
</tr>
</thead>
</table>

Suggestions for development:

Agreed action:

IMG Signature: ______________________

Supervisor Signature: ______________________
Notes to IMGs and Supervisors on Completing Mini-CEX Forms

- The mini-clinical examination (mini-CEX) is a method of assessing a range of clinical assessment and management skills in various clinical settings. It facilitates feedback in order to develop behaviours and performance related to knowledge, communication, decision-making, management and advocacy skills. The assessment is formative, aimed at guiding further development of surgical practice.

- The assessment involves a Supervisor (a surgeon) observing the IMG interacting with a patient within the workplace and in an unrehearsed clinical encounter. The Supervisor’s evaluation is recorded on a structured checklist, which enables the Supervisor to provide verbal and specific feedback to the IMG immediately after the encounter.

- The nature and complexity of the patient’s condition should be commensurate with what the IMG as a consultant surgeon would be expected to encounter in general surgical practice.

- All IMGs on a pathway to General Surgery Fellowship are required to participate in at least one mini-CEX assessment during each 3-month term whilst under supervision or oversight.

- Supervisors are required to conduct a formal assessment in the real world clinical setting, assessing and marking the identified areas using the following ratings:

<table>
<thead>
<tr>
<th>Rating</th>
<th>Descriptor</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Significant improvement required to demonstrate satisfactory performance (areas for improvement are to be specified).</td>
</tr>
<tr>
<td>1</td>
<td>Some improvement required to demonstrate satisfactory performance (areas for improvement are to be specified).</td>
</tr>
<tr>
<td>2</td>
<td>Performance is competent.</td>
</tr>
<tr>
<td>N</td>
<td>Not observed or not applicable and therefore not assessed</td>
</tr>
</tbody>
</table>

- Supervisors must also give an overall mark for the assessment. Multiple scores of “1” or a single score of “0” indicates a need for significant improvement in performance. The Supervisor should counsel the IMG who should be given opportunity to improve in the relevant skills before being reassessed. This process may be repeated until satisfactory performance is demonstrated.

- All completed assessment forms must be signed and uploaded to ICAMS.

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