|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Biomedical Scientist’s Name | |  | | IBMS Membership Number | | |  |
| Assessors Name | | | | | | | |
| Assessor Role  (Please Circle One) | Consultant | | Clinical Scientist | | Senior BMS | Trainee | |
| Brief Outline of Specimen Dissected |  | | | | | | |
| Category of Specimen (Please Circle) | B | | C | | D | E | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Please grade the following areas using the scale provided. This should relate to the standard expected for the end of the appropriate stage of training:** | Below expectations | | Borderline | Meets expectations | Above expectations | | Unable to comment |
|  | 1 | 2 | 3 | 4 | 5 | 6 |  |
| 1 | Understands principles of procedure |  |  |  |  |  |  |  |
| 2 | Demonstrate appropriate preparation pre-procedure |  |  |  |  |  |  |  |
| 3 | Ensures patient safety (identification checks, adheres to SOP etc.) |  |  |  |  |  |  |  |
| 4 | Complies with health and safety requirements (e.g. assessment of risk, use of personal protective equipment, aseptic technique where appropriate) |  |  |  |  |  |  |  |
| 5 | Technical ability and correct use of equipment |  |  |  |  |  |  |  |
| 6 | Communication skills (written and/or verbal) |  |  |  |  |  |  |  |
| 7 | Consideration of patient focus and professional issues (e.g. respect for patient dignity, consent, compliance with Human Tissue Act) |  |  |  |  |  |  |  |
| 8 | Seeks help where appropriate |  |  |  |  |  |  |  |
| 9 | Overall ability to perform procedure |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| PLEASE COMMENT TO SUPPORT YOUR SCORING |  | SUGGESTED DEVELOPMENTAL WORK  (particularly areas scoring 1 - 3) |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Outcome | Satisfactory | Unsatisfactory |  | Time taken for Assessment |  | Time taken for Feedback |  |
| (Please circle as appropriate) | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Assessor Signature |  | Biomedical Scientist’s Signature |  |