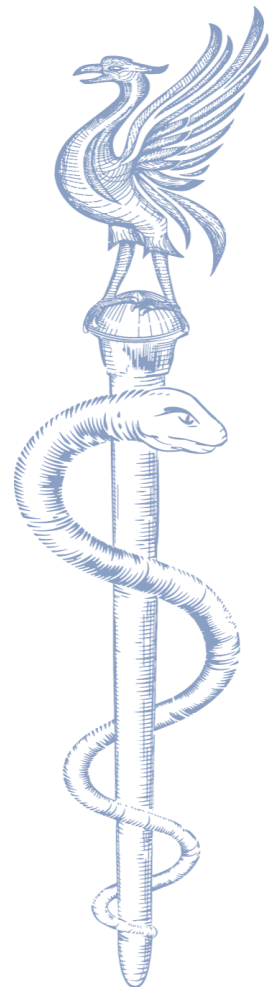




Year 4 MBChB Placement E-portfolio Requirements

2022/23



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1. Placement overview

Year 4 has eight 4-week placements:

- General Practice B
- Medicine C: Geriatric Medicine, Renal & Rheumatology
- Medicine D: Palliative Care, Oncology & Haemato-oncology
- Neurology
- Obstetrics & Gynaecology B
- Paediatrics B (including Child & Adolescent Psychiatry)
- Psychiatry A
- Surgery C: Paediatric Head & Neck, Adult Head & Neck, Ophthalmology and Plastic Surgery

2. Direct Observation of Procedural Skills (DOPS)

DOPS can be completed during any placement and are expected to be performed regularly throughout the academic year.

2.1 Mandatory

Intravenous (IV) cannulation, Intravenous (IV) fluid line preparation, Intramuscular (IM) injection, Speculum examination, Subcutaneous (SC) injection, Venepuncture, Vital signs: adult (NEWS), Vital signs: paediatric, Wound care & basic wound dressing.

2.2 Recommended

12 lead ECG: record & interpret, Airway assessment, Arterial or venous blood gas sampling, Basic wound closure e.g. steristrips, glue, Blood transfusion set up & delivery (observation only), Child growth: record & measure, Eye drops administration, Genital swab taking, Inhaler technique demonstration: adult or paediatric, Lumbar puncture (observation only), Paediatric urine sample collection, Partogram: record & interpret, Peak expiratory flow rate (PEFR): adult or paediatric, Plaster cast application, Plaster cast removal, Surgical scrubbing up incl. sterile gloving, Syringe driver setting up for SC medication (observation only), Urinalysis, Urinary catheterisation: male or female, Wound swab taking.

3. Recording clinical activity on placement

3.1 PebblePocket App

Student doctors can record their clinical activity using the PebblePocket App on their mobile device. At the start of the academic year, student doctors are to ensure that they update their device so they can view the 21/22 forms e.g. CPADs, OEs, DOPS, Student Declarations.

3.2 E-forms

If student doctors are unable to obtain a signature on the PebblePocket App in person from their assessor, they can email them an electronic version of the form. Please refer to the E-forms page within the clinical workbook for further details. Please note that only forms containing a signature can be attached to your clinical workbook.

The deadline for all placement evidence, including all attachments, to be completed in the workbook is: 10am on Monday 3rd July 2023.

4. Placement Information

Activity	Form	4.1 General Practice B placement activities 4-week placement
Minimum and recommended numbers		
Cases	CPAD	Minimum: 5 Recommended: 10 Record CPADs from a range of cases seen in primary care.
Examinations	OE	Minimum: 2 Recommended: 3 Record examinations from a range of cases seen in primary care.
Procedures	DOPS	Try to observe and practice as many procedures as possible. Recommended DOPS include: child growth: measure & record, genital swab taking, inhaler technique demonstration: adult or paediatric, IM injection, PEFr: adult or paediatric, speculum examination, urinalysis, venepuncture, vital signs: adult or paediatric, wound swab taking.
Mandatory Experiences	Student Declaration	Participate in all 4 (one of each) activities: <ol style="list-style-type: none"> 1. Review of a palliative care patient, followed by a debrief with a GP in the form of a case based discussion (CBD). The review can occur at a home visit, remote consultation, case review or GSF meeting. 2. Review of a care home patient, followed by a debrief with a GP in the form of a CBD. The review can occur at a home visit, virtual ward round, case review or MDT meeting. 3. Review and discussion of investigation results. 4. Attendance at a practice or locality meeting followed by a debrief with a GP (if a GSF meeting has been used for the first mandatory experience, this meeting may not be used as the basis of this experience).
Additional Opportunities you have found	Student Declaration	Desirable but not essential. Recommended activity: <ol style="list-style-type: none"> 1. Observe a learning disability annual health check. 2. Follow a patient's admission to hospital/2-week rule referral.
First & End of placement Educational Supervisor (ES) meetings	Recorded in E-portfolio	All fields completed by student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting.
Teaching Tutorials	n/a	1 x Placement Induction Session. 4 x Full days of Community Clinical Teaching (CCT) each Tuesday of placement.

Activity	Form	4.2 Medicine C placement activities 4-week placement Minimum and recommended numbers
Cases	CPAD	<p>Minimum: 4 Recommended: 8</p> <p>These are to be obtained during your ward work activity time or during outpatient clinics. Record CPADs from a range of cases involving some of the following: an older person with a fall, stroke, TIA, acute cognitive impairment, leg ulcers, pressure sore, incontinence, dementia (including a formal assessment of cognitive abilities e.g. MoCA or Addenbrooke's Cognitive Examination).</p> <p>Must include at least one renal case from: a patient with an acute kidney injury (AKI), a patient with chronic kidney disease (CKD), a patient receiving renal replacement therapy (RRT).</p> <p>Must include at least one rheumatology case from a patient with inflammatory arthritis, osteoarthritis, gout, septic arthritis, autoimmune connective tissue disease/vasculitis, chronic widespread pain/fibromyalgia.</p>
Examinations	OE	<p>Minimum: 4 Recommended: 6</p> <p>To include the examination of a system e.g. CVS, respiratory, GIT, neurology.</p> <ul style="list-style-type: none"> • Must include at least one rheumatology examination e.g. hands, large joint. • Must include at least one assessment of fluid status e.g. assessing for fluid overload or dehydration.
Procedures	DOPS	<p>Try to observe and practice as many procedures as possible. Recommended DOPS include: 12 lead ECG: record & interpret IV cannulation, arterial or venous blood gas sampling, IM injection, IV fluid line preparation, SC injection, urinalysis, urinary catheterisation, venepuncture, vital signs (NEWS), wound care & basic wound dressing, wound swab taking.</p>
	Student Declaration	<p>Minimum: 1</p> <p>Observation of a haemodialysis session during half day placement on haemodialysis ward or satellite clinic.</p>
Ward rounds	Student Declaration	Minimum: 4
Clinics	Student Declaration	<p>Minimum: 4</p> <p>Could include one of each of general geriatrics, stroke/TIA, falls, movement disorders.</p>

Activity	Form	4.2 Medicine C placement activities 4-week placement Minimum and recommended numbers
		<ul style="list-style-type: none"> • Must include at least one rheumatology clinic e.g. general rheumatology, early arthritis, connective tissue disease/vasculitis. • Must include at least one renal clinic e.g. general nephrology, dialysis, transplant, low clearance.
On-call	Student Declaration	One session per placement 5pm-9pm. This is one long day adding out of hours activity to a normal day.
Multi-Professional working	Student Declaration	<p>A minimum of 4 different activities from the following (must include at least one rheumatology and one renal experience):</p> <ol style="list-style-type: none"> 1. Record an occasion when you spent time at an MDT discharge planning and observing the work of an Allied Health Professional e.g. OT, physiotherapist, SALT, dietician, social worker. 2. Record an occasion when you discussed prescribing plans with a pharmacist in a clinical setting e.g. for a patient taking multiple medications, a patient with a rheumatological condition, a patient with renal impairment requiring dose adjustment. 3. Record an episode when you shadowed a Tissue Viability Nurse (TVN). 4. Reflect on a patient journey (full or part of) from admission to discharge back to community services. Consider the impact on the patient and the team members involved. Were any challenges encountered? 5. Record an occasion when you spent time with a rheumatology specialist nurse e.g. at a DMARD drug education session, IM injection clinic, seeing acute exacerbations. 6. Record an occasion when you attended a radiology meeting. 7. Record an occasion when you observed a patient during part of their pre-dialysis pathway. Describe the role of the team members e.g. pre-dialysis nurse renal dietitian, renal psychologist.

Activity	Form	4.2 Medicine C placement activities 4-week placement Minimum and recommended numbers
Year 4 Simulating Training	Certificate or Student Declaration	Trust Simulation Training
First & End of placement Educational Supervisor (ES) meetings	Recorded in E-portfolio	All fields to be completed by the student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting.
Teaching Tutorials	n/a	1 x Placement Induction Session. 4 x Case-Based Learning (CBL) Tutorials. 4 x Bedside Teaching Tutorials. 1 x Clinical Skills Teaching: adult BLS during first rotations, venepuncture & cannulation equipment refresher. 1 x Safe Prescribing Session. 1 x Stroke Awareness Workshop.

Notes:

- Placement comprised of 4 weeks at base hospital on geriatric medicine wards.
- Minimum renal activities: one clinic and one half-day dialysis session.
- Minimum rheumatology activities: one clinic and one nurse led session e.g. drug education clinic or IM injections.
- Blackpool students are to spend the last 2 days of their 4-week placement i.e. Thursday and Friday at LUFTH gaining renal experience.
- The stroke awareness workshop and cerebrovascular disease CBL will be take place on Friday of week two at the School of Medicine.

Activity	Form	4.3 Medicine D Palliative Medicine placement activities 3-week placement Minimum and recommended numbers
Cases	CPAD	Minimum: 3 Recommended: 5 These are to be obtained during your ward work activity time or during outpatient clinics. Record CPADs from a range of cases involving some of the following: Must include at least one patient in the dying phase. <ul style="list-style-type: none"> • A patient with complex pain. • A case incorporating shared decision making. • A case incorporating complexity and uncertainty of the disease or symptoms. • A case incorporating ethical decision making in end of life care. • A patient with complex psychological, social or spiritual end of life care issues.
Examinations	OE	Minimum: 2 Recommended: 3 To include the examination of a system e.g. CVS, respiratory, GIT, neurology.
Procedures	DOPS	Try to observe and practice as may procedures as possible. Recommended DOPS include: IV cannulation, IV fluid line preparation, SC injection, syringe driver setting up for SC medication (observation only), urinalysis, urinary catheterisation, venepuncture, wound care & basic wound dressing, wound swab taking.
	Student Declaration	Observe a breaking bad news conversation. Minimum 1 form.
Ward rounds	Student Declaration	Minimum: 2
Clinics	Student Declaration	Minimum: 0 Recommended: 2 Suggest include: one palliative medicine OP clinic
Multi-Professional working	Student Declaration	A minimum of 3 different activities from the following: <ol style="list-style-type: none"> 1. Record an occasion when you spent time undertaking a community session e.g. day care, domiciliary visit. 2. Record an occasion when you spent time at a multi-professional clinical interface meeting. 3. Record an occasion when you have spent time at a multidisciplinary team meeting.

Activity	Form	4.3 Medicine D Palliative Medicine placement activities 3-week placement Minimum and recommended numbers
		4. Record an episode when you shadowed the hospital palliative care team.
Additional opportunities you have found	Student Declaration	Desirable but not essential. Recommended activities include: observation of verification of death, observation of certification of death.
Initial & end of placement Educational Supervisor (ES) meetings	Recorded in E-portfolio	All fields completed by student doctor and educational supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting.
Teaching tutorials	N/A	1x Placement Induction Session. 3 x Case Based Learning (CBL) Tutorials. 3 x Bedside Teaching Tutorials. 1 x Clinical Skills Teaching: verification & certification of death, use of a syringe driver. 3 x Communication for Clinical Practice (CCP) Sessions.

Activity	Form	4.4 Medicine D Oncology & Haemato-oncology placement activities 1-week placement Minimum and recommended numbers
Cases	CPAD	Minimum: 1 Recommended: 2 (one of each) . These are to be obtained during your ward work activity time, outpatient clinics or timetabled time on the chemotherapy unit. Record CPADs from a range of cases involving some of the following: A patient undergoing chemotherapy for a haematological or solid malignancy. A patient admitted as an emergency with a complication of treatment or an oncological emergency.
Examinations	OE	Minimum: 1 To include the examination of a system where there is an abnormality to be detected e.g. respiratory, GIT, neurology, gynaecology, breast.
Procedures	DOPS	Try to observe and practice as many procedures as possible. Recommended DOPS include: Blood transfusion set up & delivery (observation only), IV cannulation, IV fluid line preparation, urinalysis, venepuncture, vital signs (NEWS), wound care & basic wound dressing, wound swab taking.
	Student Declaration	Minimum: 1 Recommended: 2 (one of each) Observe the delivery of either chemotherapy or radiotherapy.
Ward rounds	Student Declaration	Minimum: 1
Clinics	Student Declaration	Minimum: 1 Recommended: 2 Recommend include one clinical oncology. Other clinics can include haemato-oncology and medical oncology.
Multi-Professional working	Student Declaration	A minimum of 1 activity from the following: <ol style="list-style-type: none"> Record an occasion when you spent time at a tumour specific multidisciplinary team meeting. Record an occasion when you attended a clinic or ward-based session under the supervision of a senior nurse or radiographer e.g. a treatment review clinic with an on-treatment review (OTR) radiographer or chemotherapy clinic with an ANP.

Activity	Form	4.4 Medicine D Oncology & Haemato-oncology placement activities 1-week placement Minimum and recommended numbers
Additional opportunities you have found	Student Declaration	Desirable but not essential. Recommended activity include: Observation of a bone marrow biopsy.
End of placement Educational Supervisor (ES) meeting	Recorded in E-portfolio	All fields completed by student doctor and educational supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting.
Teaching tutorials	N/A	1 x Placement Induction Session. 1x Case Based Learning (CBL) Tutorial.

Activity	Form	4.5 Neurology placement activities 4-week placement Minimum and recommended numbers
Cases	CPAD	Minimum: 4 Recommended: 6 These are to be obtained during your ward work activity time or during outpatient clinics. Record CPADs from a range of cases involving some of the following: acute headache, chronic headache, acute confusion, dementia, seizure or transient loss of consciousness, coma, movement disorder, stroke, intracranial haemorrhage, neurotrauma, impairment of speech or swallowing, acute paralysis or imbalance, chronic weakness or imbalance, somatosensory loss, visual loss, loss of sphincter function, neuropathic pain, functional neurological disorder. Must include at least one case with a surgery component and at least one case with a rehabilitation component.
Examinations	OE	Minimum: 4 Recommended: 4 Must include a least one motor, one sensory and one cranial nerve examination.
Procedures	DOPS	Try to observe and practice as may procedures as possible. Recommended DOPS include: airway assessment, IV cannulation, lumbar puncture (observation only), surgical scrubbing up, venepuncture, vital signs (NEWS).
Ward rounds	Student Declaration	Minimum: 2 Can include a district general hospital (DGH) ward round.
Clinics	Student Declaration	Minimum: 2 Recommended: 3 Can include DGH clinics and sub-specialities e.g. epilepsy, MS, movements disorders, neurosurgery, pain management.
Theatre/Investigative experiences	Student Declaration	Minimum number: 1 half day per placement Describe the surgery, tests or imaging you have witnessed. Try to demonstrate a range of those from: neurosurgery, interventional neuroradiology, pain intervention.

Activity	Form	4.5 Neurology placement activities 4-week placement Minimum and recommended numbers
Multi-Professional working	Student Declaration	A minimum of 2 different activities from the following: <ol style="list-style-type: none"> 1. Record an occasion when you spent time in neurorehabilitation. 2. Record an occasion when you spent time in a neuroradiology meeting. 3. Record an occasion when you attended the multidisciplinary grand round.
First & End of placement Educational Supervisor (ES) meetings	Recorded in E-portfolio	All fields completed by student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting.
Teaching Tutorials	n/a	1x Placement Induction Session. 4 x Case Based Learning (CBL) Tutorials. 4 x Bedside Teaching Tutorials. 1 x Clinical Skills Teaching: adult BLS during first rotations, venepuncture & cannulation equipment refresher, revision of the neurological examination. 1 x Safe Prescribing Session. 1 x Living with a Long-Term Disability Workshop. 1 x Parkinson Awareness Workshop. 1x End of Placement Clinical Assessment for Learning.

4.6 Obstetrics & Gynaecology B placement activities		
4-week placement		
Activity	Form	Minimum and recommended numbers
Cases	CPAD	Minimum: 4 Recommended: 8 These are to be obtained during your ward work activity time or during outpatient clinics. Record CPADs from a range of cases involving some of the following: gynaecological cancer, fertility problem (male or female), management of a fetal medicine condition, management of a urogynaecology condition, sexual health (male or female).
Examinations	OE	Minimum: 3 Recommended: 6 Must include at least one obstetric palpation. Can include an examination of a new-born, pelvic examination.
Procedures	DOPS	Try to observe and practice as many procedures as possible. Recommended DOPS include: airway assessment, blood transfusion set up & delivery (observation only), genital swab taking, IV cannulation, IV fluid line preparation, partogram: record & interpret, speculum examination, SC injection, surgical scrubbing up, urinalysis, urinary catheterisation, venepuncture, vital signs (NEWS), wound care & basic wound dressing.
Ward rounds	Student Declaration	Minimum: 4 Could include gynaecology, obstetric, neonatal.
Clinics	Student Declaration	Minimum: 4 Recommended: 6 Could include one each of: general gynaecology, rapid access gynaecology, colposcopy, gynaecology oncology, urogynaecology, fertility, andrology, fetal medicine, antenatal, neonatal, sexual health.
Theatre/Investigative experiences	Student Declaration	Minimum: 4 Describe the surgery, tests or imaging you have witnessed. Try to demonstrate a range of those from: laparoscopy, gynaecology oncology surgery, urogynaecology surgery, fertility investigations/procedures, caesarean section, urodynamic assessment, obstetric ultrasound.
On-call	Student Declaration	One session per placement on delivery suite/midwife led unit out of hours and/or at the weekend. This is one long day adding out of hours activity to a normal day.

4.6 Obstetrics & Gynaecology B placement activities		
4-week placement		
Activity	Form	Minimum and recommended numbers
Multi-Professional working	Student Declaration	A minimum of 4 different activities from the following: <ol style="list-style-type: none"> 1. Record an occasion when you spent time with a nurse specialist or specialist midwife e.g. Macmillan nurse. 2. Record an occasion where you spent time with a sexual health practitioner discussing contact tracing. 3. Record an occasion where you spent time with a neonatal doctor or nurse specialist. 4. Record an occasion when you spent time at an MDT meeting. 5. Record an occasion when you discussed prescribing plans in a clinical setting e.g. ward round. 6. Record an occasion when you shadowed the anaesthetic pre-op management and post-op assessment of a patient.
Additional Opportunities you have found	Student Declaration	Desirable but not essential. Recommended activities include: fetal medicine invasive procedures, termination of pregnancy clinic/theatre, chemotherapy planning, discharge planning, obtaining informed consent, venous thromboembolism (VTE) risk assessment, WHO surgical safety checklist, neonatal intensive care, community midwife clinic.
First & End of placement Educational Supervisor (ES) meetings	Recorded in E-portfolio	All fields completed by student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting.
Teaching Tutorials	n/a	1 x Placement Induction Session. 4 x Case Based Learning (CBL) Tutorials. 4 x Bedside Teaching Tutorials. 1 x Clinical Skills Teaching: adult BLS during first rotations, venepuncture & cannulation equipment refresher, revision of the female pelvic examination, speculum examination, vaginal swab and partogram. 1 x Safe Prescribing Session.

Note: Students Doctors are to be timetabled at least one sexual health clinic during their 4-week placement.

Activity	Form	4.7 Paediatric B placement activities 4-week placement Minimum and recommended numbers
Cases	CPAD	<p>Minimum: 4 Recommended: 8</p> <p>These are to be obtained during your ward work activity time or during outpatient clinics. Record CPADs from a range of cases involving some of the following:</p> <ul style="list-style-type: none"> • A child with a growth problem. • A child with complex needs (multiple medical problems; often related to an underlying congenital or genetic condition). • A child with a chronic condition e.g. asthma, cystic fibrosis (CF), diabetes, epilepsy. • A child with abnormal movement (musculo-skeletal or neurological). <p>In situations where it is difficult to find cases with chronic conditions, acute presentations can be included.</p> <p>Suggest include a least one child & adolescent mental health (CAMH) case which includes a mental state examination (MSE). Cases can include depression, anxiety, self-harm, eating disorder, OCD, psychosis, ASD, ADHD, somatisation.</p>
Examinations	OE	<p>Minimum: 4 Recommended: 6</p> <p>Must include at least one infant <6 months of age. Must include at least one pre-school child (6-36 months of age).</p>
Procedures	DOPS	<p>Try to observe and practice as many procedures as possible. Recommended DOPS include: child growth: measure & record, inhaler technique demonstration, paediatric, PEFr, urine sample collection, urinalysis, vital signs: paediatric.</p>
Ward rounds	Student Declaration	<p>Minimum: 3</p>
Clinics	Student Declaration	<p>Minimum: 4 Recommended: 6</p> <p>Must include at least one general paediatric or ambulatory clinic. Suggest include at least one CAMH clinic (general or speciality). Other clinics can include community paediatrics and sub-specialties e.g. diabetes, cardiology, rheumatology, CF, epilepsy, surgical, immunodeficiency.</p>

Activity	Form	4.7 Paediatric B placement activities 4-week placement Minimum and recommended numbers
Theatre/Investigative experiences	Student Declaration	Minimum number: 1 half day per placement. Recommended: 2 One theatre experience will be following a child throughout the day and experiencing the process.
On-call	Student Declaration	One session per placement. This is one long day adding out of hours activity to a normal day.
Multi-Professional working	Student Declaration	A minimum of 4 different activities from the following (suggest include at least one CAMH experience): <ol style="list-style-type: none"> 1. Record an occasion when you spent time with a play specialist discussing strategies to keep children happy in hospital. 2. Record an occasion when you spent time with a ward pharmacist reflecting on the challenges of prescribing for children. 3. Record an occasion when you discussed healthy eating for children with a paediatric dietitian. 4. Record time spent with a nurse specialist reflecting on the skills and experience they bring to the family. 5. Record attendance at an MDT meeting. Did the meeting have clear goals and how was it conducted; did everyone contribute? 6. Record an occasion when you spent time with a member of CAMH MDT e.g. mental health practitioner, psychologist. 7. Record an occasion when you witnessed a risk assessment being performed by a member of the MDT. 8. Record an occasion when you observed a CAMH therapeutic intervention e.g. CBT, family therapy.
First & End of placement Educational Supervisor (ES) meetings	Recorded in E-portfolio	All fields completed by student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting.
Teaching Tutorials	n/a	1 x Placement Induction Session. 4 x Case Based Learning (CBL) Tutorials. 4 x Bedside Teaching Tutorials. 1 x Clinical Skills Teaching: paediatric BLS, paediatric vital signs, paediatric inhaler technique. 1 x Safe Prescribing Session.

Note: Students Doctors are to attend two days of CAMH placement during their 4-week placement.

Activity	Form	4.8 Psychiatry A placement activities 4-week placement Minimum and recommended numbers
Cases	CPAD	<p>Minimum: 4 Recommended: 6</p> <p>These are to be obtained during your ward work activity time or during outpatient clinics.</p> <p>Record CPADs, including a mental state examination (MSE) and a risk assessment, from a range of cases involving some of the following:</p> <p>Schizophrenia or a psychotic disorder, bipolar affective disorder, schizoaffective disorder, unipolar depression, emotionally unstable personality disorder, anxiety disorder, a patient who has self-harmed, a patient who is suicidal, learning disability, autistic spectrum disorder, mental and behavioural disorders due to use of alcohol or illicit substances, mild cognitive impairment, Alzheimer's dementia, vascular dementia</p> <p>Recommend include a least one case of a patient with a type of dementia which includes a formal assessment of cognitive abilities e.g. MoCA or Addenbrooke's Cognitive Examination.</p>
Ward rounds	Student declaration	Minimum: 4 Recommended: 6
Clinics	Student declaration	Minimum: 2 Recommended: 4 (Can include a memory clinic)
Multi-professional working	Student declaration	<p>A minimum of 4 different activities from the following:</p> <ol style="list-style-type: none"> 1. Record an occasion when you observed an MDT meeting for a patient on the ward. 2. Record an occasion when you observed a patient's Care Programme Approach (CPA) review with the Consultant/SpR in the outpatient setting. 3. Record an occasion when you observed an MDT meeting in the outpatient setting (e.g. the weekly team meeting). 4. Record an occasion when you observed a patient on the ward or in the outpatient setting being assessed under either Section 2 or 3 of the Mental Health Act 1983. 5. Record an occasion when you spent time with a psychologist on the ward.

Activity	Form	4.8 Psychiatry A placement activities 4-week placement Minimum and recommended numbers
		6. Record an occasion when you went on a home visit to review a patient with a Community Mental Health (CMH) Nurse.
Additional opportunities you have found	Student declaration	Desirable but not essential. Recommended activities include: accompany a doctor on an on-call session, observe an Electroconvulsive Therapy (ECT) list, attend the local Balint Group for junior trainees, observe a medical assessment of a patient newly referred to the CMH team, observe an informal patient on the ward being assessed to be held under Section 5(2) of the Mental Health Act 1983, observe a patient's cognitive abilities being formally assessed using the MoCA or Addenbrooke's Cognitive Examination, attend an inpatient's Mental Health Tribunal Hearing, observe a patient being assessed by the Early Intervention in Psychosis Service, observe a patient being medically reviewed in seclusion, spend time on the Psychiatric Intensive Care Unit (PICU).
First & End of placement Educational Supervisor (ES) meetings	Recorded in E-portfolio	All fields to be completed by the student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting.
Teaching Tutorials	n/a	1 x Placement Induction Session. 4 x Case Based Learning (CBL) Tutorials. 1 x Safe Prescribing Session. 1 x Intellectual Disability Awareness Day. Adult BLS training during first rotations only.

Notes:

- Intellectual Disability Awareness Day to take place on Monday of week one at the School of Medicine.
- Safe Prescribing Session to take place on Wednesday morning of week two via Zoom.

Activity	Form	4.9 Surgery C Paediatric Head & Neck placement activities 1-week placement Minimum and recommended numbers
Cases	CPAD	Minimum: 1 Recommended: 2 These are to be obtained during your ward work activity time or during outpatient clinics. Record CPADs from a range of cases involving the following: allergic rhinitis, ear or nasal discharge, epistaxis, hearing loss e.g. glue ear, nasal obstruction, neck lump, snoring/obstructive sleep apnoea (OSA), stridor, otitis media, tonsillitis/infectious mononucleosis, vertigo.
Examinations	OE	Minimum: 1 Recommended: 2 Can include: otoscopy, mouth examination, nose examination, neck examination.
Procedures	DOPS	Try to observe and practice as many procedures as possible. Recommended DOPS include: airway assessment, surgical scrubbing up, vital signs, wound care & basic wound dressing, wound swab taking.
Ward rounds	Student Declaration	Minimum: 1 Can include a ward visit if no ward rounds available.
Clinics	Student Declaration	Minimum: 1 Recommended: 2 Suggest include at least one general paediatric ENT clinic. Other clinics can include specialist clinic, nurse led clinic, ENT emergency clinic, tongue-tie clinic, OMFS clinic, cleft palate clinic, craniofacial clinic, audiology clinic, balance clinic, hearing clinic.
Theatre/Investigative experiences	Student Declaration	Minimum: 1 Describe the surgery, tests or imaging you have witnessed. Try to demonstrate a range of those from: tonsillectomy, adenoidectomy, grommet insertion, examination under anaesthetic, airway endoscopy, laryngeal surgery, pure tone audiometry, tympanometry, endoscopy of nose, ear, larynx or tracheostomy, microscopy of ear, cauterisation of nasal septum, hearing assessment.
Multi-Professional working	Student Declaration	A minimum of 1 activity from the following: 1. Record an episode when you shadowed the anaesthetic pre-op, management and post-op

Activity	Form	4.9 Surgery C Paediatric Head & Neck placement activities 1-week placement Minimum and recommended numbers
		<p>assessment of a patient e.g. WHO surgical safety checklist.</p> <p>2. Record an occasion when you spent time with a nurse specialist e.g. tracheostomy care discussion, pulse oximetry clinic, nurse led ear clinic, audiology clinic.</p> <p>3. Record an occasion when you spent time at an MDT/ENT departmental meeting.</p> <p>4. Record an occasion when you have discussed prescribing plans with a pharmacist in a clinical setting e.g. ward round.</p>
End of placement Educational Supervisor (ES) feedback	Recorded in E-portfolio	All fields completed by student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting/sign-off. For the first 3 placements only, ES feedback can be written comments only, with no requirement for a face-to-face meeting. For the final Surgery C placement, a face-to-face meeting is required, where feedback and evidence from all 4 placements will be reviewed.
Teaching Tutorials	n/a	1 x Placement Induction Session. 1 x Case Based Learning (CBL) Tutorial. 1 x Deaf Awareness Workshop.

Notes for 4-week Surgery C placement:

- Visual Awareness Workshop and Deaf Awareness Workshop to take place on Wednesday mornings (weeks 2 and 3).
- Paediatric Head & Neck CBL to be delivered on placement.
- Adult Head & Neck, Ophthalmology and Plastic surgery CBLs to be delivered on Wednesday mornings at the School of Medicine (weeks 1 and 4).

Activity	Form	4.10 Surgery C Adult Head & Neck placement activities 1-week placement Minimum and recommended numbers
Cases	CPAD	Minimum: 1 Recommended: 2 These are to be obtained during your ward work activity time or during outpatient clinics and theatre experiences. Record CPADs from a range of cases involving the following: facial fractures/trauma, oro-facial infection, head and neck cancer, temporomandibular joint dysfunction, epistaxis, thyroid disease, adult facial deformity.
Examinations	OE	Minimum: 1 Recommended: 2 Suggest include cervical lymph nodes and otoscopy. Can also include examination of the mucosal surfaces of the H&N and thyroid gland.
Procedures	DOPS	Try to observe and practice as many procedures as possible. Recommended DOPS include: airway assessment, IV cannulation, surgical scrubbing up, venepuncture, vital signs (NEWS), wound care & basic wound dressing, wound swab taking.
Ward rounds	Student Declaration	Minimum: 1 Can include: H&N Cancer Ward Round: Oral & Maxillofacial Surgery (OMFS), ENT, Trauma Ward Round (OMFS).
Clinics	Student Declaration	Minimum: 1 Recommended: 2 Must include at least one OMFS or ENT clinic. Other clinics can include: OMFS trauma clinic, ENT casualty clinic, adult facial deformity/TMJ clinic/adult craniofacial clinic, adult facial deformity/skin cancer clinic, general ENT/rhinology/otology clinic, skull base ENT clinic, H&N clinic (OMFS or ENT).
Theatre/Investigative experiences	Student Declaration	Minimum: 1 Describe the surgery, tests or imaging you have witnessed. Try to demonstrate a range of those from: OMFS trauma, emergency (OMFS or ENT), H&N cancer, thyroid cancer, OMFS, ENT surgery, facial deformity/TMJ/adult craniofacial/cleft, benign airway, skin cancer, nasal packing for epistaxis.
Multi-Professional working	Student Declaration	A minimum of 1 activity from the following:

Activity	Form	4.10 Surgery C Adult Head & Neck placement activities 1-week placement Minimum and recommended numbers
		<ol style="list-style-type: none"> 1. Record an episode when you shadowed the perioperative care of a patient undergoing H&N surgery (anaesthetic pre-op, anaesthetic delivery and recovery). 2. Record an occasion when you spent time with a nurse specialist discussing a patient with a complicated airway (tracheostomy, laryngectomy, benign airway, compromised airway). 3. Record an occasion when you spent time with the H&N Speech & Language therapist and/or specialist H&N dietitian. 4. Record an occasion when you spent time at an MDT discussion/meeting. 5. Record an occasion when you have discussed prescribing plans with a pharmacist in a clinical setting e.g. ward round.
End of placement Educational Supervisor (ES) feedback	Recorded in E-portfolio	All fields completed by student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting/sign-off. For the first 3 placements only, ES feedback can be written comments only, with no requirement for a face-to-face meeting. For the final Surgery C placement, a face-to-face meeting is required, where feedback and evidence from all 4 placements will be reviewed.
Teaching Tutorials	n/a	1 x Placement Induction Session. 1 x Case Based Learning (CBL) Tutorial.

Notes for 4-week Surgery C placement:

- Visual Awareness Workshop and Deaf Awareness Workshop to take place on Wednesday mornings (weeks 2 and 3).
- Paediatric Head & Neck CBL to be delivered on placement.
- Adult Head & Neck, Ophthalmology and Plastic surgery CBLs to be delivered on Wednesday mornings at the School of Medicine (weeks 1 and 4).

Activity	Form	4.11 Surgery C Ophthalmology placement activities 1-week placement Minimum and recommended numbers
Cases	CPAD	Minimum: 1 Recommended: 2 These are to be obtained during your ward work activity time or during outpatient clinics. Record CPADs from a range of cases involving the following: Loss or disturbance of sight e.g. cataract, macular degeneration, diabetic eye disease, glaucoma, retinal vascular disease. Red eye e.g. conjunctivitis, corneal disease, inflammatory eye disease.
Examinations	OE	Minimum: 1 Recommended: 2 Can include: direct ophthalmoscopy, visual acuity, confrontational visual fields, pupillary light reactions.
Procedures	DOPS	Try to observe and practice as many procedures as possible. Recommended DOPS include: eye drops administration, surgical scrubbing up.
	Student Declaration	Minimum: 1 Observe a slit lamp examination.
Clinics	Student Declaration	Minimum: 2 Recommended: 3 Recommend include ophthalmology clinic and emergency walk-in eye clinic (or seeing emergency patients presenting to an ophthalmology clinic).
Theatre/Investigative experiences	Student Declaration	Minimum: 2 Describe the surgery, tests or imaging you have witnessed. Try to demonstrate a range of those from: cataract surgery, intravitreal injection, administration of local anaesthesia for eye surgery, retinal imaging using optical coherence tomography (OCT), retinal imaging using angiography, computerised perimetry. Recommend include at least one of each from surgery and imaging.
Multi-Professional working	Student Declaration	A minimum of 1 activity from the following: 1. Record an occasion when you assisted in the triage of patients arriving in an eye clinic e.g. measurement of vision, measurement of eye pressure, dilation of the pupils.

Activity	Form	4.11 Surgery C Ophthalmology placement activities 1-week placement Minimum and recommended numbers
		2. Record an occasion when you observed the “huddle” at the beginning of an operating list. 3. Record an occasion when you sat in with an orthoptist 4. Record an occasion when you sat in with a specialist nurse or optometrist. 5. Record an occasion when you followed a patient through cataract surgery (pre-, peri- and post-op). 6. Record an occasion when you followed a patient through an ARMD clinic e.g. assessment, imaging, treatment. 7. Record an occasion when you sat in with the Eye Clinic Liaison Officer
End of placement Educational Supervisor (ES) feedback	Recorded in E-portfolio	All fields completed by student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting/sign-off. For the first 3 placements only, ES feedback can be written comments only, with no requirement for a face-to-face meeting. For the final Surgery C placement, a face-to-face meeting is required, where feedback and evidence from all 4 placements will be reviewed.
Teaching Tutorials	n/a	1 x Placement Induction Session. 1 x Case Based Learning (CBL) Tutorial. 1 x Visual Awareness Workshop.

Notes for 4-week Surgery C placement:

- Visual Awareness Workshop and Deaf Awareness Workshop to take place on Wednesday mornings (weeks 2 and 3).
- Paediatric Head & Neck CBL to be delivered on placement.
- Adult Head & Neck, Ophthalmology and Plastic surgery CBLs to be delivered on Wednesday mornings at the School of Medicine (weeks 1 and 4).

Activity	Form	4.12 Surgery C Plastic Surgery placement activities 1-week placement Minimum and recommended numbers
Cases	CPAD	Minimum: 1 Recommended: 2 These are to be obtained during your ward work activity time or during outpatient clinics. Record CPADs from a range of cases involving some of the following: burn injury, tendon injury, chronic wound, skin cancer, nerve injury.
Examinations	OE	Minimum: 1 Recommended: 2 Can include: hand examination, assessing a burn, describing a skin lesion.
Procedures	DOPS	Try to observe and practice as many procedures as possible. Recommended DOPS include: airway assessment, IV cannulation, surgical scrubbing up, vital signs (NEWS), wound care & basic wound dressing, wound swab taking.
Ward rounds	Student Declaration	1 per placement
Clinics	Student Declaration	Minimum: 1 Recommended: 2 Recommend include at least one of each of burns dressing clinic and hand trauma clinic. Additional clinics include skin cancer clinic, elective hand clinic, follow up burns clinic.
Theatre/Investigative experiences	Student Declaration	Minimum: 1 Describe the surgery, tests or imaging you have witnessed. Try to demonstrate a range of these from: excision of simple skin lesion, repair of nailbed, wide local excision for melanoma, skin flaps, skin grafts, tendon/nerve repair, sentinel lymph node biopsy, excision of burn injury, reconstruction of soft tissues.
Multi-Professional working	Student Declaration	A minimum of 1 activity from the following: <ol style="list-style-type: none"> 1. Record an occasion when you spent time with a nurse specialist discussing a patient with skin cancer. 2. Record an occasion when you spent time on the multidisciplinary burns ward round (includes physio, dietician, pharmacist, OT, specialist nurses, surgeons).

Activity	Form	4.12 Surgery C Plastic Surgery placement activities 1-week placement Minimum and recommended numbers
		3. Record an occasion when you have discussed the rationale for different types of dressings for wounds/burn injuries with a specialist nurse. 4. Record an occasion when you shadowed the plastic surgery Consultant or SPR performing a local anaesthetic (LA) skin cancer list.
End of placement Educational Supervisor (ES) feedback	Recorded in E-portfolio	All fields completed by student doctor and Educational Supervisor. Please remember that student doctor comments are mandatory and must be completed prior to meeting/sign-off. For the first 3 placements only, ES feedback can be written comments only, with no requirement for a face-to-face meeting. For the final Surgery C placement, a face-to-face meeting is required, where feedback and evidence from all 4 placements will be reviewed.
Teaching Tutorials	n/a	1 x Placement Induction Session. 1 x Case Based Learning (CBL) Tutorial.

Notes for 4-week Surgery C placement:

- Visual Awareness Workshop and Deaf Awareness Workshop to take place on Wednesday mornings (weeks 2 and 3).
- Paediatric Head & Neck CBL to be delivered on placement.
- Adult Head & Neck, Ophthalmology and Plastic surgery CBLs to be delivered on Wednesday mornings at the School of Medicine (weeks 1 and 4).

Contact your Year Lead if you find any digital content difficult or impossible to use, either directly or with an assistive technology such as a screen reader.

Contact details for all teams and individual staff can be found on the [School website](http://www.liverpool.ac.uk/medicine/contact-us/email/).
[www.liverpool.ac.uk/medicine/contact-us/email/].