

Centre: (not used) Circuit: Green Candidate: [REDACTED]

Session: 10.40am Station: 1
(Monday)

Patient Investigations and Data Interpretation
(Examiner A)

SECTION 1

POOR ←————→ GOOD
0 1 2 3
□ □ □ □

SECTION 2

POOR ←————→ GOOD
0 1 2 3
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SECTION 3

POOR ←————→ GOOD
0 1 2 3
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SECTION 4

POOR ←————→ GOOD
0 1 2 3
□ □ □ □

OVERALL JUDGEMENT OF PERFORMANCE AT THIS VIVA STATION:

Clear Fail Borderline Clear Pass
□ □ □

INSTRUCTIONS TO EXAMINERS

The 'overall judgement' is for standard setting purposes only. ALL marks MUST be completed.
It is essential that the candidate examines the required number of patients per session.
Good time management is important.
Please do not discuss the marks you awarded with your co-examiner.



PLEASE DO NOT WRITE COMMENTS ON THIS SIDE - USE THE SECTION OVERLEAF.

Centre: (not used)

Circuit: Green

Candidate: XXXXXXXXXX

Session: 10.40am

Station: 6

Patient Investigations and Data Interpretation (Examiner B)

SECTION 1

POOR ← → GOOD
0 1 2 3

SECTION 2

POOR ← → GOOD
0 1 2 3

SECTION 3

POOR ← → GOOD
0 1 2 3

SECTION 4

POOR ← → GOOD
0 1 2 3

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Please provide feedback in the areas in which the candidate's performance was satisfactory.

- Side tracked by restrictive pattern on HES
went myofascial, trauma, didn't name muscle
involved - rather talked about ABD + ADD.
- Ruled out III - didn't comment on partial 3rd
hyperintense area on MRI

Q 7- Dx - viral

- demyelination was 2nd offered

would like to see scan at diff. scans - LP it scan normal

Please provide feedback in the areas in which the candidate's performance was unsatisfactory.

Didn't comment on INO initially despite prompting that
HES was neurogenic

Order CT - to look at muscles + orbit.

Overlooked already on MRI
plaque lesion in 10th vertebra

Centre: (not used)

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Session: 10.40am

Station: 2

Patient Management 1 (Examiner A)

SECTION 1

POOR ← → GOOD
0 1 2 3
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SECTION 2

POOR ← → GOOD
0 1 2 3
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SECTION 3

POOR ← → GOOD
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SECTION 4

POOR ← → GOOD
0 1 2 3
□ □ □ □

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REP:

Q2-4 accurate knowledge

Q5:

Q8: - good knowledge of structure of REP

Please provide feedback in the areas in which the candidate's performance was unsatisfactory.


REP

Q1. A bit uncertain on description of signs of REP - especially zzzs

Q5 A little uncertain on indications for treatment

Centre: (not used) Circuit: Green Candidate: XXXXXXXXXX
Session: 10.40am Station: 7

Patient Management 1 (Examiner B)

SECTION 1
<p>POOR ←————→ GOOD</p> <p>0 1 2 3</p> <p>□ □ □ □</p>
SECTION 2
<p>POOR ←————→ GOOD</p> <p>0 1 2 3</p> <p>□ □ □ □</p>
SECTION 3
<p>POOR ←————→ GOOD</p> <p>0 1 2 3</p> <p>□ □ □ □</p>
SECTION 4
<p>POOR ←————→ GOOD</p> <p>0 1 2 3</p> <p>□ □ □ □</p>
<p>OVERALL JUDGEMENT OF PERFORMANCE AT THIS VIVA STATION:</p> <p>Clear Fail Borderline Clear Pass</p> <p>□ □ □</p>
<p>INSTRUCTIONS TO EXAMINERS</p> <p>The 'overall judgement' is for standard setting purposes only. ALL marks MUST be completed. It is essential that the candidate examines the required number of patients per session. Good time management is important. Please do not discuss the marks you awarded with your co-examiner.</p> <div style="text-align: right;"> RED FLAG □</div>

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Please provide feedback in the areas in which the candidate's performance was satisfactory.

Please provide feedback in the areas in which the candidate's performance was unsatisfactory.

Zone 2 + sly 3.

31/5

Needed to be clear about indicators for treatment

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Circuit: Green

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Session: 10.40am

Station: 3

Patient Management 2 (Examiner A)

SECTION 1

POOR ←————→ GOOD
0 1 2 3
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SECTION 2

POOR ←————→ GOOD
0 1 2 3
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SECTION 3

POOR ←————→ GOOD
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SECTION 4

POOR ←————→ GOOD
0 1 2 3
□ □ □

OVERALL JUDGEMENT OF PERFORMANCE AT THIS VIVA STATION:

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Good hx
most signs sought for in PXL

Please provide feedback in the areas in which the candidate's performance was unsatisfactory.

Disc evaluation said (F) worse than (L)
→ incorrect

Needed to be more structured on
intra-operative complications

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Session: 10.40am

Station: 8

Patient Management 2 (Examiner B)

SECTION 1

POOR ←————→ GOOD
0 1 2 3
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SECTION 2

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SECTION 3

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Jx. Good

Please provide feedback in the areas in which the candidate's performance was unsatisfactory.

THIS SHOULD BE A VERY 'SOUND' CDE.
SEEMS A LITTLE DISORGANISED IN OBSERVING-
EXAMINATION, SOMEWHAT INCOMPLETE IN
KNOWLEDGE POINT, BUT WOULD NEED OCCASIONAL
PROMPT.

"SOUND" SHOULD MENTION "ALWAYS" -- "

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Session: 10.40am

Station: 4

Attitudes, Ethics & Responsibilities (Examiner A)

SECTION 1

POOR ←————→ GOOD

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SECTION 2

POOR ←————→ GOOD

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SECTION 3

POOR ←————→ GOOD

0 1 2 3

SECTION 4

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Please provide feedback in the areas in which the candidate's performance was satisfactory.

GOOD RESPONSE TO CANDIDATE QUESTION ON ROUTINE LIST.

Please provide feedback in the areas in which the candidate's performance was unsatisfactory.

DID NOT KNOW THE DETAILS OF THE PRE LIST BRIEF
HAD NOT HEARD OF THE REOPHTH. GUIDANCE ON STAFFING
DID NOT MENTION EQUIPMENT STERILITE OR PATIENT NUMBERS OR AUSULT IN FINAL CHECK.
WOULD GIVE OTHER MEASUREMENT
WOULD NOT PUT A LEAD IN IF HAD NOTICED W/OUT POWER (? NOT USING TO LONG BATTERIES)

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Station: 9

Attitudes, Ethics & Responsibilities (Examiner B)

SECTION 1

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SECTION 3

POOR ←————→ GOOD

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Please provide feedback in the areas in which the candidate's performance was satisfactory.

- machine working properly
- equipment sensitive
- aware of its safety if room empty works
- aware of mandatory selected pt
- prep described but good
- answered "kept risk patient" safely

Please provide feedback in the areas in which the candidate's performance was unsatisfactory.

v. slow answers

- prep brief: Didn't seem aware of prescribed brief at all
• check list source v. random
- staffing: unaware of guidance of staff levels or guidance
- exclusion: "give out medication"
- wrong loc: "close up + cyclohexe"
didn't mention critical incident
until prompted about

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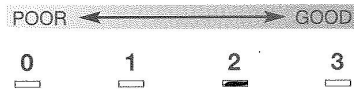
Candidate: [REDACTED]

Session: 10.40am

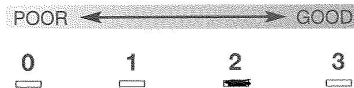
Station: 5

Health Promotion & Evidence Based Medicine (Examiner A)

SECTION 1



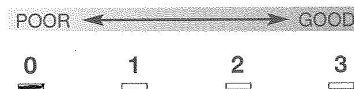
SECTION 2



SECTION 3



SECTION 4



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Please provide feedback in the areas in which the candidate's performance was satisfactory.

HSK management and HEDS study OK,
but curiously stated that would prefer oral to topical ACV in this case because of the practice in his own unit "expert opinion" suggesting that oral is better than topical!
Despite quoting HEDS correctly,
Levels of evidence OK. mentioned '87h'

Please provide feedback in the areas in which the candidate's performance was unsatisfactory.

Not able to describe any features of Prion

Gloves, mask, respirator = response to precautions depending on
close theatre, clean it high risk patient
cancel list

Not aware of guidelines - Cataract surgery = high risk.
Disturb minimum disposables, quarantining, etc

Centre: (not used)

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Session: 10.40am

Station: 10

**Health Promotion & Evidence Based Medicine
(Examiner B)**

SECTION 1

POOR ←————→ GOOD
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SECTION 2

POOR ←————→ GOOD
0 1 2 3
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SECTION 3

POOR ←————→ GOOD
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SECTION 4

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HIV R Topical steroids + CS acyclovir
+ Topical acyclovir

HEDS Oral ~~steroids~~ to prevent recurrence
No role for oral in eye disease
? design answer re. best:

EBM
Randomised
RCT
suppl. study
methodology
drop out rate

body of evidence A
B
C - case re
D

- pain relief
- CVS
- ~~eye~~
- Primo - prophylaxis

suspect CSF
cur

slow
mortality

end of list

Please provide feedback in the areas in which the candidate's performance was unsatisfactory.

- no mention of CSF

CSF NOT sure re sterility

prim - no mention re stability
resistance to sterilisation

no mention of WHO guideline
- Disposable instruments
- Sterilisation methods

coloured D, High risk "waking the eye"
no mention of optic nerve as high risk