

# INTENSIVE CARE MEDICINE – STAGE 3 TRAINING RECORD

Name of Trainee:

Hospital(s):

GMC Number:

Date of Stage 3 entry: (DD/MM/YYYY)

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## Instructions

Number each assessment in your portfolio (e.g. for DOPS D1, D2 etc). Complete the table columns 'Trainee Evidence' by identifying in the relevant item(s) of evidence in your portfolio by its code (D1, D2 etc). **At least 1** piece of suitable evidence is required for each of the relevant competencies. One assessment can be used to cover multiple curriculum competencies. The 'WPBA' column describes what type of workplace-based assessment is suitable for each competency, as defined by *The CCT in Intensive Care Medicine*. Other types of evidence may be used to demonstrate competencies, as described in 'Additional Assessment Tools Key' below. Competencies may be signed off by Educational Supervisors throughout the training Stage. Please ensure that the numbering of evidence items in this table matches that in your portfolio.

'Stage 2 Target Level' indicates the final competency level for this Stage of training. Trainees should **not normally** be marked higher than these levels at the end of this Stage unless in exceptional circumstances or if they have developed these competencies through additional training (for example a Special Skills year in Paediatric or Cardiac ICM). 'Entry from Stage 2' indicates the level at which the trainee will have entered Stage 3 from Stage 2. **Please see the full Syllabus for details of the knowledge, skills and behaviours which make up each competency.** Achievement Levels for some competencies may not change between training Stages – these have been highlighted. In these instances Educational Supervisors must still sign-off each competency but trainees need not provide additional WPBA or assessment evidence if trainers are satisfied they have demonstrated maintenance of their skills and knowledge in these specific competencies. Further assessments in these competencies may be conducted if required, at the trainers' discretion.

## Competency Level Descriptors

Level	Task orientated competence	Knowledge orientated competence	Patient management competence
1	Performs task under direct supervision.	Very limited knowledge; requires considerable guidance to solve a problem within the area.	Can take history, examine and arrange investigations for straight forward case (limited differential diagnosis). Can initiate emergency management and continue a management plan, recognising acute divergences from the plan. Will need help to deal with these.
2	Performs task in straightforward circumstances, requires help for more difficult situations. Understands indications and complications of task.	Sound basic knowledge; requires some guidance to solve a problem within the area. Will have knowledge of appropriate guidelines and protocols.	Can take history, examine and arrange investigations in a more complicated case. Can initiate emergency management. In a straightforward case, can plan management and manage any divergences in short term. Will need help with more complicated cases.
3	Performs task in most circumstances, will need some guidance in complex situations. Can manage most complications, has a good understanding of contraindications and alternatives.	Advanced knowledge and understanding; only requires occasional advice and assistance to solve a problem. Will be able to assess evidence critically.	Can take history, examine and arrange investigations in a more complex case in a focused manner. Can initiate emergency management. In a most cases, can plan management and manage any divergences. May need specialist help for some cases.
4	Independent (consultant) practice.	Expert level of knowledge.	Specialist.

## Workplace-Based Assessment Tools Key

<b>D</b>	Direct Observation of Procedural Skills [DOPS]	<b>C</b>	Case-Based Discussion [CBD]	<b>T</b>	Acute Care Assessment Tool [ACAT]
<b>I</b>	ICM Mini-Clinical Evaluation Exercise [I-CEX]	<b>M</b>	Multi-source Feedback [MSF]	<b>S</b>	Simulation

**Additional Assessment Tools Key** - These can be used in 'Trainee Evidence' as appropriate for the competency being assessed

<b>L</b>	Anaesthetic List Management Tool [ALMAT]	<b>EE</b>	Educational Event	<b>G</b>	Logbook page ... [include page ref, i.e. G22]
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Domain and Competencies	Entry from Stage 2	Stage 3 Target Level	Level Achieved	Assessment Tools	Trainee Evidence	Educational Supervisor	
						Sign-off	Date
<b>Domain 1: Resuscitation and management of the acutely ill patient</b>							
1.1 Adopts a structured and timely approach to the recognition, assessment and stabilisation of the acutely ill patient with disordered physiology	4	4		I, C, M, T, S			
1.2 Manages cardiopulmonary resuscitation – ALS recommended	4	4		I, M, T, S			
1.3 Manages the patient post resuscitation	4	4		I, M, T, S			
1.4 Triage and prioritises patients appropriately, including timely admission to ICU	3	4		C, M, T			
1.5 Assesses and provides initial management of the trauma patient	3	4		D, I, M, T, C, S			
1.6 Assesses and provides initial management of the patient with burns	2	3		D, I, M, T, C			
1.7 Describes the management of mass casualties	2	3		C			
<b>Domain 2: Diagnosis, Assessment, Investigation, Monitoring and Data Interpretation</b>							
2.1 Obtains a history and performs an accurate clinical examination	4	4		I, M			
2.2 Undertakes timely and appropriate investigations	3	4		I, C, M			
2.3 Performs electrocardiography (ECG / EKG) and interprets the results	4	4		D, I, C			
2.4 Obtains appropriate microbiological samples and interprets results	4	4		D, C			
2.5 Obtains and interprets the results from blood gas samples	4	4		D, C			
2.6 Interprets imaging studies	4	4		I, C			
2.7 Monitors and responds to trends in physiological variables	4	4		I, T, S			
2.8 Integrates clinical findings with laboratory investigations to form a differential diagnosis	3	4		I, C, T, S			
<b>Domain 3: Disease Management</b>							
3.1 Manages the care of the critically ill patient with specific acute medical conditions	3	4		D, I, C, M, T, S			
3.2 Identifies the implications of chronic and co-morbid disease in the acutely ill patient	3	4		C			
3.3 Recognises and manages the patient with circulatory failure	3	4		I, C, T, S			
3.4 Recognises and manages the patient with, or at risk of, acute renal failure	3	4		I, C, T			
3.5 Recognises and manages the patient with, or at risk of, acute liver failure	3	4		I, C, T			
3.6 Recognises and manages the patient with neurological impairment	3	4		I, C, T, S			
3.7 Recognises and manages the patient with acute gastrointestinal failure	3	4		I, C, T			
3.8 Recognises and manages the patient with severe acute respiratory failure / acute lung injury syndromes (ALI / ARDS)	3	4		I, C, T			
3.9 Recognises and manages the septic patient	3	4		I, C, T			
3.10 Recognises and manages the patient following intoxication with drugs or environmental toxins	3	4		I, C, S			
3.11 Recognises life-threatening maternal peripartum complications and manages care	3	4		I, C, S			
<b>Domain 4: Therapeutic interventions / Organ support in single or multiple organ failure</b>							
4.1 Prescribes drugs and therapies safely	3	4		D, C, M			
4.2 Manages antimicrobial drug therapy	3	4		I, C, M			
4.3 Administers blood and blood products safely	4	4		D, C, M			
4.4 Uses fluids and vasoactive / inotropic drugs to support the circulation	4	4		I, C			
4.5 Describes the use of mechanical assist devices to support the circulation	2	3		C			
4.6 Initiates, manages, and weans patients from invasive and non-invasive ventilatory support	4	4		D, C, T			
4.7 Initiates, manages and weans patients from renal replacement therapy	3	4		D, I, C, T			
4.8 Recognises and manages electrolyte, glucose and acid-base disturbances	4	4		I, C, T, S			

4.9 Co-ordinates and provides nutritional assessment and support	4	4		I, C, T		
<b>Domain 5: Practical procedures</b>						
5.1 Administers oxygen using a variety of administration devices	4	4		D, S		
5.2 Performs emergency airway management	3	4		D, S		
5.3 Performs difficult and failed airway management according to local protocols	2	3		D, S		
5.4 Performs endotracheal suction	4	4		D		
5.5 Performs fiberoptic bronchoscopy and BAL in the intubated patient	3	4		D, M		
5.6 Performs percutaneous tracheostomy	3	4		D, M, S		
5.7 Performs chest drain insertion	3	4		D		
5.8 Performs arterial catheterisation	4	4		D, C		
5.9 Performs ultrasound techniques for vascular localisation	4	4		C		
5.10 Performs central venous catheterisation	4	4		D, C		
5.11 Performs defibrillation and cardioversion	4	4		D, C, S		
5.12 Performs transthoracic cardiac pacing, describes transvenous	3	4		D, C		
5.13 Describes how to perform pericardiocentesis	2	3		C		
5.14 Demonstrates a method for measuring cardiac output and derived haemodynamic variables	4	4		D, C		
5.15 Performs lumbar puncture (intradural / 'spinal') under supervision	4	4		D, S		
5.16 Manages the administration of analgesia via an epidural catheter	4	4		I		
5.17 Performs abdominal paracentesis	2	3		D		
5.18 Describes Sengstaken tube (or equivalent) placement	2	3		C		
5.19 Performs nasogastric tube placement	4	4		D		
5.20 Performs urinary catheterisation	4	4		D		
<b>Domain 6: Perioperative care</b>						
6.1 Manages the pre- and post-operative care of the high risk surgical patient	4	4		C, M, T		
6.2 Manages the care of the patient following cardiac surgery	3	3		C		
6.3 Manages the care of the patient following craniotomy	3	3		C, T		
6.4 Manages the care of the patient following solid organ transplantation	3	3		C		
6.5 Manages the pre- and post-operative care of the trauma patient under supervision	3	4		C, T		
<b>Domain 7: Comfort and recovery</b>						
7.1 Identifies and attempts to minimise the physical and psychosocial consequences of critical illness for patients and families	4	4		M, C		
7.2 Manages the assessment, prevention and treatment of pain and delirium	4	4		D, I, C, M, T		
7.3 Manages sedation and neuromuscular blockade	4	4		D, I, C, M, T		
7.4 Communicates the continuing care requirements, including rehabilitation, of patients at ICU discharge to health care professionals, patients and relatives	4	4		M, T, S		
7.5 Manages the safe and timely discharge of patients from the ICU	3	4		M, T		
<b>Domain 8: End of life care</b>						
8.1 Manages the process of withholding or withdrawing treatment with the multi-disciplinary team	3	4		C, M		
8.2 Discusses end of life care with patients and their families / surrogates	3	4		C, M, D		
8.3 Manages palliative care of the critically ill patient	4	4		C, M, T		
8.4 Performs brain-stem death testing	4	4		D, S		

8.5	Manages the physiological support of the organ donor	3	4		I, C		
8.6	Manages donation following cardiac death	3	4		C, T, S		
<b>Domain 9: Paediatric care</b>							
9.1	Describes the recognition of the acutely ill child and initial management of paediatric emergencies	3	3		I, C, S		
9.2	Describes national legislation and guidelines relating to child protection and their relevance to critical care	3	3		C		
<b>Domain 10: Transport</b>							
10.1	Undertakes transport of the mechanically ventilated critically ill patient outside the ICU	4	4		D, I, C, M		
<b>Domain 11: Patient safety and health systems management</b>							
11.1	Leads a daily multidisciplinary ward round	3	4		M		
11.2	Complies with local infection control measures	4	4		C, M		
11.3	Identifies environmental hazards and promotes safety for patients and staff	4	4		C, M		
11.4	Identifies and minimises risk of critical incidents and adverse events, including complications of critical illness	3	4		C, M		
11.5	Organises a case conference	3	4		C, M		
11.6	Critically appraises and applies guidelines, protocols and care bundles	3	4		C		
11.7	Describes commonly used scoring systems for assessment of severity of illness, case mix and workload	4	4		C		
11.8	Demonstrates an understanding of the managerial and administrative responsibilities of the ICM specialist	3	4		C, M		
<b>Domain 12: Professionalism</b>							
12.1	Communicates effectively with patients and relatives	4	4		D, M, T, S		
12.2	Communicates effectively with members of the health care team	4	4		D, M, S		
12.3	Maintains accurate and legible records / documentation	4	4		D, M, T		
12.4	Involves patients (or their surrogates if applicable) in decisions about care and treatment	4	4		C, M, T		
12.5	Demonstrates respect of cultural and religious beliefs and an awareness of their impact on decision making	4	4		C, M, T		
12.6	Respects privacy, dignity, confidentiality and legal constraints on the use of patient data	4	4		C, M		
12.7	Collaborates and consults; promotes team-working	4	4		M		
12.8	Ensures continuity of care through effective hand- over of clinical information	4	4		C, M, T, S		
12.9	Supports clinical staff outside the ICU to enable the delivery of effective care	4	4		C, M, T		
12.10	Appropriately supervises, and delegates to others, the delivery of patient care	3	4		C, M, T		
12.11	Takes responsibility for safe patient care	4	4		D, C, M, T		
12.12	Formulates clinical decisions with respect for ethical and legal principles	3	4		C, M, T		
12.13	Seeks learning opportunities and integrates new knowledge into clinical practice	4	4		M		
12.14	Participates in multidisciplinary teaching	4	4		M		
12.15	Participates in research or audit under supervision	4	4		M		

**End of Year Meeting sign-off:** (complete as applicable for number of years required in Stage 3 training – copy and paste additional years if necessary)

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Trainer Signature: \_\_\_\_\_ Trainer Name (Print): \_\_\_\_\_ Trainer GMC Number: \_\_\_\_\_ Date (DD/MM/YYYY) 

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*(ICM Clinical Supervisor, ICM Educational Supervisor or FICM Tutor)*

Trainee Signature: \_\_\_\_\_ Trainee Name (Print): \_\_\_\_\_ Trainee GMC Number: \_\_\_\_\_ Date (DD/MM/YYYY) 

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Comments:

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Trainer Signature: \_\_\_\_\_ Trainer Name (Print): \_\_\_\_\_ Trainer GMC Number: \_\_\_\_\_ Date (DD/MM/YYYY) 

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Comments: