**Case Based Discussion Template**

|  |  |
| --- | --- |
| Student Name |  |
| Module title |  |

|  |  |
| --- | --- |
| Brief description of output and focus of scenario discussed |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Complexity of the scenario | Low | Average | High |

|  |  |
| --- | --- |
| Assessor’s Name |  |
| Assessor’s Position |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Please grade the following areas using the scale** | **Below Expectations** | **Borderline** | **Meets Expectations** | **Above Expectations** | **Unable to Comment\*** |
| Understand the clinical and/or scientific principles relevant to scenario |  |  |  |  |  |
| Can discuss relevant health and safety issues |  |  |  |  |  |
| Can discuss the procedures used to obtain results |  |  |  |  |  |
| Can discuss the quality control procedures to ensure the result is accurate |  |  |  |  |  |
| Demonstrates a knowledge of relevant “best practice” guidelines and other policies relevant to the scenario |  |  |  |  |  |
| Can discuss the significance of routine patient results with reference to the reason for referral |  |  |  |  |  |
| Is aware of, and can use as required, appropriate resources to aid the interpretation of results |  |  |  |  |  |
| Is are of the importance of audit trail and can complete audit trail accurately |  |  |  |  |  |
| Demonstrates awareness of the limits of responsibility and when to seek advice |  |  |  |  |  |
| Professionalism |  |  |  |  |  |

\*Please mark this if you have not observed the behaviour

|  |  |
| --- | --- |
| **Feedback and documentation of learning needs** | **Agreed action and feed forward** |
|  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Outcome** | Satisfactory  Unsatisfactory | **Date of Assessment** |  | **Time taken for assessment** |  |
| **Assessor Signature** |  | **Student Signature** |  | **Time taken for feedback** |  |