绵阳市第三人民医院

操作技能观察表（DOPS）

|  |
| --- |
| 考官姓名：\_\_\_\_\_\_\_\_\_\_\_\_\_ 日期：\_\_\_\_\_\_\_ 年 \_\_\_\_\_\_\_月\_\_\_\_\_\_\_ 日  考官身份：［］住院医［］住院总［］主治医［］副主任医师［］主任医师  考生姓名：\_\_\_\_\_\_\_\_\_\_\_\_\_ 学号：\_\_\_\_\_\_\_\_\_\_\_\_\_  考生身份：［］见习［］实习［］规培一［］规培二［］规培三  考核地点：［］门诊［］急诊［］住院部其他\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  操作名称： 心电图操作  考官对此次DOPS的满意度 1 2 3 4 5 6 7 8 9  签名［ ］ 不满意 | 满意 | 非常出色  考生对此次DOPS的满意度 1 2 3 4 5 6 7 8 9  签名［ ］ 不满意 | 满意 | 非常出色 |

|  |
| --- |
| **病人资料**  病历号：\_\_\_\_\_\_\_\_\_ 科室：\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 床号：\_\_\_\_\_\_ 年龄：\_\_\_\_\_\_ 性别：\_\_\_\_  病人属于：［］第一次接触［］非第一次接触  操作复杂程度：［］低［］中［］高  病人配合程度：［］低［］中［］高 |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **观察时间 分钟** | | | |  | | **回馈时间 分钟** | | | | | |
|  | | **远低于能力预期** | **低于能力预期** | | **达到能力预期下线** | | **符合平均能力预期** | **高于平均能力预期** | **达到高一级别能力预期** | **u/c** |
|  | | **1** | **2** | | **3** | | **4** | **5** | **6** |  |
| 1.掌握操作适应症、相关解剖关系和操作技术 | |  |  | |  | |  |  |  |  |
| 2.同病人交流并获得知情同意 | |  |  | |  | |  |  |  |  |
| 3.术前准备 | |  |  | |  | |  |  |  |  |
| 4.麻醉止痛操作 | |  |  | |  | |  |  |  | √ |
| 5.安全镇静技术 | |  |  | |  | |  |  |  | √ |
| 6.无菌操作 | |  |  | |  | |  |  |  |  |
| 7.需要时及时寻求帮助 | |  |  | |  | |  |  |  |  |
| 8.术后操作 | |  |  | |  | |  |  |  |  |
| 9.交流沟通技巧 | |  |  | |  | |  |  |  |  |
| 10.专业素养和病人照顾 | |  |  | |  | |  |  |  |  |
| 11.总体表现评价 | |  |  | |  | |  |  |  |  |
| u/c：表示未观察到或难以评价 | | | | | | | | | | |
| 完成较好部分： | | | | | | | | | | |
| 可以改进部分： | | | | | | | | | | |
| 不足部分： | | | | | | | | | | |
| 总体印象： | | | | | | | | | | |
| 教师对学生表现的主要反馈要点 | 表现比较好的部分： | | | | | | | | | |
| 表现不足及需要改进的部分： | | | | | | | | | |
| 整体表现（总体印象）： | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 绵阳市第三人民医院  病例汇报评价表（SOAP）   |  | | --- | | 考官姓名：\_\_\_\_\_\_\_\_\_\_\_\_\_ 日期：\_\_\_\_\_\_年\_\_\_\_\_月\_\_\_\_\_日  考官身份：［］住院医［］住院总［］主治医［］副主任医师［］主任医师 |   考核时间：［］上午［］下午［］晚上   |  | | --- | | 考生姓名： 学号：  考生身份：[ ]见习 [ ]实习 [ ]规培一 [ ]规培二 [ ]规培三  考核地点：[ ]门诊 [ ]急诊 [ ]住院 其他  考核目的：[ √ ]资料收集 [ ]诊断 [ ]治疗 [ ]病情咨询意见 |  |  | | --- | | 病例号： 病房： 床号： 年龄： 性别：  病例复杂程度： [ ]低 [ ]中 [ ]高 |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | **缺项** | **叙述内容不完整** | | **内容调理性** | | | **遗漏重要内容** | **只描述重要内容** | **内容完整但条理性不够** | **内容完整且有调理** | | **(S)Subjective** | | | | | | | 1.主要症状和体征描述 | 1 | 2 | 3 | 4 | 5 | | 2.模仿过程描述 | 1 | 2 | 3 | 4 | 5 | | 3.既往史及药物治疗情况 | 1 | 2 | 3 | 4 | 5 | | 4.药物过敏史 | 1 | 2 | 3 | 4 | 5 | | 5.其他可能相关的病史 | 1 | 2 | 3 | 4 | 5 | | **(O)Objective** | | | | | | | 1.生命征 | 1 | 2 | 3 | 4 | 5 | | 2.心肺查体 | 1 | 2 | 3 | 4 | 5 | | 3.受累系统查体 | 1 | 2 | 3 | 4 | 5 | | a)阳性体征 | 1 | 2 | 3 | 4 | 5 | | b)相关阴性体征 | 1 | 2 | 3 | 4 | 5 | | **(A)Analysis** | | | | | | | 1.简单总结资料 | 1 | 2 | 3 | 4 | 5 | | 2.列举问题 | 1 | 2 | 3 | 4 | 5 | | 3.解决问题所制定的计划 | 1 | 2 | 3 | 4 | 5 | | 4.结果和随访 | 1 | 2 | 3 | 4 | 5 | | **(P)Plan** | | | | | | | 1.安排检查（辅助检查、影像学） | 1 | 2 | 3 | 4 | 5 | | 2.指导 | 1 | 2 | 3 | 4 | 5 | | 3.操作 | 1 | 2 | 3 | 4 | 5 | | 4.药物治疗 | 1 | 2 | 3 | 4 | 5 | | 5.健康教育 | 1 | 2 | 3 | 4 | 5 | | 6.下一次见面或随访时间 | 1 | 2 | 3 | 4 | 5 |   考官对于考生表现的主要反馈要点   |  | | --- | | 完成较好部分： | | 不足部分及可以改进部分： | | 总体印象： | |

**注：请双面打印** 考官签名［ ］

考生签名［ ］

绵阳市第三人民医院

小病例临床演练评价表(Mini-CEX)

|  |
| --- |
| 考官姓名：\_\_\_\_\_\_\_\_\_\_\_\_\_     日期：\_\_\_\_\_\_年\_\_\_\_\_月\_\_\_\_\_日  考官身份：［］住院医［］住院总［］主治医［］副主任医师［］主任医师  考核时间：［］上午［］下午［］晚上 |
| 考生姓名： 学号  考生身份：[ ]见习 [ ]实习 [ ]规培一 [ ]规培二 [ ]规培三  考核地点：[ ]门诊 [ ]急诊 [ ]住院其他  考核目的：[ √ ]资料收集 [ ]诊断 [ ]治疗 [ ]病情咨询意见 |
| 病例号： 病房： 床号： 年龄： 性别： [ ]初诊 [ ]复诊  病人属于： [ ]第一次接触 [ ]非第一次接触  病例复杂程度： [ ]低 [ ]中 [ ]高  病人配合度： [ ]差 [ ]中 [ ]好 |
| 1.医学面谈技巧 1 2 3 4 5 6 7 8 9  不满意 | 满意 | 非常出色  2.体格检查技巧 1 2 3 4 5 6 7 8 9  不满意 | 满意 | 非常出色  3.人道关怀/专业素养 1 2 3 4 5 6 7 8 9  不满意 | 满意 | 非常出色  4.临床判断能力 1 2 3 4 5 6 7 8 9  不满意 | 满意 | 非常出色  5.咨询建议/交流沟通能力 1 2 3 4 5 6 7 8 9  不满意 | 满意 | 非常出色  6.组织能力和效率 1 2 3 4 5 6 7 8 9  不满意 | 满意 | 非常出色  7.总体临床能力 1 2 3 4 5 6 7 8 9  不满意 | 满意 | 非常出色 |
| Mini-CEX时间  观察时间 分钟 反馈时间 分钟  考官对此次Mini-cex的满意度 1 2 3 4 5 6 7 8 9  签名［ ］ 不满意 | 满意 | 非常出色  考生对此次Mini-cex的满意度 1 2 3 4 5 6 7 8 9  签名［ ］ 不满意 | 满意 | 非常出色 |