

ASSOCIATION OF PROFESSORS OF DERMATOLOGY

In-Office Procedure Evaluation Exercise (IOPEE)

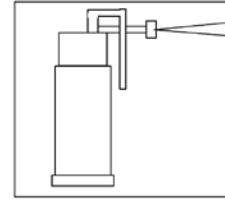
Instructions:

General principles

- This tool is designed to help assess the reasoning, counseling, and technical skills when performing simple in-office procedures, including punch biopsies, shave biopsies, cryotherapy, acne surgery, and other simple procedures. Although simple excisions may be assessed using this tool, please consider using the simple excision assessment as a more detailed alternative. Although the Mini-CEX tool has a procedure assessment component, this IOPEE tool should be used when a greater attention to the assessment of the specific procedure is sought by the assessor.
- All or part of an in-office procedure can be observed. It is not required to assess the entire procedure to assess a component of the procedure.
- In general, it is advisable to let the trainee know you will be assessing their performance prior to the encounter.
- Provide direct, specific constructive feedback to the trainee soon after the encounter. Determine what are 'must' areas for improvement vs. 'the art of how I would have done it' areas for improvement (ie, corrections vs. advice)

Specific instructions

- **In office procedure** – Check the box of the procedure observed. More than one can be selected.
- **Focus** – Check the focus or foci that are assessed. Several foci may be checked if several parts of the encounter were observed.
- **Skills** – Rate the trainee on the milestones scale for each skill. It is important to remember that trainees are not being compared relative to other trainees; they are being rated on a continuum; that is, on a scale designed to assess progression of skills from novice to master. It is common for first year residents to score 3 or 4 out of 10 and still be great first year residents.
- If a particular skill is not observed or is not applicable to the particular procedure, check the "Not observed" box.
- **Feedback and comments** – Note specific positives in the procedure and give constructive feedback on how the trainee could improve.



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In-Office Procedure Evaluation Exercise (IOPEE)

Resident: _____ Derm Yr: _____

Evaluator: _____ Date: _____

In-Office Procedure(s): Cryo Shave Punch Excision Laser Other _____

Focus: Procedure Selection Consent and Counseling Technical Skill

I.7

1. Decision to Perform In-Office Procedure (Not observed)

Doesn't know procedure	Understands once told	Inquires if procedure would be appropriate	Appropriately proposes procedure	Decides to proceed appropriately and with confidence	Teaches rationale
1	2 3	4 5	6 7	8	9 10
Below Expected 1 st Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

I.7

2. Selection of Body Site / Location for In-Office Procedure (Not observed)

Disengaged	Told where	Needs confirmation, But asks/suggests site	Appropriately proposes location	Selects appropriate site with confidence	Teaches site selection
1	2 3	4 5	6 7	8	9 10
Below Expected 1 st Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

IV.1

3. Pre-Diagnostic Counseling and Consent Skills (Not observed)

Distracted, bored, confused.	Listens intently to Counseling	Carry out scripted consent explain basic steps	Appropriate language, confirms understanding, consent	Efficiently thorough counseling. Confidently/Correctly answers ?s	Teaches Counseling
1	2 3	4 5	6 7	8	9 10
Below Expected 1 st Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

I.6

4. Procedural Technical Skill (Not observed)

Observes only	Hesitant, awkward, inefficient but gets job done.	Attention to pt position Some inefficiencies	Sound ergonomics, patient comfort Utilizes staff effectively	Efficient, precise. Ensures patient comfort	Teaches techniques
1	2 3	4 5	6 7	8	9 10
Below Expected 1 st Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

I.6
VI.2

5. Patient Safety Application (Not observed)

Frank disregard to safety	Reminded to practice patient safety	Universal precautions, focus on self-safety	Performs time-out/read-back or other systems of safety	Ensures safety of those around, including self, staff, and patient	Teaches Safety
1	2 3	4 5	6 7	8	9 10
Below Expected 1 st Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

IV.1

6. Post-Procedural Counseling Skills (Not observed)

Disinterested, distracted	Predominantly listens	Counsels on wound care	Counsels on next steps and results Expectations	Checks for patient understanding, answers ?s with confidence	Teaches Counseling
1	2 3	4 5	6 7	8	9 10
Below Expected 1 st Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

7. Overall In-Office Procedural Competence (Not observed)

1	2 3	4 5	6 7	8	9 10
Below Expected 1 st Yr	Beginning Resident Level	Junior Resident Level	Senior Resident Performance	Ready for Unsupervised Practice	Mastery Level

FEEDBACK AND COMMENTS TO HELP THE RESIDENT IMPROVE PERFORMANCE: