

## GASTROINTESTINAL ENDOSCOPY COMPETENCY ASSESSMENT TOOL (GiECAT)

1) Using the scale provided, please rate the candidate's performance on the following global rating items:

**Please note:** A score of 4 should be assigned to those individuals who are *competent* to perform the tasks *independently*, *without* the need for *supervision* (i.e., do not take the candidate's level of training into account in assigning a score)

### SCALE:

- 1 Unable to achieve tasks despite significant verbal and/or hands-on guidance
- 2 Achieves some of the tasks but requires significant verbal and/or hands-on guidance
- 3 Achieves most of the tasks independently, with minimal verbal and/or manual guidance
- 4 Competent for independent performance of all tasks
- 5 Highly skilled performance of all tasks

GLOBAL RATING ITEM	SCORE
<b>TECHNICAL SKILL</b> <i>Demonstrates an ability to manipulate the endoscope using torque steering, angulation control knobs and advancement/withdrawal for effective navigation of the gastrointestinal tract.</i>	
<b>STRATEGIES FOR ENDOSCOPE ADVANCEMENT</b> <i>Demonstrates an ability to use loop-reduction, insufflation, pull-back, suction, external pressure and patient position change to advance the endoscope independently, expediently and safely.</i>	
<b>VISUALIZATION OF MUCOSA</b> <i>Demonstrates an ability to achieve a clear luminal view required for safe endoscope navigation and complete mucosal evaluation, including good visualization around corners and folds and appropriate use of mucosal cleaning techniques (e.g. lavage, suction).</i>	
<b>INDEPENDENT PROCEDURE COMPLETION (NEED FOR ASSISTANCE)</b> <i>Demonstrates an ability to complete the endoscopic procedure expediently and safely without verbal and/or manual guidance.</i>	
<b>KNOWLEDGE OF PROCEDURE</b> <i>Demonstrates general procedural knowledge including indications and contraindications, potential complications, endoscopy techniques, equipment maintenance and trouble-shooting.</i>	
<b>INTERPRETATION AND MANAGEMENT OF FINDINGS</b> <i>Demonstrates an ability to accurately identify and interpret pathology and/or procedural complications and form an appropriate management plan.</i>	
<b>PATIENT SAFETY</b> <i>Demonstrates an ability to perform the procedure in a manner that minimizes patient risk and assures optimal patient safety (e.g., atraumatic technique, minimal force, minimal red-out, recognition of personal and procedural limitations, safe sedation practices, and appropriate communication).</i>	

2) Please rate the candidate's performance on the following checklist items (check the appropriate box):

ITEM		Not Done or Done Incorrectly	Done Correctly	N/A
<b>PRE-PROCEDURE</b>				
1.	Reviews relevant patient information (health records, relevant investigations) and obtains history as appropriate (indications, contraindications, medical history, medications, allergies).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Takes action in response to patient history and investigations where appropriate (e.g. prophylactic antibiotics, anesthetic risk factors, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Demonstrates a sound knowledge of the indications and contraindications to colonoscopy, its benefits and risks, potential alternative investigations and/or therapies, and an awareness of the sequelae of endoscopic or non-endoscopic management.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Explains to the patient and/or caregivers the perioperative process and procedure (likely outcome, time to recovery, benefits, potential risks/complications and rates), checks for understanding and addresses concerns and questions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>PROCEDURE - TECHNICAL</b>				
5.	Recognizes loop formation and avoids or reduces appropriately during the procedure (using pull-back, torque, external pressure, patient position change).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Uses rotation and/or torque appropriately.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Uses withdrawal (as an advancement strategy) appropriately.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Uses abdominal pressure and changes in patient position appropriately to aid scope advancement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Advances to cecum (in an appropriate time)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Withdraws from cecum/terminal ileum to rectum in an appropriate time (> 6 min).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Withdraws endoscope in a controlled manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Performs therapeutic maneuvers (biopsy and/or polypectomy) independently, appropriately and safely.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>PROCEDURE - COGNITIVE</b>				
13.	Demonstrates recognition of anatomical landmarks (rectum, flexures, ileo-cecal valve, appendiceal orifice, etc.) and/or incomplete examination.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Demonstrates recognition of pathological and anatomical abnormalities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Describes findings accurately, interprets abnormalities in the context of the patient and selects the appropriate strategy/technique to deal with them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>PROCEDURE - NON-TECHNICAL</b>				
16.	Administers sedation appropriately (type, dose), monitors the patient's vitals and comfort level throughout the procedure and responds appropriately AND/OR demonstrates appropriate interaction with the anesthetist to ensure appropriate sedation and monitoring throughout the procedure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	Demonstrates appropriate interaction and communication with the procedure nurses and/or assistants throughout the procedure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>POST-PROCEDURE</b>				
18.	Educates the patient and/or caregiver about the colonoscopic findings (explanation, significance) and follow-up plan, and provides advice regarding potential post-procedure complications, recommended course of action, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	Appropriate and timely documentation of procedure (written/dictated/EMR)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3) Please indicate if a lapse in professionalism occurred:

- No
- Minor lapse (inadvertent and/or did not cause any substantial harm)
- Major lapse (evidence of full knowledge that this action was not right and/or the lapse does cause harm)

#### 4) OVERALL ASSESSMENT

a) Overall, the endoscopist's **hands-on (technical) skills** are:

- Novice
- Beginner
- Intermediate
- Competent
- Expert

b) Overall, the endoscopist's **knowledge** about colonoscopy is:

- Novice
- Beginner
- Intermediate
- Competent
- Expert

c) Overall, the endoscopist's **higher-order skills** (e.g. clinical reasoning, judgment, interpretation of abnormalities, situational awareness, communication, ethical integrity) are:

- Novice
- Beginner
- Intermediate
- Competent
- Expert

#### 5) ASSESSOR GLOBAL ASSESSMENT

In order to aid in the validation process, please provide your expert global assessment of the edoscopist's skill level *independent of the above checklist and global ratings*.

- Requires significant guidance with all aspects of performing colonoscopy
- Able to perform colonoscopy under supervision, but requires guidance with many aspects of the procedure
- Able to perform colonoscopy independently, under supervision, with minimal guidance
- Competent to perform colonoscopy independently, safely and expediently without the need for supervision
- Highly skilled advanced ability to perform colonoscopy independently, with optimal efficiency and safety

**OTHER MEASURES**

6) Overall comfort of the patient:

No discomfort	Minimal discomfort	Mild discomfort	Moderate discomfort	Severe discomfort
1	2	3	4	5

7) Case difficulty:

Extremely easy	Fairly easy	Average	Fairly difficulty	Extremely difficulty
1	2	3	4	5

**8) BOWEL PREPARATION**

a) The efficacy of the bowel preparation was:

Inadequate	Poor	Fair	Good	Excellent
<i>Solid stool obscuring mucosal detail and contour despite aggressive washing and suctioning.</i>	<i>Presence of stool obscuring mucosal detail and contour. However, with suctioning and washing a reasonable view is obtained</i>	<i>Turbid fluid or stool residue obscuring mucosal detail. However, mucosal detail becomes visible with suctioning. Washing not necessary.</i>	<i>Some turbid fluid or stool residue but mucosal detail still visible. Washing and suctioning not necessary.</i>	<i>Mucosal detail clearly visible. If fluid present, it is clear. Almost no stool residue</i>
1	2	3	4	5

b) Ottawa Bowel Preparation Scale:

i) Fluid in the whole colon:

- Small  
 Moderate  
 Large  
 N/A

ii) Please rate the cleanliness of the:

	Inadequate	Poor	Fair	Good	Excellent
<b>SECTION OF COLON</b>	<i>Stool obscures despite major wash/suction</i>	<i>Stool obscures, OK view with suction/wash</i>	<i>Fluid/stool obscuring mucosa, seen with suction, wash not needed</i>	<i>Turbid fluid/stool but mucosa visible, wash/suction not needed</i>	<i>Mucosal detail visible, no/clear fluid, almost no stool</i>
	1	2	3	4	5
<b>RECTO-SIGMOID</b>					
<b>MID COLON</b>					
<b>RIGHT COLON</b>					

9) How easy was it for you to rate the endoscopist's performance using this tool?

Extremely easy	Fairly easy	Average	Fairly difficulty	Extremely difficulty
1	2	3	4	5