Mini-Clinical Evaluation			First/Second (please circle)						
(CEX)									
Student Name:									
Clinical Setting	GP surger	у 🗆	Но	me vis	sit 🗆	Chro	onic disea		
Clinical problem Resp	CVS I	Psyc/	Nur	Gast	r Paed	Women	clir ns Loce	omotor	
Category	I	Behav	О	O		Health			
New N D DV		nlovity, c	<u></u>						
F/u: New LI FU	case:	plexity o)I	Lov	w 🗆	Average	□ Hig	gh 🗆	
Focus of clinical Encounter	History		Diag	gnosis	N	/Ianageme	ent Ex	planation	
Lifeounter									
	Below			Borderline/meet		Above		U/C*	
PLEASE grade the following	expectation (Referred)		s expectation (Pass)			expectation (Commended)			
areas using the scale below	1	2	3	(1 4	4	5	6	u/c	
History Taking									
Patient Centeredness									
Physical examination Skills									
Communication Skills									
Clinical Judgement									
Therapeutic Skills									
*U/C- Please mark this if you have not observed the behaviour and feel unable to comment									
Anything especially good?			Suggestions for development?						
Action Agreed		<u> </u>							
	-								
Student satisfaction with mini-CEX 1 Tutor satisfaction with mini-CEX 1	it all 2		3	4 4		5 □	6	Highly 7 □ 7 □	
Tutor			Dat	te					
Signature					(Ador	ated from	NC A A D	ocument)	
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What is mini-CEX?

It is an assessment tool designed to provide feedback on skills by observing a clinical encounter. Not all elements need be assessed at the same time. Strengths, areas for development and agreed action points should be identified and discussed with the student as part of the tutor feedback.

Please ensure the patient is aware that the mini-CEX is being carried out. The process needs to be student led. They should choose the clinical encounter. The observed process should be no longer than 15-20 minutes. Immediate feedback should take no longer than 5 minutes.

Mini-CEX: Competencies Assessed and Descriptors

Question area:	Descriptor for a satisfactory student:
History Taking	Facilitates patient's telling of story, effectively uses appropriate questions to obtain accurate, adequate information, responds appropriately to verbal and non-verbal cues
Patient- Centeredness	Shows respect, compassion, empathy; Sensitive to patient's needs of comfort and confidentiality. Considers risks and benefits of intervention for the patient. Gains appropriate consent;
Physical examination	Follows efficient logical sequence; examination appropriate to clinical problem, Explains to patient; sensitive to patient's modesty
Communication skills	Explores patient's perspective, jargon free, open and honest, empathic, agrees management plan/therapy with patient
Clinical Judgement	Makes appropriate diagnosis and formulates a suitable management plan. Selectively orders/performs appropriate diagnostic studies,
Therapeutics skills	Makes appropriate therapeutic decisions taking into consideration past history of the patient, evidence base for intervention and socioeconomic factors

Specific points to consider when completing the form:

Focus of clinical encounter: Diagnosis should include an assessment of the student's examination skills and abilities to reach a provisional diagnosis.

Complexity of case: Score the difficulty of the clinical case considering the student proceeding to Finals Satisfaction with mini-CEX: Please grade your satisfaction with mini-CEX as an assessment process.

Using the scale: Please use the full range of the rating scale. Comparison should be made with a student ready to take their Final MBBS examination. It is expected that ratings in the lower ranges may be in keeping with the student's experience at the beginning of the academic year.

Feedback: The discussion about agreed strengths, areas for development and an action plan needs to be done sensitively and in a suitable environment. **The student should keep the original but please send a copy to the Unit Convenor with the final Grade Form.**