

STUDENT COURSE COGNITIVE AND SKILLS PERFORMANCE EVALUATION FORMS

Surgical Skills Practicum

Station III, Cricothyroidotomy (CRI)
Station VII, Pericardiocentesis (PC)

Station VII, Chest Decompression (CD)
Station VIII, Diagnostic Peritoneal Lavage (DPL)

Group _____

Patient # _____

Faculty: (Qualified ATLS Instructor)

Time: (1½ hours, 20 minutes per procedure)

Instructions: Indicate your response to the student's overall skills performance according to essential requirements for this station and the guidelines outlined in Section II, Chapter 5, Cognitive and Skills Performance Requirements and Evaluation. Please include written comments if student's rating/status is incomplete/remedial.

Rating: S = Successful IRM = Incomplete/Remedial IP = Instructor Potential

STUDENT'S NAME	STATIONS/RATINGS				COMMENTS
	CRI	CD	PC	DPL	
#1	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	 <input type="checkbox"/> IP
#2	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	 <input type="checkbox"/> IP
#3	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	 <input type="checkbox"/> IP
#4	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	<input type="checkbox"/> S <input type="checkbox"/> IRM	 <input type="checkbox"/> IP