

# Directly Observed Procedural Skills (DOPS)

<b>Trainee's Full Name:</b>			
<b>Hospital:</b>			
<b>Trainee's I.C. No.:</b>		<b>Date of Assessment:</b>	/ / 20__

## PROCEDURE: AWAKE BRONCHOSCOPIC INTUBATION

	SATISFACTORY	NEEDS IMPROVEMENT	COMMENTS
Knowledge -indication, types and parts of bronchoscope, choice of oral/naso intubation	<input type="checkbox"/>	<input type="checkbox"/>	
Pre-procedural patient preparation - consent, explanation, IV access, naso/oropharyngeal local anaesthesia, oxygen, anti-sialogogue, sedation, monitoring, etc.	<input type="checkbox"/>	<input type="checkbox"/>	
Pre-procedural difficult airway equipment preparation – supraglottic airways, bougie, McCoy laryngoscope, suction etc.	<input type="checkbox"/>	<input type="checkbox"/>	
Bronchoscope preparation - scope, camera and monitor connections, image optimization, bronchoscope tip orientation, suction, selection of endotracheal tube, etc.	<input type="checkbox"/>	<input type="checkbox"/>	
Technique – insertion and advancement of scope, recognition of airway anatomy, airway local anaesthetic administration, advancement/railroading of endotracheal tube, confirmation of endotracheal tube position, etc.	<input type="checkbox"/>	<input type="checkbox"/>	
Situational awareness during procedure - desaturation, patient discomfort, duration of procedure, trauma to tissue	<input type="checkbox"/>	<input type="checkbox"/>	

<b>Overall Ability to Perform Procedure</b>	<b>Competent to Perform Unsupervised</b> <input type="checkbox"/>	<b>Requires Direct Supervision (Repeat DOPS)</b> <input type="checkbox"/>
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**Comments and feedback:** *(aspects of good practice/suggested areas for learning and development)*

**Supervisor's Position:**      Consultant       Specialist

<b>Supervisor's Name:</b>			
<b>Supervisor's Signature:</b>		<b>Trainee's Signature:</b>	