

 University of British Columbia PG-Pain Medicine-SSP	Evaluated By : <b>evaluator's name</b> Evaluating : <b>person (role) or moment's name (if applicable)</b> Dates : <b>start date to end date</b>
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\* indicates a mandatory response

# Pain Medicine Rotation Evaluation Form: Multidisciplinary Centres and Acute Pain Service

## Medical Expert Role

	N/A	Below expectations	Meets most expectations	Meets all expectations	Exceeds expectations
1. able to demonstrate knowledge about the anatomy and physiology of pain.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. able to distinguish nociceptive from neuropathic pain.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. able to demonstrate pharmacologic knowledge of agents used in the management of acute and chronic pain.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. able to assess and manage patients with acute pain, including the diagnosis, any special pharmacokinetic or pharmacodynamic characteristics, and to be able to modify therapy appropriately.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. able to use prescribe and monitor for complications appropriately the following modalities: PCA, epidural, and regional analgesia, and to be able to transition patients from the above to oral medications, including demonstrating an ability to convert opioids and the concept of opioid equipotency.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. able to select co-analgesics to improve analgesia while minimizing side-effects and risks.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. able to identify and distinguish between tolerance, dependence, and addiction.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. able to identify impediments to analgesia and modify therapy accordingly.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. able to perform a comprehensive assessment of the patient with chronic pain (including history, physical examination, relevant investigations, functional and psychosocial impacts), and to be able to describe a comprehensive management plan (including pharmacologic, non-pharmacologic such as physiotherapy and psychotherapy, and regional analgesic techniques).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. able to describe the indications, contraindications, and complications of the regional analgesic techniques as					

they apply to chronic pain (iv lidocaine infusion, sympathetic blocks, spinal nerve root blocks and blocks for facet joint pain, cryoablation, epidural steroid injection, intrathecal infusion pumps, spinal cord stimulators).	<input type="radio"/>				
11. able to demonstrate radiation safety in the use of fluoroscopy ("C-Arm").	<input type="radio"/>				
11. able to describe the indications for diagnostic imaging (pain film, CT, bone scan, MRI, ultrasound, PET)	<input type="radio"/>				
12. able to perform a directed musculoskeletal and/or neurological physical exam in order to differentiate painful processes arising from bones, joints, soft tissues, peripheral or central nervous system or other tissues.	<input type="radio"/>				
13. able to list clinical tests used to diagnose neuropathic pain including positive signs (mechanical and thermal allodynia and hyperalgesia, temporal and spatial summation), negative signs (sensory loss, weakness and muscle atrophy) and associated signs such as referred sensation, swelling, alterations in sweating, changes in colour and temperature, and trophic changes.	<input type="radio"/>				
14. able to list common validated tools that have been developed to assess neuropathic pain; identify their purpose, scoring, interpretation and limitations	<input type="radio"/>				
15. Able to discuss addiction issues in pain management	<input type="radio"/>				
16. Acute Pain: recognize and treat the side effects of acute pain management modalities.	<input type="radio"/>				
17. Acute Pain: Explain use of adjuvant agents in nociceptive and neuropathic pain management	<input type="radio"/>				
18. Acute Pain: able to describe and order the multiple acute pain management modalities, e.g., epidural, regional blocks, PCA,	<input type="radio"/>				
19. Acute Pain: able to describe the role of nerve blocks and how to manage nerve catheters.	<input type="radio"/>				
20. Acute Pain: able to trouble shoot the non or partially functioning epidural.	<input type="radio"/>				
21. Acute Pain: able to describe and manage acute critical incidents related to epidural analgesia.	<input type="radio"/>				
22. Acute Pain: able to step patients down from epidural and PCA to oral analgesics.	<input type="radio"/>				
23. Acute Pain: able to list the indication and contraindications for each acute pain management modality.	<input type="radio"/>				

### Communicator Role

	n/a	Below expectations	Meets most expectations	Meets all expectations	Exceeds expectations
1. able to communicate and provide education effectively and sensitively with patients and families regarding their pain diagnoses, and its management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. able to write effective chart notes for patients with acute pain, and write or dictate complete yet succinct consultations for patients with acute or chronic pain.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. able to verbally present medical information succinctly and accurately to attending staff.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. able to communicate effectively with other members of the health care team.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Review a topic in pain management unit and prepare a brief written report	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

### Collaborator Role

	N/A	Below expectations	Meets most expectations	Meets all expectations	Exceeds expectations
1. able to function effectively in the health care team, including an understanding of the roles of the various members (other physicians such as family physician, neurologist, neurosurgeon, physiatrist, orthopedic surgeon, rheumatologist, palliative care physician, psychiatrist, addiction medicine physician; other members of the team such as nurse and nurse clinician, anesthesiology assistant, radiology technician, physiotherapist) and how to prevent or to resolve conflict should they arise.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. able to accurately elicit and synthesize relevant information and perspectives of patients and families, colleagues, and other professionals. Gather information about a patient's beliefs, concerns, expectations and the impact of pain on their life. Identify and explore problems to be addressed from a patient encounter effectively, including the patient's context, responses, concerns, and preferences	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. able to respect diversity and difference, including but not limited to the impact of gender, religion and cultural beliefs on decision-making	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. able to engage patients, families, and relevant health professionals in shared decision- making to develop an individualized plan of care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. able to perform a consultation, including the presentation of well-documented assessments and recommendations in written and/or	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

verbal form in response to a request from another health care profession					
6.able to arrange appropriate follow-up care services for a patient and their family after consultation with others with the most responsible physician to facilitate longitudinal coordinated care	<input type="radio"/>				
7. able to offer patients the services of patient support groups when indicated	<input type="radio"/>				
8. be aware of the available physiotherapeutic, occupational therapy and vocation assessment modalities used in treating chronic pain, with an emphasis on techniques patients can administer themselves.	<input type="radio"/>				

**Manager Role**

	N/A	Below expectations	Meets most expectations	Meets all expectations	Exceeds expectations
1. able to organize acute pain service rounds effectively and efficiently.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. able to organize one's time to participate in regional analgesic procedures.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. participate in all pain management unit meetings and seminars	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. be aware of cost implications of pain management care seen in the choice of ancillary investigations and treatment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. be aware of the types of community resources frequently required for holistic pain management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Health Advocate Role**

	N/A	Below expectations	Meets most expectations	Meets all expectations	Exceeds expectations
1. able to advocate for patients with acute pain and chronic pain to assess appropriate treatment and in the prevention or treatment of complications.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. able to advocate for patients with chronic pain with special needs for further investigation or assessment/ management by other consultants or members of the health care team.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. able to understand the limitations and barriers in the health care system facing the population of patients with chronic pain, and to verbalize current proposals in how to address these limitations and barriers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. participated in systemic quality process evaluation and improvement, including patient safety initiatives, organization of delivery of new therapies/ services/programs and evaluation of these new therapies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Scholar Role

	n/a	Below expectations	Meets most expectations	Meets all expectations	Exceeds expectations
1. critically review the literature to answer questions arising from patient care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. able to describe current concepts of the placebo response and their implications for assessment and therapy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. able to cite known genetic influences on pain and pharmacotherapy for pain; describe the role of genetic techniques in investigating pain physiology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. teach other members of the health care team about issues and learnings that arise during care.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Professional Role

	N/A	Below expectations	Meets most expectations	Meets all expectations	Exceeds expectations
1. Throughout the rotation the resident shall demonstrate professional behavior in all interactions with patients, their family members, and other members of the health care team. This includes the establishment of an effective therapeutic relationship with patients.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Throughout the rotation, the resident will attend all scheduled educational activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. able to obtain informed consent for patients with chronic pain undergoing regional analgesic techniques.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Throughout the rotation, the resident shall round on inpatients, and follow-up with outpatients undergoing day procedures after the procedure or in clinic as appropriate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Throughout the rotation, the resident shall understand his/her own limitations and seek assistance appropriately.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Throughout the rotation, the resident shall be receptive to constructive feedback.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. able to obtain informed consent for patients with chronic pain undergoing Internationale procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. provide a role model of ethical and compassionate care for other members of the patient care team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall Performance:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments (required if below expectations or exceeds expectations in any of above categories):

Reviewed with resident?

- No  
 Yes

Note: Some of the above goals will be expected to be acquired by the completion of the rotation ("by the end of the rotation, be able to...")

Other goals will be demonstrated throughout the rotation ("throughout the rotation")

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**The following will be displayed on forms where feedback is enabled...**  
(for the evaluator to answer...)

\*Did you have an opportunity to meet with this trainee to discuss their performance?

- Yes  
 No

(for the evaluatee to answer...)

\*Did you have an opportunity to discuss your performance with your preceptor/supervisor?

- Yes  
 No