**OTP Competency Assessment Sheet**

This is to be completed by the OTP’s clinical supervisor prior to the submission of their supervised case log that is required to be eligible to sit ANZCP certification exams. All skills must be ranked 6/10 or above to be eligible to sit ANZCP certification exams. A copy must be included in the uploaded to the submission portal upon application for ANZCP certification exams.

**OTP Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**OTP signature:**

**Supervisor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Supervisor Signature:**

**Procedure: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Case number: \_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Patient Evaluation**

|  |  |  |
| --- | --- | --- |
|  | **Score** |  **Comments** |
| 1. Review of patient history | /10 |  |
| 2. Pathology/Catheter reports | /10 |  |

**Equipment Selection**

|  |  |  |
| --- | --- | --- |
| 3. Pump | /10 |  |
| 4. Disposable circuits | /10 |  |
| 5. Ancillary (disposable or hardware) | /10 |  |

**Set Up**

|  |  |  |
| --- | --- | --- |
| 6. Aseptic technique & Speed | /10 |  |
| 7. Prime Component Selection | /10 |  |
| 8. Check List | /10 |  |

**Initiation & Control of Procedure**

|  |  |  |
| --- | --- | --- |
| 9. Awareness of patient parameters | /10 |  |
| 10. Response to changing patient parameters | /10 |  |
| **\*** (a) Myocardial protection | /10 |  |
| **\*** (b) Cerebral perfusion | /10 |  |
| **\*** (c) Haemofiltration/MUF/Dialysis | /10 |  |
| **\*** (d) Deep Hypothermic Circulatory Arrest | /10 |  |
| 11. Response to changing technical parameters | /10 |  |
| 12. Contingency & Emergency Planning | /10 |  |
| 13. Termination of Bypass | /10 |  |
| 14. Record Keeping | /10 |  |
| 15. Safety | /10 |  |

**Post Procedure**

|  |  |  |
| --- | --- | --- |
| 16. Awareness of Patient Parameters | /10 |  |
| 17. Circuit Disassembly & Disposal | /10 |  |
| 18. Equipment Readiness for next procedure | /10 |  |

**Personal**

|  |  |  |
| --- | --- | --- |
| 19. Demonstrates communication skill | /10 |  |
| 20. Demonstrates team skills | /10 |  |
| **Mean Score** |  |  |

**\* if applicable for the procedure**