TRAINEE HANDBOOK 2018

RCPA
The Royal College of Pathologists of Australasia

General Pathology

It is essential to read this Handbook in conjunction with the ***Trainee Handbook – Administrative Requirements*** which is relevant to all trainees. This has information about the College's structure and policies, together with details of requirements for registration, training and examination applications.

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Glossary

Ab	Antibody
ANA	Anti-nuclear antibody
ASM	Australian Society for Microbiology
CbD	Case-based discussion
CPDP	Continuing professional development program
CPR	Cardiopulmonary resuscitation
DOPS	Directly observed practical skill
ELISA	Enzyme-linked immunosorbent assay
EM	Electron microscopy
FISH	Fluorescence in-situ hybridization
FNA	Fine needle aspiration
GC	Gas chromatography
H&E	Haematoxylin and eosin
HPLC	High performance liquid chromatography
ICPMS	Inductively coupled plasma mass spectrometry
IF	Immunofluorescence
IHC	Immunohistochemistry
Mol	Molecular
NATA	National Association of Testing Authorities
OD	Optical density
PAS	Periodic acid Schiff
QA	Quality assurance
QC	Quality control
RCPA	Royal College of Pathologists of Australasia
RCPA QAP	RCPA Quality Assurance Program
WHS	Workplace health and safety

INTRODUCTION

General pathology involves all aspects of pathology. It deals with the diagnosis and management of disease by use of every component of laboratory medicine and every diagnostic technique, including examination of the patient. General pathologists have a very broad understanding of the pathophysiology of disease, the diagnostic value of individual tests and also of the laboratory and its workings.

General pathologists must be familiar with the theoretical basis of investigation and the scientific principles of anatomical, biochemical and physiological processes of the healthy human body and the mechanisms that fail during disease. They must also have knowledge and experience of the limits of investigative processes, pitfalls in measurements and in interpretation of diagnostic techniques. They are often responsible for managing laboratories, ensuring the quality of the results and providing a diagnostic service and advice to clinicians.

They use their expertise in macroscopic pathology, histopathology (surgical pathology), cytopathology, chemical pathology, haematology, microbiology, immunopathology, molecular pathology and autopsy pathology in the diagnosis and management of patients and in offering expert opinion to clinicians as to the choice of biopsy/specimen, taking into account the clinical setting and its limitations in the interpretation of results.

They have expertise in laboratory procedures for accessioning, management, cost-efficiency, safety and processing of specimens, to ensure that accurate and high quality material is available for laboratory testing and the formulation of diagnostic opinions. They advise and work with scientific staff in relation to laboratory procedures.

They guide and teach medical and other trainees in pathology and facilitate clinico-pathological research activities. At the same time, they must be fully aware of the limits of their knowledge and be prepared to consult.

The possible roles and requirements of the general pathologist include:

- as a supervising pathologist in a small area hospital or branch laboratory of a large private practice;
- sharing duties with other general or specialist pathologists in a district hospital or medium sized private practice;
- working in a teaching hospital or large private practice, either as a general pathologist in one or more departments or, with additional training and experience, as a specialist in a single discipline or as head of a department or director of a combined grouping of departments.

PERSONAL CHARACTERISTICS NEEDED

The general pathologist needs the following traits:

- an interest in both technical and scientific laboratory matters;
- interpretive and report-writing skills;
- communication and interpersonal skills;
- the ability to combine test data from all pathology subspecialties to assist in diagnosis and ongoing patient management;
- capacity to work as part of a team of medical, nursing and laboratory personnel.

AIMS OF THE TRAINING PROGRAM

General pathologists must:

- acquire training in all disciplines to adequately function as a consultant in all disciplines;
- appreciate when and how to refer and/or seek other opinions regarding problems in diagnosis;
- deal with enquiries, handle immediate problems in the running of a department and authorise the issuing of results and reports;
- develop an overview of the inter-relationship between the varying pathology disciplines.

Furthermore, the RCPA policy on patient expectations of pathologists specifies that pathologists will:

- Demonstrate and maintain competence
- Be respectful of patients
- Treat specimens respectfully
- Foster constructive collegiality and teamwork within the laboratory
- Be part of the medical team looking after patients
- Provide accurate and timely results
- Be professional in their approach
- Be involved in appropriate accreditation and quality activities
- Provide value for public and private expenditure.

TRAINING REQUIREMENTS

To gain the FRCPA in general pathology requires the equivalent of five years of full-time accredited pathology laboratory training and satisfactory completion of the assessment program detailed in this handbook. A minimum of 8 months must be spent in each of microbiology, haematology and clinical chemistry. Most trainees will spend a year in these disciplines. Relevant immunopathology and genetic pathology are included in these clinical disciplines. A minimum of two years must be spent in anatomical pathology, which includes cytology and forensic pathology. Some trainees may spend three years. It is advisable to take advantage of available opportunities to gain experience in cytology and small biopsy not only during anatomical pathology training but also during the years of training in the clinical disciplines.

There will be no discipline-specific examinations in genetic pathology or immunopathology but knowledge is required and includes an understanding of the more common laboratory tests and clinical problems (see respective handbooks). There should also be an insight into the more specialised investigations, including when, where and how they are initiated. These topics may appear in any of the examinations for microbiology, haematology, clinical chemistry or anatomical pathology but will be appropriate for that discipline.

Workplace-based assessments in genetic pathology and immunopathology to be completed during training are based on those in the handbooks for each of these two disciplines, but modified to be more appropriate for a general pathologist (see **Appendix 7**).

All disciplines will require an adequate supervisor report, success at formal exams and evidence of having satisfactorily completed a portfolio of workplace based assessment activities. Training in smaller laboratories is acceptable with access to suitably experienced pathologists and “linked” establishments with specialised tests. Some training in specialist laboratories is encouraged.

Please refer to the *Trainee Handbook - Administrative Requirements for e*ssential information regarding training limitation, retrospective accreditation of training and temporary suspension of training.

SUPERVISION

All training must be supervised. More than one supervisor can be appointed if trainees divide the year between two or more unrelated laboratories. The College recommends that any one supervisor be responsible for no more than two trainees.

The supervisor will normally be a Fellow of the College; if the trainee spends significant periods working in an area where the supervisor has no personal involvement, the supervisor must certify that suitable supervision is being provided. The supervisor must also ensure that adequate supervision is arranged in their absence.

Supervisors should devise a prospective training program, on initial registration and annually which should be submitted to the RCPA. Supervisors should also ensure that the trainee has sufficient time and opportunities to carry out the required training activities.

Supervisors and others to whom aspects of training have been delegated (for example secondment to another laboratory) are expected to monitor and provide regular feedback on the development of the trainee's competence. A formal meeting with the trainee should occur every three months. Supervisors should meet regularly with the trainee; observe their laboratory performance and interactions with scientists, peers and clinicians; and review result reporting.

The formal duties of supervisors, such as the requirement to report the trainee's progress to the Board of Education and Assessment, are described in the RCPA Induction Manual for Supervisors and the RCPA policy on the Role of the Supervisor. Please refer to these documents for detailed information.

LEARNING OUTCOMES AND TRAINING ACTIVITIES

Trainees should follow the learning outcomes and training activities specified in the current Trainee Handbook for Part I candidates in the discipline for which they are training, ie, anatomical pathology, chemical pathology, haematology or microbiology.

These learning outcomes and training activities relate to four functional roles of pathologists, ie,

- Discipline-specific functions of the pathologist in the laboratory
- Functions of the anatomical pathologist as manager in the laboratory
- Research and scholarship
- Professional qualities

The handbooks for immunopathology, biochemical genetics and medical genomics are also relevant as sources of information about learning outcomes and training activities in the immunological and genetic aspects of work in these four disciplines.

As the extent of knowledge acquired in each discipline will be limited by the time of exposure to it, trainees should concentrate on common clinical questions and interpretations, sample collection, test principles, and laboratory management. A rational and inquiring approach to less common problems is expected but deeply complex issues will be accorded less emphasis.

The handbooks can be downloaded from the Careers and Training section on the RCPA website.

ASSESSMENT

Assessment is by formal examinations, by submission of a portfolio (a record of workplace-based assessment and other achievements during training) and by the periodic and annual supervisor reports. The requirements are summarised below. Please refer to the Appendices for details.

The assessment process is flexible but it is generally recommended that the clinical subjects are completed together, ordinarily before anatomical pathology, although they may be completed afterwards. In some circumstances, trainees who have commenced single discipline training may

apply to the Board of Education and Assessment to convert to general pathology. The assessment will be determined accordingly.

Trainees should refer to the Appendices for the detailed assessment requirements that are relevant to general pathology for each discipline. A summary of these requirements is below.

Formal Examinations

Detailed descriptions of the formal examinations in each discipline are in Appendices 1-4. In summary, they include

- Basic pathological sciences examination: usually taken before or during the first year of training. See **Appendix 5 f**or detailed requirements.
- Individual written examinations in anatomical pathology and in each of the clinical disciplines,ie, chemical pathology, haematology and microbiology. Relevant immunopathology, genetics and molecular pathology are included in each of these assessments. The examination in anatomical pathology is ordinarily taken in the final year of training in anatomical pathology. The written examinations in each of the clinical disciplines are ordinarily taken towards the end of the year of training in the relevant discipline. Trainees who have achieved a borderline result in the written examinations in the clinical disciplines may be offered a supplementary oral examination. See **Appendices 1-4** for detailed requirements.
- An oral examination in anatomical pathology, which is usually taken in the final year of anatomical pathology training, See **Appendix 1** for detailed requirements.
- A slide examination in anatomical pathology (including cytology) taken in the final year of training in anatomical pathology. See **Appendix 1** for detailed requirements.
- A slide examination in haematology, which includes blood and bone marrow smears and trephines. This examination is ordinarily taken towards the end of the period of training in haematology. See **Appendix 3** for detailed requirements.
- A transfusion practical examination in haematology, ordinarily taken in the middle of the year of haematology training See **Appendix 3** for detailed requirements.
- An oral examination in the clinical disciplines, which assesses understanding of test interpretation, management issues, quality systems, and communication skills. This examination is taken after passing written and practical examinations in all the clinical subjects.

Examinations are prepared in accordance with RCPA Guideline 3/2015 Quality Framework for RCPA Examinations – Written, Practical and Oral.

Supervisor Reports

Trainees must submit a supervisor report for each year of training, with additional reports for periods of rotation. The reports should be kept in the portfolio. The guidelines for completing the supervisor report are in **Appendix 6**

The Portfolio and Workplace-based Assessment

The **portfolio** is a physical collection of assessment forms and other documents that provide evidence that trainees have successfully completed a range of activities that form part of their daily work in the laboratory. The portfolio records the trainee's progress in developing technical skills and professional values, attitudes and behaviours that are not readily assessed by formal examinations.

Trainees have the responsibility of initiating the workplace-based assessments and ensuring that they have completed the required number by the required dates. They should identify suitable

opportunities to have their competence assessed, negotiate a suitable time for the assessment with a suitably qualified assessor and provide the appropriate form. Assessments should be able to be done regularly without significant disruption to workplace productivity.

Each discipline of general pathology has specific portfolio requirements which are summarised in **Appendices 2-5.** The portfolio forms are in **Appendices 7-10**.

In addition some portfolio requirements related to professional qualities are not tied to any specific discipline, ie,

- Laboratory Safety eLearning module
- Quality Management eLearning module
- Ethics eLearning module
- Cultural competence eLearning module

These modules can be completed at any time during training. The certificates of completion should be printed and kept in the portfolio. Note that the Ethics module does not have a certificate of completion, Instead, the workbook should be printed and signed off by the supervisor. Evidence of completion of cultural competence training provided by an employer, who is a registered health services provider, is an acceptable alternative to the RCPA cultural competence module certificate.

RESOURCES

Trainees should refer to these sections in the handbooks of the discipline in which they are currently training.

Appendices

Appendix 1

Assessment in the Anatomical Pathology component of General Pathology

Assessment in the anatomical pathology component of general pathology is by

- formal examinations;
- a portfolio of evidence of having participated in a sufficient number and type of activities;
- satisfactory supervisor reports.

Examinations are prepared in accordance with RCPA Guideline 3/2015 Quality Framework for RCPA Examinations – Written, Practical and Oral.

Formal examinations

These include:

- a written examination, duration 3 hours and 15 minutes which is ordinarily taken in the final year of anatomical pathology training. The examination is broad based and may test knowledge across the general field of anatomical pathology, the understanding of disease processes, the ability to recognise and describe gross and microscopic lesions, competence in clinicopathological correlation, and knowledge of laboratory techniques, including workplace health and safety related issues. Relevant immunopathology and genetic pathology may be examined. The focus is on ability to recognise patterns and communicate findings for common, diagnosable conditions and rare conditions with classic appearance. The questions may take any form and may include images.

- a morphology examination, duration 4 hours and 15 minutes, which is ordinarily taken in the final year of anatomical pathology training. This examination consists of histopathology (biopsy, surgical and autopsy pathology) slides and cytology specimens.

- a structured oral examination which is ordinarily taken in the final year of anatomical pathology training.

Supervisor Reports

Trainees must submit a supervisor report for each year of training, including periods of rotation. Please refer to *RCPA Trainee Handbook – Administrative Requirements* for key dates for submitting these reports. It is the trainee's responsibility to ensure that supervisor reports are completed and submitted by the due date. Failure to do so may jeopardise the accreditation of training time or finalisation of examination results. The report form can be downloaded from the RCPA website:

Portfolio for the anatomical pathology component

This appendix **(Appendix 1)** sets out the portfolio requirements for anatomical pathology. The forms that must be used to record the activities are in **Appendix 7**.

Anatomical pathology portfolio activities are carried out in the workplace and provide evidence that the trainee is developing technical skills and professional values, attitudes and behaviours that are not readily assessed by formal examinations.

It is strongly recommended that trainees commence the workplace-based assessment activities that must be recorded in the portfolio at the earliest possible time after commencing training.

Portfolio Section	Mandatory activities	Evidence
1	**Laboratory safety checklist**	To be completed within 3 months of starting training Laboratory Safety eLearning module. See **Professional Qualities** section below.
2	**Supervisor reports** for each year and/or rotation and pre-examination.	Reports and a brief reflection (maximum 1 page) on the supervisor's comments for each report. See **Supervisor Guidelines (Appendix 6)**
3	**Autopsy assessment** One (1) autopsy must be formally assessed by 2 examiners, using the DOPS form for Autopsy Assessment. Before being assessed, trainees must participate in or perform (as appropriate to stage of training) a minimum of 10 adult autopsies. If assessed on a fetal, perinatal or paediatric case, a minimum of 5 of these autopsies. These must be signed off by an appropriate consultant. Trainees should be given the appropriate rotations prior to the written examination	**DOPS form for Autopsy Assessment** A separate assessment form for each consultant and a consensus form are to be completed **Consultant Sign-off Form for Autopsy** This form verifies that the minimum number of autopsies has been completed prior to the autopsy assessment. The form should be sighted by the supervisor before the trainee presents for the formal autopsy assessment.
4	**Cut-up,** observed by a senior member of staff. Minimum 9 specimens of mixed complexity, including levels 4 to 7 (see Appendix 9 AP handbook) Refer to the DOPS Cut-up form for details and the appropriate person to observe and sign off.	**DOPS forms for Cut-up** A minimum of 9 forms. Use a new form for each specimen. Each form to be signed by the person who observes the cut-up. All forms for the year should be sighted and signed off on the annual supervisor report.
5	**Histochemical stains**, observed by a senior member of staff Staining of at least 4 specimens before the written examination. Refer to the DOPS form for Histochemical Stains for details and the appropriate person to observe and sign off.	**DOPS forms for Histochemical Stains** A minimum of 4 forms. Use a new form for each specimen. Each to be signed by the person who observes the procedure. All forms for the year should be sighted and signed off on the annual supervisor report.
6	**Surgical case reports** Macroscopic and microscopic assessment of - 20 cases of complexity < 5 - 20 cases of complexity ≥ 5	**Consultant Sign-off Form for Surgical Cases** or **e-log print-out** Each record should be signed by a consultant to verify the trainee's involvement in and responsibility for the case.
7	**Synoptic reports** 5 cases covering minimum 3 different organ systems	**Synoptic reports** or **e-log print-out** Records to be signed by a consultant to verify the trainee's involvement in and responsibility for the case.
8	**Frozen sections** FS that the trainee has attended, then sectioned appropriately, and diagnosed correctly. If permitted in the training institution, the trainee, under close supervision by the	**Consultant Sign-off Form for Frozen Sections** or **e-log print-out** Each record on this form should be signed by a consultant to verify the trainee's attendance, involvement in and responsibility for the case.

Portfolio Section	Mandatory activities	Evidence
	reporting pathologist, should also convey the report to the surgeon. Minimum 5 per year before the anatomical pathology exam. Recommended minimum of 15 during training	
9	**Cytology** A minimum period equivalent to an 8 week rotation in cytology training. Minimum of 30 gynaecological and 30 non-gynaecological cytology cases. This includes attending a minimum of 8 FNA.	**Consultant Sign-off Form for Cytology** or **e-log print-out** Each record on this form should be signed by a consultant to verify the trainee's involvement in and responsibility for the case and to verify that the trainee has spent a minimum period equivalent to 8 weeks in cytology.
10	**Surgical pathology and ancillary techniques** Trainees should report a minimum of 1500 surgical pathology specimens. Detailed knowledge of ancillary techniques and their application is required. - Immunofluorescence/immuno-histochemical techniques - Electron microscopy - Molecular techniques There is no minimum number of specimens to be reported.	**Log (hard copy) or e-log printout** Cases that the trainee has reported should be recorded in the logbook. Individual cases do NOT need to be signed off by a senior. Cases that the trainee has reviewed but not reported should not be included. The supervisor should sight and sign off the logged cases at the periodic supervisor's meetings and at the end-of-year formal review.
11	**Clinical meetings** It is recommended that trainee is assigned to at least one (1) meeting per week. Ten (10) meetings per year should be signed off to verify the trainee's participation in preparation and attendance.	**Supervisor Sign-off Form for Clinical Meetings** Each meeting included on this form should be signed by the supervisor to verify the trainee's involvement in the meeting Trainees should also keep a list in the portfolio of cases/entities presented at each meeting.
12	**Professional qualities** Safety, Quality Management, Ethics, Cultural Competence	**eLearning modules** certificates or emails verifying completion. Can be completed at any time during General Pathology Training.

The completed hard copy forms and logbook pages or e-log printouts for recording these workplace activities should be filed in the anatomical pathology section of your **portfolio folder** with separate sections, as in the table above.

A soft copy **anatomical pathology portfolio summary** (Excel spreadsheet) should also be compiled so that trainees can keep track of what they have completed. The spreadsheet can be downloaded from the RCPA website. A print-out of this summary spreadsheet must be included as the front page of the portfolio. It is the trainee's responsibility to keep both hard and soft copy records up-to-date.

The portfolio must be made available to the supervisor to check periodically and when preparing the supervisor report. Supervisors are asked to check the portfolio and summary spreadsheet for completeness periodically and should review and sign off completed portfolio forms and logbook on the annual, rotation and pre-exam supervisor report.

A print-out of the summary spreadsheet for the anatomical component of general pathology should be appended to the supervisor report which is sent to the College annually and also prior to the trainee enrolling for the anatomical pathology oral examination. The summary spreadsheet will be reviewed by the Registrar, Board of Education and Assessment and the Chief Examiner. The signatories and trainees may be contacted to confirm evidence of satisfactory completion.

NOTE: The portfolio itself should not be sent to the College unless requested for audit.

Appendix 2

Assessment in the Chemical Pathology component of General Pathology

Assessment in the chemical pathology component of general pathology is by

- formal examinations;
- a portfolio of evidence of having participated in a sufficient number and type of activities;
- satisfactory supervisor reports.

Formal examinations

- a written examination in chemical pathology, which will contain relevant immunopathology, genetics and molecular pathology. Trainees ordinarily sit this examination late in the year of their chemical pathology training.
- a supplementary oral examination may be offered to trainees who have achieved a borderline result in the written examination.
- An oral examination in the clinical disciplines, which assesses understanding of test interpretation, management issues, quality systems, and communication skills. This examination is taken after passing written and practical examinations in all the clinical subjects.

Supervisor Reports

Trainees must submit a supervisor report for each year of training, including periods of rotation. Please refer to *RCPA Trainee Handbook – Administrative Requirements* for key dates for submitting these reports. It is the trainee's responsibility to ensure that supervisor reports are completed and submitted by the due date. Failure to do so may jeopardise the accreditation of training time or finalisation of examination results. The report form can be downloaded from the RCPA website.

Portfolio for the chemical pathology component

This appendix **(Appendix 2)** sets out the portfolio requirements for chemical pathology. The forms that must be used to record the activities are in **Appendix 8**. During the chemical pathology training year trainees should also note the requirements regarding immunopathology and medical genomics in **Appendix 11.**

Chemical pathology portfolio activities are carried out in the workplace and provide evidence that the trainee is developing technical skills and professional values, attitudes and behaviours that are not readily assessed by formal examinations.

It is strongly recommended that trainees commence the workplace-based assessment activities that must be recorded in the portfolio at the earliest possible time after commencing training.

Portfolio Section	**Mandatory activities**	**Evidence**
1	**Laboratory safety** checklist	To be completed within 3 months of starting training Laboratory Safety eLearning module. See **Professional Qualities** section below.
2	**Supervisor reports** for the required duration of training and the pre-exam report.	Reports and a brief reflection (maximum 1 page) on the supervisor's comments (See **Appendix 6**)
3	**DOPS** A total of nine (9) to be completed satisfactorily within the period of chemical pathology training: - 7 investigations DOPS - 1 specimen reception DOPS - 1 instrument maintenance DOPS	**DOPS forms** for • **Investigations** • **Specimen reception** • **Instrument maintenance** Forms to be signed as satisfactory by supervisor or other appropriately qualified person.
4	**CbD** (case based discussion) A total of two (2) – to be completed satisfactorily within the period of chemical pathology training	**CbD forms** All forms to be signed as satisfactory by supervisor or other appropriately qualified person.
5	**Routine automated biochemistry**	**Logbook** Investigations should be recorded in the logbook and verified periodically by the supervisor or delegate. The supervisor should sight and sign off the logged lab work at the periodic supervisor's meetings and at the end-of-year formal review.
6	**Paediatric and metabolic investigations**. A minimum of two (2) to be completed satisfactorily within the period of chemical pathology training.	**Logbook** Investigations should be recorded in the logbook and verified periodically by the supervisor or delegate. The supervisor should sight and sign off the logged lab work at the periodic supervisor's meetings and at the end-of-year formal review.
7	**Clinical consultations** Telephone consultations with clinicians. A minimum of one consultation per week	**Logbook** Consultations that the trainee has conducted should be recorded in the logbook and signed off by the supervisor at the periodic supervisor's meetings.
8	**Clinical or laboratory meetings** Two (2) meetings per week should be signed off to verify the trainee's participation. Trainee must have presented cases at a minimum of three (3) clinical or laboratory meetings per year.	**Supervisor Sign-off Form for Clinical Meetings** Trainees should also keep a list of cases/entities presented at each meeting Each meeting logged on the form should be signed by the supervisor to verify the trainee's involvement in the meeting.
9	**Teaching sessions** Log teaching sessions conducted for students, laboratory colleagues or other audiences.	**Logbook** Teaching sessions that the trainee has conducted should be recorded in the logbook and signed off by the supervisor at the periodic meetings with the supervisor.
10	**Immunopathology and medical genomics** These activities must be completed by the end of the period of clinical training	**Appendix 11.**
11	**Professional qualities** Safety, Quality Management, Ethics, Cultural Competence	**eLearning modules** certificates of completion can be completed at any time during General Pathology Training.

The completed hard copy forms and logbook pages for recording these workplace activities should be filed in the chemical pathology section of your **portfolio folder** with separate sections, as in the table above.

A soft copy **chemical pathology portfolio summary** (Excel spreadsheet) must also be compiled so that trainees can keep track of what they have completed. The spreadsheet can be downloaded from the RCPA website. A print-out of this spreadsheet must be included as the front page of the portfolio. It is the trainee's responsibility to keep both hard and soft copy records up-to-date.

The portfolio must be made available to the supervisor to check periodically and when they are preparing the supervisor report. Supervisors are asked to check the portfolio and summary spreadsheet for completeness periodically and should review and sign off completed portfolio forms and logbook on the annual, rotation and pre-exam supervisor report.

A print-out of the summary spreadsheet for the chemical pathology component of general pathology should be appended to the supervisor report which is sent to the College prior to enrolling for the chemical pathology examination. The summary spreadsheet will be reviewed by the Chief Examiner and the Registrar of the Board of Education and Assessment. The signatories and trainee may be contacted to confirm evidence of satisfactory completion.

NOTE: The portfolio itself should not be sent to the College unless requested for audit.

Appendix 3

Assessment in the Haematology component of General Pathology

Assessment in the haematology component of general pathology is by

- formal examinations;
- a portfolio of evidence of having participated in a sufficient number and type of activities;
- satisfactory supervisor reports.

Formal examinations

- A written examination in haematology, which contains relevant immunopathology, genetics and molecular pathology. Trainees may sit this examination late in the year of their haematology training.
- A slide examination which is ordinarily taken in the year of haematology training. The examination consists of haematology specimens (blood, marrow smears and trephines and on occasion, commonly used special stains). Material examined includes a variety of common benign (including reactive) and malignant haematological disorders, acute leukaemias, lymphoproliferative disorders, myeloproliferative neoplasms, myelodysplasias, plasma cell dyscrasias, haematinic deficiencies, various reactive changes including certain infections (e.g. malaria), quantitative cell changes (including immune and reactive changes), congenital and acquired haemolytic disorders, haemoglobinopathies and thalassaemias, congenital/acquired qualitative cellular changes. Examples of common neonatal/paediatric diagnoses/conditions are also included.

  Candidates are instructed to write a concise, systematic summary of the salient cytological or histopathological abnormalities as would be provided to the requesting clinician and a summary comment including diagnosis/differential diagnosis and, if appropriate, brief reference to any relevant further investigations or actions.

- A transfusion practical examination in haematology, ordinarily taken in the middle of the year of haematology training.
- A supplementary oral examination may be offered to trainees who have achieved a borderline result in the written examination.
- An oral examination in the clinical disciplines, which assesses understanding of test interpretation, management issues, quality systems, and communication skills. This examination is taken after passing written and practical examinations in all the clinical subjects.

Supervisor Reports

Trainees must submit a supervisor report for each year of training, including periods of rotation. Please refer to *RCPA Trainee Handbook – Administrative Requirements* for key dates for submitting these reports. It is the trainee's responsibility to ensure that supervisor reports are completed and submitted by the due date. Failure to do so may jeopardise the accreditation of training time or finalisation of examination results. The report form can be downloaded from the RCPA website.

Portfolio for the haematology component

This appendix **(Appendix 3)** sets out the portfolio requirements for haematology. The forms that must be used to record the activities are in **Appendix 9**. During haematology training year trainees should also note the requirements regarding immunopathology and medical genomics in **Appendix 11.**

Haematology portfolio activities are carried out in the workplace and provide evidence that the trainee is developing technical skills and professional values, attitudes and behaviours that are not readily assessed by formal examinations.

It is strongly recommended that trainees commence the workplace-based assessment activities that must be recorded in the portfolio at the earliest possible time after commencing training.

Portfolio Section	Mandatory activities	Evidence
1	**Laboratory safety checklist**	To be completed within 3 months of starting training Laboratory Safety eLearning module. See **Professional Qualities** section below.
2	**Supervisor reports** for the required duration of training and the pre-exam report.	Reports and a brief reflection (maximum 1 page) on the supervisor's comments. (See **Appendix 6**)
3	**DOPS** A total of two (2), one each for - practical transfusion serology - bone marrow biopsy and report	**DOPS forms** Signed as satisfactory by supervisor or other appropriately qualified person.
4	**Bone marrow biopsies** 25 to be logged in addition to the bone marrow DOPS. The logged biopsies need not be observed by the supervisor.	**Bone marrow biopsy log** Signed by supervisor or other appropriately qualified person.
5	**Blood film examination** Minimum 50 to be logged, including 40 abnormal	**Blood film log** Signed by supervisor or other appropriately qualified person.
6	**Case-based Discussions** Three (3) to be completed satisfactorily during training.	**CbD forms** Signed as satisfactory by supervisor or other appropriately qualified person.
7	**Meetings** At least one meeting per week should be logged and signed off to verify the trainee's participation. Trainee must have presented cases at a minimum of three (3) of these meetings	**Supervisor Sign-off Form for Meetings** Trainees should also keep a list of cases/entities presented at each meeting Each meeting logged on the form should be signed by the supervisor to verify the trainee's involvement in the meeting.
8	**Teaching sessions** Log teaching sessions conducted for students, laboratory colleagues or other audiences.	**Supervisor Sign-off form for Teaching Sessions** Teaching sessions that the trainee has conducted should be recorded in the logbook. The supervisor should sight and sign off the logged teaching sessions at the periodic supervisor's meetings and at the end-of-year formal review.
9	**Immunopathology and medical genomics** These activities must be completed by the end of the period of clinical training	**Appendix 11.**
10	**Professional qualities** Safety, Quality Management, Ethics, Cultural Competence	**eLearning modules** certificates of completion can be completed at any time during General Pathology Training.

The completed hard copy forms and logbook pages for recording these workplace activities should be filed in the haematology section of your **portfolio folder** with separate sections, as in the table above.

A soft copy **haematology portfolio summary** (Excel spreadsheet) should also be compiled so that trainees can keep track of what they have completed. The spreadsheet can be downloaded from the RCPA website. A print-out of this spreadsheet must be included as the front page of the portfolio. It is the trainee's responsibility to keep both hard and soft copy records up-to-date.

The portfolio must be made available to the supervisor to check periodically and when they are preparing the supervisor report. Supervisors are asked to check the portfolio and summary spreadsheet for completeness periodically and should review and sign off completed portfolio forms and logbook on the annual, rotation and pre-exam supervisor report.

A print-out of the summary spreadsheet for the haematology component of general pathology should be appended to the supervisor report which is sent to the College prior to enrolling for the haematology examinations. The summary spreadsheet will be reviewed by the Chief Examiner and the Registrar of the Board of Education and Assessment. The signatories and trainee may be contacted to confirm evidence of satisfactory completion.

NOTE: The portfolio itself should not be sent to the College unless requested for audit.

Appendix 4

Assessment in the Microbiology component of General Pathology

Assessment in the microbiology component of general pathology is by

- formal examinations;
- portfolio of evidence of having participated in a sufficient number and type of activities;
- satisfactory supervisor reports.

Formal examinations

- a written examination in microbiology, which will contain relevant immunopathology, genetics and molecular pathology. Trainees may sit this examination late in the year of their microbiology training.
- A dry practical examination in microbiology.
- a supplementary oral examination may be offered to trainees who have achieved a borderline result in the written examination.
- An oral examination in the clinical disciplines, which assesses understanding of test interpretation, management issues, quality systems, and communication skills. This examination is taken after passing written and practical examinations in all the clinical subjects.

Supervisor Reports

Trainees must submit a supervisor report for each year of training, including periods of rotation. Please refer to *RCPA Trainee Handbook – Administrative Requirements* for key dates for submitting these reports. It is the trainee's responsibility to ensure that supervisor reports are completed and submitted by the due date. Failure to do so may jeopardise the accreditation of training time or finalisation of examination results. The report form can be downloaded from the RCPA website.

Portfolio for the microbiology component

This appendix **(Appendix 4)** sets out the portfolio requirements for microbiology. The forms that must be used to record the activities are in **Appendix 10**. During microbiology training, trainees should also note the requirements regarding immunopathology and medical genomics in **Appendix 11.**

Microbiology portfolio activities are carried out in the workplace and provide evidence that the trainee is developing technical skills and professional values, attitudes and behaviours that are not readily assessed by formal examinations.

It is strongly recommended that trainees commence the workplace-based assessment activities that must be recorded in the portfolio at the earliest possible time after commencing training.

Portfolio Section	Mandatory activities	Evidence
1	**Laboratory safety checklist**	To be completed within 3 months of starting training
2	**Supervisor reports** for each year and/or rotation	Reports and a brief reflection (maximum 1 page) on the supervisor's comments for each report. (See **Appendix 6**)
3	**DOPS** Eight (8) general microbiology benches to be completed before the written examination.	**DOPS form** All forms to be signed by supervisor or other appropriately qualified person
4	**CbD** (case based discussion) From four (4) different sites of infection before sitting the written examination	**CbD form** All forms to be signed by supervisor or other appropriately qualified person.
5	**Incident reports**: Reflections on significant events: 1 per year	**Significant incident report form**
6	**Clinical meetings**: Two (2) meetings per week during microbiology training. Choose from the list on the form. Trainee must have presented cases at a minimum of three (3) clinical or laboratory meetings per year.	**Supervisor Sign-off Form for Clinical Meetings** Trainees should also keep a list of cases/entities presented at each meeting. Each meeting logged on the form should be signed by the supervisor to verify the trainee's involvement in the meeting.
7	**Infection control and public health** At least 2 different activities per year during microbiology training. See Appendix 10.	**Infection control and public health form** Activities that the trainee has conducted should be recorded in the logbook and signed off by the supervisor at the periodic supervisor's meetings.
8	**Antibiotic stewardship** At least 2 different activities during microbiology training. See Appendix 10.	**Antibiotic stewardship form** To be signed off by the supervisor at the periodic supervisor's meetings.
9	**Quality activities** At least 2 different activities during microbiology training. See Appendix 10.	**Quality form** To be signed off by the supervisor at the periodic supervisor's meetings.
10	**Management, Safety, Ethics** At least 1 activity during microbiology training. See Appendix 10.	**Management, Safety, Ethics** To be signed off by the supervisor at the periodic supervisor's meetings.
11	**Teaching sessions** At least 2 activities during microbiology training.	**Teaching sessions form** To be signed off by the supervisor at the periodic supervisor's meetings.
12	**Immunopathology and medical genomics** These activities must be completed by the end of the period of clinical training	**Appendix 11.**
13	**Professional qualities** Safety, Quality Management, Ethics, Cultural Competence	**eLearning modules** certificates of completion can be completed at any time during General Pathology Training.

The completed hard copy forms and logbook pages for recording these workplace activities should be filed in the microbiology section of your **portfolio folder** with separate sections, as in the table above.

A soft copy **microbiology portfolio summary** (Excel spreadsheet) should be compiled so that trainees can keep track of what they have completed. The spreadsheet can be downloaded from the RCPA website. A print-out of this summary spreadsheet must be included as the front page of the portfolio. It is the trainee's responsibility to keep both hard and soft copy records up-to-date.

The portfolio must be made available to the supervisor to check periodically and when they are preparing the supervisor report. Supervisors are asked to check the portfolio and summary spreadsheet for completeness periodically and should review and sign off completed portfolio forms and logbook on the annual, rotation and pre-exam supervisor report.

A print-out of the summary spreadsheet for the microbiology component of general pathology should be appended to the supervisor report which is sent to the College prior to enrolling for the haematology examinations. The summary spreadsheet will be reviewed by the Chief Examiner and the Registrar of the Board of Education and Assessment. The signatories and trainee may be contacted to confirm evidence of satisfactory completion.

NOTE: The portfolio itself should not be sent to the College unless requested for audit.

Appendix 5

Basic Pathological Sciences Examination

All trainees must pass or be exempted from the Basic Pathological Sciences examination. The examination may be taken before commencement of training and is open to registered trainees as well as any medical graduate or medical student.

Although a pass in Basic Pathological Sciences is not a prerequisite for attempting Part I examination, a pass or exemption must be achieved before proceeding to sit the Part II examination.

The purpose of the Basic Pathological Sciences Examination is to assess familiarity with the most important pathological processes and biological principles of disease that form essential knowledge for any medical graduate who considers a career in the pathological disciplines.

The examination has become necessary because pathology may no longer taught as a “core” discipline in some Australasian medical schools, hence an understanding of basic patho-biological processes is no longer guaranteed in many medical graduates. Such knowledge is essential for a successful start and satisfactory progress in the training program.

Examination Format and Content

The examination is a single 2.5 hour paper of 100 one-best-answer multiple choice questions, based on the BPS syllabus on the RCPA website.

The syllabus reflects knowledge that appears in current, authoritative texts as well as newer knowledge that may not yet appear in text books.

The topics cover the basic mechanisms of disease that trainees need to understand so they are equipped to train in their chosen discipline and to understand pathology disciplines other their own chosen field. To cite just a few examples, the microbiology trainee needs to know what a septic infarct looks like; the chemical pathology trainee needs to know about the anatomical pathology changes seen in metabolic syndrome; the anatomical pathology trainee needs to understand why certain antibodies are used in routine diagnosis and the genetic pathology trainee needs to understand how enzyme deficiencies may lead to morphological changes.

The syllabus is primarily based on Chapters 1-10 of the Professional Edition of Robbins and Cotran Pathologic Basis of Disease (9th ed. 2015. Elsevier) by Abul K. Abbas, Vinay Kumar, and Jon C. Aster. References to supplementary materials are also given, which explain details more clearly than the textbook or contain helpful diagrams. As much as possible these references are from Open Access journals, but for copyright reasons the actual articles are not able to be placed on the College website.

Appendix 6

Guidelines for completing the Supervisor Report Form

Please refer to the following documents:

- Information about the role and responsibilities of supervisors and resources to support supervision
- The RCPA policy on the Supervision of Training and Accreditation of Supervisors

The supervisor report forms for general pathology should be completed by the supervisor in the relevant discipline, in consultation with other pathologists and laboratory staff with a significant role in the trainee's training program and with reference to the trainee's portfolio. The portfolio should include all required forms and logbook pages as well as all previous supervisors' reports.

Trainees must make their up-to-date portfolio available to the supervisor for the annual, rotation and pre-examination reviews. For the pre-examination review, a print-out of the portfolio summary spread sheet must also be made available.

Trainees are responsible for the safe keeping of all these records and should not contact the College for the previous year's supervisor report.

Submitting the Supervisor Report

It is the trainee's responsibility to ensure that the form is completed and submitted by the due date. At least one supervisor report is due annually and may be submitted with the annual registration for the subsequent year. For trainees who participate in rotational programs, one report is required to be submitted on completion of each period of rotation at a different institution.

The additional pre-examination supervisor report is due by the date specified in the *RCPA Trainee Handbook – Administrative Requirements* (on the RCPA website).

A print-out of the portfolio summary spreadsheet must be appended to the pre-examination report and submitted to the RCPA prior to the written examination at a time determined by the RCPA. The summary will be reviewed by the Registrar, Board of Education and Assessment and the Chief Examiner. The signatories and trainees may be contacted to confirm evidence of satisfactory completion. The actual portfolio should not be sent unless requested for audit.

Please post the form by the due date to
The Royal College of Pathologists of Australasia
207 Albion Street, Surry Hills NSW 2010 AUSTRALIA

Faxed reports will not be accepted.

Appendix 7

Forms for the portfolio: Anatomical Pathology component

The following pages are forms and logbook pages to be used to record activities for the portfolio for the anatomical pathology component of general pathology training. Please make as many copies as you need and file the completed forms safely in the portfolio folder.

- DOPS form for cut-up
- DOPS form for histochemical stains
- Consultant sign off form for autopsy
- DOPS form for autopsy assessment
- Consultant sign off form for surgical case reports
- Consultant sign off form for frozen sections
- Consultant sign off form for cytology
- Log for surgical cases
- Log for ancillary techniques, including immunofluoresence, immunohistochemistry, electron microscopy and molecular techniques
- Supervisor sign off form for clinical meetings

Anatomical (General) Pathology DOPS Form for cut-up

Directly Observed Practical Skill
This form is to be completed by the observer

How to use this form

Cut-ups are to be observed by an appropriate senior member of staff (see below).
The trainee should cut up at least 20 specimens, including complexity levels 4 to 7, of which 9 should be assessed using this form. (Complexity levels – see AP Appendix 3)

Use a **separate form** for each instance of cut-up.

All completed cut-up forms for the year are to be retained in the portfolio, whether pass or fail, and should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if >Y5 please specify
Observer/Assessor name	**Observer/Assessor position** ☐ Consultant Anatomical Pathologist ☐ Senior registrar ☐ Senior scientist with appropriate cut-up qualifications	

	Number per year required	**Person who should observe cut-up and sign form**
Year 1	4 (1 in first 3 months)	Post-part 1 registrar or more senior
Year 2	2 (6 months apart)	Consultant

Type of cases (tick box)
☐ routine surgical biopsy
☐ case requiring special technique
☐ case involving liaison with other pathology disciplines or clinicians
☐ other (please specify)

Complexity of cases (tick box)
☐ low (2 or 3) ☐ medium (4) ☐ high (5-7)

Please comment on any relevant aspects, especially on aspects for improvement (Please use the reverse if insufficient space)

Final outcome (please circle) As expected for the stage of training Below expected for the stage of training	Date of assessment	Time taken for assessment	Time taken for feedback
Name (print) and signature of assessor		Signature of trainee	
Name of laboratory			

Anatomical (General) Pathology DOPS form for histochemical stains

Directly Observed Practical Skill)
This form is to be completed by the observer

How to use this form

Trainees are to be observed by an appropriate senior member of staff (see below) processing and staining at least 4 specimens before the written examination.

Please select from the list of stains below and use a **separate form** for each specimen.

Completed forms for are to be retained in the portfolio, whether pass or fail, and should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if >Y5 please specify
Observer/Assessor name	**Observer/Assessor position** ☐ consultant anatomical pathologist ☐ senior registrar ☐ senior scientist	
Case number		

Stains (tick box)

- ☐ H&E
- ☐ Masson's trichrome
- ☐ lipid stain
- ☐ PAS
- ☐ PAS + diastase
- ☐ PERLS
- ☐ Reticulin
- ☐ Grocott
- ☐ Wade Fite
- ☐ Gram
- ☐ other (please specify)

Please comment on any relevant aspects, especially on aspects for improvement.

Final outcome (please circle) As expected for the stage of training Below expected for the stage of training	Date of assessment	Time taken for assessment	Time taken for feedback
Name (print) and signature of assessor		Signature of trainee	
Name of laboratory			

Anatomical (General) Pathology
Consultant sign-off form for
Autopsy

How to use this form

This form is to be used to record participation in or performance of the 15 autopsies that are required during training. If the formal DOPS autopsy assessment is on an adult case, a minimum of 10 adult autopsies must have been completed and signed off on this form prior to the assessment. If the DOPS assessment is on a fetal/perinatal/paediatric case, a prior experience minimum of 5 fetal/perinatal/paediatric autopsies is required. The hospital case number or coronial case number should be recorded.

The following guidelines are to be followed for perinatal autopsies:
- Fetus not less than 18 weeks gestation
- Minimally macerated
- Placenta must be included

The College recommends that trainees be given the appropriate rotations prior to the examinations.

By signing this Autopsy Summary Form, the consultant verifies that the trainee has achieved a satisfactory level of performance for their level of experience of
- Autopsy technique and detailed dissection of organs
- Written report (gross, micro, final diagnosis)
- Clinicopathological correlation
- Ability to summarise relevant clinical information and laboratory data
- Verbal presentation of autopsy findings
- Knowledge of special stains
- Completion of report within period specified by Departmental policy

Different consultants may sign this summary form.

At the end of each year, this summary form should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5, please specify

Date	**Lab ref number**	**Brief description of case and level of complexity**	**Name (print) and signature of consultant**

Anatomical (General) Pathology DOPS form for Autopsy Assessment

Directly Observed Practical Skill

This form is to be completed by the observer

How to use this form

Two assessors from the following categories are required to observe the trainee conducting an autopsy:

a) Departmental Autopsy Service supervisor

and one of the following

b) RCPA Fellow (in AP or GP) external to the department – preferred

c) RCPA Fellow (in AP or GP) other than the autopsy supervisor

Please print the three (3) DOPS form for Autopsy Assessment on the following pages. The forms for Assessors 1 and 2 should be completed by each assessor independently. The third copy should record their consensus assessment.

Adult cases: If the formal DOPS autopsy assessment is on an adult case, a minimum of 10 adult autopsies must have been completed and signed off on the Consultant Sign-off Form for Autopsy prior to the assessment.

Fetal/perinatal/paediatric cases: If the DOPS assessment is on a fetal/perinatal/paediatric case, prior sign-off on a minimum of 5 fetal/perinatal/paediatric autopsies is required. The following guidelines are to be followed for perinatal autopsies:

- Fetus not less than 18 weeks gestation
- Minimally macerated
- Placenta must be included in the autopsy assessment

The autopsy report should include:

- Clinical history and investigations, including maternal history in a fetal or perinatal case
- External examination
- Macroscopic dissection
- Microscopy
- Ancillary investigations
- Diagnosis
- Clinico-pathological correlation including a discussion of the diagnosis/cause of death relating to underlying aetiology and recurrence risk

On completion of the assessment, please send the following documents to the College:

- The 3 completed Autopsy Assessment DOPS forms: Assessors 1 and 2 and the consensus form
- The de-identified copy of the autopsy report.

Copies of these finalised documents should to kept in the portfolio**, whether assessed as satisfactory or not.** The documents should be sighted by the supervisor and signed off on the annual supervisor report.

Please send finalised forms to

The Registrar, Board of Education and Assessment
RCPA
207 Albion St
Surry Hills NSW 2010

Anatomical (General) Pathology DOPS form for Autopsy Assessment

Directly Observed Practical Skill

This form is to be completed by **Assessor 1**

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify
Observer/Assessor name	**Observer/Assessor position**	

Autopsy number: **Type of case (please circle)** **Adult** **Paediatric** **Perinatal** **Fetal**

Please comment on whether these aspects of the trainee's performance are AS EXPECTED FOR THE STAGE OF TRAINING	**yes**	**no**	**n/a**
Ability to discuss relevant clinical or other information necessary to approach the autopsy in a meaningful way			
Demonstrated awareness of relevant workplace health and safety considerations relevant to the performance of the autopsy			
External examination and identification of abnormalities			
Macroscopic dissection and identification of abnormalities/antecedent pathology			
Appropriate ancillary investigations			
Specialised dissection of ..... (please state specialised system examined)			
Selection of appropriate tissue blocks from the overall examination			
Selection of appropriate tissue blocks from the area of special dissection			
Microscopic report			
Diagnosis/cause of death identification			
Appropriateness and relevance of clinico-pathological correlation			
Autopsy case report conforms to requirements specified on page previous page			

Please comment on any other relevant aspects, especially on aspects for improvement (Please use the reverse if insufficient space)

If the outcome is **below expected for the stage of training** please state what further assessment the candidate should undertake. (Use the reverse if insufficient space)

Final outcome (please circle) As expected for the stage of training Below expected for the stage of training	**Date of assessment**
Name (print) and signature of assessor 1	Signature of trainee

Laboratory

Anatomical (General) Pathology DOPS form for Autopsy Assessment

Directly Observed Practical Skill

This form is to be completed by **Assessor 2**

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify
Observer/Assessor name	**Observer/Assessor position**	

Autopsy number: **Type of case (please circle)** **Adult** **Paediatric** **Perinatal** **Fetal**

Please comment on whether these aspects of the trainee's performance are AS EXPECTED FOR THE STAGE OF TRAINING	**yes**	**no**	**n/a**
Ability to discuss relevant clinical or other information necessary to approach the autopsy in a meaningful way			
Demonstrated awareness of relevant workplace health and safety considerations relevant to the performance of the autopsy			
External examination and identification of abnormalities			
Macroscopic dissection and identification of abnormalities/antecedent pathology			
Appropriate ancillary investigations			
Specialised dissection of ..... (please state specialised system examined)			
Selection of appropriate tissue blocks from the overall examination			
Selection of appropriate tissue blocks from the area of special dissection			
Microscopic report			
Diagnosis/cause of death identification			
Appropriateness and relevance of clinico-pathological correlation			
Autopsy case report conforms to requirements specified on page 1			

Please comment on any other relevant aspects, especially on aspects for improvement (Please use the reverse if insufficient space)

If the outcome is **below expected for the stage of training** please state what further assessment the candidate should undertake. (Use the reverse if insufficient space)

Final outcome (please circle) As expected for the stage of training Below expected for the stage of training	Date of assessment
Name (print) and signature of assessor 2	**Signature of trainee**

Laboratory

Anatomical (General) Pathology DOPS form for Autopsy Assessment

Directly Observed Practical Skill

Record of the **Consensus decision** of Assessor 1 and Assessor 2

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify
Observer/Assessor name	**Observer/Assessor position**	

Autopsy number: **Type of case (please circle)** **Adult** **Paediatric** **Perinatal** **Fetal**

Please comment on whether these aspects of the trainee's performance are satisfactory for the stage of training (S= satisfactory; NS = not satisfactory; n/a = not applicable)	**S**	**NS**	**n/a**
Ability to discuss relevant clinical or other information necessary to approach the autopsy in a meaningful way			
Demonstrated awareness of relevant workplace health and safety considerations relevant to the performance of the autopsy			
External examination and identification of abnormalities			
Macroscopic dissection and identification of abnormalities/antecedent pathology			
Appropriate ancillary investigations			
Specialised dissection of ..... (please state specialised system examined)			
Selection of appropriate tissue blocks from the overall examination			
Selection of appropriate tissue blocks from the area of special dissection			
Microscopic report			
Diagnosis/cause of death identification			
Appropriateness and relevance of clinico-pathological correlation			
Autopsy case report conforms to requirements specified on page 1			

Please comment on any other relevant aspects, especially on aspects for improvement (Please use the reverse if insufficient space)

If the outcome is NOT SATISFACTORY please state what further assessment the candidate should undertake. (Use the reverse if insufficient space)

Final outcome (please circle) As expected for the stage of training Below expected for the stage of training	Date of assessment
Name (print) and signature of Assessor 1 **Laboratory**	Signature of trainee
Name (print) and signature of Assessor 2 **Laboratory**	

Anatomical (General) Pathology
Consultant sign-off form for
Surgical Case Reports

How to use this form

By signing this Surgical Case Summary Form, the consultant verifies that the trainee has performed the macroscopic and microscopic assessment of the case. **Different consultants** may sign.
During the years of anatomical pathology training, the trainee should use this form to record

- 20 surgical cases of complexity < 5
- 20 surgical cases of complexity = or > 5

(Complexity levels – see Trainee Handbook Appendix 9)

A copy of the de-identified laboratory report for each case should be appended to this Summary Form and should be retained in the portfolio.

At the end of each year, this Summary Form and appended case reports should be sighted by the supervisor and signed off on the annual supervisor report.

Please START A NEW FORM AT THE BEGINNING OF EACH YEAR OF TRANIING

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify

	Date	**Lab ref number**	**Brief description of case & level of complexity**	**Signature of consultant**
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Anatomical (General) Pathology
Consultant sign-off form for
Frozen Sections

How to use this form

This form is to be used to record the performance of

- a minimum of 5 per year frozen sections (pre written exam)
- a recommended minimum of 15 frozen sections during anatomical pathology training

By signing this Frozen Section Summary Form, the consultant verifies that the trainee has achieved a satisfactory level of performance in

- selection of blocks for frozen sections
- ability to make a diagnosis
- ability to cut and stain frozen sections
- ability to communicate with surgeons (If permitted in the training institution the trainee, under close supervision by the reporting pathologist, should also convey the report to the surgeon).

Different consultants may sign the form

A copy of the de-identified laboratory report for each case should be appended to this Summary Form and should be retained in the portfolio.

At the end of each year, this Summary Form and appended case reports should be sighted by the supervisor and signed off on the annual supervisor report.

Please START A NEW FORM AT THE BEGINNING OF EACH YEAR OF TRANIING

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 **if > Y5 please specify**

No	**Date**	**Lab ref number**	**Brief description of case & level of complexity**	**Signature of consultant**
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Anatomical (General) Pathology
Consultant sign-off form for
Cytology

How to use this form

This form is to be used to record that the trainee has participated in

- a minimum of 30 gynaecological cytology cases
- a minimum of 30 non-gynaecological cytology cases
- a minimum of 8 fine needle aspirations (FNA).

By signing this Cytology Summary form, the consultant verifies that the trainee has achieved a satisfactory level of

- Knowledge and use of cytological preparatory techniques and their interpretation (eg. cytospin, filters, cell blocks)
- Knowledge of criteria for satisfactory and unsatisfactory specimens
- Interpretive skills for exfoliative cytology
- Attendance at, preparation and interpretation of FNA cytology
- Knowledge and use of appropriate special stains and special techniques, (eg ,immuno, EM)
- Follow-up and completion of assigned tasks
- Knowledge of clinical-cytopathological correlation, clinical relevance of diagnosis, appropriate follow-up required)

Note: Performance of FNA by the trainee is desirable if permitted by the institution.

Different consultants may sign the form. **A copy of the de-identified laboratory report for each case should be appended to this Summary Form and should be retained in the portfolio.** At the end of each year, this Summary Form and appended case reports should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Yr5 please specify

Training time in cytology
Insert start and finish dates of all periods spent

No	Date	Lab ref number	Brief description of case	Gynae (G) or non-gynae NG)	Signature of consultant
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Anatomical (General) Pathology Surgical Cases Log

How to use this form

During training in the anatomical pathology component of general pathology, trainees should log a minimum of 1500 surgical pathology specimens. Only cases that the trainee has reported should be logged on this form. Cases that the trainee has reviewed (eg QAP) but not reported should **not** be included.

At the end of each year, the log should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Yr2 Yr3 Y4 Y5 if > Y5 please specify

No.	**Date**	**Lab ref number**	**Brief description of specimen**
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Anatomical (General) Pathology Ancillary techniques Log

How to use this form

During the period of training trainees should log the use/application of the following ancillary techniques for cases in which they are involved:

☐ immunofluoresence (IF)

☐ immunohistochemistry (IHC)

☐ electron microscopy (EM)

☐ molecular techniques as applied to anatomical pathology (Mol)

Please indicate the technique used for each specimen using the abbreviations indicated.

Only cases that the trainee has reported should be logged. Cases that the trainee has reviewed (eg QAP) but not reported should **not** be included.

At the end of each year, the log should be sighted by the supervisor and signed off on the annual supervisor report.

Please START A NEW FORM AT THE BEGINNING OF EACH YEAR OF TRANIING

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify

No	**Date**	**Lab ref number**	**Technique IF, IHC, EM, Mol**	**Brief description of specimen**
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Anatomical (General) Pathology
Supervisor sign off form for
Clinical Meetings

How to use this form

This form is to be used to record that the trainee has prepared for and has attended ten (10) clinical meetings per year throughout training.

The supervisor is asked to sign after each meeting to verify off the trainee's participation.

Trainees should retain a list of the cases/entities presented at each meeting in the portfolio.

At the end of each year, this Clinical Meetings Form and appended case lists should be sighted by the supervisor and signed off on the annual supervisor report.

Please START A NEW FORM AT THE BEGINNING OF EACH YEAR OF TRANIING

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify

No	**Meeting date**	**Brief description of meeting**	**Supervisor signature**
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Appendix 8

Forms for the portfolio: Chemical Pathology component

The following pages are forms and logbook pages to be used to record activities for the portfolio for the chemical pathology component of general pathology training. Please make as many copies as you need and file the completed forms safely in the portfolio folder.

- DOPS form for investigations
- DOPS form for specimen reception
- DOPS form for instrument maintenance
- CbD form
- Routine automated biochemistry
- Metabolic and paediatric biochemistry
- Clinical consultations
- Teaching sessions
- Supervisor sign off form for attendance at ward rounds and clinical meetings, and case presentations at these meetings

Chemical (General) Pathology
DOPS (Direct Observation of Practical Skills) Assessment

Instructions for trainees and supervisors

The purpose of the Direct Observation of Practical Skills (DOPS) assessment is to indicate trainees' acquisition of practical laboratory skills; to show that they can work safely in the laboratory; and to provide feedback to trainees about their progress by highlighting strengths and areas for improvement, thereby encouraging their professional development.

Trainees are required to complete nine (9) DOPS forms during training. Each should demonstrate competence using a different type of instrument or technique. Trainees should initiate the DOPS assessment by requesting an appropriate assessor to observe them when they are confident they can complete it satisfactorily.

It is important for the assessor to observe the trainee doing the entire activity. Observations can be made by the supervisor and also by suitably qualified scientific staff. Assessors who are RCPA Fellows can note this as a quality activity in their annual CPDP submission.

The assessor should complete the DOPS form while the trainee is present and spend 5-10 minutes providing immediate feedback.

Grading, standards and outcome of assessment

Each aspect of the trainee's performance should be graded. The "n/a" option should be used if the assessor has not observed that aspect or is otherwise unable to comment.

The trainee's strengths as well as areas for improvement should be discussed with the trainee. Feedback should be given sensitively, in a suitable environment. Areas for development should be identified, agreed and recorded on the DOPS form.

The final outcome should be graded according to whether the standard of performance is as expected for the stage of training. The level of competence should be such that the trainee would be able to perform the task safely without supervision, usually at the level of a competent junior scientist. A trainee whose performance does not meet the standard will be able to repeat the assessment with no penalty.

Record keeping

The DOPS forms must be fully completed, signed and dated by the trainee and the assessor. The forms must be retained by the trainee in his/her portfolio. Only DOPS for which the trainee has met the standard need to be recorded in the portfolio.

Chemical (General) Pathology Investigations DOPS Assessment form

Direct Observation of Practical Skills

Trainee name	Trainee ID (RCPA)	Stage of training Y1 Y2 Y3 Y4 Y5 if >Y5, please specify
Assessor name	**Assessor position** ☐ Pathologist ☐ Scientist ☐ Snr trainee ☐ Other (pls specify)	

Instrument or technique (tick the box that applies). Seven different techniques required during training

- ☐ Multi-test automated analyser
- ☐ Small manual or semi automated analyser (eg blood gases, manual immunoassay, osmometry, breath testing, stone analysis)
- ☐ High performance liquid chromatography
- ☐ Gas chromatography
- ☐ Trace metal techniques (eg atomic absorption or ICPMS)
- ☐ Specialised protein methods - electrophoresis
- ☐ Specialised protein methods - immunochemistry
- ☐ Specialised protein methods – other (please specify.....)
- ☐ Molecular techniques
- ☐ QAP sample – follow through all stages of processing
- ☐ Trial a new test in parallel with automated test (please specify.....)
- ☐ Drugs/toxicology
- ☐ Point of care test (eg, ABG, troponin, etc)
- ☐ Other (please specify.....)

Number of hours spent performing the method prior to DOPS assessment	Has the trainee completed the laboratory's usual training process for this method? ☐ yes ☐ no

Please comment on whether these aspects of the trainee's performance are as expected for the stage of training	Yes	No	n/a
Understands the principles of the method			
Understands and complies with the laboratory documentation, package inserts, manuals, etc			
Completes an assay successfully and produces a valid result that is able to be reported			
Able to explain the QC procedures for this method, including internal and external QA			
Able to discuss anomalies and resolve uncertainties for the method			
Able to explain maintenance and trouble-shooting requirements for the method			

Please comment on other relevant aspects, especially on aspects for improvement (use the reverse side if insufficient room)

Final outcome (circle one) As expected for the stage of training Below expected for the stage of training	Date of DOPS	Time taken for DOPS	Time taken for feedback
Name (print) and signature of assessor		Signature of trainee	
Name of laboratory			

Chemical (General) Pathology DOPS for Specimen Reception Assessment Form

Direct Observation of Practical Skills

Trainee name	**Trainee ID (RCPA)**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if >Y5, please specify
Assessor name	**Assessor position** ☐ Pathologist ☐ Scientist ☐ Snr trainee ☐ Other (pls specify)	
Number of hours spent in specimen reception prior to DOPS assessment	**Has the trainee completed the laboratory's usual training process for this method?** ☐ yes ☐ no	

Please comment on whether these aspects of the trainee's performance are as expected for the stage of training	**Yes**	**No**	**n/a**
Handles samples safely			
Enters data correctly			
Understands the principles for sorting samples and handling urgent requests			
Understands and complies with the laboratory documentation, manuals, etc			
Able to discuss anomalies and resolve problems			

Please comment on other relevant aspects, especially on aspects for improvement (use the reverse side if insufficient room)

Final outcome (circle one) As expected for the stage of training Below expected for the stage of training	**Date of DOPS**	**Time taken for DOPS**	**Time taken for feedback**
Name (print) and signature of assessor	Signature of trainee		
Name of laboratory			

Chemical (General) Pathology DOPS for Instrument Maintenance Assessment Form

Direct Observation of Practical Skills

Trainee name	Trainee ID (RCPA)	Stage of training Y1 Y2 Y3 Y4 Y5 if >Y5, please specify
Assessor name	**Assessor position** ☐Pathologist ☐Scientist ☐Snr trainee ☐Other (pls specify)	

How to use this form

Complete this form when you are involved in maintenance activities for a complex piece of laboratory equipment. Use a new form for each instrument and tick as many boxes in Section B as apply. The minimum requirement is to be involved in the maintenance of one piece of equipment.

Section A: Instrument (tick box that applies)	Section B (tick as many as apply)
☐ Multi-test automated analyser. Specify component……. …… ☐ Small manual or semi automated analyser ☐ HPLC ☐ GC ☐ Electrophoresis equipment ☐ Other (please specify) ……	☐ Flush ☐ Change filter ☐ Change membranes ☐ Change gaskets ☐ Repressurise ☐ Recalibrate ☐ Other (please specify)

Please comment on whether the trainee's involvement and performance are as expected for the stage of training

Please comment on other relevant aspects, especially on aspects for improvement

Final outcome (circle one) As expected for the stage of training Below expected for the stage of training	Date of DOPS	Time taken for DOPS	Time taken for feedback
Name (print) and signature of assessor	Signature of trainee		
Name of laboratory			

Chemical (General) Pathology
CbD (Case-based Discussion) Assessment Form

Instructions for trainees and supervisors

Throughout training, trainees should seek opportunities to present and discuss cases with experienced colleagues and receive feedback. At least two (2) CbD forms should be signed off as satisfactory before the written examination in chemical pathology.

The CbDs should be for routine situations and those with frequently occurring, manageable complications.

CbD assessments indicate the development of the ability to interpret and relate pathological results to clinical findings; to plan appropriate investigations, and make decisions in relation to patient care, including decisions with ethical and legal dimensions. The purpose of the CbD assessment is also to provide feedback to trainees about their progress by highlighting strengths and areas for improvement, thereby encouraging their professional development.

The trainee should initiate each CbD assessment. The trainee should select two (2) recent cases in which s/he has been involved clinically or through laboratory tests. The assessor should select one (1) of these for the trainee to present and discuss. The trainee should select a suitable assessor, who should be an RCPA Fellow but does not need to be the listed supervisor. The assessor could note this as a quality activity in their annual CPDP submission. The trainee should request a mutually convenient time to meet for about 30 minutes. The presentation/discussion should take about 15-20 minutes. A further 5-10 minutes should be allowed for the assessor to give immediate feedback and complete the CbD form. In addition to the formal CbD assessment, supervisors are encouraged to have an informal discussion of the second case prepared by the trainee.

Each CbD case discussion should cover one or more of the different aspects of practice indicated on the CbD form.

Grading, standards and outcome of assessment

Each aspect of the trainee's performance should be graded. The "n/a" option should be used if the assessor has not observed that aspect or is otherwise unable to comment. The assessor should discuss strengths as well as areas for improvement with the trainee. Feedback should be given sensitively, in a suitable environment. Areas for development should be identified, agreed and recorded on the CbD form.

The final outcome should be graded according to whether the standard of performance is as expected for the stage of training. A trainee whose performance does not meet the standard will be able to repeat the assessment with no penalty.

Record keeping

The CbD forms must be fully completed, signed and dated by the trainee and the assessor. The forms must be retained by the trainee in his/her portfolio. Only CbDs for which the trainee has met the standard need to be recorded in the portfolio.

Chemical (General) Pathology Case-based Discussion (CbD) Assessment Form

Trainee name	Trainee ID (RCPA)	Stage of training Y1 Y2 Y3 Y4 Y5 if more than Yr5, please specify

Assessor name and position

Focus of discussion (tick as many as apply)

- ☐ bone - calcium, magnesium;
- ☐ liver, gastroenterology; nutrition
- ☐ water, electrolytes
- ☐ lipids
- ☐ gases, acid/base metabolism
- ☐ diabetes
- ☐ other endocrinology (……)
- ☐ proteins, enzymology
- ☐ trace metals
- ☐ toxicology
- ☐ genetics/molecular pathology
- ☐ paediatric
- ☐ pregnancy
- ☐ other

Complexity of case (tick box) ☐low ☐medium ☐high

Brief description of case presented, discussed and assessed

Why was this case selected for discussion?

Does this case broaden the trainee's experience by being different from previous cases that have been discussed? ☐yes ☐no ☐n/a

Please comment on whether these aspects of the trainee's performance are as expected for the stage of training	Yes	No	n/a
Ability to present case clearly and concisely			
Good understanding of clinical issues relating to the case			
Good understanding of laboratory issues relating to the case			
Depth of understanding and awareness of current literature relevant to this case			
Ability of interpret results in a balanced and rational way			
Ability to provide and clearly communicate well reasoned professional advice			
Ability to clinically correlate the laboratory tests results in the setting of clinical presentation of the patient.			
Ability to suggest further relevant or more useful tests towards the management of the patient in relation to diagnosis and monitoring including prognostication.			
Ability to communicate findings to a non-medical person (e.g. patient, lawyer)			
Understanding of management and financial aspects of the case			
Overall laboratory and clinical judgment			

Please comment on other relevant aspects, especially on aspects for improvement (use the reverse side if insufficient room)

Final outcome (please circle one) As expected for the stage of training Below expected for the stage of training	Date of CbD	Time taken for CbD	Time taken for feedback
Name (print) and signature of assessor		Signature of trainee	
Name of laboratory			

Chemical (General) Pathology Routine Automated Biochemistry Log

How to use this form

From the beginning of training, trainees should log their experience with routine automated biochemistry processors. Only runs that the trainee has been directly involved with should be logged.
Examples of suitable activities include:

- Reading and evaluation of documentation
- Instrument setup and preparation
- Routine analysis of specimens
- Reviewing results and quality control
- Troubleshooting QC problems
- Troubleshooting instrument problems
- Dealing over-range results and dilutions
- Dealing with small volume specimens
- Dealing with haemolysed, lipaemic and icteric specimens
- Dealing with unexpected or critical results
- Other

At the end of each rotation, the log should be sighted and signed off by the assessor (usually a scientist) and also signed off on the annual supervisor report.

The trainee should be assessed as competent in this activity before the Part I exams

Trainee name			**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify
No	**Date**	**Activity**	**Assay**	**Instrument/component**
1				
2				
3				
4				
5				
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7				
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11				
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13				
14				
15				

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Chemical (General) Pathology Paediatric & Metabolic Investigations Log

How to use this form

From the beginning of training, trainees should log experience with paediatric investigations including those for inborn errors of metabolism. The number of runs that the trainee has been directly involved with should be logged or individual specimens in rare cases. A minimum of two (2) must be logged.

Activities that should be logged include doing and observing runs as well as interpretation with calculations and reporting

At the end of each rotation, the log should be sighted and signed off by the assessor (will usually be the scientist on the bench) and also signed off on the annual supervisor report.

Trainee name			**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify
No	**Date**	**No. of runs/cases (please specify)**	**Assay used**	**Instrument used**
1				
2				
3				
4				
5				
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Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Chemical (General) Pathology Clinical Consultations Log

How to use this form

From the beginning of training, trainees should log clinical consultations that involve significant, difficult or unusual cases that are the subject of telephone calls with clinicians or of consultations directly with patients. At the end of each rotation, the log should be sighted and signed off by the supervisor and also signed off on the annual supervisor report.

A minimum of one such consultation per week should be recorded during training.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify

No	**Date**	**Brief summary of issue discussed**
1		
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Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Chemical (General) Pathology
Supervisor sign off form
Ward rounds and Clinical Meetings

How to use this form

This form is to be used to record that the trainee has fulfilled the following requirements:

- attend a minimum of two meetings per week throughout training, eg, grand rounds, ward rounds, endocrinology, etc.
- present cases at a minimum of three (3) clinical or laboratory meetings per year throughout training.

The supervisor is asked to sign after each meeting to verify off the trainee's participation. Trainees should retain a list of the cases/entities presented at each meeting in the portfolio.

At the end of each year, this form and appended case lists should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify

No	**Meeting date**	**Brief description of meeting**	**Did trainee present cases? Y/N**	**Supervisor signature**
1				
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10				
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12				
13				
14				
15				
16				
17				

Trainee name .....Signature.....

Supervisor name (print) .....Signature.....Date.....

Chemical (General) Pathology Teaching sessions Log

How to use this form
From the beginning of training, trainees should log all teaching sessions conducted for students, laboratory colleagues or other audiences.

At the end of each rotation, the log should be sighted and signed off by the supervisor or appropriate senior person and also signed off on the annual supervisor report. Please do not send forms to the RCPA.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify

No	**Date**	**Duration of session**	**Audience**	**Topic presented**
1				
2				
3				
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Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Appendix 9

Forms for the portfolio: Haematology component

The following pages are forms and logbook pages to be used to record activities for the portfolio for the haematology component of general pathology training. Please make as many copies as you need and file the completed forms safely in the portfolio folder.

The forms are

- DOPS form for practical transfusion serology
- DOPS form for bone marrow biopsy and report
- CbD form
- Log of bone marrow biopsies
- Log of attendance and presentation of cases/issues at meetings
- Log of teaching sessions
- Log of blood films

Haematology (General Pathology)
Directly Observed Practical Skills

Instructions for trainees and supervisors

The purpose of the Direct Observation of Practical Skills (DOPS) assessment is show that the trainee is able to work safely in the laboratory; and to provide feedback to the trainee about their progress by highlighting strengths and areas for improvement, thereby encouraging their professional development.

Trainees are required to complete DOPS forms to demonstrate competence in different types of techniques. Trainees should initiate the DOPS assessment by requesting an appropriate assessor to observe them when they are confident they can complete it satisfactorily.

DOPS forms must be completed for:

- Practical transfusion serology
- Bone marrow biopsy

It is important for the assessor to observe the trainee doing the entire activity. Observations can be made by the supervisor and also by other suitably qualified staff. Assessors who are RCPA Fellows can note this as a quality activity in their annual CPDP submission.

The assessor should complete the DOPS form while the trainee is present and spend 5-10 minutes providing immediate feedback.

Grading, standards and outcome of assessment

Each aspect of the trainee's performance should be graded in terms of whether or not it is as expected or below expected for the stage of training. The "n/a" option should be used if the assessor has not observed that aspect or is otherwise unable to comment.

The trainee's strengths as well as areas for improvement should be discussed with the trainee. Feedback should be given sensitively and in a suitable environment. Areas for development should be identified, agreed and recorded on the DOPS form.

The final outcome should only be graded as consistent with the level of training if all aspects have been performed to the standard expected of a trainee at that stage. The level of competence should be such that the trainee would be able to perform the task safely without supervision, usually at the level of a competent junior scientist. A trainee whose performance falls below this level will be able to repeat the assessment without penalty.

Record keeping

The DOPS forms must be fully completed, signed and dated by the trainee and the assessor. The forms must be retained by the trainee in the Portfolio. Only DOPS forms with a satisfactory outcome need to be kept in the portfolio.

Haematology (General Pathology) DOPS form for Practical Transfusion Serology

Directly Observed Practical Skill
This form is to be completed by the observer

How to use this form

The Practical Transfusion Serology DOPS must be observed by a senior laboratory Blood Bank scientist and should take about 2-3 hours. It assesses competence in the performance of standard basic transfusion serology techniques, as well as interpretation and reporting of results, e.g. provision of compatible red cell units and advice in relation to current/future transfusion.

The exercise should be completed in the first few months of the year in which the trainee sits the Part I examinations. It is intended in part to be practice for the 'wet' Transfusion practical examination, which is set in conjunction with the RCPA Transfusion Serology Quality Assurance Program (QAP).

The **completed DOPS Practical Transfusion Serology form** is to be kept in the trainee's portfolio and should be signed by the assessor and signed off in the annual supervisor's report. Please do not send forms to the RCPA.

Trainee name	**Trainee ID (RCPA)**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if >Y5, please specify
Assessor name	**Assessor position**	
Number of hours spent performing the method prior to DOPS assessment	**Has the trainee completed the laboratory's usual training process for this method?** ☐ yes ☐ no	

Please indicate whether these aspects of the trainee's performance are as expected for the stage of training	**Yes**	**No**	**n/a**
Appropriate lab practice, e.g. safety, specimen handling, storage, disposal			
Clerical checks			
Transfusion history where available			
Blood Group/Ab screening			
Additional serological testing e.g. phenotype, elution, extended testing for Ab ID			
Cross match			
Documentation/interpretation of results			
Selection of appropriate blood products			
Advice on current/future transfusion			

Please comment on other relevant aspects, especially on aspects for improvement (use the reverse side if insufficient room)

Final outcome (circle one) As expected for the stage of training Below expected for the stage of training	Date of DOPS	Time taken for DOPS	Time taken for feedback
Name (print) and signature of assessor		Signature of trainee	
Name of laboratory			

Haematology (General Pathology) DOPS for Bone Marrow Biopsy & Report

Directly Observed Practical Skill
This form is to be completed by the observer

How to use this form

Before doing this DOPS, trainees must be considered by their supervisors to be competent to perform all steps of a bone marrow biopsy as indicated below without assistance. The trainee must be observed performing a minimum of one (1) Bone Marrow Biopsy DOPS. Ordinarily this will occur by the end of the first four months of laboratory training. A minimum of 25 must be performed and documented during training.

The **completed DOPS bone marrow biopsy form** is to be kept in the portfolio and should be signed by the assessor and signed off in the annual supervisor's report. Please do not send forms to the RCPA.

Trainee name	**Trainee ID (RCPA)**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if >Y5, please specify
Assessor name	**Assessor position** ☐ Pathologist ☐ Senior clinician ☐ Other (pls specify)	
Number of hours spent performing the method prior to DOPS assessment	**Has the trainee completed the laboratory's usual training process for this method?** ☐ yes ☐ no	

Please indicate whether these aspects of the trainee's performance are as expected or better than expected for the stage of training	**Yes**	**No**	**n/a**
Pre-procedure			
Indications for procedure			
Patient review for risk. Special issues/preparation e.g. on anticoagulants, anti-retrovirals, diabetic, allergies, anaesthetic problems			
Explanation/consent/complications			
Procedure:			
WHS issues, e.g. needlestick, blood splash			
Sterile procedure			
Setup of patient including anatomy/positioning			
Conscious sedation [should know and follow local procedures]			
Local anaesthesia, pharmacology, complications, drug checking			
Resuscitation [should have documented CPR sign off from local institution]			
Obtaining adequate aspirate and trephines samples			
Equipment including BM needle, needles, syringes, slides			
Difficult/special situations e.g. obese pts, hard bone, dry tap, children			
Criteria for taking additional tests e.g. flow/molecular/cytogenetics			
Post procedure:			
Specimen labelling, handling, transport, sign in to laboratory			
Dressings, wound pressure, observations, advice to patient			
Documentation of procedure in medical record			
Identification, management & reporting of immediate and late complications/incidents			

Please comment on other relevant aspects, especially on aspects for improvement (use the reverse side if insufficient room)

Final outcome (circle one) As expected for the stage of training Below expected for the stage of training	Date of DOPS	Time taken for DOPS	Time taken for feedback
Name (print) and signature of assessor		Signature of trainee	
Name of laboratory			

Haematology (General) Pathology Bone marrow and report Log

How to use this form

Candidates must be considered competent to perform and report bone marrow biopsies. Please use this form to record at least 25 during haematology training.
The log should be sighted and signed off by the supervisor periodically and also signed off on the annual supervisor report

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify

No.	**Lab number**	**Date**	**Diagnosis and comments**
1			
2			
3			
4			
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Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Haematology (General) Pathology
Blood film
Log

How to use this form

Candidates must be considered competent by the supervisor and commence film reporting as early as possible in the Haematology period of training.
A minimum of 50 is required with at least 40 abnormal.
The log should be sighted and signed off by the supervisor periodically and also signed off on the annual supervisor report

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify

No.	**Date**	**Lab number**	**Parameters and morphology**	**Comments +/- diagnosis**
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Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Haematology (General Pathology)
CbD (Case-based Discussion) Assessment Form

Throughout training trainees should seek opportunities to present and discuss cases with experienced colleagues and receive feedback. The CbD form should be used to formally record at least three (3) cases of which should be signed off as satisfactory before the examination.

CbD assessments indicate the development of the ability to interpret and relate pathological results to clinical findings; to plan appropriate investigations and make decisions in relation to patient care, including decisions with ethical and legal dimensions. The purpose of the CbD assessment is also to provide feedback to trainees about their progress by highlighting strengths and areas for improvement, thereby encouraging their professional development.

The trainee should initiate each CbD assessment and select a suitable assessor, who should be an RCPA Fellow but does not need to be the listed supervisor. The trainee should select two (2) recent cases in which s/he has been involved through identification of abnormal laboratory tests/new patient cases/clinical liaison requests, etc. The assessor should select one (1) of these for the trainee to present and discuss. The assessor could note this as a quality activity in their annual CPDP submission. The trainee should request a mutually convenient time to meet for about 30 minutes. The presentation/discussion should take about 15-20 minutes. A further 5-10 minutes should be allowed for the assessor to give immediate feedback and complete the CbD form. In addition to the formal CbD assessment, supervisors are encouraged to have an informal discussion of the second case prepared by the trainee.

Each CbD case discussion should cover one or more of the different aspects of practice indicated on the CbD form.

Grading, standards and outcome of assessment

Each aspect of the trainee's performance should be graded in terms of whether or not it is as expected for the stage of training. The "n/a" option should be used if the assessor has not observed that aspect or is otherwise unable to comment. The assessor should discuss strengths as well as areas for improvement with the trainee. Feedback should be given sensitively, in a suitable environment. Areas for development should be identified, agreed and recorded on the CbD form.

The final outcome should only be graded as consistent with the level of training if all aspects have been performed to the standard expected of a trainee at that stage. A trainee whose performance falls below this level will be able to repeat the assessment with no penalty.

Record keeping

The CbD forms must be fully completed, signed and dated by the trainee and the assessor. The forms must be retained by the trainee in the portfolio. Only CbD forms with a satisfactory outcome need to be kept in the portfolio.

Haematology (General Pathology) Case-based Discussion (CbD) Assessment Form

Trainee name	Trainee ID (RCPA)	Stage of training Y1 Y2 Y3 Y4 Y5 if more than Y5, please specify
Assessor name and position		

Focus of discussion (tick as many as apply)

- ☐ Laboratory work-up of a new patient with acute leukaemia/other high grade haematological malignancy
- ☐ Approach to a complex anti-coagulation management, e.g. ant-coagulation in pregnancy, heparin-induced thrombosis/thrombocytopenia syndrome, peri-operative anti-coagulation etc
- ☐ Work-up of a complex transfusion serological problem, e.g. transfusion for patients with multiple allo-antibodies, autoimmune haemolysis, rare blood groups, a clinically significant transfusion reaction, transfusion in pregnancy/the neonate, etc
- ☐ Investigation of a local WHS issue, focussing on documentation, management and corrective action
- ☐ Approach to management of QAP results obtained by the laboratory, with discussion of potential causes, investigation and documentation of unsatisfactory results. Ideally discussed with the relevant supervising scientist.

NOTE: These forms are to be kept in portfolio. Please do not send forms to the RCPA.

Complexity of case (tick box) ☐low ☐medium ☐high

Brief description of case presented, discussed and assessed

Why was this case selected for discussion?

Does this case broaden the trainee's experience by being different from previous cases that have been discussed? ☐yes ☐no ☐n/a

Please indicate whether these aspects of the trainee's performance are as expected or better than expected for the stage of training	**Yes**	**No**	**n/a**
Ability to present case clearly and concisely			
Good understanding of clinical issues relating to the case			
Good understanding of laboratory issues relating to the case			
Depth of understanding and awareness of current literature relevant to this case			
Ability of interpret results in a balanced and rational way			
Ability to provide and clearly communicate well reasoned professional advice			
Ability to clinically correlate the laboratory tests results in the setting of clinical presentation of the patient.			
Ability to suggest further relevant or more useful tests towards the management of the patient in relation to diagnosis and monitoring including prognosis.			
Ability to communicate findings to a non-medical person (e.g. patient, lawyer)			
Understanding of management and financial aspects of the case			
Overall laboratory and clinical judgment			

Please comment on other aspects, esp. aspects for improvement (use reverse if insufficient room)

Final outcome (please circle) As expected for the stage of training Below expected for the stage of training	Date of CbD	Time taken for CbD	Time taken for feedback
Name (print) and signature of assessor		Signature of trainee	
Name of laboratory			

Haematology (General Pathology)
Supervisor sign off form for
Meetings

How to use this form

This form is to be used to record that the trainee has fulfilled the following requirements:

- Throughout training, attend at least 50% of the available meetings in one or more of the following categories
  - multidisciplinary clinical meetings
  - quality/audit meetings
  - transfusion meetings
  - laboratory management meetings as appropriate to training site
- Present cases or issues at a minimum of four (4) meetings per year throughout training.

The supervisor or appropriate senior person is asked to sign after each meeting to verify the trainee's participation. Trainees should retain a list of the cases/entities presented at each meeting in the portfolio. At the end of each year, this form and appended case lists should be sighted by the supervisor and signed off on the annual supervisor report. Please do not send forms to the RCPA.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify

No	**Meeting date**	**Brief description of meeting**	**Did Trainee present case/s or other material?** **Y/N**	**Supervisor signature**
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2				
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15				

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Haematology (General Pathology) Teaching sessions Log

How to use this form
From the beginning of training, trainees should log all teaching sessions conducted for students, laboratory colleagues or other audiences.

At the end of each rotation, the log should be sighted and signed off by the supervisor or appropriate senior person and also signed off on the annual supervisor report. Please do not send forms to the RCPA.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify

No	**Date**	**Duration of session**	**Audience**	**Topic presented**
1				
2				
3				
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Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Appendix 10

Forms for the portfolio: Microbiology component

The following pages are forms and logbook pages to be used to record activities for the portfolio for the microbiology pathology component of general pathology training. Please make as many copies as you need and file the completed forms safely in the portfolio folder.

- DOPS form
- CbD form
- Incident report
- Clinical meetings
- Infection control and public health
- Antibiotic stewardship
- Quality activities
- Management, safety, ethics
- Teaching sessions
- Supervisor sign off form for attendance at ward rounds and clinical meetings, and case presentations at these meetings

Microbiology (General Pathology)

DOPS (Direct Observation of Practical Skills) Assessment

The purpose of the Direct Observation of Practical Skills (DOPS) assessment is to indicate trainees' acquisition of practical laboratory skills; to show that they can work safely in the laboratory; and to provide feedback on progress by highlighting strengths and areas for improvement, thereby encouraging their professional development.

Eight (8) general bench DOPS are required before the written examination.

It is important to observe the trainee doing the activity. Observations can be made by the supervisor and also by suitably qualified scientific staff. Assessors who are RCPA Fellows can note this as a quality activity in their annual CPDP submission.

Trainees should initiate the DOPS assessment by requesting an appropriate assessor to observe them when they are confident they can complete it satisfactorily. The time taken will vary according to the skill. QAP specimens may be used for DOPS.

When observing competence in a multi-part skill, the assessor should tick the bench in Section A of the form and as many of the Section B boxes as have been observed (eg, accession, microscopy/staining, culture, reading, microbial identification, susceptibility testing). Observations might take place intermittently over the course of 2-3 days. Assessors should observe all Section B steps at least once but it is not necessary to observe the same step repeatedly.

Over time the assessments should cover each general and special bench and all the skills of accession, microscopy, staining, culture, reading, microbial identification, susceptibility testing, molecular techniques and antigen testing. If a laboratory is unable to provide all 8 specified general benches, one (1) unspecified bench may be substituted.

The assessor should complete the DOPS form while the trainee is present and spend 5-10 minutes providing immediate feedback.

Grading, standards and outcome of assessment

Each aspect of the trainee's performance should be graded. The "n/a" option should be used if the assessor has not observed that aspect or is otherwise unable to comment.

The trainee's strengths as well as areas for improvement should be discussed with the trainee. Feedback should be given sensitively, in a suitable environment. Areas for development should be identified, agreed and recorded on the DOPS form.

The final outcome should be graded according to whether the standard of performance is as expected for the stage of training. The level of competence should be such that the trainee would be able to perform the task safely without supervision, usually at the level of a competent junior scientist. A trainee whose performance does not meet the standard will be able to repeat the assessment with no penalty.

Record keeping

The DOPS forms must be fully completed, signed and dated by the trainee and the assessor. The forms must be retained by the trainee in his/her portfolio. Only DOPS for which the trainee has met the standard need to be kept in the portfolio.

Microbiology (General Pathology) DOPS Assessment Form

Direct Observation of Practical Skills

Trainee name	**Trainee ID (RCPA)**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if >Y5, please specify
Assessor name	**Assessor position** ☐Pathologist ☐Scientist ☐Snr Trainee ☐Other (pls specify)	

USE ONE FORM PER BENCH.
If using Section A, tick as many from Section B as apply.

Section A: General Benches (tick box that applies)	**Section B (tick as many as apply)**
☐ Specimen reception ☐ Urine bench ☐ Faeces bench ☐ Respiratory: ear, nose, throat bench ☐ Tips & swabs – pus, genital, eye bench ☐ Sterile site – tissue & fluid, including CSF, bone, joint bench ☐ Nosocomial & environmental bench ☐ Blood culture bench ☐ Mycology bench ☐ Other (please specify)	☐ Accession ☐ Microscopy/staining ☐ Culture set up (eg media, atmosphere, etc) ☐ Culture reading ☐ Microbial identification ☐ Susceptibility testing ☐ Other (please specify)

Brief description of procedure to be observed and assessed

Please comment on whether these aspects of the trainee's performance are as expected for the stage of training	**Yes**	**No**	**n/a**
Specimen handling, preparation, laboratory information system requirements			
Select appropriate media/equipment; use according to standard operating procedures			
Interpret and discuss findings, with reference to specimen, test and patient type			
Investigation of possible laboratory error			
Perform and record quality control information relevant to the bench			
Safe handling and observes appropriate workplace health and safety requirements			
Final written report			
Timely, efficient, cooperative performance			

Please comment on other relevant aspects, especially on aspects for improvement

Final outcome (circle one) As expected for the stage of training Below expected for the stage of training	Date of DOPS	Time taken for DOPS	Time taken for feedback
Name (please print) and signature of assessor		Signature of trainee	
Name of laboratory			

Microbiology (General Pathology)
CbD (Case-based Discussion) Assessment Form

Throughout training, trainees should seek opportunities to present and discuss cases with experienced colleagues and receive feedback.

The CbD form should be used to formally record at least four (4) low-to-medium complexity CbD forms and should be signed off as satisfactory before the examination. These should be for routine situations and those with frequently occurring, manageable complications. Additional high complexity cases are also encouraged. These should be for difficult or unusual situations in which the level of complexity may relate to the organism itself, and specialised technical procedures required to identify it; to clinical complexity where there is a wide differential diagnosis and hence a range of investigation needed; or complexity in terms of implications e.g. public health significance.

CbD assessments in microbiology indicate the trainee's ability to interpret and relate pathological results to clinical findings; to plan appropriate investigations, and make decisions in relation to patient care, including decisions with ethical and legal dimensions. The purpose of the CbD assessment is also to provide feedback to trainees about their progress by highlighting strengths and areas for improvement, thereby encouraging their professional development.

The trainee should initiate each CbD assessment. The trainee should select two (2) recent cases of patient infections in which s/he has been involved clinically or through laboratory tests. The assessor should select one (1) of these for the trainee to present and discuss. The assessor, who should be an RCPA Fellow but not necessarily the listed supervisor, can note this as a quality activity in their annual CPDP submission. The trainee should request a mutually convenient time for a 30 minute discussion, which allows 15-20 minutes for the presentation/discussion and 5-10 minutes for the assessor to give immediate feedback and complete the CbD form.

Each CbD topic should be chosen from a **different** site of infection, as listed on the CbD form and can focus on one or more of the following aspects:

- medical record keeping;
- clinical/microbiological assessment;
- clinical management, ie, selection of investigation(s), interpreting and reporting results, advice regarding antimicrobial therapy, prophylaxis or immunisation;
- infection control and health protection/public health;
- quality improvement;
- professionalism, eg ethical/legal aspects, teamwork

Grading, standards and outcome of assessment

Each aspect of the trainee's performance should be graded. The "n/a" option should be used if the assessor has not observed that aspect or is otherwise unable to comment. Feedback should be given sensitively in a suitable environment and should include strengths and areas for development which should be identified agreed and recorded on the CbD form.

The final outcome should be graded according to whether the standard of performance is as expected for the stage of training. A trainee whose performance does not meet the standard will be able to repeat the assessment with no penalty.

Record keeping

The CbD forms must be fully completed, signed and dated by the trainee and the assessor. The forms must be retained by the trainee in his/her Portfolio. Only CbD for which the trainee has met the standard need to be kept in the portfolio.

Microbiology (General Pathology) Case-based Discussion (CbD) Assessment Form

Trainee name	**Trainee ID (RCPA)**	**Stage of training** Year1 Yr2 Yr3 Yr4 Yr5 if more than Yr5, please specify
Assessor name	**Assessor position** ☐ Pathologist ☐ Senior registrar ☐ other(specify)	

Site of Infection (tick box)
- ☐ blood stream
- ☐ cardiovascular
- ☐ respiratory
- ☐ bone/joint
- ☐ wound/soft tissue
- ☐ gastrointestinal
- ☐ central nervous system
- ☐ intra-abdominal
- ☐ urinary tract
- ☐ burns/plastics
- ☐ sexually transmitted infections
- ☐ other (please specify)

Technique
- ☐ microscopy
- ☐ culture
- ☐ serologic diagnosis
- ☐ molecular
- ☐ other (please specify)

Complexity of case (tick box) : ☐ low ☐ medium ☐ high

Brief description of case presented, discussed and assessed

Please comment on whether these aspects of the trainee's performance are as expected for the stage of training	**Yes**	**No**	**n/a**
Initial assessment of clinical, pathological, microbiological aspects of case			
Appropriate initial and follow up investigation/s selected			
Interpretation of findings			
Clinical management advice (eg, regarding therapy, prophylaxis, immunisation)			
Infection control/public health advice			
Overall laboratory and clinical judgment			
Reporting of findings			
Ability to present and discuss case			

Please comment on other relevant aspects, especially on aspects for improvement

Final outcome (please circle) As expected for the stage of training Below expected for the stage of training	Date of CbD	Time taken for CbD	Time taken for feedback
Name (please print) and signature of assessor		Signature of trainee	
Name of laboratory			

Microbiology (General Pathology) Significant incident report form

Trainee name	Trainee ID (RCPA)	Stage of training Year1 Yr2 Yr3 Yr4 Yr5 if more than Yr5, please specify
Nature of incident: what happened and why was it significant?		
What led to the incident?		
Action taken at the time of the incident. Could it have been handled differently?		
Review of similar incidents		
Actions taken (or needed) to prevent future similar incidents		
Reflection by trainee		
Supervisor name (please print) and signature		Date
Name of laboratory		

Microbiology (General Pathology)
Sign off form
Clinical Meetings

How to use this form

This form is to be used to record that the trainee has attended at least **2 different meetings per week** from the following list during the period of microbiology training

- Multi-disciplinary clinical meetings, grand rounds, ward rounds, CPC clinic-pathological correlation meetings, morbidity and mortality meetings, etc. Signature required from supervisor or meeting chair.
- Conferences, courses, seminars, workshops, forums on clinical microbiology. Please attach receipt or other evidence of attendance.
- Journal club, small group learning session in clinical microbiology
- Other – relevant to clinical microbiology (please specify)

Meetings concerned with management, QA, ethics, infection control, etc, are **not** to be recorded on this form.

The list of cases/entities presented at each meeting should be appended and for each activity, trainees must write a one page (maximum) reflection on what they gained from the activity

Trainees must **present cases** at a minimum of three (3) clinical or laboratory meetings during their microbiology training.

At the end of each year, this form, appended reflections and other appended documents should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify

No	**Meeting date**	**Brief description of clinical meeting** (include meeting name, location, where relevant)	**Trainee presented Yes/ No**	**Signature of supervisor or meeting chair**
1				
2				
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12				

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Microbiology (General Pathology)
Sign off form
Infection control, public health

How to use this form

This form is to be used to record that the trainee has performed at least **2 different activities** from the following list during the period of microbiology training:

- Participate in WHS committees, infection control/public health committees. Statement from committee chair regarding trainee's role in the committee.
- Participate in infection control rounds, investigation of outbreaks or case reviews/audits of hospital acquired infection.
- Visit public health laboratory to learn about procedures for outbreak investigation.
- Retrieve statistical information on notifiable diseases and resistant organisms from the lab database, using CLSI or other guidelines, including rationale for selection/reporting.
- Discuss procedures for notification of infectious diseases with supervisor or clinician.
- Other (please specify)

For each activity, trainees must write a one page (maximum) reflection on what they gained from the activity.

At the end of each year, this form, appended reflections and any other appended documentation should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify

No	**Date**	**Brief description of activity** (including committee name, location, where relevant)	**Supervisor signature**
1			
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13			
14			
15			

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Microbiology (General Pathology)
Sign off form
Antibiotic stewardship

How to use this form

This form is to be used to record that the trainee has engaged in at least **2 different activities** from the following list during the period of microbiology training:

- Participate in drug committee meetings. Statement from committee chair regarding trainee's role in the committee.
- Audit antibiotic use in collaboration with a pharmacist.
- Provide clinical advice on appropriate antibiotic use. Keep a diary that records de-identified patient history, advice given and outcomes on up to 10 patients.
- Other (please specify)

For each activity, trainees must write a one page (maximum) reflection on what they gained from the activity.

At the end of each year, this form, appended reflections and any other appended documentation should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify

No	**Date**	**Brief description of activity** (including committee name, location, where relevant)	**Supervisor signature**
1			
2			
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15			

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Microbiology (General Pathology)
Sign off form
Quality activities

How to use this form

This form is to be used to record that the trainee has participated in at least **2 different activities** from the following list during the period of microbiology training:

- Participate in external and internal quality management, processing external QA samples, review of documents/manuals, etc. **Examples of suitable activities are on the following page**.
- Attend NATA training courses or RCPA management course. Attach registration or other evidence of attendance.
- Clinical or case audit, including review of methods. Examples of suitable activities are on the following page.
- Participate in and contribution to meetings concerned with introducing new tests or instruments, altered work flow, etc. Examples of suitable activities are on the following page.
- Complete the Quality Management eLearning Module in RCPA Education Online. Attach the certificate of competence.
- Other (please specify)

For each activity, trainees must write a one page (maximum) reflection on what they gained from the activity.

At the end of each year, this form, appended reflections and any other appended documentation should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify

No	**Date**	**Brief description of activity** (include committee, meeting, location, where relevant)	**Supervisor signature**
1			
2			
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12			

Trainee name .....Signature.....

Supervisor name (print).....Signature.....Date.....

Examples of quality activities

When devising quality activities, trainees should use the following examples as a guide to the type of activity and the amount of effort that is expected.

External and internal quality management

- External quality management: Review a survey report from QAP. Note any errors or discrepancies, and write or present a brief discussion about possible sources of error and possible corrective/preventive actions.

- Internal quality management: Read the ASM document on quality control and carry out one of the test procedures described in it:

Clinical or case audit, including reviews of methods

- Read this document on pre-analytical errors

- Carry out an audit of a selected series of samples in the laboratory, for example document all instances of specimen rejection over a period of time, noting reasons for rejection, appropriateness of actions taken and/or suggestions for preventive strategies.

- Review requests for a particular type of test, eg hepatitis serology, correlating clinical information with test procedures carried out in the laboratory. If any deficiencies noted, what could be done to correct them?

- Carry out an audit relating to post-analytical factors, eg, assess whether there are appropriate mechanisms to ensure that wound culture reports to surgical units are reviewed by a doctor caring for the patient.

- Carry out an audit relating to post-analytical factors, eg, correlate a series of antibiotic sensitivity reports with patient charts to determine whether antibiotic therapy was appropriate or if suitable modifications were made based on the reports.

Introduce new tests/instruments, altered work flows, etc

- Write a brief discussion about how introduction of MALDI-TOF technology will impact on specimen turnaround times and/or the impact on work flow for scientists and/or the impact on how and when pathologists sign out reports.

Microbiology (General Pathology) Sign off form Management, Safety, Ethics

How to use this form

This form is to be used to record that the trainee has performed at least **1 activity** from the following list during the period of microbiology training:

- Attend departmental management committees, budget meetings, other management-related meetings, ethics review committees.
- Undertake significant management roles, eg, chairperson, secretary, treasurer of microbiology-related committees.
- Complete the Ethics eLearning module in RCPA Education Online. Attach the certificate of competence.
- Complete the Laboratory Safety eLearning module in RCPA Education Online. Attach the certificate of competence.
- Other (please specify)

For each activity, trainees must write a one page (maximum) reflection on what they gained from the activity.

At the end of each year, this form, appended reflections and any other appended documentation should be sighted by the supervisor and signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 if > Y5 please specify

	Date	**Brief description of activity (including committee name, location, where relevant)**	**Supervisor signature**
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Trainee name (print) .....Signature.....

Supervisor name (print) .....Signature.....Date.....

Microbiology (General Pathology) Teaching sessions Log

How to use this form

From the beginning of training, trainees should log all teaching sessions conducted for students, laboratory colleagues or other audiences.

A minimum of 2 teaching sessions are required during the period of microbiology training.

The log should be sighted and signed off by the supervisor or appropriate senior person and also signed off on the annual supervisor report. Please do not send forms to the RCPA.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify

	Date	**Duration of session**	**Audience**	**Topic presented**
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Trainee name (print).....Signature.....

Supervisor name (print).....Signature.....Date.....

Appendix 11

Forms for the portfolio: Immunopathology and Medical Genomics and the laboratory safety checklist

The following pages are forms and logbook pages to be used to record activities for the portfolio. Please make as many copies as you need and file the completed forms safely in the portfolio folder.

- DOPS form for immunopathology
- Teaching sessions in immunopathology
- DOPS form for medical genomics
- CbD form for medical genomics
- Laboratory safety checklist

DOPS for Immunopathology and Medical Genomics

To be completed during clinical training

Instructions for Trainees and Supervisors

The purpose of the Direct Observation of Practical Skills (DOPS) assessment is to indicate trainees' acquisition of practical laboratory skills; to show that they can work safely in the laboratory; and to provide feedback to trainees about their progress by highlighting strengths and areas for improvement, thereby encouraging their professional development.

Trainees are required to complete DOPS forms demonstrating competence in a minimum of two (2) different instruments or techniques in immunopathology and in four (4) different techniques in medical genomics during the period of clinical training.

Trainees should initiate the DOPS assessment by requesting an appropriate assessor to observe them when they are confident they can complete it satisfactorily.

It is important for the assessor to observe the trainee doing the entire activity. Observations can be made by the supervisor and also by suitably qualified scientific staff. Assessors who are RCPA Fellows can note this as a quality activity in their annual CPDP submission.

The assessor should complete the DOPS form while the trainee is present and spend 5-10 minutes providing immediate feedback.

Grading, standards and outcome of assessment

Each aspect of the trainee's performance should be graded as consistent (or not) with expectations for the stage of training. The "n/a" option should be used if the assessor has not observed that aspect or is otherwise unable to comment.

The trainee's strengths as well as areas for improvement should be discussed with the trainee. Feedback should be given sensitively, in a suitable environment. Areas for development should be identified, agreed and recorded on the form.

The final outcome should only be graded as consistent with the level of training if all aspects have been performed to the standard expected of a trainee at that stage. The level of competence should be such that the trainee would be able to perform the task safely without supervision, usually at the level of a competent junior scientist. A trainee whose performance falls below this level will be able to repeat the assessment with no penalty.

Record keeping

The DOPS forms must be fully completed, signed and dated by the trainee and the assessor. The forms must be retained by the trainee in the portfolio. Only satisfactory DOPS need to be recorded in the portfolio.

Immunopathology (General Pathology)
DOPS Assessment Form
(Direct Observation of Practical Skills)

Trainee name	Trainee ID (RCPA)	Stage of training Y1 Y2 Y3 Y4 Y5 if >Y5, please specify
Assessor name	**Assessor position** ☐ Pathologist ☐ Scientist ☐ Snr Trainee ☐ Other (pls specify)	

Instrument or technique (tick the box that applies). Two to be completed during training and should be performed on suitable patient samples (and not blood from a trainee).

☐ Stain a peripheral blood sample for flow cytometry with three separate cell surface markers in a single tube using whole blood lysis technique (laboratory staff to run the sample).

☐ Stain an ANA slide manually using a range of positive samples, and report using the fluorescence microscope.

☐ Perform an ELISA manually, construct a standard curve using the OD readings, and generate patient results.

☐ Perform a manual assay based on gel precipitation (eg EPG manually, RID, Ouchterlony double-diffusion etc) and interpret the result.

Number of hours spent performing the method prior to DOPS assessment	**Has the trainee completed the laboratory's usual training process for this method?** ☐ yes ☐ no

Please indicate whether these aspects of the trainee's performance are as expected or better than expected for the stage of training	**Yes**	**No**	**n/a**
Understands the principles of the method			
Understands and complies with the laboratory documentation, package inserts, manuals, etc			
Completes assay successfully and produces a valid result that is able to be reported			
Able to explain the QC procedures for this method, including internal and external QA			
Able to discuss anomalies and resolve uncertainties for the method			
Able to explain maintenance and trouble-shooting requirements for the method			

Please comment on other relevant aspects, especially on aspects for improvement (use the reverse side if insufficient room)

Final outcome (circle one) As expected for the stage of training Below expected for the stage of training	**Date of assessment**	**Time taken for DOPS**	**Time taken for feedback**
Name (print) and signature of assessor		Signature of trainee	
Laboratory			

Immunopathology (General Pathology) Teaching sessions Log

How to use this form
During clinical training, trainees should log attendance at a minimum of 3 teaching sessions.
The log should be sighted and signed off by the supervisor periodically and also signed off on the annual supervisor report.

Trainee name	**Trainee ID**	**Stage of training** Y1 Y2 Y3 Y4 Y5 If > Y5 please specify

	Date	**Audience**	**Topic**
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Trainee name (print).....Signature.....

Supervisor name (print).....Signature.....Date.....

Medical Genomics (General Pathology) DOPS Assessment Form

Direct Observation of Practical Skills

Trainee name	Trainee ID	Stage of training *(circle)* Y1 Y2 Y3 Y4 Y5 if >Y5, please specify:
Assessor name	**Assessor position** ☐ Pathologist ☐ Scientist ☐ Snr trainee ☐ Other (pls specify)	

Instrument or technique (tick the box that applies). A minimum of 4 procedures to be observed or completed, ordinarily by the end of the clinical years of training.

1. ☐ Nucleic acid preparation method(s), quantification/purity/intactness, storage/archiving
2. ☐ DNA labelling for FISH, microarray, other hybridisation based procedures
3. ☐ Microscopy (bright-field and fluorescence)
4. ☐ Banding and karyotype analysis
5. ☐ FISH analysis
6. ☐ PCR-based assays (end point, quantitative and real-time) and analysis
7. ☐ Gel-based hybridisation and analysis
8. ☐ Fragment separation, electrophoresis and analysis

Please comment on whether these aspects of the trainee's performance are as expected for the stage of training	**Yes**	**No**	**n/a**
Understands the principles of the method			
Understands and complies with the laboratory documentation, package inserts, manuals, etc.			
Has completed an assay successfully and produced a valid result that can be reported			
Able to explain the QC procedures for this method, including internal and external QA			
Able to discuss anomalies and resolve uncertainties for the method			
Able to explain maintenance and trouble-shooting requirements for the method			

Please comment on other relevant aspects, especially on aspects for improvement (use the reverse side if insufficient room)

Final outcome (please circle) As expected for the stage of training Below expected for the stage of training	Date of DOPS	Time taken for DOPS	Time taken for feedback
Name (print) and signature of assessor	Signature of trainee		
Name of laboratory			

Medical Genomics (General Pathology) Case-based Discussion (CbD) Assessment

Throughout their clinical training, trainees should seek opportunities to present and discuss cases with experienced colleagues and receive feedback. The CbD form should be used to formally record at least three (3) of these sessions.

Case presentations selected for CbD assessment represent excellent opportunities to prepare for the oral examinations. CbD assessments also provide supervisors and peers with useful insights into a trainee's level of progress in areas such as ability to interpret and relate pathological results to clinical findings; to plan appropriate investigations, and make decisions in relation to patient care, including decisions with ethical and legal dimensions. CbD assessments also create opportunities for supervisors to provide feedback to trainees about their progress. Feedback is important and should highlight both strengths and any areas requiring improvement, thereby further encouraging the trainee's professional development.

Trainees are responsible for initiating the CbD assessments. To prepare, the trainee should select two (2) recent cases in which s/he has been involved clinically or through laboratory tests. The assessor should select one (1) of these for the trainee to present and discuss. The trainee should select a suitable assessor, who should be an RCPA Fellow but does not need to be the listed supervisor. The assessor could note this as a quality activity in their annual CPDP submission. The trainee may present the case within a suitable clinical-laboratory meeting at which the assessor is present, after which the trainee and assessor should meet for individualised discussion. Alternatively, the trainee should request to meet with the assessor at a mutually convenient time for about 30 minutes. The presentation/discussion should take about 15-20 minutes. A further 5-10 minutes should be allowed for the assessor to give immediate feedback and complete the CbD form. In addition to the formal CbD assessment, supervisors are encouraged to have an informal discussion of the second case prepared by the trainee.

Each CbD case discussion should cover one or more of the different aspects of practice indicated on the CbD form.

Grading, standards and outcome of assessment

Each aspect of the trainee's performance should be graded. The "n/a" option should be used if the assessor has not observed that aspect or is otherwise unable to comment. The assessor should discuss strengths as well as areas for improvement with the trainee. Feedback should be given sensitively, in a suitable environment. Areas for development should be identified, agreed and recorded on the CbD form.

The final outcome should be graded according to whether the standard of performance is as expected for the stage of training. A trainee whose performance does not meet the standard will be able to repeat the assessment with no penalty.

Record keeping

The CbD forms must be fully completed, signed and dated by the trainee and the assessor. The forms must be retained by the trainee in his/her portfolio. Only the CbD for which the trainee has met the standard need to be recorded in the portfolio.

Medical Genomics (General Pathology) Case-based Discussion (CbD) Assessment form

The Royal College of Pathologists of Australasia

Trainee name	Trainee ID	Stage of training Y1 Y2 Y3 Y4 Y5 if > Yr5, please specify:
Assessor name	Assessor position ☐ Pathologist ☐ Scientist ☐ Snr trainee ☐ Other (please specify)	

A minimum of three (3) case-based discussions are to be completed, ordinarily by the end of the clinical years of training.

Focus of discussion (tick as many as apply)

- ☐ Diagnostic testing
- ☐ Predictive/presymptomatic testing
- ☐ Genotyping to predict drug responsiveness/ toxicity/ side effects
- ☐ Carrier testing
- ☐ Prenatal testing
- ☐ Population screening, including newborn
- ☐ Cancer testing (diagnostic/prognostic)
- ☐ Therapeutic monitoring
- ☐ Pre-implantation genetic testing
- ☐ Ethical issues
- ☐ Pre-analytical issues
- ☐ Analytical issues
- ☐ Interpretive and other post-analytical issues
- ☐ Urgent testing (prenatal, postnatal, haemato-onc.)
- ☐ other (please specify)

Brief description of case presented, discussed and assessed (use the reverse side if insufficient room)

Please comment on whether these aspects of the trainee's performance are as expected for the stage of training	Yes	No	n/a
Ability to present case clearly and concisely			
Good understanding of clinical issues relating to the case			
Good understanding of laboratory issues relating to the case			
Depth of understanding and awareness of current literature relevant to this case			
Ability to interpret results in a balanced and rational way			
Ability to provide and clearly communicate well reasoned professional advice			
Ability to clinically correlate laboratory test results with patient features.			
Ability to suggest further relevant or more useful tests towards the management of the patient in relation to diagnosis and monitoring including prognostication.			
Ability to communicate findings to a non-medical person (e.g. patient, lawyer)			
Understanding of management and financial aspects of the case			
Overall laboratory and clinical judgment			

Please comment on both strengths and areas requiring improvement:

Final outcome (please circle) As expected for the stage of training Below expected for the stage of training	**Date of CbD**	**Time taken for CbD:**	**Time taken for feedback:**
Name (print) and signature of assessor	Signature of trainee		
Name of laboratory			

General Pathology
Laboratory safety checklist

This form is designed to confirm that trainees have understood and are able to apply laboratory safety instruction provided by the employer as it relates to the RCPA curriculum. It covers the essentials for new trainees and is the basis for subsequent learning that will be assessed and eventually lead to the ability to function in a laboratory management role as a pathologist.

- ☐ I have participated in a laboratory safety induction program or educational session
- ☐ I have reviewed the laboratory safety manual
- ☐ I know where to find the laboratory safety equipment and how to use it
- ☐ I have known immunity to hepatitis B (natural or vaccine)
- ☐ I have been vaccinated and/or screened for other infectious diseases as required by my laboratory
- ☐ I know how and when to wash my hands and carry this out
- ☐ I wear enclosed shoes in the laboratory and tie back long hair if applicable
- ☐ I wear appropriate protective clothing (gown, gloves, goggles, mask as needed) and always remove it before leaving the laboratory
- ☐ I cover any cuts or wounds before working in the laboratory
- ☐ I never eat or put anything in my mouth whilst in the laboratory
- ☐ I know how to handle blood and other body substances and tissues to avoid transmission of infection to myself and others
- ☐ I know how to prevent sharps injury
- ☐ I am aware of electrical, chemical, radiation and biological hazards and how to prevent them
- ☐ I know what to do in an emergency
- ☐ I know the procedure for reporting safety-related incidents
- ☐ I know where to find information about legislative requirements for laboratory safety
- ☐ I know where to find detailed information about laboratory hazards such as dangerous chemicals
- ☐ I always clean up after myself
- ☐ I set up my workspace and ensure correct posture and lifting technique so as to avoid strain and injury

Name (print):

Sign:

Name and signature of witness (supervisor or senior pathologist):

Date:

