

BRONCHOSCOPY EVALUATION FORM

Fellow: _____

Date: _____

Faculty: _____

Fellow Year: 1 2 3

Procedure (check all that apply):

- | | | |
|-------------------------------------------------|----------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Inspection of airways | <input type="checkbox"/> Brush biopsy | <input type="checkbox"/> Intubation over bronchoscope |
| <input type="checkbox"/> Bronchoalveolar lavage | <input type="checkbox"/> Transbronchial biopsy | <input type="checkbox"/> Wang needle biopsy |
| <input type="checkbox"/> Endobronchial biopsy | <input type="checkbox"/> Retrieval of foreign body | <input type="checkbox"/> Other: _____ |

SYSTEMS	N/A	Unsatisfactory	Early Learner	Competent	Proficient	Expert
Holds PARQ, documents informed consent		1	2	3	4	5
Writes appropriate pre- and post-bronchoscopy orders		1	2	3	4	5
Completes narcotic log		1	2	3	4	5
Writes/dictates a complete and accurate procedure note		1	2	3	4	5
PROFESSIONALISM	N/A	Unsatisfactory	Early Learner	Competent	Proficient	Expert
Interaction with assistants		1	2	3	4	5
Interaction with patient and family (bedside manner)		1	2	3	4	5
Accepts feedback, incorporates suggestions		1	2	3	4	5
TECHNICAL SKILLS	N/A	Unsatisfactory	Early Learner	Competent	Proficient	Expert
Knowledge of anesthetics & sedatives (options, dose, etc)		1	2	3	4	5
Appropriate administration of intravenous sedatives		1	2	3	4	5
Appropriate use/application of topical anesthetic		1	2	3	4	5
Manipulation of scope thru upper airway		1	2	3	4	5
Manipulation of bronchoscope thru lower airways		1	2	3	4	5
Demonstrates mastery of normal airway anatomy		1	2	3	4	5
Competency in: BAL		1	2	3	4	5
Endobronchial biopsy		1	2	3	4	5
Brush biopsy		1	2	3	4	5
Transbronchial biopsy		1	2	3	4	5
Wang needle biopsy		1	2	3	4	5
Manages complications of procedure appropriately		1	2	3	4	5
Demonstrates ability to perform all aspects of this procedure independently		no	yes	SEE COMMENT S ON BACK		

- This evaluation was reviewed and discussed with fellow (date) _____
 Fellow _____ Evaluator (initial) _____