Trainee & Program Details

Training Program Basic Training AU (Adult) 2025

Training Program Phase * Foundation

Date of Observation * 04/04/2025

Observation Capture Details

Observation Capture Type * Case diagnosis and management

Summary of Activity *

During my Cardiology rotation, A patient came to the emergency department complaining of chest pain. I conducted a focused history and cardiovascular examination on him where I identified key risk factors and symptoms that indicated acute coronary syndrome. I interpreted the ECG, chest X-ray and blood tests correctly identifying the patient had an acute coronary syndrome. I organised the findings into a structured problem list and developed a differential diagnosis. I formulated an initial action plan and discussed the findings with the patient as well as my supervisor. I then referred the patient to the Cardiology service. The action was conducted in a highpressure emergency setting, requiring timely judgment, effective communication and culturally safe care.

Complexity * 3 - High Primary Learning Goal * Clinical assessment

Learning Goal Components

Select the learning goal components observed during the Observation Capture.

Name	Observed	
obtain histories	Yes	No
examine patients	Yes	No
Integrate information from assessments into comprehensive formulas	Yes	No
develop provisional and differential diagnoses and problem lists	Yes	No
discuss findings with patients, families, or carers	Yes	No
present findings to colleagues, including senior clinicians	Yes	No
perform this activity in multiple settings, including inpatient and ambulatory care settings and in emergency departments.	Yes	No

Trainee Reflection The below section is to be filled in by the **Trainee**

What did you do well?*

I structured my assessment effectively and felt confident explaining my clinical reasoning regarding possible acute coronary syndrome. I was able to gather relevant history, form a focused cardiovascular examination and synthesise my findings into a coherent picture.

What could you improve next time? *

I need to focus on being clearer when explaining the likely diagnoses and proposed next steps with the patient. This includes using language they can understand, organising my explanation logically and checking that the patient feels informed and involved in their care.

Assessor Feedback

The below section is to be filled in by the Assessor

How much supervision did the trainee require during this activity?

3 – I needed to be nearby just in case (indirect supervision)

What did the trainee do well?

Priya took a structured history and performed a thorough cardiovascular examination on a patient presenting with chest pain. She demonstrated strong clinical reasoning in identifying acute coronary syndrome (ACS) as the likely diagnosis. Priya clearly and systematically communicated the patient's history combined with her findings in a professional manner. This observation reflects her growing competence in performing clinical assessments in emergency settings.

What could the trainee improve upon to improve their performance?

Priya is encouraged to improve clarity when explaining differential diagnoses and management plans to patients. To support this, she can:

- Use plain language and avoid medical jargon
- Structure explanations clearly: findings, possible causes, next steps
- Check patient understanding by asking questions and getting them to summarise
- Observe senior clinicians or physicians explaining a diagnoses and management plan.
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Trainee & Program Details

Training Program Basic Training AU (Paediatrics) 2025

Training Program Phase * Consolidation

Date of Observation * 02/03/2025

Observation Capture Details

Observation Capture Type * Interactions with patient, family/whānau

Summary of Activity *

In the general paediatric ward on daily rounds, Jamal explained a new diagnosis of coeliac disease to the parent of a 6-year-old child. He used visual aids, plain language and asked the family to explain their understanding to ensure the parent and patient fully understood the condition, it's implications and the required dietary changes. His communication was clear, compassionate and tailored to the parent's needs, supporting informed decision making and family-centred care.

Complexity * 2 - Medium

Primary Learning Goal * Communication with patients

Learning Goal Components

Select the learning goal components observed during the Observation Capture.

Name	Observed	
communicate with patients and their families or carers from a broad range of socioeconomic and cultural backgrounds	Yes	No
communicate with colleagues and other staff	Yes	No
use of different modalities for communication, such as face-to-face, email, or phone calls	Yes	No
perform this activity in multiple settings, including inpatient and ambulatory care settings and in emergency departments.	Yes	No

Trainee Reflection The below section is to be filled in by the **Trainee**

What did you do well?

I made an effort to keep my explanation clear and avoided medical jargon, which helped the parent feel at ease. I welcomed questions and gave them time and space to express their concerns which seemed to build rapport. I used simple language to explain the diagnosis and management and I felt that the parent was engaged and understood the main points. Overall, I felt confident that I had communicated effectively in the moment.

What could you improve next time?

In future cases similar to this one, I would like to offer written materials to help reinforce the key messages after the conversation. I also think checking in with the family after they've had time to process the information could be helpful, particularly if the diagnosis is new or overwhelming. Following up would give them a chance to ask questions they may not have thought of at the time.

Assessor Feedback

The below section is to be filled in by the Assessor

How much supervision did the trainee require during this activity? *

4 – I needed to be available to contact just in case (supervision at a distance)

What did the trainee do well? *

Jamal used clear, age-appropriate language and created a supportive environment where the parent felt comfortable asking questions. He demonstrated empathy throughout the discussion and actively engaged the parent in the conversation. Checking for understanding from the family is essential in paediatric communication, Jamal demonstrated this technique well. His calm and respectful approach helped foster trust in what could have been an overwhelming situation for the family.

What could the trainee improve upon to improve their performance? *

To build on this strong communication foundation, Jamal could consider providing written information or a printed resource to support retention after the conversation. This is especially helpful for families processing new or complex information. He could also organise to follow up with the family to address any questions that arise later. These steps will further reinforce shared understanding and demonstrate continuity of care.

Trainee & Program Details

Training Program Nephrology (Adult) 2025

Training Program Phase * Specialty foundation

Date of Observation * 21/02/2025

Observation Capture Details

Observation Capture Type * Case diagnosis and management

Summary of Activity *

Lani reviewed and adjusted medications for a patient with stage 4 chronic kidney disease, recognising the impact of reduced kidney function on drug clearance. She safely reduced the enoxaparin dose and modified antihypertensive therapy in response to elevated potassium. Her prescribing reflected a sound understanding of pharmacology, comorbidities and kidney dosing principles. The adjustments were made with careful attention to patient safety and anticipated drug interactions.

Complexity *

3 - High

Primary Learning Goal * Prescribing

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Learning Goal Components

Select the learning goal components observed during the Observation Capture.

Name	Observed	
take and interpret medication histories	Yes	No
select appropriate medicines based on an understanding of pharmacology, taking into consideration patients' age, ideal body weight, kidney function, comorbidities, potential drug interactions, risks, and benefits	Yes	No
prescribe and adjust routine dialysis orders	Yes	No
communicate with patients, families and/or carers about the benefits and risks of proposed therapies	Yes	No
provide instruction on medication administration effects and side effects	Yes	No
monitor medicines for efficacy and safety	Yes	No
review medicines and interactions, and cease where appropriate	Yes	No
collaboration with pharmacists.	Yes	No

Trainee Reflection The below section is to be filled in by the Trainee

What did you do well?

I reviewed the patient's kidney function and made appropriate changes to medication doses, aiming to reduce harm from accumulation or interactions. I considered the risks and benefits of each adjustment and used clinical guidelines to support my decisions. This case strengthened my confidence in prescribing for patients with advanced kidney disease. I felt comfortable taking the lead while also discussing my plan with my team.

What could you improve next time?

I should have clearly documented and communicated a plan to monitor the patient after changing their medications. Specifically, I could have flagged the needs to repeat potassium levels and observe for any symptoms of hypotension. In future cases, I'll ensure follow up steps are included in the prescribing plan and discussed with the care team. This will help prevent complications and demonstrate safe, proactive, prescribing.

Assessor Feedback

The below section is to be filled in by the **Assessor**

How much supervision did the trainee require during this activity? *

3 – I needed to be nearby just in case (indirect supervision)

What did the trainee do well? *

Lani demonstrated strong prescribing judgement by adjusting medications in response to the patient's impaired kidney function and elevated potassium levels. She showed awareness of potential drug interactions and made thoughtful, evidence-based decisions. Her actions reflected a good grasp of kidney dosing principles and the pharmacological implications of chronic kidney disease. These adjustments were appropriate and safely executed without requiring direct supervision.

What could the trainee improve upon to improve their performance? *

To enhance her prescribing practice, Lani should develop a clearer plan for monitoring the patient post-adjustment, particularly in relation to serum potassium levels and blood pressure. Ongoing review is critical in high-risk patients to detect and manage adverse effects early. Collaborating with nursing staff or pharmacists to implement monitoring strategies would improve patient safety and outcomes. Including specific follow-up steps in her prescribing plan would demonstrate readiness for unsupervised prescribing in complex cases.

Trainee & Program Details

Training Program Gastroenterology (Paediatrics) 2025

Training Program Phase * Specialty foundation

Date of Observation * 02/04/2025

Observation Capture Details

Observation Capture Type * Presentations

Summary of Activity *

I presented and interpreted faecal calprotectin and abdominal ultrasound findings for a child with suspected inflammatory bowel disease (IBD) during ward handover. Based on ESPGHAN criteria, it was feasible to consider Coeliac Disease using the non-biopsy pathway. I explained the results and their role in diagnosis, which helped guide next steps and supported shared understanding among the team.

Complexity *

2 - Medium

Primary Learning Goal * Investigations

Learning Goal Components

Select the learning goal components observed during the Observation Capture.

Name	Observed	
select, plan, and use evidence-based clinically appropriate investigations	Yes	No
prioritise patients receiving investigations, if there is a waiting list	Yes	No
evaluate the anticipated value of investigations	Yes	No
work in partnership with patients, their families, or carers to facilitate choices that are right for them	Yes	No
provide aftercare for patients if needed	Yes	No
interpret the results and outcomes of investigations	Yes	No
communicate the outcomes of the investigations to patients.	Yes	No

Trainee Reflection The below section is to be filled in by the Trainee

What did you do well?*

I was able to explain the findings of the faecal calprotectin and ultrasound clearly and highlight how they supported our initial diagnosis of IBD. I then outlined how the serology aligned with the likely diagnosis of Coeliac Disease. I felt confident interpreting the results and contributing to the handover discussion and communicated effectively with the team.

What could you improve next time?*

Next time, I'll focus on linking the investigation findings more clearly to our treatment or follow-up decisions. This includes explaining what the results mean for immediate management, such as the need for dietary intervention. Being more explicit in this way will support team planning and demonstrate stronger clinical judgement.

Assessor Feedback

The below section is to be filled in by the **Assessor**

How much supervision did the trainee require during this activity?

3 – I needed to be nearby just in case (indirect supervision)

What did the trainee do well?

Minh clearly and concisely presented the results of faecal calprotectin and abdominal ultrasound for a child with suspected IBD. He went on to explain how serology supported a likely diagnosis of Coeliac Disease. His clinical reasoning was sound and his communication during handover was clear and collaborative, showing increasing confidence in navigating diagnostic decisions in paediatric gastroenterology.

What could the trainee improve upon to improve their performance?

Minh is encouraged to more clearly link investigation findings with treatment planning. For example, outlining how a raised calprotectin level would influence the next steps. He could also practice formalising a diagnosis by drafting a clinic letter to the GP and family. Including a referral to a Dietician, family screening and support options would promote holistic care.

Trainee & Program Details

Training Program Cardiology (Adult) 2025

Training Program Phase * Specialty consolidation

Date of Observation * 18/05/2025

Observation Capture Details

Observation Capture Type *

Multidisciplinary or team-based collaboration

Summary of Activity *

I led a multidisciplinary team meeting for a patient recovering from a myocardial infarction, coordinating contributions from physiotherapy, nursing and pharmacy to plan for discharge. I facilitated discussion, ensured that team members' expertise was heard, and helped clarify clinical goals and patient needs. The meeting supported a safe and patient-centred discharge process, bringing together multiple perspectives to guide next steps in care.

Complexity *

3 - High

Primary Learning Goal * Team leadership

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Learning Goal Components

Select the learning goal components observed during the Observation Capture.

Name	Observed	
prioritise workload	Yes	No
manage multiple concurrent tasks	Yes	No
articulate individual responsibilities, expertise, and accountability of team members	Yes	No
understand the range of team members' skills, expertise, and roles	Yes	No
acquire and apply leadership techniques in daily practice	Yes	No
collaborate with and motivate team members	Yes	No
encourage and adopt insights from team members	Yes	No
act as a role model	Yes	No

Trainee Reflection

The below section is to be filled in by the **Trainee**

What did you do well?*

I felt confident managing the team meeting and brining together different professional inputs into a cohesive discharge plan. I encourage collaboration and helped the group stay on task while addressing key issues. I was able to listen actively and guide the conversation toward clear, actionable outcomes. The meeting felt productive and well-received by the team.

What could you improve next time? *

I want to improve my ability to close meeting efficiently while still covering the most important points. Next time, I'll aim to summarise key actions more clearly and wrap up the discussion within the allocated time. This will help ensure that team members leave with a shared understanding and that meetings stay on track in busy clinical settings.

Assessor Feedback

The below section is to be filled in by the **Assessor**

How much supervision did the trainee require during this activity?

4 – I needed to be available to contact just in case (supervision at a distance)

What did the trainee do well?

Zahra confidently chaired the multidisciplinary meeting and demonstrated leadership by encouraging input from all team members. She maintained clinical focus, clarified action points and created a respectful, collaborative environment. Her ability to coordinate care and guide the discussion showed maturity in managing a complex discharge scenario. She communicated well with the team and supported shared decision making.

What could the trainee improve upon to improve their performance?

Zahra is encouraged to improve time management during meetings and strengthen her ability to succinctly summarise discussions. More structured wrap-up statements would help reinforce key messages, ensure accountability and improve clarity for all involved. As she leads more team-base discussions, refining these skills will support efficient and effective leadership in high-pressure environments.

Trainee & Program Details

Training Program Geriatric Medicine (Adult) 2025

Training Program Phase * Specialty foundation

Date of Observation * 29/06/2025

Observation Capture Details

Observation Capture Type *

Interactions with patient, family/whānau

Summary of Activity *

Aisha facilitated a family meeting for a Māori patient with advanced dementia and recurrent aspiration pneumonia to discuss goals of care and initiate an end-of-life discussion. She aimed to support the family in understanding the patient's prognosis and to guide shared decision making around future treatment options. The meeting required empathy, professionalism and the ability to manage complex emotions in a sensitive manner. Cultural considerations, including the importance of whanau involvement and communication preferences, added further complexity.

Complexity * 3 - High **Primary Learning Goal *** Complex family meetings

Learning Goal Components

Select the learning goal components observed during the Observation Capture.

Name	Observed	
organise, prepare for, and lead meetings with patients, families, carers and/or the multidisciplinary team	Yes	No
facilitate and guide discussion, encouraging participation from patients, and integrating information from the multidisciplinary team to outline care considerations and identify shared goals	Yes	No
draw attention to identified problem(s) that require a joint decision-making process	Yes	No
use a shared decision-making model	Yes	No
manage conflict as it arises	Yes	No
balance the multidimensional and competing components of family meetings	Yes	No
document, communicate, and implement patients' and/or family or carers' preferences for their care and treatment across all settings, including perioperative care	Yes	No

Trainee Reflection

The below section is to be filled in by the Trainee

What did you do well?

I stayed calm and respectful during a difficult conversation that involved strong emotions. I focused on listening actively and acknowledging the family's concerns. I was mindful of creating a safe space for open discussion and I feel like I acted with compassion and professionalism throughout the meeting.

What could you improve next time?

I think I could have explained more clearly what would happen after the meeting, including the next steps for care. In future discussions during my Palliative Care rotation, I'll aim to provide a more structured summary and reinforce the plan going forward to help reduce uncertainty for families in these situations.

Assessor Feedback

The below section is to be filled in by the **Assessor**

How much supervision did the trainee require during this activity? *

4 - I needed to be available to contact just in case (supervision at a distance)

What did the trainee do well?*

Aisha demonstrated strong ethical and professional behaviour by maintaining professionalism, compassion and respect during a complex care discussion. She acted in the best interests of the patient and family, showing a commitment to sensitive and ethical decision making in end-of-life care. She also displayed cultural safety through her approach, creating a respectful, non-judgemental space for the family to express their concerns and emotions.

What could the trainee improve upon to improve their performance? *

Aisha would benefit from improving in the area of communication - particularly in clearly outlining the medical team's role and the next steps in care following the meeting. Providing a structured summary and confirming shared understanding can help families feel supported and reduce uncertainty. Observing senior physicians during complex discussions or attending a communication or shared goals of care workshop could offer practice strategies to enhance this skill.

Trainee & Program Details

Training Program Paediatric Cardiology (Paediatrics) 2025

Training Program Phase * Specialty foundation

Date of Observation * 11/07/2025

Observation Capture Details

Observation Capture Type * Teaching or supervision

Summary of Activity *

I supervised a junior trainee performing a cardiovascular examination on a child with suspected myocarditis. I gave real-time feedback on examination technique, helped them interpret clinical findings and reinforced key learning points by linking the case to relevant clinical concepts. My focus was on guiding the trainee through practical skills while supporting their understanding in a safe, educational environment.

Complexity *

2 - Medium

Primary Learning Goal * Supervision and teaching

Learning Goal Components

Select the learning goal components observed during the Observation Capture.

Name	Observed	
provide work-based teaching in a variety of settings	Yes	No
teach professional skills	Yes	No
create a safe and supportive learning environment	Yes	No
plan, deliver, and provide work-based assessments	Yes	No
encourage learners to be self-directed and identify learning experiences	Yes	No
collaborate with and motivate team members	Yes	No
supervise learners, such as trainees and medical students, in day-to-day work, and provide feedback	Yes	No
support learners to prepare for assessments	Yes	No

Trainee Reflection The below section is to be filled in by the Trainee

What did you do well?*

I stayed calmed throughout the supervision and gave clear, structured explanations to support the junior trainee's learning. I helped them link their physical findings to the clinical diagnosis, which seemed to build their confidence. I felt I created a safe space for learning where they could ask questions and reflect without pressure.

What could you improve next time? *

I want to improve the way I explore what the trainee already understands before jumping in with answers. Next time, I'll ask more open-ended questions to encourage reasoning and help them think critically about the case. This will support their development as an independent learner and make the teaching interaction more meaningful.

Assessor Feedback

The below section is to be filled in by the **Assessor**

How much supervision did the trainee require during this activity?

3 – I needed to be nearby just in case (indirect supervision)

What did the trainee do well?

Hanae provided clear, structured guidance on cardiovascular examination technique and created a supportive learning environment. She delivered feedback in real time and reinforced the junior trainee's learning by connecting clinical findings to underlying pathophysiology. Her calm demeanour and clinical knowledge helped build the learner's confidence. This reflects strong capability in bedside teaching and role modelling professional behaviour

What could the trainee improve upon to improve their performance?

To further develop, Hanae could more actively encourage learner reflection and ask open-ended questions to explore the junior trainees clinical reasoning. This would promote deeper learning and support the trainee's development as a self-directed learner. Building this approach into routine supervision will enhance her ability to assess understanding and tailor teaching to individual needs.

Trainee & Program Details

Training Program Rehabilitation Medicine (Adult) 2025

Training Program Phase * Specialty consolidation

Date of Observation * 08/08/2025

Observation Capture Details

Observation Capture Type * Quality and safety management or review

Summary of Activity *

I identified variability in how spasticity assessments were documented for stroke patients and proposed introducing a standardised template as part of a unit-wide quality improvement initiative. I presented the idea to the team, explained it's relevance to patient care and safety and aimed to improve consistency and clarity in clinical documentation across the service.

Complexity *

2 - Medium

Primary Learning Goal * Quality improvement

Learning Goal Components

Select the learning goal components observed during the Observation Capture.

Name	Observed	
identify, mitigate, and report actual and potential (near miss) errors	Yes	No
conduct system improvement activities	Yes	No
adhere to best practice guidelines	Yes	No
audit clinical guidelines and outcomes	Yes	No
contribute to the development of policies and protocols designed to protect patients and enhance health care	Yes	No
monitor one's own practice and develop individual improvement plans	Yes	No

Trainee Reflection The below section is to be filled in by the Trainee

What did you do well?*

I noticed a gap in how we document spasticity assessments and proposed a practical solution that could improve consistency and patient care. I felt confident raising this with the team and explaining why a standardised template would help us align with best practice. It was rewarding to contribute something that could make a meaningful difference to our workflow.

What could you improve next time? *

I'd like to focus more on how we can evaluate the impact of the change. Next time, I'll think through what success would look like and how we can measure whether the intervention actually leads to better documentation and outcomes. Having an evaluation plan will help close the loop on quality improvement.

Assessor Feedback

The below section is to be filled in by the **Assessor**

How much supervision did the trainee require during this activity?

4 – I needed to be available to contact just in case (supervision at a distance)

What did the trainee do well?

Sofia clearly identified a quality issue that proposed a relevant, practical solution aimed at improving documentation consistency. She communicated her proposal confidently to the team and demonstrated insight into system-level improvement opportunities. This reflects strong engagement with quality and safety processes and a collaborative approach to improving care standards.

What could the trainee improve upon to improve their performance?

To strengthen her contribution further, Sofia should define how the success of the quality improvement initiative will be measured and develop an evaluation plan. Clarifying process and outcomes measures would allow the team to assess the tool's effectiveness over time. Building these elements into future initiatives will enhance her capability in quality improvement methodology.