

Colposcopy Checklist

(Medical Knowledge Competency)

Patient MR# _____ Date: _____

Resident: _____ Attending: _____

Colposcopy Attending:

Please complete this checklist for each colposcopy patient that is seen by the resident.

The resident performed the following:

- | | YES | NO |
|---|--------------------------|--------------------------|
| 1. Reviewed patient chart(s) before seeing patient | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Explained procedure to patient | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Obtained consent | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Examined vulva | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Applied acetic acid | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Examined cervix with all three magnifications | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Articulated findings to include: | | |
| adequacy of exam | <input type="checkbox"/> | <input type="checkbox"/> |
| accurate morphological description of cervix | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Committed to colposcopic diagnosis | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Articulated some scoring system | | |
| (e.g. Reid's) to justify colposcopic diagnosis | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Explained findings to patient | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Performed ECC (if indicated) | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Performed ectocervical biopsy (if indicated) | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Applied Monsel's solution to bleeding areas | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Provided verbal follow-up instructions to patient | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Provided written follow-up instructions to patient | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Performed adequate documentation of exam | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Articulated tentative treatment plan | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Reviewed histology results with attending when they | | |
| returned from lab | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Ensured appropriate patient follow-up | <input type="checkbox"/> | <input type="checkbox"/> |

Attending Signature