



# **MAHATMA GANDHI INSTITUTE OF MEDICAL SCIENCES, SEVAGRAM**

## **OBJECTIVE METHODS OF ASSESSMENT**

The Institute follows the competency table recommended by the National Medical Commission where competencies and learning objectives are matched against the teaching-learning methods and assessment methods. The University has also recommended introduction of OSCE and OSPE in the formative and summative assessment.

In view of this, the Medical Education Unit trains faculty in designing and conduct of objective structured clinical examination (OSCE) and objective structured practical examination (OSPE). Faculty are trained in designing and validation of checklists.

Besides these several faculty have undertaken educational projects and introduced Workplace based assessment methods like mini-clinical evaluation exercise (mini-CEX) and DOPS in their department.

Faculty have been trained in construction of higher order multiple choice questions.

## TRAINING SESSIONS ON OSCE and OSPE by MEU













# OSCE Station

## Skin Suturing

### Checklist for Station

1. Suturing Board
2. Needle Holder
3. Toothed Forcep
4. Sponge holder
5. Gloves
6. Scissor
7. Suture Material – silk 2'0 or vicryl 2'0
8. Bactorub / betadine
9. Inj Xylocaine 2%
10. Syringe 5 ml & 2 ml
11. Dressing tray- with Gauze pieces, cotton, adhesive tape
12. Saline
13. Instruction Sheet for Candidate
14. Observers Sheet
15. Table /Chair



## **Instruction Sheet For Candidate**

Time : 10 Minutes

### **TASK**

A 30 yr old male patient presents in Casualty with a lacerated wound of 4 cm size.

You are required to suture the wound and dress it.

Prepare and perform the task

**Observers Sheet**  
**OSCE Station SUTURING**

Station No      Name of Candidate      Roll No      Date

SN	Skills	Marks
1	Introduces Self & obtains Consent	1
2	Selects Proper Instruments & Suture	1
3	Washes hand and wears Gloves	1
4	Cleans the wound with betadine and Bactorub	1
5	Injects Local anaesthesia For testing Sensitivity	0.5
6	Gives local Anaesthesia to edges of wound	0.5
7	Sutures the wound Properly	2
8	Cleans the wound with Saline after suturing (no mark if cleaned with Bactorub or Betadine	1
9	Dresses Properly	1
10	Gives Post op Instructions	1
Total Marks		10

Name of Observer

Signature









Counselling the relatives of a child admitted in PICU with acute encephalitis syndrome and taking consent for mechanical ventilation.

**Checklist for station-**

1. Instruction sheet for a candidate
2. Observer sheet
3. Subject as a relative
4. Assessor /examiner
5. Table, chairs
6. Informed consent form
7. Paper, pen

## **Instruction sheet for the candidate**

**NAME-**

**Roll No-**

### **Task**

Amar, 3 years old child is admitted in PICU since one day with acute encephalitis syndrome. He is showing signs of clinical deterioration and is in need of mechanical ventilation.

**Question-**

How will you counsel the parents of Amar and proceed to take the consent for mechanical ventilation?



# OBSERVER'S SHEET

Name of the candidate

Roll No-

Date-

## Checklist for counseling and taking consent

Points to be observed	Marks allotted	Marks obtained
<ol style="list-style-type: none"><li>1. Preparation-consent form, pen, paper</li><li>2. Greets the parents and call patient by his name</li><li>3. Self -introduction</li><li>4. Assure the comfort of the relatives</li></ol>	2	
Verbal communication <ol style="list-style-type: none"><li>1.tone-reassuring</li><li>2.simple local language without too many medical words</li><li>3.simple way to explain –content</li><li>4.encourage them to speak to ask their questions</li></ol>	2	
Non -verbal communication <ol style="list-style-type: none"><li>1.eye contact</li><li>2.avoids distractors-phone call, other communication</li><li>3.shows concern, empathy</li><li>4.body language</li></ol>	2	
Counselling process for prognosis <ol style="list-style-type: none"><li>1.appropriate counselling</li><li>2.clarify their questions</li></ol>	2	
Counselling process for consent for mechanical ventilation <ol style="list-style-type: none"><li>1.Need explanation</li><li>2.pros and cons clarification</li><li>3.clear their concerns</li><li>4.help them to take the decision</li></ol>	2	
Documentation <ol style="list-style-type: none"><li>1.informed consent form explained and shown</li><li>2.taken their signature</li><li>3. concluding remarks.</li></ol>	2	

# OSCE Station

## Skin Suturing

### Checklist for Station

1. Suturing Board
2. Needle Holder
3. Toothed Forcep
4. Sponge holder
5. Gloves
6. Scissor
7. Suture Material – silk 2'0 or vicryl 2'0
8. Bactorub / betadine
9. Inj Xylocaine 2%
10. Syringe 5 ml & 2 ml
11. Dressing tray- with Gauze pieces, cotton, adhesive tape
12. Saline
13. Instruction Sheet for Candidate
14. Observers Sheet
15. Table /Chair

## **Instruction Sheet For Candidate**

Time : 10 Minutes

### **TASK**

A 30 yr old male patient presents in Casualty with a lacerated wound of 4 cm size.

You are required to suture the wound and dress it.

Prepare and perform the task

**Observers Sheet**  
**OSCE Station SUTURING**

Station No      Name of Candidate      Roll No      Date

<b>SN</b>	<b>Skills</b>	<b>Marks</b>
1	Introduces Self & obtains Consent	1
2	Selects Proper Instruments & Suture	1
3	Washes hand and wears Gloves	1
4	Cleans the wound with betadine and Bactorub	1
5	Injects Local anaesthesia For testing Sensitivity	0.5
6	Gives local Anaesthesia to edges of wound	0.5
7	Sutures the wound Properly	2
8	Cleans the wound with Saline after suturing (no mark if cleaned with Bactorub or Betadine	1
9	Dresses Properly	1
10	Gives Post op Instructions	1
<b>Total Marks</b>		<b>10</b>

Name of Observer

Signature