



## Direct observation of procedural skills (DOPS 3) Male Urinary Catheter Insertion

### Learner details (tick one)

- ☐ Intern  
☐ Other (please state) \_\_\_\_\_

Learner Name

Employee Number

Clinical Unit / Ward

### Assessor details (tick one)

- ☐ Medical Officer  
☐ Radiographer  
☐ Registered Nurse / Midwife  
☐ Other (please state) \_\_\_\_\_

Assessor Name

Employee Number

Clinical Unit / Ward

### Features of a satisfactory skill demonstration (all boxes must be ticked)

#### Learner to complete

- ☐ I have reviewed the MH procedure 'Urethral catheter Male (adult)'

Not sure about this procedural skill? If you would like more information please return to the Intern Assessment page for links to additional resources. (<http://monashdoctors.org/intern-assessment/>)

#### Pre procedure (assessor to complete)

- ☐ Displays an understanding of relevant procedural indications, contraindications, anatomy and technique  
☐ Informed verbal consent has been obtained from patient after explanation of indication, benefits and risks  
☐ Correct selection of appropriate catheter for purpose, additional equipment and preparation of workspace

#### Asepsis and sterile field management (assessor to complete)

- ☐ Patient preparation and insertion site prepared in line with Monash Health policy  
☐ Hand hygiene performed and aseptic technique maintained throughout care episode. Any breaches are recognised by the trainee and rectified.

#### Skill demonstration and execution (assessor to complete)

- ☐ Execution of skill is compliant with Monash Health policies and procedures (including Urethral catheter male (adult)) and includes optimising patient comfort and privacy, and completion of required documentation. Direct supervision is no longer required.

#### Trainee overall performance (assessor to complete)

Satisfactory:

☐


Submit form to Monash Doctors Education Unit via the website <http://monashdoctors.org/intern-assessment/>

Not yet satisfactory (NYS):

☐


Direct trainee to further learning resources by emailing the Medical Education Officer [mededucation@monashhealth.org](mailto:mededucation@monashhealth.org)

**Authorisation: \*\*Mandatory fields please complete and ensure the form is signed**

<b>Intern Name:</b>	<b>Assessor Name:</b>
<b>Employee Number:</b>	<b>Employee Number:</b>
<b>Intern Signature:</b>	<b>Assessor Signature:</b>
<b>Date:</b>	<b>Date</b>

## Intern Performance Summary

Aspects of the procedure done well	Aspects of the procedure that need more attention

## Form submission process

### 1. Ensure the following information is complete:

- ☐ Assessor classification ticked
- ☐ Trainee performance summary complete
- ☐ Trainee overall performance ticked\*
- ☐ Trainee signature completed
- ☐ Assessor signature completed
- ☐ Date completed

## 2. Submit using the below method



### ONLINE SUBMISSIONS ONLY:

Via [monashdoctors.org/assessment](https://monashdoctors.org/assessment)  
**\*Both pages are required in a PDF format ONLY\***

### 3. Further support from Monash Doctors Education (MDE)

**Email:** [mededucation@monashhealth.org](mailto:mededucation@monashhealth.org)

**Phone:** 9594 3743

**Visit:** Level 2 McCulloch House, 246 Clayton Road, Clayton.

**\*Only Satisfactory graded assessment will be accepted**

## Additional resources

Go to the <http://monashdoctors.org/intern-assessment/> and look for the additional resources page

## Reassessment

1. Co-ordination of reassessment is the responsibility of the trainee
2. Extensions for completion of DOPS will be considered once an “application for extension” email has been received by the MEO based in the Medical Education Office. Approval or refusal of extension will be communicated via email.
3. Further assessment opportunities may be co-ordinated by the Medical Education office after consultation with the Director of Clinical Training.