

Standardised Assessment Form for Trainees

Mini Clinical Examination Exercise (Mini-CEX)

Topic: Contraception – Intrauterine Device (IUD) Insertion

Student's name _____ Group _____

Assessment date _____

Name and position of the practice supervisor:

Phone / e-mail of the supervisor:

Brief description of the clinical case

A 28-year-old woman, G2P2, requests long-term reversible contraception. No history of pelvic inflammatory disease, no abnormal uterine bleeding, pregnancy excluded. The student is required to counsel the patient and demonstrate IUD insertion technique on a model.

Assessment checklist

1. Anamnesis taking skills

- Assessed reproductive plans
- Asked about menstrual history
- Excluded pregnancy
- Asked about PID / STI history

2. Communication and counselling skills

- Explained types of IUDs (copper / hormonal)
- Explained effectiveness and duration
- Discussed possible side effects
- Obtained informed consent

3. Clinical thinking

- Correctly identified indications for IUD
- Correctly identified contraindications
- Selected appropriate type of IUD

4. Technique of IUD insertion – Preparation

- Hand hygiene and aseptic technique
- Correct positioning of the patient
- Preparation of sterile instruments

4. Technique of IUD insertion – Procedure

- Bimanual examination performed
- Speculum insertion correctly
- Cervix visualised and stabilised
- Uterine sounding performed correctly
- IUD inserted to correct depth
- Threads cut to appropriate length

4. Technique of IUD insertion – Post-procedure

- Checked patient's condition

- Explained warning signs (PAINS)
- Gave follow-up recommendations

5. Professional behaviour

- Respectful attitude to patient
- Maintained privacy and comfort
- Followed safety principles

6. Ability to organise the consultation

- Logical sequence of actions
- Time management
- Clear explanations

Global assessment of competence

- Low level at this stage of training
- Performs at expected level
- Performs above expectations
- Performs at the level of a doctor

Examiner's feedback

What was done well: _____

What should be improved: _____

Agreed action plan: _____

Signature of examiner _____ Signature of supervisor _____