**Checklist:**  (please sign each of the pages)

**Name:**

***Before emailing this, have you:***

1. ***Signed 7 times (twice on this page)?***
2. ***Saved the File with your name?***

***eg J Smith Checklist 2021.docx***

1. ***Provided enough detail for the TPDs to be able to help you?***

**Training Year: ST…….**

**CCT date:**

I understand the Guidance of the JCST in relation to minimum requirements before the award of CCT. I have read the information on the JCST Website, and compared my progress with the ST6 WayPoint assessment on the JCST Website. I acknowledge that it is my responsibility to be aware of any shortfalls in regard to these “targets” and to discuss with my Program Director a means of correcting any deficits in a timely fashion before the end of my 6 year training program. I am providing numbers re Logbook cases and details of publications / presentations, but understand that the other minimum requirements must be met too, and detail any problems in this regard below.

**Signature:** **Date:**

**Academic Progress:**

**National Podium Presentations of work prepared during SpR / StR Training:**

|  |  |
| --- | --- |
| **1.** |  |
| **2.** |  |

**Peer review publications of work prepared during SpR / StR Training: 0**

|  |  |  |
| --- | --- | --- |
| **1.** |  |  |
| **2.** |  |  |

**Tick to confirm you have submitted an up-to date Enhanced Form-R for the current Academic Year: N***If you haven’t please do so as a priority*

**Signed: Date: Print Name:**

**Logbook Summary as per JCST Guidance  
*Please Note:*** *These operation target numbers do not include Assisted Cases. Categories SS/SU/P and T are the ones that count* ***(\*Updated table with 2017 CCT indicative procedures)***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Competency** | **Indicative number** | **Notes including acceptable cases** | **Number to date** | **Date of Level 4 PBA on ISCP** |
| **Elective** | | |  |  |
| Major joint arthroplasty | 80 | total hip, knee, shoulder, ankle replacements |  | 1.  2.  3. |
| Osteotomy | 20 | 1st metatarsal, proximal tibia, distal femur, hip, humerus, wrist, hand, paediatric, spinal. NOT allowed are Akin, lesser toe and MT 2-5 osteotomies |  | 1.  2.  3. |
| Nerve decompression | 20 | carpal tunnel, cubital tunnel, tarsal tunnel, spinal decompression, discectomy |  | 1.  2.  3. |
| Arthroscopy | 50 | knee, shoulder, ankle, hip, wrist, elbow |  | 1.  2.  3. |
| **Emergency / trauma** | | |  |  |
| Compression Hip Screw for Intertrochanteric Fracture Neck  of Femur | 40 | |  | 1.  2.  3. |
| Hemiarthroplasty for Intracapsular Fracture Neck of Femur | 40 | |  | 1.  2.  3. |
| Application of Limb External Fixator | 5 | |  | 1. |
| Tendon Repair for trauma | 10 | Any tendon for traumatic injury (includes Quadriceps and patella tendon) |  | 1.  2.  3. |
| Intramedullary nailing including elastic nailing for fracture or arthrodesis | 30 | femur shaft, long CMN for subtrochanteric fracture, tibia shaft, humerus, hindfoot nail, arthrodesis eg knee |  | 1.  2.  3. |
| Plate fixation for fracture or arthrodesis | 40 | ankle, wrist, hand, femur, tibia, humerus, forearm, clavicle, arthrodesis eg wrist |  | 1.  2.  3. |
| Tension band wire for fracture or arthrodesis | 5 | patella, olecranon, ankle, wrist, hand |  | 1.  2.  3. |
| K wire fixation for fracture or arthrodesis | 20 | Wrist, hand, foot, paediatric |  | 1.  2.  3. |
| Children’s displaced supracondylar fracture | 5 | displaced fracture treated by internal fixation or application of formal traction |  | 1. |

**Total cases during SpR / StR Training to date:  *(STS/STU/P)***

**PLEASE also bring Summary Sheets from eLogbook to the Review.**

1. **Indicative procedures (similar to table above)**
2. **Logbook Summary from day 1 as StR till present**
3. **All activity in current post (since October changeover)**

**Signed: Date: Print Name:**

**ISCP Progress**

1. Placement, PD, AES and CS all entered and validated YES / NO
2. LAs complete, including mid-placement review YES / NO
3. Timetable documented YES / NO
4. MSF completed YES / NO
5. 40 validated WBA (75% with Cons; PBAs only with Cons) YES / NO
6. Audit complete (and Assessment of Audit WBA validated) YES / NO
7. Critical CBD list progress (Specify Level achieved so far – need all Level 4 for CCT):

|  |  |  |
| --- | --- | --- |
| **Critical CBD** | **Level 4 PBA (Yes or No?)** | **Date of Level 4 PBA on ISCP** |
| **1**. Compartment syndrome (any site). |  |  |
| **2.** Neurovascular injuries (any site). |  |  |
| **3.** Cauda equina syndrome. |  |  |
| **4.** Immediate assessment, care and |  |  |
| referral of spinal trauma. |  |  |
| **5.** Spinal infections. |  |  |
| **6.** Complications of inflammatory spinal conditions |  |  |
| **7.** Metastatic spinal compression. |  |  |
| **8.** The painful spine in the child. |  |  |
| **9.** Physiological response to trauma. |  |  |
| **10.** The painful hip in the child. |  |  |
| **11.** Necrotising Fasciitis. |  |  |
| **12.** CEX major trauma). |  |  |
| **13.** Primary & secondary bone malignancy. |  |  |
| **14.** Diabetic foot. |  |  |

**Curriculum Update (Not for current ST8s)**

I understand that from August 2021 training is switching to the New Curriculum. I have:

1. read the update documents on ISCP
2. saved/backed up my existing Portfolio
3. undertaken a Trial MCR and loaded that into the Other Evidence section of my ISCP, labelled Trial MCR 2021
4. I have discussed the MCR process with my current Trainers

**Signed: Date: Print Name:**

**Re COVID Placements (Not applicable to ST3s)**

During the Pandemic you have probably lost logbook experience, and we need to plan how to remedy this. Please complete the grid below.

|  |  |
| --- | --- |
| Please use the elogbook to insert the total number of operations you have been involved (include A) in since March 2020 |  |
| Please use the elogbook to insert the total number you have done (P/STU/STS/T) operations you have done since March 2020 |  |

If you are ST7 or 8 and there is a shortfall re. JCST Logbook requirements then please write a *separate email* to the TPDs (cc. all of them please) for urgent action.

If you are ST4-6 then there is time, and you may already “have a plan” regards catching up.

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Specialty  & Trust | Logbook Target achieved? | Plan (e.g. No elective lists due to COVID cancellations of list so no THR/TKR achieved in this period. Plan = Need repeat placement in arthroplasty required) |
| Oct 19-Apr 20 |  | Y/N |  |
| Apr 20-Oct 20 |  | Y/N |  |
| Oct 20-Apr 21 |  | Y/N |  |
| Apr 21-Oct 21 |  | Y/N |  |

**Signed: Date: Print Name:**

**Re Missing Subspecialty Experience (Not applicable to ST3/4s)**

During the Pandemic you are ST5-6 then you have probably missed experience in at least one subspecialty. Please complete the grid below.

Current Year of Training: ST5 / ST6

|  |  |  |  |
| --- | --- | --- | --- |
| Specialty  & Trust | Dates | Further experience required? | Plan e.g. No elective foot and ankle lists so no osteotomies completed. Plan = need to repeat F+A to get osteotomy numbers. |
| Paeds |  | Y/N |  |
| Spine |  | Y/N |  |
| Shoulder |  | Y/N |  |
| F&A |  | Y/N |  |
| Hand |  | Y/N |  |

**Signed: Date: Print Name:**

|  |
| --- |
| **Information that I wish my Program Director to be aware of at this time**:  *If this section is blank then all targets e.g. ATLS, Audit etc. etc. in the JCST Document are assumed to be met.* |
|  |

**Signed: Date: Print Name**: