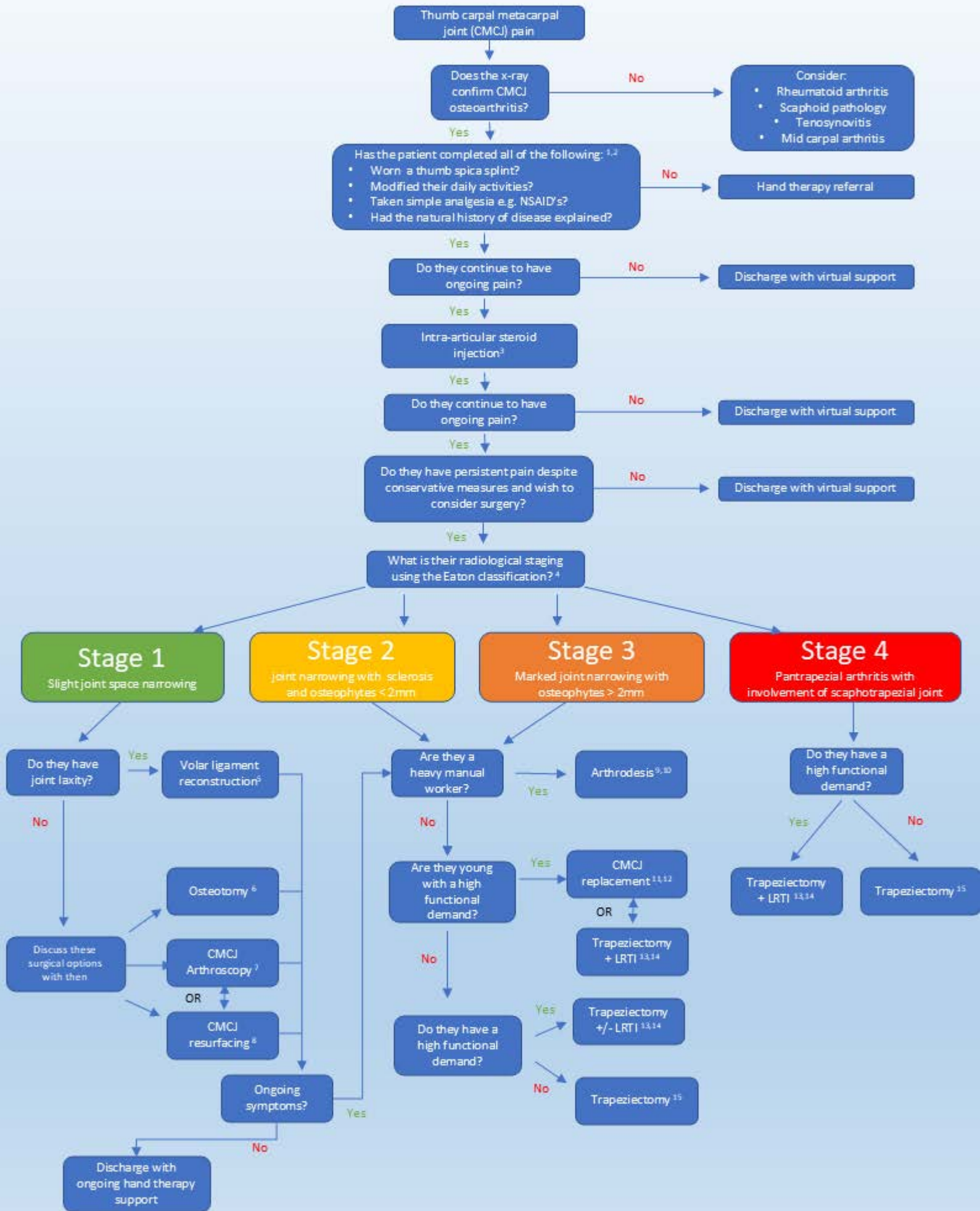


Management algorithm for thumb carpal metacarpal joint pain



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MODULE 3 Trauma Algorithm Mark Sheet

Student Name:	
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Topic:	
Scaphoid non-union	
Scapholunate instability	
Fracture / dislocation of PIPJ	
<i>Essex-Lopresti injury (withdrawn from Oct 19)</i>	
<i>Loss of forearm rotation following distal radius fracture (withdrawn from Oct 19)</i>	
Thumb CMC joint pain	X
Management of Dupuytren's with combined PIP and MCP joint contracture	
Ulnar sided wrist pain following a distal radius fracture	
Loss of function following flexor tendon repair	
Finger tip injury distal to the DIP joint of the dominant middle finger	
Loss of function of the hand following compartment syndrome of the forearm and hand	

FEEDBACK: It is important that each assessor justifies their marks with written comments

For each section, please comment on (1) what was good, (2) not so good, and (3) how to improve for the future.

Clinical content

- Does the student demonstrate a good level of understanding of the topic?
- Is the literature analysed & interpreted, with limitations in current knowledge and practice accommodated?
- Are clinical and basic science aspects well integrated where appropriate?
- Does the concluding clinical pathway adequately encapsulate the current state of knowledge?

<p>Comments: Reasonable level of understanding demonstrated Literature quoted does not always correspond to how it is used in algorithm (Ref 10). Satisfactory use of basic science.</p> <ul style="list-style-type: none"> • Pathway of trapeziectomy does not include undercut of Trapezoid nor treatment of MP hyperextension.
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Mark: 35/25

Organisation / Presentation:

- Is the algorithm focussed with clear organisation of information? Is it structured logically?
- Is the general presentation of the algorithm of a good standard?
- Does the review use technical language appropriately, are abbreviations listed, is the report typographically correct, and is the standard of English acceptable?
- Is the reference list up to date and does it contain relevant citations?

<p>Comments: Clear pathway but with some omissions. Treatment box would be made clearer by being a different colour from decision box . Satisfactory references</p>

Mark: 33/25

ALGORITHM Mark:

	Academic Content	Organisation & presentation	Total Mark %
Marks	35/50	33/50	68

Marking Guide for Module 3 Trauma Algorithm:

Mark	Explanation
Outstanding: 90 -100%	Work of excellent quality throughout. Excellent presentation.
Excellent: 80 - 89%	Work of very high to excellent quality showing originality, high accuracy, thorough understanding, and critical appraisal. Shows a wide and thorough understanding of the material studied and the relevant literature, and the ability to apply the theory and methods learned to solve unfamiliar problems. Very good presentation.
Good Pass (allows award of merit): 70-79%	Work of good to high quality showing evidence of understanding of the research topic, good accuracy, good structure and relevant conclusions. Shows a good knowledge of the material studied and the relevant literature and some ability to tackle unfamiliar problems. Good presentation.
Pass: 60-69%	Work shows a clear grasp of relevant facts and issues and reveals an attempt to create a coherent whole. It comprises reasonably clear and attainable objectives, adequate literature review and some originality. Presentation is acceptable, minor errors allowed.
Fail: 50-59%	Work shows a satisfactory understanding of the research topic and basic knowledge of the relevant literature but with little or no originality and limited accuracy. Shows clear but limited objectives, and does not always reach a conclusion. Presentation adequate but could be improved.
Fail: 40-49%	Work shows some understanding of the main elements of the research topic and some knowledge of the relevant literature. Shows a limited level of accuracy with little analysis of data or attempt to discuss its significance. Presentation poor.
Fail: 0-39%	Limited relevant material presented. Little understanding of research topic. Unclear or unsubstantiated arguments with very poor accuracy and understanding. Presentation unacceptable.