MSK Practitioner: Arthroplasty Hip and Knee Work Based Assessment - Follow Up					
Practitioner:			Assessor:	Date:	
Start Time assessment period:			End Time assessment period:	Duration:	
Number of Patients:	Hip	Кпее	Location of clinic(s):	Difficulties performing WBA:	

Reason for this WBA				
Learning needs assessment (new appointment/new skill area)				
In training – competency level / learning needs assessment				
Annual appraisal competency level assessment				
Practitioner transferring role to new employer				

## **Score:** N = Not observed or not appropriate U = Unmet learning need S = Satisfactory

## **Level of Supervision** 1=not able, **2**=direct supervision, **3**=limited supervision, **4**=Independent

Clinic AdministrationCircle level of supervision required 1Ensure all clinical information is available referral letter, imaging etcEnsure appropriate environment, equipment, examination couch, privacyEnsure administrative support appropriate documentation, letter/e-mail generationHistory TakingCircle level of supervision required 1Put patient at ease communicates clearly Full history of previous surgeryRelevant previous medical/surgical history Specific questioning to relevant to hip/knee follow upRecognition of symptoms typical of failure Assessments of other joints in lower limb Specific questioning to detect red flags Relevant concurrent medical problems Understand social/family/home environment Assess patients expectations		4
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Use of appropriate scoring systems if		
required		
Ability to describe and document findings		
Examination Circle level of supervision required 1	23	4
Ensure safety and comfort of patient		
Observes patient walking		
Assess walking aids and prosthetics		
Specific examination of hip / knee		
Examination of other joints / back		
Examination of other joints / back		
Vascular examination		
Neurological examination		
Additional examination indicated from		

history	
Able to describe & document findings	
Ordering of appropriate investigation	Circle level of supervision required 1 2 3 4
Imaging x-ray MRI CT	
Blood tests ESR CRP Metal ions	
Joint aspiration	
Other relevant tests	
Interpretation/relevance of Investigations	Circle level of supervision required 1 2 3
Radiographs - ability to compare with	
previous	
Ability to recognise failure patterns on x-ray	
MRI / CT / Ultrasound / Bone Scans	
Blood tests / ESR / CRP / metal ion levels	
Microbiology	
Other tests	
Assessment of joint replacement	Circle level of supervision required 1 2 3
Has patient made expected progress to date	
Wound assessment	
Assess if replacement performing as	
expected	
Assess should activity be restricted	
Assess if activity can be increased	—
Ability to give patients advice on restrictions	
Assessment of need for walking aids	
Assess if physical therapy required	<u> </u>
Has there been deterioration in	
function/pain	
Ability to consider possible modes of failure	—
Clearly able to consider and act on red flags	
Ability to direct further investigation	
Assess if mode of failure requires	
intervention	
Assess if mode of failure need closer follow	—
up	
Ability to discuss with others	<u> </u>
peers/consultant	
Ability to communicate findings to patient	
urther follow up hip and knee	Circle level of supervision required 1 2 3
Assess whether further FU is needed	
If FU needed ensures an appropriate time	
period offered	
If early failure is follow up a safe approach	
If evidence of early failure appropriate time	
for follow up	
Ensure follow-up arrangements are in place	
f further hip or knee surgery is indicated	Circle level of supervision required 1 2 3
Ability to describe what needs to be done	
Considers risk / benefits of surgery	
Ability to explain risk / benefits to patient	
Risk of not doing anything	
Need of precautions prior to intervention	
Risks benefit of analgesia / anti-	—
inflammatory	
Ability to give patient treatment advice	

Description of possible complications	
Provide explanation of pre-operative process	
Provide explanation of inpatient process	
Provide details of post operative recovery	
What patients can expect following surgery	
Preparation of patient for Informed consent	
Documentation of discussion with patient	
Ability to discuss with others peers/consultant	
Ability to manage patient expectation	

Demonstrates underpinning knowledge of:	Suggested learning need
Anatomy of hip and knee joint	
Physiology of hip and knee joint	
Pathology of hip and knee joint	
Pathologies causing lower limb problems	
Types of hip and knee surgery	
Modes of joint replacement failure	
Risks of not performing revision surgery	
Contra-indications and risks of surgery	
General medical conditions	
Conservative treatments indications and risks	
Infection in joint replacement surgery	
Risk of reaction - debris/wear from prostheses	
Informed consent	
Ethical and legal issues	

Other locally agreed tasks & competencies		Circle level of supervision required 1 2 3		

pra	Overall Level of safe supervised/independent practice that practitioner can follow up Hip & Knee patients		Comments
0	Insufficient evidence to observed to support a judgment		
1	Unable to follow up hip and knee patients		
2	Able to follow up hip and knee patients under supervision with consultant or senior practitioner present		
3	Able to follow up hip and knee patients with limited supervision with consultant or senior practitioner available to attend		
4	Able to follow up hip and knee patients independently without direct supervision senior available later to discuss cases		

	 1	/	
Action Plan following WBA			
Training needs identified			
(refer to list above)			
Date to have			
educational/training plan by			
educationaly training plan by			
Approximate date of next			
WBA			

Practitioner:

Assessor:

Signed:

Signed:

Dated:

Dated: