Perf/small & large obs & competency caecal valve – decompress & free fluid  
MRCP – liver & panc & deep infections

Assessment of competences for ANP/ACP/SCP

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please note: Practitioners can add DOPS, PBAs and CEXs as evidence.**

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| --- | --- | --- | --- | --- |
|  | | **NOT competent** | **Competent** | **Signature and date** |
| Inspection and interpretation of AXR | | | | |
| 1 | Annotation   * Patient name * Correct date * Confirm projection/view * Correct left/right labelling identified * C/w previous imaging |  |  |  |
| 2 | Alignment   * Vertebral bodies * Both domes of diaphragm * Inferior poles of pubic rami |  |  |  |
| 3 | Opacity   * Ensure whole abdomen is visible from the level of the diaphragm to pelvis * Confirm correct exposure to proceed with interpretation – adequate to view small and large bowel |  |  |  |
| 4 | Structured review BBC   * Identify the large and small bowel, liver, lungs, gallbladder, stomach, psoas muscle, kidneys, spleen and bladder * Identify the bones – ribs, lumbar vertebrae, sacrum, coccyx, pelvis and proximal femurs * Identify calcification and artefact (i.e. renal stones) * Comment of findings (normal/abnormal) |  |  |  |
| 5 | Comment on the diameter of the bowel segments   * Small bowel 3 cm * Colon 6 cm * Caecum 9 cm |  |  |  |
| 6 | Confirmation of correct line positions   * Abdo drain * NG tube * GI stent |  |  |  |
| 7 | Interpretation   * Line placement incorrectly placed * Distended stomach * Sigmoid or caecal volvulus * Fluid level * Free intraperitoneal gases (Rigler sign) * Pseudo obstruction |  |  |  |
| **Assessor’s comments**: | | | | |
|  | | | | |
| **This practitioner has completed these outcomes to the appropriate standard.**  **Assessor’s name:**  **Signature and date:** | | **Practitioner’s signature:**  **Date:** | | |