

Thoracentesis Assessment Checklist
Check errors performed or needing prompting from supervisor

Confirm Indication	<input type="checkbox"/> Did not identify a proper indication
Contraindications	<input type="checkbox"/> Did not consider relevant contraindications
Obtain Consent	<input type="checkbox"/> Did not obtain signed consent <input type="checkbox"/> Uses complicated terminology when explaining procedure, risk, or benefits <input type="checkbox"/> Did not confirm patient's understanding
Positioning	<input type="checkbox"/> Did not optimize positioning for patient comfort and procedural access to largest fluid pocket
Ultrasound Evaluation & Identification of Insertion Site	<input type="checkbox"/> Did not perform a full scan of pleural effusion <input type="checkbox"/> Did not identify largest fluid pocket with lateral most insertion point <input type="checkbox"/> Did not measure distance from skin to parietal pleura <input type="checkbox"/> Did not confirm insertion point is along upper margin of rib
Supplies	<input type="checkbox"/> Did not obtain all necessary supplies before starting
Timeout	<input type="checkbox"/> Did not perform timeout
Sterile Prep	<input type="checkbox"/> Scrubbed chlorhexidine <30 seconds <input type="checkbox"/> Sterilized area smaller than drape aperture <input type="checkbox"/> Did not appropriately address contamination, if occurred
Draw-up Lidocaine	<input type="checkbox"/> Did not draw up lidocaine in a sterile fashion <input type="checkbox"/> Used incorrect needle to aspirate lidocaine
Anesthetize Track	<input type="checkbox"/> Did not create a dermal 'wheal' <input type="checkbox"/> Advanced needle along different track than identified by ultrasound <input type="checkbox"/> Did not maintain negative pressure while advancing
Make Nick	<input type="checkbox"/> Advanced <1/3 or >2/3 the width of scalpel blade
Catheter Insertion	<input type="checkbox"/> Created separation between catheter hub and the needle base prior to being in pleural space <input type="checkbox"/> Angled needle/catheter cephalad <input type="checkbox"/> Did not apply sufficient pressure to advance through tissues <input type="checkbox"/> Did not maintain negative pressure while advancing <input type="checkbox"/> Advanced along a different track than identified by ultrasound or the anesthetized track <input type="checkbox"/> Did not advance additional 0.5-1cm once needle was inside pleura <input type="checkbox"/> Did not maintain depth of needle while advancing catheter
Fluid removal and sample collection	<input type="checkbox"/> Did not identify correct tubing <input type="checkbox"/> Did not obtain sample when indicated <input type="checkbox"/> Did not send for appropriate studies <input type="checkbox"/> Misused stopcock, leaving pleural space open to air <input type="checkbox"/> Inadvertently pulled out catheter <input type="checkbox"/> Continued removing fluid despite concerning symptoms or excessive negative pressure.
Catheter Extraction	<input type="checkbox"/> Removed catheter too slowly <input type="checkbox"/> Did not use US or CXR to rule out pneumothorax when there was clinical concern

Global Skills Assessment Scale

1	2	3	4	5
<p>Novice Movements guided by verbal instruction or through trial and error. Unable to anticipate subsequent steps or adjust for new conditions.</p>	<p>Beginner Knowledgeable about appropriate steps but still familiarizing with equipment and inefficient or awkward movements and positioning.</p>	<p>Intermediate Self-directed movements with increased efficiency and planning. Success with uncomplicated procedures. But slow to recognize high-risk conditions, fails to request assistance when needed or and not familiar with best troubleshooting methods.</p>	<p>Proficient Smooth and well-coordinated movements. Readily identifies unexpected or high-risk conditions. Familiar with troubleshooting options and appropriately seeks assistance when needed for higher level considerations.</p>	<p>Expert Efficient, well-planned, and fluid movements. Facile with all equipment and seamlessly adjusts for new conditions with effectively implemented troubleshooting techniques.</p>

Entrustment Scale: At what level do you entrust the provider to perform and/or supervise the procedure?

1	2	3	4	5
<p>Critical Deficiencies High-risk for patient harm. Can observe the procedure but not ready to perform on live patients.</p>	<p>Full supervision Supervisor is gloved and immediately available throughout procedure providing frequent verbal instruction and/or hands on assistance.</p>	<p>Partial supervision Supervisor is ungloved but immediately available for all critical steps, offering occasional verbal instruction and/or assisting for complex and unanticipated conditions</p>	<p>Unsupervised practice ("indirect supervision") Back-up assistance available within facility for unexpected and complex conditions. May provide supervision to trainees but maintains low threshold to request expert assistance in high-risk situations.</p>	<p>Educator Serves as instructor in didactics, and simulation settings and is clinical back-up for high-risk and complex situations.</p>

Final Score: _____ **Errors noted on checklist** _____ **Global** _____ **Entrustment**

For Reference:
 Minimum Passing Standard (MPS): <24 mistakes Checklist 2+ Global 2+ Entrustment
 Unsupervised Practice Standard (UPS): 7 mistakes Checklist 4+ Global 4+ Entrustment