

Calibration Sheet

Domains	Remarks
History Taking Skills	Adequate use of both open and close ended questions Focused, appropriate pacing Allow patient to ask questions
Relevance of History	Explore presenting complaint of abdominal pain thoroughly - Fail: if did not exclude red flags e.g. intestinal obstruction Elicit relevant oncological history Assess mood of patient and social circumstances
Physical Examination Skill	Focused and target examination Abdominal examination including offering to do DRE
Identifying Physical Signs	Not applicable
Problem Definition	1. Abdominal pain secondary to constipation colic 2. Background of metastatic colorectal cancer defaulted treatment and follow up 3. Palliative care and end of life discussion
Investigations	Maximally borderline if candidate - did not check for anaemia in physical examination (e.g. pallor) and did not do FBC, AND/OR - did not exclude intestinal obstruction in history or physical examination, and did not offer to do x-ray
Management	Offer symptomatic management Address goal of care for palliative (rather than curative): can consider palliative medicine referral Discuss end of life care and ACP/LPA Good pass: if fulfil above AND managed polypharmacy and stop non-essential medications
Communication & Managing Patient Concerns	Clear verbal communication, avoid jargon Appropriate body language and good eye contact Empathetic Manage patient's ideas, concerns and expectations

Professionalism & Ethics	Treat patient respectfully (If refer ED and patient declines, explore patient's ideas, concerns, expectations and respect patient's autonomy)
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