

MINI-CEX- A BOON IN ASSESSMENT TOOL

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he pattern of education should be ever evolving. Training and assessment of a wide range of procedures, makes dentistry unique. Assessment is an important input for improving quality of education, growth and learning. In a post graduate set up, acquiring good clinical skills during all phases of learning is important. The traditional method of evaluation does not assess the performance of the student while taking case history and physical examination of the patient. Consequently, the student never really performs in front of the evaluator when ideally he should be closely monitored during examination of the patients and the loopholes assessed. Traditional assessments, because of their dependence on a single examiner, fail to provide feedback to the trainee.

Mini-CEX is a snapshot observation of a clinical encounter. It lasts only 10-15 minutes and thus, is designed to be regularly applied on the patient- student interactions at its first inter-phase. Just as the patients are examined in an outpatient department desk, the evaluator observes the students examination, diagnosis and treatment planning of patient problems covering a broad range of presenting symptoms like gingival bleeding, mobility of teeth, sensitivity, oral malodour and pain. Routine physical examination consists of chief complaint and history of present

illness, plaque index, gingival index and periodontal parameters such as probing pocket depth, clinical attachment level etc. The biasing by standardizing the level of complexity of patient problem is over ruled. A well- focused feedback is presented to the student after the assessment, that uses a standard rating form for seven clinical competencies on a standardized nine point likert scale from 1-3 (unsatisfactory) 4-6 (satisfactory) 7-9 (superior) on medical interviewing. clinical examination. professionalism, clinical judgement and organisation. After the last encounter, the post graduate students give their feedback on the assessment by the evaluator and experience with encounter.

Mini-CEX has a positive impact as it helps the students develop a better insight about patient examination, clinical judgement, organisation, efficiency and decision making in diagnosis. It induces confidence and reduces examination fear among them. As good communication skills and counseling allays patient's fears and anxiety, it helps improve the student-teacher as well as the student-patient relationship. The students with a patient centered approach are more satisfied, more enabled and with greater symptom relief and lower rates of referral. It helps them improve their competencies. The evident advantage of the Mini- CEX tool is direct observation of the evaluators and longitudinal tracking of the student





that allows correction and strengthening of actions or attitudes in performance. The staff members, convinced with this system of assessment, strives to improve learning in the clinical competencies of the students by giving them effective feedback about their presentations. Mini- CEX has, hence, proved to be a boon and as an acceptable and practical tool in the post graduate setting should be included in the curriculum to enhance learning.