

Surg Endosc. 2010 Aug;24(8):1834-41

GAGES - COLONOSCOPY SCORESHEET

 \underline{G} LOBAL \underline{A} SSESSMENT OF \underline{G} ASTROINTESTINAL \underline{E} NDOSCOPIC \underline{S} KILLS

	OPE NAVIGATION ects navigation of the GI tract using tip deflection, advancement/withdrawal and torque	SCORE
5	Expertly able to manipulate the scope in the GI tract autonomously	
3 2	Requires verbal guidance to completely navigate the lower GI tract	
1	Not able to achieve goals despite detailed verbal guidance requiring takeover	
	E OF STRATEGIES	SCORE
	nines use of patient positions, abdominal pressure, insufflation, suction and loop reduction to comfortably plete the procedure	SCORE
5 4	Expert use of appropriate strategies for advancement of the scope while optimizing patient comfort	
3 2	Use of some strategies appropriately, but requires moderate verbal guidance	
1	Unable to utilize appropriate strategies for scope advancement despite verbal assistance	
AB	ILITY TO KEEP A CLEAR ENDOSCOPIC FIELD	SCORE
Utili	zation of insufflation, suction and/or irrigation to maximize mucosal evaluation	
5 4	Uses insufflation, suction, and irrigation optimally to maintain clear view of endoscopic field	
3 2	Requires moderate prompting to maintain clear view	
1	Inability to maintain view despite extensive verbal cues	
Rand	STRUMENTATION (if applicable; leave blank if not applicable) dom biopsy; targeting is assessed by asking the endoscopist to take another biopsy from the identical site. Targeted umentation: evaluation is based on ability to direct the instrument to the target.	SCORE
5 4	Expertly directs instrument to desired target	
3 2	Requires some guidance and/or multiple attempts to direct instrument to target	
1	Unable to direct instrument to target despite coaching	
ου	JALITY OF EXAMINATION	SCORE
	ects attention to patient comfort, efficiency, and completeness of mucosal evaluation	SCORE _
5	Expertly completes the exam efficiently and comfortably	
3 2	Requires moderate assistance to accomplish a complete and comfortable exam	
1	Could not perform a satisfactory exam despite verbal and manual assistance requiring takeover of the	ne procedure
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