The Hong Kong College of Family Physicians

香港家庭醫學學院



Pre-Exit Medical Record Review (PERM)

Candidate	
Practice name & address	(Working in the practice since/)
Assessor	
Date of assessment	
Signature	

Introduction

PERM is an interim assessment for candidates who are preparing to attempt the Exit Examination of the Hong Kong College of Family Physicians (HKCFP). For the details please refer to the **PERM workshop.** Materials presented in the workshop is available on HKCFP internet website.

In summary:

- Candidate needs to prepare:
 - 100 medical records:
 - o medical records of 100 different patients in a six-week period between 1st of May and 31st August of the same year.
 - The format and requirement should be in line with the Part D of Practice Assessment, Exit Examination
 - o The format of medical records can be computerized, paper or a hybrid of both.
 - 100-Case Log:
 - o A table summary of the 100 medical records collected, in the specified format.
- An Assessor (candidate's Clinical Supervisor in higher training or a PA Examiner) needs to:
 - choose ten medical records from the 100-case log to mark, and
 - give feedback (with documentation) to the candidate,
 - using the PERM Assessment Form, the completed and assessor-signed Form will become a PERM Report
- Candidate must keep the ten medical records marked till 31st March of the next year. These records may be reviewed by delegates of Specialty Board for:
 - suspected misconduct in PERM when necessary; OR
 - o quality assurance, as agreed by the candidates and assessors.
- Documents to be submitted at the Exit Examination Application are:
 - 100-case log
 - o **PERM Report** --- please note any part(s) rated grade "N" will not be accepted.

Appendix: Template for 100-Case Log

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PERM Assessment Form

Enter the serial number of the records (i.e., 1 – 100) chosen from the 100-Case log →	1	2	3	4	5	6	7	8	9	10
0. Legibility										
i. Basic Information	CurProFan	ergy / Adv rent medic blem list (nily histor ropriate)	cation list Current /	Past heal	th)	HeighbookImm	ght, weight of pressur nunization acco & al	re	ion growth cha	
Grade (please circle one)										
A	Ve	ery good t	o Outstan	ding, mas	stery of m	ost comp	onents an	d capabil	ity	
C	Satisfactory to good in most components									
${f E}$	Need to overcome some omissions / defects that have impact on patient care									
N	No	eed attenti	on to avo	id unsafe	practice					
ii. Consultation notes	}									
Main reason(s) of consultation										
Clinical findings										
Diagnosis/ Working diagnosis										
Management										
Anticipatory care advice										
Grade (please circle one)	Grade (please circle one)									
A	Very good to Outstanding, mastery of most components and capability									
C	Satisfactory to good in most components									
E	Need to overcome some omissions / defects that have impact on patient care									
N	Need attention to avoid unsafe practice									

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Overall performance	
Grade (please circle one)	
A	Very good to Outstanding, mastery of most components and capability
C	Satisfactory to good in most components
E	Need to overcome some omissions / defects that have impact on patient care
N	Need attention to avoid unsafe practice

Feedback:

1.	Basic Information
-	
-	

ii.	Consultation notes
Ove	erall / other comments

Please tick the area(s) need attention / improvement according to the overall performance:

Overall performance on Basic Information: area(s) need attention / improvement	If applicable, please ✓; higher priority ✓ ✓, etc.	remarks
Insufficient positive / significant negative information		
Inaccurate / inconsistent with other part(s) of the record		
Information not updated		
Documentation: length not appropriate OR unclear		
• Others:		

Overall performance on Consultation Notes: area(s) need attention / improvement	If applicable, please ✓; higher priority ✓✓, etc.	remarks
Main reason(s) of consultation unclear		
Insufficient documentation of clinical findings		
Diagnosis/ Working diagnosis unclear		
Suboptimal management		
Lack of / inappropriate anticipatory care advice		
Documentation: length not appropriate OR unclear		
• Others:		

Assessor please sign on the front page

--- end ---

Appendix

Template for 100-Case Log

Serial no.	Patient record number	Patient initials	sex	age	diagnosis	Date of the consultation	Date of first attended the clinic
1							
2							
3							
100							

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