Generic Farm C MODULE Case Report Rubric

CRITERIA	% WEIGHTING
Case details communicated clearly and logically	15%
Case management and clinical reasoning process	30%
Demonstration of critical reflection centred on evidence-based medicine (EBVM)	30%
Quality of EBVM and appropriate use of references	10%
Overall attention to case report technique and construction including: scientific language and terminology, referencing format, spelling and grammar, structure & layout	10%
Concise writing style and adherence to expected word count	5%

Case details communicated clearly, concisely and logically						
Very Poor (0%)	Poor (20%)	Inadequate (40%)	Adequate (50%)	Good (65%)	Very Good (80%)	Excellent (100%)
Little or no attention to communication of the pertinent aspects of the case.	Not clearly or logically presented; and/or details of presenting problem, historical and signalment factors, treatment / management and outcome omitted/ disordered/ illogical.	Inadequate communication of the main facts of the case. Some details of presenting problem, historical and signalment factors, treatment / management and outcome omitted or not well ordered / illogical.	Adequate communication of the main facts of the case including the presenting problem, historical and signalment factors, treatment / management and outcome relevant to the case. Information presented less logically.	Good communication of the main facts of the case including the presenting problem, historical and signalment factors, treatment / management and outcome relevant to the case. Good ability to present information logically.	Very good communication of the main facts of the case including the presenting problem, historical and signalment factors, treatment / management and outcome relevant to the case. Very good ability to	Excellent communication of the main facts of the case including the presenting problem, historical and signalment factors, treatment / management and outcome relevant to the case. Excellent ability to present information logically.

					present information logically.	

Case management and clinical reasoning process

Very Poor (0%)	Poor (20%)	Inadequate (40%)	Adequate (50%)	Good (65%)	Very Good (80%)	Excellent (100%)
Approach to the case and clinical reasoning absent or unsuitable.	Poor approach to the case. Decision making processes poorly justified and/or outlined. Omissions or short cuts in diagnosis or management not identified and/or not justified in the light of factors associated with the individual patient/herd/flock, its owner, available equipment and facilities and your own professional experience. Poor or absent translation of reasoning into problem lists or differential diagnoses where applicable.	Inadequate approach to the case. Decision making processes not well justified and/or outlined. Some omissions or short cuts in diagnosis or management not identified and/or not adequately justified in the light of factors associated with the individual patient/herd/flock, its owner, available equipment and facilities and your own professional experience. Inadequate translation of reasoning into problem lists or differential	Adequate approach to the case, outlining and justification of decision-making processes (including selection of diagnostic tests, management or treatment protocols as applicable to the case) incorporating factors associated with the individual patient/herd/flock, its owner, available equipment and facilities and your own professional experience. Adequate translation of reasoning into problem lists or differential	Good approach to the case, outlining and justification of decision-making processes (including selection of diagnostic tests, management or treatment protocols as applicable to the case) incorporating factors associated with the individual patient/herd/flock, its owner, available equipment and facilities and your own professional experience. Good translation of reasoning into problem lists or differential	Very good approach to the case, outlining and justification of decision-making processes (including selection of diagnostic tests, management or treatment protocols as applicable to the case) incorporating factors associated with the individual patient/herd/flock, its owner, available equipment and facilities and your own	Excellent approach to the case, outlining and justification of decision-making processes (including selection of diagnostic tests, management or treatment protocols as applicable to the case) incorporating factors associated with the individual patient/herd/flock, its owner, available equipment and facilities and your own professional experience. Excellent translation of reasoning into problem lists or differential

		diagnoses where applicable.	diagnoses where applicable.	diagnoses where applicable.	professional experience. Very good translation of reasoning into problem lists or differential diagnoses where applicable.	diagnoses where applicable.
Demonstration of critical reflection centred on evidence-based medicine (EBVM)						
Very Poor (0%)	Poor (20%)	Inadequate (40%)	Adequate (50%)	Good (65%)	Very Good (80%)	Excellent (100%)
No attempt to include critical reflection or use evidence-based medicine in discussion of the case.	Poor ability to critically reflect on the case. Poor ability to recognise aspects of the diagnosis, management or other factors relevant to the topic and questions posed that required reflection. Poor ability to review the relevant literature and/or use the literature to reflect on the case. Poor use of the available clinical and/or	Inadequate ability to critically reflect on the case. Inadequate ability to recognise aspects of the diagnosis, management or other factors relevant to the topic and questions posed that required reflection. Inadequate ability to review the relevant literature and/or use the literature to reflect on the case. Inadequate use of the available clinical	Adequate ability to critically reflect on the case, having reviewed the literature and considered most of the patient/herd/ flock and client factors. Adequate use of the available clinical and/or literature evidence. Adequate discussion of economics of the case.	Good ability to reflect on the case critically, having reviewed the literature and considered all of the patient/herd/flock and client factors. Good use of the available clinical and/or literature evidence. Good discussion of economics of the case MUST be included.	Very good ability to critically reflect on the case, having reviewed the literature and considered all of the patient/herd/ flock and client factors. Very good use of the available clinical and/or literature evidence. A good to very good discussion of economics of the case MUST be included.	Excellent ability to critically reflect on the case, including (where applicable) aspects of diagnosis, management or other factors relevant to the topic and questions posed having reviewed the literature and considered all of the patient/herd/flock and client factors. Excellent use of the available clinical and/or literature evidence. A very good to excellent

literature evidence. No/poor discussion of economics of the case.	and/or literature evidence. Inadequate discussion of economics of the case.					discussion of economics of the case is included.

Quality of EBVM and appropriate use of references

Very Poor (0%)	Poor (20%)	Inadequate (40%)	Adequate (50%)	Good (65%)	Very Good (80%)	Excellent (100%)
No references cited	Few but poor-quality resources cited such as Wikipedia or references from questionable secondary or tertiary sources.	Some references cited but either not relevant to the task or poor quality	Resources generally relevant to the task; some resources not of high quality where more suitable references are available (Use of secondary sources/ book chapters etc. where primary sources would have been preferable)	Good quality sources used, recent and seminal articles mostly relevant to task	Very good quality sources used; recent, seminal and peer- reviewed literature almost always relevant to task.	Excellent quality of references used, recent and seminal peer-reviewed literature highly relevant to task.

Overall attention to case report technique and construction

Very Poor (0%)	Poor (20%)	Inadequate (40%)	Adequate (50%)	Good (65%)	Very Good (80%)	Excellent (100%)
Very little overall attention to detail and construction, e.g. very poor attention to detail in terminology,	Poor overall attention to detail and construction, e.g. poor use of correct and precise terminology when describing husbandry, clinical findings,	Inadequate overall attention to detail and construction, e.g. in use of correct and precise terminology when describing husbandry, clinical findings,	Adequate overall attention to detail and construction, e.g. in use of correct and precise terminology when describing husbandry, clinical findings,	Good overall attention to detail and construction, e.g. in use of correct and precise terminology when describing husbandry, clinical findings,	Very good overall attention to detail and construction, e.g. in use of correct and precise terminology	Excellent overall attention to detail and construction, e.g. in use of correct and precise terminology when describing husbandry, clinical findings,

language, spelling or grammar; and/or failing to address the specific requirements of the assignment.	anatomical locations, imaging results, medication etc. Poor attention to detail in spelling and grammar. Poor reference formatting, not using the Harvard Style.	anatomical locations, imaging results, medication etc. Inadequate attention to detail in spelling and grammar. Inadequate reference formatting using the Harvard Style.	anatomical locations, imaging results, medication etc. Adequate attention to detail in spelling and grammar. Adequate reference formatting using the Harvard Style.	anatomical locations, imaging results, medication etc. Good attention to detail in spelling and grammar. Good reference formatting using the Harvard Style.	when describing husbandry, clinical findings, anatomical locations, imaging results, medication etc. Very good attention to detail in spelling and grammar. Very good reference formatting using the Harvard Style.	anatomical locations, imaging results, medication etc. Excellent attention to detail in spelling and grammar. Excellent reference formatting using the Harvard Style.
Concise writing style and adherence to expected word count						
Very Poor (0%)	Poor (20%)	Inadequate (40%)	Adequate (50%)	Good (65%)	Very Good (80%)	Excellent (100%)
Expected word count is markedly exceeded (e.g. 20% or more). With or without distinct lack of concise writing and / or repetition or redundant material.	Word count is moderately exceeded (e.g. by about 10-20%). There is marked lack of concise writing, with repetition or redundant phrases.	Word count is moderately exceeded (e.g. by about 10-20%). Writing is less concise, containing moderate repetition or redundant phrases.	Word count stays within about 10% of expected. Writing is less concise, and candidate less able to discriminate between relevant and extraneous information.	Word count stays within about 10% of expected. Good concise writing, discriminating between relevant and extraneous information.	Very good concise 'to-the-point' writing and discrimination between relevant and extraneous information. Possibly slightly exceeding expected word count (by no more than about 10%).	Excellent ability to write concisely and discriminate between relevant and extraneous information, and very closely adhering to expected word count.