Please return to:

efficiently.

**Christine Pallasigui** 325 9<sup>th</sup> Ave – Box 359798 Seattle, WA 98104 (fax) (206) 744-3227 (email) <u>cptin5@uw.edu</u> Student Name\_\_\_\_\_ Student UW ID number\_\_\_\_\_

Clerkship Name	
Site Name	
Clerkship Dates	

### Based on your contact with the student, please indicate the level of evaluation that best fits the student's performance.

Unacceptable	Below Expectations	Expected to Above	Exceeds Expectations	Exceptional	NA
1	2	3	4	5	
Does not demonstrate understanding of basic principles.	Rarely demonstrates understanding of basic principles.	Often demonstrates understanding of basic principles.	Consistently demonstrates clear understanding of basic and some complex principles.	Almost always demonstrates mastery of basic and some complex principles.	
Does not apply knowledge to specific patient conditions.	Rarely applies knowledge to specific patient conditions.	Often applies knowledge to specific patient conditions.	Consistently applies knowledge to specific patient conditions.	Almost always applies knowledge to specific patient conditions.	
				A resource for others.	
Data-Gathering Skil	lls: Includes basic histo	ry and physical examinat	ion.		
Unacceptable 1	Below Expectations 2	Expected to Above 3	Exceeds Expectations 4	Exceptional 5	NA
Does not obtain basic history and physical or key information and	Rarely obtains basic history and physical. Has difficulty gathering the data or is	Often obtains basic history and physical. Information is organized and complete	Consistently obtains basic history and physical. Information is organized and	Almost always obtains basic history and physical. Information is complete,	
findings.	easily sidetracked or has difficulty prioritizing.	enough to make an assessment of major problems.	complete and identifies and assesses all major and most minor problems.	organized, and efficiently assesses all major and most minor problems.	
<b>Clinical Reporting S</b>	kills: Includes oral cas	e presentations, written o	r dictated notes, histories	, and physical exams.	
Unacceptable 1	Below Expectations 2	Expected to Above 3	Exceeds Expectations 4	Exceptional 5	NA
Does not communicate medical history and physical exams in an	Rarely communicates medical histories or physical exams in an organized or	Often communicates medical history and physical exam in an organized and complete	Consistently communicates medical history and physical exam in an organized and	Almost always communicates medical histories and physical exams in an organized and	
organized or complete manner. Unable to communicate major points in explaining patient's story.	complete manner. Has difficulty with chronology or details of findings that makes the story difficult to interpret.	manner. Presentation identifies and describes all major problems.	complete manner. Presentations identify and describe all major and most minor problems.	complete manner. Clear written and oral presentations	
		paration, performance ar	d attention to patient cor	nfort and dignity.	
Unacceptable 1	Below Expectations	Expected to Above	Exceeds Expectations 4	Exceptional 5	NA
Not attentive to patient's comfort or dignity.	Rarely attentive to patient's comfort or dignity. Rarely	Often attentive to patient's comfort or dignity.	Consistently attentive to patient's comfort and dignity.	Almost always attentive to patient's comfort and dignity.	
Demonstrates poor motor skills that result in inadequate performance	demonstrates good motor skills that result in an inadequate performance of	Often demonstrates good motor skills that result in an adequate performance of task.	Consistently demonstrates good motor skills that result in an adequate performance of	Almost always demonstrates excellent motor skills that result in an adequate	
of tasks. Poor preparation for the task.	the task. Incomplete preparation for the task.	Usually prepared for the task.	task. Consistently prepared for the task.	performance of tasks. Almost always prepared for the task and plans ahead for potential problems.	
		g skills, ability to use data patient problems in an or		physical examination, and ner.	l
Unacceptable 1	Below Expectations	Expected to Above 3	Exceeds Expectations 4	Exceptional 5	NA
Does not consistently identify major patient problems and issues.	Rarely able to independently identify and prioritize major problems. Rarely able to problem solve and organize	Often able to independently identify and prioritize major problems. Often able to problem solve	Consistently able to identify and prioritize all major and most minor problems. Consistently able to problem	Almost always able to identify and prioritize all major and minor problems. Almost always able to problem	

and organize efficiently.

solve and organize efficiently.

solve and organize efficiently.

Student Name\_\_\_\_\_ Student UW ID number\_\_\_\_\_

Clerkship Name\_\_\_\_\_ Site Name\_\_\_\_\_ Clerkship Dates\_\_\_\_\_

Management Skills: Includes order writing, initiative, practicality, and independence.					
Unacceptable 1	Below Expectations 2	Expected to Above 3	Exceeds Expectations 4	Exceptional 5	NA
Does not offer an independent management plan or plan is unrealistic or illogical. All decisions deferred to others.	Rarely offers an independent plan and/or plan is often unrealistic or illogical.	Often offers an independent management plan that is realistic and logical.	Consistently offers an independent management plan that is logical and realistic. Plans are helpful to the team's management of the patient.	Almost always offers an independent management plan that is logical and realistic. Plans are well focused and on target and become part of the team's management of the patient.	
Patient Centered Ca negotiating treatmen		and negotiating agenda; e	liciting patient's perspect	tive of illness; and	
Unacceptable	Below Expectations	Expected to Above 3	Exceeds Expectations 4	Exceptional 5	NA
Does not integrate biomedical and psychosocial perspective into care plan and patient management. Does not elicit patient's perspective of his/her illness. Does not elicit and negotiate agenda with patient. Does not negotiate treatment plan with patient.	Rarely integrates biomedical and psychosocial perspective into care plan and patient management. Rarely elicits the patient's perspective of his/her illness. Rarely elicits and negotiates agenda with patients. Rarely negotiates treatment plan with the patient.	Often integrates biomedical and psychosocial perspective into care plan and patient management. Often elicits and negotiates agenda with patients. Often negotiates treatment plan with the patient.	Consistently integrates biomedical and psychosocial perspective into care plan and patient management. Consistently elicits the patient's perspective of his/her illness. Consistently elicits and negotiates agenda with patients. Consistently negotiates treatment plan with the patient.	Almost always integrates biomedical and psychosocial perspective into care plan and patient management. Almost always elicits the patient's perspective of his/her illness. Almost always elicits and negotiates agenda with patients. Almost always negotiates treatment plan with the patient.	
Communication Ski	lls with Patients, Famili and constructively resol		Includes ability to modif	y communication style	
Unacceptable 1	Below Expectations 2	Expected to Above	Exceeds Expectations 4	Exceptional 5	NA
Does not communicate information effectively. Does not have an awareness to modify communication style and content to situation. Unable to establish rapport. Unable to listen and be silent. Not culturally proficient.	Rarely communicates information effectively. Rarely has an awareness to modify communication style and content to situation. Rarely able to establish rapport. Rarely able to listen and be silent. Rarely culturally proficient.	Often communicates information effectively. Often has an awareness to modify communication style and content to situation. Often able to establish rapport. Often able to listen and be silent. Often culturally proficient.	Consistently communicates information effectively. Consistently has an awareness to modify communication style and content to situation. Consistently able to establish rapport. Consistently able to listen and be silent. Consistently culturally proficient.	Almost always able to communicate information effectively. Almost always able to modify communication style and content to situation. Almost always able to establish rapport. Almost always able to listen and be silent. Almost always culturally proficient.	
Relationships with P patient's perspective		ncludes courtesy, empath	y, respect, compassion, a	nd understanding the	
Unacceptable	Below Expectations 2	Expected to Above 3	Exceeds Expectations 4	Exceptional 5	NA
Disrespectful, indifferent, callus, discourteous or condescending. Does not solicit the patient's perspective. Imposes own personal values on patient when in conflict with their own. Violates HIPAA including patient confidentiality. Inappropriate boundaries. Exhibits behavior that is potentially harmful to patients.	Rarely shows respect, empathy, and compassion. Rarely solicits the patient's perspective. Rarely respects the patient's values or imposes own personal values on patient when in conflict with his/her own.	Often demonstrates respect, empathy, and compassion. Often solicits the patient's perspective. Often respects the patient's values, even when in conflict with his/her own.	Consistently demonstrates respect, empathy, and compassion. Consistently able to solicit the patient's perspective. Consistently respects the patient's values even when in conflict with his/her own.	Almost always shows respect, empathy, and compassion. Almost always able to solicit the patient's perspective. Almost always respects the patient's values even when in conflict with his/her own.	

Student Name\_\_\_\_\_ Student UW ID number\_\_\_\_\_

Clerkship Name\_\_\_\_\_ Site Name\_\_\_\_\_ Clerkship Dates\_\_\_\_\_

		collaboratively with tean e; maintains composure in		ılty, staff, other	
Unacceptable 1	Below Expectations 2	Expected to Above	Exceeds Expectations 4	Exceptional 5	NA
Does not collaborate and/or establish appropriate relationships with team. Does not respect team members within and across specialties. Not compassionate when interacting with team. Does not clarify expectations or clinical responsibilities. Inappropriate boundaries	Rarely collaborates and/or establishes appropriate relationships with team. Rarely respects the roles of team members within and across specialties. Rarely is compassionate when interacting with team.	Often collaborates and/or establishes appropriate relationships with team. Often recognizes and respects roles of team members within and across specialties. Often is compassionate when interacting with team.	Consistently collaborates and/or establishes appropriate relationships with team. Consistently recognizes and respects roles of team members within and across specialties. Consistently compassionate when interacting with team.	Collaborates well with entire team and seeks to improve team function. Always recognizes and respects roles of team members within and across specialties and works to improve team cohesion. Almost always compassionate when interacting with team.	
Educational Attitud	es: Includes active part	icipation in learning and	responsiveness to feedbac	k.	
Unacceptable 1	Below Expectations 2	Expected to Above 3	Exceeds Expectations 4	Exceptional 5	NA
Does not do what is required. Does not respond appropriately to feedback. Does not reflect on his/her own knowledge base. Does not participate in educational experiences. Is not actively engaged in learning. Argumentative or hostile with feedback. Values self above others, sense of entitlement. Engages in destructive competition. Feedback provided to others is not respectful.	Rarely does what is required. Rarely responds appropriately to feedback. Rarely reflects on his/her own knowledge base. Rarely participates in educational experiences. Rarely is actively engaged in learning.	Often does what is required. Often responds appropriately to feedback. Often reflects on his/her own knowledge base. Often participates in educational experiences. Often is actively engaged in learning.	Consistently does what is required. Consistently responds appropriately to feedback. Consistently reflects on his/her own knowledge base. Consistently participates in educational experiences. Consistently is actively engaged in learning. Seeks additional learning opportunities beyond required level. Often volunteers and stimulates others in discussion. Requests feedback routinely.	Actively participates in all activities. Actively seeks feedback and responds appropriately. Initiates self- assessment and teaches others. Almost always participates in educational experiences. Almost always is actively engaged in learning. Asks insightful questions, motivates others, and demonstrates leadership with individuals and in group settings.	
Dependability and R honor and integrity.		attendance, preparation,	and personal appearance	e. Maintains personal	
Unacceptable 1	Below Expectations 2	Expected to Above 3	Exceeds Expectations 4	Exceptional 5	NA
Frequently late without a legitimate reason or unprepared. Does not follow through with assigned tasks. Not trusted to work independently. Dishonest in any way. Does not maintain appropriate appearance. Absent without an excuse. Erratic or unpredictable behavior.	Occasionally late or unprepared. Rarely follows through with assigned tasks. Rarely trusted to work independently.	On time and prepared. Often follows through with assigned tasks. Often trusted to work independently and knows limits and asks for help when needed.	On time and prepared. Follows through with assigned tasks and often volunteers additional effort to follow through with patient care. Consistently trusted to work independently and knows limits and asks for help when needed.	On time and prepared for required and optional activities. Follows through with assigned tasks and consistently volunteers additional effort to follow through with patient care. Almost always trusted to work independently and knows limits and asks for help when needed.	

Student Name\_\_\_\_\_ Student UW ID number

Clerkship Name Site Name	
Clerkship Dates	

**Evaluator Concern**: Check if there is a concern in either or both of the areas noted below. Describe area(s) and contact the departmental site director or Seattle clerkship director.

\_\_\_\_\_ Clinical Performance

Professional Behavior or Conduct

Required Feedback Comments: Provide descriptive feedback for student on strengths and areas needing improvement. (Not for use in the Dean's MSPE unless there is a pattern across clerkships.)

Required Overall Performance Comments: Provide summary of your observations of the student's performance based on the clerkship's objectives in all areas of evaluation. (Comments for use in the Dean's MSPE.)

TIME SPENT WITH STUDENT:	<b>RECOMMENDED OVERALL LEVEL O</b>	<b>FEVALUATION:</b>	
Little or no contact	Unacceptable Performance (Fail)		
Sporadic and superficial contact	Below Expected Performance for Level (marginal)		
Infrequent but in-depth contact	As Expected to Above for Level (Pass		
Frequent and in-depth contact	Exceeds Expectations (High Pass)		
	Exceptional Performance (Honors)		
Evaluator's Name:	Evaluator's Signature:	Date:	
Date of evaluation/feedback to student:		Student Photo	