

Evaluation Forms

Sample C: Rotation and Preceptor Forms

Rotation Evaluation Form

A. PATIENT RESPONSIBILITIES

1. ESTIMATED PATIENT NUMBERS ➤ average daily number of patients assigned to your care _____ ➤ average weekly number of ward or emergency consults _____								
2. CASE MIX ➤ Was there a reasonable variety of patients/problems (ie, medical, surgical, trauma, multisystem, CNS, intoxications, etc.)? Yes <input type="radio"/> No <input type="radio"/> If no, please comment _____								
3. CLINICAL WORKLOAD (please be specific – choose 1, 3, or 5) <table style="width:100%; border:none;"> <tr> <td style="text-align:center;">1</td> <td style="text-align:center;">3</td> <td style="text-align:center;">5</td> </tr> <tr> <td>Excessive, interfered with educational experience</td> <td>Inadequate to obtain appropriate educational experience</td> <td>Optimal</td> </tr> </table>			1	3	5	Excessive, interfered with educational experience	Inadequate to obtain appropriate educational experience	Optimal
1	3	5						
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4. SUPERVISION (please be specific – choose 1, 3, or 5) <table style="width:100%; border:none;"> <tr> <td style="text-align:center;">1</td> <td style="text-align:center;">3</td> <td style="text-align:center;">5</td> </tr> <tr> <td>Patient care expectations clearly above level of trainee and inadequate or inconsistent supervision</td> <td>Little or no opportunity to be autonomous</td> <td>Optimal balance of responsibility and supervision</td> </tr> </table>			1	3	5	Patient care expectations clearly above level of trainee and inadequate or inconsistent supervision	Little or no opportunity to be autonomous	Optimal balance of responsibility and supervision
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Patient care expectations clearly above level of trainee and inadequate or inconsistent supervision	Little or no opportunity to be autonomous	Optimal balance of responsibility and supervision						
5. 28-HOUR RULE AND ACADEMIC HALF-DAY Were you able to: a. reasonably observe the 28-hour rule? Yes <input type="radio"/> No <input type="radio"/> If no, why? _____ b. attend your academic half-day or call back? Yes <input type="radio"/> No <input type="radio"/> If no, why? _____								

B. INTERACTIONS WITH FACULTY

6. ENVIRONMENT <table style="width:100%; border:none;"> <tr> <td style="text-align:center;">1</td> <td style="text-align:center;">2</td> <td style="text-align:center;">3</td> <td style="text-align:center;">4</td> <td style="text-align:center;">5</td> </tr> <tr> <td>Unfriendly, unpleasant and/or intimidating</td> <td></td> <td>Respectful and courteous</td> <td></td> <td>Friendly and made to feel integral part of team</td> </tr> </table>					1	2	3	4	5	Unfriendly, unpleasant and/or intimidating		Respectful and courteous		Friendly and made to feel integral part of team
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7. STAFF AVAILABILITY <table style="width:100%; border:none;"> <tr> <td style="text-align:center;">1</td> <td style="text-align:center;">2</td> <td style="text-align:center;">3</td> <td style="text-align:center;">4</td> <td style="text-align:center;">5</td> </tr> <tr> <td>Difficult to reach/locate</td> <td></td> <td>Routinely available</td> <td></td> <td>Always available and easy to approach</td> </tr> </table>					1	2	3	4	5	Difficult to reach/locate		Routinely available		Always available and easy to approach
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8. INVOLVEMENT IN CLINICAL DECISION-MAKING <table style="width:100%; border:none;"> <tr> <td style="text-align:center;">1</td> <td style="text-align:center;">2</td> <td style="text-align:center;">3</td> <td style="text-align:center;">4</td> <td style="text-align:center;">5</td> </tr> <tr> <td>Most decisions made without trainee's knowledge or input</td> <td></td> <td>Trainee aware/involved in all major decisions</td> <td></td> <td>Trainee's opinion solicited and considered in all decisions</td> </tr> </table>					1	2	3	4	5	Most decisions made without trainee's knowledge or input		Trainee aware/involved in all major decisions		Trainee's opinion solicited and considered in all decisions
1	2	3	4	5										
Most decisions made without trainee's knowledge or input		Trainee aware/involved in all major decisions		Trainee's opinion solicited and considered in all decisions										

Rotation Evaluation Form

C. TEACHING

9. INFORMAL (patient-centered, during daily rounds)				
1	2	3	4	5
Minimal quantity and/or quality		Routinely provided/adequate quality		Outstanding – always a component of patient rounds and emphasized evidence
10. FORMAL (eg, seminars, divisional rounds, journal clubs, etc.)				
1	2	3	4	5
Grossly inadequate number and quality		Occurred regularly and were of reasonable relevance to trainee		Excellent quality and trainees intimately involved and emphasized evidence
11. PROCEDURAL/TECHNICAL SKILLS				
1	2	3	4	5
Little or no opportunity to learn/undertake procedures		Reasonable opportunity to learn/undertake procedures		Routinely involved and supervised in all procedural skills

D. FEEDBACK

12. Did you receive an interim evaluation (verbal or written)	Yes <input type="radio"/>	No <input type="radio"/>		
13. Was your final evaluation discussed with you at the end of the rotation?	Yes <input type="radio"/>	No <input type="radio"/>		
14. Did staff review and critique your written and/or dictated notes/letters?				
1	2	3	4	5
Not at all	Infrequently	Sometimes	Regularly	Always
15. Did staff review and critique your physical examination skills and findings?				
1	2	3	4	5
Not at all	Infrequently	Sometimes	Regularly	Always

E. OVERALL ASSESSMENT OF ROTATION

16. OBJECTIVES MET				
1	2	3	4	5
Few objectives met and/or superficial exposure to relevant diseases		Major objectives met and exposed to all important diseases		Exceeded expectations in all regards, comprehensive exposure to all diseases
17. EFFECTIVENESS				
1	2	3	4	5
Inadequate rotation with very little learned		Worthwhile educational experience		Extremely enjoyable and valuable experience

Preceptor Evaluation Form

CLINICAL ATTRIBUTES

1	2	3	4	5
1. KNOWLEDGE				
Significant gaps evident		Appropriate for common clinical problems relevant to interest/discipline		Breadth and depth of knowledge for common, uncommon, and complex clinical problems
2. PROBLEM FORMULATION				
Failed to consider critical data and/or unable to convey ideas		Basic clinical data incorporated and impression clear/understood		Able to analyze complex cases with multiple problems and synthesize ideas with ease
3. ORGANIZATION				
Unable to make thought processes and opinions understood		Clear and made basic concepts and thoughts understood		Very organized approach to complex scenarios and able to make difficult issues easy to understand
4. PROBLEM SOLVING				
Failed to consider all but the most common or basic explanations or diagnoses		Provided a thorough differential diagnosis and careful decision-making		Able to provide explanations of complex problems and regularly incorporate evidence into decision-making
5. RESPONSIBILITY				
Failed to review patients in a timely fashion and unaware of key problems		Aware of each patient's general status and major problems		Promptly reviewed all patients in a thorough fashion with attention to detail. Followed patients closely.
6. ROLE MODEL AS A CLINICIAN				
Failed to demonstrate positive attributes		Competent and credible		Type of physician one would strive to emulate

TEACHING SKILLS

1	2	3	4	5
7. FORMAL (SCHEDULED) TEACHING (if applicable)				
Failed to provide scheduled rounds		Reliably presented relevant rounds		Frequently provided informative, stimulating, and interactive classroom teaching
8. INFORMAL TEACHING (in the context of patient care)				
Failed to answer questions or provide explanations for clinical decisions		Regularly provided two or three teaching points per case		Made every case and clinical issue a learning opportunity
9. RELEVANCE				
Discussed rare scenarios and/or clinically irrelevant aspects only		Focused on common problems and major issue		Able to teach in depth and always around issues of relevance. Routinely accommodated needs and level of understanding of trainee.
10. ROLE MODEL AS A TEACHER				
Should not be responsible for clinical teaching		Competent and credible		Type of teacher one would strive to emulate

ATTITUDES

1	2	3	4	5
11. RELIABILITY				
Rarely made rounds at appropriate or agreed upon times		Made rounds regularly and at agreed upon times		Routinely placed teaching commitments and times above all other responsibilities except urgent patient care
12. ENTHUSIASM				
Appeared disinterested or bored		Appeared to enjoy patient care and teaching responsibilities		Stimulated others to learn and provide excellent care
13. FEEDBACK				
Rarely provided direction or feedback		Routinely provided direction and offered feedback if asked		Always provided direction and regularly offered feedback
14. AVAILABILITY				
Difficult to locate and/or approach		Routinely available		Always available and easy to approach
15. SUPERVISION				
Too much responsibility for patient care expected of trainee		Supervised patient care in detail but failed to allow appropriate level of responsibility		Oversaw patient care in a diligent fashion but provided appropriate opportunity for trainee to express opinions and manage patients
16. RAPPORT				
Indifferent and disinterested		Courteous and professional		Genuinely interested in the well-being, opinions, and needs of trainee

TECHNICAL SKILLS

1	2	3	4	5
17. ICU PROCEDURES				
Significant lack of skills in their use with unstable patients		Safe use and handling of procedures and their optimal sequence		Uses advanced techniques and masters the indications and process

Preceptor Evaluation Form

		Attendings – insert names below					
	Clinical Attributes						
1	Knowledge						
2	Problem Formulation						
3	Organization						
4	Problem Solving						
5	Responsibility						
6	Role Model as a Clinician						
	Teaching Skills						
7	Formal						
8	Informal						
9	Relevance						
10	Role Model as a Teacher						
	Attitudes						
11	Reliability						
12	Enthusiasm						
13	Feedback						
14	Availability						
15	Supervision						
16	Rapport						
	Technical Skills						
17	ICU Procedures						

Comments:

<hr/> Signature of Trainee (optional)
<hr/> Base Specialty (optional)
<hr/> Date