

UNC Medicine Inpatient Clerkship Student Evaluation Form

Student: _____

Site & Dates: _____

Evaluator: _____

Evaluator's Signature: _____

Circle one: **Attending** **Resident** **Intern**

Please evaluate each student according to what is expected of a student at his/her level of training (at this point in his/her 3rd year). If a student is performing at the expected level, it is entirely appropriate to mark many behaviors in the middle column. Please circle behaviors as observed. If you have questions about the interpretation of this form, please contact the UNC Medicine Education Office at 919-966-7776.

I. HISTORY AND PHYSICAL EXAM SKILLS, CLINICAL REASONING AND PRESENTATIONS

1. Elicits appropriate histories

Misses essential information or is inaccurate; is inconsiderate of a patient's needs	Frequently asks too much or too little history; identifies most problems but doesn't fully characterize them	Gets a complete and accurate history; identifies new problems correctly	Skillfully interviews patients and organizes problems	History-taking that is consistently efficient, precise, insightful and well-organized
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2. Performs appropriate physical exam

Consistently uses faulty technique or performs inappropriate exam; misses major findings	Frequently performs faulty or inappropriate exam; often misses findings	Performs exams of appropriate scope and accuracy; major findings identified	Exam thorough, accurate, and efficient	Exam superb, uncovering subtle and important findings
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3. Differential diagnosis

Fails to identify major problems; clinical reasoning markedly deficient	Differential often incomplete or reflects incorrect or illogical reasoning	Assesses most problems with a well-reasoned differential	Differential reflects understanding of pathophysiology and creative thought	Thorough differential of both major and minor issues with sophisticated reasoning
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4. Diagnostic tests and procedures

Doesn't understand indications for most lab tests or procedures	Knows indications of some lab tests and procedures	Understands indications for tests and procedures	Suggests uses of tests and procedures in relation to patient problems	Exceptionally mature use of tests and procedures
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5. Management plans

Treatment plans inadequate; fails to recognize when urgent treatment indicated	Plans often neglect important components	Plans are appropriate for major clinical issues	Plans are complete, and thoughtful; reflect understanding of pathophysiology	Superb plans reflecting comprehensive understanding of all clinical issues
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6. Oral Presentations

Missing major pieces of information; inaccurate reporting of information	Include essential data, but not well-organized; often include irrelevant facts	Accurate and well-organized	Accurate, comprehensive, fluent and focused; reflect solid grasp of clinical issues	Very mature and well-presented; reflect thorough understanding of diseases and patient situations
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7. Written notes

Not able to organize, summarize or explain clinical data; contain inaccurate data	Have essential data, but not well-organized	Accurate and well-organized	Accurate, comprehensive, succinct; reflect solid grasp of clinical issues	Very mature and well-written; reflect thorough understanding of diseases and patient situations
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II. LEARNING AND KNOWLEDGE

1. Basic medical knowledge

Inadequate knowledge base to care for patients	Knowledge base has deficits that require attention	Incorporates knowledge of medicine to care for patients appropriately	Knows more than expected for student at this level of training	Knowledge base is extraordinary and dramatically exceeds expectations
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Student Name: _____ Evaluator: _____

2. Knowledge of psychosocial and family issues

Ignores psychosocial and family issues	Underestimates importance of psychosocial and family issues	Appropriately inquires about psychosocial and family issues	Often takes psychosocial and family issues into account	Always fully integrates psychosocial issues into all aspects of patient care
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3. Use of medical literature and other resources to expand knowledge base and improve patient care

Fails or refuses to read, study or investigate	Reads only when asked; uses inappropriate sources	Looks up clinical data appropriately; reads up on patients' problems daily	Reads more broadly than patients' problems; applies readings to patient care	Reads extensively; seamlessly integrates knowledge with patient care
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III. PROFESSIONAL ATTRIBUTES

1. Dependability, motivation, responsibility and initiative

Unreliable; shirks responsibility; uninterested	Sometimes late or not able to complete responsibilities reliably	Punctual, dependable; accepts responsibility	Initiates action to improve own performance & patient care; seeks new responsibilities; works well independently
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2. Rapport and relationships with patients

Dramatic absence of patient-doctor communication skills	Establishes rapport with patients, but is often inept or inefficient	Earns trust & respect of patients; good listening skills; engenders confidence	Outstanding rapport; very sensitive to patients' unstated needs; is patient advocate
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3. Rapport and relationships with physicians, nurses, and other personnel

Disrespectful, rude and insensitive in office or hospital	At times fails to act collegially; communication unclear, incomplete, or disorganized	Strong communication skills and professional demeanor	Extremely mature; communicates expertly; seems like a partner
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4. Accepts instruction and feedback

Actively rebuffs or avoids change; doesn't recognize own limitations	"Chip on shoulder"; slow to change	Open to feedback and constructive criticism; picks up new skills and attitudes	Actively seeks feedback; grows with each encounter and learns from each mistake
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Summary comments: _____

Specific comments for improvements: _____

Please use one45 to submit final evaluation

If unable to access one45, then please complete this form and send to Carol Carden, Medicine Clerkship Coordinator
 5034 Old Clinic Building, CB# 7110, Chapel Hill, NC 27599-7110 Phone (919) 966-7776 Fax (919) 966-2274