

OBSERVED HISTORY & PHYSICAL

UNC Medicine Inpatient Clerkship

STUDENT'S NAME (PRINT) _____

EVALUATOR'S NAME (PRINT) _____

DATE OF EVALUATION _____

This evaluation is to be conducted by an attending physician, fellow, or chief resident (not by resident). About one hour should be designated for the evaluator to observe the student interviewing the patient and performing a physical examination. During this hour, the evaluator should remain inconspicuous.

At the conclusion of the exercise, the evaluator should discuss in detail the student's strengths and weaknesses.

1. CLINICAL SKILLS - HISTORY

Demonstrates consideration for the patient during the interview. Recognizes and interprets nonverbal clues. Allows the patient adequate time to tell about the illness in his/her own words, yet directs questions effectively to obtain the necessary information. Develops in chronological sequence an accurate description of the pertinent symptoms and events in the present illness. Obtains appropriately complete information in the past history, family history, and social history.

Circle: **Unsatisfactory = 1** **2** **3** **4** **5 = Outstanding**

Comments:

2. CLINICAL SKILLS - PHYSICAL EXAMINATION

Demonstrates concern for the patient's comfort and modesty. Enlists the patient's cooperation. Positions patient properly, applies skillfully the fundamental techniques of examination to each region. Follows a logical sequence of examination from one region to another, emphasizing those areas of importance suggested by the interview. Applies special techniques to help gather complete information about an abnormality. Modifies the examination to adapt to patient limitations imposed by illness.

Circle: **Unsatisfactory = 1** **2** **3** **4** **5 = Outstanding**

Comments:

3. HUMANISTIC ATTRIBUTES

Demonstrates the necessary human qualities and interpersonal skills which will allow the development of good patient-physician relationships. Demonstrates integrity, empathy, compassion and respect for the patient; exemplifies that the primary concern is for the patient's welfare. Appreciates the patient's perception of illness. Is careful to place the patient's problems in the context of the patient's life and history. Displays sensitivity to the patient's needs for comfort and encouragement.

Circle: **Unsatisfactory = 1** **2** **3** **4** **5 = Outstanding**

Comments:

4. OVERALL CLINICAL COMPETENCE (as demonstrated by this exercise)

Circle: **Unsatisfactory = 1** **2** **3** **4** **5 = Outstanding**

Comments:

Evaluator's Signature, Title

NOTE TO EVALUATOR & STUDENT

THIS FORM MUST BE COMPLETED AND DISCUSSED AT THE TIME OF ASSESSMENT. **UPON COMPLETION OF THIS EVALUATION, THE EVALUATOR MUST RETURN IT TO THE STUDENT.** THE STUDENT IS REQUIRED TO SUBMIT THE COMPLETED EVALUATION TO THE CLERKSHIP OFFICE FOR COURSE CREDIT. EVALUATORS MAY RETURN A SEPARATE SHEET OF PAPER WITH ADDITIONAL COMMENTS AT A LATER TIME IF THEY SO DESIRE.

Return evaluation to:

Carol Carden, Clerkship Coordinator
5034 Old Clinic Building, CB# 7110
Chapel Hill, NC 27599-7110
Phone (919) 966-7776
Fax (919) 966-2274