## Evaluation Forms

### Sample C: Rotation and Preceptor Forms

**Rotation Evaluation Form**

1. **PATIENT RESPONSIBILITIES**

|  |
| --- |
| 1. **ESTIMATED PATIENT NUMBERS**
* average daily number of patients assigned to your care \_\_\_\_\_\_\_\_
* average weekly number of ward or emergency consults \_\_\_\_\_\_\_\_
 |
| 1. **CASE MIX**
* Was there a reasonable variety of patients/problems (ie, medical, surgical, trauma, multisystem, CNS, intoxications, etc.)?  **Yes ⃝ No ⃝**

If no, please comment  |
| 1. **CLINICAL WORKLOAD (*please be specific – choose 1, 3, or 5*)**

 **1 3 5**Excessive, interfered with Inadequate to obtain appropriate Optimaleducational experience educational experience |
| 1. **SUPERVISION (*please be specific – choose 1, 3, or 5*)**

 **1 3 5**Patient care expectations Little or no opportunity to be Optimal balance ofclearly above level of trainee autonomous responsibility andand inadequate or inconsistent supervisionsupervision |
| 1. **28-HOUR RULE AND ACADEMIC HALF-DAY**

Were you able to:1. reasonably observe the 28-hour rule? **Yes ⃝ No ⃝**

 If no, why? 1. attend your academic half-day or call back?  **Yes ⃝ No ⃝**

 If no, why?  |

1. **INTERACTIONS WITH FACULTY**

|  |
| --- |
| 1. **ENVIRONMENT**

**1 2 3 4 5**Unfriendly, unpleasant Respectful and Friendly and made toand/or intimidating courteous feel integral part of team |
| 1. **STAFF AVAILABILITY**

**1 2 3 4 5**Difficult to reach/locate Routinely available Always available and easy to approach  |
| 1. **INVOLVEMENT IN CLINICAL DECISION-MAKING**

**1 2 3 4 5**Most decisions made Trainee aware/involved Trainee’s opinion without trainee’s in all major decisions solicited and consideredknowledge or input in all decisions |

**Rotation Evaluation Form**

1. **TEACHING**

|  |
| --- |
| 1. **INFORMAL (*patient-centered, during daily rounds*)**

**1 2 3 4 5**Minimal quantity Routinely provided/ Outstanding – always aand/or quality adequate quality component of patient rounds and emphasized evidence |
| 1. **FORMAL (*eg, seminars, divisional rounds, journal clubs, etc.*)**

**1 2 3 4 5**Grossly inadequate Occurred regularly and Excellent quality and number and quality were of reasonable trainees intimately involved relevance to trainee and emphasized evidence |
| 1. **PROCEDURAL/TECHNICAL SKILLS**

**1 2 3 4 5**Little or no opportunity Reasonable opportunity Routinely involved and to learn/undertake to learn/undertake supervised in all proceduralprocedures procedures skills |

1. **FEEDBACK**

|  |
| --- |
| 1. Did you receive an interim evaluation (verbal or written) **Yes ⃝ No ⃝**
 |
| 1. Was your final evaluation discussed with you at the end of the rotation? **Yes ⃝ No ⃝**
 |
| 1. Did staff review and critique your written and/or dictated notes/letters?

**1 2 3 4 5**Not at all Infrequently Sometimes Regularly Always |
| 1. Did staff review and critique your physical examination skills and findings?

**1 2 3 4 5**Not at all Infrequently Sometimes Regularly Always |

1. **OVERALL ASSESSMENT OF ROTATION**

|  |
| --- |
| 1. **OBJECTIVES MET**

**1 2 3 4 5**Few objectives met and/or Major objectives met Exceeded expectations in superficial exposure to and exposed to all all regards, comprehensiverelevant diseases important diseases exposure to all diseases |
| 1. **EFFECTIVENESS**

**1 2 3 4 5**Inadequate rotation with Worthwhile educational Extremely enjoyable andvery little learned experience valuable experience |

**Rotation Evaluation Form**

**HOW COULD THIS ROTATION BE IMPROVED?**

**WRITTEN COMMENTS/CLARIFICATION**

**Preceptor Evaluation Form**

**CLINICAL ATTRIBUTES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| 1. **KNOWLEDGE**
 |
| Significant gaps evident | Appropriate for commonclinical problems relevantto interest/discipline | Breadth and depth of knowledge for common, uncommon, and complex clinical problems |
| 1. **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 caseswith multiple problems and synthesize ideas with ease |
| 1. **ORGANIZATION**
 |
| Unable to make thoughtprocesses and opinionsunderstood | Clear and made basicconcepts and thoughts understood | Very organized approachto complex scenarios andable to make difficult issueseasy to understand |
| 1. **PROBLEM SOLVING**
 |
| Failed to consider all butthe most common or basic explanations or diagnoses | Provided a thoroughdifferential diagnosis andcareful decision-making | Able to provide explanationsof complex problems andregularly incorporate evidenceinto decision-making |
| 1. **RESPONSIBILITY**
 |
| Failed to review patients ina timely fashion and unawareof 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. |
| 1. **ROLE MODEL AS A CLINICIAN**
 |
| Failed to demonstratepositive attributes | Competent and credible | Type of physician onewould strive to emulate |

**TEACHING SKILLS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| 1. **FORMAL (SCHEDULED) TEACHING (if applicable)**
 |
| Failed to providescheduled rounds | Reliably presentedrelevant rounds | Frequently provided informative, stimulating, and interactive classroom teaching |
| 1. **INFORMAL TEACHING (in the context of patient care)**
 |
| Failed to answer questionsor provide explanationsfor clinical decisions | Regularly provided two or three teaching points per case | Made every case and clinicalissue a learning opportunity |
| 1. **RELEVANCE**
 |
| Discussed rare scenariosand/or clinically irrelevantaspects only | Focused on commonproblems and major issue | Able to teach in depth andalways around issues of relevance. Routinely accommodatedneeds and level ofunderstanding of trainee. |
| 1. **ROLE MODEL AS A TEACHER**
 |
| Should not be responsiblefor clinical teaching | Competent and credible | Type of teacher one wouldstrive to emulate |

**ATTITUDES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| 1. **RELIABILITY**
 |
| Rarely made rounds at appropriate or agreed upon times | Made rounds regularly and at agreed upon times | Routinely placed teaching commitments and times aboveall other responsibilities except urgent patient care |
| 1. **ENTHUSIASM**
 |
| Appeared disinterested or bored | Appeared to enjoy patient care and teaching responsibilities | Stimulated others to learn and provide excellent care |
| 1. **FEEDBACK**
 |
| Rarely provided directionor feedback | Routinely provided direction and offered feedback if asked | Always provided direction and regularly offered feedback |
| 1. **AVAILABILITY**
 |
| Difficult to locate and/or approach | Routinely available | Always available andeasy to approach |
| 1. **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 |
| 1. **RAPPORT**
 |
| Indifferent and disinterested | Courteous and professional | Genuinely interested in thewell-being, opinions, andneeds of trainee |

**TECHNICAL SKILLS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1 | 2 | 3 | 4 | 5 |
| 1. **ICU PROCEDURES**
 |
| Significant lack ofskills in their usewith unstable patients | Safe use and handlingof procedures and theiroptimal sequence | Uses advanced techniquesand masters theindications 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:

Signature of Trainee (optional)

Base Specialty (optional)

Date