



* indicates a mandatory response

LLU School of Medicine INTERNAL MEDICINE ICU Final Block Evaluation of Student

SECTION I - Clinical Skills

Descriptors:

UE - Unable to evaluate; not applicable.

Deficient - Lacks the skills necessary for success in the medical profession.

Marginal - At the lower limits of qualification for success in the medical profession.

Proficient - Manifests the skills necessary for success in the medical profession.

Using the descriptors above, please evaluate the student in each category below by checking the appropriate box. Students should be assessed commensurate with their level of training.

	UE	Deficient	Marginal	Proficient
Medical Interviewing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical Examination	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Technical and Procedural	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verbal Communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Written Communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Problem Solving and Synthesis	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinical Judgement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Time Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SECTION II - Professionalism

Descriptors:

UE - Unable to evaluate.

Major concerns -

This student has deficiencies that should be remediated prior to proceeding to the next level of training.

Some concerns -

This student could benefit from additional work in this area but should proceed to the next level of training.

No concerns -

This student possesses the professional qualities expected of a LLUSM graduate.

Using the descriptors above, please evaluate the student in each category below by checking the appropriate box. Students should be assessed commensurate with their level of training.

	UE	Major Concerns	Some Concerns	No Concerns
Honesty and Integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responsibility	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cooperation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Altruism	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-Directedness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Treats patients with unconditional positive regard	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teachable	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Models integrative / whole person medical care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

OVERALL CLINICAL PROFICIENCY

Select the best description of this student's overall performance compared to the other students at the same level of training.

- Bottom 10%
- Lower Third
- Middle Third
- Upper Third
- Top 10%

LEVEL OF RECOMMENDATION

Please select one of the following based on your interaction with this student.

- I do not recommend this student for postgraduate training.
- I recommend this student with reservations for postgraduate training.
- I recommend this student for postgraduate training.
- I recommend this student with confidence for postgraduate training.
- I give this student a high recommendation for postgraduate training.
- I give this student my highest recommendation for postgraduate training.

FORMATIVE COMMENTS (For use by those who may counsel the student. Please identify areas of strength and areas to be strengthened. Not for use in the Dean's Letter.)

SUMMATIVE COMMENTS (This section is typically used unedited in the student's Dean's Letter.)

The following will be displayed on forms where feedback is enabled...

(for the evaluator to answer...)

*Did you have an opportunity to meet with this trainee to discuss their performance?

- Yes
- No

(for the evaluatee to answer...)

*Did you have an opportunity to discuss your performance with your preceptor/supervisor?

- Yes
- No