

Evaluation of Student Performance in Clinical Curriculum:

COMPETENCY ASSESSMENT

Please circle (weeks: 1, 2, 3, 4, 5, or 6)

Student Name:			
Site:	OB	Gyn	Onc
Date:			
Evaluator:			
Knowledge of Subject: Includes level of knowledge and applications to clinical problems.			
<ul style="list-style-type: none"> <input type="checkbox"/> 1-Does not demonstrate understanding of basic principles <input type="checkbox"/> 2-Rarely demonstrates understanding of basic principles. <input type="checkbox"/> 3-Often demonstrates understanding of basic principles. <input type="checkbox"/> 4-Consistently demonstrates clear understanding of basic and some complex principles. Consistently applies knowledge to specific patient conditions. <input type="checkbox"/> 5-Almost always demonstrates mastery of basic and most complex principles. <input type="checkbox"/> N/A 			
Data-Gathering Skills: Includes basic history and physical examination.			
<ul style="list-style-type: none"> <input type="checkbox"/> 1-Does not obtain basic history and physical or key information and findings. <input type="checkbox"/> 2-Rarely obtains basic history and physical. Has difficulty gathering all the data or is easily side-tracked or has difficulty prioritizing. <input type="checkbox"/> 3-Often obtains basic history and physical. Information is organized and complete enough to make an assessment of major problems. <input type="checkbox"/> 4-Consistently obtains basic history and physical. Information is organized and complete and identifies and assesses all major and most minor problems. <input type="checkbox"/> 5-Almost always obtains basic history and physical. Information is complete, organized, and efficiently assesses all major and minor problems. <input type="checkbox"/> N/A 			
Clinical Reporting Skills: Includes oral case presentations, written or dictated notes, histories, and physical exams.			
<ul style="list-style-type: none"> <input type="checkbox"/> 1-Does not communicate medical history and physical exams in an organized or complete manner. Unable to communicate major points in explaining patient's story. <input type="checkbox"/> 2-Rarely communicates medical histories or physical exams in an organized or complete manner. Has difficulty with chronology or details of findings that makes the story difficult to interpret. <input type="checkbox"/> 3-Often communicates medical history and physical exams in an organized and complete manner. Presentation identifies and describes all major problems. <input type="checkbox"/> 4-Consistently communicates medical histories and physical exams in an organized and complete manner. Presentations identify and describe all major and most minor problems. <input type="checkbox"/> 5-Almost always communicates medical histories and physical exams in an organized and complete manner. Clear written and oral presentations. <input type="checkbox"/> N/A 			
Procedural Skills: Includes knowledge, preparation, performance, and attention to patient comfort and dignity.			
<ul style="list-style-type: none"> <input type="checkbox"/> 1-Not attentive to patient's comfort or dignity. Demonstrates poor motor skills that result in inadequate performance of tasks. Poor preparation for the task. <input type="checkbox"/> 2-Rarely attentive to patient's comfort or dignity. Rarely demonstrates good motor skills that result in an inadequate performance of the task. Incomplete preparation for the task. <input type="checkbox"/> 3-Often attentive to patient's comfort or dignity. Often demonstrates good motor skills that result in an adequate performance of task. Usually prepared for the task. <input type="checkbox"/> 4-Consistently attentive to patient's comfort and dignity. Consistently demonstrates good motor skills that result in an adequate performance of task. Consistently prepared for the task. <input type="checkbox"/> 5-Almost always attentive to patient's comfort and dignity. Almost always demonstrates excellent motor skills that result in an adequate performance of the task. Almost always prepared for the task and plans ahead for potential problems. <input type="checkbox"/> N/A 			

Integration Skills:

Includes problem-solving skills, ability to use data from patient interview, physical examination, and ancillary tests to identify major and minor patient problems in an organized and efficient manner.

- 1-Does not consistently identify major patient problems and issues.
- 2-Rarely able to independently identify and prioritize major problems. Rarely able to problem solve and organize efficiently.
- 3-Often able to independently identify and prioritize major problems. Often able to problem solve and organize efficiently.
- 4-Consistently able to identify and prioritize all major and most minor patient problems. Consistently able to problem solve and organize efficiently.
- 5-Almost always able to identify and prioritize all major and minor problems. Almost always able to problem solve and organize efficiently.

N/A

Management:

Includes order writing, initiative, practicality, and independence.

- 1-Does not offer an independent management plan or plan is unrealistic or illogical. All decisions deferred to others.
- 2-Rarely offers an independent plan and/or plan is often unrealistic or illogical.
- 3-Often offers an independent management plan that is realistic and logical.
- 4-Consistently offers an independent management plan that is logical and realistic. Plans are helpful to the team's management of the patient.
- 5-Almost always offers an independent management plan that is logical and realistic. Plans are well focused and on target and become part of the team's management of the patient.

N/A

Patient Centered Care:

Includes eliciting and negotiating agenda; eliciting patient's perspective of illness; and negotiating treatment plan.

- 1-Does not integrate biomedical and psychosocial perspective into care plan and patient management. Does not elicit patient's perspective of his/her illness. Does not elicit and negotiate agenda with patient. Does not negotiate treatment plan with pts.
- 2-Rarely integrates biomedical and psychosocial perspective into care plan and patient management. Rarely elicits the patient's perspective of his/her illness. Rarely elicits and negotiates agenda with patients. Rarely negotiates treatment plan with pts.
- 3-Often integrates biomedical and psychosocial perspective into care plan and patient management. Often elicits the patient's perspective of his/her illness. Often elicits and negotiates agenda with patients. Often negotiates treatment plan with pts.
- 4-Consistently integrates biomedical and psychosocial perspective into care plan and patient management. Consistently elicits the patient's perspective of his/her illness. Consistently elicits and negotiates agenda with patients.
- 5-Almost always integrates biomedical and psychosocial perspective into care plan and patient management. Almost always elicits the patient's perspective of his/her illness. Almost always elicits and negotiates agenda with patients.

N/A

Communication Skills with Patients, Families, Colleagues, and Staff:

Includes ability to modify communication style and ability to listen and constructively resolve conflicts.

- 1-Does not communicate information effectively. Does not have an awareness to modify communication style and content to situation. Unable to establish rapport. Unable to listen and be silent. Not culturally proficient.
- 2-Rarely communicates information effectively. Rarely has an awareness to modify communication style and content to situation. Rarely able to establish rapport. Rarely able to listen and be silent. Rarely culturally proficient.
- 3-Often communicates information effectively. Often modifies an awareness to modify communication style and content to situation. Often able to establish rapport. Often able to listen and be silent. Often culturally proficient.
- 4-Consistently communicates information effectively. Consistently has an awareness to modify communication style & content to situation. Consistently able to establish rapport. Consistently able to listen & be silent. Consistently culturally proficient.
- 5-Almost always able to communicate information effectively. Almost always able to modify communication style & content to situation. Almost always able to establish rapport. Almost always able to listen & be silent. Almost always culturally proficient.

N/A

Relationships with Patients and Families:

Includes courtesy, empathy, respect, compassion, and understanding the patient's perspective.

- 1-Disrespectful, indifferent, callus, discourteous or condescending. Does not solicit the patient's perspective. Imposes own personal values on patient when in conflict with their own. Violates HIPAA including patient confidentiality.
- 2-Rarely shows respect, empathy, and compassion. Rarely solicits the patient's perspective. Rarely respects patient's values or imposes own personal values on patient when in conflict with his/her own.

- 3-Often demonstrates respect, empathy, and compassion. Often solicits the patient's perspective. Often respects the patient's values, even when in conflict with his/her own.
- 4-Consistently demonstrates respect, empathy, and compassion. Consistently able to solicit the patient's perspective. Consistently respects the patient's values even when in conflict with his/her own.
- 5-Almost always shows respect, empathy, and compassion. Almost always able to solicit the patient's perspective. Almost always respects the patient's values even when in conflict with his/her own.
- N/A

Professional Relationships:

Ability to work collaboratively with team members, including faculty, staff, and other students; courteous and cooperative attitude; maintains composure in times of stress.

- 1-Does not collaborate and/or establish appropriate relationships with team. Does not respect team members within and across specialties. Not compassionate when interacting with team. Does not clarify expectations or clinical responsibilities.
- 2-Rarely collaborates and/or establishes appropriate relationships with team. Rarely respects the roles of team members within and across specialties. Rarely is compassionate when interacting with team.
- 3-Often collaborates and/or establishes appropriate relationships with team. Often recognizes and respects roles of all team members within and across specialties. Often is compassionate when interacting with team.
- 4-Consistently collaborates and/or establishes appropriate relationships with team. Consistently recognizes and respects roles of team members within and across specialties. Consistently compassionate when interacting with team.
- 5-Collaborates well with entire team and seeks to improve team function. Always recognizes and respects roles of team members within and across specialties and works to improve team cohesion. Almost always compassionate when interacting with team.

N/A

Educational Attitudes:

Includes active participation in learning, self-reflection, and responsiveness to feedback, and provides respectful and constructive feedback.

- 1-Does not do what is required. Does not respond appropriately to feedback. Does not reflect on his/her own knowledge base. Does not participate in educational experiences. Is not actively engaged in learning. Argumentative or hostile with feedback.
- 2-Rarely does what is required. Rarely responds appropriately to feedback. Rarely reflects on his/her own knowledge base. Rarely participates in educational experiences. Rarely is actively engaged in learning.
- 3-Often does what is required. Often responds appropriately to feedback. Often reflects on his/her own knowledge base. Often participates in educational experiences. Often is actively engaged in learning.
- 4-Consistently does what is required. Consistently responds appropriately to feedback. Consistently reflects on his/her own knowledge base. Consistently participates in educational experiences. Consistently is actively engaged in learning.
- 5-Actively participates in all activities. Actively seeks feedback and responds appropriately. Initiates self-assessment and teaches others. Almost always participates in educational experiences. Almost always is actively engaged in learning.

N/A

Dependability and Responsibility

Includes attendance, preparation, and personal appearance. Maintains personal honor and integrity.

- 1-Frequently late without a legitimate reason or unprepared. Does not follow through with assigned tasks. Not trusted to work independently. Dishonest in any way. Does not maintain appropriate appearance. Absent without an excuse.
- 2-Occasionally late or unprepared. Rarely follows through with assigned tasks. Rarely trusted to work independently.
- 3-On time and prepared. Often follows through with assigned tasks. Often trusted to work independently and knows limits and asks for help when needed.
- 4-On time and prepared. Follows through with assigned tasks and often volunteers additional effort to follow through with patient care. Consistently trusted to work independently and knows limits and asks for help when needed.
- 5-On time and prepared for required and optional activities. Follows through with assigned tasks and consistently volunteers additional effort to follow through with patient care. Almost always trusted to work independently and knows limits.

N/A

Based on the evaluations submitted on the student's performance, indicate what you feel the student's recommended clinical grade is at this time.

- Honors
- High Pass
- Pass
- Fail

Reminders:

Please remind your student of the following requirements during the clerkship: 2 history and physical write ups, pelvic CEX, breast CEX. Practicing the uWise quizzes and tests are recommended. Please notify the site or clerkship director if exceeding 80 hours/week.

Strengths:**Suggestions for Improvement:****Evaluator Signature:****Student Signature:**