

M3 Evaluation Form



College of Medicine

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Preceptor Summative Evaluation

Student Name: [REDACTED]

Rotation: 7/29/2019 - 8/23/2019

Course Name: 26920371 - Family Medicine Core Clksp

[Prelim Preceptor Comments](#)

Directions: Please select the category that best describes the student's performance.

Clinical performance					
Obtains history *	<input type="radio"/> Does not collect accurate historical data	<input type="radio"/> Gathers incomplete or excessive data or is disorganized	<input type="radio"/> Gathers an accurate history in an organized fashion	<input type="radio"/> Demonstrates mature communication skills of silence, open-ended questioning, body language to gather an accurate history	<input type="radio"/> Did not observe
Performs physical examination *	<input type="radio"/> Incorrectly performs basic exam techniques; routinely misses major findings	<input type="radio"/> Performs basic exam techniques correctly; occasionally misses major findings	<input type="radio"/> Performs exam techniques correctly and identifies major findings	<input type="radio"/> Performs an accurate exam in a logical and fluid sequence; and identifies major and minor findings	<input type="radio"/> Did not observe
Generates differential diagnoses *	<input type="radio"/> Proposes a differential that is missing major diagnoses	<input type="radio"/> Proposes differential that has major diagnoses but is not well prioritized	<input type="radio"/> Proposes differential that has major diagnoses and is well prioritized	<input type="radio"/> Proposes differential that has major and more subtle diagnoses and is well prioritized	<input type="radio"/> Did not observe
Demonstrates clinical decision making (CDM) *	<input type="radio"/> Cannot explain or document CDM. Lacks basic medical knowledge to reason effectively	<input type="radio"/> CDM is adequate for straightforward cases but still building competency on complex cases	<input type="radio"/> Explains and documents CDM even in complex cases	<input type="radio"/> CDM for all cases is comprehensive and informed by evidence	<input type="radio"/> Did not observe
Documents a clinical encounter *	<input type="radio"/> Writes notes that are missing major elements or are disorganized	<input type="radio"/> Writes notes that are missing some elements or are verbose or not well organized	<input type="radio"/> Writes organized notes that contain important major details	<input type="radio"/> Writes comprehensive, concise notes that accurately reflect the clinical encounter	<input type="radio"/> Did not observe
Performs patient presentations *	<input type="radio"/> Presents in a disorganized or incoherent manner	<input type="radio"/> Presents a story that is imprecise because of extraneous or omitted information	<input type="radio"/> Presents all major details in organized fashion	<input type="radio"/> Filters, synthesizes and prioritizes information into a concise and well-organized presentation	<input type="radio"/> Did not observe
Communicates with patients *	<input type="radio"/> Communication disregards patients' needs as evidenced by lack of empathy, respect, or awareness of unique patient characteristics	<input type="radio"/> Communication is sometimes difficult for patients to follow (interruptions, jargon, unintentional disrespect)	<input type="radio"/> Communication is usually clear to patients with appropriate jargon, respect, and awareness of unique patient needs	<input type="radio"/> Communication is appropriate, respectful, and tailored to each patient	<input type="radio"/> Did not observe

Learning Habits					
Participates as a member of the inter professional team *	<input type="radio"/> Disengaged from the team as evidenced by lack of participation, and disregards input from others.	<input type="radio"/> Engages with team tasks and participates when prompted, listens to input from interprofessional team members	<input type="radio"/> Frequently engaged, actively participates in team-based care, integrates input from interprofessional team members	<input type="radio"/> Actively engages in team-based care, integrates input from patients and interprofessional team members	<input type="radio"/> Did not observe
Demonstrates curiosity *	<input type="radio"/> Does not seek answers to questions during clinical care (on their own or with the team)	<input type="radio"/> Only independently seeks answers when major issues arise or depends on the team to answer most questions	<input type="radio"/> Attempts to seek independent answers and can review literature for minor and major questions	<input type="radio"/> Forms mature and relevant clinical questions and seeks independent answers	<input type="radio"/> Did not observe
Accepts feedback *	<input type="radio"/> Does not accept feedback and lacks insight into own behavior	<input type="radio"/> Acknowledges feedback, but does not take action to improve	<input type="radio"/> Accepts feedback and takes appropriate action when needed.	<input type="radio"/> Accepts feedback and consistently incorporates feedback into daily routine	<input type="radio"/> Did not observe
Knows his/her own limitations *	<input type="radio"/> Demonstrates little insight into own limitations; often careless with regard to patient care	<input type="radio"/> Demonstrates occasional insight into own deficiencies or limitations; does not proactively seek feedback	<input type="radio"/> Recognizes own limitations, and seeks feedback	<input type="radio"/> Routinely able to seek and respond to feedback in a positive and mature way; always responds to feedback with improvement	<input type="radio"/> Did not observe
Professionalism (i.e. is on time, professional appearance, sensitive to diverse population, respects confidentiality and demonstrates honesty) *	<input type="radio"/> Major concerns	<input type="radio"/> Minor concerns	<input type="radio"/> No concerns	If you chose major or minor concerns for this item please document why here.	

QUALITATIVE FEEDBACK

Instructions: Please comment on the following areas. Your comments should be consistent with the categories you selected above

Comments to be included in the MSPE (Medical Student Performance Evaluation (Dean's Letter))

Include strengths and any opportunities for improvement (including evidence of demonstrating effort to improve) *

Patient Care/Clinical Comments

- Obtaining a history
- Performing a physical examination
- Generating a differential diagnoses
- Demonstration of clinical decision making
- Documenting a clinical encounter
- Performing patient presentations

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Interpersonal/Professionalism

- Interpersonal and communication skills
- Professionalism/work ethic

Rich text editor toolbar with icons for Bold (B), Italic (I), Underline (U), Bulleted List, Numbered List, Indent, Outdent, Undo, Redo, and a dropdown menu showing 'ab+'. Below the toolbar is a large empty text area for input. At the bottom of the editor, there are tabs for 'Design' and 'HTML'.

Additional opportunities for improvement based on feedback from faculty/residents who have worked with the student (not to be included in the MSPE (Dean's Letter))

Rich text editor toolbar with icons for Bold (B), Italic (I), Underline (U), Bulleted List, Numbered List, Indent, Outdent, Undo, Redo, and a dropdown menu showing 'ab+'. Below the toolbar is a large empty text area for input. At the bottom of the editor, there are tabs for 'Design' and 'HTML'.

General Information *

1. This evaluation is based on the student's participation in the care of: SINGLE Patient MULTIPLE Patients
2. Please identify how many days you worked with the student (rounded to the nearest 1/2 day)
3. Identify the name(s) of the faculty/resident(s) who contributed to overall rating.

Large empty text area for providing names of faculty/residents.

- Reviewed with Student
- I have completed filling out this form and I am ready to submit it.

