Evaluation Form

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(NEW) Preceptor Evaluation of Student Performance

Evaluator: _____

Evaluation of: _____

Date: _____

Patient Encounter

						N/A
1. Perform and interpret a relevant, problem-focused history and physical examination in a patient (PC1)*	☐ Inaccurate. Often misses important information. Patient concern poorly characterized.	☐ Incomplete or unfocused. Sometimes misses important information. History not fully characterized.	☐ Obtains basic history, characterizes most patient concerns and identifies new problems in an organized manner	☐ Precise, characterizes all patient concerns and new problems fitting to the clinical setting. Utilizes multiple information sources.	☐ Efficient, characterizes all problems fully. Integrates information obtained from multiple sources. Identifies subtleties including psychosocial impact.	☐ Not applicable
2. Communicate effectively with patients and their families by listening attentively, allowing opportunities for questions, and maintaining appropriate eye contact (ISC2)*	☐ Often misses patient's concerns. Does not recognize emotional cues. Tactless or rude. Uses slang.	☐ Maintains appropriate eye contact. Sometimes misses patient's concerns and emotional cues. Often uses medical jargon.	☐ Listens attentively. Allows opportunities for questions. Uses language effectively, without jargon.	☐ Identifies nonverbal cues and hidden patient concerns. Consistently responds to patients concerns, perspectives, and feelings.	☐ Modifies communication style based on patient reactions and ability to understand. Consistently engages in respectful dialogue.	☐ Not applicable
3. Demonstrate responsiveness to the whole patient by advocating for the patients' and teams' needs over their own and treating patients in a fair, unbiased, nonjudgmental manner (P1)*	☐ Avoids personal contact, tactless, rude, disrespectful.	☐ Insensitive to patient comfort, privacy, or setting.	☐ Sympathetic, respectful of privacy, develops rapport, gains trust.	☐ Nonjudgmental. Advocates for patients' and teams' needs over their own. Consistently, demonstrates empathy.	☐ Seen as primary provider by patients/teachers. Preferred provider of patient.	☐ Not applicable
4. Identify a patient's social context and analyze how it relates to their current state of health (SBP2)*	☐ Does not recognize patients' social/behavioral context. Unable to apply knowledge of social determinants of health or to predict impact of social context on health status.	☐ Recognizes the patient's social/behavioral context. Describes the relevant social determinants of health. Attempts to describe the impact on patient's health status. Accuracy and completeness may be lacking.	☐ Identifies key aspects of the patient's social/behavioral context and beginning to analyze the impact on health status.	☐ Accurately identifies and determines the impact of social/behavioral context on health status.	☐ Accurately determines the impact on health status. Begins to formulate a patient-centered management plan that incorporates the patient's social/behavioral context.	☐ Not applicable

5. Please provide written feedback comments for the student. Feedback is most helpful to students when it is specific. For example, listing one or two specific things students did or omitted in the patient encounter that led you to give them the ratings you gave in this section, and giving one two specific ways in which the student can continue to develop in performing the patient encounter. *

Clinical Reasoning

						N/A
6. Differentiate normal and abnormal structure, function, growth, and/or development in a patient (MK1) Explain the etiology, progression, and/or prognosis of diseases, injuries, and functional deficits commonly seen in patients (MK2) Recognize clinical presentations and explain the underlying pathology and pathophysiology of diseases, injuries, and functional deficits commonly seen in patients (MK3) Describe the diagnosis, prevention, treatment, or management of common of diseases, injuries, and functional deficits commonly seen in patients (MK4)*	☐ Does not recognize typical clinical presentations of common diseases, injuries, and/or functional deficits.	☐ Recognizes typical clinical presentations of common diseases, injuries, and functional deficits.	☐ Describes basic pathophysiology of common diseases, injuries, and functional deficits.	☐ Identifies prevention, therapeutic, or management based on pathophysiology of common disease, injuries, and functional deficits.	☐ Consistently analyzes diagnostic, prevention, therapeutic, or management options.	☐ Not applicable
7. Formulate and justify a prioritized problem list and differential diagnosis in a patient (PC2)*	☐ Incomplete problem list. Differential not attempted.	☐ Consistently identifies a complete problem list. Attempts a differential diagnosis.	☐ Complete, prioritized problem list. Consistently identifies a basic differential diagnosis.	☐ Consistently generates an expanded differential diagnosis. Prioritizes and attempts to defend differential diagnosis.	☐ Consistently generates a complete, patient-centered differential, including psychosocial issues. Accurately defends differential.	☐ Not applicable
8. Formulate and justify a plausible plan of care for a patient (PC3)*	☐ Suggests inappropriate treatment options with the potential to adversely affect the patient.	☐ Formulates incomplete/unlikely diagnostic and therapeutic plans. Weak or absent connection with H&P/differential.	☐ Formulates a plausible diagnostic and therapeutic plan. Correlates to details from H&P/differential.	☐ Formulates an accurate, patient-center diagnostic and therapeutic plan. Provides basic justification.	☐ Justifies patient-center diagnostic and therapeutic plan based on current scientific information.	☐ Not applicable

9. Please provide written feedback comments for the student. Feedback is most helpful to students when it is specific. For example, listing one or two specific things students did or omitted in the patient encounter that led you to give them the ratings you gave in this section, and giving one two specific ways in which the student can continue to develop in performing the patient encounter. *

Professionalism, Self-Directed Learning and Interacting with the Healthcare Team

						N/A
10. Demonstrate responsibility for one's own learning through daily preparation, full participation in learning activities, initiative in patient care, and timely completion of clerkship requirements. Act in a professional manner by demonstrating compassion, respect, honesty, integrity, and punctuality (P2)*	☐ Unexplained absences, or unreliable.	☐ Needs prompting to complete tasks. Follow-up is inconsistent.	☐ Completes all assigned tasks without prompting. Punctual.	☐ Seeks additional responsibility. Pro-active follow-up.	☐ Demonstrates full personal ownership all clerkship duties and patient care.	☐ Not applicable
11. Seek, accept, and apply feedback to clinical practice (PBLI2)*	☐ Rejects feedback. Defensive or argumentative. Avoids responsibility. Attempts to blame others.	☐ Listens to feedback. No personal ownership for growth. Minimal improvement.	☐ Accepts feedback.Takes ownership for improvement and generally improves.	☐ Seeks feedback. Participates in bi-directional feedback. Consistently improves.	☐ Initiates bi-directional feedback for goal-directed improvement. Continuously improves.	☐ Not applicable
12. Respond to clinical questions by independently seeking, analyzing, and synthesizing evidence-based answers to advance clinical decision-making (PBLI1)*	☐ Makes little/no effort to improve preceptor-identified knowledge gaps. Fails to correct deficit after repeated questioning.	☐ Fills preceptor-identified knowledge gaps with independent reading.	☐ Fills self-identified knowledge gaps with independent reading. Accepts ownership of self-education.	☐ Engages in independent reading to prepare in advance.	☐ Evaluates and integrates relevant, evidence-based information to advance clinical decision making.	☐ Not applicable
13. Identify the role and contributions of and establish respectful, effective relationships with the various members of the multi-professional health care team (SBP1)*	☐ Disrespectful, disruptive, or antagonistic to team members.	☐ Lacks consideration for others. Oversteps student role in team.	☐ Respectful of team members. Communicates effectively with team. Cooperative and productive team member.	☐ Builds a good rapport with all inter-professional colleagues.	☐ Establishes tone of mutual respect and dignity. Places others' needs before his/her own.	☐ Not applicable
14. Communicate effectively with members of the healthcare team (ISC1)*	☐ Tactless or rude. Does not listen attentively, requiring repeated requests or reminders of discussions.	☐ Listens attentively and can summarize information discussed but uneasy, or incomplete sharing of information across professions/disciplines.	☐ Obtains and shares most information accurately across professions/disciplines.	☐ Obtains and shares information accurately across professions/disciplines. Begins to incorporate other team member's perspectives.	☐ Seeks inter-professional input. Consistently identifies team members' perspectives and responds to concerns.	☐ Not applicable
15. Share information accurately in academic and clinical settings both in oral presentations and written documentation including in the medical record (ISC5)*	☐ Does not know facts about patients. Reports inaccurate information.	☐ Major omissions. Often includes irrelevant facts.	☐ Maintains format. Consistently includes all basic information.	☐ Fluent, concise, and complete.	☐ Tailored to clinical setting. Assigns priority to issues.	☐ Not applicable

No	Yes	N/A

16. Did the student adhere to ethical and legal principles in all interactions with patients and the healthcare team (e.g. HIPAA, informed consent etc.)? (P3)*	☐	☐	☐

17. Please provide written feedback comments for the student. Feedback is most helpful to students when it is specific. For example, listing one or two specific things students did or omitted in the patient encounter that led you to give them the ratings you gave in this section, and giving one two specific ways in which the student can continue to develop in performing the patient encounter. *

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Entrustability

The following is to be used for formative feedback ONLY for the student to assist in defining their level of entrustability pertaining to the following items which encompass multiple competencies.

						N/A
18. Discernment: Awareness of limits of one's knowledge and skill*	☐ Does not seek or acknowledge limits. Overly confident. Jumps to conclusions.	☐ Seeks to understand one's own role and how/when to seek help.	☐ Demonstrates understanding of one's own role, its limits, and how and when to seek help.	☐ Accepts advancing responsibility while appropriately one's own limits and seeking help when needed.	☐ Proactively anticipates situations requiring help and seeks help from appropriate sources when needed.	☐ Not applicable
19. Conscientiousness: Thoroughness and dependability in following through with assigned tasks*	☐ Neglects to follow protocols	☐ Follows a simple template or guide	☐ Applies a variety of simple templates and guides	☐ Follows protocols in a variety of different clinical contexts	☐ Is accountable, evidence-based, systematic and thorough	☐ Not applicable
20. Conscientiousness: Thoroughness and dependability in following through with assigned tasks*	☐ Is disorganized or neglects important details.	☐ Is unable to apply past experience. May have difficulty conceptualizing information.	☐ Is able to organize aspects of common situations though may still become disorganized with increased load or complexity.	☐ Is mostly organized, identifies and prioritizes tasks though may demonstrate lapses in times of stress.	☐ Proactively prioritizes and organizes for self and team. Manages conflicting duties effectively in nearly all situations.	☐ Not applicable