



Final Clerkship Evaluation Form

Student	_____	Report Covers	From	To
Clerkship	_____	Evaluator	_____	_____

Instructions: Please select the most appropriate rating for each category. The average student's performance will fall within the shaded boxes. Most evaluations should be within these boxes.

Definition of the Rating Scale

- 0 = Unable to evaluate.**
- 1 = Unsatisfactory:** Fails to meet expectations.
- 2 = Marginal:** Difficulty meeting expectations; needs additional help.
- 3 = Meets Expectations:** Majority of the time meets expectations.
- 4 = Commendable:** Frequently exceeds expectations.
- 5 = Excellent:** Consistently exceeds expectations.

	UE 0	UNS 1	MAR 2	MEE 3	COM 4	EXC 5
I. Clinical Performance						
History and Physical Examination Performs an appropriate history and physical examination and accurately records information in format prescribed.	___	___	___	___	___	___
Diagnosis and Patient Management Develops appropriate diagnostic alternatives and management plans and provides appropriate follow-up for patients.	___	___	___	___	___	___
Technical and Procedural Skills Understands the rationale for and demonstrates proficiency in required skills.	___	___	___	___	___	___
Communication Skills (written/oral) Demonstrates by formal presentation and written notes good use of medical terminology and an organized presentation of information; expresses thoughts/ideas clearly and logically.	___	___	___	___	___	___
Comments (Strengths and Weaknesses)						

II. Knowledge and Clinical Reasoning						
Background Knowledge (Basic Science/General) Displays an understanding of basic medical and scientific principles—anatomy, physiology, chemistry, pathology, etc.	___	___	___	___	___	___
Knowledge of Discipline Based on Performance Displays an understanding of the pathophysiology of diseases and mechanisms of therapy specific to the discipline during rounds, conferences and during patient interactions with various clinical settings.	___	___	___	___	___	___
Knowledge of Discipline Based on Tests Test scores indicate accurate knowledge of pertinent facts and concepts of clerkship curriculum	___	___	___	___	___	___
Problem-Solving/Application of Knowledge Clearly identifies problems; collects and integrates relevant data; formulates logical solutions; shows evidence of critical thinking.	___	___	___	___	___	___
Comments (Strengths and Weaknesses)						

	UE 0	UNS 1	MAR 2	MEE 3	COM 4	EXC 5
III. Noncognitive Behaviors						
Self-Directed Learning Displays professional interest and curiosity; is dedicated and committed to work; is a self-motivated and independent learner; seeks help, advice or consultation when appropriate; makes efficient use of time.	—	—	—	—	—	—
Interpersonal Relationships Cooperates and works efficiently with faculty, colleagues and other health professionals; is sensitive to and communicates well with patients/families.	—	—	—	—	—	—
Motivation/Dependability/Responsibility Conscientious and punctual in fulfilling responsibilities; displays initiative, diligence, and integrity; shows evidence of sound judgment as well as personal and professional maturity.	—	—	—	—	—	—
Comments (Strengths and Weaknesses)						

SUMMARY STATEMENT OF OVERALL ACADEMIC PERFORMANCE

(Summary comments should reiterate the student's major strengths and weaknesses, emphasizing the future potential of the student as a resident and practicing physician. These statements are critical in constructing the Dean's letter, which affects placement.)

Recommendation:

- This student was granted Honors in this clerkship.
- This student has completed this experience in a **satisfactory** manner with excellent ratings in the following categories:
 - clinical performance
 - knowledge and clinical reasoning
 - noncognitive behaviors
- This student has completed this experience in a **satisfactory** manner.
- This student has **Not** completed this experience in a satisfactory manner. Remediation is recommended as follows:

Signature – Faculty Preceptor

Date

Signature – Clerkship Director

Date