

OBGY 730- Medical Student Clinical Assessment

[Insufficient contact to evaluate](#) (delete evaluation)

Thank you for your help evaluating our student. For the student listed above, please answer the following questions. If you feel you have not had enough time with the student in order to evaluate them, please click the "Insufficient Contact to Evaluate" link above. If you have questions about this form, please contact Sara Kener at keners@ohsu.edu.

	Early Learner				Advanced	Not Observed	
1. Student/Preceptor Communication around patient care (e.g., presenting information to preceptors)*	<input type="radio"/> <ul style="list-style-type: none"> - Communication regarding patient care disorganized/incomplete 	<input type="radio"/> <ul style="list-style-type: none"> - Communication lacks focus & may give information out of sequence 	<input type="radio"/> <ul style="list-style-type: none"> - Communication generally organized; may not be succinct in delivery 	<input type="radio"/> <ul style="list-style-type: none"> - Communication of information succinct but some organizational problems exist 	<input type="radio"/> <ul style="list-style-type: none"> - Communication of information directive, succinct, & complete in routine clinical patient 	<input type="radio"/> <ul style="list-style-type: none"> - Communication of information tailored & reasoned in complex clinical patient 	<input type="radio"/>
2. Student ability to gather patient-related data (e.g. history, examination, laboratory as assessed either through direct observation or indirectly through presentations)*	<input type="radio"/> <ul style="list-style-type: none"> -- Information gathered incomplete or includes irrelevant information. -- Findings inconsistent with preceptor's findings. 	<input type="radio"/> <ul style="list-style-type: none"> - All information needed to diagnose patient gathered, but may contain impertinent information or lack key contributing factors. -- Findings may not be reproducible by preceptor. 	<input type="radio"/> <ul style="list-style-type: none"> -- Information gathered completely, including key contributing factors. -- All findings reproducible except for subtle signs/nuanced history. 	<input type="radio"/> <ul style="list-style-type: none"> -- Information completely gathered from readily available sources, appropriate filtering of irrelevant data. - All findings reproducible 	<input type="radio"/> <ul style="list-style-type: none"> - Information gathered completely and filtered efficiently with appropriate use of outside sources to find key missing information 	<input type="radio"/> <ul style="list-style-type: none"> - Information gathered completely and filtered efficiently with appropriate use of outside sources to find key missing information even with clinically or socially complex patients 	<input type="radio"/>
3. Applying medical knowledge in patient care*	<input type="radio"/> <ul style="list-style-type: none"> - Inability to recall appropriate information in the care of patients 	<input type="radio"/> <ul style="list-style-type: none"> -- Can recall core principles, but lacks depth to apply correctly in clinical situations 	<input type="radio"/> <ul style="list-style-type: none"> -- Can recall core principles and applies to common disease presentations 	<input type="radio"/> <ul style="list-style-type: none"> -- Can recall core principles and usually applies them to common diseases and typical variant states 	<input type="radio"/> <ul style="list-style-type: none"> - Readily applies general pathophysiology of common disease and typical variant states to patient's clinical situation 	<input type="radio"/> <ul style="list-style-type: none"> -- Applies disease specific pathophysiology in the care of the patient even for rare diseases or atypical variants of common diseases 	<input type="radio"/>
4. Clinical reasoning*	<input type="radio"/> <ul style="list-style-type: none"> -- Difficulties identifying major clinical problems or differential dx not supported clinically. - Inefficient when managing information. 	<input type="radio"/> <ul style="list-style-type: none"> - Identifies major clinical problems but unorganized list for differential dx. - Gets bogged down in details when managing information 	<input type="radio"/> <ul style="list-style-type: none"> - Identifies major clinical problems. -- Differential diagnosis is organized, but not prioritized. -- Usually has adequate understanding of information needed to manage care 	<input type="radio"/> <ul style="list-style-type: none"> -- Identifies major clinical problems and establishes prioritized differential diagnosis. -- Always has adequate understanding of information needed to manage care 	<input type="radio"/> <ul style="list-style-type: none"> -- Efficient in use of clinical information. - Differential dx reflects individual patient rather than text book work-up 	<input type="radio"/> <ul style="list-style-type: none"> -- Excellent analysis of clinical problems. - Very efficient with information management 	<input type="radio"/>
5. Identifying appropriate treatment approaches*	<input type="radio"/> <ul style="list-style-type: none"> - UNABLE to identify appropriate treatment approaches, even for common/urgent conditions. 	<input type="radio"/> <ul style="list-style-type: none"> - ABLE to identify SOME treatment approaches for common/urgent conditions. - UNABLE to provide supporting evidence for ANY treatments. 	<input type="radio"/> <ul style="list-style-type: none"> - ABLE to identify MOST treatment approaches for common/urgent conditions. - UNABLE to provide supporting evidence for MOST treatments. 	<input type="radio"/> <ul style="list-style-type: none"> -- ABLE to treat common/urgent conditions but is UNABLE to suggest treatments for uncommon conditions. -- INCONSISTENTLY provides evidence to support treatments. 	<input type="radio"/> <ul style="list-style-type: none"> - ABLE to treat common/urgent conditions with appropriate evidence to support decision. -- ABLE to suggest treatments for SOME uncommon conditions. 	<input type="radio"/> <ul style="list-style-type: none"> -- ABLE to treat common/urgent condition. - ABLE to appropriately suggest treatments for uncommon conditions based on BEST available evidence. 	<input type="radio"/>
6. Professional behaviors with patients, peers and other health professionals*	<input type="radio"/> <ul style="list-style-type: none"> -- DOES NOT approach role as medical student with honor and integrity. -- OFTEN does not attend key events or is late. - IS NOT respectful of patients, peers and other health professionals 	<input type="radio"/> <ul style="list-style-type: none"> - OCCASIONALLY approaches role as medical student with honor and integrity. - OCCASIONALLY does not attend key events or is late. - IS NOT always respectful of patients, peers and other health professionals 	<input type="radio"/> <ul style="list-style-type: none"> - USUALLY approaches role as medical student with honor and integrity. -- USUALLY attends key events and is RARELY late. - Is USUALLY 	<input type="radio"/> <ul style="list-style-type: none"> - ALWAYS approaches role as medical student with honor and integrity. - Is USUALLY prepared and attendance is GOOD. - Is ALWAYS respectful of patients, peers and other health professionals 	<input type="radio"/> <ul style="list-style-type: none"> - ALWAYS approaches role as medical student with honor and integrity. - Is prepared and on time. -- Is ALWAYS respectful of patients, peers and other health professionals 	<input type="radio"/> <ul style="list-style-type: none"> -- ALWAYS approaches role as medical student with honor and integrity. -- ALWAYS well prepared and often arrives early. - Spontaneous praise is received from patients, peers or other health professionals. 	<input type="radio"/>

respectful of patients,
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Professionalism Concerns

If you have any concerns about this student's professionalism, please indicate your concerns here and provide descriptive comments in the space provided.

7. Are there any areas of this student's professionalism that are concerning? If so, please select the appropriate area(s) of concern and describe in the comments below. If not, please select the "No professionalism concerns" option.*

- No professionalism concerns
- Inadequate sensitivity to diversity
- Inadequate respect for patient privacy
- Inappropriately handles difficult conversations
- Inadequate responsiveness to patient needs
- Inadequate understanding of own limitations
- Does not sufficiently demonstrate honesty/integrity
- Does not sufficiently demonstrate Teamwork
- Other area not listed here (please describe below)

If you have noted professionalism concerns above, please provide comments about the student's professionalism (not for the Dean's Letter, but required if concerns were noted)

Comments

Please use the spaces below to provide comments about the student's overall performance.

8. Summary comments on overall student performance to be used on MSPE (Dean's Letter): *

9. Additional comments for student about their performance (this will NOT be included in Dean's Letter)

* Required fields  Option description (place mouse over field to view)

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