

FAMILY MEDICINE CLERKSHIP FEEDBACK AND EVALUATION FORM

Name: _____

Location: _____

The Family Medicine Clerkship is a mastery-based required clerkship. Evaluation is primarily based on the student’s performance in the last 2-3 weeks of the clerkship with possible exceptions involving unacceptable professional behavior. Review the anchors in each category and select the category that most closely mirrors the student's performance in that area. The anchors are not a checklist where all items are required to achieve a particular grade.

CLINICAL KNOWLEDGE AND SKILLS SECTION

I. CLINICAL KNOWLEDGE AND SKILLS	1	2	3	4	5
<p>Knowledge in Subject Area: Includes level of knowledge and application to clinical problems.</p>	<ul style="list-style-type: none"> Never demonstrates an understanding of basic principles. Never applies knowledge to specific patient conditions 	<ul style="list-style-type: none"> Inconsistently demonstrates understanding of basic principles. Inconsistently applies knowledge to specific patient conditions. 	<ul style="list-style-type: none"> Generally, demonstrates understanding of basic principles. Generally applies knowledge to specific patient conditions. 	<ul style="list-style-type: none"> Often demonstrates understanding of basic and some complex principles. Often applies knowledge to specific patient conditions. 	<ul style="list-style-type: none"> Consistently demonstrates understanding of basic and most complex principles. Consistently applies knowledge to specific patient conditions
<p>Data Gathering Skills: Includes basic history and physical examination.</p>	<ul style="list-style-type: none"> Never obtains basic history and physical 	<ul style="list-style-type: none"> Inconsistently obtains basic history and physical. 	<ul style="list-style-type: none"> Generally obtains basic history and physical. 	<ul style="list-style-type: none"> Often obtains basic history and physical. Obtains some elements of more advanced history and physical 	<ul style="list-style-type: none"> Consistently obtains basic history and physical. Obtains elements of more advanced history and physical
<p>Clinical Skills: Includes oral case presentations, written or dictated notes, histories, physical exams and procedural skills.</p>	<ul style="list-style-type: none"> Never communicates medical histories and physical exams in an organized or complete manner. Not attentive to patient comfort or dignity and demonstrates poor motor skills. 	<ul style="list-style-type: none"> Inconsistently communicates medical histories and physical exams in an organized or complete manner Inconsistently demonstrates good motor skills and Inconsistently demonstrates good motor skills. 	<ul style="list-style-type: none"> Generally communicates medical histories and physical exams in an organized or complete manner. Generally demonstrates good motor skills and generally demonstrates good motor skills. 	<ul style="list-style-type: none"> Often communicates medical histories and physical exams in an organized or complete manner. Often demonstrates good motor skills and often demonstrates good motor skills. 	<ul style="list-style-type: none"> Consistently communicates medical histories and physical exams in an organized or complete manner. Consistently demonstrates good motor skills. Consistently attentive to patient comfort or dignity.

COMMENTS:

I. CLINICAL KNOWLEDGE AND SKILLS (Constructive criticism will not appear in the dean’s letter unless there is a pattern of similar behavior across other clerkships)

PATIENT CARE SKILLS SECTION

II. PATIENT CARE SKILLS	1	2	3	4	5
<p>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.</p>	<ul style="list-style-type: none"> Never independently identifies major patient problems. Unable to problem solve and organize issues efficiently. 	<ul style="list-style-type: none"> Inconsistently able to independently identify and prioritize major problems. Inconsistently able to problem solve and organize efficiently. 	<ul style="list-style-type: none"> Generally able to independently identify and prioritize major problems. Generally able to problem solve and organize efficiently. 	<ul style="list-style-type: none"> Often is able to identify and prioritize all major and most minor patient problems. Often is able to problem solve and organize efficiently. 	<ul style="list-style-type: none"> Consistently able to identify and prioritize all major and minor problems. Consistently able to problem solve and organize efficiently.
<p>Management Skills: Includes order writing, initiative, practicality, and independence.</p>	<ul style="list-style-type: none"> Never offers an independent management plan or plan is unrealistic or illogical. 	<ul style="list-style-type: none"> Inconsistently offers an independent management plan and/or plan is often unrealistic or illogical. 	<ul style="list-style-type: none"> Generally offers an independent management plan that is realistic and logical. 	<ul style="list-style-type: none"> Often offers an independent management plan that is logical and realistic. 	<ul style="list-style-type: none"> Consistently offers an independent management plan that is logical and realistic and includes preventative counseling.
<p>Patient Centered Care (PCC): Skills including: 1. Elicits and negotiates agenda for the patient; 2. Elicits the patient's perspective of their illness; and 3. Negotiates treatment plan with the patient</p>	<ul style="list-style-type: none"> Never elicits and negotiates agenda with patients. Never elicits the patient's perspective of his/her illness. Never negotiates treatment plan with the patient. Never integrates biomedical and psychosocial perspective into care plan and patient management 	<ul style="list-style-type: none"> Inconsistently elicits and negotiates agenda with patients. Inconsistently elicits the patient's perspective of his/her illness. Inconsistently negotiates treatment plan with the patient. Inconsistently integrates biomedical and psychosocial perspective into care plan and patient management. 	<ul style="list-style-type: none"> Generally elicits and negotiates agenda for the patient. Generally elicits the patient's perspective of his/her illness. Generally negotiates treatment plan with the patient. Generally integrates biomedical and psychosocial perspectives into care plan and management of the patient. 	<ul style="list-style-type: none"> Often elicits and negotiates agenda with the patient. Often elicits the patient's perspective of his/her illness. Often negotiates treatment plan with the patient. Often integrates biomedical and psychosocial perspectives into care plan and management. 	<ul style="list-style-type: none"> Consistently elicits and negotiates agenda with the patient. Consistently elicits the patient's perspective of his/her illness. Consistently negotiates treatment plan with the patient. Consistently integrates biomedical and psychosocial perspectives into care plan and management.

COMMENTS:

II. PATIENT CARE SKILLS (Constructive criticism will not appear in the dean's letter unless there is a pattern of similar behavior across other clerkship.)

PROFESSIONALISM SECTION

<p>III. INTERPERSONAL RELATIONSHIPS</p>	<p>1</p>	<p>2</p>	<p>3</p>	<p>4</p>	<p>5</p>
<p>Communication Skills: Student's ability to communicate with patients, families, colleagues, and staff; Includes ability to modify communication style and ability to listen and constructively resolves conflicts.</p>	<ul style="list-style-type: none"> • Never communicates information effectively • Never has an awareness to modify communication style and content to situation. • Unable to establish rapport. • Unable to listen and be silent. • Never culturally proficient. 	<ul style="list-style-type: none"> • Inconsistently communicates information effectively. • Inconsistently has an awareness to modify communication style and content to situation. • Inconsistently able to establish rapport. • Inconsistently able to listen and be silent. • Inconsistently culturally proficient. 	<ul style="list-style-type: none"> • Generally communicates information effectively • Generally modifies communication style and content to situation. • Generally able to establish rapport. • Generally able to listen and be silent. • Generally culturally proficient. 	<ul style="list-style-type: none"> • Often communicates information. • Often modifies communication style and content to the situation. • Often able to establish rapport. • Often able to listen and be silent. • Often culturally proficient. 	<ul style="list-style-type: none"> • Consistently able to communicate information. • Consistently able to modify communication style and content to the situation. • Consistently able to establish rapport. • Consistently able to listen and be silent. • Consistently culturally proficient.
<p>Relationships with Patients and Families: Includes courtesy, empathy, respect, compassion and understanding the patient's perspective.</p>	<ul style="list-style-type: none"> • 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 HIPPA including patient confidentiality. • Inappropriate boundaries. • Exhibits behavior that is potentially harmful to patients 	<ul style="list-style-type: none"> • Inconsistently shows respect, empathy and compassion. • Inconsistently solicits the patient's perspective. • Inconsistently respects patient's values or imposes own personal values on patient when in conflict with their own. 	<ul style="list-style-type: none"> • Generally demonstrates respect, empathy and compassion. • Generally solicits the patient's perspective. • Generally respects the patient's values, even when in conflict with their own. 	<ul style="list-style-type: none"> • Often demonstrates respect, empathy and compassion. • Often able to solicit the patient's perspective. • Often respects the patient's values even when in conflict with their own. 	<ul style="list-style-type: none"> • 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 their own.
<p>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.</p>	<ul style="list-style-type: none"> • Never collaborates and/or establish appropriate relationships with team • Never respects team members within and across specialties. • Not compassionate when interacting with team. • Never clarifies expectations or clinical responsibilities. • Inappropriate boundaries. • Disrespectful, indifferent, callus, discourteous or condescending. 	<ul style="list-style-type: none"> • Inconsistently collaborates and/or establishes appropriate relationships with team. • Inconsistently respects the roles of team members within and across specialties • Rarely is compassionate when interacting with team. 	<ul style="list-style-type: none"> • Generally collaborates and establishes appropriate relationships with team. • Generally recognizes and respects roles of all team members within and across specialties. • Generally is compassionate when interacting with team. 	<ul style="list-style-type: none"> • Collaborates well with entire team. • Always recognizes and respects roles of team members within and across specialties. • Often compassionate when interacting with team. 	<ul style="list-style-type: none"> • Collaborates effectively with entire team and seeks to improve team function. • Consistently recognizes and respects roles of team members within and across specialties and works to improve team cohesion. • Consistently compassionate when interacting with team

COMMENTS:

III. INTERPERSONAL RELATIONSHIPS (Constructive criticism will not appear in the dean's letter unless there is a pattern of similar behavior across other clerkship.)

PROFESSIONAL / PERSONAL CHARACTERISCS SECTION

IV. PROFESSIONAL/PERSONAL CHARACTERISTICS	1	2	3	4	5
<p>Educational Attitudes: Includes active participation in learning, self-reflection and responsiveness to feedback and provides respectful and constructive feedback</p>	<ul style="list-style-type: none"> • Never does what is required. • Does not respond appropriately to feedback. • Never reflects on their own knowledge base. • Never participates in educational experiences • Is not actively engaged in learning. • Argumentative or hostile with feedback. • Values self above others, sense of entitlement. • Engages in destructive competition. • Feedback provided to others is not respectful. 	<ul style="list-style-type: none"> • Inconsistently does what is required. • Inconsistently responds appropriately to feedback. • Inconsistently reflects on their own knowledge base. • Inconsistently participates in educational experiences. • Inconsistently is actively engaged in learning. 	<ul style="list-style-type: none"> • Generally does what is required. • Generally responds appropriately to feedback. • Generally able to reflect on their own knowledge base. • Generally participates in educational experiences. • Generally is actively engaged in learning. 	<ul style="list-style-type: none"> • Often does what is required and often seeks additional learning opportunities beyond required level. • Often seeks feedback and responds appropriately. • Often is able to reflect on their own knowledge base. • Often participates in educational experiences. • Consistently and actively engaged in learning. 	<ul style="list-style-type: none"> • Actively participates in all activities. • Actively seeks feedback and responds appropriately. • Initiates self-assessment and teaches others. • Consistently participates in educational experiences. • Consistently engaged in learning. Asks insightful questions, motivates others, and demonstrates leadership with individuals and in- group settings.
<p>Dependability and Responsibility: Includes attendance, preparation, and personal appearance. Maintains personal honor and integrity</p>	<ul style="list-style-type: none"> • Frequently late without a legitimate reason or unprepared • Never follows through with assigned tasks. • Not trusted to work independently. • Dishonest in any way. • Does not maintain appropriate appearance. • Absent without an excuse • Erratic or unpredictable behavior. 	<ul style="list-style-type: none"> • Occasionally late or unprepared. • Inconsistently follow through with assigned tasks. • Rarely trusted to work independently 	<ul style="list-style-type: none"> • Generally on time and prepared. • Generally follows through with assigned tasks. • Generally trusted to work independently and knows limits and asks for help when needed. 	<ul style="list-style-type: none"> • Always 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. 	<ul style="list-style-type: none"> • Consistently 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. • Consistently trusted to work independently and knows limits and asks for help when needed.

COMMENTS:

IV. PROFESSIONAL / PERSONAL CHARACTERISCS (Constructive criticism will not appear in the dean’s letter unless there is a pattern of similar behavior across other clerkship.)

FAMILY MEDICINE CLERKSHIP AND EVALUATION FORM

Time spent with student—check one:

- Little or no contact
- Sporadic and superficial
- Infrequent but in-depth
- Frequent and in-depth

Overall Assessment of Performance—check one:

- Unacceptable level of performance (Fail)
- Below expected performance for level (Marginal)
- At expected performance level (Pass)
- Exceeds expected performance for level (High Pass)
- Exceptional (Honors)

Evaluator concern:

- Check ONLY if there is/are area(s) of particular concern, but failing grade is not given. Areas receiving “Below expectations” should be considered as potential areas of concern. Please describe the areas of concern (in the space provided below) or contact the clerkship site director for details.

Evaluator signature: _____

Date: _____