

Uniform Student Clerkship Evaluation: Year III and IV Courses
The George Washington University School of Medicine and Health Sciences

Mail to: Senior Associate Dean for Academic Affairs
2300 Eye Street, NW, 713-W
Washington, DC 20037
Fax to: (202)994-0926

Student: _____ Clerkship: _____ Dates Attended: _____

Location: _____

Exam Grade: Type: _____ Score: _____ H HP P LP CN F

Exam Grade: Type: _____ Score: _____ H HP P LP CN F

Project Grade: Type: _____ Grade: _____ H HP P LP CN F

Project Grade: Type: _____ Grade: _____ H HP P LP CN F

Clinical Grade (Site) _____ : Honors High Pass Pass Low Pass Conditional Fail

Clinical Grade (Site) _____ : Honors High Pass Pass Low Pass Conditional Fail

Clinical Grade (Site) _____ : Honors High Pass Pass Low Pass Conditional Fail

Clinical Grade (Site) _____ : Honors High Pass Pass Low Pass Conditional Fail

Please complete the **required** professionalism section on pages 5-7.

Overall Grade: (completed by Clerkship Directors Only)

Honors	High Pass	Pass	Low Pass	Conditional**	Fail**
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Signature of Course Director: _____
Required

Print Name: _____ Date: _____

**All conditional and fail grades must be reported to the Associate Dean for Student Affairs before any remediation is attempted. Specific recommendations for remediation should accompany the report. The proposed remediation must be approved by the Medical Student Evaluation Committee.

UNIFORM EVALUATION FORM FOR CLINICAL CLERKSHIPS - GWUSOM

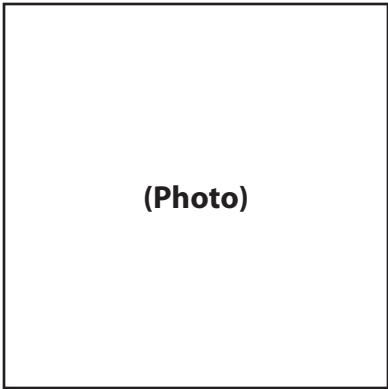
Clerkship: _____

Student Name: _____

Dates on Clerkship: _____

Evaluator: _____

Year 3 - Rotation 1 2 3 4 5 6
 Month 1 2
 Year 4: Weeks 2 4 _____
other



Rating Scale: The following rating scale applies to all succeeding numerical scales. In specific areas, descriptions of the expected performance and the extremes of performance are offered. Any score below 3 requires a narrative description of student performance.

1	2	3	4	5
Unacceptable performance	Marginal performance, remediation suggested	Very Good. At expected level for GW student.	Excellent.	Outstanding.

Cognitive Skills:

• Medical Knowledge:

1	2	3	4	5
Usually inaccurate. Knowledge of disease and pathophysiology, diagnosis, and treatment is very limited. Poor ability to access biomedical resources. Poor knowledge of evidence-based medicine principles.		Solid fund of medical knowledge. Demonstrates a good understanding of pathophysiology, diagnosis, and treatment. Can access biomedical resources necessary to inform care. Demonstrates knowledge of evidence-based medicine principles. Meets the expectations for level of training of a GW student.		Has outstanding knowledge of disease, pathophysiology, diagnosis, and treatment. Outstanding ability to access biomedical resources necessary to inform care. Demonstrates outstanding knowledge of evidence-based medicine principles.

• Ability to Organize Data:

1	2	3	4	5
Usually disorganized. Cannot see relationships between information. Unable to formulate a reasonable description of the clinical information.		Usually able to organize information logically. Usually able to formulate a reasonable description of the clinical information. Meets the expectations for level of training of a GW student.		Superior organizational skills. Always able to logically formulate a description of the clinical information.

• Ability to Synthesize Data into an Assessment:

1	2	3	4	5
Usually unable to reach a logical assessment about the patient and their problems. Poor ability to develop differential diagnosis and discriminate more likely from less likely causes.		Usually able to reach a logical assessment of the patient and their problems. Good ability to develop a differential diagnosis and discriminate more likely from less likely causes. Meets expectations for level of training of a GW student.		Outstanding ability to reach a logical assessment of the patient and their problems. Excellent ability to develop a comprehensive differential diagnosis and astute at organizing considerations in a logical order.

• Ability to Formulate a Plan for Diagnosis or Treatment:

1	2	3	4	5
Usually unable to develop a logical plan for care. Usually unaware of appropriate treatment or diagnostic interventions.		Usually able to develop a logical plan for care. Aware of most common appropriate treatment and diagnostic interventions. Can access relevant clinical guidelines for cost-effective care and identify system resources for acute and chronic disease management. Can critically appraise interventions and identify potential approaches to disease prevention. Meets expectations for level of training of a GW student.		Outstanding ability to develop a logical plan for care. Includes sophisticated plans for diagnosis and treatment.

(Mandatory) Comments on Cognitive Skills:

Clinical Skills

• History Taking

1	2	3	4	5
Generally incomplete. Frequently disorganized. Does not focus on the patient's problems at all. Poor patient rapport. Insensitive to patient. Important information is usually missing.		Usually complete. Good organization. Very good ability to establish rapport. Good sensitivity to patient. Can usually detect hidden agendas. Usually includes all important information. Meets expectations for level of training of a GW student.		Outstanding history taking. Very sensitive to patient and frequently picks up hidden agendas. Superior organization. Always includes important information.

• Physical Examination/Mental Health Status Examination:

1	2	3	4	5
Usually incomplete, superficial, cursory or inaccurate. Misses major findings frequently.		Generally thorough examinations performed. Minor omissions, all major findings elicited. Meets expectations for level of training of a GW student.		Always complete, consistently accurate, all findings including subtle ones are elicited.

• Technical/Procedural Skills:

1	2	3	4	5
Generally careless or incompetent. Frequent disregard for patient comfort.		Proficient. Exhibits appropriate care. Minimizes patient discomfort and risk. Meets expectations for level of training of a GW student.		Superb skills, excellent technique. Puts patients at ease, attends to their concerns.

(Mandatory) Comments on Clinical Skills:

Communication Skills :

• Oral Presentations:

1	2	3	4	5
Generally poorly organized. Multiple pieces of key information missing. Consistent inattention to details. Unable to express thoughts clearly.		Presentations are clear and usually well organized. They usually include a clear summary of historical information and an appropriate differential diagnosis and treatment plan. Meets expectations for level of training of a GW student.		Outstanding presentations. Always very clear and exceptionally well organized. All pertinent information presented concisely. Pertinent positives and negatives included. Excellent assessment and plan.

• Written Presentations:

1	2	3	4	5
Generally incomplete, messy, and poorly organized. Major omissions. Poor assessment and plan.		Thorough, neat, well organized and clear. Meets expectations for level of training of a GW student.		Outstanding clarity, superior organization, excellent summary of history, physical, assessment, and plan.

• Patient Communication:

1	2	3	4	5
Poor ability to communicate with patients and families. Insensitive to patient literacy, beliefs, and culture. Poor ability to inform patient of the risks and benefits of common interventions. Unable to describe informed consent or participate in shared decision making. Unable to describe strategies for engaging in difficult conversations with patients.		Demonstrates effective communication skills with patients and families including sensitivity to patient literacy, beliefs, culture, and emotional and cognitive state. Can inform patients of the risks and benefits of common interventions, participate in shared decision making, and obtain informed consent. Can describe skills and strategies for engaging patients in difficult conversations such as those about serious diagnoses or end-of-life care.		Demonstrates outstanding communication skills with patients and families including sensitivity to patient literacy, beliefs, and culture. Outstanding ability to describe informed consent and participate in shared decision making. Outstanding ability to describe skills and strategies for engaging patients in difficult conversations.

(Mandatory) Comments on Communication Skills:

Professionalism Evaluation: (Required)

In each domain, appropriate performance is indicated at the right of the scale (a numerical rating of "5" indicates satisfactory performance). Inappropriate performance descriptors are indicated at the left of the scale. **ANY NUMERICAL RATING THAT IS LESS THAN 5 IS UNSATISFACTORY AND MUST BE SUPPORTED BY A SPECIFIC DESCRIPTION OF THE STUDENT'S BEHAVIOR.** If you have not observed a characteristic please indicate "NO" for "Not Observed".

Honesty/Integrity:

• Truthfulness

1	2	3	4	5	"NO"
Too little or too much				Satisfactory	
Untruthful; misrepresents position/status; misuses resources; falsifies data, plagiarizes, cheats OR Truthful to the point of blatant insensitivity; tactless.				Exhibits truthfulness; trustworthy; displays honesty at all times	

• Adherence to Ethical Principles

1	2	3	4	5	"NO"
Too little or too much				Satisfactory	
Engages in unethical behavior OR Sanctimonious; intolerant				Models ethical behavior	

(Mandatory) Comments on Honesty/Integrity:

Responsibility/Reliability/Dependability:

• Responsibility

1	2	3	4	5	"NO"
Too little or too much				Satisfactory	
Consistent lack of punctuality; misses deadlines; does not comply with regulations; avoids responsibility and work OR Values timeliness over quality; inflexible and overly reliant on rules; not accountable to anyone, self-righteous or self-aggrandizing				Punctual; meets deadlines; complies with policies; assumes responsibility	

(Mandatory) Comments on Responsibility/Reliability/Dependability:

Teamwork:

1	2	3	4	5	"NO"
Too little or too much				Satisfactory	
Non-participatory; aloof; arrogant; over-critical; demeans others OR Dominant; uncooperative; overbearing; obsequious				Respects authority and others; works well with others and team members. Can negotiate simple conflicts in team functioning.	

(Mandatory) Comments on Teamwork:

Empathy:

- Compassion

1	2	3	4	5	"NO"
Too little or too much				Satisfactory	
Emotionally unresponsive; little compassion; cold; indifferent; self-centered; selfish; unwilling to extend self to others; OR Emotionally over-responsive; objectivity clouded by desire to help others; gives misleading information in efforts to console; overextends self to own detriment				Empathic and sensitive to others; maintains objectivity; shows appropriate concern for others	

(Mandatory) Comments on Empathy:

Commitment to Competence and Excellence:

- Motivation and Drive

1	2	3	4	5	"NO"
Too little or too much				Satisfactory	
Low Standards of achievement; aspires to minimum standards only; complacent; aimless; educationally adrift OR Overly competitive; perfectionistic; answers for others; sets unachievable goals, unresponsive to feedback				Sets and achieves realistic goals; seeks to develop additional knowledge; conscientious; strives for excellence, reflects on performance and is responsive to feedback.	

(Mandatory) Comments on Commitment to Competence and Excellence:

Respect for Patients:

- Relationships, Autonomy, Confidentiality

1	2	3	4	5	"NO"
Too little or too much				Satisfactory	
Disrespectful to patients; insensitive to beliefs, opinions, gender, race, culture, religion, sexual preference or status; disregards autonomy or confidentiality OR Indiscriminately accepts all behaviors, regardless of consequences; unable to provide limits to choice; inappropriately upholds confidentiality at expense of safety (e.g., suicidality, homicidality, sexual assault, child abuse, etc.)				Demonstrates sensitivity to patients; respects patient autonomy, confidentiality, beliefs, and culture. Recognizes personal or professional conflicts that may affect care.	

(Mandatory) Comments on Respect for Patient:

Global Rating Scale:

1	2	3	4	5
Unacceptable performance	Marginal performance, remediation suggested.	Very Good. At expected level for GW student.	Excellent.	Outstanding.

Comments:

Areas of Strength:

Areas for Improvement: