

**MEDICAL STUDENT**

**Contributing Evaluators** (Question 1 of 17 - Mandatory )

NAMES OF ALL INDIVIDUALS WHOSE COMMENTS OR OPINIONS ARE EXPRESSED IN THIS REPORT:

**Check the box below to confirm that you have no conflict of interest in completing an evaluation of this student. (Examples of conflict of interest include providing medical care or psychiatric/psychological services, having a personal relationship with the student outside of medical school, etc.)** (Question 2 of 17 - Mandatory )

**(IMPORTANT: If you do have a conflict of interest, please suspend this evaluation.)**

No conflict of interest

**Overall Grade** (Question 3 of 17 - Mandatory )

- Pass (criteria for Pass or Pass with Distinction met in all domains) (+)
- Marginal Pass (+)
- Continuing (N)
- Fail (-)

**Pass With Distinction** (Question 4 of 17 - Mandatory )

Performance domains in which criteria for Pass With Distinction were met

Selection	Option
<input type="checkbox"/>	Patient Care
<input type="checkbox"/>	Professionalism and Interpersonal Communication (includes multisource feedback request)
<input type="checkbox"/>	Exam
<input type="checkbox"/>	None

**Comment on Change in Grade** (Question 5 of 17 , Confidential )

Please provide the original grade you gave this student and comment on the remediation that occurred. (This information will be available only to the associate deans of student affairs.)

**Examination Score\*** (Question 6 of 17 - Mandatory )

**Re-take Examination Score** (Question 7 of 17 )

**Site Assignment** (Question 8 of 17 - Mandatory )

Please list the site(s) to which the student was assigned during this clerkship.

**PATIENT CARE: Direct observation of Clinical Skills** (Question 9 of 17 - Mandatory )

Did the student complete the required number of direct observations of clinical skills to meet criteria for passing the clerkship?

<input type="radio"/>	1	Observations not completed
<input type="radio"/>	2	Observations completed

**PATIENT CARE: RIME (Clinical Reasoning, Application of Knowledge, Patient Management, Systems-Based Practice)** (Question 10 of 17 - Mandatory )

BELOW EXPECTATIONS (Performance consistently below the Interpreter level)	MEETS EXPECTATIONS (Performance mostly at the Interpreter level)	EXCEEDS EXPECTATIONS (Performance at the Manager level)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**PROFESSIONALISM AND INTERPERSONAL COMMUNICATION: Gathering Multisource Feedback** (Question 11 of 17 - Mandatory )

Did the student complete clerkship requirements for gathering multisource feedback on Professionalism and Interpersonal Communication?

<input type="radio"/>	1	Multisource Feedback not completed
<input type="radio"/>	2	Multisource Feedback completed

**PROFESSIONALISM AND INTERPERSONAL COMMUNICATION** (Question 12 of 17 - Mandatory )

BELOW EXPECTATIONS (Significant or consistent concerns about Professionalism, Interpersonal Communication)	MEETS EXPECTATIONS (No significant or consistent concerns)	EXCEEDS EXPECTATIONS (No Concerns; Consistent evidence of exceptional Professionalism, Interpersonal Communication)
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**SUMMATIVE COMMENTS**  
(Question 13 of 17 - Mandatory )

These comments represent the final assessment of the student's overall performance in the clerkship and will be included verbatim in the Medical School Performance Evaluation (MSPE) (a.k.a. Dean's letter). This paragraph should provide an accurate, representative synthesis of the evaluative comments provided by ALL faculty and residents who worked with the student, including those who may have rotated off service.

(Summative paragraph should be no more than 150 to 200 words.)

**FORMATIVE COMMENTS FROM CLERKSHIP DIRECTOR**  
(Question 14 of 17 - Mandatory )

This section should include specific suggestions for improvement and ideas to guide the student to the next level of performance, based on the clerkship director's review of data from individual evaluators.

**INDIVIDUAL EVALUATORS' COMMENTS AND MULTISOURCE FEEDBACK** (Question 15 of 17 - Mandatory )

Verbatim or paraphrased comments from individual residents, faculty, patients, peers, and non-MD staff.

**Overall Student Performance** (Question 16 of 17 - Mandatory , Confidential )

Do you have any concerns about this student's performance? (check all that apply)

Selection	Option
<input type="checkbox"/>	Professionalism
<input type="checkbox"/>	Clinical Skills
<input type="checkbox"/>	No Concerns

**Comments** (Question 17 of 17 , Confidential )

If you have concerns as indicated in the previous question please describe. **If there were no concerns please leave blank.**

Review your answers in this evaluation. If you are satisfied with the evaluation, click the **SUBMIT** button below. Once submitted, evaluations are no longer available for you to make further changes.