THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON
RESIDENT - RESIDENT EVALUATION FORM

[Subject Name]
[Subject Employer]
[Evaluation Dates]
[Subject Rotation]

Evaluator
[Evaluator Name]
[Evaluator Employer]

PATIENT CARE

Incomplete, inaccurate medical interviews, physical examinations, and review of other data; incompetent performance of essential procedure; fails to analyze clinical data and consider patient preferences when making medical decisions

Superb, accurate, comprehensive medical interviews, physical examinations, reviews of other data, and procedural skills; always makes diagnostic and therapeutic decisions based on available evidence, sound judgment and patient preferences

Unsatisfactory
1 2 3
Satisfactory
4 5 6
Superior
7 8 9
Insufficient contact to judge

Comments

Remaining Characters: 5,000

MEDICAL KNOWLEDGE

Limited knowledge of basic and clinical sciences; minimal interest in learning; cannot explain mechanisms of disease

Exceptional knowledge of basic and clinical sciences; highly resourceful development of knowledge; understands complex relationships and skillfully develops unifying concepts

Unsatisfactory
1 2 3
Satisfactory
4 5 6
Superior
7 8 9
Insufficient contact to judge

Comments

Remaining Characters: 5,000

SYSTEM BASED PRACTICE

Unable to access/mobilize outside resources independently; uses care pathways indiscriminately; actively resists efforts to improve systems of care

Effectively accesses/utilizes outside resources; effectively uses systematic approaches to reduce errors and improve patient care; enthusiastically assists in developing systems improvement
COMMUNICATIVE AND INTERPERSONAL SKILLS

Poor listening, writing, nonverbal skills; unable to clearly explain complex problems; does not earn respect of peers; frequently unavailable to consult with patients, families, colleagues

Establishes a highly effective therapeutic relationship with patients and families; demonstrates excellent relationship building through listening, writing, and nonverbal skills; excellent education and counseling of patients, families, and colleagues; always “interpersonally” engaged

PROFESSIONALISM

Lacks respect, compassion, integrity, honesty; insensitive to diversity; shirks responsibility; disregards needs for self assessment; places self interest above patient’s and society

Always demonstrates respect, compassion, integrity, honesty; teaches/role models responsible behavior; total commitment to self assessment; willingly acknowledges errors; always considers needs of patients, families, colleagues

PRACTICE-BASED LEARNING AND IMPROVEMENTS

Fails to perform self-evaluation; lacks insight, initiative; resists or ignores feedback; fails to use information technology to enhance patient care or pursue self improvement

Constantly evaluates own performance; incorporates feedback into improvement activities; effectively uses technology to manage information for patient care and self improvement
TRANSITION OF CARE (TOC)

During the Transition of Care (TOC), did the resident/ fellow effectively transmit to you critical information about the patient?

- Unsatisfactory: 1 2 3
- Satisfactory: 4 5 6
- Superior: 7 8 9
- N/A

Overall Comments:

Remaining Characters: 5,000

- I want to add a Confidential Comment (to Program Director only)

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