

Pediatrics Outpatient and Newborn Evaluation

2024-25

**Attending Information: (not visible to students)**

What clinical environment did you work with the student? (Newborn nursery, Outpatient clinic):

How many half days did you work with the student?:

**I am completing this evaluation on behalf of:** (if applicable)

	(5.5) Pre-Clerkship	(7.0) Early Clerkship	(8.5) Late Clerkship	(10) JI Level
<b>Data Gathering Skills</b>				
History Taking	Gathers insufficient or overly exhaustive information	Gathers some information or occasionally too much information	Obtains an acceptable history in a mostly organized fashion	Obtains a complete history in an organized fashion
Physical Exam	Misses key findings	Identifies, describes, and documents mostly normal exam findings	Identifies, describes, and documents abnormal exam findings or mental status exam findings	Routinely Identifies, describes, and documents normal and abnormal exam findings and uses the exam to help prioritize the differential diagnosis
<b>Knowledge Base</b>				
General	Lacks Basic Clinical Reasoning	Demonstrates difficulty in applying medical knowledge to patient presentations	Demonstrates basic knowledge to begin to develop a clinical impression	Demonstrates application of organized knowledge to develop a well-reasoned clinical impression
Specific Problem/Patient Related	Can not rationalize use of diagnostic testing	Inappropriately recommends tests and fails to consider patient preferences	Recommends mostly appropriate tests and is aware of patient preferences	Articulates evidence based, patient centered rationale for utilizing diagnostic testing

<b>Analytic/Problem solving Skills:</b>				
Integrating data to develop a differential diagnosis	Unable to formulate a differential diagnosis	Constructs an inaccurate and unfocused differential diagnosis	Constructs a basic differential diagnosis for common presentations	Constructs a prioritized differential diagnosis for common presentations
Data organization and documentation/presentation skills	Presents and documents in a disorganized fashion, no chronology to history, often not prepared to present	Presents and documents acceptable delineation of primary problems with occasional "holes" in characterization, chronology, and diagnostic information	Presents and documents history in organized chronological fashion, but has an underdeveloped assessment and plan	Consistently filters, synthesizes, and prioritizes information into a well-organized presentation/documentation with a well-reasoned assessment and plan
<b>Interpersonal and Communication Skills</b>				
Compassionate relationships with patients/families (educates appropriately and anticipates needs)	Insensitive, disrespectful, or arrogant. Does not attempt patient education or anticipatory guidance	May have difficulty establishing rapport with patients, families, or team members. Patient education may be limited, ineffective, or condescending, without insight into patient background or culture	Relates well to most patients, families, and team members. Patient education is appropriately targeted with considerations for patient culture, but may be incomplete or over-wrought with unnecessary detail	Easily establishes rapport with patients, families, and team members. Assumes true ownership of his/her patients and anticipates patient and team needs. Incorporates high quality education seamlessly into the clinical encounter.
Professional relationships with colleagues	Does not take initiative to interact with interprofession	Interacts with interprofessiona l team members but does not	Interacts with interprofessiona l team members consistently	Discusses and negotiates recommendatio n with

	nal team members or value their input	consistently incorporate their input	incorporates their input	interprofessional team members when appropriate
<b>Professionalism</b>				
Demonstrates commitment to self-learning, seeking feedback, and knowing limitations	May demonstrate overconfidence by not seeking help or lacks awareness of limitations and gaps in own personal knowledge	Demonstrates limited help-seeking behavior to fill gaps in knowledge, skill, and experience; tries to change with feedback but may not be successful	Open and accepting of feedback to improve knowledge, skill, and experience	Initiates help-seeking behavior and seeks feedback; recognizes limitations and integrates input from others to improve
Appropriate attendance, punctual, and accepts responsibility	Frequently inappropriate behavior (unavailable, not reliable, suggestive, or inappropriate attire, erratic attendance, or socially aggressive)	Occasional inappropriate behavior (poor confidentiality, poor choice of language, occasionally late)	Meets expected standards for professionalism (punctual, demonstrates mutual respect with patients and team members)	Consistently meets high professional standards (follows through on tasks, punctual, behaves ethically, maintains poise under pressure, admits mistakes and changes behavior).

**Narrative Comments: Please include at least 4 sentences with specific examples where possible:**