

| I. Patient Care | | U (Unacceptable) | B (Below Expectations) | M (Meets Expectations) | E (Exceeds Expectations) | F (Far Exceeds Expectations) |
|---|---|---|---|--|---|---|
| A. | History Taking | <i>Consistently</i> incomplete and disorganized | <i>Frequently</i> incomplete and/or disorganized for uncomplicated patients | <i>Complete and organized</i> for <i>uncomplicated</i> patients | Frequently complete and organized by system for <i>both complicated and uncomplicated</i> patients | <i>Consistently</i> complete and organized for both <i>complicated and uncomplicated</i> patients |
| B. | Patient Exam | <i>Consistently</i> incomplete and/or inaccurate | <i>Frequently</i> incomplete and/or inaccurate | Performs <i>basic</i> physical exam correctly, and identifies <i>basic</i> abnormal findings. Physical exam is <i>relevant</i> to patient's illness | Performs a <i>comprehensive and appropriately focused</i> exam and <i>frequently</i> identifies and interprets abnormal findings | <i>Consistently</i> identifies and interprets normal and abnormal findings |
| C. | Development of a Sound Management Plan | <i>Cannot</i> develop a <i>basic</i> management plan, <i>even with guidance</i> | <i>Requires more than expected guidance</i> to develop a <i>basic</i> management plan | Formulates a <i>basic</i> management plan for common conditions/illnesses | Formulates a <i>comprehensive</i> management plan for common and <i>sometimes complex</i> conditions/illnesses | <i>Consistently</i> formulates a <i>comprehensive and appropriate</i> management plan for <i>both common and complex</i> conditions/illnesses |
| II. Medical Knowledge | | U (Unacceptable) | B (Below Expectations) | M (Meets Expectations) | E (Exceeds Expectations) | F (Far Exceeds Expectations) |
| A. | Demonstrates Basic Knowledge of Structure and Function in the Context of Health and Disease | Does not demonstrate comprehension of <i>basic</i> medical principles with respect to the course's goals and objectives | Shows comprehension of <i>basic</i> medical principles with respect to the course's goals and objectives but <i>does not apply them</i> to patient problems | Shows comprehension of <i>basic</i> medical principles with respect to the course's goals and objectives and <i>applies them</i> to patient problems | Shows comprehension of <i>basic and advanced</i> medical principles with respect to the course's goals and objectives and <i>consistently applies</i> them to patient problems | Shows comprehension of <i>basic and advanced</i> medical principles with respect to the course's goals and objectives and <i>consistently applies</i> them to patient problems |
| B. | Identifies Social, Economic, Psychological, and Cultural Factors that Contribute to Health and Disease | <i>Consistently overlooks</i> one or more of these factors | <i>Frequently overlooks</i> one or more of these factors | Incorporates <i>basic</i> aspects of these factors | Incorporates <i>basic</i> aspects of these factors and <i>applies them to the plan of care</i> | Incorporates <i>detailed</i> aspects of these factors and <i>applies them to the plan of care</i> |
| C. | Uses Clinical Reasoning to Interpret Data (History, Physical Exam, Diagnostic Tests, etc.) and Develop a Differential Diagnosis | <i>Does not</i> synthesize data to generate a <i>basic</i> differential diagnosis | <i>Has difficulty</i> synthesizing data and/or generating a <i>basic</i> differential diagnosis | Synthesizes data to develop a <i>basic</i> differential diagnosis | Synthesizes data to develop a <i>prioritized and appropriate</i> differential diagnosis | Synthesizes <i>basic and complex data</i> to develop a prioritized and appropriate differential diagnosis |
| D. | Perform Common Technical Procedures Accurately and Safely | ○ N (No) | | | ○ Y (Yes) | |
| III. Practice-Based Learning and Improvement | | U (Unacceptable) | B (Below Expectations) | M (Meets Expectations) | E (Exceeds Expectations) | F (Far Exceeds Expectations) |
| A. | Identifies Strengths & Weaknesses in Knowledge & Skills and Demonstrates the Ability to Respond to Constructive Feedback | <i>Does not</i> self-assess and <i>does not</i> respond to constructive feedback | <i>Limited</i> insight into strengths & weaknesses and/or <i>is resistant</i> to constructive feedback | <i>Frequently identifies</i> gaps in knowledge/skills and <i>responds</i> to constructive feedback | <i>Frequently identifies</i> gaps in knowledge/skills and <i>works effectively</i> to make improvements, both <i>on one's own as well as in response</i> to constructive feedback | <i>Consistently identifies</i> gaps in knowledge/skills and <i>works effectively</i> to make improvements, both <i>on one's own as well as in response</i> to constructive feedback |
| B. | Seeks Opportunities for Self-Directed Learning, Including Evidence-Based Practice | <i>Does not</i> read independently or seek new knowledge | <i>Rarely</i> accesses appropriate resources (i.e. literature, websites, videos) to enhance knowledge base | Shows evidence of <i>independent or supplemental reading</i> to enhance the knowledge base and can <i>search</i> the literature to answer clinical questions | Frequently can <i>assess and interpret</i> the literature and <i>begins to</i> apply it to patient care | <i>Consistently incorporates</i> evidence-based practice into the care of patients |

| IV. Interpersonal and Communication Skills | U (Unacceptable) | B (Below Expectations) | M (Meets Expectations) | E (Exceeds Expectations) | F (Far Exceeds Expectations) |
|---|--|--|--|--|--|
| A. Communicates Effectively with Patients and Families Across a Broad Range of Cultural Backgrounds | <i>Does not</i> establish rapport, use appropriate language, avoid jargon, and/or convey empathy | <i>Has difficulty</i> establishing rapport, using appropriate language, avoiding jargon, and conveying empathy | <i>Frequently</i> establishes rapport, uses appropriate language, avoids jargon, and conveys empathy | <i>Consistently</i> establishes rapport, uses appropriate language, avoids jargon, and conveys empathy | Consistently establishes rapport, uses appropriate language, avoids jargon, and conveys empathy, <i>even with challenging patients and families</i> |
| B. Communicates Well with All Members of the Healthcare Team | <i>Does not</i> communicate effectively with all members of the health care team | <i>Has difficulty</i> communicating with members of the healthcare team | Communicates <i>effectively and respectfully</i> with all members of the health care team | Communicates effectively and respectfully with all members of the health care team. <i>Frequently takes initiative to exchange information</i> with all members of the team, including nursing and other ancillary staff | Communicates effectively and respectfully with all members of the health care team. <i>Consistently takes initiative to exchange information</i> with all members of the team, including nursing and other ancillary staff |
| C. Written Documentation (including Admission Notes, Progress Notes, Procedure Notes, Outpatient Notes, etc.) is Thorough, Organized and Accurate | Incomplete and/or inaccurate | <i>Occasionally</i> late, incomplete, disorganized and/or inaccurate for uncomplicated patients. Uses excessive abbreviations | Complete, organized, timely, and accurate for uncomplicated patients | <i>Frequently</i> complete, organized, timely, and accurate for both <i>complicated and uncomplicated</i> patients | <i>Consistently</i> complete, organized, timely, and accurate for <i>both complicated and uncomplicated</i> patients |
| D. Oral Presentation of the Patient | Disorganized and/or inaccurate | <i>Has difficulty</i> reporting basic information. Does not communicate basic thought processes | Presents in an organized, clear, and accurate manner. Communicates basic thought processes in formulation of differential and/or management plan | Organized, clear, accurate, <i>concise, and focused when appropriate. Frequently reports pertinent positives and negatives and communicates advanced thought processes</i> in formulation of differential and/or management plan | Organized, clear, accurate, concise, and focused when appropriate. <i>Consistently reports pertinent pos. and neg. and demonstrates advanced thought processes</i> in formulation of differential and/or mgmt plan |
| V. Professionalism | U (Unacceptable) | B (Below Expectations) | M (Meets Expectations) | E (Exceeds Expectations) | F (Far Exceeds Expectations) |
| A. Demonstrates Honesty and Integrity in All Interactions with Patients, Families, Colleagues, and Other Professional Contacts | <input type="radio"/> N (No) | | | <input type="radio"/> Y (Yes) | |
| B. Maintains Patient Confidentiality | <input type="radio"/> N (No) | | | <input type="radio"/> Y (Yes) | |
| C. Demonstrates Professional Image in Behavior and Dress | <input type="radio"/> N (No) | | | <input type="radio"/> Y (Yes) | |
| D. Demonstrates Reliability and Responsibility in All Interactions with Patients, Families, Colleagues, and Other Professional Contacts | Cannot be relied on | <i>Needs reminders</i> in fulfillment of responsibilities. Appears to be too peripheral to engage in team activities and patient care. <i>Late or absent</i> for required activities | <i>Can regularly be relied on</i> to fulfill responsibilities as member of team. <i>Functions well</i> within team structure. <i>Punctual and present</i> for all required activities, completes assignments in timely fashion | <i>Actively involved</i> in patient care and team activities and completes all assigned tasks in dependable fashion. <i>Makes meaningful contributions</i> to health care delivery as an <i>integral member of the team</i> | <i>Exceptionally conscientious and dependable</i> in team activities and pt care responsibilities. Makes extra efforts to be integral team member; <i>assumes high level of pt care resp. Highly valued</i> as team member |
| VI. Systems- Based Practice | N (No) | | | Y (Yes) | |
| A. Knows How to Coordinate Patient Care including Inpatient, Outpatient and Community Resources | Does not understand the discharge process and is unaware of community and ancillary services available to improve patient care | | | | <i>Understands</i> discharge planning, patient education, and/or the use of community and ancillary health resources |