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RESIDENT EVALUATION of FACULTY TEACHING SKILLS

uation:	Location:					
		Location:				
ease take a moment to asse	ss the clinical faculty member	's teaching skills usin	g the s	cale b	elow.	
1 - UNSATISFACTORY	2 – SATISFACTORY	3 – EXCELLEN	IT	N	/A	
•	_		1	2	3	
ach team member in a cour	teous and respectful manner.		1	2	3	
• • •	gnments; was always available	e and	1	2	3	
	er specialties/subspecialties		1	2	3	
ated positive interpersonal	communication skills with		1	2	3	
·	teaching residents.		1	2	3	
	-		1	2	3	
d clear and concise medical	record documentation.		1	2	3	
sufficient supervision to ma	intain patient safety while I le	arned.	1	2	3	
	expectations, duties and as wed learning objectives and ach team member in a cour lly prompt for teaching assists as a supervisor. espect for physicians in other health professionals. In ated positive interpersonal family members and staff. enthusiasm and interest in lical/scientific literature to see the clear and concise medical	expectations, duties and assignments for each team merwed learning objectives and evaluation process at start of each team member in a courteous and respectful manner. By prompt for teaching assignments; was always available as a supervisor. Espect for physicians in other specialties/subspecialties health professionals. Ing: ated positive interpersonal communication skills with family members and staff. Eenthusiasm and interest in teaching residents. Itical/scientific literature to support clinical decisions. Id clear and concise medical record documentation. Sufficient supervision to maintain patient safety while I leads	expectations, duties and assignments for each team member, wed learning objectives and evaluation process at start of rotation. ach team member in a courteous and respectful manner. Illy prompt for teaching assignments; was always available and as a supervisor. espect for physicians in other specialties/subspecialties health professionals. Ing: ated positive interpersonal communication skills with family members and staff. enthusiasm and interest in teaching residents. Idical/scientific literature to support clinical decisions. d clear and concise medical record documentation. Sufficient supervision to maintain patient safety while I learned.	expectations, duties and assignments for each team member, wed learning objectives and evaluation process at start of rotation. ach team member in a courteous and respectful manner. 1 Illy prompt for teaching assignments; was always available and as a supervisor. espect for physicians in other specialties/subspecialties 1 health professionals. 1 Ing: ated positive interpersonal communication skills with 2 family members and staff. enthusiasm and interest in teaching residents. 1 Id clear and concise medical record documentation. 1 sufficient supervision to maintain patient safety while I learned. 1	expectations, duties and assignments for each team member, wed learning objectives and evaluation process at start of rotation. ach team member in a courteous and respectful manner. 1 2 Illy prompt for teaching assignments; was always available and as a supervisor. espect for physicians in other specialties/subspecialties health professionals. 1 2 Ing: ated positive interpersonal communication skills with amily members and staff. enthusiasm and interest in teaching residents. 1 2 Idical/scientific literature to support clinical decisions. 2 d clear and concise medical record documentation. 1 2 sufficient supervision to maintain patient safety while I learned. 1 2 sufficient supervision to maintain patient safety while I learned.	

Demonstrated how to perform special physical exam techniques and/or. procedures, and observed me during my initial attempt.	1	2	3	N/A
Asked thought provoking questions to help me develop my critical	1	2	3	N/A
thinking skills and clinical judgment. Shared his/her own thought processes when discussing patient work-ups and patient care decisions with the team.	1	2	3	N/A
Highlighted important aspects of patient case and often generalized to broader medical concepts and principles.	1	2	3	N/A
Integrated social/ethical aspects of medicine (cost containment, patient rights, humanism) into discussions about patient care.	1	2	3	N/A
Provided guidance and specific instructive feedback to help me correct surgical mistakes and/or increase my knowledge base.	1	2	3	N/A
Taught surgical techniques in a collegial manner without insults, sarcasm or personal put-downs.	1	2	3	N/A
Comment				
Demonstrated deductive reasoning skills. Demonstrated appropriate and well developed clinical skills. Maintained up-to-date clinical knowledge that included evidence-based medicine from the literature and practice patterns. Comment	1 1	2 2	3 3	N/A N/A N/A
Didactic (Classroom) Instruction: Was usually prompt for teaching sessions; kept interruptions to a minimum and kept discussions focused on case or topic. Gave lecture presentations that were well-organized and interactive (i.e. provided opportunities for questions).	1	2	3	N/A N/A
Provided references or other materials that stimulated me to read, research, and review pertinent topics.	1	2	3	N/A
Participated in Journal Club	1	2	3	N/A
Participated in M & M conferences	1	2	3	N/A

Participated in lectures given l Comment	by residents		1	2	_
Comment					3
essionalism:					
Demonstrated honesty and tr	ustworthiness.		1	2	3
Accepted responsibility for mi	stakes.		1	2	3
Respected the professional kn and healthcare providers.	owledge and skills o	f other physicians	1	2	3
Demonstrated a commitment	to our educational p	program.	1	2	3
Comment					
Demonstrated fairness by adh for the scores and allowing mo			1	2	3
OVERALL, I WOUI	LD RATE THIS FACU	JLTY MEMBER'S CLINICAL TEAC	CHING SK	ILLS A	. S:
POOR	FAIR	VERY GOOD	EXCELLENT		
Would you recommend that t	he faculty member(s	s) continue in this program?	Yes		
		IMENDATIONS or CONCERNS:			