

MEDICAL INTERN EVALUATION FORM

Intern Name in Capital: Rotation Name:

Hospital: Date of Rotation: / / To / /

		Fail <6	Pass 6 - < 7	Good 7 - < 8	Very Good 8 - < 9	Excellent 9 - 10
A. Medical knowledge						
1	History-taking and physical exam skills					
2	Understand mechanisms of diseases and outlines of diagnosis and management					
3	Quality of writing medical-records and case- presentations					
B. Practice-based learning and improvement						
4	Ability of self-evaluation and accepting feedback					
5	Effort to improve knowledge and skills					
C. Interpersonal and Communication skills						
6	Keeping professional relations with senior staff, colleagues and other medical-staff					
7	Relations with patients and patient-family					
D. Professionalism						
8	Attendance and punctuality					
9	Respect and honesty					
10	Accountability and responsibility					
Total score:		Numerical grade:				

Notes:

- In order to pass the rotation, the intern should have a total score of 60% (pass), and must also pass each item in the professionalism section separately.
- In case of failure of an intern, reasons, justifications and feedback must be discussed with the intern prior to submission of this form.

Evaluating-Consultant Comments:

Was this assessment based on discussion with other consultants: Yes No

Other staff: Yes No

Evaluating-Consultant Name: Signature:

Intern's Signature: