

Clinics evaluations

Please take 2 minutes to evaluate the resident you just worked with. It would be wonderful if you could provide the resident with some verbal feedback as well.

Please fax completed eval to the Residency Office at 370-5052, attention Joe Chavez Carey.

Resident: _____ PG-Y: _____

Attending: _____ Clinic: _____

1. Resident was professional, punctual and interacted with staff appropriately (please circle)

below expectations meets expectations above expectations

Comments:

2. Interested in learning (please circle)

below expectations meets expectations above expectations

Comments:

3. Fund of knowledge (please circle)

below expectations meets expectations above expectations

Comments:

4. Procedural skills if applicable (please circle)

below expectations meets expectations above expectations

Comments:

5. Please suggest topics for future reading or areas of improvement:

Signature: _____