



## STUDENT ASSESSMENT SHEET

Please evaluate the student on the basis of you observed during the semester/rotation (use the most appropriate number listed below)! The goal of this assessment is the overall process of the student, not a grade.

| 0   | 1    | 2            | 3       | 4         |
|-----|------|--------------|---------|-----------|
| N/A | Poor | Satisfactory | Average | Excellent |

**Name of student:**

**Name of practical** (underline the name of practical): Internal Medicine, Paediatrics, Surgery, Obstetrics and Gynecology, Neurology, Psychiatry

**Date of assessment:**

|  |  |
|--|--|
| Skilled in developing interpersonal relations: Respectful when interacting with tutors and staff members                           |  |
| Skilled in developing interpersonal relations: Establishes a trustful relationship with the patients                               |  |
| Shows up punctually on practices with awareness of personal dress and appearance   |  |
| Obtains accurate medical history, performs accurate physical examination and synthesizes essential information in a concise manner |  |
| Sets up accurate diagnostic and differential diagnostic plans; develops relevant therapeutic plans                                 |  |
| Exhibits integrity, maturity and solid ethical behavior  |  |
| Solicits feedback and incorporates others' opinions in self-improvement  |  |
| Overall fund of knowledge of the taught subject; overall performance compared to his/her peers                                     |  |

Comments:

**Evaluator/Tutor:**