

Please return to:
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M4 Elective Student Performance Evaluation

Student: _____
Dept & Course Name: _____
Dates of Rotation: _____
Evaluator's Name: _____

This evaluation contains a condensed set of questions regarding the 6 competency domains and a checklist of potential summative assessment measures.

Please refer to your elective course syllabus and course-specific objectives as you complete this student performance evaluation. Evaluate student performance in the 6 School of Medicine competency areas below.

- PATIENT CARE:** Students are expected to provide patient care that is compassionate, appropriate and effective for the treatment of health problems and the promotion of health.
 Unacceptable Needs Improvement Competent Superior/Exceptional N/A
- MEDICAL KNOWLEDGE:** Students are expected to demonstrate knowledge of established and evolving biomedical, clinical, and social sciences.
 Unacceptable Needs Improvement Competent Superior/Exceptional N/A
- PRACTICE-BASED LEARNING AND IMPROVEMENT:** Students are expected to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence and to continuously improve patient care based on constant self-evaluation and life-long learning.
 Unacceptable Needs Improvement Competent Superior/Exceptional N/A
- INTERPERSONAL AND COMMUNICATION SKILLS:** Students are expected to effectively communicate and collaborate with patients, their families, and health professionals.
 Unacceptable Needs Improvement Competent Superior/Exceptional N/A
- PROFESSIONALISM:** Students are expected to demonstrate a commitment to carry out professional responsibilities, adhere to ethical principles, and be sensitive to a diverse patient population.
 Unacceptable Needs Improvement Competent Superior/Exceptional N/A
- SYSTEM-BASED KNOWLEDGE:** Students are expected to demonstrate an awareness of the larger context and system of health care and effectively call on system resources to provide optimal care.
 Unacceptable Needs Improvement Competent Superior/Exceptional N/A

Comments on competency performance – Feedback is required if you answered any item with “Unacceptable” or “Needs Improvement.”

Additional Assessment Criteria – If this elective’s course syllabus lists any of the following assessment measures as final grade criteria, please check them below:

- | | |
|---|--|
| <input type="checkbox"/> Abstract (original) | <input type="checkbox"/> Poster |
| <input type="checkbox"/> Clinical Skills Exam | <input type="checkbox"/> Presentation |
| <input type="checkbox"/> Conference Participation | <input type="checkbox"/> Procedural Skills |
| <input type="checkbox"/> EKG Interpretation | <input type="checkbox"/> Research |
| <input type="checkbox"/> Final Exam | <input type="checkbox"/> Student Journal Entries |
| <input type="checkbox"/> Final Paper | <input type="checkbox"/> Written Exam |
| <input type="checkbox"/> Lab Work | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Oral Exam | |

Please comment on the student’s performance on the summative assessment items selected above.

FINAL GRADE (Please ensure this elective course’s syllabus offers Honors as a potential grade option.)

- Honors Satisfactory Unsatisfactory

If you would like to provide additional feedback, you may do so here:

Evaluator’s Signature: _____

Date: _____

Student’s Signature: _____

Date: _____