

OB/GYN HISTORY AND PHYSICAL EVALUATION FORM

Student (sign):

Date:

Evaluator (sign):

Please check one: GYN___OB___

History (15pts)

Circle the Appropriate Score

Chief Complaint

0-----1

History of Present Illness (4 elements)

1-----2-----3-----4

Review of Systems (2 systems)

1---2

Medications/Allergies

1---2

Family History / Social History / PMH / PSH

1---2---3---4

OB History / GYN History

1---2

Physical Exam (5 systems) (5pts)

1-----2-----3-----4-----5

Medical Decision Making (5pts)

Laboratory/Diagnostic tests (Ordered and Reviewed Labs)

1-----2

Assessment & Plan

(Differential Diagnoses, Included Treatment Plan)

1-----2-----3

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Strengths:

Areas for improvement:

Overall Score /25

Each student is required to hand in 2 H&P evaluations, one obstetric H&P and one gynecology H&P. One should be submitted in week 4 with the mid-clerkship evaluation. The second one should be submitted by the end of week 7.