

ABC Hospital

**RESIDENT EVALUATION OF ATTENDING STAFF**

**S=SATISFACTORY/U=UNSATISFACTORY**

Attending Staff: \_\_\_\_\_

Rotation Title: \_\_\_\_\_

Dates of Rotation: \_\_\_\_\_

Resident: \_\_\_\_\_

**Instructive Capabilities**

- |  |            |
|--|------------|
| 1. Active participation in lecture/discussions     | <b>S/U</b> |
| 2. Active participation in presentation/meetings   | <b>S/U</b> |
| 3. Active instruction during clinical patient care | <b>S/U</b> |
| 4. Active participation in teaching rounds         | <b>S/U</b> |
| 5. Quality of preparation for cases/rounds         | <b>S/U</b> |
| 6. Spectrum of cases covered                       | <b>S/U</b> |

**Personal Qualities**

- |                                     |            |
|-------------------------------------|------------|
| 1. Instructive Ability              | <b>S/U</b> |
| 2. Organization of topics taught    | <b>S/U</b> |
| 3. Punctual                         | <b>S/U</b> |
| 4. Ability to present feedback      | <b>S/U</b> |
| 5. Sensitivity to needs of patients | <b>S/U</b> |
| 6. Sensitivity to hospital staff    | <b>S/U</b> |

Attending Staff Signature \_\_\_\_\_ Date \_\_\_\_\_

Resident \_\_\_\_\_ Date \_\_\_\_\_

DPME Signature \_\_\_\_\_ Date \_\_\_\_\_

COMMENTS: \_\_\_\_\_