

## AMERICAN UNIVERSITY OF ANTIGUA COLLEGE OF MEDICINE

## COMPREHENSIVE STUDENT CLERKSHIP ASSESSMENT FORM

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Faizan Khan		13
Student Name		ID #
Core		
<b>Clinical Rotation</b>	_	
	<b>✓</b> Core	Start Date: <u>13/07/202</u> 2 End Date: <u>15/08/2022</u>
	☐ Elective	(Must start on Monday and end on Friday)
Apollo		
Clinical Site		

In Process

Patient Care:				
			riate, and effective for the treatment of heal s differential diagnoses, patient-centered n	
Outstanding	O Competent	O Adequate	O Inadequate, remediation required	O Not Observed/Insufficient Data
Comments				
1edical Knowledg	ge:			
	_		linical sciences and applies that knowledge	
Outstanding	O Competent	O Adequate	O Inadequate, remediation required	O Not Observed/Insufficient Data
Comments				
		In	Proce	255
nterpersonal and (	Communication	Skills:		
emonstrates skills (i.e	e. listening, respond	ling) that result in e	effective information exchange between pa	tient, family, and healthcare team.
Outstanding	O Competent	O Adequate	O Inadequate, remediation required	O Not Observed/Insufficient Data
Comments				
Practice-Based Lea	arning and Impr	ovement:		
Demonstrates the abilitare based on constant			are, to appraise and assimilate scientific ev	idence, and to continuously improve pa
	O Competent	O Adequate	O Inadequate, remediation required	O Not Observed/Insufficient Data
Outstanding	Competent			

Systems-Based Le	earning:			
Demonstrates awarene resources in the system			context and system of health care, as well a	s the ability to call effectively on other
Outstanding	O Competent	O Adequate	O Inadequate, remediation required	O Not Observed/Insufficient Data
Comments				
Professionalism:				
Demonstrates commit	ment to professional	development and	ethical principles and sensitivity to patient/	family and peer diversity.
Outstanding	O Competent	O Adequate	O Inadequate, remediation required	O Not Observed/Insufficient Data
Comments				
				ess
Student Portfolio:				
Provides information	about student's expo	sure to patients and	academic curricular and non-curricular ac	tivities.
Outstanding	O Competent	O Adequate	O Inadequate, remediation required	O Not Observed/Insufficient Data
Comments				

Mandatory Comments for MSPE	
THIS COMPREHENSIVE STUDENT CLERKSHIP AS	SSESSMENT
FORM WAS DISCUSSED WITH THE STUDENT.	70200.121.12
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Name of Supervising Physician:	Supervising Physician's Phone:
Signature of Supervising Physician:	Date of Evaluation:
Name of Director of Medical Education:	
Director of Medical Education Comments:	
Director of Miculean Education Comments.	
Signature of Director of Medical Education:	Date of Signature: