Shamrock Assist

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E: info@sralocum.com P: 01-6854700 & 01-6994321

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ASSESSMENT FORM

DOCTOR NAME	Aitzaz Amin
POSITION	Medical Consultant
IMCR NO	413125
DATE	30th Mar 2022

The above named Doctor has recently been placed under your supervision for a locum position. As part of our follow up after care programme, we would greatly appreciate if you could provide us with a follow up assessment for the doctor's time spent at this GP. Please could you complete and return this reference at your earliest convenience to assist this locum.

Please note that this information may be used as a reference for future locum placements.

Criteria	Excellent	Good	Average	Poor
Academic Knowledge	X			
Clinical Ability	X			
English Spoken	X			
English Communication	X			
Attendance	X			
Punctuality	X			
Rapport with Patients	X			
Rapport with Staff	X			
Medical Records	X	_		

Would you be happy to receive this doctor again for a locum position? (Please circle relevant option) YesYES No Unsure If so, do you know of any future dates, which this locum maybe required?
If so, do you know of any future dates, which this locum maybe required?
Please feel free to make any additional comments, which you feel will be helpful to us i.e. any training needs identified. Aitzaz has been working at a level consistent with medical consultant level
Consultant Name: Cormac Mc Cart Clinic Name: UHW Speciality: Acute Medicine 009909 Signature: c mc cart c mc cart
Tel: <u>051848000</u>

Please return to

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