

**Colégio da Especialidade de Anestesiologia**

**Internato Médico – Formação Específica**



“HANDS-ON” ROTATION EVALUATION FORM

ROTATION:

Trainee´s name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Trainee´s Base Hospital: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hospital where the rotation took place: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates of rotation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **PERFORMANCE EVALUATION**

|  |  |  |
| --- | --- | --- |
| Evaluation Parameters (0 to 20 points grading) | **Maximum Score** | **Obtained Score** |
| **a) Clinical Skills (0 to 5 points):** |  |  |
| Clinical Judgement  | 2.5 |  |
| Practical skills | 2.5 |  |
| **b) Knowledge (0 to 5 points):** |  |  |
| Knowledge | 5 |  |
| **b) Attitudes and workplace behaviour (0 to 5 points):** |  |  |
| Reliability and punctuality | 1 |  |
| Initiative, confidence, organisational ability and communication skills | 4 |  |
| **c) Relationships ( 0 to 5 points):** |  |  |
| Patients and relatives | 1.25 |  |
| Team working | 1.25 |  |
| Leadership | 1.25 |  |
| Crisis management | 1.25 |  |
|  **TOTAL**   | **20 points** |  |
| ***Overall assessment*** |  Points |

 **2. KNOWLEDGE EVALUATION**

|  |  |  |
| --- | --- | --- |
| Assessment method  | **Choose the used method** | **Score** (0 to 20) |
| **Portfolio activities** (appraisal and discussion)  |  |  |
| **Written exam** |  |  |
| **Oral exam** |  |  |
| **Other type of evaluation** (research report, bibliographic revision, clinical case discussion, or other) |  |  |

|  |  |  |
| --- | --- | --- |
| ***Knowledge evaluation*** | Score obtained\* |  Points  |

 \* *Note: Average of obtained scores*

 **3. ROTATION EVALUATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Rotation evaluation*** | Performance + Knowledge | = |  | =  |  Points |
|  2 |  2 |

**DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_\_ CLINICAL SUPERVISOR: Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**