Student Name:	Mr Glory Yiu Sang Lai
Attachment:	Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	28 November 2011 to 16 December 2011



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

CID: 637913

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

-		
1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	nal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

		Suueni Signalure
Signature	Date	Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

Ealing Hospital

Student Name: Miss Charlotte Lee

Attachment: Hospital:

Date:

CID: 641244



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	nal habaviour?
4.	Do you have any concerns about his / her autude or professio	
5.	Are there any general comments you would like to make?	

Signature	Date	Date

Student Name:	Miss Danielle Lee
Attachment:	Clinical Introductory Attachment
Hospital:	West Middlesex Hospital

28 November 2011 to 16 December 2011

Hospital: Date:

CID: 642665



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professior	nal behaviour?
5.	Are there any general comments you would like to make?	
		Chudent Cierceture
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

Northwick Park Hospital

Student Name: Mr Robert Lee

Attachment: Hospital:

Date:

CID: 639836



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
-		
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	nal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Signature	Date	Date

Student Name: Attachment:	Mr Terence Si Quan Lee Clinical Introductory Attachment	CID: 642463
Hospital:	West Middlesex Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	nal behaviour?
5.	Are there any general comments you would like to make?	

Consultant Name		Student Signature
Signature	Date	Date
Signature	Dale	Dale

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

St Peter's Hospital

Student Name: Mr Mario Lepore

Attachment:

Hospital:

Date:

CID: 639494



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	nal habaviour?
4.	Do you have any concerns about his / her autude or professio	
5.	Are there any general comments you would like to make?	

		Suueni Signalure
Signature	Date	Date

Student Name: Attachment:	Miss Mimi Mengzhen Li Clinical Introductory Attachment
Hospital:	Central Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

CID: 636695



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	nal behaviour?
5.	Are there any general comments you would like to make?	

Signature	Date	Date	
STUDENTS - Please return co	ompleted form to your site Teaching	Co-ordinator together	with a copy of

Student Name: Attachment:	Mr Alphonsus Christopher Liew Yeong Cherng Clinical Introductory Attachment	CID: 635747
Hospital:	Chelsea and Westminster Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	nal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Nama	Student Signature
CONS	ultant Name	Student Signature

 Signature
 Date

 STUDENTS - Please return completed form to your site Teaching Co-ordinator together with a copy of your Patient Journey.

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

**Charing Cross Hospital** 

Student Name: Miss Jiyu Kelly Lim

Attachment: Hospital:

Date:

CID: 592138



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Hee (a) he participated fully in the activities defined?	YES / NO
۷.	Has (s)he participated fully in the activities defined?	TES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Signature	Date	Date	
STUDENTS - Please return comple	eted form to your site Teaching Co your Patient Journey.	o-ordinator together with a copy	' 0

Student Name: Attachment:	Mr James Liston Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	28 November 2011 to 16 December 2011

CID: 641460



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	sultant Name	Student Signature

 Signature
 Date

 STUDENTS - Please return completed form to your site Teaching Co-ordinator together with a copy of your Patient Journey.

Student Name:	Miss Hang Yi Fiona Liu	
Attachment:	Clinical Introductory Attachment	
Hospital:	Hillingdon Hospital	
Date:	28 November 2011 to 16 December 2011	

CID: 593110



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

Has the student been in full attendance?	YES / NO
If not, do they have an acceptable reason for absence?	
Has (s)he participated fully in the activities defined?	YES / NO
Has (s)he completed at least 1 "Patient Journey"?	YES / NO
Do you have any concerns about his / her attitude or professior	nal behaviour?
Are there any general comments you would like to make?	
Are there any general comments you would like to make?	
ultant Name	
	If not, do they have an acceptable reason for absence? Has (s)he participated fully in the activities defined? Has (s)he completed at least 1 "Patient Journey"?

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Mr Tommy Tun Aye Lwin	
Attachment:	Clinical Introductory Attachment	
Hospital:	Charing Cross Hospital	
Date:	28 November 2011 to 16 December 2011	

CID: 636226



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profess	sional behaviour?
5.	Are there any general comments you would like to make?	
Consi	Iltant Name	Student Signature

Signature	Date	Date	
STUDENTS - Please return co	mpleted form to your site Teaching Co your Patient Journey.	ordinator together w	/ith a copy o

Student Name:	Miss Cecilia Olapeju Mafe	
Attachment:	Clinical Introductory Attachment	
Hospital:	Ealing Hospital	
Date:	28 November 2011 to 16 December 2011	

CID: 640585



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal behaviour?
5.	Are there any general comments you would like to make?	
Care	ultant Nama	Ctudent Cigneture
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Miss Paulina Luiza Majewska	
Attachment:	Clinical Introductory Attachment	
Hospital:	Northwick Park Hospital	
Date:	28 November 2011 to 16 December 2011	

CID: 643623



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal bobaviour?
4.	Do you have any concerns about his / her autude or professi	
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5.	Are there any general comments you would like to make?	

Consultant Name	Student Signature	
Oliver a trans	Data	Data
Signature	Date	Date

Student Name: Attachment:	Mr Hammad Husnayn Malik Clinical Introductory Attachment	<b>CID:</b> 640065
Hospital:	Chelsea and Westminster Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

28 November 2011 to 16 December 2011

Date:

Student Name:	Mr Salim Sultan Malik
Attachment:	Clinical Introductory Attachment
Hospital:	St Mary's Hospital



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

CID: 640545

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature
0013		

Signature	Date	Date

Student Name:	Miss Fahmida Mannan	
Attachment:	Clinical Introductory Attachment	
Hospital:	Central Middlesex Hospital	
Date:	28 November 2011 to 16 December 2011	

CID: 640188



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date
olghataio	Date	Date

Student Name:	Miss Heeba Maqbool	
Attachment:	Clinical Introductory Attachment	
Hospital:	Ealing Hospital	
Date:	28 November 2011 to 16 December 2011	

CID: 639304



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

St Peter's Hospital

Student Name: Miss Claire Marsh

Attachment: Hospital:

Date:

CID: 638886



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

Has the student been in full attendance?	YES / NO
If not, do they have an acceptable reason for absence?	
Has (s)he participated fully in the activities defined?	YES / NO
Has (s)he completed at least 1 "Patient Journey"?	YES / NO
Do you have any concerns about his / her attitude or profession	nal behaviour?
Are there any general comments you would like to make?	
	If not, do they have an acceptable reason for absence? Has (s)he participated fully in the activities defined? Has (s)he completed at least 1 "Patient Journey"? Do you have any concerns about his / her attitude or professio

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Mr Connor Maxwell Martin	
Attachment:	Clinical Introductory Attachment	
Hospital:	Northwick Park Hospital	
Date:	28 November 2011 to 16 December 2011	

CID: 641807



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal bobaviour?
4.	Do you have any concerns about his / her autude or professi	
_		
5.	Are there any general comments you would like to make?	

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr Junaid Masud Clinical Introductory Attachment
Hospital:	Charing Cross Hospital
Date:	28 November 2011 to 16 December 2011

CID: 639356



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature
00.10		

Signature Date Date

Student Name:	Mr Soheil Matiny-Boroumand	
Attachment:	Clinical Introductory Attachment	
Hospital:	Hillingdon Hospital	
Date:	28 November 2011 to 16 December 2011	

Signature

CID: 642091



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

STUDENTS - Please return completed form to your site Teaching Co-ordinator together with a copy of your Patient Journey.

Date

Date

Student Name:	Mr Ken Mawhinney
Attachment:	Clinical Introductory Attachment
Hospital:	Ealing Hospital
Date:	28 November 2011 to 16 December 2011

CID: 597934



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profess	ional behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Mr. Edward McDonald
Attachment: Clinical Introductory Attachment	
Hospital:	West Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

CID: 594894



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

Has the student been in full attendance?	YES / NO
If not, do they have an acceptable reason for absence?	
Has (s)he participated fully in the activities defined?	YES / NO
Has (s)he completed at least 1 "Patient Journey"?	YES / NO
	and babanians2
Do you have any concerns about his / her attitude or professio	onal benaviour?
Are there any general comments you would like to make?	
	If not, do they have an acceptable reason for absence? Has (s)he participated fully in the activities defined?

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr Adrian McGrath Clinical Introductory Attachment
Hospital:	Central Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

CID: 641502



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

 Signature
 Date

 STUDENTS - Please return completed form to your site Teaching Co-ordinator together with a copy of

your Patient Journey.

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

Hillingdon Hospital

Student Name: Mr Benjamin McKee

Attachment: Hospital:

Date:

CID: 639291



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	

 Consultant Name
 Student Signature

 Signature
 Date

Student Name:	: Miss Effie Miriam Menyah	
Attachment:	Clinical Introductory Attachment	
Hospital:	West Middlesex Hospital	
Date:	28 November 2011 to 16 December 2011	

CID: 643867



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	onal behaviour?
5.	Are there any general comments you would like to make?	
Consu	iltant Name	Student Signature

Consultant Name		Student Signature	
Signature	Date	Date	

Student Name:	Miss Sophie Mary Middleton	
Attachment: Clinical Introductory Attachment		
Hospital:	Charing Cross Hospital	
Date:	28 November 2011 to 16 December 2011	

CID: 640883



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	sultant Name	Student Signature
00110		

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Miss Anisa Taufiq Moin Clinical Introductory Attachment	<b>CID:</b> 638319
Hospital:	Chelsea and Westminster Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

Hillingdon Hospital

Student Name: Mr Kyung-Hoon Moon

Attachment: Hospital:

Date:

CID: 553821



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

Has the student been in full attendance?	YES / NO
If not, do they have an acceptable reason for absence?	
Has (s)he participated fully in the activities defined?	YES / NO
Has (s)he completed at least 1 "Patient Journey"?	YES / NO
Do you have any concerns about his / her attitude or profession	al behaviour?
Are there any general comments you would like to make?	
Itant Name	Student Signature
	If not, do they have an acceptable reason for absence? Has (s)he participated fully in the activities defined? Has (s)he completed at least 1 "Patient Journey"? Do you have any concerns about his / her attitude or profession

	Student Signature
Date	Date
	Date

Student Name:Mr George Nicholas James MooreAttachment:Clinical Introductory AttachmentHospital:Charing Cross HospitalDate:28 November 2011 to 16 December 2011

CID: 644205



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profess	sional behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature
COIIS		

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Miss Sian Morgan Clinical Introductory Attachment	CID: 593228
Hospital:	Chelsea and Westminster Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	sultant Name	Student Signature
		<b>T</b>

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Miss Maliha Moten Clinical Introductory Attachment	<b>CID:</b> 638614
Hospital:	Chelsea and Westminster Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Miss Zeenathnisa Mougammadou Aribou
Attachment:	Clinical Introductory Attachment
Hospital:	Ealing Hospital
Date:	28 November 2011 to 16 December 2011

CID: 640879



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	anal babaviour?
4.	Do you have any concerns about his / her autude or profession	
_		
5.	Are there any general comments you would like to make?	

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr Keshav Mudgal Clinical Introductory Attachment	CID: 640808
Hospital:	Chelsea and Westminster Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	ional behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

St Mary's Hospital

Student Name: Mr Arun Nachiappan

Attachment: Hospital:

Date:

CID: 638642



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
	De vers here environme eksyt his / her ettitude er nysfession	al babaviaur?
4.	Do you have any concerns about his / her attitude or professior	ial benaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

St Mary's Hospital

Student Name: Mr. Muhammad Najim

Attachment: Hospital:

Date:

CID: 595823



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
•		
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professior	nal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

St Mary's Hospital

Student Name: Mr Tagore Nakornchai

Attachment: Hospital:

Date:

CID: 591806



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Date	Date	
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,		Date Date Date

Student Name:Mr Syed Muhammad Umar NasserAttachment:Clinical Introductory AttachmentHospital:Hillingdon HospitalDate:28 November 2011 to 16 December 2011

CID: 642296



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
_		
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Mr Jeremy Warwick Neale
Attachment:	Clinical Introductory Attachment
Hospital:	Central Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

CID: 639330



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal bobaviour?
4.	Do you have any concerns about his / her autude or professi	
_		
5.	Are there any general comments you would like to make?	

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Miss Christina Neophytou
Attachment:	Clinical Introductory Attachment
Hospital:	Central Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

CID: 644470

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	onal behaviour?
5.	Are there any general comments you would like to make?	
		Chudent Cinneture
Consi	ultant Name	Student Signature

Signature	Date	Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

Ealing Hospital

Student Name: Mr James Nicholds

Attachment: Hospital:

Date:

CID: 595769



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	nal behaviour?
5.	Are there any general comments you would like to make?	
Cons	sultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Ms Chandni Nigam
Attachment:	Clinical Introductory Attachment
Hospital:	West Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

Signature

CID: 596459



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

STUDENTS - Please return completed form to your site Teaching Co-ordinator together with a copy of your Patient Journey.

Date

Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

Ealing Hospital

Student Name: Miss Munachi Nkere

Attachment: Hospital:

Date:

CID: 639517



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
_		
4.	Do you have any concerns about his / her attitude or professio	nal behaviour?
5.	Are there any general comments you would like to make?	
Cons	sultant Name	Student Signature
2.0.10		

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr Pawel Obrocki Clinical Introductory Attachment	<b>CID:</b> 644312
Hospital:	Chelsea and Westminster Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	nal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Mr Lawrence O'Leary
Attachment:	Clinical Introductory Attachment
Hospital:	West Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

CID: 639190



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
	ultant Name	Student Signature

 Signature
 Date

 STUDENTS - Please return completed form to your site Teaching Co-ordinator together with a copy of your Patient Journey.

Student Name: Attachment:	Mr Joon Faii Ong Clinical Introductory Attachment
Hospital:	Central Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

CID: 638900



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

Has the student been in full attendance?	YES / NO
If not, do they have an acceptable reason for absence?	
Has (s)he participated fully in the activities defined?	YES / NO
Has (s)he completed at least 1 "Patient Journey"?	YES / NO
Do you have any concerns about his / her attitude or professio	nal behaviour?
Are there any general comments you would like to make?	
	If not, do they have an acceptable reason for absence? Has (s)he participated fully in the activities defined? Has (s)he completed at least 1 "Patient Journey"? Do you have any concerns about his / her attitude or professio

Consultant Name	Student Signature
Signature Dat	Date

Student Name: Attachment:	Miss Madeleine Clare Morland Openshaw Clinical Introductory Attachment
Hospital:	West Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

CID: 639228



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
O'un stand	Data	Data
Signature	Date	Date

Student Name:	Miss Naomi Oraha Clinical Introductory Attachment
Attachment: Hospital:	Central Middlesex Hospital
Date:	28 November 2011 to 16 December 2011

CID: 639381



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Miss Binita Panchasara Clinical Introductory Attachment	CID: 638616
Hospital:	Chelsea and Westminster Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	nal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Mr Kyriacos Loizos Papalouca
Attachment:	Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	28 November 2011 to 16 December 2011

CID: 596133



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profess	ional behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr. John Gapdong Park Clinical Introductory Attachment
Hospital:	Charing Cross Hospital
Date:	28 November 2011 to 16 December 2011

CID: 593383



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

Has the student been in full attendance?	YES / NO
If not, do they have an acceptable reason for absence?	
Has (s)he participated fully in the activities defined?	YES / NO
Has (s)he completed at least 1 "Patient Journey"?	YES / NO
Do you have any concerns about his / her attitude or professio	nal behaviour?
Are there any general comments you would like to make?	
	If not, do they have an acceptable reason for absence? Has (s)he participated fully in the activities defined? Has (s)he completed at least 1 "Patient Journey"? Do you have any concerns about his / her attitude or professio

	Student Signature
Signature Date	Date

Student Name: Attachment:	Mr Anesh Patel Clinical Introductory Attachment
Hospital:	Hillingdon Hospital
Date:	28 November 2011 to 16 December 2011

CID: 640373



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	nal behaviour?
5.	Are there any general comments you would like to make?	
	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Mr Ankur Patel
Attachment:	Clinical Introductory Attachment
Hospital:	Ealing Hospital
Date:	28 November 2011 to 16 December 2011

CID: 641232



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr Nikhil Manish Patel Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	28 November 2011 to 16 December 2011

CID: 636228



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature
		Ť

 Signature
 Date

 STUDENTS - Please return completed form to your site Teaching Co-ordinator together with a copy or

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

West Middlesex Hospital

Student Name: Mr Aaron Philip

Attachment:

Hospital:

Date:

CID: 639966



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	onal behaviour?
5.	Are there any general comments you would like to make?	
Consu	ultant Name	Student Signature

		Student Signature
Signature	Date	Date

Student Name: Miss Margaret Pikovsky

Ealing Hospital

Attachment: Hospital:

Date:

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

CID: 638878



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
•		
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professior	nal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

**Clinical Introductory Attachment** 

28 November 2011 to 16 December 2011

Ealing Hospital

Student Name: Mr William Pitts

Attachment: Hospital:

Date:

CID: 639121



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Hee (a) he participated fully in the activities defined?	YES / NO
Ζ.	Has (s)he participated fully in the activities defined?	TES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profess	ional behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

	Student Signature
Date	Date

Student Name:	Miss Emily Judith Plummer
Attachment:	Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	28 November 2011 to 16 December 2011

CID: 639450



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Miss Aiysha Misha Clare Puri
Attachment:	Clinical Introductory Attachment
Hospital:	Charing Cross Hospital
Date:	28 November 2011 to 16 December 2011

CID: 640459



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or profession	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

		Student Signature	้อเน	
Signature	Date	Date	Dat	
				-

Student Name: Attachment:	Mr Zahi Qamhawi Clinical Introductory Attachment	CID: 639183
Hospital:	Chelsea and Westminster Hospital	
Date:	28 November 2011 to 16 December 2011	



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professio	onal behaviour?
5.	Are there any general comments you would like to make?	
	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:Miss Denise Desiree Bi Si QuahAttachment:Clinical Introductory AttachmentHospital:St Peter's HospitalDate:28 November 2011 to 16 December 2011

CID: 642211



Since this is a short attachment with acquisition of experience rather than academic knowledge as its primary aim, teaching will be on an informal basis. The Assessment Form is therefore much simpler than those for the later Year 3 Clinical attachments.

The form should be completed in the student's presence and the student should then return it to their site Teaching Co-ordinator.

1.	Has the student been in full attendance?	YES / NO
	If not, do they have an acceptable reason for absence?	
2.	Has (s)he participated fully in the activities defined?	YES / NO
3.	Has (s)he completed at least 1 "Patient Journey"?	YES / NO
4.	Do you have any concerns about his / her attitude or professi	onal behaviour?
5.	Are there any general comments you would like to make?	
Cons	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date