



Student Name: Miss Nina Dalton **CID:** 682987
Attachment: Clinical Introductory Attachment
Hospital: St Mary's Hospital
Date: 26 November 2012 to 14 December 2012

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Cerys Daniel **CID:** 683940
Attachment: Clinical Introductory Attachment
Hospital: St Mary's Hospital
Date: 26 November 2012 to 14 December 2012

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3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

4. **Do you have any concerns about his / her attitude or professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Mr Thomas Michael Priest Dauncey
Attachment: Clinical Introductory Attachment
Hospital: St Peter's Hospital
Date: 26 November 2012 to 14 December 2012

CID: 640316

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Pavle Dimitrijevic
Attachment: Clinical Introductory Attachment
Hospital: St Peter's Hospital
Date: 26 November 2012 to 14 December 2012

CID: 640196

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Shaun Richard Dole **CID:** 687063
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Mr Neil Duncan Donald
Attachment: Clinical Introductory Attachment
Hospital: St Peter's Hospital
Date: 26 November 2012 to 14 December 2012

CID: 690411

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Oliver Douglas **CID:** 682873
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Stephanie Drew **CID:** 684552
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Farheen Ebrahim **CID:** 637131
Attachment: Clinical Introductory Attachment
Hospital: St Mary's Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Abdulrahman El-Hilly
Attachment: Clinical Introductory Attachment
Hospital: St Mary's Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687227

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**

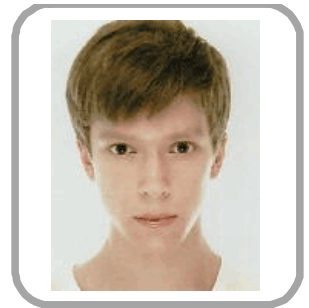
3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

4. **Do you have any concerns about his / her attitude or professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name	Student Signature
Signature	Date
	Date

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



Student Name: Mr Thomas Alexander Elliott
Attachment: Clinical Introductory Attachment
Hospital: St Mary's Hospital
Date: 26 November 2012 to 14 December 2012

CID: 684730

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Hanne Ertman
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

CID: 686719

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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Mark Fellows **CID:** 688455
Attachment: Clinical Introductory Attachment
Hospital: Northwick Park Hospital
Date: 26 November 2012 to 14 December 2012

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Ying Foo **CID:** 685321
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Claudia Louise Fowler-Williams
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687255

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.

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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 professional behaviour?**

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Consultant 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: Mr Mustafa Franka **CID:** 643859
Attachment: Clinical Introductory Attachment
Hospital: Central Middlesex Hospital
Date: 26 November 2012 to 14 December 2012

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3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

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Date		Date

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Student Name: Mr Oliver Benjamin Freedman
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687997

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3. Has (s)he completed at least 1 "Patient Journey"? YES / NO

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Student Name: Miss Karishma Gadhi
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

CID: 596588

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Consultant Name		Student Signature
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Date		Date

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Student Name: Mr Thenugan Ganeshanathan
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

CID: 685807

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Student Name: Miss Yueqi Ge **CID:** 683191
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

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3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

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Date		Date

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



Student Name: Miss Anju George **CID:** 639958
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

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3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

4. **Do you have any concerns about his / her attitude or professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
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Date		Date

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



Student Name: Mr Mehmet Gez
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

CID: 689348

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
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Date		Date

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



Student Name: Miss Kiranpreet Kaur Gill
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687972

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Mr David Michael Goldsmith **CID:** 688631
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

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.

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If not, do they have an acceptable reason for absence?

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3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

4. **Do you have any concerns about his / her attitude or professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Maria Goryaeva
Attachment: Clinical Introductory Attachment
Hospital: Northwick Park Hospital
Date: 26 November 2012 to 14 December 2012

CID: 690234

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.

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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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Dzintars Gotham **CID:** 688757
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
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Date		Date

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



Student Name: Mr Lennart Carlos Graebner
Attachment: Clinical Introductory Attachment
Hospital: St Mary's Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687379

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.

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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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Adam Green
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687575

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.

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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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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 Sara Grace Griffiths
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683291

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.

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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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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 Maddison Rumer Gronager
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

CID: 689149

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

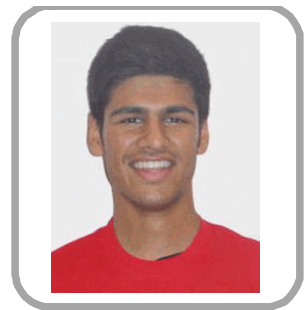
3. Has (s)he completed at least 1 "Patient Journey"? YES / NO

4. Do you have any concerns about his / her attitude or professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Keshav Kumar Gupta
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

CID: 685191

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Nikhita Shivani Gupta
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

CID: 686686

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Miss Salma Haddad
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

CID: 682539

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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Timothy Hall **CID:** 635887
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name	Student Signature
Signature Date	Date

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



Student Name: Miss Katherine Mary Halloran
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

CID: 639386

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name	Student Signature
Signature	Date
	Date

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



Student Name: Mr John Maredudd Glyn Harris
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683571

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name	Student Signature
Signature	Date
	Date

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



Student Name: Mr Joseph Heylen **CID:** 683235
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Mr Weixing Ho **CID:** 685120
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name	Student Signature
Signature Date	Date

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



Student Name: Mr Ibtesham Tausif Hossain
Attachment: Clinical Introductory Attachment
Hospital: St Mary's Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687409

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name	Student Signature
Signature	Date
	Date

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



Student Name: Miss Anna Humphreys **CID:** 682678
Attachment: Clinical Introductory Attachment
Hospital: St Mary's Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Mr Farhan Emdad Huq
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

CID: 688540

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Anna Rebecca Hurley
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

CID: 643138

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name	Student Signature
Signature	Date
	Date

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



Student Name: Mr Sheeraz Syed Iqbal
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683425

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Omer Jamall
Attachment: Clinical Introductory Attachment
Hospital: Central Middlesex Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683030

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

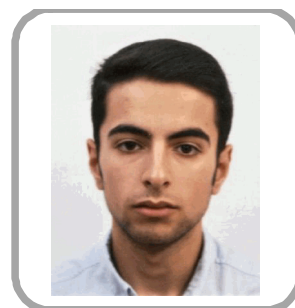
3. Has (s)he completed at least 1 "Patient Journey"? YES / NO

4. Do you have any concerns about his / her attitude or professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Sina Jameie-Oskooei
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

CID: 684714

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**

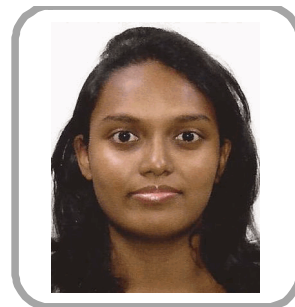
3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

4. **Do you have any concerns about his / her attitude or professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Sriyani Maduka Jayasinghe
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

CID: 643322

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**

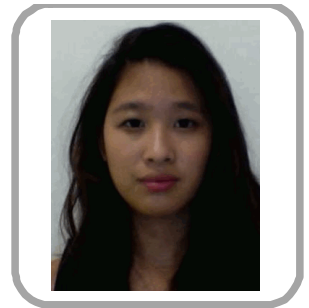
3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

4. **Do you have any concerns about his / her attitude or professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Da Ah Gloria Jung
Attachment: Clinical Introductory Attachment
Hospital: St Peter's Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683904

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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Sanchit Kapoor
Attachment: Clinical Introductory Attachment
Hospital: Central Middlesex Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687355

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Rustam Karanjia
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

CID: 685034

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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Oliver Kemp
Attachment: Clinical Introductory Attachment
Hospital: Central Middlesex Hospital
Date: 26 November 2012 to 14 December 2012

CID: 684059

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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Joe Kempton **CID:** 640173
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Mr Abul Mohammed Hameed Khan
Attachment: Clinical Introductory Attachment
Hospital: Central Middlesex Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683596

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Bilal Khan
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683050

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Faisal Khan
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683712

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Harun Khan
Attachment: Clinical Introductory Attachment
Hospital: Hillingdon Hospital
Date: 26 November 2012 to 14 December 2012

CID: 646096

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

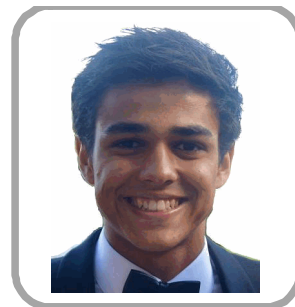
3. Has (s)he completed at least 1 "Patient Journey"? YES / NO

4. Do you have any concerns about his / her attitude or professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Joshua Khan
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

CID: 642608

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Miss Maha Khan **CID:** 640747
Attachment: Clinical Introductory Attachment
Hospital: St Mary's Hospital
Date: 26 November 2012 to 14 December 2012

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?

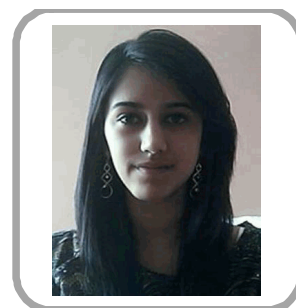
2. **Has (s)he participated fully in the activities defined?** **YES / NO**
3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

4. **Do you have any concerns about his / her attitude or professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Sarah Aliyah Khan
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

CID: 682914

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name	Student Signature
Signature	Date
Date	Date

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



Student Name: Miss Tasnia Akthar Nahid Khan
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687556

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**

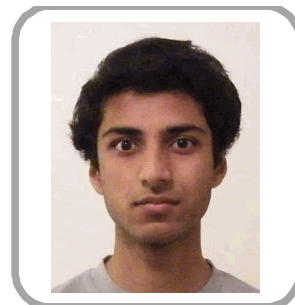
3. **Has (s)he completed at least 1 "Patient Journey"?** **YES / NO**

4. **Do you have any concerns about his / her attitude or professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Tanay Kharwadkar
Attachment: Clinical Introductory Attachment
Hospital: Central Middlesex Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683893

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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Mohamed Zaki Khelifa
Attachment: Clinical Introductory Attachment
Hospital: St Peter's Hospital
Date: 26 November 2012 to 14 December 2012

CID: 684797

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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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 Valerie Meizhi Khoo
Attachment: Clinical Introductory Attachment
Hospital: Charing Cross Hospital
Date: 26 November 2012 to 14 December 2012

CID: 690848

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

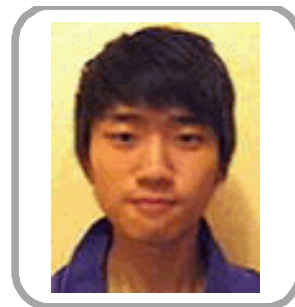
3. Has (s)he completed at least 1 "Patient Journey"? YES / NO

4. Do you have any concerns about his / her attitude or professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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: Mr Jin Un Kim **CID:** 685050
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Mr Woo Jae Kim
Attachment: Clinical Introductory Attachment
Hospital: West Middlesex Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683862

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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 Sally Ko **CID:** 683117
Attachment: Clinical Introductory Attachment
Hospital: Chelsea and Westminster Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Miss De Jie Kimberly Kok
Attachment: Clinical Introductory Attachment
Hospital: Central Middlesex Hospital
Date: 26 November 2012 to 14 December 2012

CID: 687964

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature
Signature		Date
Date		Date

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



Student Name: Mr Anish Koneru
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

CID: 684736

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Govindpal Singh Kooner
Attachment: Clinical Introductory Attachment
Hospital: Northwick Park Hospital
Date: 26 November 2012 to 14 December 2012

CID: 550356

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 professional behaviour?

5. Are there any general comments you would like to make?

Consultant 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 Shoshanna Krasner-Macleod
Attachment: Clinical Introductory Attachment
Hospital: Ealing Hospital
Date: 26 November 2012 to 14 December 2012

CID: 683186

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant 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: Mr Siddarth Kumar **CID:** 688006
Attachment: Clinical Introductory Attachment
Hospital: West Middlesex Hospital
Date: 26 November 2012 to 14 December 2012

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 professional behaviour?**

5. **Are there any general comments you would like to make?**

Consultant Name		Student Signature	
Signature		Date	

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