Student Name: Miss Sonal Jayesh Lakhani **Clinical Introductory Attachment** Ealing Hospital

26 November 2012 to 14 December 2012

Attachment: Hospital:

Date:

CID: 682887



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?		
F			Obudant Cinneture	٦
╞	Consul	tant Name	Student Signature	

Date Signature Date

Student Name:Miss Mariam Ihsan Alshahib Lami<br/>Clinical Introductory AttachmentAttachment:Clinical Introductory AttachmentHospital:St Mary's HospitalDate:26 November 2012 to 14 December 2012

CID: 683914



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?		
_				-
	Consu	tant Name	Student Signature	

Signature Date Date

Student Name:	Mr Benjamin Hong-Wei Lau
Attachment:	Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

CID: 683621



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?		
ŀ	Consu	tant Name	Student Signature	
				1

Signature	Date	Date		
STUDENTS - Please return com	pleted form to your site Teaching C your Patient Journey.	o-ordinator togethe	r with a copy	of

Date

Student Name:Miss Emily Gwen Woo LeungAttachment:Clinical Introductory AttachmentHospital:West Middlesex HospitalDate:26 November 2012 to 14 December 2012

CID: 686658



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?		1
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	sultant Name	Student Signature	
			1

Signature Date Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

Ealing Hospital

Student Name: Miss Hiu Yu Leung

Attachment: Hospital:

Date:

CID: 685943



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	Ν
	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?		
Cor	nsultant Name	Student Signature	1
		1	

Consultant Name		Student Signature	
Signature	Date	Date	

Student Name: Attachment:	Mr Jacob Levi 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.

CID: 685017

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?		
F				7
ŀ	Consu	tant Name	Student Signature	

		e ta a crit e ignatar e
Signature	Date	Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Mary's Hospital

Student Name: Miss Katherine Lewis

Attachment: Hospital:

Date:

CID: 683206



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?		
F	Consul	tant Name	Student Signature	1

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	•
Attachment:	Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

CID: 642842



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	$\backslash$
		If not, do they have an acceptable reason for absence?		1
	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?		
-				
	Consu	tant Name	Student Signature	
				1

Signature	Date	Date

Student Name:Miss Jennifer Elizabeth LewseyAttachment:Clinical Introductory AttachmentHospital:Ealing HospitalDate:26 November 2012 to 14 December 2012

CID: 685587



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?		
_				-
╞	Consu	tant Name	Student Signature	

Signature	Date	Date

Student Name: Mr Thomas Ka Cheong Li

Attachment: Hospital:

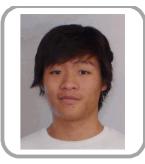
Date:

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

Northwick Park Hospital

CID: 686386



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?	
Consi	ultant Name	Student Signature

		Student Signature
Signature	Date	Date
	2410	Bato

Student Name:	Miss Audrie Hui Xuan Lim
Attachment:	Clinical Introductory Attachment
Hospital:	Charing Cross Hospital
Date:	26 November 2012 to 14 December 2012

CID: 685970



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?		
			P.
Consu	tant Name	Student Signature	1

		e ta a e n e ngh a ta ne
Signature	Date	Date
	Bato	2010

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

Hillingdon Hospital

Student Name: Mr Ernest Lim Junwei

Attachment: Hospital:

Signature

Date:

CID: 686104



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	$\backslash$
	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?		
Consu	ultant Name	Student Signature	
1			

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

Date

Date

Student Name: Attachment:	Mr Rhannon Lobo Clinical Introductory Attachment
Hospital:	West Middlesex Hospital
Date:	26 November 2012 to 14 December 2012

CID: 684804



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?		
_				-
	Consu	tant Name	Student Signature	
				1

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Mr Bradley Jake Lonergan
Attachment:	Clinical Introductory Attachment
Hospital:	St Mary's Hospital
Date:	26 November 2012 to 14 December 2012

CID: 682479



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?		
			-
Consu	tant Name	Student Signature	
			1

Signature Date Date

Student Name:Miss Irina Mladenova LubomirovaAttachment:Clinical Introductory AttachmentHospital:Ealing HospitalDate:26 November 2012 to 14 December 2012

CID: 689058



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?		
$\left  \right $	Consu	tant 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:	ent Name: Mr Amir Faisal Majid	
Attachment:	Clinical Introductory Attachment	
Hospital:	West Middlesex Hospital	
Date:	26 November 2012 to 14 December 2012	

CID: 642449



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	sultant Name	Student Signature

Signature	Date	Date

Student Name:	Mr Aly-Khan Makhani
Attachment:	Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

CID: 686190



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?		
			-
Consu	tant Name	Student Signature	
			1

Signature Date Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Mary's Hospital

Student Name: Miss Yulia Maksunova

Attachment: Hospital:

Date:

CID: 687278



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?	
Const	ultant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:Miss Katherine Anne MalabananAttachment:Clinical Introductory AttachmentHospital:St Mary's HospitalDate:26 November 2012 to 14 December 2012

CID: 685855



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?		
ŀ	Consu	tant Name	Student Signature	
				1

Signature Date Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

Hillingdon Hospital

Student Name: Mr Jay Mandan

Attachment: Hospital:

Date:

CID: 684128



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	Ν
	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?		
Cor	nsultant Name	Student Signature	1
		1	

	Student Signature
Date	Date

Student Name: Attachment:	Miss Jessica Ellen Martin 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.

CID: 689831

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 profes	sional 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 Abaris Massoumi
Attachment:	Clinical Introductory Attachment
Hospital:	West Middlesex Hospital
Date:	26 November 2012 to 14 December 2012

CID: 687636



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?		
				-
ŀ	Consu	tant 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 Arun Mathivanan
Attachment:	Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

CID: 688482



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?		
╞	Consu	tant Name	Student Signature	
				1

		oradoni orginataro
	- /	
Signature	Date	Date

Student Name:	Mr Leopold Kai Matthews
Attachment:	Clinical Introductory Attachment
Hospital:	Central Middlesex Hospital
Date:	26 November 2012 to 14 December 2012

CID: 683856



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	$\backslash$
		If not, do they have an acceptable reason for absence?		1
	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?		
-				
ŀ	Consu	tant Name	Student Signature	
				1

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

your Patient Journey.

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Mary's Hospital

Student Name: Miss Orlaith McAuliffe

Attachment: Hospital:

Date:

CID: 642779



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	Ν
		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?		
_				
	Consu	tant Name	Student Signature	
				1

		Student Signature
Signature	Date	Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Peter's Hospital

Student Name: Mr Sean McKeon

Attachment: Hospital:

Date:

CID: 687001



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	$\mathbf{i}$
		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?		
I				7
	Consu	tant Name	Student Signature	

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr Tom Cormac Mee Clinical Introductory Attachment	CID: 685396
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 profession	nal behaviour?	
	5.	Are there any general comments you would like to make?		
ľ			Ot alast Oissature	
	Consul	tant Name	Student Signature	

Consultant Name		Student Signature
Signature	Date	Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Peter's Hospital

Student Name: Mr Chetan Mehta

Attachment: Hospital:

Date:

CID: 682412



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?		
_				_
	Consu	tant Name	Student Signature	

 Signature
 Date

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

Student Name: Attachment:	Mr Nishit Mehta Clinical Introductory Attachment	CID: 686336
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 profession	nal behaviour?	
	5.	Are there any general comments you would like to make?		
F			Otudant Olimatum	7
╞	Consul	tant Name	Student Signature	

Consultant Name		Student Signature	
Signature	Date	Date	
			-

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Mary's Hospital

Student Name: Miss Arathi Menon

Attachment: Hospital:

Date:

CID: 685967



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?		
F	Consul	tant Name	Student Signature	1

Consultant Name	Student Signature	
Signature	Date	Date

Student Name: Attachment:	Mr Deepak Menon Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

CID: 683722



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 profes	sional 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 Dominic Turner Merriott

Attachment: Hospital:

Date:

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

Hillingdon Hospital

CID: 592988



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	$\backslash$
	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 profes	sional 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 Manvi Mittal Clinical Introductory Attachment
Attachment: Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

CID: 683088



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?		
P				_
	Consu	tant Name	Student Signature	

Signature Date Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Mary's Hospital

Student Name: Miss Irene Moraitis

Attachment: Hospital:

Date:

CID: 638607



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?		
F	Consul	tant Name	Student Signature	1

Consultant Name	Student Signature	
Signature	Date	Date

Student Name: Attachment:	<ul> <li>Miss Flora Morris</li> <li>Clinical Introductory Attachment</li> </ul>	
Hospital:	Northwick Park Hospital	
Date:	26 November 2012 to 14 December 2012	

CID: 687945



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	sultant Name	_ Student Signature	

Signature	Date	Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

Hillingdon Hospital

Student Name: Mr James Morris

Attachment: Hospital:

Date:

CID: 639208



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	$\backslash$
		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?		
F				
	Consu	tant Name	Student Signature	

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Mr David James Morrow

Attachment: Hospital:

Date:

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Peter's Hospital

CID: 686275



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?	
Consi	ultant Name	Student Signature

o ono altante i talito		
Signature	Date	Date
Signature	Date	Date

Student Name: Attachment:	Mr Edward Muffett Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

CID: 690245



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?	
С	onsultant 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 Aamer Jamal Mughal

Attachment: Hospital:

Date:

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Peter's Hospital

CID: 683510



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?	
Con	sultant Name	Student Signature

oonoaltant Name		
Signature	Date	Date

Student Name: Mr Umair Aslam Mughal

Attachment: Hospital:

Date:

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

Hillingdon Hospital

CID: 643814



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

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr Mohammed Muntasir Clinical Introductory Attachment	CID: 685423
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	$\backslash$
		If not, do they have an acceptable reason for absence?		1
	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?		
F	Consul	tant Name	Student Signature	

		Student Signature
Circulations	Data	Data
Signature	Date	Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Mary's Hospital

Student Name: Mr Ameer Mustafa

Attachment: Hospital:

Signature

Date:

CID: 638845



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?	
Consi	ultant Name	Student Signature
1		

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

Date

Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

Charing Cross Hospital

Student Name: Mr Qamar Mustafa

Attachment: Hospital:

Date:

CID: 638891



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?	
Consu	tant Name	Student Signature

		Student Signature
Signature	Date	Date
	2410	Bato

Student Name:	Miss Pooja Rajkumar Nair
Attachment:	Clinical Introductory Attachment
Hospital:	St Mary's Hospital
Date:	26 November 2012 to 14 December 2012

CID: 685884



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?		
╞	Consu	tant Name	Student Signature	
				1

 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 Sameer Nardeosingh Clinical Introductory Attachment	CID: 686922
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 profession	nal behaviour?
5.	Are there any general comments you would like to make?	
Consu	tant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr Osman Nayeem Clinical Introductory Attachment
Hospital:	Charing Cross Hospital
Date:	26 November 2012 to 14 December 2012

**CID:** 640410



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

		Student Signature
Signature	Date	Date

Student Name:	Miss Diana Newman
Attachment:	Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

CID: 637907



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?		
ŀ	Consu	tant Name	Student Signature	
				1

Signature	Date	Date	
•			

Student Name: Attachment:	Mr Nik Fikri Nik Fauzi Clinical Introductory Attachment	CID: 680159
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 profession	nal behaviour?	
	5.	Are there any general comments you would like to make?		
ľ			Ot alore to be a firme	
	Consul	tant Name	Student Signature	

Signature	Date	Date

	Mr Joseph Matthew Nind Clinical Introductory Attachment
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.

CID: 682464

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?		
ŀ	Consu	tant Name	Student Signature	
				1

Signature	Date	Date	
STUDENTS - Please return co	mpleted form to your site Teaching C	o-ordinator together v	with a copy of

your Patient Journey.

Student Name:	Miss Sharon Ocansey
Attachment:	Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

CID: 685570



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

		Student Signature
Circulations	Data	Data
Signature	Date	Date

Student Name: Attachment:	Mr Gregory Oghassabian Clinical Introductory Attachment	<b>CID</b> : 687530
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	$\backslash$
	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?		
Consu	tant Name	Student Signature	

Consultant Name		Student Signature
Signature	Date	Date

Student Name: Attachment:	Mr Jasraj Panesar Clinical Introductory Attachment	<b>CID</b> : 594950
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 profession	nal behaviour?	
	5.	Are there any general comments you would like to make?		
F				7
ŀ	Consu	tant Name	Student Signature	

Signature	Date	Date

Student Name: Attachment:	Miss Henna Patel Clinical Introductory Attachment
Hospital:	West Middlesex Hospital
Date:	26 November 2012 to 14 December 2012

CID: 684450



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?		1
	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?		
F				1
┠	Consu	tant Name	Student Signature	
				1

 Signature
 Date

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

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Mary's Hospital

Student Name: Miss Nandita Patel

Attachment: Hospital:

Date:

CID: 683966



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?		
Consul	tant Name	Student Signature	

Signature	Date	Date

Student Name: Attachment:	Mr Nikesh Patel Clinical Introductory Attachment	CID: 685229
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 profession	nal behaviour?	
	5.	Are there any general comments you would like to make?		
F				7
ŀ	Consu	tant Name	Student Signature	

Signature	Date	Date	
5			

Student Name: Attachment:	Mr Preemal Patel Clinical Introductory Attachment	<b>CID</b> : 690857
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 profession	nal behaviour?
5.	Are there any general comments you would like to make?	
Consu	tant Name	Student Signature

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Miss Sanya Patel
Attachment:	Clinical Introductory Attachment
Hospital:	St Mary's Hospital
Date:	26 November 2012 to 14 December 2012

CID: 690300



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	$\backslash$
	If not, do they have an acceptable reason for absence?		1
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?		
Consul	tant Name	Student Signature	
			1

 Signature
 Date

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

Student Name: Attachment:	Miss Shivani Patel Clinical Introductory Attachment
Hospital:	Northwick Park Hospital
Date:	26 November 2012 to 14 December 2012

Signature

CID: 689920



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	$\backslash$
	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?		
			7
Consu	tant Name	Student Signature	

Ŭ.	
	l'a - 4 - a - 4 - a
STUDENTS - Please return completed form to your site Teaching Co-orc	linator together with a copy of
your Patient Journey.	

Date

Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Peter's Hospital

Student Name: Miss Sudeshika Perera

Attachment: Hospital:

Date:

CID: 684469



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?		
I				
	Consul	tant Name	Student Signature	

	Student Signature
Date	Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Mary's Hospital

Student Name: Miss Hayleigh Pinchon

Attachment: Hospital:

Date:

CID: 638187



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?	
Consi	ultant Name	Student Signature

oonoaltant Name		
Signature	Date	Date

Student Name: Attachment:	Mr Alok Rugvedi Prasad 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.

CID: 687381

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 profes	sional behaviour?
5.	Are there any general comments you would like to make?	
Cons	sultant Name	Student Signature

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

Signature

Date

Date

**Clinical Introductory Attachment** 

26 November 2012 to 14 December 2012

St Mary's Hospital

Student Name: Miss Sunila Prasad

Attachment: Hospital:

Date:

CID: 683998



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?		
ļ				-
	Consul	tant Name	Student Signature	

Consultant Name		Student Signature
Signature	Date	Date

Student Name:	Miss Jing Xiao Quek
Attachment:	Clinical Introductory Attachment
Hospital:	Hillingdon Hospital
Date:	26 November 2012 to 14 December 2012

CID: 688074



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	sultant Name	Student Signature	

Signature Date Date