



**Student Name:** Mr. Kareem Ibrahim  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hillingdon Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592017

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mrs Summer Ibrahim  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 555926

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Miss Narthana Ilenkovan  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 548942

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. James William Iliff  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 596802

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Mr. George Isitt  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592101

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. Aminul Islam  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hammersmith Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 550011

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>		Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>			
Borderline	<input type="checkbox"/>			
Below Expectations	<input type="checkbox"/>			
	Signature	Date		Date



**Student Name:** Miss Mouni Islam  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594428

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

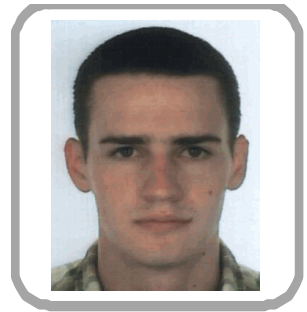
*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Mr. David Edmund Jarrold  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 598043

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
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Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date





**Student Name:** Miss Chenchen Ji  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hillingdon Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594445

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

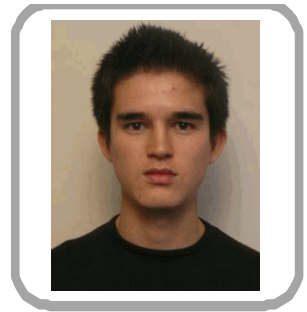
*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
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Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
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Unable to Comment	<input type="checkbox"/>		
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Meets Expectations	<input type="checkbox"/>		
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Below Expectations	<input type="checkbox"/>		
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Mr. Edward Jones  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 551814

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
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Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
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Borderline	<input type="checkbox"/>		
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Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Hayley Elizabeth Jones  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hammersmith Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 707067

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. Aamir Kamora  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595734

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr Christopher Kane  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 554597

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Miss Faraa Karim  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 549418

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Nisha Karnani  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 549874

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Andrianna Karras  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 511025

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date





**Student Name:** Mr. Odhran Keating  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595500

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. Maximillian Morgan Kinder Keech  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593734

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Joanna Kefas  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 596911

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Emma Mary Kenney-Herbert  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 640049

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. Ankur Khajuria  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hillingdon Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592826

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Huma Naz Khaliq  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593441

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. Chetan Khatri  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 596722

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. Avnish Khilosia  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 597980

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date





**Student Name:** Miss Sung-Hee Kim  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Hillingdon Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 549653

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Emma King  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 639140

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. Don Koh  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592206

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

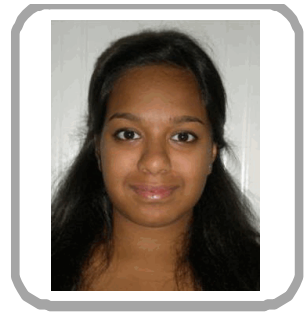
*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Vaidehi K S Konteti **CID:** 594384  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Miss Elisabeth Julie Kostov  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595892

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>		Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>			
Borderline	<input type="checkbox"/>			
Below Expectations	<input type="checkbox"/>			
	Signature	Date	Date	



**Student Name:** Miss Bansri Kotecha  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595460

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Miss Jalpa Kotecha  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 700961

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Chao-Ying Kowa  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594497

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date





**Student Name:** Mr. Suraj Kukadia  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593579

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Miss Manisha Kumar  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593883

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Nina Kumari  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Hillingdon Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 707075

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Cheryl Lau  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 598260

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Wei Ren Lau  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hammersmith Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 608227

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. Matthew Patrick Leahy  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593417

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Mr. Dong Seok Lee  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593533

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Miss Emma Choon Hwee Lee  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595381

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date





**Student Name:** Mr. Samuel Lee  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 596425

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

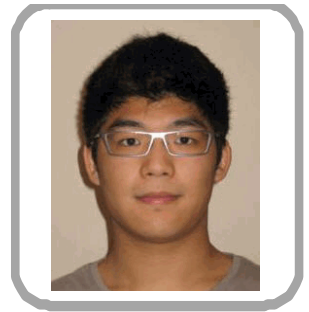
*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>		Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>			
Borderline	<input type="checkbox"/>			
Below Expectations	<input type="checkbox"/>			
	Signature	Date	Date	



**Student Name:** Mr. Yin Yin Lee  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594683

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name	Student Signature
Meets Expectations		
Borderline		
Below Expectations		
	Signature	Date



**Student Name:** Mr. David Lester  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 598780

**Please comment on the student's strengths:**

**Please comment on suggested areas of improvement:**

**If unable to comment on any domains below, please give reasons:**

*Please continue overleaf*

**Please tick grade for each domain**

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Miss Charlotte Amy Levene  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 549095

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Marissa Lewis  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592808

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

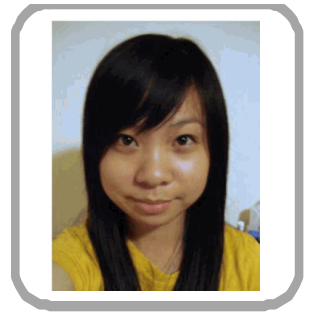
*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Carmay Lin  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 596545

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

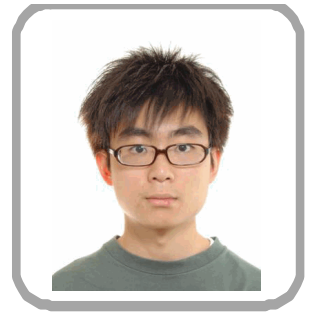
*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Mr. King Lun Liu  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592059

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Miss Maria Lobo  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593432

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date





**Student Name:** Miss Ines Oktavia Lolosidi  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 639182

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.

Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Miss Jen Mae Low  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hammersmith Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 596609

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

If unable to comment on any domains below, please give reasons:

*Please continue overleaf*

Please tick grade for each domain

Above Expectations	<input type="checkbox"/>	<b>Clinical Skills</b> Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Practical Skills</b> Has the student demonstrated adequate levels of competence at the practical skills and examination deemed essential for your firm (including completion of in course assessment (DOPS), patient safety and infection control)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Above Expectations	<input type="checkbox"/>	<b>Knowledge</b> Has the student applies an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc) as deemed necessary for the firm? <i>Comment:</i>	
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
Unable to Comment	<input type="checkbox"/>		
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <i>Comment:</i> <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment .

Above Expectations	<input type="checkbox"/>	Consultant Name	Student Signature
Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date