



**Student Name:** Miss Alice Victoria Emily Page  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Hillingdon Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 555372

**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. Daniel Kainan Pan  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592309

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"/>		
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Below Expectations	<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"/>	

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 Neha Aparajita Panda  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593677

**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:**

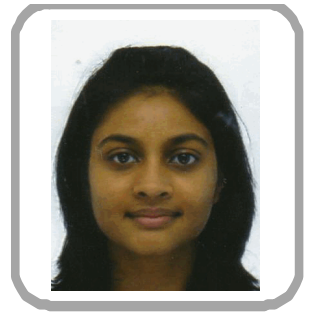
*Please continue overleaf*

**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"/>		
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<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:** Miss Roshana Parbhoo  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Hillingdon Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593902

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 Alvin Parish  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hammersmith Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 512335

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"/>	
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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. Arjun Patel  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594266

**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:** Miss Bina Patel  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 596165

**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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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"/>		
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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"/>	
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Above Expectations	Consultant Name		Student Signature
Meets Expectations	Signature		
Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Mr. Dilan Patel  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595073

**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*

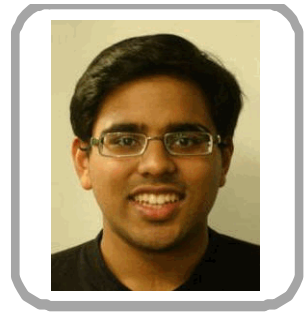
**Please tick grade for each domain**

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>	
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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"/>	
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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:** Mr. Kirtan Patel  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 598185

**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**

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Meets Expectations	<input type="checkbox"/>		
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Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		
		Signature	Date
			Date



**Student Name:** Miss Krishna Kreena Patel  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593603

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

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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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Borderline			
Below Expectations			
	Date	Date	



**Student Name:** Mr. Mitul Patel  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595122

**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:** Miss Purvi Nimishkumar Patel  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593608

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 Radhika Patel  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 548571

**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 Reamika Patel  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 597627

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 Reeya Patel  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592573

**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:**

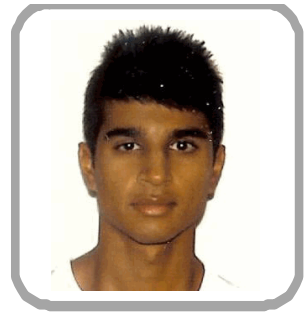
*Please continue overleaf*

**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. Rishil Rohit Patel  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592933

**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 Ashni Pau  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594039

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 Lydia Helen Pearson  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595863

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 Pia Persson  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594372

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. Louis Alexander Mcbean Peters  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592721

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 Rachel Pool  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593054

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 Danielle Poole  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 551663

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. Dardan Popova  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 597172

**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 Harry Posner  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 507160

**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 Poynton  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592931

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 Latreille Gabrielle Mary Prager  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595303

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. Alexander Presland  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 643986

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 Alexa Jasmine Prichard  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 548645

**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:**

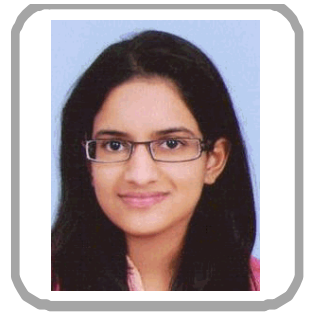
*Please continue overleaf*

**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 Qurashi  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593434

**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. Rasheed Rabiou **CID:** 596443  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster 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"/>	
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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. Sybghat Rahim  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595494

**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. Kashed Mohamed Tamjidur Rahman  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 597341

**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*

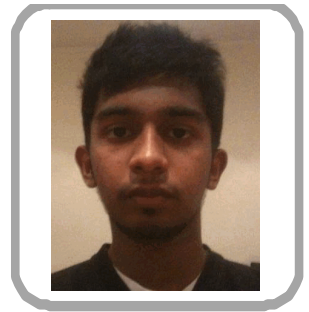
**Please tick grade for each domain**

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. Yathooshan Ramesh  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592862

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 Rubeena Ramjan  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594383

**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. Riaz Rampuri  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592032

**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 Mohana Ratnapalan  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 643965

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:** Miss Georgina Michelle Raven  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hammersmith Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595327

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. Rahul Prashanth Ravindran  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 596343

**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:** Miss Charlotte Read  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 591886

**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. Troy Reviere  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 591769

**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. Mark Rezk  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592660

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 Lalithaa Rhaasa  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593956

**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 Maria-Gracia Rivera  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593676

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 Rehan Riyaz  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 550319

**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 Sana Rizvi  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 554940

**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:** Ms. Anna Robinson  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 644414

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
		Date



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

**CID:** 593700

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. Ankush Sachdev  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 591748

**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 Luvarnia Sadasivan  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592528

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. Bilal Sahib  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Hillingdon Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593739

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 Youssuf Saleh  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 513834

**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. Bradley Sanders  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 597486

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. Arunashis Sau  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592190

**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. Paramvir Sawhney  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 412123

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. Peter John Scott  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 553508

**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. Mohammed Shaath  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592731

**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. Savan Shah  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594688

**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:**

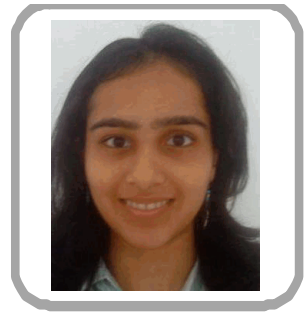
*Please continue overleaf*

**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 Vibha Shah  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593620

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. Mohammad Shahzad  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 642196

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. Mohith Shamdas  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 592448

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 Miriam Sharman  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 553993

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. Alexander James Sharp  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595665

**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	Date



**Student Name:** Mr. Abdur-Raof Sheikh  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595751

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 Chen Shen  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 597736

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 Oshini Shivakumar  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 707085

**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 Talia Rose Houston Shively  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593224

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. Shanil Shabir Merali Shivji  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 596049

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:

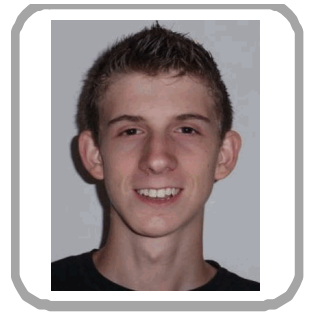
*Please continue overleaf*

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 Shotliff  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 598500

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 Sukriti Sinha  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Central Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 591860

**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 Ishani Sivarajah  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 595145

**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 Michael Gregory Martin Smith  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Mary's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 511255

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 Parul Srivastav  
**Attachment:** 10 Week Surgery Attachment  
**Hospital:** Hillingdon Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 553213

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. Saurabh King-Hay Srivastava  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593568

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 Calum Stapley  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 551820

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 Charlotte Elizabeth Stephens  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Ealing Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 591872

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:** Miss Eleanor Margaret Stewart  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** West Middlesex Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593602

**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. Kartik Subburaj  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** St Peter's Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 598256

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. Adhavan Sugumar  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Charing Cross Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 593757

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 Rachel Swain  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Northwick Park Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 467196

**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 Wing Jen Sze  
**Attachment:** 10 Week Medicine Attachment  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 13 March 2012 to 18 May 2012

**CID:** 594000

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