

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Sandy Ghattas **CID:** 553483
Attachment: GUM/HIV/ID
Hospital: Ealing Hospital
Date: 17 September 2012 to 5 October 2012



Please tick grade for each domain

Above Expectations Meets Expectation Borderline Below Expectations Unable to Comment		<p>Clinical Skills Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i></p>															
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Yes	Borderline	No															

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Please comment on the student's strengths:

Please comment on suggested areas of improvement:

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

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

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Mr Zhong Min Goh
Attachment: GUM/HIV/ID
Hospital: Ealing Hospital
Date: 17 September 2012 to 5 October 2012

CID: 552498



Please tick grade for each domain

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Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Sarah Anna Grover
Attachment: GUM/HIV/ID
Hospital: Ealing Hospital
Date: 17 September 2012 to 5 October 2012

CID: 549339



Please tick grade for each domain

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Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Lindsay Hennah
Attachment: GUM/HIV/ID
Hospital: Ealing Hospital
Date: 17 September 2012 to 5 October 2012

CID: 508302



Please tick grade for each domain

<p>Above Expectations</p> <p>Meets Expectation</p> <p>Borderline</p> <p>Below Expectations</p> <p>Unable to Comment</p>		<p>Clinical Skills</p> <p>Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study?</p> <p><i>Comment:</i></p>	
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Please comment on the student's strengths:

Please comment on suggested areas of improvement:

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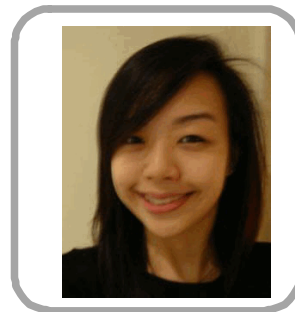
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Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Danielle Wei Ling Ho
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 17 September 2012 to 5 October 2012

CID: 551426



Please tick grade for each domain

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Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Marie Houdmont
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 17 September 2012 to 5 October 2012

CID: 507115



Please tick grade for each domain

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Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Hannah Chu-Han Huang
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 17 September 2012 to 5 October 2012

CID: 554460



Please tick grade for each domain

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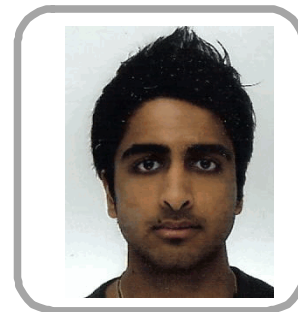
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Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Mr Abhishek Kakkar
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 17 September 2012 to 5 October 2012

CID: 507326



Please tick grade for each domain

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Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Mr Neeraj Kalra
Attachment: GUM/HIV/ID
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 5 October 2012

CID: 553375



Please tick grade for each domain

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Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Mr Rajit Khosla
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 17 September 2012 to 5 October 2012

CID: 548869



Please tick grade for each domain

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Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Marie Kubo
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 17 September 2012 to 5 October 2012

CID: 510112



Please tick grade for each domain

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Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Charlotte Lake
Attachment: GUM/HIV/ID
Hospital: Chelsea and Westminster Hospital
Date: 17 September 2012 to 5 October 2012

CID: 510645



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Yes	Borderline	No															

Continued overleaf

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

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

Please 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"/>	Signature: _____ Date: _____	Date: _____
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Philippa Lee
Attachment: GUM/HIV/ID
Hospital: Northwick Park Hospital
Date: 8 October 2012 to 26 October 2012

CID: 548566



Please tick grade for each domain

Above Expectations Meets Expectation Borderline Below Expectations Unable to Comment			<p>Clinical Skills Has the student achieved the desired level of skill in history taking/clerking/formulation for their current year of study? <i>Comment:</i></p>															
Above Expectations Meets Expectation Borderline Below Expectations Unable to Comment			<p>Practical Skills 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 (DOP's), patient safety and infection control)? <i>Comment:</i></p>															
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Continued overleaf

Please comment on the student's strengths:

Please comment on suggested areas of improvement:

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

Please 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"/>	Signature: _____ Date: _____	Date: _____
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Mr Benjamin Blake Lindsey
Attachment: GUM/HIV/ID
Hospital: Northwick Park Hospital
Date: 8 October 2012 to 26 October 2012

CID: 549709



Please tick grade for each domain

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