

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Mr Asad Mohammad Saeed
Attachment: GUM/HIV/ID
Hospital: Ealing Hospital
Date: 18 March 2013 to 12 April 2013

CID: 549464



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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Yes	Borderline	No															

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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 Fiona Joy Seabrook
Attachment: GUM/HIV/ID
Hospital: Ealing Hospital
Date: 18 March 2013 to 12 April 2013

CID: 550414



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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Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Laura Jade Sehinson
Attachment: GUM/HIV/ID
Hospital: Ealing Hospital
Date: 18 March 2013 to 12 April 2013

CID: 549626



Please tick grade for each domain

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Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Sonali Shah
Attachment: GUM/HIV/ID
Hospital: Northwick Park Hospital
Date: 18 March 2013 to 12 April 2013

CID: 549746



Please tick grade for each domain

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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:

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

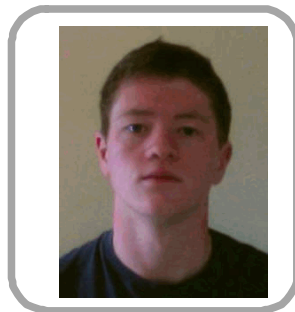
Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.

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 Andrew Darby Smith
Attachment: GUM/HIV/ID
Hospital: Northwick Park Hospital
Date: 18 March 2013 to 12 April 2013

CID: 548895



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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Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Mr Jack Stewart
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 18 March 2013 to 12 April 2013

CID: 511077



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 Meron Fessahaye Tesfom

CID: 567314

Attachment: GUM/HIV/ID

Hospital: St Mary's Hospital

Date: 18 March 2013 to 12 April 2013



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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Yes	Borderline	No																

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Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Mr. David Townsend
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 18 March 2013 to 12 April 2013

CID: 644325



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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Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Miss Bhakti Visani
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 25 February 2013 to 15 March 2013

CID: 549419



Please tick grade for each domain

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Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

Year 5 GUM/Infectious Diseases/HIV Assessment Form

Student Name: Mr Joshua Ben Wolrich
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 18 March 2013 to 12 April 2013

CID: 555764



Please tick grade for each domain

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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. Dominic James Yelling
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 18 March 2013 to 12 April 2013

CID: 639271



Please tick grade for each domain

Above Expectations Meets Expectation Borderline Below Expectations Unable to Comment	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>		
Above Expectations Meets Expectation Borderline Below Expectations Unable to Comment	Practical Skills		
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Above Expectations Meets Expectation Borderline Below Expectations Unable to Comment	Communication Skills		
	Has the student demonstrated good communication skills (towards patients, relatives and colleagues)?		
	<i>Comment:</i>		
Above Expectations Meets Expectation Borderline Below Expectations Unable to Comment	Knowledge		
	Has the student applied an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc.) as deemed necessary for the firm?		
	<i>Comment:</i>		
Yes	Borderline	No	Professionalism
			Has the student met the requirements for the following areas of professionalism: Appearance
			Reliability and attendance
			Respect for patients
			Working with colleagues

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Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

**Year 5 GUM/Infectious Diseases/HIV
Assessment Form**

Student Name: Miss Mariam Zahedi
Attachment: GUM/HIV/ID
Hospital: St Mary's Hospital
Date: 18 March 2013 to 12 April 2013

CID: 554959



Please tick grade for each domain

Above Expectations		<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>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
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Below Expectations			
Unable to Comment			
Above Expectations		<p>Communication Skills Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<p>Knowledge Has the student applied an appropriate level of knowledge (biomedical, psychological, social, population science, healthcare, law, clinical evidence, etc.) as deemed necessary for the firm? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Yes	Borderline	No	<p>Professionalism Has the student met the requirements for the following areas of professionalism: <i>Comment:</i></p> <p>Appearance</p> <p>Reliability and attendance</p> <p>Respect for patients</p> <p>Working with colleagues</p>

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"/>		