

**Student Name:** Mr Mahi Pal Singh Gill  
**Attachment:** O & G  
**Hospital:** Northwick Park Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 552213



**Please tick grade for each domain**

Above Expectations		<p><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></p>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<p><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)?  <i>Comment:</i></p>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<p><b>Communication Skills</b>                      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><b>Knowledge</b>                      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><b>Professionalism</b>                      Has the student met the requirements for the following areas of professionalism:  <b>Appearance</b>  <i>Comment:</i>  <b>Reliability and attendance</b>  <b>Respect for patients</b>  <b>Working with colleagues</b></p>

**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"/>		

**Student Name:** Miss Hannah Gould Brown  
**Attachment:** O & G  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 452219



Please tick grade for each domain

Above Expectations			<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 Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations			<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)? <i>Comment:</i>
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations			<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations			<b>Knowledge</b> 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>
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
<b>Yes</b>	<b>Borderline</b>	<b>No</b>	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b> <i>Comment:</i>

**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"/>		

**Student Name:** Miss Sarah Hancox  
**Attachment:** O & G  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 555444



**Please tick grade for each domain**

Above Expectations Meets Expectation Borderline Below Expectations Unable to Comment			<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>
			<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)? <i>Comment:</i>
			<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>
			<b>Knowledge</b> 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>
			<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b> <i>Comment:</i>
<b>Yes</b>	<b>Borderline</b>	<b>No</b>	

**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"/>		

**Student Name:** Miss Minato Hata  
**Attachment:** O & G  
**Hospital:** Northwick Park Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 550800



Please tick grade for each domain

Above Expectations			<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 Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations			<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)? <i>Comment:</i>
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations			<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>
Meets Expectation			
Borderline			
Below Expectations			
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Above Expectations			<b>Knowledge</b> 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>
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Borderline			
Below Expectations			
Unable to Comment			
<b>Yes</b>	<b>Borderline</b>	<b>No</b>	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <b>Appearance</b> <i>Comment:</i> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>

**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:**

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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"/>		



**Student Name:** Mr Kalon Hewage  
**Attachment:** O & G  
**Hospital:** Northwick Park Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 553278



**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><b>Clinical Skills</b></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>
			<p><b>Practical Skills</b></p> <p>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)?</p> <p><i>Comment:</i></p>
			<p><b>Communication Skills</b></p> <p>Has the student demonstrated good communication skills (towards patients, relatives and colleagues)?</p> <p><i>Comment:</i></p>
			<p><b>Knowledge</b></p> <p>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?</p> <p><i>Comment:</i></p>
			<p><b>Professionalism</b></p> <p>Has the student met the requirements for the following areas of professionalism:</p> <p><b>Appearance</b> <span style="float: right;"><i>Comment:</i></span></p> <p><b>Reliability and attendance</b></p> <p><b>Respect for patients</b></p> <p><b>Working with colleagues</b></p>
<p><b>Yes</b></p> <p><b>Borderline</b></p> <p><b>No</b></p>			

**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.

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"/>		

**Student Name:** Mr. Julian Zhen Yu Hong  
**Attachment:** O & G  
**Hospital:** St Mary's Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 644074



**Please tick grade for each domain**

Above Expectations		<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 Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<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 )? <i>Comment:</i>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<b>Knowledge</b> 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>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b> <i>Comment:</i>

**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"/>		

**Student Name:** Mr Nizar Ahmed Ismail  
**Attachment:** O & G  
**Hospital:** Hillingdon Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 469147



**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><b>Clinical Skills</b></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>
			<p><b>Practical Skills</b></p> <p>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)?</p> <p><i>Comment:</i></p>
			<p><b>Communication Skills</b></p> <p>Has the student demonstrated good communication skills (towards patients, relatives and colleagues)?</p> <p><i>Comment:</i></p>
			<p><b>Knowledge</b></p> <p>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?</p> <p><i>Comment:</i></p>
			<p><b>Professionalism</b></p> <p>Has the student met the requirements for the following areas of professionalism:</p> <p><b>Appearance</b> <span style="float: right;"><i>Comment:</i></span></p> <p><b>Reliability and attendance</b></p> <p><b>Respect for patients</b></p> <p><b>Working with colleagues</b></p>
<p><b>Yes</b></p> <p><b>Borderline</b></p> <p><b>No</b></p>			

**Continued overleaf**

**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.

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"/>		

**Student Name:** Miss Hayley Elizabeth Jones  
**Attachment:** O & G  
**Hospital:** West Middlesex Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 707067



**Please tick grade for each domain**

Above Expectations		<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 Expectation																	
Borderline																	
Below Expectations																	
Unable to Comment																	
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Meets Expectation																	
Borderline																	
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Meets Expectation																	
Borderline																	
Below Expectations																	
Unable to Comment																	
Yes	<table border="1"> <thead> <tr> <th>Yes</th> <th>Borderline</th> <th>No</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Yes	Borderline	No													<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <b>Appearance</b> Comment: <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>
Yes		Borderline	No														
Borderline																	
No																	
Yes																	
No																	

**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:**

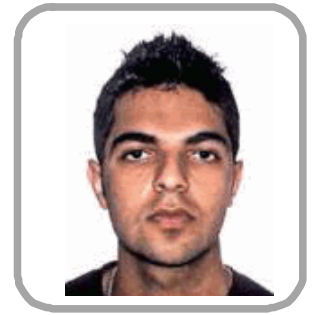
Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.

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"/>		



**Student Name:** Mr Monil Karia  
**Attachment:** O & G  
**Hospital:** Northwick Park Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 548927



**Please tick grade for each domain**

Above Expectations		<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 Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<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)? <i>Comment:</i>	
Meets Expectation			
Borderline			
Below Expectations			
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**Please comment on the student's strengths:**

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

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

**Student Name:** Miss Emma Mary Kenney-Herbert  
**Attachment:** O & G  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 640049



**Please tick grade for each domain**

Above Expectations		<p><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></p>	
Meets Expectation			
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Below Expectations			
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**Please comment on the student's strengths:**

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

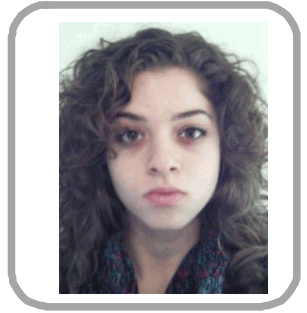
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Above Expectations	<input type="checkbox"/>	Consultant Name:	Student Signature
Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

**Student Name:** Miss Christina Niovi Kontoghiorghe  
**Attachment:** O & G  
**Hospital:** Northwick Park Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 548937



**Please tick grade for each domain**

Above Expectations			<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 Expectation			
Borderline			
Below Expectations			
Unable to Comment			
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Borderline			
Below Expectations			
Unable to Comment			
Above Expectations			<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>
Meets Expectation			
Borderline			
Below Expectations			
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Below Expectations			
Unable to Comment			
<b>Yes</b>	<b>Borderline</b>	<b>No</b>	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <b>Appearance</b> <span style="float: right;"><i>Comment:</i></span> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b>

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

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

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

**Student Name:** Mr Dean Ajanthan Kulendran  
**Attachment:** O & G  
**Hospital:** West Middlesex Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 548771



**Please tick grade for each domain**

Above Expectations			<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 Expectation			
Borderline			
Below Expectations			
Unable to Comment			
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**Please comment on the student's strengths:**

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

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



**Student Name:** Miss Victoria Laxton  
**Attachment:** O & G  
**Hospital:** Hillingdon Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 554525



**Please tick grade for each domain**

Above Expectations		<p><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></p>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
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Borderline			
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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	Date: _____
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

**Student Name:** Mr Robert Ley Greaves  
**Attachment:** O & G  
**Hospital:** Hillingdon Hospital  
**Date:** 30 July 2012 to 14 September 2012

**CID:** 548759



**Please tick grade for each domain**

Above Expectations		<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 Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<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)? <i>Comment:</i>	
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Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<b>Communication Skills</b> Has the student demonstrated good communication skills (towards patients, relatives and colleagues)? <i>Comment:</i>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		<b>Knowledge</b> 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>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Yes	Borderline	No	<b>Professionalism</b> Has the student met the requirements for the following areas of professionalism: <b>Appearance</b> <b>Reliability and attendance</b> <b>Respect for patients</b> <b>Working with colleagues</b> <i>Comment:</i>

**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"/>		