

Student Name: Miss Vinothini Manivasagam
Attachment: O & G
Hospital: Chelsea and Westminster Hospital
Date: 5 November 2012 to 21 December 2012

CID: 707079



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			
Above Expectations		<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)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
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: Appearance <i>Comment:</i> Reliability and attendance Respect for patients Working with colleagues</p>

Please comment on the student's strengths:

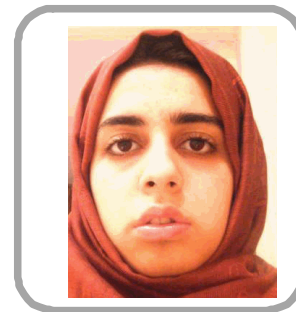
Please comment on suggested areas of improvement:

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

Student Name: Miss Soudeh Mashayekhi
Attachment: O & G
Hospital: Northwick Park Hospital
Date: 5 November 2012 to 21 December 2012

CID: 513445



Please tick grade for each domain

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

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 Sara Mehr
Attachment: O & G
Hospital: Northwick Park Hospital
Date: 5 November 2012 to 21 December 2012

CID: 514036



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			
Above Expectations		<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)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
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: Appearance <i>Comment:</i> Reliability and attendance Respect for patients Working with colleagues</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 Date:
Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations	<input type="checkbox"/>		

Student Name: Mr. Foad Mohamed
Attachment: O & G
Hospital: West Middlesex Hospital
Date: 5 November 2012 to 21 December 2012

CID: 513357



Please tick grade for each domain

Above Expectations		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>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		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)? <i>Comment:</i>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		Communication Skills 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		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>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
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 <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: _____		
Borderline	<input type="checkbox"/>			
Below Expectations	<input type="checkbox"/>	Date:		

Student Name: Mr Malik Moledina
Attachment: O & G
Hospital: West Middlesex Hospital
Date: 5 November 2012 to 21 December 2012

CID: 554104



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			
Above Expectations		<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)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
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: Appearance <i>Comment:</i> Reliability and attendance Respect for patients Working with colleagues</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 Seethalakshmi Muthalagappan
Attachment: O & G
Hospital: Chelsea and Westminster Hospital
Date: 5 November 2012 to 21 December 2012

CID: 549873



Please tick grade for each domain

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

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 Uzoma Nnajiuba
Attachment: O & G
Hospital: Chelsea and Westminster Hospital
Date: 5 November 2012 to 21 December 2012

CID: 548735



Please tick grade for each domain

Above Expectations		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>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		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)? <i>Comment:</i>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		Communication Skills 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		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>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
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 <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 Aislinn O'Malley
Attachment: O & G
Hospital: Chelsea and Westminster Hospital
Date: 5 November 2012 to 21 December 2012

CID: 552929



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			
Above Expectations		<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)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
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: Appearance <i>Comment:</i> Reliability and attendance Respect for patients Working with colleagues</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 Alice Victoria Emily Page
Attachment: O & G
Hospital: Chelsea and Westminster Hospital
Date: 5 November 2012 to 21 December 2012

CID: 555372



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			
Above Expectations		<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)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
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: Appearance <i>Comment:</i> Reliability and attendance Respect for patients Working with colleagues</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: Mr Krishan Patel
Attachment: O & G
Hospital: Chelsea and Westminster Hospital
Date: 5 November 2012 to 21 December 2012

CID: 555157



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			
Above Expectations		<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)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
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: Appearance <i>Comment:</i> Reliability and attendance Respect for patients Working with colleagues</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 Priyadarshini Paul
Attachment: O & G
Hospital: Chelsea and Westminster Hospital
Date: 5 November 2012 to 21 December 2012

CID: 508928



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			
Above Expectations		<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)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
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: Appearance <i>Comment:</i> Reliability and attendance Respect for patients Working with colleagues</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: Mr Frederick Pimm
Attachment: O & G
Hospital: Chelsea and Westminster Hospital
Date: 5 November 2012 to 21 December 2012

CID: 552987



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			
Above Expectations		<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)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
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: Appearance <i>Comment:</i> Reliability and attendance Respect for patients Working with colleagues</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: Mr Vafa Pirjamali
Attachment: O & G
Hospital: West Middlesex Hospital
Date: 5 November 2012 to 21 December 2012

CID: 511236



Please tick grade for each domain

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

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"/>		

Student Name: Miss Alexa Jasmine Prichard
Attachment: O & G
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 548645



Please tick grade for each domain

Above Expectations		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>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		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)? <i>Comment:</i>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
Above Expectations		Communication Skills 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		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>	
Meets Expectation			
Borderline			
Below Expectations			
Unable to Comment			
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 <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 Karan Rangarajan
Attachment: O & G
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 551102



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			
Above Expectations		<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)? <i>Comment:</i></p>	
Meets Expectation			
Borderline			
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			
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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: Appearance <i>Comment:</i> Reliability and attendance Respect for patients Working with colleagues</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: Ms. Anna Robinson
Attachment: O & G
Hospital: St Mary's Hospital
Date: 5 November 2012 to 21 December 2012

CID: 644414



Please tick grade for each domain

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

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"/>		