

**Student Name:** Mr Marc MacMillan  
**Attachment:** Paediatrics Residency  
**Hospital:** St Mary's Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 553623



**Supervisor / Tutor's feedback:**

*May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.*

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

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

**If unable to comment, please give reasons:**

Please indicate the student's overall performance during residency				
Above Expectations	<input type="checkbox"/>	Supervisor / Tutor's Name:	Student Signature	
Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____		
Borderline	<input type="checkbox"/>			
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>	Date:		

**Student Name:** Miss Krsna Mahubani  
**Attachment:** Paediatrics Residency  
**Hospital:** Northwick Park Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 549617



**Supervisor / Tutor's feedback:**

*May include comments on ability to interact with children of different ages, level of knowledge, professionalism (attendance, punctuality, appearance, respect for patients and their families) and working relationships with peers and health professionals.*

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

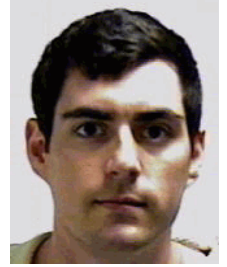
**Please comment on suggested areas of improvement:**

**If unable to comment, please give reasons:**

Please indicate the student's overall performance during residency				
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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____		
Borderline	<input type="checkbox"/>			
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>			

**Student Name:** Mr. Alexander McFarquhar  
**Attachment:** Paediatrics Residency  
**Hospital:** Ninewells Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 643840



**Supervisor / Tutor's feedback:**

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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: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>		

**Student Name:** Mr Mark Mikhail  
**Attachment:** Paediatrics Residency  
**Hospital:** Royal Berkshire Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 511917



**Supervisor / Tutor's feedback:**

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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>		

**Student Name:** Miss Sarah Lindsay Morton  
**Attachment:** Paediatrics Residency  
**Hospital:** St Peter's Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 548992



**Supervisor / Tutor's feedback:**

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

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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>		

**Student Name:** Mr Thomas Hedley Newman  
**Attachment:** Paediatrics Residency  
**Hospital:** Ealing Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 554112



**Supervisor / Tutor's feedback:**

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

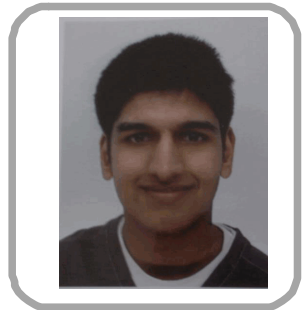
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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
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Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>		

**Student Name:** Mr Aaron Odedra  
**Attachment:** Paediatrics Residency  
**Hospital:** Northwick Park Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 549510



**Supervisor / Tutor's feedback:**

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

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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>		

**Student Name:** Mr. Andrew Kofi Bandoh Owusu-Agyei  
**Attachment:** Paediatrics Residency  
**Hospital:** Pilgrim Hospital  
**Date:** 8 October 2012 to 19 October 2012

**CID:** 549265



**Supervisor / Tutor's feedback:**

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Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>		



**Student Name:** Miss Harsita Patel  
**Attachment:** Paediatrics Residency  
**Hospital:** West Middlesex Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 554073



**Supervisor / Tutor's feedback:**

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

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Meets Expectations	<input type="checkbox"/>		
Borderline	<input type="checkbox"/>	Signature:	
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>	Date:	

**Student Name:** Miss Nishal Hitesh Patel  
**Attachment:** Paediatrics Residency  
**Hospital:** Hammersmith Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 555713



**Supervisor / Tutor's feedback:**

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

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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>	Date:	

**Student Name:** Mr Rushan L G Perera  
**Attachment:** Paediatrics Residency  
**Hospital:** St Mary's Hospital  
**Date:** 8 October 2012 to 19 October 2012

**CID:** 552005



**Supervisor / Tutor's feedback:**

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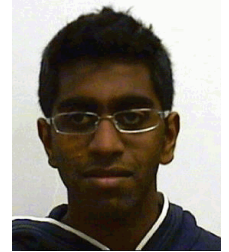
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Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>		

**Student Name:** Mr Matthew Iynkaran Rajan  
**Attachment:** Paediatrics Residency  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 549086



**Supervisor / Tutor's feedback:**

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Meets Expectations	<input type="checkbox"/>	Signature: _____ Date: _____	
Borderline	<input type="checkbox"/>		
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>		

**Student Name:** Miss Sarrah Raveendran  
**Attachment:** Paediatrics Residency  
**Hospital:** Chelsea and Westminster Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 549730



**Supervisor / Tutor's feedback:**

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Borderline	<input type="checkbox"/>		
Below Expectations (You <b>MUST</b> give comments)	<input type="checkbox"/>		

**Student Name:** Mr Matthew Routledge  
**Attachment:** Paediatrics Residency  
**Hospital:** West Middlesex Hospital  
**Date:** 8 October 2012 to 19 October 2012

CID: 555773



**Supervisor / Tutor's feedback:**

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