

Year 5 Radiology Assessment Form

Student Name: Mr Karthick Manoharan
Attachment: Radiology
Hospital: Charing Cross Hospital
Date: 19 November 2012 to 23 November 2012

CID: 550315



ACTIVITY	DATE	STAFF SIGNATURE

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

Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature:	Date:
Below Expectations			

CID: 549424

[illegible]

Yes	Borderline	No	Professionalism
			Has the student met the requirements for the following areas of professionalism: Comment:
			Appearance
			Reliability and attendance
			Respect for patients
			Working with colleagues

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

Attachment:			
Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature: Date:	
Below Expectations			

Year 5 Radiology Assessment Form

Student Name: Mr Naeem Meghjee
Attachment: Radiology
Hospital: St Mary's Hospital
Date: 19 November 2012 to 23 November 2012

CID: 553925



ACTIVITY	DATE	STAFF SIGNATURE

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

Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature: Date:	
Below Expectations		Date:	

Year 5 Radiology Assessment Form

Student Name: Mr. Robert Mitchell
Attachment: Radiology
Hospital: St Mary's Hospital
Date: 19 November 2012 to 23 November 2012

CID: 636366

[illegible]

Yes	Borderline	No	Professionalism
			Has the student met the requirements for the following areas of professionalism: Comment:
			Appearance
			Reliability and attendance
			Respect for patients
			Working with colleagues

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

Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature: Date:	
Below Expectations			

Year 5 Radiology Assessment Form

Student Name: Miss Abirami Murugesh-Warren
Attachment: Radiology
Hospital: St Mary's Hospital
Date: 19 November 2012 to 23 November 2012

CID: 552548



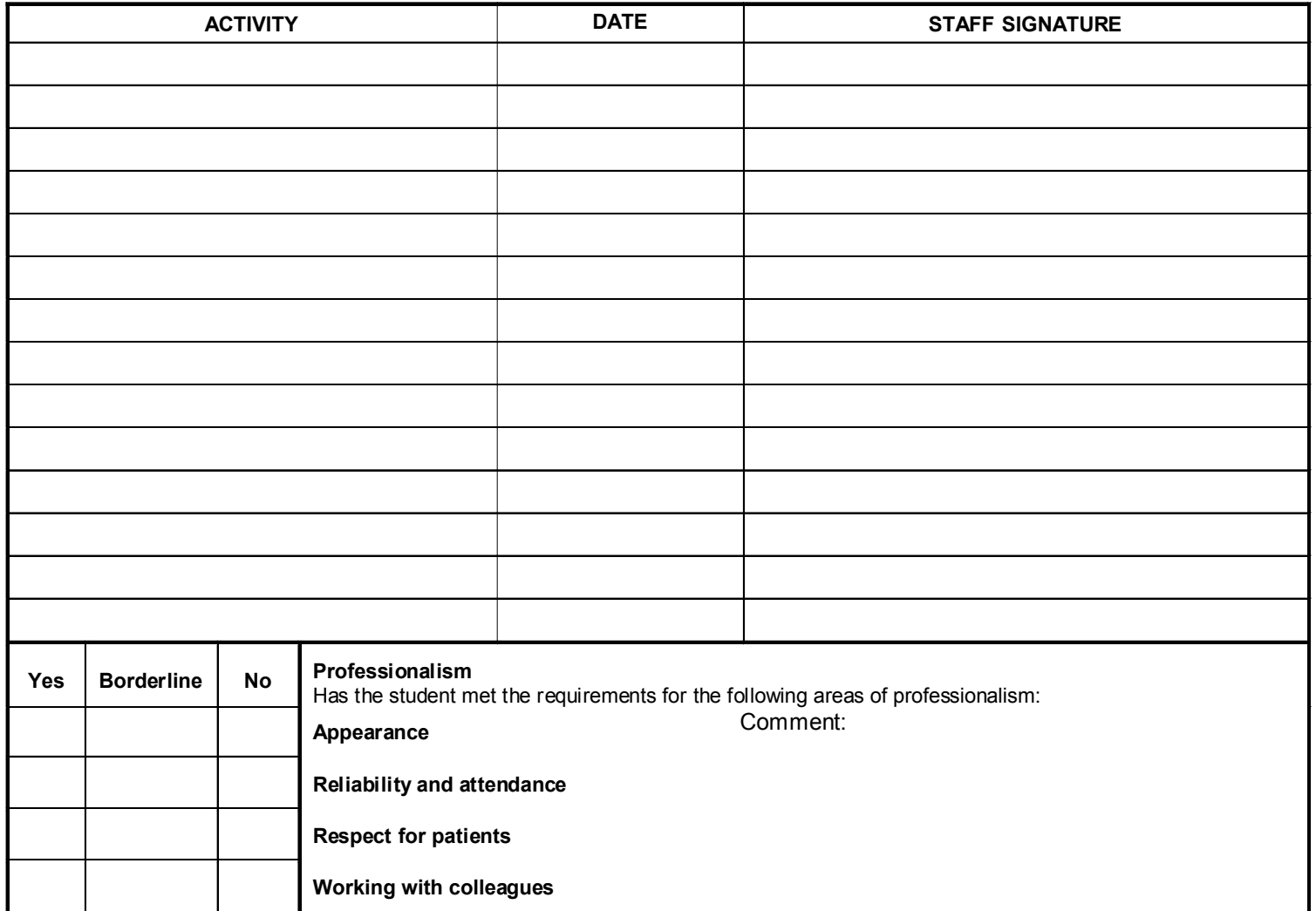
ACTIVITY	DATE	STAFF SIGNATURE

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
			Comment:

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

Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature:	Date:
Below Expectations			

CID: 641577



Above Expectations		Consultant Name:	Student Signature
Meets Expectations		<div>Signature:</div> <div>Date:</div>	
Borderline			
Below Expectations			

CID: 552631

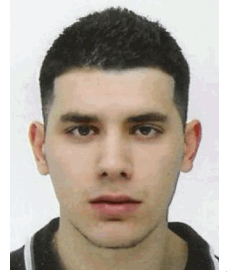
[illegible]

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.			
Above Expectations		Consultant Name:	Student Signature Date:
Meets Expectations		<div>Signature:</div> <div>Date:</div>	
Borderline			
Below Expectations			

Year 5 Radiology Assessment Form

Student Name: Mr Mehmet Ozturk
Attachment: Radiology
Hospital: St Mary's Hospital
Date: 19 November 2012 to 23 November 2012

CID: 552539

[illegible]

Yes	Borderline	No	Professionalism
			Has the student met the requirements for the following areas of professionalism: Comment:
			Appearance
			Reliability and attendance
			Respect for patients
			Working with colleagues

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

Attachment:			
Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature: Date:	
Below Expectations			

CID: 554917

[illegible]

Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.			
Above Expectations		Consultant Name:	Student Signature Date:
Meets Expectations		<div>Signature:</div> <div>Date:</div>	
Borderline			
Below Expectations			

Year 5 Radiology Assessment Form

Student Name: Mr Shrawan Ravindrakumar Patel
Attachment: Radiology
Hospital: Chelsea and Westminster Hospital
Date: 19 November 2012 to 23 November 2012

CID: 513050

[illegible]

Yes	Borderline	No	Professionalism
			Has the student met the requirements for the following areas of professionalism: Comment:
			Appearance
			Reliability and attendance
			Respect for patients
			Working with colleagues

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

Attachment:			
Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature: Date:	
Below Expectations			

Year 5 Radiology Assessment Form

Student Name: Miss Georgina Stefanie Anne Phillips
Attachment: Radiology
Hospital: Central Middlesex Hospital
Date: 19 November 2012 to 23 November 2012

CID: 508521



ACTIVITY	DATE	STAFF SIGNATURE

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
			Comment:

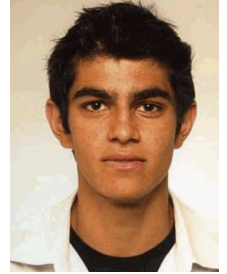
Please indicate if the student has completed all relevant in-course assessments and satisfactorily passed the attachment.

Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature:	Date:
Below Expectations			

Year 5 Radiology Assessment Form

Student Name: Mr James Hari Price
Attachment: Radiology
Hospital: Central Middlesex Hospital
Date: 19 November 2012 to 23 November 2012

CID: 549158



ACTIVITY	DATE	STAFF SIGNATURE

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

Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature:	Date:
Below Expectations			

Year 5 Radiology Assessment Form

Student Name: Mr Anand Ramesh
Attachment: Radiology
Hospital: Hammersmith Hospital
Date: 19 November 2012 to 23 November 2012

CID: 553170



ACTIVITY	DATE	STAFF SIGNATURE

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

Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature:	Date:
Below Expectations			

Year 5 Radiology Assessment Form

Student Name: Miss Sana Rizvi
Attachment: Radiology
Hospital: Chelsea and Westminster Hospital
Date: 19 November 2012 to 23 November 2012

CID: 554940

[illegible]

Yes	Borderline	No	Professionalism
			Has the student met the requirements for the following areas of professionalism: Comment:
			Appearance
			Reliability and attendance
			Respect for patients
			Working with colleagues

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

Above Expectations		Consultant Name:	Student Signature
Meets Expectations			
Borderline		Signature: Date:	
Below Expectations			