

## GCRMC Resident Peer Evaluation

### Instructions:

Please rate your peer Resident on the following scale based on your interaction and observation. This is an evaluation of the your Peer's competence in a specific area. If you did not observe a specific behavior or a procedure please skip the question. Competency in any area develops with time. It is expected that the highest level of training would have the highest level of competency. Therefore a junior resident would be expected to score a 1 or 2, and a senior resident would be expected to score a 2 or 3. A level "3" should be at the level of someone who has completed residency. There will be times when a resident achieves competency sooner or later than expected. Use the levels below as a guide. 0- Significant Error.

Suggesting over looked deficit. 1/B- Beginner. Minority correct. Significant changes needed to meet standard of care.

2/DC- Developing Competency. Majority correct. Some changes needed to meet standard of care. 3/C- Competent. Met standard of care. No corrections necessary.



### Subject Name

Status  
Employer  
Program  
Rotation  
Evaluation Dates

Evaluated by:

### Evaluator Name

Status  
Employer  
Program

## PATIENT CARE

### 1 Level at which the Resident is able perform appropriate History and Physical.

0- Significant Error. Suggesting over looked deficit.	1/B-Beginner. Minority correct. Significant changes needed to meet standard of care.	2/DC- Developing Competency. Majority correct. Some changes needed to meet standard of care.	3/C- Competent. Met standard of care. No corrections necessary.
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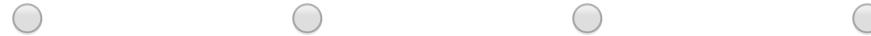
### 2 Level at which resident is able to generate an appropriate differential diagnosis.

0- Significant Error. Suggesting over looked deficit.	1/B-Beginner. Minority correct. Significant changes needed to meet standard of care.	2/DC- Developing Competency. Majority correct. Some changes needed to meet standard of care.	3/C- Competent. Met standard of care. No corrections necessary.
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**3 Resident is able to make informed decisions about diagnostic and therapeutic interventions.**

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**4 Resident is able to develop and carry out appropriate patient management plans.**

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**MEDICAL KNOWLEDGE****5\* How would you rate the Resident's general medical knowledge?**

0- Significant Error. Suggesting over looked deficit.	1/B-Beginner. Minority correct. Significant changes needed to meet standard of care.	2/DC- Developing Competency. Majority correct. Some changes needed to meet standard of care.	3/C- Competent. Met standard of care. No corrections necessary.
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**6\* How would you rate the Resident's current medical knowledge?**

0- Significant Error. Suggesting over looked deficit.	1/B-Beginner. Minority correct. Significant changes needed to meet standard of care.	2/DC- Developing Competency. Majority correct. Some changes needed to meet standard of care.	3/C- Competent. Met standard of care. No corrections necessary.
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**SYSTEMS BASED PRACTICE**

**7 The level at which resident practices cost-effective health care and resource allocation that does not compromise quality of care**

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**8 The level at which resident is able to partner with other health care team members (case management, PT, nutrition, nursing) to coordinate, and improve health care.**

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**PROFESSIONALISM**

**9 The level at which resident accepts responsibility for patient care.**

0- Significant Error. Suggesting over looked deficit.	1/B-Beginner. Minority correct. Significant changes needed to meet standard of care.	2/DC- Developing Competency. Majority correct. Some changes needed to meet standard of care.	3/C- Competent. Met standard of care. No corrections necessary.
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**10 The level at which resident demonstrates dress, hygiene and manner of speech that consistently reflect appropriate standards.**

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## INTERPERSONAL AND COMMUNICATION SKILLS

### 11 Medical record documentation is appropriate and timely

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### 12 The level at which resident communicates with the patients, and family members in developmentally and culturally appropriate manner

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### 13 The level at which resident makes organized and effective oral presentations.

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## PRACTICE-BASED LEARNING IMPROVEMENT

**14 The level at which resident recognizes his/her own strengths and limitations**

0- Significant Error. Suggesting over looked deficit.	1/B-Beginner. Minority correct. Significant changes needed to meet standard of care.	2/DC- Developing Competency. Majority correct. Some changes needed to meet standard of care.	3/C- Competent. Met standard of care. No corrections necessary.
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**15 The level at which resident asks questions as an engaged, critical learner**

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**16 The level at which resident uses information technology to manage information, access on-line medical information, and support their own education**

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**17 The level at which resident facilitates the learning of students, junior residents, and other health care professionals (R2 ,R3)**

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Overall Comment \*

