

## Mid-Clerkship Mini-Assessment by Faculty or Resident Supervisor, 2020-2021

<b>Clerkship:</b>	<b>Medical student:</b>	<b>Supervisor completing this form:</b>
<b>Instructions to supervisor:</b> Please complete this form during the medical student's clerkship. Consider commenting on the student's skills in performing an H&P, prioritizing a differential diagnosis, recommending/interpreting diagnostic tests, entering orders/prescriptions, charting, giving a patient presentation, searching/appraising the medical literature, participating in patient handovers, collaborating on interprofessional teams, responding to patient care emergencies, obtaining consent for tests/procedures, performing procedures, and contributing to safety/quality improvement.		<b>Rotation dates:</b> ___/___/___ - ___/___/___
		<b>Instructions to student:</b> Prior to your scheduled mid-rotation feedback meeting, please give copies of this form to faculty preceptor(s) and/or resident teachers who supervise you at your clerkship site, ask them to fill it out and review their feedback with you, then give the form(s) to your clerkship coordinator at the UCR SOM to be compiled and discussed during your mid-rotation feedback meeting.
<p style="text-align: center;"><b>What has this student been doing well so far during this clerkship?</b></p>		<p style="text-align: center;"><b>What could this student do to improve his or her performance during the remainder of the clerkship?</b></p>
<p><b>Please sign below to document mid-clerkship feedback was given and received. Thank you for participating in a timely and constructive assessment!</b></p>		
Signature of medical student _____ Date _____		Signature of supervisor _____ Date _____