Graduate Follow-up Questionnaire for Supervisor of Graduate

Instructions. Please use the "Tab" key or "Mouse" to go from one question to the next and select your response and follow the instructions at the end of this questionnaire.

Graduate name.

Name of individual completing this form:

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1. Basic clinic knowledge displayed?
2. Clinical judgment?
3. Clinical performance - outpatient and inpatient?
4. Clinical performance - procedures?
5. Rapport with patients?
6. Communication skills?
7. Relationship with colleagues?
8. Cooperative with hospital/clinic personnel?
9. Appearance?
10. Emotional stability?
11. Apparent physical health?
12. Professional and Ethical conduct?
13. Leadership capability?
14. Quality and timeliness of medical record documentation?
15. Participation/Attendance as staff and committee meetings and activities?
16. Performance of clinical privileges?
17. Utilization/Risk Management/Medical Records Review?
18. Surgical Case/Invasive Procedures/Tissue Review?
19. Drug Utilization/Blood Utilization/Infection Control?
20. Continuing Medical/Health Education?

Comments (please address any unsatisfactory areas above as well as any other comments concerning the training this individual received and meeting the goals of your operation).

This completes the survey. Please save this form and attach it to an e-mail and send it to: tamc fm@amedd.army.mil. You can also print out this form using the "Print Form" button below to fax (808-433-1153) or mail your response back to us and save a copy of your response for your file. Please do not use the "Submit by Email" button to e-mail this form at this time. We want to thank you for taking time out of your busy schedule to complete this questionnaire.

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