Required CCA Asse	ssment 1001 for								
Studen	Cler	kship:	Evaluator:	Start Date:					
Juden		Date:	Rotation Number: 1	Site:					
Image	Hours assigne	ed to the studen	t						
Not	O Extensive (>40	Hours)							
	O Substantial (11 t	o 40 Hours)							
A - 11 1 1	O Moder ate (5 to	O Moder ate (5 to 10 Hours)							
Availabl	O Limited (1 to 4 I	Hours)							
	O No Contact (Le	O No Contact (Less Than 1 Hour)							
• <u>View the medical</u>	school educational pro	ogram objectives.							
possible and keep in m even an honors score. (even be a lower rating. improvement and ultim	ng statements, rate you ind that the student is Dur scoring algorithm Your objective reflection nately secure better pat ways" means 100% o	ir observation of the NOT expected to reflects realistic expons will also be very tient care.	e student's performance due perform at the highest let ectations of performance are valuable to the student and y always" means at least 3/4 (50%) of the time.	vel on each of these to r nd for some of the stater d help us identify areas o	eceive a passing or ments, this may of continuous				
Competency: PRO									
Maintains professionalis		ethical behavior at	all times						
	O No (Comment Required)								
Demonstrates punctual		on assianed tasks							
O Yes	O No (Comment Required)	3							
. ,			DN SKILLS/SYSTEMS-BA						
		-	level of education) when spe	1	tne neattncare team				
O Always	O Nearly Always	O Often	O Rarely	O Not Observed					
Includes social/structure	al factors (e.g., access to	food, local laws, zij	p code) that impact medical	decision making and pat	ient health				
O Always	O Nearly Always	O Often	O Rarely	O Not Observed					

Competency: INTERPERSONAL AND COMMUNICATION SKILLS

Demonstrates active listening skills with patients and uses language that is at an appropriate level for understanding (e.g., asks clarifying questions, repeats back to patient what was heard, not distracted)

O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Interacts respec	tfully with the healthcare to	eam		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Is a proactive a	nd engaged member of the	healthcare team		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Competen	cy: PATIENT CARE			
HPI is organize	d			
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
HPI includes pe	ertinent positives and negati	ives		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Relevant other	history is complete (e.g., inc	cludes medical, past s	surgical, family, social hist	ory, ROS)
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
,	hnique when performing a			
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
	nent positives and negatives	from the exam		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
,	rprets tests (e.g., labs, imagi	ina surveys screenin		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
,				O Not Observed
	nost important (e.g., most lik			
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
	kely but relevant diagnosis			
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Patient plan of	care is appropriate for the o	diagnosis		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Patient plan of	care integrates evidence-bo	ased practice		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Patient present	ation is organized (e.g., util	izes SOAP)		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Patient present	ation is accurate, relevant, o	and complete		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Documentation	n (e.g., progress note) is accu	ırate, relevant, and c	omplete	
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Demonstrates of plan of care)	application of basic/foundat	tional concepts in clir	nical care (e.g., pathophys	iology, differential diagnosis, la
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
- Always	C INCOLLY MIWAYS	II O OILEII		II ~ Mor observed

Explains all steps	of procedure(s)			
O Always	O Nearly Always	O Often	O Rarely	O Not Observed/Not Applicable
Competency	: PRACTICE-BASED LE	ARNING AND IN	IPROVEMENT	
Identifies areas fo	or self improvement (e.g., I	knowledge, commun	ication, presentation, and	/or professionalism)
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Identifies clinical	questions and begins to to	ake initiative to addr	ress the question in the co	ntext of patient care
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
Receptive to feed!	back (e.g., attempts to inc	orporate feedback)		
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
O Always	Nearly Always	O Often	O Rarely	O Not Observed
,				O Not Observed
O Always	O Nearly Always	O Often	O Rarely	O Not Observed
	O Nearly Always	O Often	C Karely	O Not Observed
	NATIVE COMMENTS Ints are required (130 cha	racter minimum). Th	e comments in this text l	oox will be used for the student's M
Enter text here				
- ("Not for MSP	minimum length of 130 c E") Narrative comments. oorly, including examples	Please also include s		feel a student did exceptionally wel
Enter text here				

By submitting this assessment, I hereby attest that I do not have a conflict of interest with this student, including but not limited to a consensual relationship, familial relationship, physician-patient (health care) relationship, or financial relationship. If I feel there is a COI, it is my responsibility to contact the coordinator and have myself removed from evaluating the student.

<u>View the policy.</u>

I also certify that the information I have provided is correct to the best of my knowledge. I understand that this constitutes an electronic signature and take responsibility for the content herein. I am aware of the Family Education Rights and Privacy Act that states that this information may not be released to anyone other than the registrar's office. Therefore, I will have anyone who requests this information contact the registrar's office.