



Northern Ontario
School of Medicine
École de médecine
du Nord de l'Ontario
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NOSM Assessment of Student Performance During Elective

Student Name:

NOSM ID:

Current MD Program: Year 2

Year 4

Full Hospital/Clinic Name:

City:

Elective Specialty:

Sub-Specialty:

Elective Start and End Date:

Number of Weeks:

| Areas of Evaluation as Applicable | Not evaluated | Inadequate | Average | Above Average | Excellent |
|---|---------------|------------|---------|---------------|-----------|
| 1. Clinical Performance | | | | | |
| 2. Knowledge | | | | | |
| 3. Interviewing Skills | | | | | |
| 4. Physical Examination | | | | | |
| 5. Problem-solving Ability | | | | | |
| 6. Therapeutics and Management | | | | | |
| 7. Motivation | | | | | |
| 8. Professional Behaviour | | | | | |
| 9. Communication & Interpersonal Interactions | | | | | |
| 10. Initiative | | | | | |
| 11. Literature Review Skills | | | | | |
| 12. Statistical Skills | | | | | |
| 13. Clinical Appraisal Skills | | | | | |
| 14. Questionnaire Development Skills | | | | | |
| 15. Presentation Skills | | | | | |
| 16. Report Writing Skills | | | | | |

Overall Performance: Grade (Circle): FAIL

PASS

*****COMMENTS** (Please provide comments for **BOTH** Pass or Fail Grade).***

Supervisor(s) Name (First/Last):

Supervisor Signature:

Student's Signature:

Date:

Note: Personal Information on this form is collected and will be used to record assessment of NOSM student performance during elective on the student record. Any questions on this collection should be directed to the NOSM Student Records & Electives Officer using the contact information noted below.

Please return to the NOSM Student Records & Electives Officer at Records@nosm.ca or Fax: 807-766-7485
NOSM East Campus, Laurentian University, 935 Ramsey Lake Road, Sudbury, ON P3E 2C6