Integrated Curriculum Evaluation Exercise
Medical Student Clinical Skills Performance

Student: ___________________________ Social Security #: _______________

Faculty: ___________ _________________

Exam Date: _________ Videotape review? YES NO

Instructions to Faculty:

Please complete this evaluation form together. Use your combined best judgement to evaluate the student’s performance for these cases. You are asked to rate the student in five categories:

- Medical Interviewing
- Physical Examination
- Oral Presentation
- Problem Lists, Differential Diagnoses and Management Plans
- Professional Characteristics

We request that you report the frequency of accomplishment for each task, provide specific examples of errors, and provide a summative rating in each category. This form will be given to each student as feedback on his/her performance.

The last section requires you to make a summary judgement of the student’s performance. For any student you awarded an evaluation of deficient in any single category (Interviewing, Examination, Presentation, Problem List/Differential Diagnoses/Management Plan/Professional Characteristics), you should ask the student to repeat the exercise.

Thank you for your time and effort.
**Observation During Medical Interview**

1. Appropriately applies use of open-ended and closed-ended questions (circle one)

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**Appropriate**: Initiates interview with open-ended questions. Avoids leading or ambiguous questions.

**Inappropriate**: Initiates interview with series of yes/no questions. Asks additional questions without allowing patient to respond.

Comments and/or specific errors:

2. Uses clarifying questions -- followed up positive responses (circle one)

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**Appropriate**: Follows up on positive responses by patient. Fully characterizes chief complaint.

**Inappropriate**: Proceeds to ROS without characterizing chief complaint. Fails to quantitate cigarette or ethanol use.

Comments and/or specific errors:

3. Appropriate clustering and sequencing of questions (circle one)

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**Appropriate**: Clusters all characterizations of chief complaint together. Asks questions about FH, PMH, ROS in distinct groups.

**Inappropriate**: Begins ROS before completing present illness. Jumps from FH to PMH to ROS repeatedly.

Comments and/or specific errors:

4. Appropriate flow and transitioning (circle one)

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**Appropriate**: Uses transitional statements between sections. Uses summary statements in interview.

**Inappropriate**: Repeats questions patient has already answered. Fails to explain transition between sections.

Comments and/or specific errors:
Observation During Medical Interview - continued

5. Elicits sufficient information to define problems (circle one)

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**Appropriate:** Obtains adequate data from patient to develop differential diagnosis. Performs HPI, ROS, FH, PMH, SH appropriate to problem(s).

**Inappropriate:** In a patient with chest pain, fails to elicit ASCVD risk factors. In a patient with ethanol abuse, fails to elicit duration/quantity.

*Comments and/or specific errors:*

6. Prioritizes information and problems (circle one)

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**Appropriate:** Prioritizes questions about the major problem(s). In chest pain, emphasizes character, location, duration, frequency.

**Inappropriate:** In chest pain, spends most of time exploring symptoms of headache. In cough, spends most of time questioning about GI symptoms.

*Comments and/or specific errors:*

7. Relates well to patient during interview (circle one)

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**Appropriate:** Introduces self, and maintains appropriate eye contact with patient. Asks questions in a non-threatening, non-judgmental manner.

**Inappropriate:** Interrupts patient while answering question. Uses medical terms patient cannot understand.

*Comments and/or specific errors:*

**SUMMATIVE EVALUATION OF MEDICAL INTERVIEW (circle one)**

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Observation During Physical Examination

1. Examines appropriate regions of the body pertinent to the symptom[s] (circle one)

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**Appropriate**: Uses information from interview to guide physical exam. Performs complete lung exam in patient with fever and cough.

**Inappropriate**: In a patient with chest pain, emphasizes detailed neurologic exam. Fails to perform ENT exam in a patient with cough.

Comments and/or specific errors:

2. Examination technique is correct (circle one)

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**Appropriate**: Auscultates all positions of precordium. Sufficient precision to detect abnormality if present.

**Inappropriate**: Talks to patient during auscultation. Listens to heart through gown.

Comments and/or specific errors:

3. Logically sequences examination (circle one)

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**Appropriate**: While patient is supine, completes all maneuvers for that position. Auscultates abdomen prior to palpation.

**Inappropriate**: Requires patient to change positions repeatedly. Moves from heart exam to abdomen, back to heart exam.

Comments and/or specific errors:
**Observation During Physical Examination - continued**

4. Able to distinguish normal from abnormal findings (circle one)

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**Appropriate**: Detects pathological murmurs on heart examination. Distinguishes normal from abnormal reflexes.

**Inappropriate**: Describes abnormal lung findings in normal patient. Unable to distinguish normal from abnormal liver span.

*Comments and/or specific errors:*

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5. Relates well to patient during examination (circle one)

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**Appropriate**: Informs patient prior to abrupt maneuvers. Observes patient for pain during abdominal exam.

**Inappropriate**: Ignores patient discomfort during examination. Fails to drape patient appropriately.

*Comments and/or specific errors:*

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**SUMMATIVE EVALUATION OF PHYSICAL EXAMINATION** (circle one)

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### Oral Presentation of Interview and Examination

1. Communicates ideas fluently with proper volume, pace and terminology (circle one)

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**Appropriate**: Student easily understood; speaks in an unrushed manner. Uses proper medical terminology (“patellar reflex”, not “knee jerk”).

**Inappropriate**: Student pauses at long intervals during presentation. Uses casual terminology (“patient tilted” for “orthostatic BP change”).

*Comments and/or specific errors:*

2. Organizes presentation in a logical sequence (circle one)

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**Appropriate**: Presents sequentially (e.g., CC, HPI, SH, PMH, FH, ROS). Makes clear transition from HX to PE.

**Inappropriate**: Mixes HX and PE (“patient had chest pain and diastolic murmur”). Switches from HPI to ROS back to HPI.

*Comments and/or specific errors:*

3. Data presented is complete and accurate (circle one)

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**Appropriate**: Provides full cardiac exam (not “normal”) in a patient with chest pain. Includes all abnormalities uncovered on HX and PE.

**Inappropriate**: Reports PMH issue not discovered in interview. Reports reflexes normal when not checked during PE.

*Comments and/or specific errors:*

### Summative Evaluation of Oral Presentation (circle one)

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### Review and Discussion of Problem List, Differential Diagnosis, and Plan

1. **Able to prioritize problem list & differential diagnoses for major problem[s] (circle one)**

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- **Appropriate**: Lists all problems from HX and PE, most important problem[s] first. Recognizes anginal chest pain as more important than sore throat.

- **Inappropriate**: In a patient with dyspnea, lists COPD as the only possible diagnosis. Includes trivial problems as higher priority than critical ones.

*Comments and/or specific errors:*

2. **Uses pertinent positive/negative findings on HX & PE to support diagnoses (circle one)**

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- **Appropriate**: Provides cardiac risk factors supporting diagnosis of ASCVD. Understands absence of cardiac risk factors decreases ASCVD risk.

- **Inappropriate**: Suggests high likelihood of disease despite absence of risk factors. Suggests rare disease present despite absence of signs/symptoms.

*Comments and/or specific errors:*

3. **Understands relative importance of signs & symptoms in support of diagnoses (circle one)**

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- **Appropriate**: Identifies most important clues leading to a diagnosis. Recognizes importance of pleuritic quality to etiology of chest pain.

- **Inappropriate**: Focuses on non-specific symptom (fever) as diagnostic of infection. Suggests absence of hypoxia excludes pneumonia as a diagnosis.

*Comments and/or specific errors:*

4. **Selects diagnostic tests based on a logical rationale (circle one)**

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- **Appropriate**: Justifies tests selected based on data from HX and PE. Justifies diagnostic/therapeutic plan based on likelihood of DX.

- **Inappropriate**: Diagnostic considerations inconsistent with data base. Recommends invasive/expensive interventions for minor problems.

*Comments and/or specific errors:*

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### Summative Evaluation of Problem-Solving Skills (circle one)

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**Professional Characteristics of Student Performance**

1. Establishes rapport with patient (circle one)

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**Appropriate:** Uses reinforcing behaviors and eye contact appropriately. Demonstrates interest in the patient’s problem[s].

**Inappropriate:** Stares at notes throughout interview. Fails to respond to patient concerns.

*Comments and/or specific errors:*

2. Demonstrates understanding of social/emotional factors affecting patient behavior (circle one)

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**Appropriate:** Sensitive to patient anguish over “bad news”. Explores patient concerns about diseases or problems.

**Inappropriate:** Fails to respond to patient anguish with empathy. Lectures patient in condescending manner.

*Comments and/or specific errors:*

3. Elicits patient understanding of information given (circle one)

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**Appropriate:** Asks patient to repeat instructions given during encounter. Explores patient knowledge of instructions or information.

**Inappropriate:** Misses clues indicating that patient does not understand information given. Fails to re-explain areas after patient voices confusion.

*Comments and/or specific errors:*

4. Recognizes weaknesses and accepts constructive criticism (circle one)

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**Appropriate:** Able to self-identify areas for where improvement. Receives constructive criticism openly.

**Inappropriate:** Unable to recognize areas improvement is needed. Counters criticism with excuses.

*Comments and/or specific errors:*

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**SUMMATIVE EVALUATION OF PROFESSIONAL SKILLS (circle one)**

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Summative Evaluation of Student Performance
(CHECK ONE)

I/We are able to determine from the cases observed that this student is competent in ALL of these areas:

. interviewing
. physical examination
. oral presentation
. problem-solving discussion
. professional behavior

I/We cannot determine from the cases observed that this student is competent in ALL of these areas:

. interviewing
. physical examination
. oral presentation
. problem-solving discussion
. professional behavior

This student should perform additional patient evaluations.

Faculty Signature: _______________________________ Date: __________

Faculty Signature: _______________________________ Date: __________