

**TORONTO GENERAL HOSPITAL/ MCGILL UNIVERSITY HEALTH CENTRE  
HIV SPECIALTY RESIDENCY PROGRAM**

**CLINICAL ROTATION RESIDENT ASSESSMENT FORM**

**NAME OF ROTATION:** \_\_\_\_\_ **REPORT COVERS PERIOD FROM:** \_\_\_\_\_ **TO** \_\_\_\_\_

**NAME OF RESIDENT:** \_\_\_\_\_ **NAME OF PRECEPTOR:** \_\_\_\_\_

**COMPLETED BY:** Preceptor \_\_\_ Resident \_\_\_ (check one) **THIS IS A** \_\_\_ **MIDPOINT OR** \_\_\_ **FINAL ASSESSMENT** (check one)

**I HAVE REVIEWED PREVIOUS CLINICAL ROTATION FINAL ASSESSMENT:** \_\_\_\_\_ (signature of preceptor)

**ROTATION OUTCOMES:**

The resident will develop the clinical knowledge, skills, and professional values to:

- A. Provide direct patient care as a member of inter-professional teams
- B. Provide medication- and practice-related education
- C. Manage one's own practice of pharmacy

**KNOWLEDGE CONTENT:**

In this rotation the following drugs, disease states and clinical skills were discussed:

Drug therapies	Disease States	Clinical Skills

	1	2	3	4	5	NOT OBSERVED
<b>1. ACADEMIC/CONTENT KNOWLEDGE</b>						
<b>Medication knowledge</b>	<input type="checkbox"/> Inadequate fund of knowledge to apply to the resolution of clinical problems at the designated level of performance*	<input type="checkbox"/> Superficial fund of knowledge to apply to resolution of clinical problems at the designated level of performance.	<input type="checkbox"/> Satisfactory fund of knowledge to resolve effectively most clinical problems at the designated level of performance.	<input type="checkbox"/> Substantial fund of knowledge to resolve consistently and effectively all clinical problems at the designated level of performance.	<input type="checkbox"/> Exceptional fund of knowledge to resolve consistently and perceptively all clinical problems at the designated level of performance.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of therapeutic plans <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> presentation content <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> other (specify): _____		
<b>Disease knowledge</b>	<input type="checkbox"/> Inadequate fund of knowledge to define priorities and diagnosis and/or manage clinical problems at the designated level of performance.	<input type="checkbox"/> Superficial fund of knowledge to define priorities in diagnosis and/or manage clinical problems at the designated level of performance.	<input type="checkbox"/> Satisfactory fund of knowledge to define priorities and manage effectively most clinical problems at the designated level of performance.	<input type="checkbox"/> Substantial fund of knowledge to define priorities and manage consistently and effectively all clinical problems at the designated level of performance.	<input type="checkbox"/> Exceptional fund of knowledge to define priorities and manage consistently and perceptively all clinical problems at the designated level of performance.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of therapeutic plans <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> presentation content <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> other (specify): _____		
<b>Ethical, Legal and Standards of Practice Knowledge</b>	<input type="checkbox"/> Inadequate funds of knowledge in any or all three domains to	<input type="checkbox"/> Superficial funds of knowledge in any or all three domains to	<input type="checkbox"/> Satisfactory funds of knowledge in all three domains to	<input type="checkbox"/> Substantial funds of knowledge in all three domains to	<input type="checkbox"/> Exceptional funds in all three domains to practice consistently	<input type="checkbox"/>

	1	2	3	4	5	NOT OBSERVED
	practice within appropriate perimeters at the designated level of performance.	practice within appropriate perimeters at the designated level of performance.	practice within appropriate perimeters at the designated level of performance.	practice within appropriate perimeters at the designated level of performance.	and perceptively ensuring best practices at the designated level of performance.	
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b>		
				<input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of therapeutic plans <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> presentation content <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> other (specify): _____		

**\*Designated level of performance** = at the end of the rotation the resident will be able to independently manage moderately complex drug therapy problems. Moderately complex problems have either complex drug related knowledge required (ie. Protease inhibitor dosing/TDM) or a complex situation (ie. treatment failure)

	1	2	3	4	5	NOT OBSERVED
<b>2. CLINICAL SKILLS AND APPLICATION OF THE THERAPEUTIC THOUGHT PROCESS</b>						
<b>Data gathering, medication history and literature review.</b>	<input type="checkbox"/> Information gathered is incomplete, and/or inaccurate; important information is missing.	<input type="checkbox"/> Information gathered is superficial, but accurate, and/or some important information is missing.	<input type="checkbox"/> Information gathered is comprehensive, mostly relevant, and accurate.	<input type="checkbox"/> Information gathered is comprehensive, relevant and accurate.	<input type="checkbox"/> Information gathered is precise, perceptive, and appropriately detailed.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b>		
				<input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> review of literature search strategy/results <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of patient work ups/therapeutic plans <input type="checkbox"/> review of references used for DI questions, presentations, pt work ups <input type="checkbox"/> presentation content <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> other (specify): _____		
<b>Identification of Drug Therapy Problems</b>	<input type="checkbox"/> Fails to discern relevant from irrelevant data; fails	<input type="checkbox"/> Discerns some relevant data, but not enough to	<input type="checkbox"/> Discerns sufficient relevant data to identify major	<input type="checkbox"/> Discerns all relevant data to identify major real and potential	<input type="checkbox"/> Precisely discerns the relevant data, weighs alternatives,	<input type="checkbox"/>

	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>NOT OBSERVED</b>
	to identify the patient's real and/or potential problems.	identify consistently the patient's real and/or potential problems.	problem(s), but may not always prioritise options effectively and/or consistently distinguish between the patient's real and potential problems.	problem(s) and appropriately prioritizes them.	justifies choices, synthesizes and integrates data to identify all real and potential problems, and appropriately prioritizes them.	
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of patient work ups/therapeutic plans <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> resident case presentation <input type="checkbox"/> other (specify): _____		
<b>Determining endpoints and outcomes.</b>	<input type="checkbox"/> Unable to determine appropriate endpoints and/or outcomes.	<input type="checkbox"/> Determines some appropriate endpoints and/or outcomes.	<input type="checkbox"/> Determines most appropriate endpoints and outcomes.	<input type="checkbox"/> Determines appropriate endpoints and outcomes, considering most aspects of patient care.	<input type="checkbox"/> Determines all appropriate endpoints and outcomes considering all aspects of patient care.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of patient work ups/therapeutic plans <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> resident case presentation <input type="checkbox"/> other (specify): _____		
<b>Clinical Decision making</b>	<input type="checkbox"/> Often poor and/or not derived from the data; difficulty in arriving at decisions; fails to make use of content knowledge and all available information.	<input type="checkbox"/> Sometimes shows poor judgement; some difficulty in decision making.	<input type="checkbox"/> Shows good judgement and usually makes sound clinical decisions; some difficulty in complex situations.	<input type="checkbox"/> Good judgement and decision making skills; exhibits good problem solving skills.	<input type="checkbox"/> Consistently arrives at right decision even on highly complex matters without delay; analyzes available data; produces concise, substantive	<input type="checkbox"/>

	1	2	3	4	5	NOT OBSERVED
					problem list; superb clinical judgement.	
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of therapeutic plans <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> presentation content <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> other (specify): _____		
<b>Development of a Therapeutic Plan</b>	<input type="checkbox"/> Plans are incomplete or inappropriate; significant data is overlooked and/or difficulty is experienced in interpreting the available data.	<input type="checkbox"/> Plans are frequently incomplete or superficial; significant data may be overlooked or misinterpreted.	<input type="checkbox"/> Plans are usually complete, appropriate, and reflect the current standards of practice; most data is correctly interpreted and logically applied.	<input type="checkbox"/> Plans are complete, appropriate, and reflect the current standards of practice; all data is correctly interpreted, logically applied, considering most aspects of patient care.	<input type="checkbox"/> Plans are consistently complete, appropriate, and reflect best in current practice, precisely and perceptively interpreting all data, strategically applying data and considering all aspects of patient care.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of patient work ups/therapeutic plans <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> case presentation content <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> other (specify): _____		
<b>Establish and implement monitoring/follow-up plan</b>	<input type="checkbox"/> Plans are incomplete or inappropriate; significant monitoring parameters are overlooked and/or difficulty is experienced in	<input type="checkbox"/> Plans are frequently incomplete or superficial; significant monitoring parameters may be overlooked or misinterpreted.	<input type="checkbox"/> Plans are usually complete, appropriate, and reflect the current standards of practice; most monitoring parameters are	<input type="checkbox"/> Plans are complete, appropriate, and reflect the current standards of practice; all monitoring parameters are correctly interpreted	<input type="checkbox"/> Plans are consistently complete, appropriate, and reflect best in current practice, precisely and perceptively interpreting all	<input type="checkbox"/>

	1	2	3	4	5	NOT OBSERVED
	interpreting the available data.		correctly interpreted and logically applied.	and appropriate follow-up is implemented, some new drug therapy problems are subsequently identified (if applicable).	monitoring parameters with appropriate follow-up, strategically considering all aspects of patient care. All new drug therapy problems are subsequently identified (if applicable).	
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b>		
				<input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of patient work ups/therapeutic plans <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> case presentation content <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> other (specify): _____		
<b>Patient Care Documentation (e.g., chart notes, consult notes, etc.)</b>	<input type="checkbox"/> Often not completely accurate, incomplete, disorganized and/or confusing; not clearly expressed.	<input type="checkbox"/> Sometimes inaccurate, incomplete, disorganized and/or confusing; not consistently presented in a clear, concise, understandable way.	<input type="checkbox"/> Usually accurate, complete, adequately organized and referenced, and presented in a clear, understandable way.	<input type="checkbox"/> In most cases, accurate, complete, adequately organized and referenced, and presented in a clear, concise, and understandable way.	<input type="checkbox"/> Consistently accurate, comprehensive, coherently organized, concise, and referenced; excellent command of expression.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b>		
				<input type="checkbox"/> review of written chart documentation <input type="checkbox"/> review of written consult notes (for internal/external staff) <input type="checkbox"/> written patient information provided <input type="checkbox"/> other (specify): _____		

	1	2	3	4	5	NOT OBSERVED
<b>3. COMMUNICATION SKILLS</b>						
<b>Communication with:</b> <ul style="list-style-type: none"> <li>• <b>Patients</b></li> <li>• <b>Caregivers</b></li> <li>• <b>Interviewing skills</b></li> </ul>	<input type="checkbox"/> Often incomplete and/or inaccurate, difficult to follow and/or hard to understand and/or inappropriate for the specific individual(s).	<input type="checkbox"/> Sometimes incomplete and/or inaccurate, superficial, rambling and not always understandable or inappropriate for the specific individual(s).	<input type="checkbox"/> Usually complete and accurate, adequately organized, and understandable and appropriate for the specific individual(s).	<input type="checkbox"/> In most case appropriately, comprehensively and effectively focused, accurate, organized and delivered; consistently clearly expressed and appropriate for the specific individual(s).	<input type="checkbox"/> Precisely focused, coherently organized, accurate, clearly and succinctly expressed and always appropriate for the specific individual(s).	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> observation of resident interaction with patients/family members</li> <li><input type="checkbox"/> presentations to patient/community groups</li> <li><input type="checkbox"/> patient/family member feedback on resident performance</li> <li><input type="checkbox"/> other (specify): _____</li> </ul>		
<b>Communication with:</b> <ul style="list-style-type: none"> <li>• <b>Other phms</b></li> <li>• <b>Interprofessional team</b></li> </ul>	<input type="checkbox"/> Often incomplete and/or inaccurate, difficult to follow and/or hard to understand and/or inappropriate for the specific professional.	<input type="checkbox"/> Sometimes incomplete and/or inaccurate, superficial, rambling and not always understandable or inappropriate for the specific professional.	<input type="checkbox"/> Usually complete and accurate, adequately organized, and understandable and appropriate for the specific professional.	<input type="checkbox"/> In most case appropriately, comprehensively and effectively focused, accurate, organized and delivered; consistently clearly expressed and appropriate for the specific professional.	<input type="checkbox"/> Precisely focused, coherently organized, accurate, clearly and succinctly expressed and always appropriate for the specific professional.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> observation of resident interaction with health care team member</li> <li><input type="checkbox"/> health care team member feedback on resident performance</li> <li><input type="checkbox"/> other (specify): _____</li> </ul>		
<b>Oral presentation and/or teaching</b> <ul style="list-style-type: none"> <li>• <b>presentation skills, style, &amp; content</b></li> </ul>	<input type="checkbox"/> Often incomplete and/or inaccurate, difficult to follow	<input type="checkbox"/> Sometimes incomplete and/or inaccurate,	<input type="checkbox"/> Usually complete and accurate, adequately	<input type="checkbox"/> In most case appropriately, comprehensively and	<input type="checkbox"/> Precisely focused, coherently organized, accurate	<input type="checkbox"/>

	1	2	3	4	5	NOT OBSERVED
	and/or hard to understand and/or inappropriate for the specific audience.	superficial, rambling and not always understandable or inappropriate for the specific audience.	organized, and understandable and appropriate for the specific audience.	effectively focused, accurate, organized and delivered; consistently clearly expressed and appropriate for the specific audience.	and comprehensive, clearly and succinctly expressed and always appropriate for the specific audience.	
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <input type="checkbox"/> formal presentation slides/handouts (pharmacy department) <input type="checkbox"/> formal presentation slides/handouts (healthcare team) <input type="checkbox"/> clinical teaching/preceptorship of students (faculty of pharmacy) <input type="checkbox"/> other (specify): _____		

	1	2	3	4	5	NOT OBSERVED
<b>4. PROFESSIONAL AND INTERPERSONAL BEHAVIOURS</b>						
<b>Pharmacist/Patient Relationships</b>	<input type="checkbox"/> Lacks communication skills; does not listen to patients; discourteous and/or inappropriate.	<input type="checkbox"/> Inconsistent communication and interpersonal skills; attention may be focused more on perceived problems than on patients.	<input type="checkbox"/> Communicates his/her concern for the patient; establishes a rapport with the patient.	<input type="checkbox"/> Establishes good rapport; listens actively to patients; is respectful, empathetic, and caring.	<input type="checkbox"/> Establishes exceptional empathetic rapport; excellent listening skills; creates a caring therapeutic relationship with patients.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b> <input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> patient/family member feedback on resident performance <input type="checkbox"/> other (specify): _____		
<b>Interpersonal Team Relationships</b>	<input type="checkbox"/> Behaviour interferes with the working of the team; discourteous to other members of the team; undermines team; may be	<input type="checkbox"/> Poor team player, behaviour does not facilitate the working of the team, difficulty communicating with team members; may fail to take	<input type="checkbox"/> Active member of the team who works well with other members, but whose leadership skills are underdeveloped.	<input type="checkbox"/> Good, active team player with developing leadership qualities.	<input type="checkbox"/> An active member of the team whose leadership qualities are recognized by others; able to achieve best results in difficult situations	<input type="checkbox"/>



	1	2	3	4	5	NOT OBSERVED
	condescending, patronizing, passive or aggressive.	appropriate responsibility for own contribution to the team.			without antagonizing others.	
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b>		
				<input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> observation of resident interaction with pharmacists <input type="checkbox"/> health care team member feedback <input type="checkbox"/> pharmacist feedback <input type="checkbox"/> other (specify): _____		
<b>Sense of responsibility</b>	<input type="checkbox"/> Not responsible; does less than prescribed work; needs repeated reminders.	<input type="checkbox"/> Cannot always be depended upon; needs reminders sometimes.	<input type="checkbox"/> Dependable; reliable; hones; prompt; appropriate follow-up of patients.	<input type="checkbox"/> Takes initiative; acts independently; always completes assigned tasks; reliable and honest.	<input type="checkbox"/> Very conscientious, consistently displays exceptional attention to duties and is prepared to give extra time willingly.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b>		
				<input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of patient work ups/therapeutic plans <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> formal presentation preparation and delivery <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> observation of resident interaction with pharmacists <input type="checkbox"/> health care team member feedback <input type="checkbox"/> pharmacist feedback <input type="checkbox"/> patient/family member feedback on resident performance <input type="checkbox"/> other (specify): _____		
<b>Self-Assessment Ability (Insight)</b>	<input type="checkbox"/> Unaware of own limitations; does not seek feedback; unable to request required assistance; unable to take advice professionally.	<input type="checkbox"/> Inconsistent awareness of own limitations; some difficulty seeking feedback and taking advice professionally.	<input type="checkbox"/> Usually aware of own limitations; often seeks feedback and/or assistance to overcome deficiencies.	<input type="checkbox"/> Aware of own limitations; seeks feedback regularly and acts to improve behaviour.	<input type="checkbox"/> Well aware of own limitations; raises constructive questions; seeks feedback to excel.	<input type="checkbox"/>
<b>Justify your rating using concrete examples:</b>				<b>Domain assessed in the following manner(s) (check all that apply):</b>		

	1	2	3	4	5	NOT OBSERVED
				<input type="checkbox"/> resident/preceptor discussion <input type="checkbox"/> resident self-assessment post interaction/activity <input type="checkbox"/> mid-rotation self-assessment of resident <input type="checkbox"/> observation of resident interaction with health care team member <input type="checkbox"/> review of patient work ups/therapeutic plans <input type="checkbox"/> review of written chart documentation <input type="checkbox"/> formal presentation preparation and delivery <input type="checkbox"/> observation of resident interaction with patients/family members <input type="checkbox"/> observation of resident interaction with pharmacists <input type="checkbox"/> health care team member feedback <input type="checkbox"/> pharmacist feedback <input type="checkbox"/> patient/family member feedback on resident performance <input type="checkbox"/> other (specify): _____		



**FINAL ROTATION ASSESSMENT OF RESIDENT**

	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>NOT OBSERVED</b>
<b>OVERALL</b>						
ASSESSMENT OF PERFORMANCE	□	□	□	□	□	□

Evaluation Domain	Domain Average	Weighting	Sub-Total
A: Knowledge	/5	X2	/10
B: Clinical Skills	/5	X2	/10
C: Communication Skills	/5	X1	/5
D: Professional/ interpersonal behaviours	/5	X1	/5
		Total:	/30

- HONOURS (Average  $\geq$  3.0 in each domain and total  $\geq$  24/30)
- PASS (Average  $\geq$  3.0 in each domain and total  $<$  24/30)
- FAIL (Average  $<$  3.0 in any one domain)

RESIDENT COMMENTS (INCLUDING STRENGTHS, AREAS TO IMPROVE):

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PRECEPTOR COMMENTS (INCLUDING STRENGTHS, AREAS TO IMPROVE):

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RESIDENCY DIRECTOR COMMENTS: (OPTIONAL)

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Resident signature:	Date:
Preceptor signature:	Date:
Residency director signature:	Date:

**Please forward copies of completed & signed final evaluation forms to [alice.tseng@uhn.ca](mailto:alice.tseng@uhn.ca) and [nancy.sheehan@umontreal.ca](mailto:nancy.sheehan@umontreal.ca) within 1 week of the end of the rotation.**

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