## Electives & Selectives Student Assessment: NON-PATIENT CARE

## Student Name:

Elective Title: \_\_\_\_\_

Location: \_\_\_\_\_ Dates: \_\_\_\_\_

Evaluator name/title:

By checking here I verify that there is no Conflict of Interest. Conflict of interest is defined in our policies linked here: Conflict of Interest Assessment and Evaluation Policy, Conflict of Interest Faculty Providing Counsel Policy, Conflict of Interest Faculty Providing Medical Care Policy.

The milestones for MS4 students are arranged in columns of progressive stages of competence that best describe a student's summary performance for that sub-competency. Selecting a response box:

- In the middle of a column implies that the student has demonstrated those milestones. ٠
- On a line in between columns indicates that milestones in the preceding column have been ٠ demonstrated, as well as initial or partial demonstration of milestones in subsequent column.
- Any individual EPO with a rating of < 2.0 indicates a significant concern and **must be** • described in the comments section. Two or more ratings of <2.0 will result in the student failing the elective.

failing the elective.				
Competency Areas and	Does not Meet Expectations	Meets Expectations	Exceeds Expectations	Did Not
<u>EPOs</u>	Functioning below expected level of training	Functioning at the expected level of training	Functioning above the expected level of	<u>Observe</u>
	for a 4th yr medical student	for 4th yr medical student	training for 4th yr medical student	
Medical Knowledge	Unable to apply MK facts to research and	Applies MK facts to research and current medical	Also addresses further questions for inquiry	
Apply medical	current medical literature	literature	or gaps in knowledge	
knowledge, formulate				
questions develop	Is unable to summarize relevant material to	Summarizes relevant material to correctly		
strategies to address	correctly convey understanding of content	5 convey understanding of content	2.0	
them		<sup>5</sup> 2.0 2	5 3.0	
Critical Appraisal	Is unable to examine assumptions, evaluate	Examines assumptions, evaluates evidence	Also demonstrates practical application of	
Critically evaluate	evidence and assess conclusions for	and assesses conclusions for relevance	clinical relevance of the literature to context	
information	relevance		of practice	
Access/Appraise	Conducts non-evidence based search or	Conducts evidence-based search and finds	Also <b>presents findings</b> in the <b>context</b> of levels of	
evidence from literature	finds irrelevant information	relevant information to the course	evidence in medical literature	
Recognize limitations,	Struggles instead of acknowledging	Acknowledges limitations/obstacles	Also demonstrates improvement in self-	
admit error	limitations/obstacles		identified limited area/s	
		Identifies a plan to change limitations or		
	Is <b>unable</b> to identify a <b>plan</b> to change	resources needed		
	limitations or	$\sim$		
<u>Communication</u>	Presents inaccurate or irrelevant	Presents accurate and pertinent information	Also summarizes information in a thorough	
Use effective	information in an inarticulate and	in an articulate and organized manner	manner or <b>explains concepts</b> that may be	
written/verbal	unorganized manner		confusing for the participants	
communication		In individual or group presentation, asks		
techniques	In presentations, forgets to asks participants	participants if they have any questions		
	if they have any O questions			
<u>Professionalism</u>	Completes tasks late, is unable to balance	Completes tasks on time, successfully	Completes tasks/assignments in advance	
Is accountable, self-	time commitments	balances time commitment		
responsive	0 (	$\sim$ $\sim$ $\sim$ $\sim$ $\sim$	$\overline{)}$	
Seek extra responsibility	Performs less than what is required on	Asks for additional responsibility on	Also performs more than what is required	
	assignments/tasks	assignments/tasks	on assignments/tasks in an independent	
	$\bigcirc$	$\sim$	manner	
			$\sim$	I



Competency Areas and EPOs	Does not Meet Expectations	Meets Expectations	Exceeds Expectations	<u>Did Not</u> Observe
Maintain a teachable attitude, is prepared and engaged	Responds in a <b>defensive</b> manner to feedback, or is <b>not willing to learn</b> , Is <b>unprepared</b> , arrives <b>late</b> , or <b>does not</b> obtain <b>approval</b> for absence or tardiness	Responds <b>openly</b> to feedback, but does not solicit it, and is <b>willing to learn</b> Is <b>prepared</b> , arrives <b>on time</b> , or <b>obtains</b> 5 <b>approval</b> for absence or tardiness	Initiates giving and receiving feedback; Incorporates feedback for improvement; Assists others	
Demonstrate integrity, self-confidence	Demonstrates <b>disrespectful</b> interactions with faculty, staff, colleagues, and patients	Demonstrates <b>respectful</b> interactions with faculty, staff, colleagues, and patients	Positively distinguishes themselves among   faculty, staff, and collegues gues	
Maintain confidentiality	Shares confidential information with unidentified parties	Shares confidential information only with identified parties	Also <b>implements additional measures</b> to secure participant confidentiality	
<u>Societal Awareness</u> Is aware of implications to practice, populations, areas of concern, educate others	<b>Neglects</b> to explain <b>relevance</b> of implications to clinical practice and/or specific groups of people (e.g. homelessness, uninsured, substance abuse, elder abuse, domestic violence, etc)	<b>Explains relevance</b> of implications to clinical practice and/or specific groups of people (e.g. homelessness, uninsured, substance abuse, elder abuse, domestic violence, etc)	Also suggests population-specific, relevant interventions to address the problems	

Fail	Pass	High Pass	Honors
Does not meet expectations	Meets expectations	Meets and exceeds some	Exceeds expectations
		expectations	
			Does not meet expectations Meets expectations Meets and exceeds some

Formative comments to help optimize student performance (these comments will not appear in the Dean's letter) (OPTIONAL):

Summative Dean's Letter (MSPE) comments (**REQUIRED FIELD**):

Student Signature	Date:	Please return the completed form to:	
Faculty Signature	Date:	COMPHX-Electives@email.arizona.edu	
Course Director Signature (if assessment completed by faculty other than course director)	Date:	-OR- Fax: 602-680-5483	