

GME evaluation system (Fellow evaluates rotation)

Evaluator: (Fellow)

Rotation: _____

Period: _____

Days spent: _____

1 - 2 - 3 Unsatisfactory	4 - 5 - 6 Satisfactory	7 - 8 - 9 Superior
X=Unable to evaluate		

1	Organization	<input type="checkbox"/>
2	Mix of patients	<input type="checkbox"/>
3	Quality of facilities	<input type="checkbox"/>
4	Staff helpful	<input type="checkbox"/>
5	Didactic teaching	<input type="checkbox"/>
6	Availability of faculty	<input type="checkbox"/>
7	Policies and procedures clear	<input type="checkbox"/>
8	Duties of fellow/resident clear	<input type="checkbox"/>
9	Use of fellow/resident time was efficient	<input type="checkbox"/>
10	Faculty provided feedback on my performance	<input type="checkbox"/>
11	Overall impression of rotation	<input type="checkbox"/>
12	Specific comments on rotation strengths:	<input type="checkbox"/>
Comments		
13	Specific comments on rotation weaknesses:	<input type="checkbox"/>
Comments		
14	Suggestions for improvement:	<input type="checkbox"/>

Comments