

University of Manitoba
Clerkship FITER: Diagnostic Radiology Electives

Student Name: _____

Dates of Elective: _____

Site: _____

For each of the following evaluation items, please tick the box at the level of expectation that the student currently meets.

Indicate whether the Resident on service contributed to this evaluation. Yes No N/A

1. **Clinical expertise:** The student can independently gather the necessary information through different imaging modalities and the imaging findings on those studies to establish a differential diagnosis and formulate an appropriate treatment plan.

CRITERION	Unsatisfactory 1	Below expectations 2	Meets expectations 3	Exceeds expectations 4	Outstanding 5	Not applicable Not assessed
Diagnostic Investigations	<input type="checkbox"/> Consistently unable to select and understand the different imaging modalities utilized for common problems.	<input type="checkbox"/> Inappropriate use of imaging modalities for common problems.	<input type="checkbox"/> Usually able to apply the appropriate imaging modality for common problems.	<input type="checkbox"/> Consistently able to apply the appropriate imaging modality for most common and some uncommon problems.	<input type="checkbox"/> Exceptional understanding of diagnostic imaging modalities. Able to consistently apply to common and uncommon situations.	<input type="checkbox"/>
Differential diagnosis formulation skills (DDx)	<input type="checkbox"/> Consistently unable to formulate differential diagnoses for common problems.	<input type="checkbox"/> Difficulty in formulating DDx for many common problems.	<input type="checkbox"/> Able to formulate DDx for common problems with few omissions noted.	<input type="checkbox"/> Consistently able to formulate DDx for common problems.	<input type="checkbox"/> Consistently able to formulate complete DDx including complex problems.	<input type="checkbox"/>
Management plans (MP)	<input type="checkbox"/> Consistently incomplete MP or plans not appropriate to patient problem/situation.	<input type="checkbox"/> Inconsistent ability to formulate MP for many common problems.	<input type="checkbox"/> Consistently able to develop MP for most common problems.	<input type="checkbox"/> Thorough, organized, and complete MP for common problems.	<input type="checkbox"/> Thorough, organized, and complete MP even in some complex situations.	<input type="checkbox"/>
Health Promotion Strategies (HPS)	<input type="checkbox"/> Does not grasp principles of health and disease prevention.	<input type="checkbox"/> Inconsistent in incorporating HPS and disease prevention in patient care.	<input type="checkbox"/> Usually incorporates principles of HPS in discussions of patient care.	<input type="checkbox"/> Consistently incorporates principles of HPS in discussions of patient care. Able to collaborate with patients on health promotion.	<input type="checkbox"/> Consistently collaborates with patients and other health professionals to promote health and prevent disease.	<input type="checkbox"/>
Psychosocial determinants of health (PDH)	<input type="checkbox"/> Consistently overlooks PDH.	<input type="checkbox"/> Often overlooks PDH.	<input type="checkbox"/> Usually recognizes PDH.	<input type="checkbox"/> Consistently recognizes and demonstrates insight into PDH.	<input type="checkbox"/> Consistently and appropriately incorporates important PDH into patient care.	<input type="checkbox"/>
Discipline-specific procedural skills	<input type="checkbox"/> Unable to successfully perform most procedures even with significant assistance.	<input type="checkbox"/> Successfully performs some procedures, but still requires significant assistance.	<input type="checkbox"/> Successfully performs all procedures with minimal guidance.	<input type="checkbox"/> Successfully performs all procedures without assistance.	<input type="checkbox"/> Successfully performs all procedures, as well as some more advanced procedures without difficulty or need for assistance.	<input type="checkbox"/>

2. **Communicator:** The student communicates effectively with other members of the health care team (including other Radiologists as well as the ordering clinicians).

CRITERION	Unsatisfactory 1	Below expectations 2	Meets expectations 3	Exceeds expectations 4	Outstanding 5	Not applicable Not assessed
Communication with other health care professionals	<input type="checkbox"/> Does not communicate well with others involved in patients' care. Does not show respect for others' opinions or expertise.	<input type="checkbox"/> Inconsistently communicates appropriately with others involved in patients' care. Often does not recognize the need to do so.	<input type="checkbox"/> Communicates regularly and very well with others. Able to work collaboratively and respect differing opinions.	<input type="checkbox"/> Consistently communicates effectively with others. Works well with other professionals. Comprehensive communication of treatment plans.	<input type="checkbox"/> Works exceptionally well with other professionals. Always communicates very well with other professionals involved with the patient.	<input type="checkbox"/>

3. **Professional:** The student behaves in an ethical and professional manner at all times.

CRITERION	Unsatisfactory 1	Below expectations 2	Meets expectations 3	Exceeds expectations 4	Outstanding 5	Not applicable Not assessed
Integrity/Altruism	<input type="checkbox"/> Dishonest in dealing with others. Disrespectful of personal, emotional and physical boundaries of patients. Does not place welfare of patients first.	<input type="checkbox"/> Not always forthright and honest in dealing with others. At times does not demonstrate respect for others and crosses boundaries with patients or colleagues. At times does not prioritize welfare of patients.	<input type="checkbox"/> Respectful and honest. Demonstrates respect for others and sensitivity to needs of patients and colleagues. Places welfare of patients first.	<input type="checkbox"/> Consistently demonstrates respect to patients and colleagues. Always places welfare of patients first.	<input type="checkbox"/> A role model for demonstrating a high degree of respect for others and always prioritizing patients' welfare.	<input type="checkbox"/>
Responsibility and conscientiousness	<input type="checkbox"/> Inadequate commitment. Late or absent without adequate explanation. Does not address assigned responsibilities. Casual or cavalier approach that could lead to error in care.	<input type="checkbox"/> Not always committed. At times late or absent without adequate explanation. At times does not complete assigned responsibilities. At times does not attend to details as required.	<input type="checkbox"/> Dependable, reliable, prompt follow-up of patients. Punctual attendance for clinics, rounds and teaching sessions. Comes prepared. Consistently thorough and completes assigned responsibilities well.	<input type="checkbox"/> Always attends and participates well in rounds, clinics, and teaching sessions. Comes prepared. Always available.	<input type="checkbox"/> A model of balanced professional and personal behavior. Very dependable and demonstrates outstanding conscientiousness.	<input type="checkbox"/>
Self-assessment	<input type="checkbox"/> Cannot or will not respond to feed- back. Does not evaluate own skills and abilities to acknowledge limitations, or to take responsibility for errors.	<input type="checkbox"/> Not always receptive to feed- back. At times unaware of own limitations. At times demonstrates lack of responsibility regarding clinical decisions.	<input type="checkbox"/> Appropriately seeks assistance and feed-back. Responds to advice appropriately and modifies behaviour and performance as a result. Aware of own strengths and limitations.	<input type="checkbox"/> Always appropriately seeks and responds well to feed-back. Appropriately self-confident and assertive.	<input type="checkbox"/> Outstanding sense of own strengths and vulnerabilities and very responsive to feedback.	<input type="checkbox"/>

3. Professional: The student behaves in an ethical and professional manner at all times.

CRITERION	Unsatisfactory 1	Below expectations 2	Meets expectations 3	Exceeds expectations 4	Outstanding 5	Not applicable Not assessed
Personal demeanour	<input type="checkbox"/> Appearance/attire is highly inappropriate, personal hygiene is questionable. Often engages in inappropriate behaviours such as joking or eating where inappropriate, text-messaging, playing on-line games, etc.	<input type="checkbox"/> At times, dress and appearance are inappropriate. At times engages in inappropriate behavior such as inappropriate jokes and comments.	<input type="checkbox"/> Appropriate professional appearance and attire, self hygiene and conduct. Behaviour consistently appropriate to the professional context.	<input type="checkbox"/> Consistently demonstrating a professional appearance, with very appropriate self hygiene and conduct.	<input type="checkbox"/> Role model for professional appearance, attire and conduct. Sets the standards for others.	<input type="checkbox"/>

4. Scientist/Scholar: The student utilises sound scientific and/or scholarly principles in their studies and interaction with patients.

CRITERION	Unsatisfactory 1	Below expectations 2	Meets expectations 3	Exceeds expectations 4	Outstanding 5	Not applicable Not assessed
Self directed learning	<input type="checkbox"/> Despite prompting, does not complete assigned learning tasks. No evidence of self directed learning (e.g. reading around cases on own).	<input type="checkbox"/> Completes assigned learning tasks only with prompting. Minimal or no evidence of self directed learning.	<input type="checkbox"/> Completes assigned learning tasks without prompting. Demonstrates evidence of self directed learning.	<input type="checkbox"/> Demonstrates above average interest and ability to learn on own. Completes assigned learning tasks efficiently and without prompting.	<input type="checkbox"/> Demonstrates exceptional interest and ability to learn on own. An example to his/her peers.	<input type="checkbox"/>
Knowledge and application of evidence based medicine (EBM) resources	<input type="checkbox"/> No demonstrated knowledge of commonly used guidelines and other EBM resources (e.g. <i>Pubmed, Google Scholar, EBM websites</i>).	<input type="checkbox"/> Demonstrates limited knowledge of commonly used guidelines and EBM resources. Inconsistently applies this knowledge to patient management.	<input type="checkbox"/> Consistently demonstrates knowledge of commonly applied guidelines and EBM resources. Consistently applies this knowledge to patient management.	<input type="checkbox"/> Above average knowledge of guidelines and EBM resources. Able to find and appraise evidence on common topics. Consistently applies this evidence found into patient management.	<input type="checkbox"/> Superior ability to accurately find and appraise evidence on complex topics. Consistently applies EBM in all aspects of patient management.	<input type="checkbox"/>
Contributions at learning activities (e.g. rounds, teaching sessions)	<input type="checkbox"/> No demonstrated contributions at learning events. Appears unengaged.	<input type="checkbox"/> Able to provide useful contributions only when prompted. At times appears engaged.	<input type="checkbox"/> Provides useful contributions without prompting. Engaged, willing to participate, but little evidence of leadership or teaching ability during sessions.	<input type="checkbox"/> Provides useful contributions. Enthusiastic, some evidence of leadership and ability to teach peers during activities.	<input type="checkbox"/> Consistently provides insightful, "high level" contributions. Enthusiasm, leadership and teaching skills during activities are a role model to peers.	<input type="checkbox"/>
Oral Presentations	<input type="checkbox"/> Presentations usually disorganized, ineffective, incomplete, and with lots of errors.	<input type="checkbox"/> Many omissions of relevant information and/or inaccuracies. Often disorganized.	<input type="checkbox"/> Reasonable clear, complete, and accurate. Occasional need to pose a few questions to complete or clarify.	<input type="checkbox"/> Concise, clear, organized, and accurate. Facts presented in a logical manner.	<input type="checkbox"/> Succinct and precise. Relevant issues clearly delineated. Conveys excellent understanding of complex issues.	<input type="checkbox"/>

Were the project-specific learning objectives for the elective achieved? Yes No

Comments:

Note: Please append a copy of the following documents to the completed FITER, and submit them to the UGME office with the completed signed FITER as soon as possible after the elective has been completed.

- a. A copy of the project-specific objectives for the elective.
- b. A copy of the mid-term evaluation (MITER for electives that are four weeks long or longer; a narrative report for electives that are shorter than this)
- c. A copy of the student's research report.

FINAL ASSESSMENT:

PASS **BORDERLINE PASS** **FAIL**

PASS/FAIL GUIDELINES:

1. The following situations constitute a FAIL:
 - a) If a student receives a grade of "unsatisfactory" in ONE MAJOR (**BOLDED**) criterion.
 - b) If a student receives a grade of "unsatisfactory" in TWO MINOR (UNBOLDED) criteria.
 - c) If a student receives a grade of "below expectations" (or worse) in ANY THREE **BOLDED** or UNBOLDED criteria.
2. The following situation constitutes a BORDERLINE PASS:
 - a) if a student receives any combination of grades below "meets expectations" that does not otherwise constitute a fail, as above.

☞ Please note: For summative purposes, a grade of "borderline pass" constitutes a "pass". This designation serves merely to flag students that are experiencing difficulty in a non-punitive manner.

3. The following situation constitutes a PASS:
 - a) If a student receives grades of "meets expectations" or better in ALL criteria.

Comments for the MSPR

Strengths:

Areas for Improvement (Please explain all scores of "below expectations" or less):

Evaluator Name: _____

Evaluator Position: _____

Evaluator Signature: _____

Date: _____

UGME/Clerkship/Education Site Director Signature: _____

For the student:

I accept this evaluation

I do not accept this evaluation

Student Comments:

Student Signature: _____

Date: _____

*Please return completed forms to:
Clerkship and Electives Program Administrator
260 Brodie Centre
727 McDermot Avenue
Winnipeg, MB R3E 3P5
Canada
Tel: (204)977-5675
Fax: (204) 789-3929*