

**Preview Form**



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**Night Medicine (draft)**

[Insufficient contact to evaluate](#) (delete evaluation)

For this evaluation, provide your assessment of the trustworthiness of this resident to perform the tasks described below. Consider the degree of supervision you feel this resident requires in performing these tasks.

The Internal Medicine Residency Program expects that most of these activities require a significant degree of supervision for residents early in their training, and will be performed as if independently later in training only after significant experience and development.

This evaluation is not meant to provide a summative "grade" of the resident's performance during this rotation; rather, this assessment will be used by the Program to measure multidimensional progress for this resident in achieving expected educational milestones.

**Please only attest to those activities below which you have directly observed this resident perform.**

**DEFINITIONS OF SUPERVISION / INDEPENDENCE:**

**Complete Supervision:** Needs a supervising physician present with the resident

**Partial Supervision:** Needs a supervising physician available to join the resident

**Minimal Supervision:** Needs a supervising physician available via telephone

**Independently:** Able to perform without a supervising physician as if in independent practice

**Aspirational:** Consistently performs as a role model. Truly exceptional.

**After directly observing this resident, I trust this resident to...**

**1. Manage a patient with an acute clinical deterioration or change in clinical status.**

*Within this context, consider the resident's ability to: Recognize situations with a need for urgent or emergent medical care, including life-threatening conditions; respond promptly and appropriately to calls and pages regarding urgent patient needs; recognize when to seek additional guidance and/or consultation; initiate management and stabilize patients with emergent medical conditions; work effectively with other members of the inter-professional team (nurses, therapists, pharmacists, etc.), to ensure safe patient care; manage patients with conditions that may require transfer to a higher level of care or another clinical service; confirm goals of care/code status and customize management, if indicated; notify patient's first contact (family or friend) of significant clinical change; document and report accurately in the medical record pertinent information related to the clinical change; and identify and reflect on situations where a medical or systems error may have led to the acute change in status.*

With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**2. Triage and prioritize multiple competing clinical responsibilities to optimize patient care around the hospital.**

*Within this context, consider the resident's ability to: Attend to competing clinical issues in order of patient acuity; work with other healthcare providers to develop care plans to keep patients safe; minimize the use of chemical and physical restraints; manage and coordinate care and care transitions across the inpatient environment; perform an adequate history and physical examination that is appropriately targeted to the*

With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

medical condition; develop prioritized differential diagnoses and evidence-based diagnostic and therapeutic plans; rapidly synthesize available data including history, examination, laboratory and radiologic data to define patients' central problems; role-model effective communication in challenging situations; and provide leadership for the various teams caring for patients in different parts of the hospital.

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With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
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**3. Anticipate and pre-emptively assess patients who are at high risk of clinical deterioration.**

Within this context, consider the resident's ability to: Identify high-risk situations in patients from sign-out by accurately obtaining and corroborating history; perform and appropriately interpret assessments; accurately capture a patient's functional status and risk factors for hospital complications in oral and written communications; work with other healthcare providers to develop care plans to keep patients safe; and select the appropriate resources and level of care for patients with risk of clinical deterioration.

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With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
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**4. Effectively and compassionately discuss goals of care in urgent situations with patients and/or family members.**

Within this context, consider the resident's ability to: build rapport; engage patients/family members in shared decision making; integrate clinical context, evidence, and patient preference into decision making; communicate risks and benefits accurately and effectively; recognize and manage conflict when patients' values differ from their own or from the patient's family members; confirm code status in the setting of an acute decompensation.

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With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
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**5. Ability to coordinate an admission for an undifferentiated medical patient from the ED.**

Within this context, consider the resident's ability to: Demonstrate efficiency in gathering information from multiple sources including family members; demonstrate diagnostic reasoning; develop a broad differential diagnosis; prioritize resources; work with pharmacists to reconcile an accurate medication list; develop a diagnostic and management plan for common clinical disorders; recognize severity of illness and comorbidities and tailor treatment accordingly; and understand when to involve a consultant or other service.

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With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
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**6. Safely and effectively perform invasive procedures**

Within this context, consider the resident's ability to: recognize when an invasive procedure is necessary; effectively communicate the risks and benefits to patients while obtaining consent; perform procedure safely; minimize patient's discomfort and anxiety during the procedure; ask for assistance when procedure is complicated or difficult; follow up on appropriate post-procedure studies.

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With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
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**7. As a senior resident, provides effective teaching on a busy night shift and participates in night medicine teaching activities.**

Within this context, consider the resident's ability to: Actively participate

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*in teaching activities and conferences; participate in the education of all members of the health care team including integrating teaching, feedback, and evaluation of interns' and students' patient care; take a leadership role in the education of all members of the healthcare team.*

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With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
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**8. Performs concise, effective presentations of new patients to the accepting primary team.**

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*Within this context, consider the resident's ability to: Present a new patient in a clear and concise manner; emphasize the "big picture" regarding this admission; document patient's contact member's information as well as code status; alert primary team to any uncertainties that need to be clarified with collateral information; ensure all necessary orders are in by the time of presentation, and if not, alert primary team to what needs to be done; provide any update on the patient that may have occurred overnight since documentation was completed; inform the patient that team transition will occur in the morning.*

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With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
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**9. Safely and effectively give and accept sign-out to peers at the beginning and end of the shift.**

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*Within this context, consider the resident's ability to: Appropriately prioritize the urgency of "to-do" activities on the sign out; identify when further diagnostic testing is needed; role-model and teach effective communication with the next caregivers during transitions of care; demonstrate the ability to focus and listen professionally when receiving sign-out and ask questions to clarify the material and demonstrate understanding. Includes giving feedback to peers when sign-out is inadequate.*

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With Complete Supervision	With Partial Supervision	With Minimal Supervision	Independently	Aspirational	N/A
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**10. Seeks and incorporates follow-up and feedback regarding overnight patient care.**

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*Within this context, consider the resident's ability to: Reflect when surprised and apply new insights to future clinical scenarios; respond welcomingly and productively to feedback from all members of the healthcare team; actively seek feedback from all members of the healthcare team; and reflect on feedback in developing plans for improvement. This includes seeking follow-up on patients seen on previous nights.*

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11. How might this resident improve at one or more of the skills associated with this rotation?

12. Please describe the strengths of this resident.

13. What do you think about this evaluation? Please provide comments and feedback about the actual evaluation, not the resident.

**Observations of Professional Conduct (Required by GME)**

14. I was treated with respect by this individual.\*

1	2	3	4	5	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This individual consistently failed to treat me with respect and generally displayed an unprofessional or abusive manner during all interactions.	This individual treated me with respect approximately half the time; displayed an unprofessional or disrespectful manner during the remainder of the time.	This individual treated me with respect most of the time.	This individual treated me with respect almost always.	This individual consistently treated me with respect throughout the rotation.	

15. I observed others (students, residents, staff, patients) being treated with respect by this individual.\*

1	2	3	4	5	N/A
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This individual consistently failed to treat others with respect and generally displayed an unprofessional or abusive manner during all interactions.	This individual treated others with respect approximately half the time; displayed an unprofessional or disrespectful manner during the remainder of the time.	This individual treated others with respect most of the time.	This individual treated others with respect almost always.	This individual consistently treated others with respect throughout the rotation.	

\* Required fields Option description (place mouse over field to view)

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Submit completed evaluation

Submit

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