



## Preceptor Evaluation of OMS-IV

Student-Doctor: \_\_\_\_\_

Evaluator: \_\_\_\_\_

Evaluator Email: \_\_\_\_\_

Site: \_\_\_\_\_

Dates of Clinical Rotation: \_\_\_\_\_ to \_\_\_\_\_

Clinical Rotation Specialty: \_\_\_\_\_

### ***Instructions***

This evaluation is to determine if the student-doctor present on your rotation has adequately met the reasonable requirements for their level in this medical specialty. Areas include, but are not limited to: professionalism, data gathering (history and physical, examination skills), data recordings, medical knowledge, and management skills.

The following thirteen questions will help LUCOM document the Entrustable Professional Activities (EPAs) that will assess and help to ensure the student-doctor is ready for residency.

**Please select only one answer for each category. All questions are mandatory. Discuss your answers with your student.**

### ***Question 1 of 13: Medical Knowledge***

- \_\_\_\_\_ **Early Third-Year; Early Reporter.** Begins to relate basic science principles to clinical care. Has difficulty effectively communicating or demonstrating medical knowledge at times.
- \_\_\_\_\_ **Late Third-Year; Late Reporter.** Demonstrates medical knowledge by incorporating evidence of reading and learning into patient care interactions and communications. Is able to relate pathophysiology in most common health and disease processes.
- \_\_\_\_\_ **Early Fourth-Year; Early Interpreter.** Demonstrates medical knowledge through written and verbal communications with most patients, physicians and healthcare team members. Shows clear evidence of reading through critical thinking skills that lead to differential diagnosis reasoning.
- \_\_\_\_\_ **Late Fourth-Year; Later Interpreter.** Demonstrates medical knowledge through written and verbal communications with patients, physicians and healthcare team members. Applies knowledge to more challenging cases through sound clinical reasoning.
- \_\_\_\_\_ **Not Observed.**

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### Question 2 of 13: History Taking Skills

- \_\_\_\_\_ **Early Third-Year; Early Reporter.** Gathers information for patient history, needs work on organizing the material; has less effective questioning techniques, particularly with more complicated patients.
- \_\_\_\_\_ **Late Third-Year; Late Reporter.** Normally gathers an accurate patient history; occasionally misses key information. Some opportunities to improve organization and accuracy, questioning technique and sensitivity to nonverbal clues.
- \_\_\_\_\_ **Early Fourth-Year; Early Interpreter.** Consistently gathers a complete and accurate history, including some complicated patients. Organized and responds appropriately to patient affect and non-verbal cues.
- \_\_\_\_\_ **Late Fourth-Year; Later Interpreter.** Skillfully interviews patients and characterizes problems in depth. Consistently demonstrates superior use of questions even on the more complicated patients.
- \_\_\_\_\_ **Not Observed.**

### Question 3 of 13: Physical Examination Skills

- \_\_\_\_\_ **Early Third-Year; Early Reporter.** Performs patient physical examinations - needs to continue to work on appropriate techniques, organization and thoroughness
- \_\_\_\_\_ **Late Third-Year; Late Reporter.** Performs exams that are often thorough with appropriate techniques. Identifies most major abnormalities and normal findings; occasionally misses elements.
- \_\_\_\_\_ **Early Fourth-Year; Early Interpreter.** Consistently performs a complete physical examination. Follows logical sequence and often relates exam directly to history. Rarely misses key elements.
- \_\_\_\_\_ **Late Fourth-Year; Later Interpreter.** Exam is consistently superior. Uncovers subtle and important findings, incorporating advanced techniques where appropriate. Exceptionally organized and thorough even on difficult cases.
- \_\_\_\_\_ **Not Observed.**

### Question 4 of 13: Clinical Documentation Skills

- \_\_\_\_\_ **Early Third-Year; Early Reporter.** Written notes generally contain important patient information. Needs improvement on clarity, organization, completeness or relevance of documented information.
- \_\_\_\_\_ **Late Third-Year; Late Reporter.** Written notes regularly communicate essential material in an organized, standardized and clear way. Some details may not appropriately relate to the chief complaint.
- \_\_\_\_\_ **Early Fourth-Year; Early Interpreter.** Written notes regularly communicate essential material in an organized and standardized format. Notes convey evidence of early clinical decision making and are tailored to the patient case and care setting.
- \_\_\_\_\_ **Late Fourth-Year; Later Interpreter.** Written notes are consistently coherent, concise and professionally competent. Documentation demonstrates synthesis of complete information and conveys thought processes behind clinical decisions.
- \_\_\_\_\_ **Not Observed**

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#### Question 5 of 13: Oral Case Presentation Skills

- \_\_\_\_\_ **Early Third-Year; Early Reporter.** Oral presentations convey patient information, student often reads from written notes. Presentations need improvement in organization and thoroughness.
- \_\_\_\_\_ **Late Third-Year; Late Reporter.** Oral presentations are usually concise and well organized. Student may need to use notes to complete the presentation. Student begins to prioritize information on less complicated cases.
- \_\_\_\_\_ **Early Fourth-Year; Early Interpreter.** Oral presentations are usually concise and well organized. Conveys thought processes behind clinical decisions and tailors presentation to patient setting. Communicates a valid differential diagnosis as part of the presentation.
- \_\_\_\_\_ **Late Fourth-Year; Later Interpreter.** Oral presentations are consistently concise and well organized. Presentations prioritize key information related to the patient case, includes a valid differential diagnosis and commits to a primary assessment.
- \_\_\_\_\_ **Not Observed.**

#### Question 6 of 13: Differential Diagnosis Skills

- \_\_\_\_\_ **Early Third-Year; Early Reporter.** Functions as a "bystander" regarding patient care, identifies and reports information. May have difficulty identifying all problems and prioritizing among problems
- \_\_\_\_\_ **Late Third-Year; Late Reporter.** Reports information in a way that applies basic and clinical science knowledge to the most common medical conditions. Begins to communicate a differential diagnosis for most cases.
- \_\_\_\_\_ **Early Fourth-Year; Early Interpreter.** Demonstrates a working knowledge of pathophysiology and is able to use assessment skills to formulate a valid differential diagnosis. Sometimes does not use all sources of data to best prioritize problems.
- \_\_\_\_\_ **Late Fourth-Year; Later Interpreter.** Demonstrates sound clinical reasoning, integration of patient data, formulation and prioritization of differential diagnoses. Often identifies the most likely diagnosis first.
- \_\_\_\_\_ **Not Observed.**

#### Question 7 of 13: Interprofessional Team Skills

- \_\_\_\_\_ **Early Third-Year; Early Reporter.** Begins to establish patient and staff rapport. May not always interact with other members of the health care team.
- \_\_\_\_\_ **Late Third-Year; Late Reporter.** Listens to input from various members of the healthcare team. Establishes rapport with some patients and staff.
- \_\_\_\_\_ **Early Fourth-Year; Early Interpreter.** Initiates cooperative interactions with most members of the health care team. Establishes rapport with most patients and staff.
- \_\_\_\_\_ **Late Fourth-Year; Later Interpreter.** Initiates cooperative interactions with all members of the healthcare team. Effectively seeks feedback from various team members. Demonstrates strong communication skills and professional demeanor with patients and team members.
- \_\_\_\_\_ **Not Observed.**

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**Question 8 of 13: Problem-Based Learning Skills**

- \_\_\_\_\_ **Early Third-Year; Early Reporter.** Begins to formulate clinical questions. Begins to recognize knowledge gaps and seek guidance to fulfill gaps.
- \_\_\_\_\_ **Late Third-Year; Late Reporter.** Recognizes knowledge gaps and formulates clinical questions with help. Needs some prompting to utilize resources to fulfill gaps. Needs guidance on resources.
- \_\_\_\_\_ **Early Fourth-Year; Early Interpreter.** Seeks to fill knowledge gaps sometimes in advance of verbal communications, formulates clinical questions and finds answers in resources. May need guidance on choosing best resource use, reviewing key clinical guidelines and discerning quality of evidence.
- \_\_\_\_\_ **Late Fourth-Year; Later Interpreter.** Proactively reviews clinical guidelines and incorporates this into written and verbal communications. Considers evidence in clinical reasoning for most cases. Uses evidence based information to guide discussion about clinical cases.
- \_\_\_\_\_ **Not observed.**

**Question 9 of 13: Osteopathic Principles and Practice**

- \_\_\_\_\_ **Early Third-Year; Early Reporter.** Begins to relate osteopathic principles to clinical care. Needs reminders and cues to incorporate structural exams within the patient visit.
- \_\_\_\_\_ **Late Third-Year; Late Reporter.** Performs structural exams that are often thorough with appropriate OMM technique choices. Identifies most major abnormalities and normal findings; occasionally misses elements.
- \_\_\_\_\_ **Early Fourth-Year; Early Interpreter.** Consistently performs a complete osteopathic structural examination. Follows logical sequence and often relates exam directly to history. Applies common OMM techniques to patients with consideration to positioning and comfort.
- \_\_\_\_\_ **Late Fourth-Year; Later Interpreter.** Osteopathic structural exam is consistently superior. Uncovers subtle and important findings, incorporating advanced techniques where appropriate. Exceptionally organized and thorough even on difficult cases.
- \_\_\_\_\_ **Not observed.**

**Question 10 of 13: Self-Learner/Education**

Student-doctor demonstrates a continuing commitment to excellence through study and self-learning. The student doctor seeks out opportunities to enhance his/her medical knowledge throughout the rotation.

**Student-doctor demonstrates a willingness to be intentional, independent, and self-directed in their approach to acquire, retain, and retrieve new knowledge on their own.**

| Unable to Assess | Unsatisfactory |         |         | Satisfactory |         |         | Excellent |         |         |
|------------------|----------------|---------|---------|--------------|---------|---------|-----------|---------|---------|
|                  | 1 _____        | 2 _____ | 3 _____ | 4 _____      | 5 _____ | 6 _____ | 7 _____   | 8 _____ | 9 _____ |
| 0 _____          |                |         |         |              |         |         |           |         |         |

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**Question 11 of 13: Cultural Sensitivity**

Student-doctor demonstrates sensitivity to multiple cultures, ethnicities and religions.

**Student-doctor treats others with respect, does not demean or make others feel inferior; provides equitable care to patients; uses respectful language when discussing patients; is sensitive to cultural needs of patients.**

| Unable to Assess | Unsatisfactory |         |         | Satisfactory |         |         | Excellent |         |         |
|------------------|----------------|---------|---------|--------------|---------|---------|-----------|---------|---------|
|                  | 0 _____        | 1 _____ | 2 _____ | 3 _____      | 4 _____ | 5 _____ | 6 _____   | 7 _____ | 8 _____ |

**Question 12 of 13: Communication Skills**

Student-doctor demonstrates good communication skills, both verbal and non-verbal, demonstrates the ability to communicate with the patient and the members of the medical team.

**Student-doctor communicates clearly; is willing to answer questions and provide explanations; willing to listen to patients and families.**

| Unable to Assess | Unsatisfactory |         |         | Satisfactory |         |         | Excellent |         |         |
|------------------|----------------|---------|---------|--------------|---------|---------|-----------|---------|---------|
|                  | 0 _____        | 1 _____ | 2 _____ | 3 _____      | 4 _____ | 5 _____ | 6 _____   | 7 _____ | 8 _____ |

**Question 13 of 13: Reliability**

Student-doctor demonstrates professionalism by being punctual, properly dressed and respectful of others time and commitment not only toward the preceptor but also to other members of the medical team.

**Student-doctor arrives punctually, fulfills and completes responsibilities; responds promptly when paged or called, assists and fills in for others when needed.**

| Unable to Assess | Unsatisfactory |         |         | Satisfactory |         |         | Excellent |         |         |
|------------------|----------------|---------|---------|--------------|---------|---------|-----------|---------|---------|
|                  | 0 _____        | 1 _____ | 2 _____ | 3 _____      | 4 _____ | 5 _____ | 6 _____   | 7 _____ | 8 _____ |

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**Evaluation:**

The student is graded using a Pass/Fail scale during their OMS-IV year. Preceptors should give this grade based on the overall assessment as guided by the questions above. It would be generally expected that a fourth year student would have a sufficient number of the above answers to be at the level of an "Early Interpreter" or "Satisfactory" for a passing grade.

1. The Student-Doctor has adequately met the reasonable requirements of their medical education level and has received a grade of \_\_\_\_\_ (Pass/Fail).

**Comments:**

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**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_