

Clerk: _____ Evaluator: _____ Date: _____

Day _____ of **10** Placement: _____

Describe how well objectives were achieved by the student:

Medical Expert

- Basic pre-op assessment & physical exam
- Medical knowledge/clinical judgement
- Ability to effectively manage normal airway

Communication/Collaboration

- participates actively and effectively
- basic understanding of anesthesia charting
- accurately conveys relevant information

Professional/Managerial Qualities

- professional interpersonal behaviour w/patients
- arrives daily on-time
- preparation for day's work/case prep
- behaviour consistent with CMA Code of Ethics

Self-Directed Learning

- appreciation of need to continue personal education

Student's Special Strengths

Areas Requiring Attention

Overall evaluation

☐ Meets expectations

☐ Does not meet expectations

Evaluator Signature

Student Signature
