



To be completed by _____

On this form, you will be evaluating _____

For dates: _____ to _____

Anesthesia Residency Training Program In-Training Evaluation

Hospital

- LHSC - UC
- LHSC - SSC
- LHSC - WC
- SJHC
- Other

If "other please specify

This form is to be completed every three months in addition so subspecialty/rotation specific monthly evaluations

Medical Expert: Proficiency in:

	N/A	Unsatisfactory	Below Expectations	Meets Expectations	Exceeds Expectations
Assessment of patients (taking relevant history, performance or appropriate physical examination)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Investigation and management of patients with undifferentiated problems (evidence-based use of diagnostic testing/management strategies)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Management of common areas of anesthesia mangement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performance of procedures (bag and mask, intubation, invasive lines, FOB)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Communicator: Proficiency in:

	N/A	Unsatisfactory	Below Expectations	Meets Expectations	Exceeds Expectations
Obtaining a thorough and relevant history	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Presentation of patient problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication with patients, (or parents where appropriate)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Obtaining informed consent for procedures and treatments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication with members of the health care team*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication with perioperative care team (surgeons, nurses, residents)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Presentation and discussion at teaching and rounds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Collaborator: Proficiency in:

	N/A	Unsatisfactory	Below Expectations	Meets Expectations	Exceeds Expectations
Working effectively within the health care team*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Demonstrate appropriate use of consultative services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recognizing/respecting roles of team members*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Manager: Proficiency in:

	N/A	Unsatisfactory	Below Expectations	Meets Expectations	Exceeds Expectations
Supervision/implementation of patient care decisions*(eg. PACU, ICU staff/RN's) effective delegation as appropriate)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effective and ethical utilization of health care resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Effective time management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Health Advocate: Proficiency in:

	N/A	Unsatisfactory	Below Expectations	Meets Expectations	Exceeds Expectations
Understanding anesthesia role in patient safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Preventive Strategies/patient harm reduction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Advocating for patients and/or profession	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Scholar: Proficiency in:

	N/A	Unsatisfactory	Below Expectations	Meets Expectations	Exceeds Expectations
Personal learning - critical review of literature	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Knowledge of relevant basic science (biochemistry, pathology, physiology/pathophysiology, pharmacology, equipment)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teaching of other health care team members* (RN's, RT's, medical students)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

Professional: Proficiency in:

	N/A	Unsatisfactory	Below Expectations	Meets Expectations	Exceeds Expectations
Personal and interpersonal professional behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recognizing and dealing with ethical issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments

* Input into Resident evaluation from appropriate team members should be obtained.

The following will be displayed on forms where feedback is enabled...

(for the evaluator to answer...)

* Did you have an opportunity to meet with this trainee to discuss their performance?
 Yes
 No

(for the evaluatee to answer...)

* Did you have an opportunity to discuss your performance with your preceptor/supervisor?
 Yes
 No