JEFFERSON SCHOOL OF NURSING

Midterm/Final Evaluation

PRECEPTOR EVALUATION OF NURSE PRACTIONER STUDENT

Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preceptor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

1. Basic medical knowledge

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Inadequate knowledge base to care for patients | Knowledge base has deficits that require action | Knowledge base is adequate to appropriately care for patients | Knows more than expected for student at this level of training |  |

1. Elicits focused histories

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Misses essential information; is disorganized or inconsiderate of patient’s needs | Frequently asks too much or too little history. Identifies most problems but is not complete | Gets a complete and accurate history; able to identify scope of history | Skillfully interviews, characterizes problems beyond expectations |  |

1. Performs focused physical exam

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Uses faulty technique, performs inappropriate exam, misses major findings | Frequently misses findings, and performs inappropriate or faulty exam | Performs exams of appropriate scope and accuracy within a reasonable time | Exam thorough, accurate, and timely; uncovers important findings |  |

1. Diagnostic tests and office procedures

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Doesn’t understand indication for procedures or lab tests | Knows indications of some procedures and tests | Understands indications for tests and procedures | Uses test skillfully, recommends procedures appropriately |  |

1. Oral Presentation to Preceptor

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Not able to organize, summarize or explain clinical data | Has essential data, but not well organized or accurate | Reasonably accurate, relatively well organized | Accurate, organized, succinct, comprehensive; good grasp of clinical problem |  |

1. Written Notes

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Not able to organize, summarize or explain data | Has essential data, but not well organized or accurate | Reasonably accurate, relatively well organized | Accurate, organized, succinct, comprehensive |  |

1. Differential diagnosis

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Fails to identify major problems. Clinical reasoning markedly deficient | Differential often incomplete or incorrect or illogical  | Assesses most problems with a generally well reasoned differential | DDX shows understanding of pathophysiology and psychological issues |  |

1. Management plans and follow-up

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Treatment plans inadequate. Fails to recognize when urgent treatment indicated | Plan often neglects important components, including education and follow-up | Plans are appropriate, complete and timely | Plans always better than average, including education, follow-up and prevention |  |

1. Dependability, motivation, responsibility, initiative

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Unreliable, shirks responsibility, uninterested | Unreliable in completing responsibilities, does not use standards/protocols | Requires guidance in most clinical situations. Demonstrates a practice based on standards | Seeks appropriate consultation, works independently and collaboratively, practice based on standards |  |

1. Rapport and relations with patients

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Dramatic absence of patient provider communication skills | Establishes rapport with patients, but is often inept or inefficient | Good rapport, supportive; shares decision making with client | Easily earns trust and respect of patients, good listening skills; engenders confidence |  |

1. Rapport and relationships with staff/preceptor

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Disrespectful and insensitive | Communication unclear, incomplete or disorganized | Communicates well, and in a professional manner | Very strong communication skills and professional demeanor |  |

1. Accepts instructions and feedback

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Marginal | Good | Very Good | N/A |
| Actively rebuffs or avoids change. Doesn’t recognize own limitations | “Chip on shoulder;” slow to change | Open to feedback and constructive criticism. Willing and able to change | Quick to pick up new skills and attitudes; very adaptable, seeks feedback |  |

COMMENTS:

STRENGTHS (If you felt this student outstanding, please provide specific examples):

AREAS NEEDING IMPROVEMENT OR WORK (please include at least one item):

Reviewed with student \_\_\_\_\_\_ Not reviewed with student \_\_\_\_\_\_

Signatures: Preceptor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Adapted from UNC Charlotte/North Carolina Consolidated Family Medicine Clinical Performance Evaluation