

The University

ANNUAL Graduate Medical Education FACULTY ASSESSMENT

Calendar Year: 2009

Name: _____ Degree: _____

Department: _____ Neurology _____

GME OVERALL ASSESSMENT

Domain / question	Not Applicable	Unsatisfactory	Satisfactory	Exemplary
Clinical teaching ability				
Effectiveness at the bedside				
Effectiveness as a lecturer				
Commitment to Educational Program				
Demonstration of concern for educational experience				
Demonstration of concern for the residency program				
Clinical Knowledge				
Adequate for their role?				
Acknowledgement of their limitations and attempt to broaden their knowledge?				
Knowledge of the current literature in general neurology?				
Professionalism				
Starts rounds on time				
Finishes rounds on time				
Availability for patient questions				
Promptly answers pager				
Completes their hospital notes in a timely fashion				
Treats resident in a professional manner				
Treats other members of the health care team in a professional manner				
Scholarly activities				
Knowledge of the literature in their area of specialization				
Presentation of original research at Grand Rounds				
Faculty development (Chair)				
Resident evaluations (please see attached, assessment made by Chair)				

Program or Associate Program Directors Comments:

Chairperson's Comments:

Rating with respect to departmental/school expectations:

_____ Satisfactory _____ Needs Improvement _____ Unsatisfactory

Signatures

DATE _____ FACULTY MEMBER _____

DATE _____ CHAIRPERSON _____

DATE _____ Program Director _____