

JOHNS HOPKINS
U N I V E R S I T Y

School of Medicine

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Office of the Dean
Registrar

August 2, 2011

Memo to: Classes of 2012, 2013, 2014, 2015

From: Mary E. Foy, Associate Dean/Registrar

Re: Clinical Elective Evaluations

The Registrar's Office uses E-Value as an on-line tool to facilitate the completion of elective evaluations for all medical students. Course directors receive an email to complete an electronic evaluation for your elective experience. You will also receive an evaluation to complete to evaluate your experience (clinical electives only). Elective grades and comments posted in E*Value by the Course Director will not be available to the student **UNLESS** an elective course evaluation has been completed by the student.

For your convenience a sample evaluation is printed on the next page. These evaluations are anonymous and the course director will not have access to your evaluation until after submission of final grades. A minimum of three evaluations, per course, are required before a course director can review any student evaluations.

Dawn Timmons is available to answer any questions you might have about this evaluation tool, she can be reached at 410-614-4886 or timmons@jhmi.edu .

MEF: tdt

Student Evaluation of Clinical Elective

Department:

Clinical Elective:

Quarter/Half:

Preceptor:

Indicate the degree to which you agree or disagree with the following statements regarding this elective:

Scale is:

- 0 Not applicable to this elective
- 1 Strongly Disagree
- 2 Disagree Somewhat
- 3 Neutral
- 4 Agree Somewhat
- 5 Strongly Agree

1. I received clear learning objectives for the elective.
2. My performance was assessed against the learning objectives.
3. I had the opportunity to follow a variety of different patients during this elective.
4. My attending faculty members were adequately involved in teaching during the elective.
5. A faculty member personally observed me performing components of the history and/or physical examination during this elective.
6. I received helpful feedback on my performance during this elective.
7. My time on the wards or in the ambulatory setting was productive.
8. There was an appropriate balance between responsibility and supervision.
9. There were opportunities to perform procedures with needed supervision.
10. Faculty and residents modeled effective team functioning during this elective.
11. Faculty and residents consistently modeled professionalism during this elective.
12. Residents and fellows provided effective teaching during the elective.
13. My learning objectives for this rotation were met.

14. Describe your activities during this elective:

15. What were the strengths of this clinical elective? (Open)

16. What should be changed? (Open)

17. Overall, how would you rate this clerkship?

- 1 Poor
- 2 Fair
- 3 Good
- 4 Very good
- 5 Excellent