

**MARSHFIELD CLINIC DERMATOLOGY RESIDENCY PROGRAM  
RESIDENT EVALUATION**

Resident \_\_\_\_\_ Date of Evaluation \_\_\_\_\_

Derm Training Year: First \_\_\_\_\_ Second \_\_\_\_\_ Third \_\_\_\_\_

Quarter (circle one)  
                   July–September      October–December      January–March      April–June

Evaluator \_\_\_\_\_

Contact: Much ( )      Moderate ( )      Minimal ( )

Please circle the extent to which you agree with each of the items below using the rating scale.

1 = Strongly agree      2 = Agree      3 = Somewhat agree      4 = Somewhat disagree  
 5 = Disagree      6 = Strongly disagree      N/A = Not applicable

**I. PATIENT CARE**

Residents must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

**A. Data gathering**

- |  |   |   |   |   |   |   |     |
|--|---|---|---|---|---|---|-----|
| 1. Resident documents history appropriately.                                     | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| 2. Resident performs and documents physical exam appropriately.                  | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| 3. Resident appropriately describes morphology, configuration, and distribution. | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| 4. Resident is clinically efficient for year in training.                        | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| 5. Resident effectively synthesizes data for year in training.                   | 1 | 2 | 3 | 4 | 5 | 6 | N/A |

**B. Diagnostic Skills**

- |  |   |   |   |   |   |   |     |
|--|---|---|---|---|---|---|-----|
| 1. Resident selects appropriate ancillary studies.   | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| 2. Resident effectively uses office-based skills including KOH, Tzanck, scabies prep, and Wood's lamp. | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| 3. Resident appropriately selects biopsy site and technique.   | 1 | 2 | 3 | 4 | 5 | 6 | N/A |

**C. Patient Management**

- |   |   |   |   |   |   |   |     |
|---|---|---|---|---|---|---|-----|
| 1. Resident problem solves appropriately for year in training.                            | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| 2. Resident selects appropriate therapies.  | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| 3. Procedural Dermatology   |   |   |   |   |   |   |     |
| Resident performs well in each of the following:  |   |   |   |   |   |   |     |
| a. Counseling patients on appropriate risks, benefits, and alternatives to each procedure | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| b. Cryosurgery  | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| c. Electrosurgery   | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| d. Excision surgery   |   |   |   |   |   |   |     |
| i. Simple closures  | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| ii. Layered, complex closures   | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| e. Nail surgery   | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| f. Skin flaps and grafts  | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| g. Laser surgery  | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| h. Ultraviolet light therapy  | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| i. Patch-testing  | 1 | 2 | 3 | 4 | 5 | 6 | N/A |
| j. Wound care   | 1 | 2 | 3 | 4 | 5 | 6 | N/A |

**Comments on Patient Care:**

Positives:

Ways to improve:

## II. MEDICAL KNOWLEDGE

Residents must demonstrate knowledge about established and evolving biomedical, clinical, and cognate (e.g. epidemiological and social behavior) sciences and the application of this knowledge to patient care.

1. For year in training, the resident displays appropriate core knowledge in the following areas:
  - a. Basic science. 1 2 3 4 5 6 N/A
  - b. Clinical dermatology. 1 2 3 4 5 6 N/A
  - c. Medical dermatological therapy. 1 2 3 4 5 6 N/A
  - d. Surgical dermatological therapy. 1 2 3 4 5 6 N/A
  - e. Dermatopathology. 1 2 3 4 5 6 N/A
2. Acquisition and Application of Medical Knowledge
  - a. Resident participates in conferences. 1 2 3 4 5 6 N/A
  - b. Resident is an active, self-directed learner. 1 2 3 4 5 6 N/A
  - c. Resident retains information. 1 2 3 4 5 6 N/A
  - d. Resident teaches others. 1 2 3 4 5 6 N/A

### Comments on Medical Knowledge:

Positives:

Ways to improve:

## III. PRACTICE-BASED LEARNING AND IMPROVEMENT

Residents must be able to investigate and evaluate their patient care practices, appraise and assimilate scientific evidence, and improve their patient care practices.

1. Resident is able to efficiently and effectively find and assess best-evidence for clinical decision making. 1 2 3 4 5 6 N/A
2. Resident comes prepared and contributes to Journal Club and discussion sessions. 1 2 3 4 5 6 N/A
3. Resident recognizes errors and works hard to not repeat them. 1 2 3 4 5 6 N/A
4. Resident is insightful to ways to improve clinical practice efficiency and training. 1 2 3 4 5 6 N/A
5. Resident applies newly acquired dermatology knowledge into patient care. 1 2 3 4 5 6 N/A
6. Resident considers precision, accuracy, expense, and safety when selecting and interpreting diagnostic tests. 1 2 3 4 5 6 N/A
7. Resident seeks information assessing outcome of dermatology disease. 1 2 3 4 5 6 N/A
8. Resident seeks information assessing safety, efficacy, adverse event profile, and cost of therapy or prevention. 1 2 3 4 5 6 N/A
9. Resident exhibits awareness of patient-specific cost-effective decision making. 1 2 3 4 5 6 N/A
10. Resident maintains appropriate records documenting practice activities (such as patient logs) and shows initiative in improving weak areas. 1 2 3 4 5 6 N/A

### Comments on Practice-Based Learning and Improvement:

Positives:

Ways to improve:

## IV. INTERPERSONAL AND COMMUNICATION SKILLS

Residents must be able to demonstrate interpersonal and communication skills that result in effective information exchange and teaming with patients, their patients' families, and professional associates.

1. Resident is compassionate and courteous. 1 2 3 4 5 6 N/A
2. Resident counsels and educates patients and their caregivers. 1 2 3 4 5 6 N/A
3. Resident explains to patients their diseases and therapies. 1 2 3 4 5 6 N/A
4. Resident communicates important information in a timely fashion. 1 2 3 4 5 6 N/A
5. Resident gives quality verbal presentations. 1 2 3 4 5 6 N/A
6. Resident functions as a dermatology team member. 1 2 3 4 5 6 N/A
7. Resident shows confidence and ability to be a team leader. 1 2 3 4 5 6 N/A
8. Resident displays positive attitude in work environment. 1 2 3 4 5 6 N/A
9. Resident offers constructive feedback of peers and environment. 1 2 3 4 5 6 N/A
10. Resident responds well to criticism. 1 2 3 4 5 6 N/A

**Comments on Interpersonal and Communication Skills:**

Positives:

Ways to improve:

**V. PROFESSIONALISM**

Residents must be able to demonstrate professionalism as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles, and sensitivity to a diverse patient population.

1. Resident displays ethical conduct.	1	2	3	4	5	6	N/A
2. Resident creates healthy relationships with other residents.	1	2	3	4	5	6	N/A
3. Resident displays emotional maturity.	1	2	3	4	5	6	N/A
4. Resident is dependable.	1	2	3	4	5	6	N/A
5. Resident accepts responsibility.	1	2	3	4	5	6	N/A
6. Resident takes initiative.	1	2	3	4	5	6	N/A
7. Resident is readily available and punctual.	1	2	3	4	5	6	N/A
8. Resident's appearance is professional.	1	2	3	4	5	6	N/A
9. Resident is sensitive to culture, age, gender, and disability issues.	1	2	3	4	5	6	N/A
10. Resident is respectful towards attendings.	1	2	3	4	5	6	N/A
11. Resident is respectful towards non-attending staff.	1	2	3	4	5	6	N/A

**Comments on Professionalism:**

Positives:

Ways to improve:

**VI. SYSTEM-BASED PRACTICE**

Residents must demonstrate an awareness and responsiveness to the larger context and system of health care, and the ability to effectively call on system resources to provide care that is of optimal value.

1. Resident practices cost-effective care without compromising quality of care.	1	2	3	4	5	6	N/A
2. Resident knows how different practice systems function to deliver care.	1	2	3	4	5	6	N/A
3. Resident utilizes non-dermatologist staff effectively as part of the health care team.	1	2	3	4	5	6	N/A
4. Resident obtains appropriate consultation.	1	2	3	4	5	6	N/A
5. Resident provides appropriate consultation.	1	2	3	4	5	6	N/A
6. Resident interacts well with non-departmental healthcare providers.	1	2	3	4	5	6	N/A
7. Resident attends relevant non-departmental learning opportunities.	1	2	3	4	5	6	N/A

**Comments on System-Based Practice:**

Positives:

Ways to improve:

**MAJOR STRENGTHS:**

**MAJOR SUGGESTIONS FOR IMPROVEMENTS:**

**THREE GOALS FOR RESIDENT IN THE NEXT SIX MONTHS:**

1)

2)

3)

**OVERALL EVALUATION FOR YEAR IN TRAINING**

- ( ) 1 = Excellent
- ( ) 2 = Above Average
- ( ) 3 = Average
- ( ) 4 = Below Average
- ( ) 5 = Poor

**DOCUMENTATION**

a. The above is my completed evaluation

Yes \_\_\_\_\_ No \_\_\_\_\_

b. I have personally communicated the above with the resident being evaluated.

Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
**EVALUATOR'S NAME**

\_\_\_\_\_  
**EVALUATOR'S SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**RESIDENT'S SIGNATURE**

\_\_\_\_\_  
**DATE**