

QUALITY REPORT ON PELVIC TEACHING ASSISTANT

Teaching Assistant to Complete:

Name: _____

Date: _____

Clinical Instructor to Complete:

Clinical/Users Name: _____

Program: _____

1) Please rate the quality of this Teaching Assistant:	Needs to be retrained	Needs to be reviewed	Changes Needed	Good	Excellent
a. Professional manner shown	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. Interpersonal qualities	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c. Clinical signs shown	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d. Knowledge of physical exam	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
e. Feedback given	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
f. Arrived on time and prepared	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

If you give this TA a three or below, please identify the specific challenge(s) that should be reviewed:

Comments:

2) Please rate the quality of the Session:	Not at all	Somewhat	Changes Needed	Good	Excellent
a. Did the session meet your learning and educational objectives?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. Was this a worthwhile experience/ Do you feel the educational value is high?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

Do you think the case objectively evaluates the following skills?	Not at all	Somewhat	Changes Needed	Good	Excellent
a. Pelvic Exam	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. Breast Exam	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

If you have rated the case as a three or below, please provide comments. How do you feel the case could be improved?

Comments:
