



# KASTURBA MEDICAL COLLEGE

MANGALORE

(A constituent unit of MAHE, Manipal)

## CLINICAL ELECTIVE PERFORMANCE EVALUATION FORM

<u>STUDENT INFORMATION</u>				
Name:				
Program name:				
<u>ELECTIVE INFORMATION</u>				
Elective/Course name:				
In-person/Virtual:				
Name of the host medical school:				
Elective/Course Director (Name and signature):				
Start date:				
Completion date:				
<u>STUDENT EVALUATION</u>				
<i>Please check the option that is available:</i>				
<i>Exceeds Course requirements:</i>	<i>3</i>			
<i>Meets Course requirements:</i>	<i>2</i>			
<i>Needs remedial measures:</i>	<i>1</i>			
<i>Not evaluated:</i>	<i>0</i>			
	<b>3</b>	<b>2</b>	<b>1</b>	<b>0</b>
Knows relevant facts				
Understands the concept				
Develops evidence-based diagnostic and therapeutic plans				
Develops plans for patient's continued care and follow-up				
Can perform select procedures in controlled settings with supervision				
Uses resources (library, lab)				
Verbal communication skills				
Written communication skills				
Related and works well with others				
Accepts responsibility				
Accepts and acts upon feedback appropriately				
Treats all patients with respect and compassion; maintain patient confidentiality				
Is motivated and takes initiative				
Comments:				



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Overall Grade: Please tick one	Excellent	Pass	Fail	Insufficient information
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**Note:**

**MEDICAL STUDENT PERFORMANCE EVALUATION (MSPE) NOTES:**

We strongly encourage recording any observations that characterize the assets and liabilities of this student in relation to the elective. These comments will be included in the MSPE if the completed assessment is received by mid-September of the year in which the student will graduate.

Please return the completed evaluation form to  
smc.kmcmlr@manipal.edu  
Student Mobility Center,  
Administrative Complex, First Floor,  
Kasturba Medical College, Mangalore,  
Manipal Academy of Higher Education

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