

## Assessment Formular: MCP Blocks 1, 2,4

<b>Date:</b>	<b>Block Number:</b>
<b>OMT Student's name:</b>	<b>Mentors name:</b>
<b>Locality:</b>	<b>Clinical setting:</b>

Please refer to the checklist for marking clinical mentoring and the marking criteria in the curriculum document of the OMT-DVMT® educational programme before completing this form.

This form may be filled by hand or in a word document. It must be submitted by the OMT Student as a paper-based, signed copy to the Chairperson of the OMT-DVMT® Educational Committee immediately on completion of the mentoring Block. The mentor may be confidentially asked to expand on his / her appraisal. Use the comments boxes to identify areas of particularly good performance and areas which need improvement. Please support your statements with examples and give suggestions on how improvement may be attained. If you cannot give an opinion on a certain aspect or behaviour due to lack of knowledge or inadequate opportunity to observe this during mentoring please note this too. Your scoring and comments should reflect typical behaviour over the whole Mentoring Block. They should not refer to single incidents or events that are not typical for the learner unless they are of undue concern to you. Block 3 should not be graded

Grades (see assessment criteria):

Very good: 1,0 - 1,3

Good: 1,7 - 2,0 - 2,3

Satisfactory: 2,7 - 3,0 - 3,3

Adequate: 3,7

Inadequate: 4,0 - 5,0

### Assessment Formular Block 1, 2 und 4

Subject	Commentary and Notes	Grade (Block 1+2)
<b>Procedures            Rx 1            C/O</b>		
<b>Procedures            Rx 1            Plan P/E</b>		
<b>Procedures            Rx 1            P/E</b>		
<b>Planning and            implement-            ing follow up            treatments</b>		
<b>Clinical            Reasoning</b>		

<b>Subject</b>	<b>Commentary and Notes</b>	<b>Grade (Block 1+2)</b>
----------------	-----------------------------	----------------------------------

<b>Communica- tion</b>		
----------------------------	--	--

<b>Professiona- lism</b>		
------------------------------	--	--

<b>Commendations. Areas of particular merit</b>	<b>Areas which need improvement</b>

<b>Recommendations and action plan</b>

<b>Mentor's signature</b>	<b>Candidate's signature</b>

