

## MCP Assessment Formular: Selbst Assessment Mentored Clinical Practice

Date:	Block Number:
OMT Student's name:	Mentors name:
Locality:	Clinical setting:

Dear OMT Student

It is often useful to assess your own performance and compare it to your mentor's assessment. Ideally you should do this before the feedback session with your mentor. This form is orientated to the one that your mentor uses during Blocks 1, 2 and 3. This form must not be submitted to the OMT-DVMT® Educational Committee. It's purely for your own use. You don't need to keep it in your Log book if you don't want to and you don't have to show it to your mentor. 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. These will give you an idea of what the clinical mentor is looking for. Use the comments boxes to identify areas where you think your performance was particularly good and areas which need improvement. Your scoring and comments should reflect your behaviour over the whole Mentoring Block. They should not refer to single incidents or events that are not typical for you unless they are of undue concern to you.

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

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

Subject	Commentary and Notes	Grade (Block 1+2)
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Communica tion		
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Professionalis m		
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Commendations. Areas of particular merit	Areas which need improvement

Recommendations and action plan

	Candidate's signature