

EVALUATION OF CLINICAL TEACHING ACTIVITIES

Name of faculty/fellow: _____

Service: Ambulatory In Patient Ward-SMH Dementia/Clinic GAP clinic Other _____

The Division of Geriatrics is greatly interested in improving the teaching of medical students. For the instructor named above, please circle the number that indicates the degree to which you believe each item is descriptive of him or her.

	Strongly Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree
1. I enjoyed this clinical experience.	1	2	3	4	5
2. The instructor is available to and friendly towards student(s).	1	2	3	4	5
3. The instructor enjoys teaching and is enthusiastic about the subject.	1	2	3	4	5
4. The instructor is a desirable role model.	1	2	3	4	5
5. The instructor possesses excellent bedside skills and clinical acumen.	1	2	3	4	5

COMMENTS (including suggestions for improvement): _____

PLEASE RETURN TO: Robin Catino
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