

Department of Anaesthesia Papworth Hospital	Specialist Registrar Training Assessment
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Trainee		Interview Date
Consultant		/ /

Please comment on the trainee's progress relative to that expected at this point in training. Firstly, please indicate on what degree of personal knowledge your judgements are made.

How often do/did you see the trainee? [Tick one box] <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Regularly <input type="checkbox"/> Irregularly
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Area of competence	Unable to judge	Very poor	Inadequate: much improvement needed	Adequate but improvement needed	Good	Outstanding
Clinical judgement						
Technical skills						
Theoretical knowledge						
Performance under stress						
Approach to patients						
Sense of responsibility						
Ability to cooperate with others						
Powers of written & oral expression						
Enthusiasm/aptitude for teaching						
Enthusiasm/aptitude for research						
Contribution to department						

Please indicate below if there are any areas of competence which have impressed you, either as particular strengths of this trainee or as areas to which more work is particularly necessary. Please be specific.

Strengths:	Areas for improvement:

Would you place this trainee in the top 10%? <input type="checkbox"/> Yes <input type="checkbox"/> No
Would you support an application for promotion? <input type="checkbox"/> Definitely <input type="checkbox"/> With reservation <input type="checkbox"/> No
Please give reasons:

Trainee's short-term objectives (including examinations)
Trainee's long-term objectives
Changes to training programme
Other advice given
Study leave (take, applied for, declined)
Trainee's assessment of post

C.V. reviewed? No Yes → Comments on quality:

The comments on this form have been discussed with the trainee.

Signed:		Date
	Trainee	/ /
	Educational supervisor	/ /