



**DEPARTMENT OF MEDICAL & RESEARCH TECHNOLOGY  
UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE**

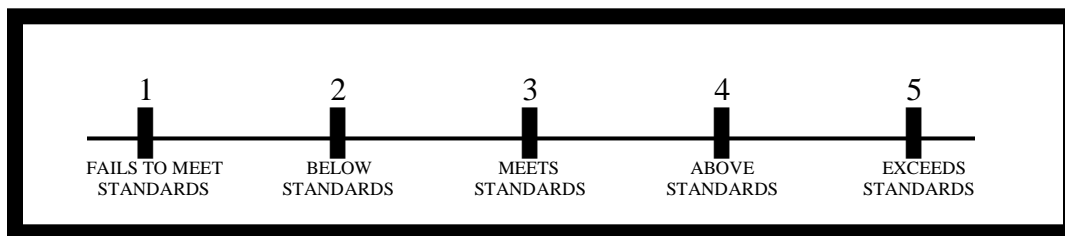
**STUDENT FINAL CLINICAL EVALUATION**

Student: \_\_\_\_\_ Evaluation Date: \_\_\_\_\_

Rotation Number: \_\_\_\_\_ Affiliate: \_\_\_\_\_

Discipline: \_\_\_\_\_

The primary objective of this assessment is to ensure that each student enters the clinical laboratory science profession with an understanding of its behavioral and skill standards by demonstrating a willingness to adhere to those standards. Circle the number, which corresponds to the student's performance in each category using the following rating scale as a guide.



1. ***Fails to Meet Standards*** – Performance is below entry-level expectations. Student does not meet minimum standards. Performance is unacceptable.
2. ***Below Standards*** – Performance is marginally below entry-level expectations. Student needs to improve to meet minimum standards.
3. ***Meets Standards*** – Meets entry-level expectations and minimum standards.
4. ***Above Standards*** – Consistently meets entry-level expectations and minimum standards. Excels in certain areas. Student has demonstrated a high level of initiative and independent functioning.
5. ***Exceeds Standards*** – Clearly outstanding. Consistently exceeds entry-level expectations and minimum standards. Student has demonstrated a high level of initiative and independent functioning.

## STANDARDS OF CLINICAL PRACTICE

### • KNOWLEDGE

- ❖ Demonstrates understanding of basic theoretical concepts.

1	2	3	4	5
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- ❖ Demonstrates knowledge of general quality assurance principles and practices.

1	2	3	4	5
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- ❖ Correlates pathological significance of test results with laboratory data.

1	2	3	4	5
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- ❖ Recognizes patient abnormal results and takes appropriate action.

1	2	3	4	5
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- ❖ Identifies problems, errors, or malfunctions appropriately at an entry level.

1	2	3	4	5
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### • TECHNIQUE

- ❖ Applies theoretical principles to current tasks.

1	2	3	4	5
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- ❖ Completes assigned tasks within an acceptable time frame.

1	2	3	4	5
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- ❖ Accomplishes tasks with minimal supervision.

1	2	3	4	5
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- ❖ Reports accurately and efficiently.

1	2	3	4	5
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- ❖ Demonstrates appropriate entry-level troubleshooting skills.

1	2	3	4	5
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## PROFESSIONAL STANDARDS

### • INITIATIVE AND INTEREST

- ❖ Attentive to instructions; listens well and asks pertinent questions.

1 2 3 4 5

- ❖ Actively participates in performing assigned tasks.

1 2 3 4 5

- ❖ Prepares adequately for the days laboratory experience.

1 2 3 4 5

- ❖ Functions as a self-starter in appropriate situations.

1 2 3 4 5

### • RESPONSIBILITY

- ❖ Accountable for work assigned including willingness to take extra time to complete a task when necessary and seeking help when appropriate.

1 2 3 4 5

- ❖ Acknowledges errors and takes appropriate action such as notifying the teaching technologist.

1 2 3 4 5

### • INTERPERSONAL/PROFESSIONAL SKILLS

- ❖ Communicates effectively and professionally.

1 2 3 4 5

- ❖ Promotes a cooperative working environment with other professionals.

1 2 3 4 5

• **ADAPTABILITY**

- ❖ Accepts constructive criticism and modifies behavior accordingly.

1	2	3	4	5
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- ❖ Flexible when schedule of daily learning activities is modified.

1	2	3	4	5
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• **ADHERENCE TO POLICIES**

- ❖ Adheres to institutional policies.

N/A    No    Yes

- ❖ Adheres to established scheduling policies of the institution.

N/A    No    Yes

- ❖ Complies with institution’s laboratory safety policies and procedures.

N/A    No    Yes

- ❖ Maintains patient and institutional confidentiality.

N/A    No    Yes

- ❖ Appearance is professional and/or follows dress code.

N/A    No    Yes

- ❖ Adheres to UMB affiliate policies on the use of IT resources (computers, Internet, etc.)

N/A    No    Yes

**OVERALL SUMMARY**

Please rank student’s overall performance:

1	2	3	4	5
FAILS TO MEET STANDARDS	BELOW STANDARDS	MEETS STANDARDS	ABOVE STANDARDS	EXCEEDS STANDARDS

**COMMENTS:**

I recommend that the student receive a final evaluation of:

\_\_\_\_ Passing with Excellence

\_\_\_\_ Passing

\_\_\_\_ Failing

Days Absent \_\_\_\_\_ Days Tardy \_\_\_\_\_ Days Left early \_\_\_\_\_ Time Made-up \_\_\_\_\_

Evaluated by: \_\_\_\_\_  
Affiliate Signature Title Date

\_\_\_\_\_  
Affiliate Signature Title Date

- I have reviewed this evaluation and agree with its content:

\_\_\_\_\_  
Student Signature Date

- Student has returned affiliate's badge (if applicable)  Yes  No  NA

\_\_\_\_\_  
Affiliate Signature Title Date

**STUDENT COMMENTS:**

Final Evaluation By DMRT:

\_\_\_\_ Passing with Excellence

\_\_\_\_ Passing

\_\_\_\_ Failing

\_\_\_\_\_  
Program Director Date