

PATIENT PERCEPTION SCALE

Student:

SP ID:

Case Name:

Date:

Record your perceptions of the student's behavior by evaluating the following items. Your written observations and/or suggestions will be provided to the student.

ANY GRADE EXCEPT "MEETS EXPECTATIONS" REQUIRES A WRITTEN COMMENT AT THE END

ITEMS 1-9 ASSESS INTERPERSONAL AND COMMUNICATION SKILLS:

Assess the Following		Does Not Meet Expectations		Meets Expectations, but with Concerns	Meets Expectations	Exceeds Expectations
1	Greeting		Aloof, rude, cold, crabby, not friendly OR overly friendly		Warm, friendly, put you at ease	
2	How he/she treated you		Condescending, patronizing, "talked down" to you, or treated you like a child		Treated you on the same level	Immediately connected with me; established complete trust and confidence within the first few minutes of the encounter
3	3 Letting you tell your story		Interrupted you frequently		Let me tell my story with only a few interruptions	Listened carefully, used multiple opened-ended questions, redirected you in a kind and courteous way
4	Showing interest in you as a person		Acted bored, preoccupied, or ignored what you had to say; or distracted by note-taking, or showed too much interest in you as a person vs. concern for reason for visit		Did not act bored; paid attention to what you said	
5	Asking and answering questions		Made no effort to encourage questions; or did not ask or answer questions clearly; or seemed to be lecturing you		Answered most questions clearly; never lectured, defers questions he/she can't answer	Encouraged questions; all answers were thorough and complete; anticipates questions and concerns that the patient may not have thought of

Ass	Assess the Following		Does Not Meet Expectations	Meets Expectations, but with Concerns	Meets Expectations	Exceeds Expectations
6	Using words you understand		Used medical jargon consistently throughout encounter without attempting to explain		Consistently used understandable words	
7	Controlling the flow of the interview		Over-controlling or let patient control interview; or no summarization; or disorganized		Moved smoothly from one component of the interview to another; summarized key points;	Flawless, seamless flow through the entire encounter
8	Patient education: delivering diagnostic and instructional statements		Delivered instructions in a lecture format; or used medical jargon; did not check for my understanding		Consistently used understandable language; checked for my understanding; involved you in the process	Student was so knowledgeable with the material; negotiated goals with me; you left the encounter feeling empowered to manage your health
9	Closing the encounter		Abrupt closure; or never able to bring encounter to a close; left me hanging; did not finish encounter		Brought encounter to a natural, well-defined close	Brought encounter to a natural, well- defined close AND before leaving he/she checked if I had any other questions or if there was anything they missed, and told me what the next steps would be

ITEMS 10-16 ASSESS PHYSICAL EXAM SKILLS

10	Transferring from the history to the exam	Abrupt; did not explain what was about to happen; forgot hand hygiene	Smooth transfer; explained what was to happen next
11	Giving clear instructions and advance warning on what was coming next and what you were supposed to do during the exam	Frequently did not tell me what to do or what was next; abruptly touched me without warning	Consistently gave clear instructions, explained what was happening and what you needed to do or what to expect next
12	Avoiding awkward maneuvers and positions, and being aware of your comfort	Disorganized; or too many position changes causing unnecessary discomfort	 Organized and concerned about your comfort; minimal number of positional changes

Assess the Following		Does Not Meet Expectations	Meets Expectations	Meets Expectations, but with Concerns	Exceeds Expectations
13	Draping you	Made no effort t guard your mode left you uncover unnecessarily	esty; or	Demonstrated concern for your modesty; draped appropriately throughout exam	
14	Performing the exam without causing undue pain (i.e., during insertion of ear speculum or insertion of speculum for nasal exam, or when testing the <i>Babinski</i> reflex)	Brusque, uncarin causing pain or discomfort witho warning		Exhibited care not to cause undue discomfort, or forewarned when discomfort could be expected	
15	Appropriately pacing the exam	Rushed or perfore exam too slowly did not finish ex	; or	Appropriately paced exam; completed comfortably in time allowed	
16	Demonstrating confidence in the exam and its individual techniques	Struggled, appeare uncomfortable, or difficulty with man the individual tech	had Difference of the second s	Performed exam steps smoothly; seldom struggled with individual techniques	Inspired confidence by performing ALL exam steps smoothly

ITEMS 17-18 ASSESS PROFESSIONALISM

17	Accepting Feedback	Had trouble accepting feedback, argumentative or arrogant, discredited value of the SP's input	Was open to accepting feedback; genuinely interested in how they could improve	
18	Maintaining the role of a medical professional	Overall during encounter, gave such a negative professional impression that you would not want to return to this person as a patient	Acted professionally throughout encounter, you'd probably go back to this person as your physician	Overall impression was so positive that you would want to have this person as your doctor AND you'd refer your friends to this doctor

Please provide comments for any evaluation besides "meets expectations." Also provide any other suggestions for improving interviewing technique and professional behavior.

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