

Radiology Presentation
Evaluation Form

	Needs Remediation	Below Expectations	Meets Expectations	Above Expectations
Background Information	<input type="checkbox"/> Does not provide any background information regarding the patient	<input type="checkbox"/> Provides insufficient background information to understand why selected imaging was ordered	<input type="checkbox"/> Provides sufficient information regarding patient history and presentation, differential diagnosis, and how the selected imaging will inform a clinical question or differential diagnosis	<u>AND</u> <input type="checkbox"/> Teaches high yield background information about the patient's condition, treatment, or other aspect of healthcare
Radiology Review	<input type="checkbox"/> Does not provide radiologic images relevant to the patient presentation or diagnosis	<input type="checkbox"/> Does not provide sufficient radiologic images to understand the pertinent findings	<input type="checkbox"/> Provides sufficient number of radiologic images and reviews findings pertinent to the patient	<u>AND</u> <input type="checkbox"/> Reviews other interesting incidental findings
Application to Care	<input type="checkbox"/> Does not discuss how the radiologic findings were or were not used for diagnosis or treatment of patient	<input type="checkbox"/> Does not sufficiently review how the radiologic findings did or did not help in diagnosis or treatment of the patient	<input type="checkbox"/> Discusses how the radiologic findings helped or did not help in diagnosis or treatment of the patient	<u>AND</u> <input type="checkbox"/> Reviews why the particular radiologic study was ordered and reviews what other studies may have been helpful
Interprofessional collaboration	<input type="checkbox"/> Does not meet with a radiologist or review any online radiologic resources	<input type="checkbox"/> Reviews radiologist resources online but does not meet with a radiologist in person	<input type="checkbox"/> Reports which radiologist the images were reviewed with	<u>AND</u> <input type="checkbox"/> Comments on any additional information or advice the radiologist offered about the images or the patient case
Presentation Quality	<input type="checkbox"/> Poorly organized, minimal eye contact, illogical flow	<input type="checkbox"/> Fair organization, overall lacking confidence, cannot respond to questions	<input type="checkbox"/> Good organization, logical flow, good eye contact, confident and clear	<u>AND</u> <input type="checkbox"/> Easily responds to questions and presentation is less than 15 minutes

Comments: _____

Student name: _____

Faculty name: _____

Date of completion: _____