

**NURSES' EVALUATION OF HOUSE STAFF**

House officer name \_\_\_\_\_ PGY - 1 2 3 (circle one)

Rotation dates \_\_\_\_\_ Firm ICU-N MICU CCU Clinic

To the unit Nurse Manager- Constructive comments from the nursing staff can provide useful feedback to the house staff. Please ask your staff for their observations on the following 3 categories. The completed sheet should be returned to the House Staff Office (Box 8121).

**E = exceeds expectations**  
**M = meets expectations**  
**I = inconsistently meets expectations**

**E M I**

**PROFESSIONALISM**

*Conscientious; Completes tasks reliably; follows up on details;  
Demonstrates honesty and integrity;  
Accepts suggestions graciously; willing to change;  
Strong sense of responsibility and accountability;  
Treats staff with respect; Not verbally abusive when under stress;  
Functions well as a team member;  
Communicates effectively with staff;*

**E M I**

**HUMANISTIC QUALITIES**

*Establishes rapport with patients and families;  
Sensitive and empathetic;  
Communicates effectively with patients and families;  
Respects confidentiality;*

**E M I**

**WORK HABITS**

*Effectively plans the course of care;  
Anticipates post-discharge needs;  
Is well organized; accomplishes work in a timely manner;  
Cosigns verbal orders; dates and times orders; signature is legible*

**COMMENTS** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Completed by \_\_\_\_\_ Phone \_\_\_\_\_

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





