NURSING ASSESSMENT QUESTIONNAIRE
360 Degree Evaluation (Short Form)

Resident’s Name: ____________________ Evaluator’s Name: _________________
Inpatient___ Outpatient___

Program/Specialty: ________________________ Year of Training: _____ Evaluation Date: ______________

How familiar are you with this resident’s work?

<table>
<thead>
<tr>
<th>Very Well</th>
<th>Somewhat</th>
<th>Hardly at All</th>
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<tbody>
<tr>
<td>7</td>
<td>6</td>
<td>5</td>
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<tr>
<td>4</td>
<td>3</td>
<td>2</td>
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The following statements describe physician behaviors. Compared to other residents at the same level of training, rate the resident’s performance using the scale to the right.

A. PROFESSIONALISM
1. Demonstrates respect for the patient’s
   a. Culture
   b. Gender
   c. Disability
   d. Sexual Orientation
   e. Age
   f. Religion
2. Demonstrates respect for nurses
3. Demonstrates respect for support staff
4. Seeks consultation/supervision when appropriate
5. Functions effectively as a member of the team
6. Completes assigned tasks
7. Manages personal stress responsibly
8. Answers pages in a timely fashion
9. Is condescending to you or patients/families
10. Is abusive to you or patients/families
11. Respects patient’s right to make choices regarding their care
12. Responds appropriately to the limitations imposed by the patient’s illness
13. Responds in a timely fashion to nursing requests for help
14. Answers pages in a timely fashion

B. INTERPERSONAL AND COMMUNICATION SKILLS
1. Communicates effectively with patients & patient’s families
2. Communicates effectively with other health care professionals
3. Communicates referral information to patients
4. Maintains complete medical records
5. Listens to and considers what you have to say
6. Handles demanding interpersonal situations in a respectful and effective manner
7. Handles messages appropriately in a timely fashion

Comments and overall appraisal of resident:

AHSC GME/Rev EOSG 7/16/03