What can you expect? Think RIME....

MS3
**R**epporter - reports what is happening with the patient

MS4
**I**nterpreter - explains why things are happening

Resident
**M**anager - makes a plan for how to manage the patient

**E**ducator - teaches what, why and how to others

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*See page 2 for more details on expected competencies by level of training*

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**The ratings:**
- **Read the description** for each rating carefully
- Choose the description that most closely matches your observations

**The comments:**
- Should be **specific**
- Based on **observed** behaviors
- **Not** about character traits

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**Ratings should align with comments**

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**Key information to guide your comments:**

<table>
<thead>
<tr>
<th>Patient Care</th>
<th>Knowledge and Problem Solving</th>
<th>Communication/ professionalism</th>
</tr>
</thead>
<tbody>
<tr>
<td>H &amp; P skills: accuracy, completeness, appropriate focus for patient problem</td>
<td>Understanding of patient problems</td>
<td>Rapport with patient and family, responsiveness to patient’s emotional cues</td>
</tr>
<tr>
<td>Assessment and differential diagnosis</td>
<td>Reasoning through problems</td>
<td>Punctuality, participation</td>
</tr>
<tr>
<td>Understanding of overall picture for the patient and details of patient's care</td>
<td>Learning/looking up of new information relevant to patients</td>
<td>Reliability in completing tasks; initiative</td>
</tr>
<tr>
<td>Understanding of plan, ability to generate plan</td>
<td>Management plan reasonable for patient's current problem</td>
<td>Responsiveness to feedback</td>
</tr>
</tbody>
</table>

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**Constructive comments:** Use this section to describe next steps for the student’s learning and development, and any recommendations to guide further improvement

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**ALWAYS DISCUSS YOUR FEEDBACK IN PERSON BEFORE YOU SUBMIT YOUR EVALUATION**
<table>
<thead>
<tr>
<th>Role</th>
<th>Activities</th>
<th>Specific skills</th>
<th>Student level</th>
</tr>
</thead>
</table>
| REPORTER   | Reliably completes history and physical exam   | • Gathers basic H & P reliably and accurately  
• Uses appropriate terminology  
• Recognizes normal vs. abnormal  
• Communicates info clearly  
• Begins to interpret H&P  
• Can recognize a new problem | MS3 – at expected competency |
| INTERPRETER| Reliably completes history and physical exam AND reliably completes assessment | • Consistently identifies and prioritizes problems  
• Constructs a differential diagnosis related to each clinical problem  
• Offers 2-3 reasonable possibilities and can cite reasons they may apply to this patient  
• Interprets data, including laboratory and radiology  
• Demonstrates advanced knowledge  
• Participates actively in patient care | MS3 - advanced  
MS4 - at expected competency |
| MANAGER    | Reliably completes history and physical exam AND reliably completes assessment AND constructs assessment and plan independently | • Suggest management options  
• Tailors management to patient’s circumstances and preferences  
• Able to state and explain own preferences for next steps  
• Broad/deep fund of knowledge  
• Proactive, not reactive | MS3 – exceptional  
MS4 – advanced |
| EDUCATOR   | not expected at student level                  |                                                                              |                       |

**Grades are assigned based on:**
- Evaluations on performance in 3 key domains: clinical skills, knowledge and problem solving, communication and professionalism
- Clerkship exam
- Completion of other clerkship assignments

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**Please be as specific as you can in documenting students' skills and behaviors in each of the domains. This will support clerkship leadership to assign the most appropriate clerkship grade.**

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See [UCSF MD competencies and milestones](http://meded.ucsf.edu/ume/md-competencies) at: http://meded.ucsf.edu/ume/md-competencies