Appendix 7: Clinical Laboratory Program

Clinical Laboratory Program Behavioural / Performance Periodic Evaluation (Hospital)

।- General Clinical Competences	5 Excellent	4 Very Good	3 Good	2 Average	1 Below average
The student was able to:					
Follow hospital regulations and codes.					
2. Punctuality and initiative for work.					
3. Adhere to safety rules.					
4. Exhibit verbal communication skills.					
5. Work as a team member.					
TOTAL (of each column)					
GRAND TOTAL= SUM OF ALL COLUMNS		•	•		
AVERAGE OF SECTION I (Grand total/5)					
แ-Discipline Competencies					
Understand the principles of various tests.					
2. Pre-analytical skills.					
3. Analytical skills.					
4. Post-analytical skills.					
Apply specimen acceptance/rejection Criteria.					
6. Log the specimens appropriately.					
 Record and report appropriate results to Supervisor. 					
8. Comply with quality control measures.					
Operate automated systems/instruments for analysis.					
10. Meet the goal set by the unit.					
TOTAL (of each column)					
GRAND TOTAL= SUM OF ALL COLUMNS		-	-		
AVERAGE OF SECTION II (Grand total/10)					
AVERAGE SUM OF SECTIONS I + II/2					
FINAL %					

valuator 5 Name.		
Signature:	<u>Date</u>	
Note: Please co	uld you send the evaluation to: iams@su.edu.sa	

Appendix 8: Clinical Laboratory Program

Clinical Laboratory Program Behavioural / Performance Periodic Evaluation (Hospital)

Name of Hospital: Student Name:		University ID:
Rotation Period:	from	to
level of competer laboratory by ass applicable to your	ice at which the student pigning a numerical grade	ate numerical grades (<60to 100). Please evaluate the erformed in each category while on rotation in your within one column. If you feel a category is not rk "N/A". Add additional lacking categories in our form
OVEALL PERFO	RMANCE	
Grade:	<u></u>	
If unsatisfactory, wh	at recommendations would yo	ou like to make?
Repeat the tr	raining for whole rotation period	Repeat tasks forweeks
Evaluator's Name: _		
Signature:		
Date:		

Appendix 9: Summary of Clinical Laboratory Internship Evaluation

S. No.	Clinical Discipline	Final Evaluation		
		Percentage (%)	Grade	
1	Sample collection& Sample receiving & processing area			
2	Hematology			
3	Clinical biochemistry			
4	Microbiology			
5	Immunology / Serology			
6	Virology			
7	Blood Bank			
8	Parasitology			
9	Hormones			
10	Send out sample			
11	Special training			
12	Educational Activity (Research in the special training area)			
	Total percentage (%)= sum of all %/12			
	Final grade			

Remarks (if any):	
Name of Laboratory Training Coordinator:	
Signature of Laboratory Training Coordinator:	Date:

Note: Please could you send the evaluation to: iams@su.edu.sa