

## REPORT OF THE STUDENT VISITING THE PRACTICE FOR THE MANAGED HEALTH CARE ROTATION

We would like to express our sincere thanks for accommodating this student in your practice for the past 2 weeks. Please be so kind as to complete the evaluation form:

Name of Doctor: .....

Address of Practice: .....

Postal code: ..... Telephone: .....

Surname and name of student: .....

Above mentioned student visited my practice from: .....till: .....

**EVALUATION:** Please indicate your assessment of the student by making a cross on the following scale:

1	2	3	4	5	6	7	8	9	10
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1 = very weak

10 = excellent

1. Interest in Managing Patients Health
2. Interest in management of practice
3. Interest in patients
4. Communication & interpersonal skills of student
5. Insight in Managed Health Care
6. General impression of student

1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10
1	2	3	4	5	6	7	8	9	10

Are you willing to accept students from the University in your practice in the future?

Please provide a reason: .....

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Suggestions for improvement of the special activity: .....

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**SIGNATURE :** ..... **DATE:** .....

MP no. (not practice number) .....

Please fax to (012 354-1317) or email (karin.ainslie@up.ac.za ) back to Mrs K Ainslie before the 14<sup>th</sup> November 2011

**You will receive 2 CPD (level 2) points per student once we received the completed report.**