Resident Evaluation of Unit and Preceptor

Resident Name _____________________________________ Date ___________________________ Unit __________________________________

1. Shift worked  ○ 7am – 7 pm  ○ 7pm – 7am
2. Number of Preceptors  ○ 1  ○ 2  ○ 3  If greater than three preceptors please explain why
   _________________________________________________________________________________________________________________
   _________________________________________________________________________________________________________________
   _________________________________________________________________________________________________________________

3. Name of Preceptors
   a. Preceptor 1 ________________________________________________________
   b. Preceptor 2 ________________________________________________________
   c. Preceptor 3 ________________________________________________________

4. Please rate Preceptor 1 on the following scale 1 = unsatisfied  5 = very satisfied

   a. Introduced me to others  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5
   b. Excited to work with me  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5
   c. Knew I was coming and was prepared  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5
   d. Discussed procedures with me  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5
   e. Demonstrated procedures to me  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5
   f. Assisted me with performance of procedures  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5
   g. Viewed me as team member  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5
   h. Gave me feedback on my performance  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5
   i. Conducted end of shift debrief,  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5
   j. Would recommend this preceptor for others  ○ 1  ○ 2  ○ 3  ○ 4  ○ 5

5. Any additional comment regarding your experience with this preceptor
   _________________________________________________________________________________________________________________
   _________________________________________________________________________________________________________________
   _________________________________________________________________________________________________________________
6. Please rate Preceptor 2 on the following scale 1 = unsatisfied  5 = very satisfied

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>a</td>
<td>Introduced me to others</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Excited to work with me</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Knew I was coming and was prepared</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Discussed procedures with me</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Demonstrated procedures to me</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Assisted me with performance of procedures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Viewed me as team member</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Gave me feedback on my performance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Conducted end of shift debrief,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Would recommend this preceptor for others</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. Any additional comment regarding your experience with this preceptor

____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

8. Please describe your overall impression of this unit

____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________

Any additional comments or feedback
____________________________________________________________________________________________________
____________________________________________________________________________________________________
____________________________________________________________________________________________________