IN-TRAINING EVALUATION REPORT  
Laboratory Specialties

NAME: Surname ___________________________ Given Name(s) ___________________________

PROGRAM:  o Cytogenetics  o Biochemical  o Molecular

LEVEL OF TRAINING: Fellow    ☐ 0 I    ☐ 0 II    ☐ 0 III

PERIOD OF TRAINING: From ___________________________ To ___________________________

INSTITUTION: ___________________________ , SERVICE: ___________________________

UNIVERSITY: ___________________________

SUPERVISOR: ___________________________

CRITERIA  |  FAIL  |  BORDER-LINE  |  PASS  |  OUTSTANDING  |  NOT APPL.  |  CANNOT ASSESS
---------|--------|---------------|-------|---------------|------------|----------------
A. FUNDAMENTAL SKILLS
  1. LABORATORY RESULT ASSESSMENT AND INTERPRETATION
  2. RECORDS & REPORTS (INCLUDING ORAL REPORTS)
  3. CONSULTATIVE SKILLS AND FOLLOW-UP OF CASES
  4. SOUNDNESS OF JUDGEMENT & DECISIONS
  5. PERFORMANCE UNDER PRESSURE

B. TECHNICAL SKILLS
  1. TECHNICAL SKILLS RELATED TO: CYTOGENETICS/BIOCHEMICAL/MOLECULAR
  2. USE AND CARE OF LABORATORY EQUIPMENT
  3. SAFETY

C. SPECIAL CRITERIA
  LABORATORY MANAGEMENT SKILLS

D. PROFESSIONAL ATTITUDES
  1. LABORATORY STAFF RELATIONSHIPS
  2. CLINICAL STAFF RELATIONSHIPS
  3. SENSE OF RESPONSIBILITY
  4. ATTENTION TO QUALITY ASSURANCE MEASURES (ACCURACY, PREVENTION)
  5. SELF-ASSESSMENT ABILITY (INSIGHT)

E. RESEARCH

F. KNOWLEDGE
  1. LABORATORY SPECIALTY
  2. CLINICAL GENETICS
  3. BASIC SCIENCE

G. OVERALL COMPETENCE

COMMENTS: (please use other side of page)
COMMENTS

Trainee's strengths:

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Trainee's weaknesses:

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Other comments:

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Was evaluation done by:  
☐ 0 one individual, (name) ________________________________________________
   how well does he/she know the trainee _______________________________________

☐ 0 a committee, __________________________________________________________

☐ 0 other (please explain) __________________________________________________

________________________________________________________

(name/signature of evaluator)

(name/signature of program director)

This is to attest that I have read this document:

(date) ________________  (name of trainee) ____________________________  (signature of trainee) ____________________________