



**SUPERVISOR'S
REPORT FORM**

**MASTER OF MEDICINE
(SURGERY)**

Candidate's Name : _____
 Hospital/Institution : _____
 Speciality : _____
 Date of Posting : _____ to : _____
 Phase/Year of Study : _____ Year of Admission : _____

Instruction:

Please rate candidates's performance/abilities in the following areas and return the completed form.

Scale :	(1 – 4)	(5 – 6)	(7 – 8)	(9 – 10)
Ranking :	Poor	Satisfactory	Good	Excellent

The passing mark is 50%

A. Fitness to Practice as Medical Officer

(Core knowledge, case presentation, clinical judgement & skill)

1	2	3	4	5	6	7	8	9	10
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Comments : _____

B. Attitude & Commitment

(Sense of responsibility, initiative, leadership, honesty, enthusiasm, punctuality, professional conduct)

1	2	3	4	5	6	7	8	9	10
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Comments : _____

C. **Ethics & Communication Skill**

(Doctor & patients relationship, relationship with colleagues)

1	2	3	4	5	6	7	8	9	10
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Comments : _____

Overall Performance:

Total Score = $\frac{\quad}{30} \times 100 =$

Specific Recommendations:

(A) Pass

(B) Extension of Attachment and Reassessment

(C) Fail and Out

Supervisor Name : _____

Signature : _____ Date : _____

Head of Department :

Name : _____

Signature : _____ Date : _____

Please return completed form to : **DEPARTMENT OF SURGERY**
School of Medical Sciences,
Universiti Sains Malaysia, Health Campus
16150 Kubang Kerian, Kelantan