



A2. CONSULTATION LETTER RATING SCALE^a

See *Communicator Role teacher tips appendix for this assessment tool*

Instructions for Assessor:

- Communication competencies can be developed over time. Using the form below, please help this learner gain insight into his/her communication skills by providing valuable confidential feedback.
- This information will be shared with the learner in aggregate form and for the purposes of helping the learner improve.

- Please return this form in a confidential manner to _____
by _____

- Circle your answer for each item.

Resident Name: _____

PGY Level: _____

Completed by: _____

Date: _____

CONTENT

1. HISTORY

- Identified chief problem/reason for referral
- Described the chief complaint
- Identified relevant past history

- Listed current medications, as appropriate
- Other history appropriate to presenting problem:
- Psychosocial history, functional history, family history, review of systems, etc.

POOR 1	BORDERLINE 2	ACCEPTABLE 3	GOOD 4	EXCELLENT 5
Missing relevant data		Most of relevant data present		All relevant data present

2. PHYSICAL EXAMINATION

- Described physical examination findings relevant to presenting problem

POOR 1	BORDERLINE 2	ACCEPTABLE 3	GOOD 4	EXCELLENT 5
Missing relevant physical exam		Most of relevant physical exam present		All relevant physical exam present

3. IMPRESSION AND PLAN

- Provided diagnosis and/or differential diagnosis
- Provided a management plan
- Provided a rationale for the management plan (education)

- Stated whether the management plan was discussed with patient
- Stated who would be responsible for elements of the management plan and follow-up
- Answered the referring physician's question (if present)

POOR 1	BORDERLINE 2	ACCEPTABLE 3	GOOD 4	EXCELLENT 5
Key issues not addressed. Did not answer referring physician's question. No rationale for recommendations. No education provided. No indication of who will do what.		Most key issues identified and addressed. Answered referring physician's question. Some rationale for recommendations. No education provided. Some indication of who is responsible for management plan elements and follow-up.		All key issues identified and addressed. Answered referring physician's question. Provided rationale for recommendations made. Provided education. Clear plan for who will do what and who is responsible for follow-up. Noted what patient was told.

^a Dojeiji S, Keely E, Myers K. Used with permission.



A2. CONSULTATION LETTER RATING SCALE (continued)

4. CLARITY AND BREVITY

- Words used:
 - short (less than 3 syllables)
 - active voice
 - minimal medical jargon; minimal filler words/phrases
 - no word or phrase repetition
- Length of sentences:
 - one idea per sentence
 - each sentence less than 3 lines long
- Length of paragraphs:
 - one topic per paragraph
 - each paragraph less than 4-5 sentences long

POOR 1	BORDERLINE 2	ACCEPTABLE 3	GOOD 4	EXCELLENT 5
Wordy. Message unclear Redundant words/phrases Lots of jargon and fillers. Mostly passive tone. Long sentences. Long paragraphs.		Concise. Minimal jargon and fillers. Some active tone. Some short sentences. Some sentences with one idea/sentence. Some short paragraphs.		Concise. Clear and organized. No redundant words/phrases. No jargon and fillers. Active tone primarily. Short sentences. One idea/sentence. Short paragraphs.

5. ORGANIZATION OF LETTER

- Use of headings
- Layout visually appealing with lots of white space
- Use of bulleted or numbered lists, tables, or graphics as appropriate
- Information easy to scan

POOR 1	BORDERLINE 2	ACCEPTABLE 3	GOOD 4	EXCELLENT 5
No headings. No white space. No bulleted or numbered lists. No tables. Difficult to scan.		Some headings used. Some white space. Some bulleted and numbered lists. Generally easy to scan. Most key info easy to find.		Headings clear and appropriate. Lots of white space. Numbered and bulleted lists. Uses of graphics or tables. Very easy to scan.

OVERALL RATING OF LETTER

- Degree to which the letter is helpful to the referring physician

POOR 1	BORDERLINE 2	ACCEPTABLE 3	GOOD 4	EXCELLENT 5
Letter not helpful. Lacking key content. Lacking style elements to make the letter easy to scan Key info hard to find.		Generally helpful as key content available. Limited or no education incorporated. Some style elements incorporated. Most key information easy to find (impression and plan at a minimum).		Informative letter. Element of education incorporated. Key information easy to find.

Areas of strength	Areas for improvement
1.	1.
2.	2.
3.	3.

Comments:

Communicator