

## AMERICAN BOARD OF OPHTHALMOLOGY RESIDENT TRANSFER INTERIM EVALUATION FORM

Required of all residents transferring to a different training program. Programs should use this form when applicable.

Name of Program:				
When a resident's training has been gained in more than one residency program, an Interim Evaluation of Residency Training must be completed by the first program. It is the responsibility of the second program to obtain this completed form from the first program and retain it for inclusion with the candidate's Satisfactory Completion document which is completed at the time the resident graduates. The first program may record 'N/A' for those competencies that could not be evaluated. The second program must evaluate all seven competencies, taking into account any deficiencies noted in the Interim Evaluation by the preceding program(s). The Board and the ACGME also must be notified of the change by both programs. Both programs must also document the transferring resident on their yearly report as transferring in or out.  Resident's Name:  List Length of time and Post-graduate year(s) of training completed (include inclusive dates for each level, e.g. PGY-2 (1st Ophthalmology Year) from 7/1/## to 6/30/##):				
Tot Level Truming.				
1.	<b>Medical Knowledge</b> – Understanding and application of established and evolving biomedical, clinical and cognitive sciences; critical evaluation of new information.	Satisfactory	Unsatisfactory	Not Applicable
2.	Patient Care – Diagnosis and management of medical and surgical eye disease; utilization of information technology; documentation in medical records.			
3.	Surgical Skills – Preoperative judgment; intraoperative technique for level of training; post-op care.			
4.	<b>Interpersonal Skills</b> – Interaction with patients, colleagues, referring and other professionals; patient and family counseling; sensitive to socioeconomic circumstances.			
5.	<b>Practice-based Learning</b> – Self-assessment of patient care; application of scientific evidence to improve patient care; participation in self-improvement programs.			
6.	Systems-based Practice – Awareness of larger healthcare systems, utilization of system for optimum patient care and patient advocacy.			
7.	<b>Professionalism</b> – Commitment to professional responsibilities; respect for physician-patient and physician-physician relationships; ethical behavior.			
Comments:				
PRINT NAME OF PROGRAM CHAIR DATE				
*SIGNATURE OF RESIDENT		DATE		

\*This evaluation has been reviewed with the resident. (Required only if resident has one or more unsatisfactory ratings.)