Resident Name:_____ Date: _____
PGY: _____

Psychiatry Clinical Evaluation - Core of Psychiatry

1. Interview Process

Item	Expectation	Criterion	Comments
Rapport	Establishes relationship	□ Introduces self □ Explains interview □ Respectful □ Open, explorative beginning	
Rapport	Develops and sustains rapport	□ Remains respectful and non-judgmental □ Genuine interest displayed by verbal and non-verbal responses □ Acknowledges patient's distress with empathic responses	
Control of process	Maintains control of the interview	□ Interrupts politely when required □ Redirects when required □ Facilitates organization of disorganized patients	
Cultural sensitivity	Demonstrates cultural sensitivity	□ Engages patient in a culturally safe manner	
Ends the interview	Smoothly closes the interview	□ Attends to timing □ Provides a pertinent closing statement	

2. Interview technique

Item	Expectation	Criterion	Comments
Information gathering	Maintains an open, explorative process	□ Non-verbal behavior encourages patient to tell their story □ Listens attentively □ Note taking does not distract from the interview	

	Uses a facilitative questioning style	□ Questioning follows a logical but flexible sequence □ Asks clear questions in plain language □ Avoids leading questions □ Avoids stacked (multiple) questions □ Moves effectively between open and closed questions □ Facilitates expression of emotions	
	Pursues important information	□ Appropriately responds to informational and affective cues □ Pursues symptom detail □ Asks for clarification	
Maintains Flow	Maintains Flow	□ Supportively confronts inconsistencies □Appropriately deals with unusual, difficult, or distressing content □Comfortably allows silence to facilitate further expression □Reframes when required □ Summarizes when appropriate	

3. Interview Content

Item	Expectation	Criterion	Comments
Elicits a complete, relevant and accurate history	Identifies the person	□ Obtains complete demographic information	
	Identifies the presenting complaint(s) or problem(s) and its/their history (History of Presenting Complaint)	□ Obtains data on presenting complaint(s) or problem(s) □ Assesses pre-morbid state □ Assesses stressors related to presenting illness □ Assesses previous illness episodes if relevant, and determines similarities with/differences from this episode □ Identifies treatment interventions and response for this episode	
	Screens for symptoms relevant to the differential diagnosis and identification of co-morbid symptoms	□ Reviews primary criteria of other relevant diagnoses □ Reviews substance use and abuse □ Assesses impact of substance use on person and others □ If appropriate, assesses motivation to change current substance use	
	Ensures safety	□ Completes an appropriate risk assessment (self-harm, aggression, self-care, and competency) □ Reviews current medication(s), dosage(s) and response	

		□ Reviews use of over-the-counter products □ Elicits a complete, relevant and accurate history of side effects □ Defines allergy status	
Elicits a complete, relevant and accurate history	Identifies relevant past history	□ Reviews past medical history including family history of medical disorders □ Reviews past psychiatric history □ Reviews family psychiatric history □ Reviews forensic history	
	Identifies the developmental and psycho-social history	Review and assesses: □ Family history and dynamics □ Gestational and perinatal history □Childhood and adolescent development □Occupational history and current functioning □Relationship history □Past and current history of abuse □Current supports □Relevant cultural identities, migration history, and associated trauma and stressors □Spirituality □Identifies social and cultural supports including family, kin networks, and communities	

		□Identifies social and cultural stressors and systemic inequities □Explores patient's explanatory model of illness	
Conducts a formal Mental State Examination as indicated	Conducts a formal Mental State Examination as indicated	□ Appropriately adapts the Mental Status Examination to be culturally competent □ Assesses mood symptoms □ Assesses anxiety symptoms □ Assesses psychotic symptoms □ Assesses insight and judgment □ Assesses cognition if relevant □ Considers intellectual function if relevant	

4. Case presentation

Item	Expectation	Criterion	Comments
Defines limitations of the data	Identifies issues in the information gathering process	□ Reports on the reliability of the patient (with examples) □ Reports on the accessibility of the patient (with examples) □ Identifies deficits in the interview and their potential effect on the data collection	
Presentation skills	Provides a coherent, accurate summary of the case	□ Uses descriptive terms correctly (e.g., delusions) □ Presents case in an orderly, concise, systematic manner that is	

		sufficiently detailed □ Accurately reports the Mental State Examination □ Accurately reports the risk assessment (self-harm, aggression, self-care, competency) □ Accurately reports the Mental Status Examination □ Identifies relevant comorbidities	
Synthesizing skills	Synthesizes all the clinical information into a diagnosis, differential diagnosis and case formulation	□ Presentation emphasizes the necessary information to support and defend the preferred diagnosis and differential □ Provides a working diagnosis including co-morbidities supported by evidence from the interview □ Provides a differential diagnosis supported by evidence from interview □ Discusses co-morbidities and interplay between diagnosis □Provides a realistic prognosis □Describes barriers to compliance or optimal treatment for this patient	

Synthesizing skills	Provides an accurate and coherent formulation covering the rudimentary bio-psycho-social factors influencing the patient and their disorder	Identifies contributing: □Biological factors □Psychological factors □Social factors □Cultural factors □Provides a sophisticated and accurate account of the interplay between these components that enhances the understanding of the patient □Identifies prominent internal conflicts and/or cognitive distortions that influence the patient's presentation	

5. Treatment Plan

Item	Expectation	Criterion	Comments
Presents a coherent, safe and appropriate treatment plan	Identifies information required to consolidate the diagnosis	□ Identifies further, appropriate, and cost-effective bio-psycho-social investigations required to confirm the diagnosis or provide optimal care to the patient	
	Communicates a comprehensive treatment plan	□ Utilizing a bio-psycho-social matrix defines an immediate, short-term, and long-term treatment plan □Recommends specific biological therapies (pharmacotherapy, ECT, TMS, etc.) for the patient □Recommends a specific	

		psychotherapeutic approach for the patient □Considers social and cultural factors in all aspects of treatment planning □Identifies appropriate collaborations with family, community or other service providers □Provides evidence for the efficacy of treatment plan □Identifies the expected benefits and risks of the treatment plan □Identifies the follow-up procedure	

Resident Name: _____ PGY_____

Date: _____

☐ **Practice** ☐ **Core/Exit STACER**

Evaluation Scoring Sheet

Your performance on today's evaluation, based on your level of training:	☐ Does Not Meet Expectations ☐ Meets Expectations

COMMENTS:

STRENGTHS:

1.

2.

3.

AREAS FOR IMPROVEMENT:

1.

2.

3.

RECOMMENDATIONS: To increase your effectiveness, you may wish to consider beginning or doing more of the following: 1. 2. 3.	
Resident Signature:	
Evaluator Name & Signature:	
Evaluator Name & Signature:	