PROFESSIONALISM REPORT FORM

Student Name:                       Date: 

Your Role:       □ STAFF  □ FACULTY  □ STUDENT  □ RESIDENT  □ OTHER

Your Name:  

Brief Description of Issue (please attach any supporting documentation):

The student needs further education or assistance with the following (select as many as apply)*:

1. Reliability and responsibility
   □ Fulfilling responsibilities in a reliable manner
   □ Learning how to complete assigned tasks
   □ Communicating in a timely manner

2. Self-improvement and adaptability
   □ Accepting constructive feedback
   □ Recognizing limitations and seeking help
   □ Being respectful of colleagues and patients
   □ Incorporating feedback in order to make changes in behavior
   □ Adapting to change

3. Relationships with students, faculty, staff and patients
   □ Establishing rapport
   □ Being sensitive to the needs of patients
   □ Establishing and maintaining appropriate boundaries in work and learning situations

4. Upholding medical student standards of behavior
   □ Maintaining honesty
   □ Contributing to an atmosphere conducive to learning
   □ Respecting the diversity of race, gender, religion, sexual orientation, age, disability or socioeconomic status
   □ Using professional language and being mindful of the environment
   □ Protecting patient confidentiality
   □ Dressing in a professional manner

Signature of individual filing report: ______________________________

This section to be completed by the student and the Assistant Dean for Student Affairs, Jordan White, MD.

Date of Discussion:
Comments/Plan (optional):

Advisor Signature: _____________________________    Student Signature: ______________________________

Please submit all completed forms to the Assistant Dean for Student Affairs: Dr. Jordan White (jordan_white@brown.edu or Fax: 401-863-3801).