

Pediatric Resident Evaluation

By Nursing for Providence Ward Rotation

Resident:

1.) This Resident prepared legible, signed patient orders during the rotation?

| | | | | |
|--------|---|---------|---|--------|
| 1 | 2 | 3 | 4 | 5 |
| Seldom | | Usually | | Always |

2.) This Resident could be reached when needed in a timely fashion

| | | | | |
|--------|---|---------|---|--------|
| 1 | 2 | 3 | 4 | 5 |
| Seldom | | Usually | | Always |

**3.) This Resident interacted with the Nursing staff in a respectful manner
(verbal and non verbal)**

| | | | | |
|--------|---|---------|---|--------|
| 1 | 2 | 3 | 4 | 5 |
| Seldom | | Usually | | Always |

**4.) This Resident was an integral part of the healthcare team and involved all
care givers in patient care decisions**

| | | | | |
|--------|---|---------|---|--------|
| 1 | 2 | 3 | 4 | 5 |
| Seldom | | Usually | | Always |

**5.) This Resident demonstrated appropriate interventions/actions during labor
and delivery resuscitations or complicated deliveries**

| | | | | |
|--------|---|---------|---|--------|
| 1 | 2 | 3 | 4 | 5 |
| Seldom | | Usually | | Always |

**Comments or Explanations for Some of the
Scores:**

Shift: ___ Day
 ___ Night

Evaluating nurse signature _____ Date: _____