Weekly Clinical Mentoring Form

Resident’s name: ______________________________

Date of mentoring: ______________________________

Total number of hours spent mentoring with this resident this week: ________

Mentor’s name/ Facility name: _______________________________________________

Types of patient(s) seen diagnostically and body region:
____________________________________________________
____________________________________________________

Goal setting for this mentoring session:

a. Discuss upcoming challenges with future patient encounter
   1. 
   2.

b. Discuss what type of feedback the resident prefers during the upcoming patient encounter.
   1.

Specific areas in which the resident performs well:
____________________________________________________
____________________________________________________
____________________________________________________
Specific areas in which the resident needs to improve:

<table>
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<tr>
<th>Skill Level</th>
<th>Comments</th>
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**EXAMINATION TASKS**

- Identify Problems/Concerns
- Obtain Symptom History
- Screen for Disease/Complications
- Administer Tests and Measures
  - Community/work integration
  - Level of pain
  - Posture/Structural assessment
  - Gait/Balance Assessment
  - Integumentary tissue quality
  - Circulatory assessment
  - Sensory Integrity
  - Reflex Integrity
  - Active range of motion
  - Motor function/coordination
  - Joint integrity
  - Muscle performance

**EVALUATION TASKS**

- Interpret data from history
- Develop working hypothesis
- Determine appropriateness of PT
Plan tests and measures
Respond to emerging data from P.E.
Interpret data from P.E.
Correlate history and P.E. findings
Identify cause of problem
Select Intervention Approach
Respond to emerging data from Rx

DIAGNOSIS TASKS
Establish Diagnosis
Determine Intervention Approach

PROGNOSIS TASKS
Predict Optimal Level of Function
Establish Plan of Care
Choose Assessment Measures

INTERVENTION TASKS
Provide Patient Education
Implement Therapeutic Exercise Instruction
Implement Functional Training
Implement Manual Therapy Procedures
Administer Protective/Assistive Devices

OUTCOMES REVIEW
Review outcomes related to prevention
Review functional limitations outcomes
Review disability remediation outcomes
Review patient satisfaction outcomes