

Internal Assessment Form for Industrial Training, Bachelor of Optometry (Honours), International Islamic University Malaysia

Assalamualaikum and Salam Sejahtera.

Please be informed that you will be assessing Year 3 students who have minimal exposure and experience in dealing with real cases.

Thus, the Department hopes that the assessment shall be matched to the students' level of study.

At the end of the industrial training, the student should be able to;

CLO1. Demonstrate clinical skills in examining patients.

CLO2. Evaluate various cases in optometry.

CLO3. Display an effective communication skill with patients, colleagues and others.

CLO4. Practice professional code of conduct in workplace.

*CLO = course learning outcome

The Department would like to thank for your kind assistance throughout this industrial training. We are looking forward for further collaboration in the future.

Please use your official IIUM email address only for this purpose.

* Required

1. Email address *

2. Name of Assessor *

Full name eg. Md Muziman Syah Bin Md Mustafa

3. Staff Number *

4. Name of the Placement *

Full name of the placement eg Hospital Raja Perempuan Zainab II, Kota Bharu, Kelantan.

5. Name of Student and Matric Number *

Full name of the student and valid matric number eg Adam Bin Ali 1516777

Communication with
Patient

CLO3. Display an effective communication skill with patients, colleagues, and others.
CLO4. Practice professional code of conduct in workplace.

6. (0 = Not Adhered; 1 = Need Improvement; 2 = Perfect) *

Mark only one oval per row.

	0	1	2
Use appropriate language. e.g. Suitable communication delivery according to age, education level, dialect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use appropriate term. e.g. Use laymen or understandable term to explain the management.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clear delivery of the management/consultation. 2 Marks = Able to deliver ideas with great clarity.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confident delivery of the management/consultation. 2 marks = Maintain good eye contact and good body language; clear voice and good pace.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interaction with patient. 2 marks= two-way communication, actively listen and respond to others; Start, maintain and end a conversation naturally.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Understand and respond to questions. 2 marks = Able to fully understand and respond to questions accurately.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respect for others. 2 marks = address the patients according to their salutation; interact with highly respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. Comments/ notes on Communication with Patient, if any.

Communication with
Optometrist

CL03. Display an effective communication skill with patients, colleagues, and others.
CL04. Practice professional code of conduct in workplace.

8. (0 = Not Adhered; 1 = Need Improvement; 2 = Perfect) *

Mark only one oval per row.

	0	1	2
Use appropriate language.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use appropriate term. Eg. Do not use laymen term/ use optometric term to explain the management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clear delivery of the management/consultation 2 Marks= Able to deliver ideas with great clarity;	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confident delivery of the management/consultation. 2 marks= Maintain good eye contact and good body language; clear voice and good pace	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interaction with optometrist. 2 marks= 2-way communication & actively respond & listen to others ; Start, maintain and end a conversation naturally.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Understand and respond to questions. 2 marks= Able to fully understand and respond to questions accurately.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respect for others. 2 marks= address the patient according to their salutation; interact with highly respect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. Comments/ notes on Communication with Optometrist, if any.

Self Reflection and
Critical Appraisal

CL03. Display an effective communication skill with patients, colleagues, and others.
CL04. Practice professional code of conduct in workplace.

10. Adherent to Session Rules (0 = Not Adhered; 1 = Need Improvement; 2 = Perfect) *

Mark only one oval per row.

	0	1	2
Fully utilise the specified time. 2 marks = 5-10 minutes; 1 Mark if < 5 minutes; 0 marks > 10 minutes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Upload the task within specified period. 2 marks if 3 days earlier before assessment visit; 1 mark if less than 3 days; No mark if do not upload.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Verbal Communication & Commitment to the Task Given Rubric.

Items	Scores				
	0	1	2	3	4
Clear convey of idea	Unable to convey idea clearly and need huge improvement	Able to convey idea but need some improvement	Able to convey idea fairly clear but need little improvement	Able to convey idea clearly	Able to convey idea greatly clear
Confident convey of idea	Unable to convey idea confidently	Able to convey idea with limited confidence	Able to convey idea with fair confidence	Able to convey idea with high confidence	Able to convey idea with great confidence
Respond to enquiries	Unable to respond to enquiries	Able to respond to enquiries but the answers given are inaccurate	Able to respond to enquiries but the answers are satisfactory	Able to respond to enquiries but the answers are accurate	Able to respond to enquiries but the answers are accurate with extensive explanation
Interest and engagement to task	Show no interest and engagement in presented task	Show a lack of interest and little engagement in presented task	Show some of interest and fair engagement in presented task	Show good interest and sufficient engagement in presented task	Show excellent interest and consistent engagement in presented task
Creativity in completing task	Show no creativity in completing task	Show limited creativity in completing task	Show fair creativity in completing task	Show moderate creativity in completing task	Show high creativity in completing task

11. 0 = Very Weak; 1 = Weak; 2 = Fair; 3 = Good; 4 = Excellent *

Mark only one oval per row.

	0	1	2	3	4
Clear convey of idea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confident convey of idea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respond to enquiries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interest and engagement to task	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Creativity in completing task	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. Comment on Self Reflection & Critical Appraisal, if any.

Comment on Student
Overall Performance

Based on your observation, assessment and interview with the supervisor (external assessor) and other in-house optometrists

13. Good aspect to be highlighted and maintained. *

eg. Dedicate in completing any task given.

14. Aspect to be concerned & suggestion for improvement *

eg. Retinoscopy technique and accuracy for cycloplegic cases.

Assessment on the
Placement Providers

Kindly please look into major areas and score them accordingly. The score will be determined whether the placement provider is recommended or not recommended for future students training.

15. (0 = No; 1 = Yes) *

Mark only one oval per row.

	0	1
Supervision and treatment: Does the supervisor guide the students effectively during the training?	<input type="radio"/>	<input type="radio"/>
Perform: Does the supervisor allow the student to perform tests on the patients?	<input type="radio"/>	<input type="radio"/>
Facilities and space: Are the facilities adequate and maximally utilized? Does the space of the clinic (e.g. refraction station/ room) is enough to allocate our students for certain clinical procedures?	<input type="radio"/>	<input type="radio"/>
Extra-services and specialty: Does the hospital/premise provide extra services/ any specialty to the patients? e.g. advanced contact lens fitting, binocular vision, low vision and colour vision assessments, visual rehabilitation and etc.	<input type="radio"/>	<input type="radio"/>
Patient: Does the hospital/premise provide a wide variety of patients?	<input type="radio"/>	<input type="radio"/>

16. Patient: State common cases are attended by the student. *

17. Is the placement provider recommended or not recommended for future students placement? (0 = No; 1 = Yes) *

Mark only one oval.

0

1

18. Describe your Main Point/ Reason, why does the placement provider is Recommended or Not Recommended for futher placement. *

Special appreciation for your contribution.

Created by Assistant Professor Dr. Md Muziman Syah Md Mustafa

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