



香港家庭醫學學院  
The Hong Kong College of Family Physicians

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Trainee Name: \_\_\_\_\_

## Checklist for Recommendation for Exit Examination

Checking items and content	
<b>Completed 18 months of training before 31 August</b>	<b>Yes /No</b>
Practice Visits (6 months intervals)	Yes /No
Consultation Skill Review LAP (6 months intervals)	Yes /No
Supervisor Feedback /Assessment (Once yearly)	Yes /No
Self-Directed Education & Critical Appraisal Exercises (> 40 hrs / 6 months) At least 50% for Critical Appraisal Exercises	Yes /No
Balanced pre-Approved Structured Educational Program (Confirmation by course organizer) (>80 hrs/year & >40 sessions/year)	Yes /No
Record of Sit in / Videotaped Sessions (6 monthly)	Yes /No
Learning Plans / Record of Supervisor Feedback (6 monthly)	Yes /No
Learning portfolio kept (6 monthly)	Yes /No

Other comments / Recommendation: \_\_\_\_\_

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The trainee **is / is not** recommended for sitting the Exit Examination

\_\_\_\_\_  
Signature of Clinical Supervisor

Dr. \_\_\_\_\_  
Name in block letters

Date: \_\_\_\_\_