Summary of teaching hours last 5 years

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Type of Learner | 20XX | 20XX | 20XX | 20XX | 20XX |
| WSU SOM Medical Student |  |  |  |  |  |
| WSU SOM Trainee – Intern, Resident, Fellow |  |  |  |  |  |
| WSU SOM Graduate Student |  |  |  |  |  |
| WSU SOM Undergraduate Student |  |  |  |  |  |
| Postdoctoral Fellow |  |  |  |  |  |
| Physician & Other Health Professionals |  |  |  |  |  |
| Faculty |  |  |  |  |  |
| Other |  |  |  |  |  |

Didactic Sessions

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates** | **Institution Name** | **Description of Activity**  | **Type of Learner** | **Contact Hours Per Year** | **Number of Learners** | **Evaluation:****Mean, SD, scoring scale; other evaluative/outcome data** |
|  |  |  | Choose an item. |  |  |  |
|  |  |  | Choose an item. |  |  |  |

Procedures Taught

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates** | **Institution Name** | **Description of Activity**  | **Type of Learner** | **Contact Hours Per Year** | **Number of Learners** | **Evaluation:****Mean, SD, scoring scale; other evaluative/outcome data** |
|  |  |  | Choose an item. |  |  |  |
|  |  |  | Choose an item. |  |  |  |

Inpatient/Outpatient Rounding

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates** | **Institution Name** | **Description of Activity**  | **Type of Learner** | **Contact Hours Per Year** | **Number of Learners** | **Evaluation:****Mean, SD, scoring scale; other evaluative/outcome data** |
|  |  |  | Choose an item. |  |  |  |
|  |  |  | Choose an item. |  |  |  |

Lectures

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates** | **Institution Name** | **Description of Activity**  | **Type of Learner** | **Contact Hours Per Year** | **Number of Learners** | **Evaluation:****Mean, SD, scoring scale; other evaluative/outcome data** |
|  |  |  | Choose an item. |  |  |  |
|  |  |  | Choose an item. |  |  |  |

**Other**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Dates** | **Institution Name** | **Description of Activity** | **Type of Learner** | **Contact Hours Per Year** | **Number of Learners** | **Evaluation:****Mean, SD, scoring scale; other evaluative/outcome data** |
|  |  |  | Choose an item. |  |  |  |
|  |  |  | Choose an item. |  |  |  |

Mentorship: Research/Clinical Study, Essays/Theses/Dissertations

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Dates** | **Mentee Name** | **Type of Learner** | **Project Name/Title** | **Your Role** |
|  |  | Choose an item. |  | Choose an item. |
|  |  | Choose an item. |  | Choose an item. |

**Course or Curriculum Development**

|  |  |  |  |
| --- | --- | --- | --- |
| **Dates** | **Title**  | **Institution Name** | **Audience Type** |
|  |  |  | Choose an item. |
|  |  |  | Choose an item. |

Articles Published with Mentees (\* indicates mentee)

1. Citation
2. Citation
3. Citation