

Family Medicine Structured Reference Letter

Applicant: Last name _____ First name _____ CaRMS code _____

Referee: Title _____ First name _____ Last name _____
Designation _____
Field of Practice _____
Job title / Academic position _____
Institution / Medical School affiliation _____
Street address _____
Province / State _____
City _____
Country _____

Confidentiality of content

Please indicate if the applicant had an opportunity to review the content of this letter before submission to CaRMS:

- The applicant did not have the opportunity to review the content of this letter before submission to CaRMS
- The applicant had the opportunity to review the content of this letter before submission to CaRMS

Conflict of Interest

"I declare that I have not, at any point during the time I have known this applicant, had a relationship with this applicant that could be construed as a conflict of interest. This may include but is not limited to being: related, a close friend, business associate or treating physician."

- I declare no conflict of interest;
- I may have a conflict of interest Briefly explain:

Context of Working Relationship

When did you work with this applicant?

Start: [mm-yyyy]

End : [mm-yyyy]

At what stage of training did you work with this applicant?

- Pre-clerkship
- Early clerkship
- Mid to late clerkship
- Post-clerkship

How well do you know the applicant?

- Very well
- Well
- Somewhat well
- Not very well

Do you feel you have had adequate exposure in a work environment to assess this applicant fairly?

- Yes
- No

	Excellent	Very Good	Good	Fair	Poor	Unable to Assess
Demonstrates respect and responsibility by completing tasks as expected, communicating issues appropriately and being responsive to emails or other notices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates honesty and integrity by taking responsibility for their actions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates a positive learning attitude by seeking out opportunities and showing initiative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates stamina and resilience when coping with unexpected stressors and situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates appropriate procedural skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates cultural and social sensitivity providing a safe environment for all.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you observed any behaviours that cause you to have concerns about the following:

Collegiality (e.g. conflict with staff, issue with other learner)

- No
- Yes

Please describe your observation:

Clinical judgement (e.g. over confident, dangerous decision, overly hesitant)

- No
- Yes

Please describe your observation:

Patient-centred care (e.g. disrespect, conflict, boundaries)

- No
- Yes

Please describe your observation:

Reliability or responsibility (e.g. excessive absences, incomplete records, missed calls)

- No
- Yes

Please describe your observation:

Receiving feedback or maintaining professionalism (e.g. disruptive behaviours that impede feedback or disrupt clinic flow).

- No
- Yes

Please describe your observation:

Other observed behaviour(s) or trait(s), not otherwise described, that may impact this applicant's suitability for a position in a Family Medicine residency.

- No
- Yes

Please describe your observation:

Supporting Narrative

In this section we invite you to highlight what makes this applicant stand out as a candidate for Family Medicine.

Summative Statements

Did this applicant demonstrate an interest in Family Medicine? (Choose one best answer):

- Definitely yes! For example, the applicant specifically described how to apply this experience to their future in Family Medicine.
- Yes. For example, the applicant was interested in and curious about a career in Family Medicine.
- Possibly. For example, the applicant mentioned consideration of Family Medicine
- Not really but the applicant did not speak negatively about Family Medicine.
- No. For example, the applicant demonstrated negative attitudes towards Family Medicine.

Do you believe this applicant demonstrates the skills and personality traits supportive of suitability for a rural family medicine residency? These would include being self-directed, having a spirit of adventure, and demonstrating a tolerance for working in professionally or socially isolated environments.

- Definitely yes!
- Yes
- I'm not sure
- No
- Definitely no.
- Not in a position to adequately assess

If given the opportunity, would you want to work with this applicant for two years?

- Definitely yes!
- Yes
- I'm not sure
- No
- Definitely no.

Please describe your reasons:

Final Statement

Final Statement (choose one):

- I would strongly recommend this applicant for a Family Medicine residency position.
- I would recommend this applicant for a Family Medicine residency position.
- I would hesitate to recommend this applicant for a Family Medicine residency position.
- I would not recommend this applicant for a Family Medicine residency position.
- I would not recommend this applicant for any residency position.

Signature :

This letter was submitted using CaRMS Online.

Date :

SAMPLE