□ MUSTER —											
EvaSys Questionnare © electric Paper											
Institut	t für Allge	emeinmedizin	Lang,	Tiedemann, Simmen	roth	UNJ					
PKU-k	Kurs Anar	nnese				wü					
Bitte so markieren: Bitte verwenden Sie einen Kugeischreiber oder nicht zu starken Flizstiff. Dieser Fragebogen wird maschinell erfasst.  Korrektur: Bitte beachten Sie im Interesse einer optimalen Datenerfassung die links gegebenen Hinweise beim Ausfüllen.											
1. 0	Seneral	linformation									
1.1	Please	create your individual code:									
	<ol> <li>First and last letter of the first name of your mother's grandmother (e.g. "UA" bei UrsulA)</li> <li>First and last letter of the first name of your mother's grandfather (e.g. "MN" bei MartiN)</li> <li>Day of your mother's birthday (e.g. "03" at 3. october)</li> </ol>										
	If you d	on't know the name of one of yo	ur gran	dparents please fill	out "XX".						
	Please	use block capital letters.									
	Sex Age			male	female	other other					
1.4	Semest	er level									
		` :									
1.5	Prior ed	lucation		Occupation connected to medicine	☐ Clinical training	None					
1.6	Colour	of my group was:		□ red □ blue	☐ yellow	green					
1.7	My grou	up was taught by:		a tutor	□ a lecturer						
1.8	During trained	the second session my group with:		simulated patients	role-playing with fellow students						
1.9		any history-taking interviews did d with simulated patients?		□ 0 □ 3	□1	□ 2					
1.10	Did you	swap a course?		□ yes	□ no						
1.11	Did you	swap into a group of your own colo	our?	□ yes	□ no						
Communication and communication course											
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Attachment 1 to: Simmenroth A, Tiedemann E, Herchenröther J, Vogel H. Which teaching method is more effective in a communication course – role-playing versus simulated patients, taught by tutors or faculty staff? A randomized trial. GMS J Med Educ. 2021;38(3):Doc54. DOI: 10.3205/zma001450

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2.0	`	-itid [F					
	Commi	nication and communication course [Foundation is of central importance to the I profession.	ortsetzung] completely disagree				completely agree
2.2	In conc	arel communication can be learned	aanniatalu 🗆				□ sempletehr
2.2	in gene	eral, communication can be learned.	completely  disagree				<ul> <li>□ completely agree</li> </ul>
		nmunication course was useful and helpful for me.	completely  disagree				□ completely agree
2.4		tisfied with the instruction my group received e lecturer/tutor.	completely  disagree				□ completely agree
2.5	The the	coretical part prepared me well for the role-plays.	completely  disagree				completely agree
2.6	l would studen	have wished for more role-plays with fellow ts.	completely  disagree				completely agree
2.7		have wished for more role-plays with ted patients.	completely  disagree				□ completely agree
2.8	The fel	low students' feedback was of benefit for me.	completely disagree			]	completely agree
2.9	The tut	or's/lecturer's feedback was of benefit for me.	completely  disagree			]	completely agree
2.10	) The sin	nulated patient's feedback was of benefit for me.	completely  disagree			]	completely agree
2.11	The tin	neframe for the theoretical part was:	too tight				too     extended
2.12	What g	rade would you give the course in total? (1-6)	1 🗆				□6
2.13	Do you	have any suggestions for improvement?					
3. F	ersona	al communicative skills					
To each of the statements we would like you to give TWO perceptions:  At first mark your present performance level (after completing the module) and then your performance level at the beginning of the course - that means you should assess your own performance level retrospectively before the beginning of the module.							
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3. F	<sup>D</sup> ersona	al communicative skills [Fortsetzung]								
	I can take a complete and structured medical history.									
3.1	presen	t self-assessment:	completely  disagree					□ completely agree		
3.2	retrosp course	ective self-assessment at the beginning of the :	completely disagree					completely agree		
	I can take a complete vegetative anamnesis.									
3.3	presen	t self-assessment:	completely  disagree					□ completely agree		
3.4	retrosp course	ective self-assessment at the beginning of the :	completely disagree					completely agree		
	I can take a complete medical history of current symptoms.									
		t self-assessment:	completely  disagree					completely agree		
3.6	retrosp	ective self-assessment at the beginning of the :	completely  disagree					completely agree		
	I can ta	ake a complete psycho-social anamnesis.								
3.7	presen	t self-assessment:	completely  disagree					☐ completely agree		
3.8	retrosp course	ective self-assessment at the beginning of the :	completely disagree					completely agree		
	I can ta	ake a complete risk-related anamnesis.								
3.9	presen	t self-assessment:	completely  disagree					completely agree		
3.10	retrosp course	ective self-assessment at the beginning of the :	completely disagree					completely agree		
	I can g	ive structured feedback.								
3.11	presen	t self-assessment:	completely  disagree					☐ completely agree		
3.12	2 retrosp course		completely disagree					completely agree		
	I have	mastered active listening.								
3.13	3 presen	t self-assessment:	completely  disagree					☐ completely agree		
3.14	retrosp course	ective self-assessment at the beginning of the :	completely  disagree					completely agree		
I am able to build a trusting doctor-patient-relationship.										
	•	t self-assessment:	completely  disagree					completely agree		
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l	MUSTER									

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Personal communicative skills [Fortsetzung]     1.16 retrospective self-assessment at the beginning of the course:	completely  disagree					□ completely agree			
I can start a doctor-patient-conversation appropriately (greeting, introduction, setting, etc.)									
3.17 present self-assessment:	completely  disagree					□ completely agree			
3.18 retrospective self-assessment at the beginning of the course:	completely  disagree					□ completely agree			
I can recognize my patient's needs.									
3.19 present self-assessment:	completely  disagree					completely agree			
3.20 retrospective self-assessment at the beginning of the course:	completely  disagree					completely agree			
I can respond to my patient's worries.									
3.21 present self-assessment:	completely  disagree					completely agree			
3.22 retrospective self-assessment at the beginning of the course:	completely  disagree					completely agree			
I can summarize a doctor-patient-conversation at the end.									
3.23 present self-assessment:	completely  disagree					□ completely agree			
3.24 retrospective self-assessment at the beginning of the course:	completely  disagree					completely agree			
Thank you for your help!									
F16743U0P4PL0V0						01.11.2020, Selte 4/4			
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