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Anonymised data may be used for research, audit or evaluation	Anonymis	ed data ma	v be used	for research.	audit or	evaluatio
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Foundation doctor

Name of Foundation Doctor	
GMC No	
Training period from	
Training period to	
Local education provider	
Specialty	

Please complete this TAB form about yourself before your next appraisal. This will help your educational supervisor understand any areas of your professional behaviour in which you lack confidence at this stage of your career. Be specific, using comments as necessary, especially if you have any concerns. The self TAB form will also help if there are any areas (blind spots) in your interpersonal work as a doctor which others find a concern, but about which you may be unaware.

Attitude and/or behaviour

٨	1aintaining	trust/professional	relationship	with	patients.	*
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- Listens.
- Is polite and caring.
- Shows respect for patients' opinions, privacy, dignity, and is unprejudiced.

No Concern
Some Concern
Major Concern

Comments: Anything especially good? You must specifically comment if you have concerns about your performance or behaviour

Accessibility: *	
 Accessible. Takes proper responsibility. Only delegated to the control of the	
	No Concern Some Concern Major Concern ? You must specifically comment if you have concerns about your performance or behaviour
Date:	