

**Grading Sheet**  
**SOM Year 4 Autopsy Exercise**

Student Name: \_\_\_\_\_

Autopsy Number: \_\_\_\_\_

Date of Autopsy: \_\_\_\_\_

Component of Exercise		Unsatisfactory	Satisfactory	Outstanding (comment)
Report		XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXX
	Clinical History			
	Gross Description			
	Clinicopathologic correlation			
	Death Certificate worksheet			
*Attendance and Professionalism				
Overall Grade (U or S only)				XXXXXXXXXXXXXXXXXXXXXXXXXX

\* For satisfactory performance in this area, student should attend entire autopsy including sign-out session, and should demonstrate appropriate professional and respectful attitude toward decedents, families, staff, fellow students, and pathologists.

Comments (additional space on back of form if needed):

I wish to nominate this student for an award for exceptional performance in this exercise. Supporting comments are required above or nomination will not be accepted.

Name of Attending Pathologist (print or type): \_\_\_\_\_

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