

**SAEM Awards**

**Arnold P. Gold Foundation Humanism in Medicine Award**

To the SAEM Awards Committee,

I nominate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Nominee) of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Institution) for the Arnold P. Gold Foundation Humanism in Medicine Award because they exemplify compassionate, patient-centered, emergency care.

Of the ten below, please choose **only five** and provide evidence of excellence in those domains. Only the five chosen domains will be scored, and all domains have the same weight.

***Note:*** *Although some sections may have more information than others, the total length of this form is not to exceed 2,000 words.*

1. **Please describe the nominee’s compassion and empathy in delivery of patient care.**
2. **Describe the nominee’s respect for patients, families, and coworkers.**
3. **Describe the nominee’s cultural sensitivity when working with patients and family members of diverse backgrounds.**
4. **Describe the nominee’s effective, empathetic communication and listening skills.**
5. **Describe how the nominee understands a patient’s need for interpretation of complex medical diagnoses and treatments.**
6. **Describe how the nominee tries to ensure patient comprehension.**
7. **Describe how the nominee comprehends and shows respect for the patient’s viewpoint.**
8. **Describe the nominee’s sensitivity to the patient’s psychological wellbeing and identifying the emotional concerns of patients and family members.**
9. **Describe how the nominee is engendering trust and confidence.**
10. **Describe how the nominee is competent in scientific endeavors.**
11. **Please include any additional information about the nominee that supports their qualifications for this award.**

Sincerely,

Nominator Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nominator Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_