### Caseload and Management of Patients

In general, there was an appropriately diverse mix of patients (including race and ethnicity) seen on this service to meet the clinical training objectives.

The amount of patient care responsibilities assigned to me were just about right for my current level of training.

I was given ample opportunity to become involved in learning about management of patient cases.

I felt supported and encouraged to offer my own differential diagnosis and treatment plan.

### Expectations/Learning Objectives

Standards for my expected level of performance (how I was to be evaluated) on this rotation were made clear to me at the outset.

On this rotation, the course protocol and its learning objectives were used by my preceptor to help me focus on content and/or skills that I was expected to master.

There were adequate didactics on this service to enhance my existing knowledge base; i.e. conferences were scheduled regularly and occurred as scheduled.

The information presented on this rotation was presented at a pace and at a level that was consistent with my existing knowledge base.

### Resources

There were sufficient educational resources (computers, books, journals, & other library materials) available to me on this rotation.

I had access to educational resources at times that were convenient to me.

The COM Unit III Website provided convenient access to course documents and materials related to this rotation.

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On this service there were facilities and opportunities available to support learning about osteopathic manipulative medicine (OMM).

Faculty knowledgeable in the appropriate use of OP&P in case management were available to me as needed.

I had opportunities to use OMM on this service.

When seeking out opportunities to apply OMM, I felt supported by the faculty here.

**Osteopathic Principles and Practice**

The basic science content I learned in Year 1 assisted me in learning from the experiences I encountered on this service.

The systems biology content I learned in Year 2 assisted me in learning from the experiences I encountered on this service.

In general, the material I learned in Years 1 & 2 had little clinical relevance to what I encountered on this service.

**Preclinical Preparation**

My H&Ps were reviewed and critiqued for content and completeness by a senior resident or attending regularly.

**Supervision/Feedback**

I received timely feedback about development of my clinical skills (e.g. charting, physical exams, history taking, and DPR, etc.).

On this service, I never quite knew where I stood in meeting expected outcomes.

On this service, there was always someone available to answer my questions when I had them.

### Clerkship Rotation Evaluation Results

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### Professionalism

- I was treated as a professional by those supervising my student-physician role on this service.
- My supervising faculty on this service modeled physician-patient interactions on this service in ways I would like to emulate.
- Issues of Professionalism were included as a point of discussion by faculty on this rotation.

### Procedures

- I was permitted to observe code blue resuscitations when performed on this service.
- I was encouraged to write prescriptions (when indicated) for patients I saw on this service.
- I was encouraged to write admit orders on internal medicine cases being hospitalized.
- I was encouraged to participate in night-call responsibilities as directed in the course protocol.
- I was given opportunities to interpret common lab and imaging tests.

### Clerkship Rotation Evaluation Results

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<td>I was treated as a professional by those supervising my student-physician role on this service.</td>
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### Assessment Exams

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<tr>
<td>The post-rotation examination covered the core content areas as described in the course protocol.</td>
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<td>Having a post-rotation exam encouraged me to study and read.</td>
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<tr>
<td>Taking the post-rotation exam within Angel was more convenient and user-friendly than taking a paper exam.</td>
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<td>2 11%</td>
<td>2 11%</td>
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<tr>
<td>The first end-of-rotation exam with feedback helped me understand commonly seen diseases in internal medicine.</td>
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<td>I prefer shelf exams more than Angel online exams.</td>
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### Overall Assessment

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<tr>
<td>This rotation offered a positive learning experience.</td>
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<td>Taking everything into account, my experiences on this rotation stimulated my commitment to become a physician.</td>
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<tr>
<td>Taking everything into account, my experiences on this rotation stimulated my commitment to become an osteopathic physician.</td>
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Eval Data from: 7/25/2010 to: 11/28/2011
Resources

Section Comments

The amount of paperwork required for MSUCOM is onerous and difficult to manage. While I understand why the Encore system is set up the way it is, the amount of time it takes to enter patient's into the system and create differential diagnoses from drop down menu's takes an inordinate amount of time.

I have not heard of the "COM Unit III Website"...

I am unaware of a "COM Unit III Website" - where can I find more information about it?

I did not use the COM Unit III website.

Osteopathic Principles and Practice

Section Comments

Only one of my 3 attendings was a DO, so OMM opportunities were limited. The one DO attending I did have, however, did use some OMM on service.

Procedures

Section Comments

Night call was not offered at this facility for students. No codes were performed while I was on service, had they been I would have been able to participate.

Assessment Exams

What is your evaluation of the online modules case videos (about Tension Type Headaches) that were presented for your class group in Angel? Was it helpful as you started your clerkship rotations?

The online module had little to do with what I saw on my rotation. It was just more busy work given by the university.

I found it annoying to have to do "extra" work on Angel in addition to my clinical requirements.

Minimally helpful, only b/c I only saw one HA pt. But the lay out/content and intent of the module was appreciated.

It was helpful in one case in particular that presented with classic tension type headaches.

I really did not use any of the headache information on my internal medicine rotation. It was a good review but other than that not particularly useful during my rotation.

No, this module was not helpful for the material I encountered during my clerkship. It would have been better if it was a module on CHF or DM.

They are helpful. They are a little difficult to navigate because they take you out of the angel website.

No, I did not use the modules for my second IM rotations. I really did not see many headaches while in the hospital. The Tension Headache module was interesting but not very useful during my rotation.

I did not watch the videos on Angel. They did not seem relevant to my case load since noone I saw had a primary complaint of headaches of any time.

Not for me personally since I didn't see a single patient with headache complaints.

No, I find it easier to learn on my own time.

I never saw any causes of headache as a primary chief complaint on my rotation

yes...helped differentiate between common types of headaches

sure
I didn't really encounter this issue at the hospital, so no.

It was adequate

What other areas would you like didactic materials on, if provided online?

It would be better if we had material on subjects like anemia or interpreting lab data. These are things that we actually saw in the hospital.

None.

How to examine the painful/uncomfortable/uncooperative patient.

Anemias

I think that online modules on PE, asthma, COPD, and MI would have been much more helpful to me.

Cardiac - particularly a review of chest pain (dx, tx, etc.)

Pulmonary - shortness of breath (pulm edema, CHF, pneumonia, COPD)

Seizure - survey of types and how to differentiate based on verbal history versus witnessed seizure.

Alcohol - acute toxicity and treatment (CIWA)

I tend not to like the online didactics, because they take up time that is more efficiently used by me studying for the cases that I round on in the hospital or reading for topics that my attending gives me.

Everything else the online exam covered.

Nothing, I would rather read

The most common issues on a internal medicine rotation

Acid base physiology with regard to lab values, kidney function and blood pressure medications

More common things like anemia, CP, ABGs

I would like didactic materials that would help me do well on the end of rotation exam. I felt like the material i did study did not help me on the end of rotation exam.

Lab interpretation

Describe your experience using Angel?

It was fine, 6/10 points.

Angel has been very useful, although the Encore system is overly complicated and time consuming.

Positive

I had no problems.

Helpful, easy to navigate, convienent.

Mostly convenient, although the downtime on friday evening was very inconvenient as it forced me to do my exam over the weekend.

Angel is ok

user friendly

angel was a good way to do the shelf exam.

It was okay, confusing with the two different IM headings when trying to find the end of rotation exam.

The usual
Did you find the didactic materials (e.g. Tension Type Headaches—definition, pathophysiology, etc) that were provided online in your Angel courses to be helpful?

No

No.

see above.

Yes

They were a good review.

No.

Yes. Review of commonly seen, yet somewhat complex, conditions is always helpful.

No.

I did not watch the videos.

As a learning tool, yes.

No, I find it easier to learn on my own time

Yes it was a good simple overview of the type of HA

Yes...as above.

Yes

NO.

yes

Overall Summary - Please complete the following sentences

The most beneficial experiences, classes, assignments, or activities in all my on-campus MSU/COM courses/experiences, which facilitated my performance on this clerkship rotation, were:

Although I hate to admit it, the respiratory course helped greatly as did GU.

Studying for boards.

Basic, year one, physiology.

Systems courses

Basic sciences

The understanding of mechanisms of disease.

Pharmacology

Clinical Skills, Cardiology, GI

All systems courses

Cardiology and respiratory courses were very effective in giving us much of the knowledge needed to manage hospitalized patients. The renal course should be extended so we can gain a better understanding of the clinical application of the material

Physiology, Cardio

2nd year courses

Night call is a great opportunity to learn aspects of internal medicine that aren't always available during the day. You are more likely to be more involved in codes and rapid responses than you would during the day.
How can this rotation be improved? What additional information would you like to see on the IM650 Angel Course?

Fewer logs would be appreciated.

Perhaps posted lectures on anemia because every patient has some form.

I don't really care for the running patient log from the first IM rotation and the second - it's nice to be able to get it complete in one month and then turn it in instead of having outstanding forms to complete. Also it's kinda redundant to have Encore logs and that log.

A simpler protocol would be nice. The paperwork can be quite onerous.

More didactic material than just headaches

Less requirements so I can learn when and how I want to and for what is most beneficial for me

It would be helpful to see fewer patients, and having more time to read about certain patients. Much of the rotation involved H&Ps, admit notes, discharge summaries, consults and progress notes; as well as dictation many of these notes. Although integral to our learning, it should be remembered that we are medical students and should be learning more about what we are doing.

More lectures

The end of rotation exam seems to be based on one physicians particular opinion/experience rather than widely accepted fact. I felt as if, unless I studied materials specifically written by the test writer, I would never be able to do well on the test no matter how much I studied. I would much rather take a standardized test.

Less responsibility in terms of performing discharge summaries. More time to read about day-to-day patient cases.

The thing(s) I like most about this rotation was (were):

My attendings and the environment at my base hospital were wonderful. They really motivated me to learn.

The time working in the hospital and the ability to converse with practicing physicians.

Patient interaction and useful criticism

Dr. Barretto and the residents were amazing! I learned so much from them. The residents are extremely intelligent and it is impossible not to learn while you are around them.

Improving my ability to create a differential diagnosis, interviewing patients, thinking of treatment options and writing notes.

my attending. He was an amazing teacher and it really improves your experience when your attending is willing to put in time to give lectures and teach. We worked very long hours but I really don't mind being at the hospital until 9pm when I'm being taught. I wish that all my attending encounters were similar to this experience.

The attendings and residents

The doctors on it were amazing. I really felt supported on this rotation

The variety of cases and the amount of information you need to know to manage patients successfully was impressive

Being more involved in patient care and decision making.

Opportunity to do H&P's, dictate H&P and discharge notes, write a pt note daily.

The faculty I worked with and the diverse patient population

The attending physician on this service loved teaching, allowed students to have a great deal of responsibility and was willing to talk about the business side of medicine. I enjoyed interacting with the patients and encountering typical internal medicine pathology, determining diagnoses, and coming up with management plans.

Night call