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.

<table>
<thead>
<tr>
<th>Caseload and Management of Patients</th>
<th>N=</th>
<th>NA</th>
<th>SD</th>
<th>D</th>
<th>N</th>
<th>A</th>
<th>SA</th>
</tr>
</thead>
<tbody>
<tr>
<td>In general, there was an appropriately diverse mix of patients (including race and ethnicity) seen on this service to meet the clinical training objectives.</td>
<td>19</td>
<td>3</td>
<td>16%</td>
<td>16</td>
<td>84%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The amount of patient care responsibilities assigned to me were just about right for my current level of training.</td>
<td>19</td>
<td>4</td>
<td>22%</td>
<td>14</td>
<td>78%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I was given ample opportunity to become involved in learning about management of patient cases.</td>
<td>19</td>
<td>4</td>
<td>21%</td>
<td>15</td>
<td>79%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I felt supported and encouraged to offer my own differential diagnosis and treatment plan.</td>
<td>19</td>
<td>4</td>
<td>21%</td>
<td>15</td>
<td>79%</td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Expectations/Learning Objectives</th>
<th>N=</th>
<th>NA</th>
<th>SD</th>
<th>D</th>
<th>N</th>
<th>A</th>
<th>SA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standards for my expected level of performance (how I was to be evaluated) on this rotation were made clear to me at the outset.</td>
<td>19</td>
<td>3</td>
<td>16%</td>
<td>6</td>
<td>32%</td>
<td>10</td>
<td>53%</td>
</tr>
<tr>
<td>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.</td>
<td>19</td>
<td>3</td>
<td>16%</td>
<td>6</td>
<td>32%</td>
<td>9</td>
<td>47%</td>
</tr>
<tr>
<td>There were adequate didactics on this service to enhance my existing knowledge base; i.e. conferences were scheduled regularly and occurred as scheduled.</td>
<td>19</td>
<td>1</td>
<td>5%</td>
<td>7</td>
<td>37%</td>
<td>11</td>
<td>58%</td>
</tr>
<tr>
<td>The information presented on this rotation was presented at a pace and at a level that was consistent with my existing knowledge base.</td>
<td>19</td>
<td>1</td>
<td>5%</td>
<td>7</td>
<td>37%</td>
<td>11</td>
<td>58%</td>
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</table>

<table>
<thead>
<tr>
<th>Resources</th>
<th>N=</th>
<th>NA</th>
<th>SD</th>
<th>D</th>
<th>N</th>
<th>A</th>
<th>SA</th>
</tr>
</thead>
<tbody>
<tr>
<td>There were sufficient educational resources (computers, books, journals, &amp; other library materials) available to me on this rotation.</td>
<td>19</td>
<td>1</td>
<td>5%</td>
<td>3</td>
<td>16%</td>
<td>15</td>
<td>79%</td>
</tr>
<tr>
<td>I had access to educational resources at times that were convenient to me.</td>
<td>19</td>
<td>1</td>
<td>5%</td>
<td>4</td>
<td>21%</td>
<td>14</td>
<td>74%</td>
</tr>
<tr>
<td>The COM Unit III Website provided convenient access to course documents and materials related to this rotation.</td>
<td>19</td>
<td>2</td>
<td>11%</td>
<td>5</td>
<td>28%</td>
<td>7</td>
<td>39%</td>
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</tbody>
</table>
### Osteopathic Principles and Practice

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

<table>
<thead>
<tr>
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<td>5%</td>
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</table>

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.

### Preclinical Preparation

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

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<td>3</td>
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</table>

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.

### 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.

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

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</table>

### 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.

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</table>
**Assessment Exams**

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<th>Statement</th>
<th>N= 19</th>
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<tbody>
<tr>
<td>The post-rotation examination covered the core content areas as described in the course protocol.</td>
<td></td>
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<tr>
<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>
<td></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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<tr>
<td>I prefer shelf exams more than Angel online exams.</td>
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**Overall Assessment**

<table>
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<tr>
<th>Statement</th>
<th>N= 19</th>
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</thead>
<tbody>
<tr>
<td>This rotation offered a positive learning experience.</td>
<td></td>
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<tr>
<td>Taking everything into account, my experiences on this rotation stimulated my commitment to become a physician.</td>
<td></td>
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</tr>
<tr>
<td>Taking everything into account, my experiences on this rotation stimulated my commitment to become an osteopathic physician.</td>
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</tbody>
</table>

Eval Data from: 7/30/2010 to: 2/26/2012
Caseload and Management of Patients

Section Comments

The interns were absolutely fabulous. They were wonderful teachers and coaches and will be wonderful physicians.

Dr. Levine rotation (last 2 weeks) lacked any support or encouragement to offer treatment plans. The attending treatment plans are traditional and mostly cared about discharging patients, residents had to correct his traditional and old ways of treating certain conditions after he left.

Dr. Barretto rotation was the BEST

Expectations/Learning Objectives

Section Comments

Dr Levine rotation didactic was minimal

Resources

Section Comments

I don't know what COM Unit III website is.

Osteopathic Principles and Practice

Section Comments

I worked with two MD attendings so OMM was not considered frequently, however upon our suggestions they consulted the OMM service.

Supervision/Feedback

Section Comments

In Dr. Levines rotation H&Ps and followup notes were rarely reviewed and since he was allopathic he rarely cosigned our notes and decided to put in his own notes

Professionalism

Section Comments

Best physician that I have EVER met.

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?

didn't need to look at it because I had read about it, but I will refer to it later on when I feel like I have forgotten.

very good modules

Yes, they were helpful.

I think it was helpful at some level. but rarely did i see any patients with TTH in the hospital. i feel its an outpatient thing that i might see in PCAC

We didn't really have any complaints of headaches in the hospital but I am sure it will become very helpful in the outpatient setting.

Yes it was very informative

helpful i did those after first IM rotation
I loved the tension headache modules, since I get them. It would have been more helpful to recieve this module during PCAC though.

They were decent but they could be better.

They were informative.

I felt like there were too many parts, and made retaining the info. difficult because the material was so split up. I was still unsure of some answers on the post-test.

I enjoyed the information provided in the videos. It gave me good insight throughout my rotation.

They were helpful but I find reading in books more helpful

Good

Helpful, thorough, interesting.

N/A

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

Hyponatremia and other serious electrolyte disturbances

COPD and heart failure

The common diangoses we see. CHF, anemia, DM, COPD, asthma...

PE, CVA, Asthma, GERD, ABDOMINAL, LGIB, U GI Bleed. the workup of these common C/C in 90% of patients

A simple breakdown of the diagnoses and treatments of common illnesses/diseases.

work up for CHF, chest pain

work up for syncope

More on the most common diseases encountered in the inpatient setting and possibly more on the way a hospital is run.

Unsure

Renal functioning or different types of anemias because these are sometimes confusing things to interpret.

More on the operations of a hospital in general as well as the politics and economics that are present when running a hospital

None

N/A

Describe your experience using Angel?

It was easy to get where I wanted to go but the Encore was confusing in what we had to fill out and the requirements are also confusing.

very good

It was fine.

Good

Very user friendly as usual.

the Tension Type Headache module was easy to navigate but I really dislike the Elogin service because it is very inconvenient to use, hard to navigate and disorganized.

Easy

Overall easy to use and worked well

Eval Data from: 7/30/2010 to: 2/26/2012
I am experienced.
No comment.
Overall a useful tool
Neutral
N/A

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?

Yes.

There was only one but it was helpful.
helpful for Outpatient encounters probably

Yes.

helpful i did those after first IM rotation

Yes

They were only slightly helpful

Yes

Somewhat.

Yes, I used the information throughout my rotation.

Yes

Ok amount of time

N/A

Overall Assessment

Section Comments

My positive experiences are soley the result of the two interns I was working with. One of the attendings was helpful but the other one was unproffesional, rude and demeaning.

Dr. Levine rotation did the opposite. it showed me how it would be like if i were traditional, not keeping up with todays medicine in treatment.

On call experience was the best i think

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:

clinical skills, the patient interviews, and preceptorship

seeing patients

Working at the Friendship Clinic.

Just the overall knowledge base that I gained the first two years.

the DPR classes on how to talk to patients and ask questions and appropriate behavior of patients and physicians
Respiratory
My second year systems courses were all very helpful

Systems courses
during 2nd year.

All the second year courses as well as preceptorship experiences

Systems courses
Respiratory, Cardio

N/A

---

**How can this rotation be improved? What additional information would you like to see on the IM650 Angel Course?**

more instruction about the requirements and when they are due.

everything was good

More didactics as resources when we are interested.

I don’t really have any suggestions for improvement, besides the possibility of extra didactic options.

More voluntary modules on main topics that students will encounter on an inpatient service.

COPD, Pulmonology review

This rotation was very good. If I would change anything it would to be the schedule of the attending, but I was very satisfied when the attending was present.

I think this is sufficient

I would not like to see any additional requirements or information added. I think we have plenty of outside learning from MSUCOM. If any more were added it would be difficult to complete daily reading assignments by preceptors and do MSU requirements as well.

More OMT, better understanding of what to improve before evaluation is completed.

Nothing

Not sure

JNC7 guidelines for 3rd yrs. I knew these already, but the 3rd yrs from MSU on my service were clueless about them

N/A

---

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

the enthusiasm of my attending and how he was willing to answer any questions without feeling inferior. His excitement for his patients and medicine is contagious and I wish I had to the chance to work with him more.

is got to see my own patients and evaluate them with supervision

The independence in seeing patients and the helpfulness and support of the interns.

My physician was absolutely wonderful. He was truly a genius who inspired me everyday to read and learn, learn, learn! He was one of the best, most complete and kind physicians I have ever encountered. The residents were great too making the entire rotation a great pleasure.

The attending taking the time to talk to us about particular topics and telling us what we could improve on once in a while.

Residents very helpful and great to work with.
The attending and residents were all very good. They all taught very well and listened to our input as students and tried to work with us to make the rotation better.

Best teaching attending I have had so far.

N/A.

Didactics, NEJM articles and papers, depth of knowledge of Dr. Tran, wide range of patients, enthusiasm of Dr. Tran, ambition to help students understand concepts.

The attendings were all very knowledgable and the interns were all extremely friendly and helpful

Great faculty

Dr Tran is THE model physician. I will be nominating him for Clinical Faculty of the year.

Residents were extraordinary. Provided great deal of guidance and instruction. Learned a great deal from Dr. Barretto's daily rounding didactics.

N/A