## 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.

In general, I had an opportunity to develop procedural skills commensurate with my 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.

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<th>Caseload and Management of Patients</th>
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<td>I was given ample opportunity to become involved in learning about management of patient cases.</td>
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<td>I felt supported and encouraged to offer my own differential diagnosis and treatment plan.</td>
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## 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.

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## 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.

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### Osteopathic Principles and Practice

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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.

### Preclinical Preparation

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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.

### Supervision/Feedback

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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.

The post-rotation examination covered the core content areas as described in the course protocol.
I received ample opportunity to perform a physical examination of the obstetrical patient.

In the delivery room, I properly performed a bladder catheterization on an obstetrical patient.

I now feel as if I can properly insert a venous catheter or needle for IV fluids.

I was able to complete an accurate vaginal examination on a patient in labor and delivery.

With supervision, I am able to perform a normal vaginal delivery.

With supervision, I am able to perform an adequate midline episiotomy at the proper time.

I can accurately assign proper Apgar scores to newborn infants.

I feel prepared to deliver the placenta and examine its surface.

I feel prepared to adequately assist during gynecological surgery.

---

### 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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### Procedures

I received ample opportunity to perform a physical examination of the obstetrical patient.

In the delivery room, I properly performed a bladder catheterization on an obstetrical patient.

I now feel as if I can properly insert a venous catheter or needle for IV fluids.

I was able to complete an accurate vaginal examination on a patient in labor and delivery.

I feel comfortable scrubbing and maintaining compliance with sterile techniques.

With supervision, I am able to perform a normal vaginal delivery.

With supervision, I am able to perform an adequate midline episiotomy at the proper time.

I can accurately assign proper Apgar scores to newborn infants.

I feel prepared to deliver the placenta and examine its surface.

I feel prepared to adequately assist during gynecological surgery.
**MSU COM Online Learning Modules: Modules on Hypertension and Pregnancy, Gestational Diabetes, and Normal Delivery**

In the modules on hypertension and pregnancy, gestational diabetes, and normal delivery, the U-tube videos helped me get a perspective on the patient and the clinical presentation.

I learned a lot from the Camtasia Power Point recordings in the modules on hypertension and pregnancy, gestational diabetes, and normal delivery.

In the online modules, I prefer the questions contained within the Camtasia recordings to be at the end of the recording.

I prefer the questions to be presented separately as an Angel quiz with feedback.

The algorithms (decision chart) were very helpful in my understanding of the clinical presentation.

The literature link was helpful in my understanding of the clinical presentation.

The summary page was helpful in my understanding of the clinical presentation.

The information in the module helped me as I rotated on the floor.

My learning from the modules do not in any way reflect the types of knowledge I need while on rotation.

I did not have much time to access the modules.

**Overall Assessment**

This rotation offered a positive learning experience and stimulated my interest in this specialty of medicine.

Taking everything into account, my experiences on this rotation stimulated my commitment to become a physician.

Taking everything into account, my experiences on this rotation stimulated my commitment to become an osteopathic physician.

As a student I felt comfortable on this rotation.

### Class Year: 2012

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<th>Clerkship Rotation Evaluation Results</th>
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**Eval Data from:** 8/31/2010 to: 6/22/2011

**Print Date:** 3/16/2012
Caseload and Management of Patients

Section Comments
To mention osteopathic treatments was met with a bit of a snicker. There are research projects that have shown the benefits of OMT, and I would like to see them more implemented. I know this is likely to never happen, but I would still like to see its use.

The patient population at Providence Southfield is disproportionately high-risk, I would have enjoyed doing some L&D time in Novi.

Expectations/Learning Objectives

Section Comments
I absolutely loved the didactic sessions. There was ample opportunities for me to learn the nuances of obstetrics/gynecology, and medicine in general.

four weeks is not enough time for this rotation. Most schools have 8 weeks with four weeks dedicated to ob and four to gyn. I felt like i was at a significant disadvantage even though i learned a TON

I missed many didactic sessions due to completing a week of gyn at Novi and a week of nights.

Supervision/Feedback

Section Comments
I have not completed the exam yet.

Online Learning Modules: Modules on Hypertension and Pregnancy, Gestational Diabetes, and Normal Delivery

A thorough review of the procedures needed for this rotation is necessary during the campus orientation.

Yes
Yes

Not needed but it would be helpful

The online modules for this course that is available in Angel helped me gain medical knowledge.

yes, but I loathe Breeze

I agree. They proved very helpful

YES

Which of the modules (including the Camtasia recordings about hypertension and pregnancy, normal delivery and gestational diabetes) did you find most helpful?

Delivery; vaginally.

The normal delivery module was the most helpful

gestational diabetes, hypertension...i think we could benefit from modules more directed at gyn

What other types of online learning tools do you prefer?

The ones already listed on how to perform procedures.

none
I feel that the **hospital** orientation covered what I needed to know to be successful in this rotation.

Agreed

It was adequate, but it was more of a learn as you go from the residents situation.

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:

- Clinical skills and the female repro courses
- Female Repro
- Clinical Skills
- REPRO!!!

This rotation could have been improved by:

- Allowing more osteopathic principles to come to fruition.
- More time. 1 month may be too little time to fully grasp the obstetrical side of the rotation
- longer time
- Having one month to cover OB and GYN and do the shelf exam is too much. I think this needs to change.

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

- Morning report, didactic sessions, and interaction with the staff. Great experience!
- The residents were very key and helpful in my learning process. The morning report also facilitated my learning experience in a positive way by actively involving the students in the conversation.
- amazing residents
- I enjoyed my experience and wish I could do it again. Participating in a child's birth was one of the most significant things I've experienced in my life...If you hate the schedule of OB, you might get drawn into it, purely for the pay off's with birth! Still don't think it will be for me though...