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.

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.
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.

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.

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.
### 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 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.

### Clerkship Rotation Evaluation Results

<table>
<thead>
<tr>
<th>Class Year</th>
<th>Professionalism</th>
<th>Procedures</th>
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<tbody>
<tr>
<td>2012</td>
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Eval Data from: 8/25/2010  to: 11/28/2011  Page 3  Print Date: 3/16/2012
(MSU COM) Online Learning Modules: Modules on Hypertension and Pregnancy, Gestational Diabetes, and Normal Delivery

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<tbody>
<tr>
<td>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.</td>
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<td>I learned a lot from the Camtasia Power Point recordings in the modules on hypertension and pregnancy, gestational diabetes, and normal delivery.</td>
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<td>In the online modules, I prefer the questions contained within the Camtasia recordings to be at the end of the recording.</td>
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<td>I prefer the questions to be presented separately as an Angel quiz with feedback.</td>
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<td>The algorithms (decision chart) were very helpful in my understanding of the clinical presentation.</td>
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<td>The literature link was helpful in my understanding of the clinical presentation.</td>
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<td>The summary page was helpful in my understanding of the clinical presentation.</td>
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<td>The information in the module helped me as I rotated on the floor.</td>
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<tr>
<td>My learning from the modules do not in any way reflect the types of knowledge I need while on rotation.</td>
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<tr>
<td>I did not have much time to access the modules.</td>
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**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.
Caseload and Management of Patients

Section Comments

It would have been nice to do more pelvic exams and to be more involved with patient care plans.

Expectations/Learning Objectives

Section Comments

The residents were very helpful in leading discussions on pertinent subjects related in Ob-gyn. The didactics on the service were excellent and really helped me prepare for the obgyn shelf exam.

Preclinical Preparation

Section Comments

Our reproductive systems course was very helpful in this rotation.

Supervision/Feedback

Section Comments

I have not taken the shelf exam yet.

I'll sit for the NBOME exam tomorrow.

The ob-gyn shelf adequately represented the scope of practice we would encounter in the hospital.

Procedures

Section Comments

It was difficult to obtain the OB procedures I did. I had to be assertive to perform a cervical check. I only performed a few vaginal exams on this service. I was able to assist on gyn surgery and feel comfortable assisting there, but I never prepped a patient or inserted a venous or urinary catheter. I did a lot of H&Ps in triage and admits.

Students not allowed to perform vaginal exams on in labor patients. Majority of clinic patients refused student presence so only one vaginal exam was completed in four weeks.

We never scrubbed in on GYN surgeries. We watched from the side of the OR but it was very difficult to see what was going on. I would not feel prepared to assist if I had to scrub in today.

I never delivered a baby or placenta on my rotation, many of the opportunities I had to do this the patient did not want males in the room. I only observed a vaginal delivery.

The patient load for ob-gyn at our hospital isn't very high.

( MSU COM ) 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.

No.

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

I did not participate in the online modules. I was on service for 11-13 hours per day, plus weekly presentations I had to prepare for as well as studying for the shelf exam. Online modules were very low on my priority list since they were perceived to be low-yield and not time efficient.

No.
I had little time to complete the online modules. Our rotation required a lot of educational assignments. I was busy putting together presentations, objectives, and reading assignments for them.

I never realized that there were any modules.

agree

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

NA

Didn't really have time after a 13-15 hour night shift to watch camtasia recordings nor felt like it.

hypertension in pregnancy

What other types of online learning tools do you prefer?

NA

None

n/a

I feel that the hospital orientation covered what I needed to know to be successful in this rotation.

Yes.

No

agree

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:

The anatomy class/lab and the suture clinic.

Ob/Gyn coverage during second year. Gyn urology covered in second year.

Would have been clinical skills, but that was so long ago my vaginal exam training was rusty and it didn't get brushed up on the rotation.

2nd year OBGYN course was very helpful in this rotation.

Growth and development covered many areas in labor and delivery; as well as prenatal and postnatal care.

OBGYN

This rotation could have been improved by:

More hands-on experience.

More feedback from faculty and Residents on my performance.

Allowing students to be in the room in clinic.

allowing us to scrub in on surgeries.

More feedback and organization from attending physicians would be very beneficial to this residency program and thus make for a better rotating experience.

Being able to deliver a child with supervision

A larger patient volume.
No weekend shift, more feedback from some residents

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

The gyn surgery.
Witnessing child birth and becoming more comfortable interviewing/examining patients
Surgery
when they allowed me to deliver a baby!
Getting comfortable with a good OB/GYN hx

Enough free time to study ob-gyn material opposed to doing h&p’s and triage notes all day without time to learn about what you are doing.

OB