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.

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.

The online lecture series was helpful in understanding my patients.

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

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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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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 reflected the core content areas as described in the course protocol.
### Professionalism

I feel prepared to create a relevant master problem list, especially related to behavioral and psychosocial patient issues.

I feel comfortable entering information in the medical record using the SOAP format.

I was encouraged to write prescriptions (when indicated) for patients I saw on this service.

I am now aware of how to incorporate a behavioral patient assessment into routine verbal and written summaries.

I feel prepared to write timely and appropriate chart notes for behavioral / psychosocial patients.

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### Procedures

I feel prepared to create a relevant master problem list, especially related to behavioral and psychosocial patient issues.

I feel comfortable entering information in the medical record using the SOAP format.

I was encouraged to write prescriptions (when indicated) for patients I saw on this service.

I am now aware of how to incorporate a behavioral patient assessment into routine verbal and written summaries.

I still feel somewhat uncomfortable generating an appropriate assessment, including differential diagnosis, for behavioral patients.

I feel prepared to take an accurate and appropriate history and physical examination for patients with behavioral / psychosocial problem(s).

I feel prepared to write timely and appropriate chart notes for behavioral / psychosocial patients.

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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
Do note....Dr. AlSaidi's rotation was excellent. Negative reviews are directed towards the McLaren segments of the rotation. McLaren had limited clinical contact, replaced by lectures of questionable usefulness towards learning psychiatry or psychology .ie group activities such as meditation, yoga, shelf prep from a psychology perspective.

Expectations/Learning Objectives

Section Comments
Psychology content was neglectant of medical correlations and procedures relevant to mental status and prognosis.

Resources

Section Comments
I was charged for book rental. Books were in poor shape. One book in particular had hundreds of pages falling out. Had no option to opt out of book rental.

Professionalism

Section Comments
Dr. Al Saidi and his staff treated me professionally.

The rotation consisted of complicated instructions regarding where to be, when to be there with explicit instructions to stay put if there is a no show. No shows were frequent and we never received pages regarding these to prepare ahead of time with any extra time sitting around. A certain degree of autonomy I feel is expected as a Medical Student, there was little opportunity for this here.

A requirement for the rotation was to participate in yoga, meditation, and mindfulness medicine exercises. I felt obligated to participate despite feeling uncomfortable in performing them, and as an adult I should have the option to participate or not.

Lectures were often given without seats in the rooms, the only option being to stand or sit on floor with a yoga mat. This became more inconvenient and uncomfortable when waiting on a no show speaker.

Other lectures while in a classroom setting were directed towards self discovery and reflection. These lectures were inappropriate, invasive, and childish. More importantly these lectures did not enhance my clinical knowledge in psychology of psychiatry which is contrary to what I would be led to believe is the goal in a medical school rotation that I am paying for, for the benefit of my future patients. As an adult I have taken time in my life for reflection and self discovery, I did this in a setting that was appropriate, and free of charge.

Overall Assessment

Section Comments
I was very comfortable with Owosso Memorial and Dr. Alsaidi. At McLaren I felt that the staff we worked with did not know how to interact with medical students and did not have any ability to offer any medical perspectives during exams.

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:

Dr. AlSaidi's location offered interaction with many seasoned psychologists, as well as Dr. AlSaidi himself a psychiatrist. This offered a more balanced education than McLaren did. However throughout this rotation half of the day was spent at Owosso Memorial, with the other half at Mclaren or their family medicine building. This obviously limited the educational value of this rotation as well as the clinical time. This also eliminated the time needed to eat a healthy lunch due to the commuting between owosso and McLaren of 45 minutes to an hour (making the money they give us for lunch a moot point)!

Psychiatry

This rotation could have been improved by:

This rotation would benefit by having McLaren and Dr. Wolfe's (psychology interns included) additions eliminated from the curriculum. Focus should be placed entirely on working only at Dr. AlSaidi's location at Owosso Memorial.

Less driving between Owosso & McLaren, have scheduled lectures start on time, no rounding at McLaren, more meaningful shelf review lectures, less mindful medicine lectures, did not have last shelf review occur or even scheduled.

Less behavioral awareness and more clinical work.

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

Owosso

Working with Dr. Al-Saidi in Owosso- more patient interaction & learning, having scheduled time off to study.

I was able to ineract with many different patients.