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 present a 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.

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<th>Class Year</th>
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Eval Data from: 7/26/2010 to: 4/25/2011
### 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 reflected 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 feel prepared to insert a Foley catheter (male and female).

I can satisfactorily perform a surgical hand scrub.

I am able to gown and glove alone and with assistance.

I can perform instrument ties.

I can perform one-handed surgical ties.

I can perform surgical knots wearing surgical gloves.

I am able to properly change surgical dressings, both clean and contaminated.

I am able to suture and staple skin using sterile technique.

I am able to perform the proper exam of an acute abdomen.

I am able to prep and drape a surgical field.
This rotation offered a positive learning experience and stimulated my interest in this specialty of medicine.

My experiences on this rotation stimulated my commitment to become a physician.

My experiences on this rotation stimulated my commitment to become an osteopathic physician.

Due to this rotation, I am comfortable caring for surgical patients including pre-operative and post-operative care.
Caseload and Management of Patients

Section Comments

The attendings, residents and interns were very helpful and patient. They went above and beyond what I expected them to in order to teach me surgical techniques and appropriate patient care. I really enjoyed this rotation and felt I learned a lot.

Expectations/Learning Objectives

Section Comments

This was a great rotation

Resources

Section Comments

That surgery packet provided was very good.

Osteopathic Principles and Practice

Section Comments

OMM and OP&P were never mentioned on this service, and when I suggested using rib raising on a patient I was told it would be okay but I wouldn't be able to find the time to do it.

Individual time was spent helping us learn OMM better and it was very beneficial

Supervision/Feedback

Section Comments

It was very difficult to get feedback on my performance, and my evaluation was refused. I was told "We'll get to it when we get to it"

I was unsure of how well i was doing sometimes

I am taking the surgery shelf exam later today.

I was treated fairly

Procedures

Section Comments

All of these tasks were everyday jobs as a part of this service

I am able to administer local anesthetic.

The content of the online materials in the Angel course for Surgery reviewed the procedures I needed to be successful on my surgery rotation.

I used very little of the Angel content and found Access Surgery to be a the best online resource.
yes for the different tieing techniques was good

Yes

Yes they did

I used Surgical Recall

yes

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

it's not necessary as you learn them during the rotation

I agree

agree

Yes

I agree

YES agree 100%.

Not sure.

It would have been nice to be instructed on how to perform sutures and ties, IVs, and Foleys, etc. before starting the rotation. However the residents that we worked with were very willing to help us learn each skill on our checklist, inside and outside the OR.

this would have been helpful

This would be beneficial as trying to actively seek out these procedures, while certainly possible, was still difficult as a student. The learning experience would have been more beneficial and less intimidating if we had prior exposure to the procedures to be performed.

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

disagree, but the rotation orientation did.

I felt I had very little orientation before this rotation, and found it a very difficult service to begin on as a third year. I felt as though I was thrown at the wolves with very little guidance. Many students referred to it as “spirit crushing” and disappointing after two years of preparation.

i felt rather lost in this rotation. I was not sure what the physicians expected of me. It was clear what he school expected but never the doctors.

Yes

It didnt cover everythin but it was ok.

No, but they did warn us that the hours were quite long on the rotation.

Yes

yes, but there were 5 months between my scrub clinic and my hospital experience. It would have been more helpful to have it just a week before starting the rotation.

**Overall Assessment**

**Section Comments**

This rotation was amazing

**Overall Summary - Please complete the following sentences.**

Eval Data from: 7/30/2010 to: 3/27/2011
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 hands on patient interaction and being able to follow patients from admit to discharge was extremely beneficial.

All classes assisted me in some type of way for this rotation.

The systems courses

The one hour knot tying lesson during the respiratory systems course & having had to purchase a surgical kit so that I have my own to practice with now.

Anatomy is very important in surgery. A lot of questions asked are about anatomy.

The surgical checklist motivated me to make sure I got the most out of my rotation and guided me in what was appropriate to learn.

All systems courses were helpful in preparation for this rotation, however material regarding trauma care was the most relevant. My involvement in the Surgery interest group was also helpful in preparation for suturing.

anatomy, GI. the suture clinics helped a lot as well.

This rotation could have been improved by:

more omm on patients in pain after surgery.

going to clinic with the physicians to see the patients pre-operatively. I would also suggest that a student be put on a service when there are actually surgeries for the student to scrub in on. I did not like having days where I was not able to scrub because my attending did not have any cases.

Having more time to learn suture techniques before coming to the hospital.

A little more direction at the beginning

Not having to stay until sign out when there were no cases in the afternoon.

I thought it was great as is!

Better instruction in surgical skills before entering the rotation so that when opportunities to apply them in the OR were available we wouldn't have to turn them down because we didn't know how to perform them yet. Like suturing or ties in gloves.

I am very satisfied with my experience on this rotation.

Allowing the students to do more. Have us see patients that are consults. there is very minimal patient interaction and VERY limited student procedural experience. Instead of sending the students to read from 12-5 everyday, have us do something instead of wasting our time.

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

everything expect the long hours

I learned how to suture very well and perform ties well.

The residents and attendings were willing to teach.

The people and the approach to surgery

Being able to participate in the operating room.

I liked the attendings and the residents. Everyone was fun to work with!
The residents taught us things that we wouldn’t have learned on other services. Regardless if I go into surgery I feel I will be able to better communicate with surgeons about patients and their care. I will also be able to better assess a pre-op and post-op patient. I can now better explain to my patients what different types of surgeries are available and when and why they are necessary in certain situations. This service was very rewarding, no matter what field I will go into.

I appreciated the opportunities to assist in surgeries rather than scrubbing in and only watching. This was an important factor that has directed me towards a possible future in surgery.

Chris Morrissey was a terrific resident. Of all the residents, he is pretty much the only one that went out of his way to teach us - or even acknowledge us for that matter. The attendings were very knowledgeable and helpful.