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.
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 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.

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**Clerkship Rotation Evaluation Results**

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<th>Class Year: 2012</th>
<th>Professionalism</th>
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**Procedures**

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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.
Osteopathic Principles and Practice

Section Comments

Dr. Gorbis was at Lakeland during my rotation to give an OMT Seminar which applied to the post-surgical patient so I did learn about OMM that pertained to the patients I was seeing. However, the faculty I was with were allopathic doctors not accustomed to OMT and did not feel comfortable allowing me to something he, himself, was not qualified to do be doing.

Supervision/Feedback

Section Comments

My exam was pushed back due to scheduling issues. Have not taken it at the time of this evaluation

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.

yes
Yes

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

yes
I do not think it is necessary, but I think it would be helpful to have a review.
Yes

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

yes
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:

respiratory course and systems courses and SUTURE LAB and PROCEDURE LAB!!
Anatomy class and suture clinic
Respiratory

This rotation could have been improved by:

They need to challenge us more as far as how long we were at the hospital. I rarely worked more than a 6-8 hour shift and this did not seem commensurate with the training my colleagues are receiving at other sites. We should be required to be on-call or work nights occasionally.

nothing
Not having to reschedule the post rotation exam due to Labor day weekend and no one at MSU being able to proctor it on the Friday before.
The thing(s) I like most about this rotation was (were):

Dr. Schucknecht and Dr. Habenicht are great teachers and really allowed me to do a lot in the OR. Great docs.

I was able to scrub in on every one of his surgeries, and he had a wide variety of surgeries. Like most general surgeons he had a lot of patients who needed cholecystectomies, exploratory laparotomies, and partial mastectomies, but he also did a couple of thyroidectomies and parathyroid explorations which were interesting to participate in.

I enjoyed the attendings as well as diversity in cases.