In general, there was an appropriately diverse mix of patients (including race and ethnicity) seen at this base hospital 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 input into the anesthesia and treatment plan.

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.

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.

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

On this service there were facilities and opportunities available to support learning about chronic pain management.

Faculty knowledgeable in the appropriate use of chronic pain management in case management were available to me as needed.

I had opportunities to be involved in chronic pain management.

I am interested in opportunities to study chronic pain management.

**Preclinical Preparation**

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**

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.

<table>
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<th>Procedures</th>
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<tbody>
<tr>
<td>I have had opportunities to ventilate patients using bag/mask.</td>
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<tr>
<td>I have had opportunities to intubate patients.</td>
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<td>I have had opportunities to insert nasogastric tubes.</td>
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<td>I have had opportunities to start peripheral IV’s.</td>
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<td>I have had opportunities to observe regional anesthesia (spinal/epidural).</td>
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<td>I have had opportunities to participate in the utilization of regional anesthesia (spinal/epidural).</td>
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<tr>
<td>I was given enough training and orientation during my years one and two in these procedures.</td>
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<tr>
<td>I feel the on-campus orientation (online) prepared me for these procedures.</td>
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<td>I feel the hospital orientation prepared me for these procedures.</td>
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**Clerkship Rotation Evaluation Results**

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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

None.

Expectations/Learning Objectives

Section Comments

Dr. Berris did give lectures but he was away on vacation the second week and the other physicians offered minimal instructions or didactics.

None.

Resources

Section Comments

None.

Chronic Pain Management

Section Comments

None.

Preclinical Preparation

Section Comments

None.

Supervision/Feedback

Section Comments

With the exception of Dr. Turner, the other docs were not welcoming to students. On the second to last day of the rotation, Dr. Barris told the students we were doing things wrong after never giving us guidance to begin with. Very frustrating.

None.

Professionalism

Section Comments

Dr. Berris was very professional when he was present.

None.

Procedures

Section Comments

None.

Internet/Web-Based Experience

The most favorable aspect(s) of this web-based learning experience for me was (were):

the availability and content.

The drop-box quizz
informative and to the point
hands on learning
The interactive format
Relevant information.

I would have been better prepared if only the protocol had said something about:
--
Specific procedures
no comment
No suggestions.

If I could change one thing to make this web-based learning experience more beneficial it would be to:
--
The online post-quizz
Add more quiz questions. The online quizzes weren't effective because they weren't in depth enough to gain a greater understanding, and just scratched the bare surface of the understanding that was expected on the service.
more case presentations
videos that show more procedures
Would add more information
No suggestions.

Overall Assessment
Section Comments
After Dr. Berris went on vacation I learned very little about Anesthesia. It may have been better if it wasn't my first rotation and I knew how to handle the situation but the other physicians did nothing to help me learn more about their profession. However, when Dr. Terner was around he made an effort to teach and made the experience much more enjoyable.

I felt very uncomfortable on this rotation. I had difficulty intubating certain patients because I was so nervous I would be yelled at that I was literally shaking. I would appreciate constructive criticism as opposed to outright shouting. There are no residents on this service and it is not a teaching service at all - I saw 1-3 patients per day and for the other 5-7 hours I sit and wait. I felt extremely uncomfortable and incompetent on this service and it left me questioning whether or not I should become a physician.

On a daily basis I was not looking forward to attending this rotation. In order to get any attention, participate in any skills, or learn anything I had to follow around the attendings non-stop. If I didn't chase after them my rotation would have consisted of me sitting in the lounge for the entire two weeks.

There was an overall lack of structure in this rotation. Students were often unclear about what was expected of us.

None.

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:
Pulmonary / Airway management.
The actual hands-on anesthesiology procedures.
respiratory course
n/a, maybe resp by default
Respiratory course, on-campus orientation, ACLS training.
Respiratory intubation.
Personal reading.

This rotation could have been improved by:
physicians that care to teach. Outside of Dr. Berris (whom was on vacation for half my rotation) and Dr. Terner, the attending physicians did little to teach me anything about Anesthesia.
See above comment
The rotation would have been more enjoyable if there were more teaching.
more onsite didactics
better teaching environment
Being done at a hospital with physicians who were interested in teaching and were not trying to avoid contact with students.
More faculty interest in students
I wish the doctors were more interested in teaching.
No suggestions.

The thing(s) I like most about this rotation was (were):
The opportunity to intubate.
Nothing
Intubation
intubating patients
hands on learning
Very little
Hands on, I learned new skills.
Being given the opportunity to intubate patients.
Working along side the attending anesthesiologists.