### Caseload and Management of Patients

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.

### 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.

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

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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.

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.
I have had opportunities to ventilate patients using bag/mask.

I have had opportunities to intubate patients.

I have had opportunities to insert nasogastric tubes.

I have had opportunities to start peripheral IV's.

I have had opportunities to participate in the utilization of regional anesthesia (spinal/epidural).

I was given enough training and orientation during my years one and two in these procedures.

I feel the on-campus orientation (online) prepared me for these procedures.

I feel the hospital orientation prepared me for these procedures.

Issues of professionalism were included as a point of discussion by faculty on this rotation.

Issues of professionalism were included as a point of discussion by faculty on this rotation.

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.

Professionalism

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<th>Procedures</th>
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<td>I feel the on-campus orientation (online) prepared me for these procedures.</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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<td>I feel the on-campus orientation (online) prepared me for these procedures.</td>
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### Internet/Web-Based Experience

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<td>Online instructions for navigating through the web-based materials were clear enough to follow</td>
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<tr>
<td>I experienced technical problems accessing the web-based content</td>
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<tr>
<td>The online quizzes helped me assess my knowledge of the content I just learned</td>
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<td>Learning in this way helped prepare me for my rotation</td>
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<td>I really liked learning in this web-based format</td>
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### Overall Assessment

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<td>This rotation offered a positive learning experience and stimulated my interest in this specialty of medicine.</td>
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<td>Taking everything into account, my experiences on this rotation stimulated my commitment to become a physician.</td>
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<td>Taking everything into account, my experiences on this rotation stimulated my commitment to become an osteopathic physician.</td>
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<td>As a student I felt comfortable on this rotation.</td>
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Caseload and Management of Patients

Section Comments

The rotation was not organized very well at all.

There were so many students on the service at one time, that it was difficult to get individual learning opportunities in.

Expectations/Learning Objectives

Section Comments

I wish there was more teaching involved. It all depended on if you got a nicer doctor who wanted to teach. They had such a large patient load that it was hard for them to teach us. Or some doctors just didn't want to. Overall some teaching was done. They gave us a study packet too which was nice.

Communication between the attending physicians and the students was lacking at the beginning of the rotation.

Resources

Section Comments

The computers in the hospital library were available to use. There was a packet of information related to anesthesia that was provided to us.

Chronic Pain Management

Section Comments

There were no issues with chronic pain. There was a lot of acute pain management, general anesthesia, spinal anesthesia, epidural anesthesia, and nerve blocks.

Preclinical Preparation

Section Comments

The most beneficial course was anatomy.

Supervision/Feedback

Section Comments

Haven't taken exam yet. Taking today.

There was not much direction on what to do during the rotation. I felt like I was chasing around the attending physicians to figure out what was going on.

Procedures

Section Comments

There was no hospital orientation. They did give us a packet though.

I feel like we should have practiced starting IVs and focused more on spinal, epidural, and nerve blocks during the first two years. We did have enough practice on intubating dummies.

Internet/Web-Based Experience

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

that I was able to complete it when I had time available in my schedule

It was an orientation of some sort. Good to go through something for the rotation.

Not having a lot of paper in front of me

Eval Data from: 8/1/2011 to: 9/9/2012
Having exposure to the material that I would most likely experience in the rotation

Getting opportunities to intubate patients.

The presentation was well done and covered the important topics.

It is convenient

I would have been better prepared if only the protocol had said something about:

- I felt well prepared
- Ultrasonography for administering nerve blocks.
- Nothing.

Could have discussed more about the specific technique involved in some of the procedures, especially intubation.

If I could change one thing to make this web-based learning experience more beneficial it would be to:

- Have a printable PDF document with important info and concepts that we could take with us on rotation
- Have the person talking also say what was on the screen. It was a little annoying to listen, then pause the read what was on the screen. Its ok if they just want to talk through it, but it was fine overall
- A system that delivers video content smoother.
- Have stand alone quizzes - not imbedded in the video/powerpoint presentations.
- Nothing.
- Other lectures could be added to increase the detail of information.
- Include short videos on topics that can be used as a pod cast and viewed on ipod in hospital

Overall Assessment

Section Comments

Since there was no "team" or assigned physician, sometimes it was awkward waiting around with nothing much to do. When it was busy, it was fine, but when some anesthesiologists didn't want us seeing their patients, or it was slow, it was awkward. Some of the doctors just aren't welcoming as others. Would walk by without saying anything to us. but it was fine i guess.

The rotation was not very organized.

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 class and the intubation workshop were the most helpful
- Respiratory and physiology (as far as drug receptors)
- Respiratory, anatomy.
- Pharmacology and respiratory were the most helpful courses in preparation for this rotation.
- ACLS training
- The hands-on course during second year where we learned to intubate and perform other procedures was very helpful.
- Clinical skills
This rotation could have been improved by:

Start the rotation by spending a couple days with a CRNA and learning the instrumentation, then spending the remaining time doing H&P's/post-op care and pulling it all together.

maybe having us assigned to a few anesthiologists. But maybe not. It was nice I guess having flexibility because we could gravitate to the nice ones or ones that taught, but it was sometimes hard not getting to know one a few days in a row. Maybe have doing a spinal block a suggested procedure for students to do if the doctor will let you. I would have liked to do that.

Getting more guidance on what to do during the rotation. It felt like I was chasing after people the whole time.

This rotation could have been improved by having a bit more structure to our time in the pre-op/OR areas.

Nothing.

There were five other interns and students on the rotation at the same time as me. There are usually 1 or 2 total. The patient load was not as sufficient and I was not able to participate in as many procedures as I would have liked.

More organization. it was a great rotation and the attendings were very good teachers, all patient and wanted to give student's opportunities to do do procedures, but there was very little overall organization.

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

Being able to intubate patients

I got a lot of hands on experience intubating. Overall the nice doctors were nice and taught. Got a lot of good experience doing H and Ps.

Being able to perform procedures. It was nice trying procedures on real people instead of dummies.

What I liked most about this rotation was the willingness of the attendings to teach, when it did occur.

Having the chance to intubate and do a spinal.

Being able to participate in the procedures. Learning the basic pharmacology and principles behind the use of anesthetic agents.

Great attendings, who wanted to teach. Good hands-on experience. Enabled students to become comfortable with procedures.