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.

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.

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 Unit III Website provided convenient access to course documents and materials related to this rotation.
**Osteopathic Principles and Practice**

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.

<table>
<thead>
<tr>
<th>Osteopathic Principles and Practice</th>
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**Preclinical Preparation**

I could readily apply the *basic science* content I learned in Year 1 to understand mechanisms of disease in my patients.

I could readily apply the *systems biology* content I learned in Year 2 to understand patient presentation and appropriate diagnostic testing.

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**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 sought and received mid-rotation feedback to improve my performance.

On this service, there was always someone available to answer my questions when I had them.

My H&Ps were reviewed and critiqued for content and completeness by a senior resident or attending regularly.

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### 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 was permitted to observe code blue resuscitations when performed on this service.

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

I was encouraged to write admit orders on internal medicine cases being hospitalized.

I was encouraged to participate in night-call responsibilities as directed in the course protocol.

I was given opportunities to interpret common lab and imaging tests.

<table>
<thead>
<tr>
<th>Class Year: 2013</th>
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### Assessment Exams

The post-rotation examination covered the core content areas as described in the course protocol.

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Having a post-rotation exam encouraged me to study and read.

### Overall Assessment

This rotation offered a positive learning experience.

Taking everything into account, my experiences on this rotation stimulated my commitment to become an osteopathic physician.
Caseload and Management of Patients

Section Comments
The residents and attendings were very good and receptive when I asked about the patient care. They also asked many times what should I do with this patient. It is my patient how do I manage them. The only problem is with the hospital and that we are unable to write notes. We are able to write practice notes but not in the charts.

Expectations/Learning Objectives

Section Comments
Dr. Khan is a great teacher. I appreciate the time that he spends to go over a problem and then explain a differential. I wish that more doctors would be like him in the way that he teaches.

Osteopathic Principles and Practice

Section Comments
This is not an Osteopathic rotation and there are not any D.O.s here.
There are not any D.O. faculty on our service. I did try a few times to practice my skills but there was not anyone around to teach, observe, or critique.

Supervision/Feedback

Section Comments
The senior resident was extremely helpful and able to teach. I would like to have spent more time with the attending though.

Procedures

Section Comments
We are unable to write prescriptions or add any orders into the computer, per hospital regulations.
I was able to practice writing H&P's however, our notes are not able to go into the computer and we are not able to write prescriptions nor have much responsibility. I am able to practice but when the residents are swamped with patients, it is difficult for them to be able to put aside the time to go over everything. I still feel like I need the practice writing a prescription and all of the other orders that go along with admitting a patient.

Overall Assessment

Section Comments
I still like the mentality of an osteopathic physician and I think that the compassion and clinical skills we are taught shows when talking to patients.

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:

Clinical Skills, DPR
Clinical Skills, DPR
Clinical skills.
Cardiology was very helpful to me. I was able to interpret EKG's with more confidence by the end of the rotation.
How can this rotation be improved? What additional information would you like to see on the IM650 Angel Course?

Be assigned to Osteopathic Physicians, maybe be in an Osteopathic Hospital, Come to terms with the DME and MSUCOM representatives as what is expected and how can both parties (more so the hospital) work with MSUCOM students in the future to provide more opportunities of learning and educating and being put into real life situations

I think that different modules on chest pain, shortness of breath, N/V would be good to help us come up with a differential. Also maybe a module on writing prescriptions again.

I would like a review about writing a prescription. I would also like to have a few suggestions about the approach to the most common seen illnesses. Such as CHF, renal failure, and diabetes.

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

my team that I was assigned

I thought Dr. Khan was amazing. He is so genuine and caring. He loves to teach and actually takes the time out to teach. Dr. Aggarwal was chief resident and he was also amazing and would hold us responsible for patients and would go over board review questions with us. Dr. Khan should be recruited to be part of MSU Faculty at this hospital since we are a new program. Compared to all the attendings in my experience thus far, he was the best and he loves to teach and teaches really well.

The way Dr. Khan teaches.

I enjoy the patients and the relationships I have built with them.