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 offer my own 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 covered the core content areas as described in the course protocol.

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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 received ample opportunity to perform a physical examination of the obstetrical patient.

In the delivery room, I properly performed a bladder catheterization on an obstetrical patient.

I now feel as if I can properly insert a venous catheter or needle for IV fluids.

I was able to complete an accurate vaginal examination on a patient in labor and delivery.

I feel comfortable scrubbing and maintaining compliance with sterile techniques.

With supervision, I am able to perform a normal vaginal delivery.

With supervision, I am able to perform an adequate midline episiotomy at the proper time.

I can accurately assign proper Apgar scores to newborn infants.

I feel prepared to deliver the placenta and examine its surface.

I feel prepared to adequately assist during gynecological surgery.

### Clerkship Rotation Evaluation Results

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Eval Data from: 8/2/2011 to: 6/19/2012

Page 3

Print Date: 3/28/2013
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.

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### Clerkship Rotation Evaluation Results

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### Class Year: 2013

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Page 4
Caseload and Management of Patients

Section Comments

I felt the residents did an excellent job with didactic education, however, I had next to no hands on opportunities. I did not perform a cervical check or assist with a delivery and that is something I would have liked to been able to try.

We were not given a lot of responsibility on this rotation and we were not very involved with surgical cases and OB cases on the floor

I felt ignored a lot of the time I was on this service. I know the residents are all really busy, but I was interested in what was going on. Sometimes it is hard as a third year to get involved because you don't want to bother anyone. It would have been nice if the residents had put a little more effort into involving us in their activities.

Often I was left with family practice residents. On nights our duties were very poorly outlined and I felt like my requirement was just "to be there".

Expectations/Learning Objectives

Section Comments

Excellent didactic sessions.

The lectures given by the WSA group were AWESOME! The resident didactics on Thursday mornings were also good learning opportunities.

The didactic sessions were hit or miss.

The morning WSA lectures are great!

Resources

Section Comments

Osteopathic Principles and Practice

Section Comments

no OMM

Preclinical Preparation

Section Comments

Supervision/Feedback

Section Comments

it was very hard to find residents to talk to and to ask questions to.

The residents were available to answer questions; however, sometimes I got the feeling like I was annoying them by asking questions. As someone who likes to learn something every single day I am on a service, I didn't always feel like the residents on this services were open to teaching me things.

They did not comment on any of our notes
While on gynecologic surgery part of this rotation I was able to scrub and assist for most procedures but I did not participate in any of the vaginal deliveries, I only observed so I do not feel competent in the above skills.

Often the resident would just execute most of the exams. I was told because he could do them faster.

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

It would be nice to have a review of the procedures we will be encountering during this rotation so that I would feel more prepared going into the rotation.

No

don not agree

I think more practice with suture/tying knots is needed in 2nd year....specifically more on one handed tie not instrument ties.

Yes

It would have been nice to have a vaginal delivery simulation during our Repro class with the fake pelvis and doll like we use at the hospital. Also an intro to surgical equipment would have been nice.

The online modules for this course that is available in Angel helped me gain medical knowledge.

agree

yes

I wasn't aware of any online modules

i did not use them

some what

Not much time to go over the modules.

Yes

not enough time to watch them
Which of the modules (including the Camtasia recordings about hypertension and pregnancy, normal delivery and gestational diabetes) did you find most helpful?

- Hypertension and pregnancy because we saw quite a few patients with gestational hypertension and preeclampsia
- Normal delivery
  - I did not use them
- N/A

What other types of online learning tools do you prefer?

- There were adequate online modules.
  - Combank questions and the website for our textbook used in second year.
  - I use books.

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

- Agree
- Yes
- No
- Agree
- Yes
- Yes
- Somewhat
- Agree.

Overall Assessment

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:

- The skills lab sessions in Thursday didactic education, getting to scrub and assist with gynecologic surgeries, and rounding on the post partum patients each morning. I feel that I get the most out of hands on clinical experiences.
- Female Repro class
- OB/GYN class during 2nd year
- The textbook.
This rotation could have been improved by:

Having less students on at one time. There were over 8 visiting fourth years here over the course of my rotation. While I was the only third year, I was assigned only 1 patient a day and there was an entire week when I did not even see a vaginal delivery. I felt the residents were good teachers but there were just too many students on for us to each get a fair amount of clinical experiences.

Better residents who take interest in teaching students and allowing us to participate in patient care

Better organization and time commitment to the furtherment of student education

Having the residents be a little more open and respectful of the students. Let us know what you expect of us. A 5 minute orientation doesn't give us enough information for us to feel comfortable, and we can't always read your minds about what you would like us to do.

the opportunity to follow an attending for a day to see what their life is like as opposed to just shadowing the residents.

Meeting all of the attendings at the beginning of the rotation

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

Gynecologic surgery, rounding in the morning and attending journal club.

patient interaction

Assisting vaginal deliveries

The attendings were very helpful, when we saw them.

getting to deliver babies!

Hands on experience with deliveries