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.

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.
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.

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.

### 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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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 an osteopathic physician.

Due to this rotation, I am comfortable caring for surgical patients including pre-operative and post-operative care.
Caseload and Management of Patients

Section Comments

I was encouraged to put differential diagnosis and treatment in notes, but a discussion was rarely brought up.

Preclinical Preparation

Section Comments

Of course they assisted me in my learning... The time that was spent on irrelevant details in my first 2 years was frustrating. I could have gained all that knowledge in a matter of 2 months. Basically, the first 2 years of medical school are like keeping a cup under a jet powered faucet with the cup being my brain and the water being my medical knowledge. No matter what you will always end up with the same amount of info in there (A partially filled cup). Wouldn't it be better to give us the essentials? And maybe teach us how to start an darn IV?

The content of the online materials in the Angel course for Surgery reviewed the procedures I needed to be successful on my surgery rotation.

Agree
Agreed
yes
True.

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

Disagree
Disagree. They should be taught during 1st 2 yrs of medical school
yes
Yes, this would have been helpful
True.

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

Agree
Agreed
yes
True.

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:

- Making a presentation on a formal topic. I forced me to learn in more depth about a particular subject.
- Anatomy
- Absolutely NONE beside the scant knowledge I acquired during my system courses.
- suture clinic
daily rounding on patients, participating in surgical procedures
Surgery Club.

This rotation could have been improved by:
Teaching about disease states more would have improved my experiences, as well as talking about assessing and planning post-op and pre-op.
Having the ability to follow patient progress from clinic all the way to post op.
Great rotation and learning experience. None that I can think of beside allowing us to go home slightly earlier to review what we have seen.
more hands on time for cases
More didactics
No Suggestions.

The thing(s) I like most about this rotation was (were):
Experience in doing H&Ps, Work on writing notes. Plenty of practice scrubbing in, and being part of the surgery team.
The physicians were great to work with and enjoyed teaching
Great people who were very helpful. I learned a great deal because my attending physician took the time to explain patient pathology after we see each patient.
OR
Residents and attendings were very helpful and knowledgable.
Hospital staff.
Hands on, got to do alot.
Students were allowed to scrub-in and assist with the surgeries.