Feedback For Program Location:

Dr. Hollingsworth's Office By Dr. Hollingsworth in Edmonton, AB

by 3 students on April 22nd, 2011

OCPM Student Program Evaluation Feedback Form

- 01. In surgery, did you ...:
 - a. Scrub-In?

Yes 0% No - 100%

b. Glove & Gown?

Yes 0% No - 100%

c. Act as Scrub Nurse?

Yes 0% No - 100%

d. Retract or Assist in Surgical Field?

Yes 0% No - 100%

e. Suture?

Yes 0% No - 100%

f. Perform Skin-Skin Procedures?

Yes 0% No - 100%

Program Requirements & Reccomendations

- 02. Please type in your answers to the questions below. (Note: 500 character maximum for each question)
 - a. What specific preparation should future students do prior to participating in this program?
 - Biomechanics
 - Biomechanics
 - biomechanics revieworthotics review
 - b. What instruments or materials were you required to bring?
 - Scissors
 - None
 - scissors absolutely necessary
 - c. What were your chief responsibilities on this program?
 - Primary care with biomechanics focus
 - Assist in office
 - orthotic modificationscut toenailsanesthesia injections for ESWTcast for orthotics
 - d. What were the most valuable learning experiences of this program?
 - Biomechanics orthotic prescriptionmodification
 - Learning clinical biomechanics
 - biomechanical orthotic modifications and orthotic prescriptions writing
 - e. What aspects of this program need improvement and/or attention? Please make suggestions.
 - None
- 03. Which best describes the location of this practice or hospital site:

- Rural Area 0%
- Small Town 0%
- Small City 0%
- Suburb 0%
- Large City 0%
- No Answer 100%

Additional Costs & Activities

04. Please type in your answers to the questions below about activities and necessary items. (Note: 500 character maximum per question)

- a. If there was free time on weekends from this program, what did you find to do?
 - Worked every other Saturday
 - West Edmonton Mall Family nearby for me
 - drove home to see my family in BC
- b. If free housing was provided, please list where.
 - With Dr.Hollingsworth
 - Dr. Hollingsworths house
 - no housing
- c. If there was NO housing provided, please list where you stayed and the cost.
 - o 0
 - ∘ na
 - with a friendfree
- d. Where free meals provided? Yes No If not, where did you eat and at what cost per week.
 - Yes Dr.Hollingsworth fed me
 - Yes
 - no-ate at home for minimal cost
- e. Did you need a car for the program?
 - Yes
 - No
 - yes absolutely a different office every day in a totally different part of the city
- f. If you did need a car, how many miles a day did you drive?
 - Dr.Hollingsworth drove to the offices
 - NA
- g. How much did the transportation to the program and back cost?
 - 500
 - ⋄ 1000
 - free-airmiles flight to Edmonton
- h. Is there a residency program associated with this program?
 - No
 - No
 - o no
- i. Did you experience any special problems at this program? If so, what were they?
 - No
 - No
 - o no

Hour & Patient Estimates

- 05. List the average number of hours you spent on the program each day of the week:
 - i. Monday

5AM

5PM hour(s).

ii. Tuesday

7AM

•	704 h (-)
	7PM hour(s).
iii.	Wednesday
	7AM
	7PM hour(s).
iv.	Thursday
	7AM
	7PM hour(s).
V.	Friday
	5AM
	5PM hour(s).
vi.	Saturday
	5AM
	4PM hour(s).
vii.	Sunday
	0AM
	0PM hour(s).
06. Whapplicate	nich hours and days of the week were spent participating in the following: (List all office sites and hospitals if able) ex. MTWTh 8a-3p, Sa 1-2pm, Su 10-11a
a.	Office hours • All
	M-Sat 7am-7pm
b.	 TWT 7am-7pm sometimes as late as 8:30pm Hospital Floors or Surgery hours
	none0
	◆ 0
C.	Hospital Clinic hours o none
	• O
d.	♦ 0 Nursing Home hours
	none
	○ 0○ 0
e.	Other hours
	All M-Sat 7am-7pm

- 07. Please fill in the totals below.
 - a. Total number of patients seen by the end of the program:
 - 900 Average Number of Patients seen by 3 students.

• TWT 7am-7pm sometimes as late as 8:30pm

- b. Total number of hours spent in program activities by the end of the program:
 - 166.67 Average Total Hours spent by 3 students.
- 08. Please list any areas of concentration observed while attending this program?
 - Biomechanics
 - Biomechanics
 - biomechanics

09. Average number of patients per day, including hospital rounds:

a. Office: — 82 b. Hospital: — 0

10. Rate this program overall on a scale of one to ten. 10 is best:

— 9.67 out of 10 Average Rating of 3 students.

11. Would you reccomend this program?

Yes: — 100% No: — 0%