Feedback For Program Location:

Gundersen Lutheran Med Foundation By Dr. Dawson in LaCrosse, WI

by *5* students on April 19th, 2011

OCPM Student Program Evaluation Feedback Form

01. In surgery, did you ... :

a. Scrub-In?

Yes 100%
No - 0%

b. Glove & Gown?

Yes 100%
No - 0%

c. Act as Scrub Nurse?

Yes 0%
No - 100%

d. Retract or Assist in Surgical Field?

Yes 100%
No - 0%

e. Suture?

Yes 100%
No - 0%

f. Perform Skin-Skin Procedures?

Yes 20%
No - 80%

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?
   - Knowing classifications systems would prove helpful
   - review OR procedures pod med review for clinic need to prepare one short presentation
   - be prepared to work!!
   - Classification systems Surgical procedure knowledge
   - Study
b. What instruments or materials were you required to bring?
   - Not required to bring instruments but it was beneficial to have a monofilament tuning fork and bandage scissors on hand. McGlamrys Textbook if you have it if not there is one in their medical library.
   - SWMF Lab coat
   - white coat
   - None
   - Nothing
c. What were your chief responsibilities on this program?
   - See patients in clinic and present to the physician help in the nail clinic when needed assist during surgery.
   - assist in OR dx and treat patients in clinic
   - assist in surgery clinic on call one week and one weekend
   - Help in surgery see patients in clinic
   - Assist surgery. See pts in clinic
d. What were the most valuable learning experiences of this program?

- Since this was my first externship everything was a valuable learning experience.
- great balance of clinical and surgery excellent group of doctors that are geared to really teaching!
- OR time suturing
- Learning from the entire staff
- interesting cases.

e. What aspects of this program need improvement and/or attention? Please make suggestions.
- This program has limited ankle exposure due to ortho relationship
- More time in surgery and less in clinic
- NONE!
- more time in surgery.

03. Which best describes the location of this practice or hospital site:

- Rural Area - 0%
- Small Town - 40%
- Small City - 60%
- Suburb - 0%
- Large City - 0%
- No Answer - 0%

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?
- Explored LaCrosse. Its located right on the border of Wisc. Iowa and Minnesota along the Mississippi River. If you like outdoors its great!
- Spent time with parents visited river front and parks studied
- hiking explore the town
- Hiking and biking
- relax

b. If free housing was provided, please list where.
- They have ResidentStudent housing next to the hospital.
- yes apartments are right next to hospital
- behind the hospital
- Michael Erickson medical student housing furnished motel style room
- close to hospital

c. If there was NO housing provided, please list where you stayed and the cost.
- NA
-
- NA
-
- 0

d. Where free meals provided? Yes No If not, where did you eat and at what cost per week.
- They offer free breakfast and lunch if you attend the morning and afternoon conferences. Also you eat free for dinner the week you are on call.
- free meal only during call week local and chain restaurants within minutes from hospital
- 1 free meal a day when on call. None the rst of the week
- yes while on call
- when on call 1week

e. Did you need a car for the program?
- No
- No
- No
- no
- yes

f. If you did need a car, how many miles a day did you drive?
- NA
-
- NA
- 0
- 5 to onalaska clinic

g. How much did the transportation to the program and back cost?

- The cost of gas.
- 160 total
- cost to get here in gas and tolls - not sure
- 150
- 300

h. Is there a residency program associated with this program?
- Yes
- yes
- Yes
- yes
- yes

i. Did you experience any special problems at this program? If so, what were they?
- No
- All the doctors were great except one. He was not bad but didnt let me do anything and was extremely type A things had to be perfect.
- Not spending enough time with the residency director. Residents dont get a say in the new resident.
-
- no

Hour & Patient Estimates

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

i. Monday

7AM

5PM hour(s).

ii. Tuesday

6AM

7PM hour(s).

iii. Wednesday

6AM

5PM hour(s).

iv. Thursday

7AM

5PM hour(s).

v. Friday

7AM

4PM hour(s).

vi. Saturday

0AM

0PM hour(s).

vii. Sunday

0AM

0PM hour(s).

06. Which hours and days of the week were spent participating in the following: (List all office sites and hospitals if

applicable) ex. MTWTh 8a-3p, Sa 1-2pm, Su 10-11a

a. Office hours
    - NA
    -
    - na
    - MTWTHF 8am-5pm
    - MTWThF 8-5
b. Hospital Floors or Surgery hours
    - TWThF 6
    - T 6-12 Th 6-4
    - T 630a-6p most weeks. Others Th 630a-6p
    - T and Th 6 am - until finished usually around 7 pm
    - 7daysmonth and weekendsnights when on call 1week
c. Hospital Clinic hours
    - MTWThF 8:30a-4pm
    - M 7-4 TWF 12-4
    - MWTHF 8a-5p most weeks Others only MWF 8a-5p
    -
    - 8-5m-fri
d. Nursing Home hours
    - One Saturday 9-2pm
    - One Saturday 8-12
    - na
    - one weekend 8am -12pm
    - 1weekend sat 8-12
e. Other hours
    - NA
    -
    - na
    - MTWTHF 8am-5pm
    - MTWThF 8-5

07. Please fill in the totals below.

a. Total number of patients seen by the end of the program:
— 220 Average Number of Patients seen by 5 students.
b. Total number of hours spent in program activities by the end of the program:
— 224 Average Total Hours spent by 5 students.

08. Please list any areas of concentration observed while attending this program?

- NA
- None
- Clinc skills. Dictating.
- 5050 surgery clinic
- clinc

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

a. Office: **— 11**
b. Hospital: **— 4**

10. Rate this program overall on a scale of one to ten. 10 is best:
— 9.4 out of 10 Average Rating of 5 students.

11. Would you reccomend this program?

Yes: — 80%
No: — 20%