

## Feedback For Program Location:

Metrowest Medical Center By Dr. Adams in Framingham, MA

by 7 students on April 20th, 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 28.6%

No - 71.4%

d. Retract or Assist in Surgical Field?

Yes 100%

No - 0%

e. Suture?

Yes 100%

No - 0%

f. Perform Skin-Skin Procedures?

Yes 28.6%

No - 71.4%

## Program Requirements &amp; Recommendations

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?

- ◊ HAVE BASIC KNOWLEDGE OF BASIC PODIATRIC CASES
- ◊ review radiology
- ◊ review post op notes inhouse note writing
- ◊ Prepare by reading McGlamrys
- ◊ Practice basic OR protocol and duties
- ◊ Know pedal exam and basic surgery information
- ◊ have a basic understanding of podiatry

b. What instruments or materials were you required to bring?

- ◊ STETHOSCOPE BANDAGE SCISSORS WEINSTEIN
- ◊ clippers drummel semmes weinstein tuning fork OED
- ◊ suture scissors
- ◊ Scissors steth Tuning fork SWM 5.07
- ◊ bandage scissors
- ◊ Basic exam instruments
- ◊ none

c. What were your chief responsibilities on this program?

- ◊ SHADOWING RESIDENTS AND PERFORMING THEIR DUTIES
- ◊ show up and work
- ◊ rounding scrubbing in on cases clinic work
- ◊ Assisting in surgery a presentation reviewing one journal article seeing patients in clinic post-op patients

- in Dr. Adams office
- ◊ follow residents assist observe
- ◊ Clinic and Scrub in OR
- ◊ following the residents around
- d. What were the most valuable learning experiences of this program?
  - ◊ MODALITIES OF TREATING PATIENTS AND TAKING PROPER HISTORY AND LEARNING TO BE A GOOD RESIDENT
  - ◊ surgery
  - ◊ surgical exposure
  - ◊ Seeing surgery and post-op patients can take an active role in patient care in hospital and Dr. Adams office
  - ◊ forefoot sx
  - ◊ Following cases from the clinic all the way thru to OR and postop
  - ◊ being in the OR
- e. What aspects of this program need improvement and/or attention? Please make suggestions.
  - ◊ COMPUTERIZATION OF THE DOCUMENTATION AND FILING SYSTEM
  - ◊ more rearfoot
  - ◊ RF cases
  - ◊ Residents could have involved the student in rounding activities
  - ◊ rearfoot sx
  - ◊ kind of slow when I was there and didnt see much

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

- Rural Area - 0%
- Small Town - 14.3%
- Small City - 28.6%
- Suburb - 57.1%
- 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?
  - ◊ VISIT BOSTON NEW YORK
  - ◊ relax
  - ◊ shopping eating out boston
  - ◊ Visited surrounding areas
  - ◊ visit surrounding area
  - ◊ Went to Boston and the Cape
  - ◊ go to Boston Providence
- b. If free housing was provided, please list where.
  - ◊ NONE
  - ◊ old colony inn 600
  - ◊ none
  - ◊ No
  - ◊ nope
  - ◊ NA
  - ◊ no
- c. If there was NO housing provided, please list where you stayed and the cost.
  - ◊ BOSTON WITH FRIENDS
  - ◊ Old colony inn 600
  - ◊ Jamaica plain
  - ◊ Old Colony Hotel - 20day
  - ◊ local hotel 900 for month
  - ◊ Extended Stay Hotel in Westborough
  - ◊ with a friend
- d. Where free meals provided? Yes No If not, where did you eat and at what cost per week.
  - ◊ OCCASIONALLY
  - ◊ sometimes...30
  - ◊ no

- ◊ No. Bought food at Trader Joes and used mini fridge in apt
  - ◊ no a few here and there
  - ◊ Some lunch
  - ◊ no but the cafe wasnt to expensive
- e. Did you need a car for the program?
- ◊ YES
  - ◊ yes
  - ◊ yes
  - ◊ Yes. Travel into Natick and another suburb which was 45 mintues away
  - ◊ yes
  - ◊ Absolutely
  - ◊ yes
- f. If you did need a car, how many miles a day did you drive?
- ◊ 50
  - ◊ 2
  - ◊ 20 min
  - ◊ AVG : 7 milesday
  - ◊ 10-20
  - ◊ 30
  - ◊ about 10
- g. How much did the transportation to the program and back cost?
- ◊ 100
  - ◊ 200
  - ◊ gas money to travel from cleveland to boston
  - ◊ Too much - 400 not including room and board
  - ◊ 300
  - ◊ Gas so about 150
  - ◊ to and from cleveland
- h. Is there a residency program associated with this program?
- ◊ YES
  - ◊ Yes
  - ◊ yes
  - ◊ Yes
  - ◊ yes
  - ◊ Yes
  - ◊ yes
- i. Did you experience any special problems at this program? If so, what were they?
- ◊ FILING SYSTEM
  - ◊ No
  - ◊ no
  - ◊ Problem with driving in the area. Driving is dangerous. I was involved in a rear-ending accident.
  - ◊ no
  - ◊ NA
  - ◊ it was slowl

#### Hour & Patient Estimates

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

i. Monday

6AM

4PM hour(s).

ii. Tuesday

6AM

4PM hour(s).

iii. Wednesday

6AM

4PM hour(s).

iv. Thursday

5AM

4PM hour(s).

v. Friday

6AM

6PM 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

- ◊ MTWTh 7a-3p
- ◊ MW9-12
- ◊ na
- ◊ 5 Hours
- ◊ M 7-11am
- ◊ Mon 9a-12p
- ◊ monday afternoons and everyother thursday afternoo

b. Hospital Floors or Surgery hours

- ◊ MTWTh 7a-3p
- ◊ MTTTF
- ◊ Friday all day surgery M-Th about 3 hrs
- ◊ 2 Hours
- ◊ all other hrs
- ◊ TTHF 7a-5p
- ◊ everyday

c. Hospital Clinic hours

- ◊ MW9a-2p
- ◊ NA
- ◊ Mand W: 1-3 12-2
- ◊ 12 Hours
- ◊ 3 hrs x2week
- ◊ Mon 1p-4p Wed 11a-2p
- ◊ monday afternoon

d. Nursing Home hours

- ◊ NA
- ◊ NA
- ◊ na
- ◊ 0 Hours
- ◊
- ◊ 0
- ◊ none

e. Other hours

- ◊ MTWTh 7a-3p
- ◊ MW9-12
- ◊ na
- ◊ 5 Hours
- ◊ M 7-11am

- ◊ Mon 9a-12p
- ◊ monday afternoons and everyother thursday afternoo

07. Please fill in the totals below.

- a. Total number of patients seen by the end of the program:  
— **86 Average Number of Patients seen by 7 students.**
- b. Total number of hours spent in program activities by the end of the program:  
— **177.14 Average Total Hours spent by 7 students.**

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

- GENERAL PATIENT CARE
- arthroscopic surgery
- medicine
- 
- forefoot sx
- Surgery
- 

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

- a. Office: — **3**
- b. Hospital: — **3**

10. Rate this program overall on a scale of one to ten. 10 is best:  
— **7.71 out of 10 Average Rating of 7 students.**

11. Would you reccomend this program?

Yes: — 85.7%  
No: — 14.3%