

Student Evaluation of Clerkship

Medical student evaluations of courses provide UCR SOM vital feedback about the quality of our education programs and enable us to design learner-centered improvements. These evaluations are anonymous and are returned to SOM leadership, block and clerkship directors, and site leaders in de-identified aggregated form only after grades have been released.

Instructions: Please rate this Clerkship in the following areas, in my experience this Clerkship:

	Unsatisfactory	Satisfactory	Very Good	Excellent	Not observed or unable to assess
1. Provided clear learning objectives, expectations and grading criteria at the start of the rotation.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Oriented me to how the clinical site(s) worked during this clerkship and clarified to me my role as a student at the site(s).*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Provided a site faculty leader who was committed to student learning and responded to student concerns.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Provided a clerkship director who was committed to student learning and responded to student concerns.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Provided a clerkship coordinator who was committed to student learning and responded to student concerns.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Ensured that I was treated like a valuable member of the team.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Assigned me work tasks relevant to patient care and clerkship learning objectives.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Made sure that I had clinical supervision whenever I needed it.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Integrated relevant basic science content (i.e., pharmacology, biochemistry, anatomy, physiology, pathology, etc.) into the clerkship.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Graded me fairly, based on accurate assessment of my performance, free of bias.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Ensured that my assigned clinical site(s) provided a positive learning experience.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Fostered my growth and development as a physician-in-training.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Competency-based Items

In my experience, this clerkship gave me opportunities to:

	Unsatisfactory	Satisfactory	Very Good	Excellent	Not observed or unable to assess
13. Improve my clinical skills (e.g., history, physical, procedures) and care for my patients independently. (Patient Care)*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. Expand my knowledge of core topics in this field. (Knowledge for Practice)*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Improve my clinical reasoning (e.g., differential diagnosis, diagnostic/management plans). (Practice-based Learning & Improvement)*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
16. Improve how I exchange information to effectively collaborate with patients, their families, and health professionals. (Interpersonal & Communication Skills)*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17. Carry out professional responsibilities and adhere to ethical principles. (Professionalism)*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18. Learn about the larger context and system of health care. (Systems-based Practice)*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19. Engage in an interprofessional team that optimized safe, effective patient- and population-centered care. (Interpersonal & Communication Skills)*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20. Develop the qualities required to sustain lifelong personal and professional growth. (Personal & Professional Development)*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Clinical Affiliate Site

Please indicate your level of satisfaction with the following:

	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	Did not Use
21. secure storage space for students' personal belongings at this clinical affiliate site.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
22. student study space at this clinical affiliate site.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
23. student relaxation space at this study site.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Instructions:

Please provide feedback on this rotation in the following areas:

	No	Yes
24. A faculty member provided me with mid-clerkship feedback during this clerkship.*	<input type="radio"/>	<input type="radio"/>

Clerkship phase: During this Clerkship:

	No	Yes	N/A
25. The designated faculty member conducting my mid-clerkship feedback session provided effective feedback on my strengths and areas of improvement.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. The designated faculty member conducting my mid-clerkship feedback session set mutual learning goals with me for the remainder of the clerkship.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Mid-Clerkship Feedback: Please note: N/A means "I did not receive mid-clerkship feedback."

27. If I did receive mid-clerkship feedback, the faculty member who conducted the feedback session had direct knowledge of my performance.*	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. Please provide a comment about the mid-clerkship feedback.			
	No	Yes	
29. I was observed performing the relevant portions of a patient history and physical examination during the required observed clinical encounter (OCE) during this clerkship.*	<input type="radio"/>	<input type="radio"/>	
30. Please provide a comment about the Observed Clinical Encounter (OCE).*			
	No	Yes	
31. All faculty, staff, students, trainees and patients were treated equitably and respectfully during this rotation no matter their race, ethnicity, country of origin, disabilities, gender, age, sexual and gender identification, religion or economic background.*	<input type="radio"/>	<input type="radio"/>	
32. Please provide comments about the climate of respect and equity during this rotation.*			
33. At any time during this clerkship, did you experience mistreatment by a faculty member, by another institution employee or staff member, or by a fellow student? (Please do not include behaviors exhibited by patients.)*	<input type="radio"/>	<input type="radio"/>	

Explanation: Examples of mistreatment include: being publicly humiliated, threatened with physical harm, physically harmed, required to perform personal services, subjected to unwanted sexual advances, asked to exchange sexual favors for grades/other rewards, denied opportunities for training or rewards based on gender, subjected to offensive sexist remarks/names, received lower grades/assessments solely because of gender rather than performance, denied opportunities for training or rewards based on race or ethnicity, subjected to racially or ethnically offensive remarks/names, received lower grades/assessments solely because of race or ethnicity rather than performance, denied opportunities for training or rewards based on sexual orientation, been subjected to offensive remarks/names related to sexual orientation rather than performance, been subjected to negative or offensive behavior(s) based on my personal beliefs or personal characteristics other than my gender, race/ethnicity, or sexual orientation.

34. Please provide comments about any mistreatment during this rotation (if you selected "No" on the previous question, please write N/A for this response).*

Please note that you may report mistreatment through this link: <https://somsa.ucr.edu/som-handbook#maltreatment> or by mail to grievance@medsch.ucr.edu.

35. What were the greatest strengths of this clerkship?

36. If you were the clerkship director, what changes would you make to this clerkship?

Thank you for providing a timely and constructive evaluation of this clerkship!

*Required fields