UNC School of Medicine  
Global Health Elective  
Student Feedback Form

Information that you provide will be made available for future UNC students to use in planning educational electives in global health and international medicine. It must be completed in order to receive elective credit for your rotation OR funding through the Office of International Activities (Becton-Tannenbaum, Perkins Burke, Medical Alumni Loyalty Fund Global Enrichment Fellowships and International Health Fellowships). Please complete and return to the Office of International Activities (shawes@med.unc.edu or Martha_carlough@med.unc.edu)

I. STUDENT INFORMATION
A. Student Name: John Curtiss
B. Email: john_curtiss@med.unc.edu
C. Phone/cell number (optional):
D. Graduating year from UNC Medical School: 2015
E. Check when you took this elective: [ ] Summer between 1st and 2nd year [ ] 3rd year [ ] 4th year [ ] Other:
F. What UNC Department and course did you register for this elective through? FMME 225
G. Faculty advisor: Dr. Martha Carlough
H. Dates that you completed the elective: June 20- July 19 Year: 2012
I. From the list below, select the one choice that best describes your motivation for taking this elective:
   - [X] interest in global health
   - [ ] desire to get experience for CV/job opportunities
   - [ ] interest in travel
   - [ ] family of origin reasons
   - [ ] interest in helping others
   - [ ] other:
   - [ ] desire to learn/improve Spanish skills

J. What was the major emphasis of this elective:
   - [ ] medical Spanish and Latino health
   - [ ] global health research
   - [X] clinical care in an international setting
   - [ ] community health/development
   - [ ] Other:

K. Was this a [X] group experience or [ ] individual experience?

II. ELECTIVE PROGRAM INFORMATION
A. Country where you completed the elective: Tanzania
B. City: Mwanza
C. Name of Program or Hospital where you worked: Nyakato Health Center
D. Website address (if available): www.ihptz.org
E. From the list below, select the choice that best describes how you first learned about this program:
   - [X] referral from a friend/personal contact
   - [ ] web site information from:
   - [ ] another student who went there
   - [ ] other:

F. Name of program person you worked with and contact information: Paula Lofstrom  paula@ihptz.org
G. Costs
   - Tuition: N/A  
   - Roundtrip travel: $1500
   - Other expenses you incurred, including vaccinations, supplies (please list type and amount):
     - Vaccinations - $50

H. Did this program/hospital have a religious affiliation? [X] YES  [ ] NO
If yes, with what group: Lutheran Church of Tanzania

I. Did this program/hospital have an academic affiliation? ___YES  X NO
   If yes, with what institution: N/A

III. GLOBAL HEALTH EXPERIENCE CHARACTERISTICS

A. List three educational outcomes you achieved with this elective
   1. I learned a lot about providing primary care for a wide range of health issues.
   2. I learned a lot about tropical medicine.
   3. I learned about how to manage a patient's care over an extended period of time.

B. Was the experience a good use of time for you during medical school? X YES  ___ NO
C. Did you have adequate clinical supervision? X YES  ___ NO
D. Did you have adequate opportunities for hands-on clinical work? X YES  ___ NO
E. Would you recommend this elective to other medical students? X YES  ___ NO

If YES, Why? A great experience where I learned a lot about medicine and also got to experience a new culture.
If NO, Why? N/A

F. Was the program responsive to your needs? X YES  ___ NO

G. Did you have appropriate arrangements for housing, food and safety/health issues? X YES  ___ NO
   If NO, please describe: N/A

H. Did you have adequate information about what to expect in advance? X YES  ___ NO
   If NO, what would have been helpful: N/A

I. Did you feel that you had adequate support from UNC in setting up this opportunity? X YES  ___ NO

THANK YOU!!! THIS INFORMATION WILL HELP FUTURE STUDENTS !!!

Additional Comments:
Overall, it was a great elective, and I recommend this experience to future students!
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I. STUDENT INFORMATION
A. Student Name: ________________________________
B. Email: ________________________________
C. Phone/cell number (optional): ___________________
D. Graduating year from UNC Medical School: _________
E. Check when you took this elective:
   [ ] Summer between 1st and 2nd year   [ ] 3rd year   [ ] 4th year   [ ] Other: _________________
F. What UNC Department and course did you register for this elective through? __________________
G. Faculty advisor: ____________________________
H. Dates that you completed the elective: ____________________           Year: _______
I. From the list below, select the one choice that best describes your motivation for taking this elective:
   [ ] interest in global health   [ ] desire to get experience for CV/job opportunities
   [X] interest in travel   [ ] family of origin reasons
   [ ] interest in helping others   [ ] other: _____________________________
   [ ] desire to learn/improve Spanish skills
J. What was the major emphasis of this elective:
   [ ] medical Spanish and Latino health
   [ ] global health research
   [X] clinical care in an international setting
   [ ] community health/development
   [ ] Other: ________________________________
K. Was this a [X] group experience or [ ] individual experience?

II. ELECTIVE PROGRAM INFORMATION
A. Country where you completed the elective: _______________________
B. City: _______________________
C. Name of Program or Hospital where you worked: _______________________
D. Website address (if available): _______________________
E. From the list below, select the choice that best describes how you first learned about this program:
   [X] referral from a friend/personal contact   [ ] web site information from: _______________________
   [ ] another student who went there   [ ] other: ________________________________
F. Name of program person you worked with and contact information: _______________________
G. Costs
   Tuition: 0  Roundtrip travel: 1780  
   Other expenses you incurred, including vaccinations, supplies (please list type and amount):
   Supplies - 400  Vaccinations - 200  Travel - 1500
H. Did this program/hospital have a religious affiliation? [ ] YES   [X] NO
If yes, with what group: ____________________________

I. Did this program/hospital have an academic affiliation? ____YES  ____NO
If yes, with what institution: ________________________

III. GLOBAL HEALTH EXPERIENCE CHARACTERISTICS
A. List three educational outcomes you achieved with this elective
   1. __________________________________________________________________________________
   2. __________________________________________________________________________________
   3. __________________________________________________________________________________

B. Was the experience a good use of time for you during medical school? X YES  ____NO
C. Did you have adequate clinical supervision? X YES  ____NO
D. Did you have adequate opportunities for hands-on clinical work? X YES  ____NO

E. Would you recommend this elective to other medical students? X YES  ____NO
   If YES, Why? Learned significant clinical skills and enjoyed working with local staff
   If NO, Why? ____________________________

F. Was the program responsive to your needs? X YES  ____NO

G. Did you have appropriate arrangements for housing, food and safety/health issues? X YES  ____NO
   If NO, please describe: ____________________________

H. Did you have adequate information about what to expect in advance? X YES  ____NO
   If NO, what would have been helpful: ____________________________

I. Did you feel that you had adequate support from UNC in setting up this opportunity? X YES  ____NO

THANK YOU!!! THIS INFORMATION WILL HELP FUTURE STUDENTS!!!

Additional Comments:

Return to: Sam Hawes, MPH (Program Manager) shawes@med.unc.edu
Office of International Activities – UNC School of Medicine
1066 Bondurant Hall, CB 9535
Chapel Hill, NC 27599-9535
I. STUDENT INFORMATION

A. Student Name: Jesse Rhodes
B. Email: jesse_rhodes@med.unc.edu
C. Phone/cell number (optional): 
D. Graduating year from UNC Medical School: 2015
E. Check when you took this elective:
   - [ ] Summer between 1st and 2nd year
   - [ ] 3rd year
   - [ ] 4th year
   - [ ] Other: 
F. What UNC Department and course did you register for this elective through? FMME 225
G. Faculty advisor: Martha Carlough
H. Dates that you completed the elective: June 18 - July 19, 2012
I. From the list below, select the one choice that best describes your motivation for taking this elective:
   - [x] interest in global health
   - [ ] desire to get experience for CV/job opportunities
   - [ ] interest in travel
   - [ ] family of origin reasons
   - [ ] interest in helping others
   - [ ] other: 
   - [ ] desire to learn/improve Spanish skills
J. What was the major emphasis of this elective:
   - [x] medical Spanish and Latino health
   - [ ] global health research
   - [ ] clinical care in an international setting
   - [ ] community health/development
   - [ ] Other: 
K. Was this a [x] group experience or [ ] individual experience?

II. ELECTIVE PROGRAM INFORMATION

A. Country where you completed the elective: Tanzania
B. City: Mwanza
C. Name of Program or Hospital where you worked: Nyakoto Health Centre
D. Website address (if available): ihptz.org
E. From the list below, select the choice that best describes how you first learned about this program:
   - [x] referral from a friend/personal contact
   - [ ] another student who went there
   - [ ] website information from: 
   - [ ] other: 
F. Name of program person you worked with and contact information: Paula Lofstrom paula@ihptz.org
G. Costs
   - Tuition: 
   - Roundtrip travel: $1500
   - Other expenses you incurred, including vaccinations, supplies (please list type and amount):
     - Room and Board - $900
     - Vaccinations/Medications-$120
     - 
     - 
H. Did this program/hospital have a religious affiliation? [x] YES [ ] NO
If yes, with what group: Lutheran Church of Tanzania

I. Did this program/hospital have an academic affiliation? ___YES ___NO
   If yes, with what institution: ____________________________

III. GLOBAL HEALTH EXPERIENCE CHARACTERISTICS
A. List three educational outcomes you achieved with this elective
   1. Practiced tropical medicine in a community setting, especially dealing with malaria
   2. Learned more about global health and the problems facing health in third-world countries
   3. Learned a great deal about HIV/AIDS, including the various symptoms and treatment

B. Was the experience a good use of time for you during medical school? ___YES ___NO
C. Did you have adequate clinical supervision? ___YES ___NO
D. Did you have adequate opportunities for hands-on clinical work? ___YES ___NO
E. Would you recommend this elective to other medical students? ___YES ___NO
   If YES, Why? Get to experience diseases you will never see in the United States
   If NO, Why? ____________________________________________

F. Was the program responsive to your needs? ___YES ___NO

G. Did you have appropriate arrangements for housing, food and safety/health issues? ___YES ___NO
   If NO, please describe: ____________________________________________

H. Did you have adequate information about what to expect in advance? ___YES ___NO
   If NO, what would have been helpful: ____________________________________________

I. Did you feel that you had adequate support from UNC in setting up this opportunity? ___YES ___NO

THANK YOU!!! THIS INFORMATION WILL HELP FUTURE STUDENTS !!!

Additional Comments:
Loved this experience. Paula, the clinic director, was very welcoming. We always felt safe living in the compound. The doctors and other medical students there were very helpful in teaching and were great to work with.
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I. STUDENT INFORMATION
A. Student Name: Nathaniel Miller
B. Email: nathaniel.miller@med.unc.edu C. Phone/cell number (optional): ________________
D. Graduating year from UNC Medical School: 2015
E. Check when you took this elective:
   ☑ Summer between 1st and 2nd year ☐ 3rd year ☐ 4th year ☐ Other: ________________
F. What UNC Department and course did you register for this elective through? FMME 225
G. Faculty advisor: Dr. Carlough
H. Dates that you completed the elective: June 18 - August 19th Year: 2012
I. From the list below, select the one choice that best describes your motivation for taking this elective:
   ☒ interest in global health ☐ desire to get experience for CV/job opportunities
   ☐ interest in travel ☐ family of origin reasons
   ☐ interest in helping others ☐ Other: ________________
   ☐ desire to learn/improve Spanish skills
J. What was the major emphasis of this elective:
   ☐ medical Spanish and Latino health
   ☐ global health research
   ☒ clinical care in an international setting
   ☐ community health/development
   ☐ Other: ________________
K. Was this a ☒ group experience or ☐ individual experience?

II. ELECTIVE PROGRAM INFORMATION
A. Country where you completed the elective: Tanzania
B. City: Mwanza
C. Name of Program or Hospital where you worked: Nyakato Health Center
D. Website address (if available): IHPTZ.ORG
E. From the list below, select the choice that best describes how you first learned about this program:
   ☒ referral from a friend/personal contact ☐ web site information from: ________________
   ☐ another student who went there ☐ Other: ________________
F. Name of program person you worked with and contact information: Paula Loftstrom
   Paula@IHPTZ.org
G. Costs
   Tuition: $25/day Roundtrip travel: 1500
   Other expenses you incurred, including vaccinations, supplies (please list type and amount):
   Safari: 1500
   Zanzibar: 1000
   __________________________________________________
   __________________________________________________
   __________________________________________________
H. Did this program/hospital have a religious affiliation? ☒ YES ☐ NO
If yes, with what group: Lutheran

I. Did this program/hospital have an academic affiliation? YES NO
If yes, with what institution: ____________________________

III. GLOBAL HEALTH EXPERIENCE CHARACTERISTICS
A. List three educational outcomes you achieved with this elective
1. Improved Physical Skills
2. Improved Histories
3. Improved skills with working with a foreign language population

B. Was the experience a good use of time for you during medical school? YES NO
C. Did you have adequate clinical supervision? YES NO
D. Did you have adequate opportunities for hands-on clinical work? YES NO
E. Would you recommend this elective to other medical students? YES NO
   If YES, Why? It was a great mix of an all around clinical and cultural experience
   If NO, Why?

F. Was the program responsive to your needs? YES NO

G. Did you have appropriate arrangements for housing, food and safety/health issues? YES NO
   If NO, please describe: ____________________________________________________________

H. Did you have adequate information about what to expect in advance? YES NO
   If NO, what would have been helpful: ________________________________________________

I. Did you feel that you had adequate support from UNC in setting up this opportunity? YES NO

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