OME Rotation Evaluation

Offices of Medical Education evaluate your experience at the end of this clerkship rotation for both feedback and improvement. Aggregate results of this evaluation will not be released until all student grades have been submitted. Thank you!

Please rate this specific rotation for ORGANIZATION and CONTENT:

<table>
<thead>
<tr>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
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Comments about ROTATION ORGANIZATION and CONTENT:

Please rate the effectiveness of teaching CLINICAL SKILLS on this rotation:

<table>
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<tr>
<th>Unable to Rate</th>
<th>Poor</th>
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<th>Good</th>
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Comments about the teaching of CLINICAL SKILLS:

Please rate the overall effectiveness of FACULTY/ATTENDING or PRECEPTOR TEACHING on this rotation:

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Strengths about FACULTY/ATTENDING or PRECEPTOR TEACHING:

Areas of improvements for FACULTY/ATTENDING TEACHING:
Please rate the overall effectiveness of RESIDENTS/FELLOWS TEACHING on this rotation: (If no residents or fellows in this rotation choose the Unable to Rate option)

- Unable to Rate
- Poor
- Fair
- Good
- Very Good
- Excellent

Strengths about RESIDENTS/FELLOWS TEACHING:

Areas of improvement for RESIDENTS/FELLOWS TEACHING:

Please rate the effectiveness of your LEARNING ENVIRONMENT on this rotation:

- Unable to Rate
- Poor
- Fair
- Good
- Very Good
- Excellent

Comments about the LEARNING ENVIRONMENT for this ROTATION:

Please address any DISCRIMINATION or MISTREATMENT issues happening on this rotation:

Has your specialty or career choice hurt your teaching, training or clinical opportunities?
- Frequently
- Occasionally
- Once
- Never

Have you been publicly belittled or humiliated during this rotation?
- Frequently
- Occasionally
- Once
- Never

Have you personally been discriminated against based on gender, sexual orientation, age, race, creed or national origin during this rotation?
- Frequently
- Occasionally
- Once
- Never

Have you seen any discrimination of other students during this rotation?
- Frequently
- Occasionally
- Once
- Never

Have you seen any discrimination of patients during this rotation?
- Frequently
- Occasionally
- Once
- Never

Other than discrimination, have you experienced forms of mistreatment such as public humiliation, physical punishment, requirement to perform personal services or unwanted sexual advances during this rotation?
- Frequently
- Occasionally
- Once
- Never

Comments about DISCRIMINATION or MISTREATMENT on this rotation (Results will not be released to course directors until after grades have been submitted):
If you have been mistreated, observed mistreatment or have concerns about discriminatory content or behaviors related to this clerkship, please contact Alan Cross, MD, Student Mistreatment Mediator, at across@unc.edu for a confidential conversation.

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OVERALL rating of this rotation: O O O O O

Please list two things you would absolutely continue on this rotation:

Please list two things you would remove from this rotation:

Please list what this rotation must do to get an excellent rating:

THANK YOU!

The following will be displayed on forms where feedback is enabled...

(for the evaluator to answer...)

*Did you have an opportunity to meet with this trainee to discuss their performance?
  ○ Yes
  ○ No

(for the evaluee to answer...)

*Did you have an opportunity to discuss your performance with your preceptor/supervisor?
  ○ Yes
  ○ No