

**SPECIALTY Family Medicine- Adolescent Medicine/School Based Health  
Medical School or Hospital Montefiore Medical Center (NY)**

- 1. How would you rate your overall experience? Poor/Fair/Good/Very Good/ Excellent** Very Good
- 2. How many hours did you work on average? Per day / Per week**  
Per day- 7; Clinic was three times/week with two days for other activities or independent study
- 3. What were your daily duties? (Summarize)** See patients in school based health centers, document encounters, present patients and plans to Attendings
- 4. Who did you work with the most? NP's/ PA's/ Interns/ Residents/ Fellows/ Attendings** Attendings
- 5. Which Attendings had the greatest influence on your education and experience?** They were all great!
- 6. Did this rotation impact your interest in this program? How?**  
Yes. It helped me decide whether or not I wanted to interview there.
- 7. Did this rotation help you get an interview?** Yes, I received an interview offer while I was there.
- 8. Did you get a letter of recommendation?** No
- 9. Did you meet with or work with the Residency Program Director or the Department Chair?** No
- 10. How did you apply for the rotation? Did you use VSAS?** VSAS and emailed the faculty member contact
- 11. What month(s) was your rotation?** October
- 12. When did you apply? When did you get accepted?** I applied in July and was accepted in August
- 13. Were there any special requirements for the rotation (i.e. BLS recertification, LOR, etc.)** No
- 14. Is Housing provided? If not, can you recommend housing options?**  
No housing was provided. I used AirBnB to find affordable option in

Manhattan for the month.

**15. Is parking provided? If not, any recommendations?** Parking was not provided and also not needed because of excellent public transport.

**16. Would you recommend this rotation to future students?** Yes. If you are interested in living in NYC and working with teenagers, this is a great, laid-back rotation to do!

**17. Any other comments, suggestions or tips?**

**18. OPTIONAL: Would you like to include your contact information?**