

## Away Rotation Evaluation Form

1. Specialty: Pediatrics, Hematology/Oncology Sub I

2. Medical School / Hospital: UCSF

3. How would you rate your overall experience? (check one)  
 Poor  Fair  Good  Very Good  Excellent

4. How many hours per week were you on duty? 70-80hrs

5. How many hours per week did you spend with:

a. Interns: 0

b. Residents: 70-80

c. Fellows: 60

d. Attendings: 50

6. Did you meet with or work with the Residency Program Director or the Department Chair?  
Yes. Every extern meets with the residency program director at the end.

7. Which attendings had the greatest influence on your experience? Dr. Goldsby was amazing and incredibly supportive. He even let me do some procedures while I was there.

8. What were your daily duties? Round on 3-5 patients. Present in rounds. Write their orders. Admit new patients. Attend lectures.

9. Did this rotation (check one):

Create new interest in the specialty

Reinforce existing interest

Decrease interest

Have no effect

10. Any tips on how to get the most out of this rotation? Be prepared for long hours, but if you work hard you will be rewarded with a lot of autonomy and support. From the attendings to the nurses I got great support and learned a lot.

11. Any warnings or tips on what NOT to do? The nurses on the heme/onc floor are a pretty close nit group and you should make a point to introduce yourself and show them a great deal of respect. If you do that you will be rewarded with having nurses who will do anything for you, but if not I don't see how you would get anything done.

12. Did you get a letter of recommendation? Yes

13. Did this rotation help you get an interview? Yes. I was guaranteed an interview after my rotation.

14. Is housing provided? If not, any recommendations on where to stay? I got a sublet about 3 blocks away on Craig's list.

15. Is parking provided? If not, any recommendations on where to park? No. This would be pretty tough. I really would not bring one.

16. Who did you contact to set up this rotation? I went to the UCSF pediatric residency website and found a link there to the application.

a. Did you use VSAS? No.

17. When did you apply for the rotation and when did they inform you that you got the rotation? I applied in February and heard back 1-2 weeks later.

18. Were there any special requirements for the rotation (i.e. BLS re-certification, LOR, etc.)? You will need a letter of recommendation if you do a sub-I.

19. Would you recommend this rotation to future JMC 4<sup>th</sup> years? yes

20. Please add additional comments (strengths, weaknesses, miscellaneous tips...) Make sure to read up on whatever specialty you are going to be doing a rotation in before hand if you really want to stand out.

THANK YOU!

Please return form to [jeffersonAOA@gmail.com](mailto:jeffersonAOA@gmail.com).

[OPTIONAL]:

Your name: Robin Horak

Your contact information: [robin.horak@gmail.com](mailto:robin.horak@gmail.com)