

## Away Rotation Evaluation Form

1. Specialty: Pediatrics/Infectious Diseases
2. Medical School / Hospital: University of Colorado/Children's Hospital
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? 45
5. How many hours per week did you spend with:
  - a. Interns: 0
  - b. Residents: 40
  - c. Fellows: 40
  - d. Attendings: 25
6. Did you meet with or work with the Residency Program Director or the Department Chair? No
7. Which attendings had the greatest influence on your experience? I had two great ones and one that was really annoying. But overall the experience made me want to do pediatrics, but perhaps not to be a pediatric ID doctor.
8. What were your daily duties? Round on my patients. Present during rounds. Do consults in the afternoon. Attend morning report and noon conference.
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? I found this rotation to be very relaxed. No need for a white coat. Be prepared to see a few patients in the morning and present them in the afternoon. For most days I left between 5:30-6pm.
11. Any warnings or tips on what NOT to do? I can't think of too much here.
12. Did you get a letter of recommendation? No.
13. Did this rotation help you get an interview? Yes. All externs are offered an interview.
14. Is housing provided? If not, any recommendations on where to stay? No. But they do have a list of people affiliated with U of Colorado that offer short term housing and I used that list a found a great place to stay.

15. Is parking provided? If not, any recommendations on where to park? Yes you can get a parking pass for free at the hospital and street parking in the city is pretty easy.

16. Who did you contact to set up this rotation? I found an application on the website.

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 in 1 week.

18. Where there any special requirements for the rotation (i.e. BLS re-certification, LOR, etc.)? No.

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

20. Please add additional comments (strengths, weaknesses, miscellaneous tips...)

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)