University of Washington
DEPARTMENT OF GLOBAL HEALTH



# Global Health Clinical Elective

[CONJOINT 625]

Course Syllabus 2016-17



## **OVERVIEW**

The **Global Health Clinical Elective (GHCE)** was developed to provide medical students the opportunity to gain first-hand insight into healthcare delivery in low and middle income countries. It is particularly suited for those who are contemplating a career involving global health, and who wish to better understand the challenges involved in caring for the sick in developing countries.

The program was created through a unique partnership between the Department of Global Health and the clinical departments of Family Medicine, Medicine, Obstetrics and Gynecology, and Pediatrics. Students participating in the program must enroll in **Conjoint 625**, through which they are eligible for 2 academic credits per week of their rotation, as well as financial aid.

## **COURSE OBJECTIVES**

At the end of this course, students will be able to:

- 1. Discuss the relationship between health and the social determinants of health.
- 2. Identify barriers to health and healthcare in low-resource settings.
- 3. Demonstrate knowledge of the major causes of morbidity and mortality in the region in which they are working.
- 4. Demonstrate an understanding of healthcare delivery strategies in low-resource settings.
- 5. Demonstrate and understanding of cultural and ethical issues in working with underserved populations.
- 6. Demonstrate the ability to adapt clinical skills and practice in a resource-constrained environment.
- 7. Demonstrate humility, flexibility, professionalism, and cultural sensitivity when working within a different healthcare context.



## **GRADING**

Students enrolled in Conjoint 625 earn 2 credits for each week spent on the elective. Grading for this course is **pass/fail**. Grades are determined by a course oversight committee based on feedback from your clinical supervisor(s) as well as the quality of your submitted assignments. All assignments must be turned in within two weeks of the end of your elective.

The following are required for successful completion of the course. Copies of all forms may be found on Collect-It as well as in the appendix to this syllabus. Contact the course director promptly if there are problems with completing your assignments or submitting feedback forms.

Attend the orientation session(s)
Write a Country Profile prior to GHCE
Complete the online exam prior to GHCE
Submit weekly time logs
Write three case reports
Create educational materials on a topic
Write two reflective essays
Complete and submit course and program evaluation forms
Update the site country manual
Attend an exit interview

## PREPARING FOR YOUR ELECTIVE

In preparing for your international clinical elective, it is important to bear in mind that you will be living and learning in an entirely different context. Things that you take for granted in the U.S. may not be available. The ways that the hospitals and clinics run will likely seem very different. Depending on the site, you may be expected to function at an intern level, or as an observer only. And you will likely see people who could be treated and made well in the U.S., but in the local context aren't able to get the care they need.

All of these things, combined with living arrangements that are different from the way you live at home, unfamiliar food, and distance from family and friends can make a clinical rotation in a developing country challenging. Try to keep in mind that these differences are also the reason you are there.

Avoid the temptation to express anger and frustration when you witness things that seem dysfunctional or patients who seem to suffer needlessly. Try to take your cues on how to react to local situations from your local mentors. Remember that you are a guest in the country and the institution where you are working. When frustrated, take a step back, process your feelings, and try to better

understand the root cause of what you are seeing. Transformative change takes time and sustained effort. Think about how you could make a difference over the course of your career.

Try and keep an open mind and be flexible during your rotation. Although each site is unique, be prepared for:

- Lack of resources for patient care.
- High numbers of patients with crowded wards and insufficient staffing.
- Minimal diagnostic capabilities.
- Lack of essential drugs and supplies.
- Lack of textbooks or access to current information.
- Unreliable electricity and Internet access.
- Diseases and treatments with which you are not familiar.
- Different roles and expectations for medical students.
- Differences in gender roles, patient-doctor interactions, nursing roles, etc.
- Not knowing how to "get things done."
- Long delays in obtaining diagnostic information or treatment.
- Variable interest in teaching and mentoring.
- Unnecessary suffering and death.

As you get ready for your elective, you should learn as much as possible about your specific training site. Talk to faculty or students who have first-hand knowledge of your site. Read books about the country, its culture and history. Brush up on tropical diseases, and practice as many procedural skills as possible. Perhaps most important, learn as much as you can of the local language. Even being able to speak a few basic sentences can dramatically enhance your interactions with the local population and medical staff.

## **ASSIGNMENTS**

All assignments should be sent as email attachments to Rachel Lazzar (<u>rlazzar@uw.edu</u>) and Scott McClelland (<u>mcclell@uw.edu</u>). Rachel will keep a spreadsheet of completed assignments, and will notify you about one week before you return if there are still outstanding assignments required for you to complete the course.

## I. COUNTRY PROFILE

This should be submitted <u>before</u> you leave for your GHCE site. Please answer the following questions about your host country.

- 1) How does the country rank in terms of key health indicators (life expectancy, child mortality, maternal mortality, etc.)?
- 2) What are the main causes of morbidity and mortality?
- 3) Pick three illnesses that you think you would be likely to see. For each one:
  - a. Identify potentially useful resources for how to manage this problem in your host country
  - b. Give a brief overview (about a paragraph) addressing any key features of the epidemiology, diagnosis, management, and prognosis of the condition in your host country
- 4) What do you anticipate will be the most challenging aspects of your international clinical elective?

## Resources you might find helpful:

The World Health Organization has a number of useful pages on its website, including:

- Summary statistics for each member country (<a href="http://www.who.int/countries/en/">http://www.who.int/countries/en/</a>)
- The Global Atlas of the Health Workforce (http://apps.who.int/globalatlas/default.asp)
- The **Global Health Observatory** (<a href="http://www.who.int/gho/en/">http://www.who.int/gho/en/</a>).

The **African Health Workforce Observatory** has a number of country profiles for African countries (<a href="http://www.hrh-observatory.afro.who.int/en/hrh-country-profiles/profile-by-country.html">http://www.hrh-observatory.afro.who.int/en/hrh-country-profiles/profile-by-country.html</a>).

Several websites compile health and development statistics, searchable by country:

- The Institute for Health Metrics and Evaluation (<a href="http://www.healthmetricsandevaluation.org/ghdx">http://www.healthmetricsandevaluation.org/ghdx</a>)
- Measure DHS (<a href="http://www.measuredhs.com/What-We-Do/Survey-Search.cfm">http://www.measuredhs.com/What-We-Do/Survey-Search.cfm</a>)
- **UNICEF** (http://www.unicef.org/statistics/index\_countrystats.html)
- The Population Reference Bureau (<a href="http://www.prb.org/DataFinder.aspx">http://www.prb.org/DataFinder.aspx</a>)
- The Pan American Health Organization (<a href="http://new.paho.org/hq/index.php?option=com\_content&task=view&id=2470&ltemid=2003">http://new.paho.org/hq/index.php?option=com\_content&task=view&id=2470&ltemid=2003</a>).

### II. ONLINE QUIZ

Prior to leaving for your international clinical elective, complete the question online quiz, "GHCE Quiz 2016-17," available through Catalyst. This is an open-book quiz, and you may take it as many times as needed to pass. We will not cover all of the material you need for the quiz during the orientation. The intent is that you will need to access some resources that you may find useful during the course of your elective.

A score of 80% or greater is required to pass.

### III. WEEKLY ACTIVITIES LOG

Keep track of your clinical and educational activities each week. At the end of each week, you will need to complete and sign a log sheet indicating how much time you spent in various clinical and educational activities.

A copy of the weekly log sheet can be found on Collect-It and in the Appendix.

### IV. CASE REPORTS

You are required to submit three clinical case reports on patients of your choosing. Each report should include information below.

**History and Physical:** Discuss the presenting symptoms, past medical history, relevant social factors, pertinent family history, medications, and physical exam findings.

**Diagnosis and Treatment:** Discuss the differential diagnosis and how a final diagnosis was arrived at. Describe the treatment plan for the patient and response to treatment.

**Discussion:** Provide a brief overview of the disease. Highlight the relevance of the disease to the local setting.

**Reflection:** Reflect on any challenges presented by this case. What did you learn from it?

In writing these reports, we do not require long and painfully detailed history and physical information. Practice writing notes of the length and conciseness that you will be writing next year as an intern. These should be no longer than a page, and could be shorter. I am most interested in your reflection on the cases, and suggest that you take an additional half page to one page for this.

## V. TEACHING/EDUCATIONAL MATERIALS

If deemed appropriate for your setting, conduct one educational talk on a topic chosen by your team. Send your talk and any educational materials you developed to Rachel Lazzar (<u>rlazzar@uw.edu</u>) and Scott McClelland (<u>mcclell@uw.edu</u>).

If talks by medical students are not appropriate for your setting, you may instead write a clinical guideline for a particular disease or syndrome.

This should be on a topic that is important in your local setting but not as common in the U.S. Your submission should be a practical, clinically relevant, locally applicable guide. It should be targeted as a guide that will be useful for fellow medical students doing GHCE at your site in the next few years. The clinical guideline should be no more than two pages long.

Please contact the course director if you have any questions about this assignment.

## **VI. TWO REFLECTIVE ESSAYS**

Submit two 1-page essays in which you reflect on your experience. The first should be prepared and submitted after your first three weeks in your host country. This should be sent to Rachel Lazzar (<u>rlazzar@uw.edu</u>) and Scott McClelland (<u>mcclell@uw.edu</u>) by the start of your fourth week. The second should be completed and turned in at the end of your rotation in the host country. These essays should address the following:

- What have been the high and low points of the rotation?
- What have been the biggest challenges?
- What have been the most important things you have learned?
- How has the experience influenced your thoughts about global health and your future career?

## SUGGESTED RESOURCES

### **ELECTRONIC RESOURCES**

At Orientation, you will be given electronic copies of the documents listed below. Copies are available on Catalyst Collect-It, and for many of the titles, hard copies may also be ordered. Several of the documents are also available on the Internet in other languages, such as French and Spanish.

A wealth of additional resources and guidelines are available on the World Health Organization's website, <a href="http://www.who.int/publications/en/">http://www.who.int/publications/en/</a>.

### Clinical Guidelines GHANA

Republic of Ghana Standard Treatment Guidelines, 6<sup>th</sup> Edition, Ministry of Health, Ghana, 2010.

### Clinical Guidelines MALAWI

Malawi Standard Treatment Guidelines, 4th Edition. Ministry of Health, Malawi, 2008.

### **Clinical Guidelines MSF**

Clinical Guidelines. Diagnostic and Treatment Manual for Curative Programmes in Hospitals and Dispensaries. Médecins Sans Frontières, 2013.

### Clinical Guidelines UGANDA

Uganda Clinical Guidelines 2010, Ministry of Health, Uganda, 2012.

### **Common Skin Diseases**

Common Skin Diseases in Africa. An Illustrated Guide. Colette van Hees and Ben Naafs, 2009.

### Communicable Disease Control

Communicable Disease Control in Emergencies. A field manual. M.A. Connolly. World Health Organization, 2005.

### Diarrhea

The Treatment of Diarrhoea. A manual for physicians and other senior health workers. World Health Organization, 2005.

### **Essential Drugs**

Essential Drugs. Practical guidelines. Médecins Sans Frontières, 2013 Edition.

### **ETAT**

Emergency Triage, Assessment, and Treatment. (ETAT). Manual for participants. World Health Organization, 2005.

### **HIV Clinical Staging**

Interim WHO Clinical Staging of HIV/AIDS and HIV/AIDS Case Definitions for Surveillance. World Health Organization 2005.

#### **HIV GHANA**

Guidelines for Antiretroviral Therapy in Ghana. National HIV/AIDS/ STI Control Programme. Ministry of Health / Ghana Health Service, 2008.

### **HIV MALAWI**

Treatment of AIDS. Guidelines for the use of Antiretroviral Therapy in Malawi. Third Edition. Ministry of Health, Malawi, 2008.

### **HIV PERU**

Norma Técnica para el Tratamiento Antiretroviral de Gran Actividad. Targa en Adultos infectados por el Virus de la Inmunodeficiencia Humana. Ministerio de Salud, Perú, 2005.

### **HIV UGANDA**

National Antiretroviral Treatment Guidelines for Adults, Adolescents, and Children. Third Edition. E.T. Katabira et al. Ministry of Health, Uganda, 2009.

### **Hospital Care for Children**

Pocket Book of Hospital Care for Children, second edition. Guidelines for the Management of Common Illnesses with Limited Resources. World Health Organization, 2013.

\* If you are doing a pediatrics rotation, a printed version of this is highly recommended.

### **IMAI**

Acute Care. Integrated Management of Adolescent and Adult Illness. World Health Organization 2009.

\* Guidelines designed for first level caregivers in low resource settings.

#### Malaria

Guidelines for the Treatment of Malaria. World Health Organization, 2011

#### **Malnutrition Chart**

Emergency Treatment of Severely Malnourished Children. World Health Organization.

### **Obstetrics MSF**

Obstetrics in remote settings. Practical guide for non-specialized health care professionals. Médecins sans Frontières, 2007.

### **Obstetrics WHO**

Managing complications in Pregnancy and Childbirth. A Guide for Midwives and Doctors. World Health Organization et al. 2007.

### **Public Health Medicine**

Short Textbook of Public Health Medicine for the Tropics. 4th Edition. A.O. Lucas and H. M. Gilles, 2004. Hodder Arnold. \*\* 5<sup>th</sup> Edition January 2015

### **TEXTBOOKS**

It is *recommended* that you bring one or more of the textbooks listed below, along with a travel guide to your particular country. Many of these titles, along with numerous others, are available at deeply discounted prices on the website **Teaching Aids at Low Cost (http://www.talcuk.org/)**.

Oxford Handbook of Tropical Medicine, 4<sup>th</sup> Edition
Michael Eddleston et al. (2014); Oxford University Press

The Little Black Book of International Medicine.
William A. Alto (2009); Jones and Bartlett.

Pocket Book of Hospital Care for Children, 2<sup>nd</sup> Edition. World Health Organization (2013).

Lecture Notes: Tropical Medicine, 7<sup>th</sup> Edition.
G. V. Gill and Nick Beeching (2014); Wiley-Blackwell.

Care of the Critically Ill Patient in the Tropics, 2<sup>nd</sup> Edition D. Watters et al. (2011); Macmillan Education.

## **APPENDIX**

On the following pages are copies of the forms listed below. PDF versions are also available on Catalyst Collect-It.

- GHCE Contract and Checklist
- Code of Conduct
- Acknowledgement of Risk form
- Weekly Activities Log
- Student Evaluation Form
- Program/Course Evaluation Form

### **GHCE Contract and Checklist**

The items below are <u>required</u> in order to participate in and receive credit for the Global Health Clinical Elective. Please read and sign this form, and keep a copy for your records. All forms and paperwork indicated below must be turned in to Rachel Lazzar in the Global Health Resource Center.

Stu	udent Name:
l co	onfirm that I wish to participate in the Global Health Clinical Elective at the following host institution:
Му	travel dates are:
Ιυι	nderstand that in order to participate in the GHCE, the items below are required:
	Completed all required clerkships.
	Be a student in good standing at the University Of Washington School Of Medicine.
	Attendance at Orientation December 17 from 8:30 a.m. – 4:00 p.m.
	Completion of a Travel Clinic Visit.
	Training and fit testing for an N-95 mask within the past twelve months.
	Procurement of 2-4 days of HIV Post-Exposure prophylactic medications.
	Purchasing OnCall International medical/travel insurance.
	Completed and signed Health Information Form.

	Completed and signed Emergency Contact Form.
	Completed and signed Acknowledgement of Risk.
	Signed Standards of Conduct form.
	A Letter of Invitation from the host institution.
	A copy of my passport and flight itinerary. A written Background Paper discussing the burden of disease and healthcare system of the host country.
	derstand that additional forms may be required to enter the host country (e.g. Visa, Yellow Fever Certificate), and that host institution may also request additional documents (e.g. a separate application).
Ιυι	nderstand that the following are required in order to obtain credit for the GHCE:
	A minimum of 6 weeks engaged in educational activities at the host site, at least 5 weeks of which are spent at the host institution or affiliated center. Any additional locations must be preapproved.
	At least 80% of the rotation must be spent in one or more of the following departments: Emergency Medicine, Family Medicine, Medicine, Obstetrics & Gynecology, and Pediatrics. General, rather than specialty care, is preferred.
	Submit weekly summaries of your clinical activities.
	Submit a minimum of three written Case Reports.
	Give a brief educational talk to your team on a mutually agreed-upon topic, and submit a copy to the GHRC.
	Complete an online, open book Exam.
	Submit two 1-2 page Reflective Essays about your experiences.
	Submit Student Evaluation forms filled out by your clinical supervisors.
	Complete a Course Evaluation Form.
	Update the Country Site Manual.
	Attend an Exit Interview after returning to the U.S.
	I understand that unforeseen events, including but not limited to natural disasters and social/political unrest, may result in my not being able to participate in the GHCE at my assigned institution. I acknowledge that the GHCE administration reserves the authority to make final decisions about the safety and appropriateness of an international rotation, and may prohibit travel or request that I return to the U.S. if it deems that the risks are too great. (In this case, all attempts will be made to arrange for an alternative experience, but final participation in an elective clerkship abroad cannot be guaranteed).
Sig	nature Date

### **Code of Conduct**

- 1) Conduct yourself in a way that demonstrates professionalism, cultural sensitivity, humility, and reflects positively on the University of Washington and the GHCE program.
- 2) Adhere to the rules and regulations of the host institution, and laws of the host country.
- 3) Avoid misrepresenting yourself as a doctor or other licensed health professional.
- 4) Refrain from engaging in any unsupervised clinical activities and/or providing care beyond your degree of knowledge and experience.
- 5) Only engage in clinical duties/rotations for which you have been given official permission.
- 6) Respect the host institution's standards in regards to the degree of hands-on clinical care permitted by students.
- 7) Follow U.S. medical ethical guidelines, including respect for patient privacy and autonomy, and the use of chaperones when conducting pelvic exams.
- 8) Use interpreters when conducting patient interviews and examinations, unless you are fluent in the patient's language.
- 9) Exercise common sense and good judgment to reduce risks to personal health and safety.
- 10) Alert the GHCE director and/or staff of any problems, conflicts, or concerns that arise.
- 11) Exercise judgment if posting to web-based journals (blogs); refrain from writing material that reflects poorly on the University of Washington, host country, or host institution.
- 12) Do not engage in any type of research or formal data collection unless such work has been pre-approved.
- 13) Do not accept payment for clinical services or engage in employment.
- 14) Be cautious about discussing religious or political ideology. Refrain from promoting a particular religious or political ideology. Avoid marches and demonstrations.
- 15) Do not take photographs of patients or medical wards without express permission.
- 16) Refrain from the giving of gifts or money to local staff, beyond simple tokens of appreciation or payment for services (such as transportation or assistance with translation).
- 17) Do not travel more than 150 miles outside of your host site without permission from the Global Health Resource Center and host country supervisor.
- 18) Obtain permission from the site supervisor and notify GHCE (Scott McClelland and Rachel Lazzar) of any travel away from the host site.

I have read and agree to abide by the above standards.	
Name	Date

### Acknowledgement of Risk form

Participation in clinical training in a developing country increases your exposure not only to minor inconveniences, but to serious threats to your personal health and safety. The risks include, but are not limited to:

- Sense of isolation, due to language barriers, cultural differences, and separation from friends and family.
- Personal discomfort due to rustic living conditions, uncomfortable means of transportation, and lack of familiar foods.
- Unreliable electricity, telephone service, and Internet access.
- Lack of privacy, unwanted personal attention, harassment, and/or discrimination.
- Unfamiliar working conditions within the healthcare setting, including different standards or care and variable adherence to universal precautions.
- Civil and political unrest, which may become violent.
- Pollution and adverse climactic conditions, including natural disasters.
- Psychological trauma and stress.
- Physical trauma, particularly motor vehicle accidents.
- Food and water-borne illnesses, vector-borne illnesses, and other communicable diseases.
- Limited access to quality medical care.
- Criminal activity, including theft, fraud, identity theft, kidnapping, sexual assault, and/or violence.

This document is an acknowledgment of the risks involved in participating in the GHCE. Please initial each section of the document and sign below.

	•	ation about my GHCE country, and I hav ttps://travelregistration.state.gov/ibrs/u	_
I have submitted a	n <b>Emergency Contact Form</b> to	the Global Health Resource Center.	
	nen to initiate <b>Emergency Cont</b> I Information Manager.	tact Procedures, including how to conta	act the UW's
	nformation on some of the hea de by common sense strategies	alth and safety risks associated with part s to minimize my risks.	icipation in the
travel to or remain		enter decides that it is no longer safe to be prevented from participating in the G	•
study programs. Howeve adverse events that may personal illness, injury, or	r, neither the GHRC nor the Univ occur while studying abroad, inco death. My signature below indic	prepare participants for the risks involved versity of Washington assumes any respo- luding but not limited to damage to or los cates that I am voluntarily choosing to pa ime full responsibility for the health and s	nsibility for as of property, rticipate in the
Printed Name	Signature:	Date:	

## Weekly Activities Log

Name	Week Number
Clinic/Hospital	Location
Clinical Service(s)	Dates
Did you take any overnight call? If yes, I	how many nights?
Indicate the number of hours you spent in each of the	e activities below:
Ward Rounds	
Outpatient Clinic	
Other Patient Care Activities	
TOTAL CLINICAL HOURS	
Didactics/Lectures*	
Language study	
Self-Study	
TOTAL NON-CLINICAL HOURS	
*List the titles of any lectures you attended:	
List any procedures you assisted with or perf	ormed:
Describe any additional educational activitie	s you participated in:
My signature indicates that the information above is	true and correct.
Sign:	Date

### Student Evaluation Form

Thank you for helping to supervise and train a medical student from the University of Washington! Please take a moment to fill out this form so we know how our student is doing. Please also share any thoughts you have about our program.

Feel free to contact our program director if you have any comments, concerns, or suggestions regarding our student(s) or our program:

R. Scott McClelland, MD, MPH
c/o Rachel Lazzar
University of Washington Department of Global Health
Harris Hydraulics Building
1510 San Juan Road, Box 357965
Seattle, WA, USA
mcclell@uw.edu
+1-206-616-1159
+1-206-543-4278

Student Name	
Evaluator Name and Title	
Contact Information (phone, email)	
Briefly describe your role in relationship to the student.	
Please describe your degree of interaction with the student (circle one)	Minimal and superficial contact  Sporadic but in-depth contact  Frequent and in-depth contact

### **Student Evaluation Form continued**

Please rate the student in each of the categories below using the following scale:

- 1 = Unacceptable
- 2 = Below expectations
- 3 = Met expectations
- 4 = Exceeded expectations
- 5 = Exceptional

N/A = Not able to evaluate

Clinical knowledge	1	2	3	4	5	N/A
Ability to adapt to local healthcare environment	1	2	3	4	5	N/A
Procedural skills	1	2	3	4	5	N/A
Professionalism (dependability, courteousness cooperativeness)	1	2	3	4	5	N/A
Cultural sensitivity	1	2	3	4	5	N/A
Compassion and respectfulness towards patients and families	1	2	3	4	5	N/A
Educational attitudes (active engagement in learning)	1	2	3	4	5	N/A

Please describe any concerns you have regarding this student:

Provide any additional feedback on this student's strengths and weaknesses:

Would you be willing to supervise medical students from the University of Washington in the future? Why or why not?

Please share any feedback you have regarding our program (student selection, preparation, course requirements, etc.)

### Program/Course Evaluation Form

We appreciate your frank comments about the course and your international clerkship site. Please evaluate the program, bearing in mind the course objectives below. Note that these will NOT be shared directly with the host sites.

### At the end of this course, students will be able to:

- 1. Discuss the relationship between health and the social determinants of health.
- 2. Identify barriers to health and healthcare in low-resource settings.
- 3. Demonstrate knowledge of the major causes of morbidity and mortality in the region in which they are working.
- 4. Demonstrate an understanding of healthcare delivery strategies in low-resource settings.
- 5. Demonstrate and understanding of cultural and ethical issues in working with underserved populations.
- 6. Demonstrate the ability to adapt clinical skills and practice in a resource-constrained environment.
- 7. Demonstrate humility, flexibility, professionalism, and cultural sensitivity when working within a different healthcare context.

### Usefulness of the orientation in Seattle

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

### Usefulness of written/electronic materials

Not	Very Poor	Poor	Fair	Good	Very Good	Excellent
Applicable						

### **Support from GHRC**

Not Applicab	Very Poor	Poor	Fair	Good	Very Good	Excellent

### Success in meeting course goals and objectives

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Overall educational value of clerkship

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Rate the educational value of each of the components of the curriculum:

## **Country profile**

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Online Pre-GHCE Quiz

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent
F F						

## Case reports

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Creating a presentation/ teaching materials

Not	Very Poor	Poor	Fair	Good	Very Good	Excellent
Applicable						

## **Reflective essay**

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

What was the most useful aspect of the elective?
What was the least useful aspect of the elective?
Was your experience in this clerkship in compliance with the SOM's clerkship duty hours policy? (No more than 80 hours awake time in the hospital or clinic per week).  Yes No
If yes, please explain:
What suggestions do you have for improving the GHCE?
Final comments: Please provide any additional comments about the GHCE.

Evaluate your primary host site using the questions below. **Primary Clerkship Site:** ☐ Naivasha District Hospital, Naivasha, Kenya ☐ Mulago Hospital, Kampala, Uganda ☐ Hospital Nacional Dos de Mayo, Lima, Peru ☐ Universidad Cesar Vallejo, Trujillo, Peru ☐ Mua Mission Hospital, Mtakataka, Malawi ☐ National Autonomous University of Nicaragua and Atención Primaria en Salud and Ministry of Health, Managua, Nicaragua ☐ Dhulikhel Hospital, Kathmandu, Nepal Support at the host site Not Very Poor Poor Fair Good Very Good Excellent Applicable Safety at the host site Not Very Poor Good Very Good Excellent Poor Fair Applicable Adequacy of accommodations Not Very Poor Very Good Excellent Poor Fair Good Applicable Degree of involvement of attending physician(s) Not Very Poor Poor Good Very Good Excellent Fair Applicable Degree of involvement of resident physician(s) Fair Not Very Poor Poor Good Very Good Excellent

Applicable

## Overall degree of supervision

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent
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## Quality of bedside/informal teaching

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## **Quality of didactics/lectures**

A	Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Numbers of patients seen

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Variety of patients seen

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Opportunity for direct involvement with patient care

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Opportunity to learn about the local health system.

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

Opportunity to learn about the social determinants of hea
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Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Opportunity to learn about ways to engage in global health as a career

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

### **Hospital infrastructure**

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Quality and availability of laboratory services

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

## Quality and availability of imaging/radiology services

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent
- ' '						

## Overall quality of patient care

Not Applicable	Very Poor	Poor	Fair	Good	Very Good	Excellent

Would you recommend this training site for future students? Why or why not?