

Summer Internship 2009
 Center for Reproductive Medicine
 Cleveland Clinic

Course Evaluation Sheet

Name: <i>Stephanie Cabler</i>	Employee Number: <i>07608</i>
Appointment Dates: <div style="text-align: center; margin-top: 10px;">From: <i>06/01/09</i> To: <i>07/24/09</i></div>	
Permanent Address: <i>2333 Kettington Rd., Chesterfield, MO 63017</i>	
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Academic background:								
High School:	Junior	<input type="checkbox"/>	Senior	<input type="checkbox"/>				
Undergraduate:	Freshman	<input type="checkbox"/>	Sophomore	<input type="checkbox"/>	Junior	<input type="checkbox"/>	Senior <input checked="" type="checkbox"/>	
Graduate:	Year 1	<input type="checkbox"/>	Year 2	<input type="checkbox"/>	Year 3	<input type="checkbox"/>	Year 4	<input type="checkbox"/>
Medical School:	Year 1	<input type="checkbox"/>	Year 2	<input type="checkbox"/>	Year 3	<input type="checkbox"/>	Year 4	<input type="checkbox"/>
Duration of your stay in our Center:								
Less than 4 weeks	<input type="checkbox"/>	8 weeks	<input checked="" type="checkbox"/>	More Than 8 weeks				

How did you hear about this internship?

- School Counselor
- School Posting
- Internet
- Center website
- Colleagues
- Other (please specify) _____

How would you rate the Electronic Literature Search Training?

Very helpful [] Helpful Not helpful []

How would you rate the access to Online Scientific Journals?

Very helpful Helpful [] Not helpful [] Not applicable []

Have you had prior training in scientific writing?

Yes [] No

If Yes, where was it published?

School magazine	[]	Lab report	[]
Journal	[]	Book	[]

Did you attend a scientific writing course offered by our program?

Yes No []

If Yes, How did it help you in the following?

Writing of original articles (scientific manuscripts):			
Very helpful []	Helpful <input checked="" type="checkbox"/>	Not helpful []	Not applicable <input checked="" type="checkbox"/>
Writing of review articles/ book chapters):			
Very helpful []	Helpful <input checked="" type="checkbox"/>	Not helpful []	Not applicable []
Review of scientific articles for various journals:			
Very helpful []	Helpful <input checked="" type="checkbox"/>	Not helpful []	Not applicable []

Please comment on the top 5 Speakers:

Lectures	Excellent (5)	Very Good (4)	Good (3)	Fair (2)	Poor (1)
Speaker 1 (Name):					
Title: DR. Sabanegh					
Overall Rating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaker 2 (Name):					
Title: DR. Montagne					
Overall Rating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaker 3 (Name):					
Title: DR. Ragheb					
Overall Rating	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaker 4 (Name):					
Title: DR. Kingsberg					
Overall Rating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaker 5 (Name):					
Title: DR. Giddfarb					

Overall Rating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Additional comments on faculty members

Which Lab tours you attended:

<u>Protonomics</u>	A. Name of the Lab
<u>Biometrics</u>	B. Name of the Lab
<u>Andrology</u>	C. Name of the Lab
_____	D. Name of the Lab
_____	E. Name of the Lab
_____	F. Name of the Lab
_____	G. Name of the Lab

Please rate the lab tour based on content, clarity, relevance and timeliness:

Lab Tour	Excellent (5)	Very Good (4)	Good (3)	Fair (2)	Poor (1)
A. Lab:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Lab:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Lab:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Lab:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Lab:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. Lab:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. Lab:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What did you like best about this Lab tour?

I loved seeing the Andrology lab and its relevance to the research we were doing. It really tied in the research and clinical aspects of the internship.

What did you dislike about this Lab tour?

Did you attend any surgeries?

- DR. Falcone A. Name of the Surgeon
- DR. Montague B. Name of the Surgeon
- _____ C. Name of the Surgeon
- _____ D. Name of the Surgeon
- _____ E. Name of the Surgeon

Please rate your surgical experience:

Surgeries	Excellent (5)	Very Good (4)	Good (3)	Fair (2)	Poor (1)
A. Name of the Surgeon	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Name of the Surgeon	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Name of the Surgeon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Name of the Surgeon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Name of the Surgeon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What did you like best about the surgery?

Dr. Montague was very interactive and enthusiastic about my presence in the OR. He explained everything he did and made the whole experience very enjoyable.

Which lab demonstrations did you attend? none

- _____ A. Name of the demonstration
- _____ B. Name of the demonstration
- _____ C. Name of the demonstration
- _____ D. Name of the demonstration

E. Name of the demonstration

Please rate the lab demonstrations based on expertise, content, ease in understanding:

Lab Demonstrations	Excellent (5)	Very Good (4)	Good (3)	Fair (2)	Poor (1)
A. Name of the demonstration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Name of the demonstration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Name of the demonstration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Name of the demonstration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. Name of the demonstration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What did you like best about these lab demonstrations?

How will you rate your experience in the following?

Topic	Excellent	V Good	Good	Fair	Poor	N/A
Orientation procedure	[]	[]	<input checked="" type="checkbox"/>	[]	[]	[]
Center policies	[]	<input checked="" type="checkbox"/>	[]	[]	[]	[]
Center environment	[]	<input checked="" type="checkbox"/>	[]	[]	[]	[]
Center facilities	[]	[]	<input checked="" type="checkbox"/>	[]	[]	[]

Support from Research mentors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support from Research Staff	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secretarial support	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did you receive regular & constructive feedback by staff	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the staff listen to your concerns and helped you	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of mentors to assist you	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lectures by CCF faculty and other speakers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lecture topics appropriate for learning	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of scientific talks	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunity to observe bench research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Opportunity to meet & interact with physicians and surgeons	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunity to attend surgical procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunity to visit other labs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunity to interact with other interns	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall experience	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Overall assessment of our program (please cross one):

1. Was your Summer Internship period adequate?

Too Long <input type="checkbox"/>	Adequate <input checked="" type="checkbox"/>	Too short <input type="checkbox"/>
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2. Did your experience in our program help in improving your skills and scientific knowledge?			
Very helpful <input checked="" type="checkbox"/>	Helpful <input type="checkbox"/>	To some extent <input type="checkbox"/>	Not helpful <input type="checkbox"/>
3. Did our program help you in improving your public speaking and communication skills?			
Very helpful <input type="checkbox"/>	Helpful <input checked="" type="checkbox"/>	To some extent <input type="checkbox"/>	Not helpful <input type="checkbox"/>
4. Did the program help you in writing high quality research articles?			
Very helpful <input checked="" type="checkbox"/>	Helpful <input type="checkbox"/>	To some extent <input type="checkbox"/>	Not helpful <input type="checkbox"/>
5. To what extent was the training helpful in meeting your goals?			
Very helpful <input type="checkbox"/>	Helpful <input checked="" type="checkbox"/>	To some extent <input type="checkbox"/>	Not helpful <input type="checkbox"/>
6. How will you recommend this program to other candidates looking for similar training?			
Highly recommend <input checked="" type="checkbox"/>	Recommend <input type="checkbox"/>	Not recommend <input type="checkbox"/>	Not sure <input type="checkbox"/>

How do you rate the social interaction in the research program (celebration of birthdays, recognition of various interns for their work, interaction with various researchers, speakers, etc.)?

Excellent <input type="checkbox"/>	Very good <input checked="" type="checkbox"/>	Adequate <input type="checkbox"/>	Not sure <input type="checkbox"/>
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Mention some of the important projects, assignments completed by you during your tenure:

During my tenure here, I completed a review article
entitled "Obesity linked sperm disorders and male infertility".
It was invited to be published in Nature Reviews Urology.

Provide some specific suggestions to further improve the internship training program:

~~Improving the program will be hard to do as I had a great time, but as was mentioned many times, condensing (not cancelling) the lectures would allow longer blocks of time to work on our review articles~~

What was the most effective aspect(s) of internship and why?

1. ~~Support from fellows and mentors - provided guidance~~
2. ~~Lectures - no matter what topic~~ - broadened our knowledge of many different topics in medicine, not just reproductive

What was the least effective aspect(s) of internship and why?

1. ~~Lab tours - I enjoyed the andrology one, but others were over my head sometimes and were not relevant to~~
2. ~~Reproductive Medicine.~~

As a result of what you learned in this internship, will it help you select a career in?

Medicine OB/GYN UROLOGY Reproductive Medicine

Very likely Likely - Some what likely Not sure

If so please list specific attributes of this internship helped you arrive to this decision:

~~The variety and educational aspect of lectures, research and lab observations & shadowing opportunities made me even more enthusiastic about applying to medical school.~~

Would you recommend this internship to your colleagues: Yes No

Please rate the following factors in order of importance in deciding to attend this Internship (1 being the most important?)

Internship	1	2	3	4	5

Program Goals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initial Interview	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reproductive Center website information	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reputation of Cleveland Clinic	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost of the Course	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reputation of Faculty	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feedback by Center Alumni	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What would you consider as an appropriate Internship course fee for future candidates?

\$750 \$1,000 \$1,500 \$2,000 \$3,000 \$5,000

Thank you for taking the time to complete this evaluation

Your comments will be reviewed and are appreciated

Name: Stephanie Cabler

Signature/ Date: Stephanie Cabler 07/20/09