

Summer Internship 2009
 Center for Reproductive Medicine
 Cleveland Clinic

Course Evaluation Sheet

Name: <u>Aarti Gaglani</u>	Employee Number: <u>C08749</u>
Appointment Dates: <p align="center">From: <u>06/15/09</u> To: <u>07/31/09</u></p>	
Permanent Address: <u>4181 Lyon Drive, Columbus, OH 43220</u>	
Phone: <u>614-404-7108</u>	E-mail: <u>agaglani@neoucom.edu</u>

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 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 checked="" 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	<input type="checkbox"/>			

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 | <input type="checkbox"/> | Lab report | <input type="checkbox"/> |
| Journal | <input type="checkbox"/> | Book | <input type="checkbox"/> |

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 []
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Writing of review articles/ book chapters):

Very helpful []	Helpful [<input checked="" type="checkbox"/>]	Not helpful []	Not applicable []
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Review of scientific articles for various journals:

Very helpful []	Helpful [<input checked="" type="checkbox"/>]	Not helpful []	Not applicable []
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Please comment on the top 5 Speakers:

Lectures	Excellent (5)	Very Good (4)	Good (3)	Fair (2)	Poor (1)
Speaker 1 (Name): Adi Mehta					
Title: Metabolic Syndrome					
Overall Rating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaker 2 (Name): Kristina Sole					
Title: Female STDs					
Overall Rating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaker 3 (Name): Dr. Ahmed Ragheb					
Title: Intro to Male Repro- System					
Overall Rating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaker 4 (Name): Sylvia Morrison					
Title: Public Speaking					
Overall Rating	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaker 5 (Name): Dr. Ashok Agarwal					
Title: Lab Eval of Male Infertility: Current & Future Concepts					

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

Dr. Pima Dada + Dr. Rakesh Sharma were also spectacular!

Which Lab tours you attended:

- Hybridoma A. Name of the Lab
- Flow Cytometry B. Name of the Lab
- Comp Biomodeling Core 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: Hybridoma	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Lab: Flow Cytometry	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Lab: Comp Biomodeling Core	<input type="checkbox"/>	<input checked="" 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?

Very informative + not just a lecture but more visuals!

What did you dislike about this Lab tour?

Sometimes it wasn't relevant to what I was interested in - but still informative.

Did you attend any surgeries?

not until 7/23/09 - cannot rate

- Dr. Sabanezh A. Name of the Surgeon
- _____ 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 type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Name of the Surgeon	<input 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?

Which lab demonstrations did you attend?

- Flow cytometry - Mahfouz 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 <i>Mahfouz - flow cytometry</i>	<input type="checkbox"/>	<input checked="" 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?

I liked the passion Dr. Mahfouz showed towards his demo. It was very engaging + exciting.

How will you rate your experience in the following?

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

Internship Evaluation Form

Support from Research mentors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support from Research Staff	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secretarial support	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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 type="checkbox"/>	<input checked="" 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 checked="" type="checkbox"/>	<input type="checkbox"/>
Opportunity to meet & interact with physicians and surgeons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunity to attend surgical procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunity to visit other labs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunity to interact with other interns	<input checked="" type="checkbox"/>	<input 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"/>

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

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

Original preservation writing assignment (w/ Dr. Said); organizing who will tally votes for final awards; support on endometriosis

Article; poster assignment (making sure everyone filled all of them out); compiling final order of presentations for July 24th

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

Not as many lectures; fewer ^{group} meetings; more individual meetings; more instruction on how to write a review article specifically.

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

1. communication/accessibility to mentors
2. gaining training & experience in research

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

1. amount of time allotted for individual work
2. not having hands-on experience (bench research)

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 lectures - esp. Kidney Transplant (Dr. Madlin) one.
It just strengthened my desire to enter medicine and possibly
an OB/GYN

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

Internship Evaluation Form

Program Goals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initial Interview	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reproductive Center website information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Reputation of Cleveland Clinic	<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

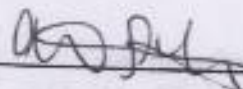
What would you consider as an appropriate Internship course fee for future candidates?

\$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: Aarti Aglani

Signature/ Date:  7/20/09