

AACOM 2022-2023 Academic Year Survey of Graduating Seniors and POMEE Survey

Start of Block: AACOM Introduction

TO THE STUDENTS: Your opinions and attitudes regarding your osteopathic medical education, plans for medical practice and debt information are very important as both the colleges and osteopathic profession develop and plan for the future of osteopathic medical education. Please take a moment to complete the following questionnaire to assist in planning for the future of osteopathic medical education. This year, we have added important questions to assess graduating students' baseline well-being; evaluation of the residency match process, and the final administration of the Project in Osteopathic Medical Education and Empathy (POMEE) questions. The data collected in this survey will be either aggregated or summarized; individually identifiable information will not be made available to colleges or other organizations. The purpose for requesting your identification is to allow for longitudinal studies linking your responses when you took similar surveys throughout your medical education.

This survey will take approximately twenty-five to thirty minutes to complete. Your personal survey link provided by your school and/or AACOM allows you the flexibility to save and complete the survey during a time that is more convenient to you.

The following instructions will ensure the successful completion of this survey: 1. Use the survey's navigation buttons (e.g. BACK, NEXT) instead of your web browser's "forward" and "back" buttons to move throughout the survey. 2. Only complete this survey ONCE. 3. An "*" indicates a required response.

Last Name

First Name

Middle Name (or other/alternative last name)
Suffix
* Please enter your email address:
x→ * Osteopathic Medical School
▼ A.T. Still University Kirksville College of Osteopathic Medicine, MO William Carey University College of Osteopathic Medicine, MS
End of Block: AACOM Introduction
Start of Block: POMEE

Part I: PROJECT IN OSTEOPATHIC MEDICAL EDUCATION AND EMPATHY (POMEE)

Our medical college is pleased to partner with AACOM to participate in the final administration of this nationwide Project in Osteopathic Medical Education and Empathy (POMEE) Survey. The validity of the findings depends on the representativeness of the participating samples to reflect the entire population of osteopathic medical students in the U.S. Thus, we would like to encourage all of our students to complete this survey, assuring broad representation across all colleges of osteopathic medicine.

Please read the following statements before starting the survey:

My completion of this survey is an indication of my voluntary participation in this Project in Osteopathic Medical Education and Empathy. I can refuse to participate or stop my participation at any time without penalty. I understand that individual data will remain confidential, and only aggregate, group data will be reported.

* Would you like to proceed with completing the Osteopathic Medical Education and Empathy Survey?

◯ Yes

O No

Skip To: POMQ33 If * Would you like to proceed with completing the Osteopathic Medical Education and Empathy Survey? = No

Were you ever employed in a health care role prior to entering medical school?

◯ Yes			
◯ No			
Page Break			

What was your undergraduate major? (Check all that apply)

Aerospace Engineering
Anthropology
Applied Mathematics
Architecture
Arts/Fine Arts
Biochemistry
Biology or Biological Sciences
Biomath
Biomedical Engineering
Biomedical Sciences
Biophysics
Chemistry
Chemical Engineering
Civil Engineering
Classics
Computer Science
Economics
Electrical Engineering

\cup

Engineering

English

Environmental Studies

Foreign Language

General Studies

Genetics

Geology

Hispanic Studies

History

Honors Program

Human Biology

Human Evolution Biology

Humanities

Instrumental Music

Interdisciplinary

Literature

Linguistics/Speech

Mathematics

\bigcup		

Mechanical Engineering Microbiology Microbiology & Immunology Molecular Biology Music **Natural Science** Neuroscience Philosophy Physics Physiology Pre-Med Psychobiology Psychology Religion Science General Science-Business Science other Bio

Sociology

	Theatre Arts
	Zoology
	Other
	No Major
Page Break	

Please indicate the extent of your agreement or disagreement with each of the following statements by clicking the appropriate circle. A higher number on the scale indicates more agreement.

	Strongly Disagree (1)	(2)	(3)	(4)	(5)	(6)	Strongly Agree (7)
Physicians' understanding of their patients' feelings and the feelings of their patients' families does not influence medical or surgical treatment	0	0	0	0	0	0	0
Patients feel better when their physicians understand their feelings	0	0	0	0	0	0	0
It is difficult for a physician to view things from patients' perspectives	0	0	0	0	0	0	0
Understanding body language is as important as verbal communication in physician- patient relationships	0	0	0	0	0	0	0
A physician's sense of humor contributes to a better clinical outcome	0	0	0	0	0	0	\bigcirc
Because people are	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

different, it is difficult to see things from patients' perspectives

Attention to patients' emotions is not important in history taking

Attentiveness to patients' personal experiences does not influence treatment outcomes

Physicians should try to stand in their patients' shoes when providing care to them

Patients value a physician's understanding of their feelings which is therapeutic in its own right

Patients' illnesses can be cured only by medical or surgical treatment; therefore, physicians' emotional ties with their patients do not have a significant influence in medical or surgical

\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
0	0	0	\bigcirc	\bigcirc	\bigcirc	0
\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc

treatment

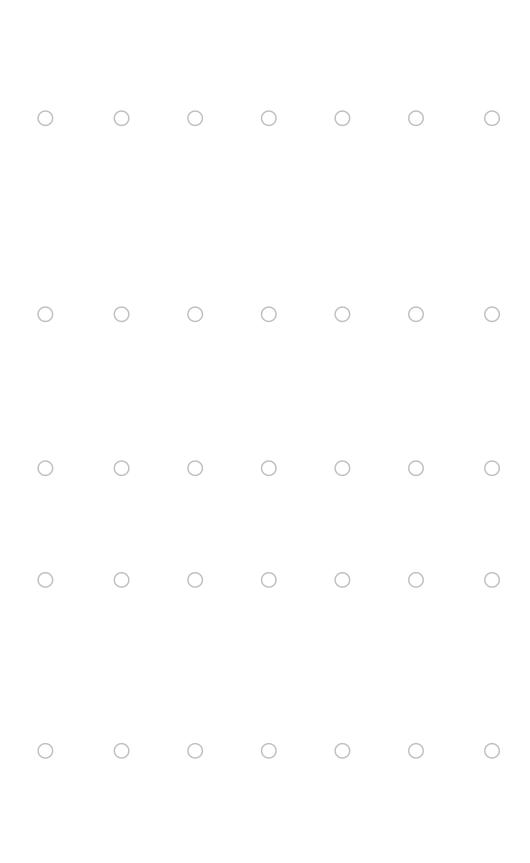
Asking patients about what is happening in their personal lives is not helpful in understanding their physical complaints

Physicians should try to understand what is going on in their patients' minds by paying attention to their nonverbal cues and body language

I believe that emotion has no place in the treatment of medical illness

Empathy is a therapeutic skill without which the physician's success is limited

Physicians' understanding of the emotional status of their patients, as well as that of their families is one important component of the physicianpatient



relationship							
Physicians should try to think like their patients in order to render better care	0	0	0	0	\bigcirc	\bigcirc	0
Physicians should not allow themselves to be influenced by strong personal bonds between their patients and their family members	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
l do not enjoy reading non- medical literature or the arts	\bigcirc						
I believe that empathy is an important therapeutic factor in medical treatment	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0

Page Break

Please respond to the following statements by indicating if the statement is "True" or "False" about you.

	True	False
I never met a person that I didn't like	\bigcirc	\bigcirc
I have always told the truth	\bigcirc	\bigcirc
I always win at games	\bigcirc	\bigcirc
I have never been bored	\bigcirc	\bigcirc
l never get lost, even in unfamiliar places	\bigcirc	\bigcirc
I never get annoyed when people cut ahead of me in line	\bigcirc	\bigcirc
I never have any trouble understanding anything I read the first time I read it	\bigcirc	\bigcirc
No matter how hot or cold it gets, I am always quite comfortable	\bigcirc	\bigcirc
I have never lost anything	\bigcirc	\bigcirc
It doesn't bother me if someone takes advantage of me	\bigcirc	\bigcirc

Page Break -

X→

	Does not describe me well (1)	(2)	(3)	(4)	Describes me very well (5)
I often have tender, concerned feelings for people less fortunate than me	0	0	0	0	0
Sometimes I don't feel very sorry for other people when they are having problems	0	0	\bigcirc	\bigcirc	\bigcirc
When I see someone being taken advantage of, I feel kind of protective towards them	0	\bigcirc	0	0	0
Other people's misfortunes do not usually disturb me a great deal	0	0	\bigcirc	0	0
When I see someone being treated unfairly, I sometimes don't feel very much pity for them	0	0	\bigcirc	0	\bigcirc
I am often quite touched by things that I see happen	0	\bigcirc	\bigcirc	0	0

Please indicate the extent of how the following statements best describes you by clicking the appropriate circle. Items are answered on a 5-point Likert scale (1=Does not describe me at all, 5=Describes me very well).

I would describe myself as a					
pretty soft- hearted person	0	\bigcirc	0	\bigcirc	\bigcirc
In emergency situations, I feel apprehensive and ill-at- ease	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
I sometimes feel helpless when I am in the middle of a very emotional situation	\bigcirc	\bigcirc	0	0	0
When I see someone get hurt, I tend to remain calm	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
Being in a tense emotional situation scares me	\bigcirc	0	0	0	0
I am usually pretty effective in dealing with emergencies	\bigcirc	0	0	0	0
I tend to lose control during emergencies	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
When I see someone who badly needs help in an emergency, I	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0

emergency, I go to pieces

Please indicate the extent of your agreement or disagreement with each of the following statements by clicking the appropriate circle. A higher number on the scale indicates more agreement.

	Strongly Disagree (1)	(2)	(3)	(4)	(5)	(6)	Strongly Agree (7)
Health professionals should be viewed as collaborators rather than superiors or subordinates.	0	0	0	0	0	0	0
All health professionals should have responsibility for monitoring the effects of interventions on their patients/clients.	0	0	0	0	0	0	0
Teamwork in healthcare cannot be an outcome of interdisciplinary education.	0	0	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Academic institutions should develop interdisciplinary educational programs to enhance collaborative practice.	0	0	0	0	0	\bigcirc	\bigcirc
Health professionals should not question decisions made by colleagues even if they feel that it might	0	0	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc

have detrimental effects on the patient/client.

All health professionals can contribute to decisions regarding the well-being of patients/clients.

Collaborative practice always works best when health professionals develop working relationships to achieve agreed upon goals.

Interdisciplinary education and interprofessional collaboration are not linked to one another.

The primary function of other health professionals is to follow, without question, orders by the physicians who are treating the patients/clients.

Interprofessional collaboration which includes mutual respect and communication improves the work environment.

All health professionals

0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
0	0	0	0	\bigcirc	\bigcirc	0
0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
0	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
0	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
\bigcirc						

should contribute to decisions regarding improving care of their patients/clients.

Job satisfaction has nothing to do with interprofessional collaborative practices.

Health professionals should be made aware that their colleagues in other healthrelated disciplines can contribute to the quality of care.

Health professionals should be involved in making policy decisions concerning their work.

Because of role differentiation, there are not many overlapping areas of responsibility among health professionals in providing care to their patients/clients. To promote the

best interest of the patient/client,



health professionals should use their own judgment rather than consulting their colleagues in other healthrelated disciplines.

Medical errors will be minimized when collaboration exists among health professionals.

All health professionals have their own special expertise to render quality care to their patients/clients.

Health professionals working together cannot be equally accountable for the care/service they provide.

During their education, all health profession students should have experience working in teams with other health profession students in order to understand their respective role.

0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
0	0	\bigcirc	\bigcirc	\bigcirc	0	0
\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0
0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	0

Please indicate the extent of your agreement or disagreement with each of the following statements by clicking the appropriate circle. A higher number on the scale indicates more agreement.

	Strongly Disagree (1)	(2)	(3)	Strongly Agree (4)
Searching for the answer to a question is, in and of itself rewarding	0	0	0	0
Life-long learning is a professional responsibility of all physicians	\bigcirc	0	\bigcirc	0
I enjoy reading articles in which issues of medicine are discussed	\bigcirc	\bigcirc	\bigcirc	0
I routinely attend meetings of student study groups	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I read medical literature in journals, websites or textbooks at least once every week	\bigcirc	\bigcirc	\bigcirc	0
I routinely search computer databases to find out about new developments in medicine	0	0	0	0
I believe that I would fall behind if I stopped learning about new developments in	\bigcirc	0	\bigcirc	0

medicine

One of the important goals of medical school is to develop students' lifelong learning skills Rapid changes in medical science require constant updating of knowledge and development of new professional

I always make time for learning on my own, even when I have a busy class schedule and other obligations

skills

I recognize my need to constantly acquire new professional knowledge

I routinely attend optional sessions, such as grand rounds, guest lectures, or clinics where I can volunteer to improve my knowledge and clinical skills

I take every opportunity to gain new knowledge/skills that are

	0		\bigcirc
0	\bigcirc	\bigcirc	0
	\bigcirc		
0	0	\bigcirc	0
0	\bigcirc	\bigcirc	0
\bigcirc	\bigcirc	\bigcirc	\bigcirc

important to medicine				
My preferred approach to finding an answer to a question is to consult a credible resource such as a text, computer database, or colleague	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Page Break				

Below are a number of statements that describe different feelings that you may feel at work. Please indicate how often, in the past 30 days, you have felt each of the following feelings.

	Never or Almost Never (1)	Very Infrequently	Quite Infrequently	Sometimes	Quite Frequently	Very Frequently	Always or Almost Always (7)
I feel tired	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
I have no energy for going to class in the morning	0	0	0	0	\bigcirc	\bigcirc	0
l feel physically drained	0	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
I feel fed up	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I feel like my "batteries" are "dead"	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
l feel burned out	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
My thinking process is slow	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I have difficulty concentrating	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I feel I'm not thinking clearly	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
l feel I'm not focused in my thinking	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I have difficulty thinking about	0	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

complex things							
I feel I am unable to be sensitive to the needs of coworkers and patients	0	0	\bigcirc	0	0	0	0
I feel I am not capable of investing emotionally in coworkers and patients	0	0	0	0	0	0	0
I feel I am not capable of being sympathetic to co-workers and patients	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
Page Break							

Please indicate the extent of your agreement or disagreement with each of the following statements by clicking the appropriate circle. A higher number on the scale indicates more agreement.

	Absolutely Disagree (1)	(2)	(3)	(4)	(5)	(6)	Absolutely Agree (7)
The osteopathic philosophy of holistic care greatly influenced my decision to attend an osteopathic school	0	0	0	0	0	0	0
A patient is healed when the underlying pathological processes are corrected or controlled	0	0	\bigcirc	0	0	0	0
Patients whose physicians are knowledgeable of multiple medical systems and complementary and alternative practices (i.e., Chinese, Ayurvedic, Osteopathic Manipulative Medicine, Homeopathic, etc.), in addition to conventional medicine, do better than those whose physicians are only familiar with conventional medicine	0	0	0	0	0	0	

Therapeutic touch has been completely discredited as a healing modality Physicians who model a balanced lifestyle (i.e. Attending to their own health, social, family and spiritual needs, as well as interests beyond medicine) generate improved patient satisfaction Osteopathic Manipulation often makes patients "feel" better temporarily, but does not lead to objective improvement in long-term outcomes for patients A strong relationship between patient and physician is an extremely valuable therapeutic intervention that leads to improved outcomes



Instilling hope in patients is a \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc physician's duty \bigcirc \bigcirc

Osteopathic manipulative therapy is a valuable method for resolving a wide variety of musculoskeletal problems (beyond back pain) Information about the relative effectiveness of treatments that is obtained by research methods other than

randomized controlled trials has little value to physicians

Physicians who strive to understand themselves provide better care than those who do not

Psychosocial factors are as important as biomedical factor in health and illness

Medical problems need specific medical and surgical interventions, thus, holistic approaches to

medical problems cannot be as beneficial as targeted biomedical treatment							
Touch and tactile approaches may not serve a significant purpose in patient care	0	0	0	0	0	0	0

Page Break

Please indicate if any of the following statements below describes events/observations/ experiences/learning **in the past year** that <u>either positively or negatively influenced your views</u> <u>on the patient-physician empathic relationship</u> by clicking on as many selections below.

	Positive role model
	Negative role model
	High volume of materials to learn
	Sleep deprivation
	Market-driven health care system
	Defensive medicine to protect one's own benefit or to avoid litigation
	Overreliance on computer-based diagnostic and therapeutic technology
medicine	The art of medicine is not viewed by faculty in the realm of evidence-based
	Emotional detachment and clinical neutrality in clinical relationships
	Harassment and belittlement experiences
residents	Vulgar humor and unprofessional attitudes among attending physicians or
	Learning what to do by observing "good" doctors
	COVID-19 pandemic
	Learning what not to do by observing "bad" doctors
	Overly demanding patients
	Unappreciative patients

	Hospital policies and regulations
	Insurance regulations
is a busir	Over-hearing attending physicians, faculty, or medical staff stating that medicine ness not a human service profession
	Heavy workload and demanding curriculum in medical school
	Hostile environment of medical school
	Verbally abusive medical staff/attending
	Lack of sufficient time to form empathic relationship
	Bureaucratic side of medicinal practice that overshadows empathic engagement
	A lack of caregiver's autonomy

Please list in the following box any other events/experiences/observations/learning, not listed above, that either positively or negatively influenced your views on patient-physician empathic relationship *in the past year*.



Please enter your e-mail address in the following box. We strongly recommend that you write your email address for two reasons: first, we will send to your email address a confidential report of your empathy scores and related norm table for assessment of your scores at the completion of the project; second, your email address will be used as a unique identifier to merge data from different survey administrations, and will never be shared. After data merging is completed, your e-mail address will be removed from the database.

*			
Email			
	 		 -
Page Break			

Thank you for your participation in the Project in Osteopathic Medical Education and Empathy Survey. If you have any questions about the Project in Osteopathic Medical Education and Empathy Survey please contact meded@aacom.org. If you have questions about your rights as a research participant, you can contact the American Association of Colleges of Osteopathic Medicine at 301-968-4148.

End of Block: POMEE

Start of Block: Resilient Mindset

Part II: RESILIENT MINDSETS IN MEDICINE

The questions in this section will collect data to help AACOM and your individual COMs assess the impact of medical school and wellness initiatives on all our students. Please answer each question as honestly as possible.

Please respond to the following items:

	Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree
You can learn new things, but you cannot really change your basic intelligence.	0	0	0	0	0	0
You have a certain amount of intelligence, and you really cannot do much to change it.	0	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Your intelligence is something about you that you cannot change very much.	0	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
The faculty at my medical school seem to believe students have a certain intelligence level, and they really cannot do much to change it.	0	0	0	0	0	\bigcirc

The faculty at my medical school seem to believe that students can learn new things, but they cannot really change their basic intelligence,	0	\bigcirc	0	0	0	\bigcirc
The faculty at my medical school seem to believe that students either "have it" or they don't.	0	0	0	0	0	0
Page Break						

Thinking back on your pre-clinical courses, please respond to the following items:

	Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree
I think my pre- clinical courses were important.	0	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc
What I am learning in my pre- clinical courses is useful to me currently.	0	\bigcirc	\bigcirc	0	\bigcirc	0
What I learned in my pre-clinical courses will be useful to me in the future.	0	\bigcirc	\bigcirc	0	\bigcirc	0
I often connect what I learned in my pre-clinical courses to patient care.	0	\bigcirc	0	0	0	0
My pre-clinical instructors believe that what I learned in my pre-clinical courses is useful to me currently.	0	0	0	0	0	0
My pre-clinical instructors believe that what I am learning in my clerkships is useful to me in the future.	0	\bigcirc	0	0	0	0
My pre-clinical instructors believe I often connect those objectives/material to patient care.	0	\bigcirc	0	0	0	0
The pre-clinical instructors believe I found my pre-	\bigcirc	\bigcirc	\bigcirc	0	0	0

clinical courses interesting. Page Break

Strongly Slightly Slightly Strongly Disagree Agree Disagree Disagree Agree Agree I think the clerkships are \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc important. What I am learning in my clerkships is \bigcirc \bigcirc \bigcirc \bigcirc useful to me currently. What I am learning in my clerkships will be \bigcirc () \bigcirc useful to me in the future. I often connect what I learn in clerkships to \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc patient care. My preceptors or attendings believe that what I am learning in my \bigcirc \bigcirc \bigcirc clerkships is useful to me currently. My preceptors or attendings believe that what I am learning in my \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc ()clerkships is useful to me in the future. The preceptors or attendings believe I often connect \bigcirc \bigcirc \bigcirc objectives/material to patient care. The preceptors or attendings believe I find my \bigcirc \bigcirc \bigcirc \bigcirc \cap \bigcirc clerkships

Thinking back on your clinical clerkship training, please respond to the following items:

interesting	
Page Break	

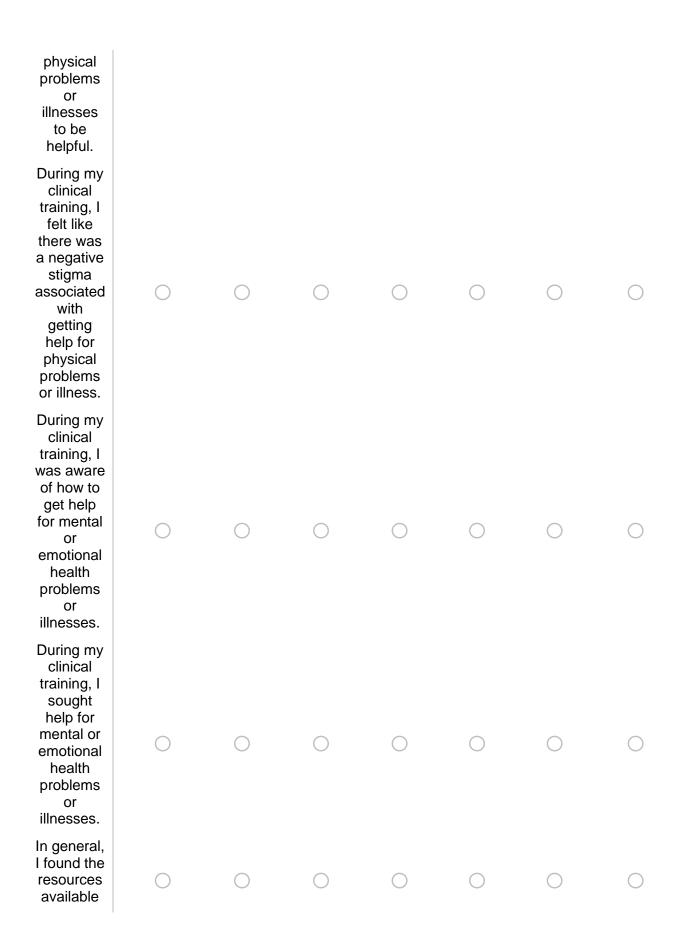
	Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree	Not Applicable
During my pre-clinical training at my COM, I was aware of how to get help for physical problems or illnesses.	0	0	0	0	0	0	0
During my pre-clinical training at my COM, I sought care for physical problems or illnesses.	0	\bigcirc	0	\bigcirc	0	\bigcirc	0
In general, I found the resources available during my pre-clinical training for my physical problems or illnesses to be helpful.	0	\bigcirc	0	0	\bigcirc	\bigcirc	0
During my preclinical training, I felt like there was a negative	0	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc	0

Please respond to the following questions on your school's mental health resources:

stigma associated with getting help for physical problems or illness. During my pre-clinical training, I was aware of how to get help for mental \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc or emotional health problems or illnesses. During my pre-clinical training, I sought help for mental or \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc emotional health problems or illnesses. In general, I found the resources available during my pre-clinical training for my mental \bigcirc \bigcirc \bigcirc \bigcirc or \bigcirc \bigcirc \bigcirc emotional health problems or illnesses to be helpful.

During my preclinical training, I felt like there was a negative stigma associated with getting help for physical problems or illness. During my clinical training (for example, at my clinical rotation site). I was aware of how to get help for physical problems or illnesses. During my clinical training, I sought care for physical problems or illnesses. In general, I found the resources available during my clinical training for my





during my clinical training for my mental or emotional health problems or illnesses to be helpful.							
During my clinical training, I felt like there was a negative stigma associated with getting help for mental or emotional health problems or illnesses.	\bigcirc	0	0	0	0	\bigcirc	0

Page Break

Please respond to the following items:

	Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree
When something bad happens, I feel that maybe I don't belong in medical school.	0	0	0	0	0	0
Sometimes I feel that I belong in medical school, and sometimes I feel that I don't belong in medical school.	\bigcirc	\bigcirc	0	0	0	0
I sometimes feel like other students on campus have stronger academic skills than me.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I belong at this medical school.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
I feel like this medical school is a good fit for me.	0	\bigcirc	0	\bigcirc	0	0
I feel more academically prepared than other	0	\bigcirc	0	0	0	0

students at this medical school.						
My faculty believe that I belong in medical school.	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Page Break						

Please respond to the following items:

·	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree nor Disagree	Slightly Agree	Agree	Strongly Agree
l lead a purposeful and meaningful life	0	0	0	0	0	0	0
My social relationships are supportive and rewarding	0	0	\bigcirc	0	0	0	0
I am engaged and interested in my daily activities	0	0	0	\bigcirc	0	0	0
l actively contribute to the happiness and well- being of others	0	0	0	0	0	0	0
I am competent and capable in the activities that are important to me	0	0	0	0	\bigcirc	0	0
l am a good person and live a good life	0	0	0	\bigcirc	0	\bigcirc	\bigcirc
I am optimistic about my future	0	0	0	\bigcirc	0	\bigcirc	\bigcirc

People respect me	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Page Break							

	Not true at all	Rarely true	True nearly all the time	Often true	Sometimes true
I am able to adapt when changes occur.	0	0	0	0	0
I can deal with whatever comes my way.	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I try to see the humorous side of things when I am faced with problems.	0	\bigcirc	0	\bigcirc	\bigcirc
Having to cope with stress can make me stronger.	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I tend to bounce back after illness, injury or other hardships.	0	\bigcirc	0	\bigcirc	\bigcirc
I believe I can achieve my goals, even if there are obstacles.	0	0	0	\bigcirc	\bigcirc
Under pressure, I stay focused and think clearly.	0	\bigcirc	0	0	\bigcirc
l am not easily discouraged by failure.	0	\bigcirc	\bigcirc	0	\bigcirc
I think of myself as a strong person	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Please indicate how for each item, how true the statement is in describing you

when dealing with life's challenges and difficulties.					
I am able to handle unpleasant or painful feelings like sadness, fear and anger.	0	0	\bigcirc	\bigcirc	0

Overall, based on your own definition of burnout, how would you rate your level of burnout?

○ I enjoy my work. I have no symptoms of burnout.

Occasionally I am under stress, and I don't always have as much energy as I once did, but I don't feel burned out.

O I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion.

The symptoms of burnout that I'm experiencing won't go away. I think about frustration at work a lot.

○ I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help.

Page Break -----

Please respond to the following items:

	Disagree strongly	Disagree slightly	Neutral	Agree slightly	Agree strongly
Events in my transition to medical school affect my life in an emotionally unhealthy way.	0	0	0	0	\bigcirc
l feel burned out from the transition to medical school.	0	\bigcirc	\bigcirc	0	\bigcirc
I feel fatigued when I get up in the morning and have to face another day transitioning to medical school.	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
l feel frustrated by transition to medical school.	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I feel I am working too hard transitioning to medical school.	0	\bigcirc	\bigcirc	0	\bigcirc
Events in medical school affect my life in an emotionally unhealthy way.	0	\bigcirc	\bigcirc	0	\bigcirc
l feel burned out from medical	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc

school.					
I feel fatigued when I get up in the morning and have to face another day in medical school.	\bigcirc	0	0	0	0
I feel frustrated by medical school.	\bigcirc	0	0	\bigcirc	0
I feel I am working too hard in medical school.	0	\bigcirc	\bigcirc	\bigcirc	0

Please indicate how frequently you have experienced the following since transitioning to medical school:

	Never	Rarely	Always or nearly always	Often	Sometimes
Trouble falling asleep	0	\bigcirc	0	0	\bigcirc
Feeling tense or high strung	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Feeling irritable or angry	\bigcirc	0	0	\bigcirc	\bigcirc
Feeling down, depressed	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
Feeling inferior to others	\bigcirc	\bigcirc	0	0	\bigcirc

	Not at all like me	Not much like me	Very much like me	Mostly like me	Somewhat like me
l finish whatever l begin	0	0	0	0	0
Setbacks don't discourage me	0	0	0	\bigcirc	0
l am a hard worker.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I am diligent.	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Please indicate how much each of these statements are like you:

When thinking about medical school, how often, if ever, do you wonder, 'Maybe I don't belong here?'

◯ Never
Rarely
O Sometimes
◯ Usually
Always
End of Block: Resilient Mindset

Start of Block: Sat/Car/Enrol/Div

Part III: OSTEOPATHIC MEDICAL EDUCATION EXPERIENCES

The next set of questions will ask you to evaluate your educational experiences during medical school (pre-clinical and clinical), Visiting Student Learning Opportunities (VSLO), the Match process, etc. Please answer the questions as accurately as possible.

Please rate your overall satisfaction with the quality of your osteopathic medical education.

O Very satisfied
◯ Satisfied
O Neither satisfied nor dissatisfied
O Dissatisfied
○ Very dissatisfied

At this time, how satisfied are you that you selected Osteopathic Medicine as a career?

Very satisfied

Satisfied

O Neither satisfied nor dissatisfied

Dissatisfied

O Very dissatisfied

If given the opportunity to begin your medical education again, would you prefer to enroll in:

O The osteopathic medical school from which you are about to graduate

- O Another osteopathic medical school
- O An allopathic medical school
- O Would not have gone to medical school at all

I believe my osteopathic medical school values diversity in its faculty, administration, and student body.

- Strongly agree
- Agree
- O Neither agree nor disagree
- Disagree
- O Strongly disagree

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	Not Applicable
I was able to openly express all my identities within my college of osteopathic medicine.	0	0	0	0	0	0
I was able to connect with someone I considered a trusted friend or at least one person who helped me with my struggles.	0	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
My college of osteopathic medicine was committed to creating a campus climate that respects individuals and groups with various cultural differences.	0	0	0	0	\bigcirc	0
My peers and I were afforded equitable opportunities for success under the same set of standards.	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Please rate your overall satisfaction with your osteopathic medical institution's overall climate/environment that you experienced.

osteopathic medicine had a safe and inclusive environment. My college of osteopathic medicine had a visible culture that supported me while I was on campus. My college of osteopathic medicine had a visible culture that supported me while I was off campus. I felt safe raising concerns about discrimination at my college of osteopathic medicine. There was a process in place that led to appropriate outcomes when I raised concerns about discrimination at my college of osteopathic

medicine.

My college of

0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
0	\bigcirc	\bigcirc	\bigcirc	0	0
0	\bigcirc	\bigcirc	\bigcirc	0	0
0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
0	\bigcirc	\bigcirc	0	\bigcirc	0

My college of osteopathic medicine valued and respected the unique attributes I brought to the learning environment.	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
During my clinical years, I continued to receive support from my college of osteopathic medicine.	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
My college of osteopathic medicine promoted a culture of civility.	0	0	0	0	0	0

If you need a break, please take one. Your responses will be saved, just use the same survey link you were provided.

You can take a break at any time while completing the survey.

If not, please continue!

End of Block: Sat/Car/Enrol/Div

Start of Block: Time Instructed/ARP

Did you participate in AACOM's Academic Recognition Program (ARP) on Health Disparities and Health Equity?

\bigcirc	Yes
\smile	100

\bigcirc	No
\bigcirc	INO

Skip To: arpresid If Did you participate in AACOM's Academic Recognition Program (ARP) on Health Disparities and Healt... = Yes

Skip To: Timques If Did you participate in AACOM's Academic Recognition Program (ARP) on Health Disparities and Healt... = No

Display This Question:

If Did you participate in AACOM's Academic Recognition Program (ARP) on Health Disparities and Healt... = Yes

Did AACOM's Academic Recognition Program (ARP) on Health Disparties and Health Equity make your residency application more competitive?

◯ Yes

🔿 No

	Appropriate	Inadequate	Excessive
Basic medical science	\bigcirc	\bigcirc	\bigcirc
Behavioral science	0	\bigcirc	\bigcirc
Biostatistics	\bigcirc	\bigcirc	\bigcirc
Bioterrorism	0	\bigcirc	\bigcirc
Care of ambulatory patients	\bigcirc	\bigcirc	\bigcirc
Care of elderly (geriatrics)	0	\bigcirc	\bigcirc
Care of hospitalized patients	\bigcirc	\bigcirc	\bigcirc
Care of patients from diverse ethnic groups	0	\bigcirc	\bigcirc
Care of patients from LGBTQI+ population	\bigcirc	\bigcirc	\bigcirc
Care of patients with HIV/AIDS	\bigcirc	\bigcirc	\bigcirc
Clinical decision- making	\bigcirc	\bigcirc	\bigcirc
Clinical pharmacology	0	\bigcirc	\bigcirc
Clinical science	\bigcirc	\bigcirc	\bigcirc
Cost-effective medical practice	\bigcirc	\bigcirc	\bigcirc
Diagnostic skills	0	\bigcirc	\bigcirc
Drug & alcohol abuse	0	\bigcirc	0

Please evaluate the amount of instruction provided in each of the areas listed below.

Family/domestic violence	0	\bigcirc	\bigcirc
Genetics	0	\bigcirc	\bigcirc
Health promotion & disease prevention	0	\bigcirc	\bigcirc
Human sexuality	\bigcirc	\bigcirc	\bigcirc
Independent learning & self- evaluation	0	\bigcirc	\bigcirc
Infection control/health care setting	0	\bigcirc	\bigcirc
Infectious disease prevention	0	\bigcirc	\bigcirc
Integrative medicine	0	\bigcirc	0
Legal medicine	0	\bigcirc	\bigcirc
Literature analysis skill	0	\bigcirc	\bigcirc
Medical care cost control	0	\bigcirc	\bigcirc
Medical ethics	0	\bigcirc	\bigcirc
Medical record- keeping	0	\bigcirc	\bigcirc
Medical socioeconomics	0	\bigcirc	\bigcirc
Neuromusculoskeletal med./OMT	0	\bigcirc	\bigcirc
Nutrition	0	\bigcirc	0

Pain management	\bigcirc	\bigcirc	\bigcirc
Patient education	\bigcirc	\bigcirc	\bigcirc
Patient follow-up	\bigcirc	\bigcirc	\bigcirc
Patient interviewing skills	\bigcirc	\bigcirc	\bigcirc
Physician-patient relationship	\bigcirc	\bigcirc	\bigcirc
Practice management	0	\bigcirc	\bigcirc
Primary care	0	\bigcirc	\bigcirc
Public health & community medicine	\bigcirc	\bigcirc	\bigcirc
Rehabilitation	\bigcirc	\bigcirc	\bigcirc
Research techniques	0	\bigcirc	\bigcirc
Role of medicine in community	\bigcirc	\bigcirc	\bigcirc
Screen for diseases	0	\bigcirc	\bigcirc
Teamwork with other health professionals	\bigcirc	\bigcirc	\bigcirc
Therapeutic management	\bigcirc	\bigcirc	\bigcirc
Use of computers	0	\bigcirc	\bigcirc
Utilization review & quality improvement	0	\bigcirc	\bigcirc

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Basic & clinical science course objectives were made clear to students	0	0	0	0	0
Basic science courses were sufficiently integrated with each other	0	\bigcirc	0	\bigcirc	\bigcirc
Basic science courses were sufficiently integrated with clinical training	0	0	0	\bigcirc	\bigcirc
Course objectives & examination content matched closely	0	0	0	0	\bigcirc
Course work adequately prepared students for clerkships	0	0	0	\bigcirc	\bigcirc
The first two years of medical school were well organized	0	0	0	\bigcirc	\bigcirc
Students were provided with	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Please indicate whether you agree or disagree with the following statements about your first two years of osteopathic medical education.

0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
0	0	\bigcirc	\bigcirc	\bigcirc
0	0	0	0	0
0	0	\bigcirc	0	\bigcirc

End of Block: Time Instructed/ARP

Start of Block: Req/IPE

During your osteopathic medical education, have you participated in organized interprofessional educational activities where you learned with students from different health professions (for example, dentistry, pharmacy, nursing, podiatry, physician assistant, physical therapy, and other)?

◯ Yes

🔿 No

O Unsure

Skip To: imeocur If During your osteopathic medical education, have you participated in organized interprofessional e... = Unsure

Skip To: imeocur If During your osteopathic medical education, have you participated in organized interprofessional e... = Yes

Skip To: reques If During your osteopathic medical education, have you participated in organized interprofessional e... = No

Display This Question:

If During your osteopathic medical education, have you participated in organized interprofessional e... = Yes

Or During your osteopathic medical education, have you participated in organized interprofessional e... = Unsure

 $X \rightarrow$

Please indicate when these interprofessional educational activities occurred during your osteopathic medical education. Check all that apply.



Preclinical education



Clinical education

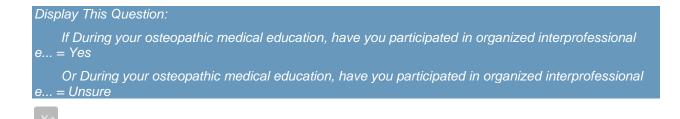
Display This Question:

If During your osteopathic medical education, have you participated in organized interprofessional e... = Yes

Or During your osteopathic medical education, have you participated in organized interprofessional e... = Unsure

With which other profession(s) have you experienced these educational activities? Check all that apply.

Advance Practice Nursing (NPs)
Dentistry
MD Medicine
Nursing
Occupational Therapy
Optometry
Pharmacy
Physical Therapy
Physician Assistant
Podiatry
Psychology
Public Health
Social Work
Veterinary Medicine
Other



What kinds of educational experiences did you have with other health professions students? Check all that apply.

	Lecture (basic science)
	Lecture (clinical subject)
	Patient-centered case studies
	Clinical simulations
	Active engagement with patients (rotations of any kind, clinics)
	Community projects or service learning
	Skills training in team setting workshops
	Other
Page Break	

Display This Question:

O Neither agree nor disagree

Disagree

O Strongly disagree

If During your osteopathic medical education, have you participated in organized interprofessional e... = Yes

Or During your osteopathic medical education, have you participated in organized interprofessional e... = Unsure

Indicate your level of agreement with each of the following statements:

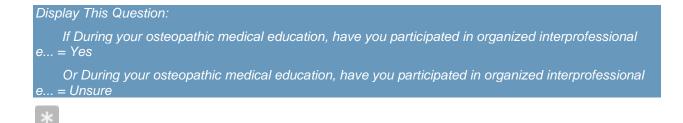
Display This Question: If During your osteopathic medical education, have you participated in organized interprofessional e... = Yes Or During your osteopathic medical education, have you participated in organized interprofessional e... = Unsure The learning experiences with other health professionals helped me to better understand the roles of other health professionals in patient care. Strongly agree Agree

Page 67 of 161

Display This Question:
If During your osteopathic medical education, have you participated in organized interprofessional e = Yes
Or During your osteopathic medical education, have you participated in organized interprofessional <i>e</i> = Unsure

I believe the learning experiences with other health professionals will contribute to/improve my performance as an osteopathic physician.

\subset	Strongly agree
C	Agree
C	Neither agree nor disagree
C	Disagree
\subset	Strongly disagree
Page	Break



Please use this space to comment on your interprofessional medical education experiences.

Please note that there is a 1,000 maximum character length for the comment section.

Page Break —

Please indicate whether you agree or disagree with the following statements about your REQUIRED Core Clerkships/Rotations during the last two years of osteopathic medical education.

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Clear goals and objectives were set	\bigcirc	0	0	\bigcirc	0
I was able to design my own goals and objectives	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Clear performance objectives were set	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
Clerkships were well- organized	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Rounds were conducted as scheduled	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Timely feedback was provided on performance	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There was too large a role by residents in teaching and evaluation	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There was appropriate diversity of patients and their health issues	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There was an appropriate number of inpatient experiences	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Each clerkship had an informal or formal osteopathic student orientation process	0	0	0	\bigcirc	\bigcirc
Osteopathic principles & practice (OPP) were well- integrated in at least one clerkship	0	0	0	\bigcirc	\bigcirc
There was appropriate technology usage for the situation	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

I was able to work on a personal basis with patients	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Most attendings modeled excellent patient relationship/communication skills	0	\bigcirc	\bigcirc	0	\bigcirc
Support staff were friendly and supportive to students	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Coverage hours were set and finished on time	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I was asked relevant and pertinent questions on patient diagnosis, treatment options, management, and follow- up care	\bigcirc	\bigcirc	\bigcirc	0	0
I felt free to ask questions	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The attendings seemed interested in my opinions	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
My personal concerns were addressed by the attendings while on rotations	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I was treated with respect	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I was able to discuss progress on rotation with the attendings	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The attendings critically evaluated me during rotations	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I was able to discuss the final rotation evaluation with the attendings	0	\bigcirc	\bigcirc	\bigcirc	0
The attendings based the evaluation on direct observations	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

I was able to meet and discuss areas of concern with the attendings outside of the clinical setting	0	\bigcirc	\bigcirc	0	0
I lived a reasonable distance from rotation sites	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The rotations prepared me for examinations	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Testing was provided at end of each core rotation	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There was adequate preparation time for COMLEX-USA Level 2-CE	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There was adequate assessment of my clinical skills using standardized patient encounters	0	\bigcirc	\bigcirc	\bigcirc	0
End of Block: Req/IPE					

Start of Block: Req/Elec/Sel Clk

For your required clerkships, please indicate the approximate percentage that were arranged/set up by your osteopathic medical school.

○ 10% or fewer

0 11% - 40%

- 41% 60%
- O 61% 80%
- 0 81% 100%

On average, how much advance notice did you have of where you would be doing your required clerkships?

O Less than 1 month

○ 1 to 3 months

○ 3 months or more

Please indicate whether you agree or disagree with the following statements about your SELECTIVE/ELECTIVE Clerkships/Rotations during the last two years of osteopathic medical education.

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Clear goals and objectives were set	\bigcirc	0	0	\bigcirc	0
I was able to design my own goals and objectives	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Clear performance objectives were set	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Clerkships were well- organized	\bigcirc	\bigcirc	\bigcirc	\bigcirc	0
Rounds were conducted as scheduled	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Timely feedback was provided on performance	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There was too large a role by residents in teaching and evaluation	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There was appropriate diversity of patients and their health issues	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There was an appropriate number of inpatient experiences	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Each clerkship had an informal or formal osteopathic orientation process	\bigcirc	0	0	0	\bigcirc
Osteopathic principles & practice (OPP) were well- integrated in at least one clerkship	0	0	0	\bigcirc	\bigcirc
There was appropriate technology usage for the situation	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc

I was able to work on a personal basis with patients	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The attendings modeled excellent patient relationship/communication skills	0	\bigcirc	\bigcirc	0	\bigcirc
Support staff were friendly and supportive to students	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Coverage hours were set and finished on time	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I was asked relevant and pertinent questions on patient diagnosis, treatment options, management, and follow- up care	0	\bigcirc	\bigcirc	\bigcirc	0
I felt free to ask questions	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The attendings seemed interested in my opinions	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
My personal concerns were addressed by the attendings while on rotation	0	\bigcirc	\bigcirc	0	\bigcirc
I was treated with respect	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I was able to discuss progress on rotation with the attendings	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The attendings critically evaluated me during rotation	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I was able to discuss the final rotation evaluation with the attendings	0	\bigcirc	\bigcirc	\bigcirc	0
The attendings based the evaluation on direct observation	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc

I was able to meet and discuss areas of concern with the attendings outside of the clinical setting	0	\bigcirc	\bigcirc	\bigcirc	0
I lived a reasonable distance from rotation sites	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
There was adequate preparation time for COMLEX-USA Level 2-CE	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

For your elective/selective clerkships, please indicate the approximate percentage that were arranged/set up by your osteopathic medical school.

10% or fewer
11% - 40%
41% - 60%

- 0 61% 80%
- 0 81% 100%

On average, how much advance notice did you have of where you would be doing your elective clerkships?

- C Less than 1 month
- 1 to 3 months
- 3 months or more

End of Block: Req/Elec/Sel Clk

Start of Block: ERAS/Invol Clk/Exams/Bias

In your view how supportive was your osteopathic medical school involvement in your clerkship years?

- Excessive involvement
- Outstanding involvement
- Adequate involvement
- Some, but inadequate involvement
- O Not involved

Skip To: clrkinv If In your view how supportive was your osteopathic medical school involvement in your clerkship years? = Excessive involvement

Skip To: clrkinv If In your view how supportive was your osteopathic medical school involvement in your clerkship years? = Outstanding involvement

Skip To: clrkinv If In your view how supportive was your osteopathic medical school involvement in your clerkship years? = Adequate involvement

Skip To: clrkinv If In your view how supportive was your osteopathic medical school involvement in your clerkship years? = Some, but inadequate involvement

Skip To: rsrcom If In your view how supportive was your osteopathic medical school involvement in your clerkship years? = Not involved

Display This Question:

If In your view how supportive was your osteopathic medical school involvement in your clerkship years? = Excessive involvement

Or In your view how supportive was your osteopathic medical school involvement in your clerkship years? = Outstanding involvement

Or In your view how supportive was your osteopathic medical school involvement in your clerkship years? = Adequate involvement

Or In your view how supportive was your osteopathic medical school involvement in your clerkship years? = Some, but inadequate involvement

 $X \rightarrow X \rightarrow$

Indicate the type of involvement your osteopathic medical school had in your third- and fourth-year education? Check all that apply.

	COMLEX-USA Level 2-CE preparation guidance
	Distance learning
	Learning Management System (i.e. Canvas, Blackboard)
platforms	Virtual programming or meeting using Zoom, Microsoft Teams or other virtual
	Clinical skills assessment
	E-mail
	Faculty visit
	Newsletter

Did your COM purchase extracurricular resources to support your learning?

◯ Yes

O No

Skip To: rsrcomqu If Did your COM purchase extracurricular resources to support your learning? = Yes Skip To: rsrstud If Did your COM purchase extracurricular resources to support your learning? = No

Page Break -----

If Did your COM purchase extracurricular resources to support your learning? = Yes

Please select which extracurricular resources your "COM" purchased to support your learning:

Display This Question:

If Did your COM purchase extracurricular resources to support your learning? = Yes

Question banks:

TrueLearn COMBANK
ScholarRx
UWorld
Kaplan
AMBOSS
Other

Display This Question:

If Did your COM purchase extracurricular resources to support your learning? = Yes

Purchased exams:

	NBOME exams (For example COMSAE)
	Clinical Subject COMAT
	Comprehensive Foundational Biomedical Sciences COMAT-Targeted (subjects)
exams)	NBME (For example Comprehensive Basic Science Self-Assessment/shelf
	Other
Display This Q	Question:

If Did your COM purchase extracurricular resources to support your learning? = Yes

Video tutorials/digital learning modules:

Kaplan
Boards & Beyond
ScholarRx
Sketchy
Pixorize
Draw it to Know it
Osmosis
OnlineMedEd
ACOFP OMT Video Library
Aquifer
Lecturio
Pathoma
Other

If Did your COM purchase extracurricular resources to support your learning? = Yes

Please indicate if your COM offers other types of **extracurricular** resources such as board prep scheduling (Cram Fighter), memorization tools (Anki), etc.

Did "You" purchase extracurricular resources to support your learning?

◯ Yes

O No

Skip	o: rsrstdqu If Did "You" purchase extracurricular resources to support your learning? = Yes
Skip	o: rsrlink If Did "You" purchase extracurricular resources to support your learning? = No

Page Break —

If Did "You" purchase extracurricular resources to support your learning? = Yes

Please select which extracurricular resources "YOU" purchased out of pocket:

Display This Question:

If Did "You" purchase extracurricular resources to support your learning? = Yes

Question banks:

TrueLearn COMBANK
ScholarRx
UWorld
Kaplan
AMBOSS
Other

Display This Question:

If Did "You" purchase extracurricular resources to support your learning? = Yes

Purchased exams:

	NBOME exams (For example COMSAE, WEICOM, etc.)
	Clinical Subject COMAT
	Comprehensive Foundational Biomedical Sciences COMAT-Targeted (subjects)
exams)	NBME (For example Comprehensive Basic Science Self-Assessment/shelf
	Other
Display This Q	Duestion:

If Did "You" purchase extracurricular resources to support your learning? = Yes

Video tutorials/digital learning modules:

	Kaplan
	Boards & Beyond
	ScholarRx
	Sketchy
	Pixorize
	Draw it to Know it
	Osmosis
	OnlineMedEd
	ACOFP OMT Video Library
	Aquifer
	Lecturio
	Pathoma
	Other
Page Break	

If Did "You" purchase extracurricular resources to support your learning? = Yes

Please indicate other types of **extracurricular** resources you purchased such as board prep scheduling (Cram Fighter), memorization tools (Anki), etc.

Display This Question: If Did "You" purchase extracurricular resources to support your learning? = Yes

What were your estimated out-of-pocket expenses spent on **extracurricular** resources during your education?

Pa	age Break
	○ \$4,000 or more
	○ \$3,000
	○ \$2,000
	○ \$1,000
	\bigcirc \$500 or less

If Did "You" purchase extracurricular resources to support your learning? = Yes

What amount of your estimated out-of-pocket expenses spent during your education was on **extracurricular** resources?

 \bigcirc All

O Some

O None

Skip To: rsryredu If What amount of your estimated out-of-pocket expenses spent during your education was on extracurr... = All

Skip To: rsryredu If What amount of your estimated out-of-pocket expenses spent during your education was on extracurr... = Some

Skip To: rsrlink If What amount of your estimated out-of-pocket expenses spent during your education was on extracurr... = None

Display This Question:

If Did "You" purchase extracurricular resources to support your learning? = Yes

And What amount of your estimated out-of-pocket expenses spent during your education was on extracurr... = All

Or What amount of your estimated out-of-pocket expenses spent during your education was on extracurr... = Some

What year during your education was the majority of your out-of-pocket expenses spent on extracurricular resources?

Page Break -

If Did your COM purchase extracurricular resources to support your learning? = Yes

Or Did "You" purchase extracurricular resources to support your learning? = Yes

Did your extracurricular resources link content and learning objectives in your courses?

◯ Yes

O No

Skip To: rsryrovlp If Did your extracurricular resources link content and learning objectives in your courses? = Yes

Skip To: rsrreq If Did your extracurricular resources link content and learning objectives in your courses? = No

Display This Question:

If Did your extracurricular resources link content and learning objectives in your courses? = Yes

What year did you experience your extracurricular resources overlapping with your program's content and learning objectives?

OMS I
OMS II
OMS III
OMS IV

Display This Question: If Did your COM purchase extracurricular resources to support your learning? = Yes Or Did "You" purchase extracurricular resources to support your learning? = Yes Are your extracurricular resources a part of your graded course requirement?

◯ Yes

O No

Skip To: rsrcurr If Are your extract	urricular resources a part of your gr	aded course requirement? = Yes
Skip To: comlex1 If Are your extra	acurricular resources a part of your	graded course requirement? = No

Display This Question:

If Are your extracurricular resources a part of your graded course requirement? = Yes

Please describe ways in which extracurricular resources are incorporated into your curriculum.

National Licensing Examinations - COMLEX-USA

Did you pass COMLEX-USA Level 1 on your first attempt?

◯ Yes

O No

Page Break ------

Did you pass COMLEX-USA Level 2 CE on your first attempt?

○ Yes

O No

National Examinations - USMLE

Did you or are you planning on taking any of the following exams: USMLE Step 1, USMLE Step 2 CK or USMLE Step 3?

◯ Yes

🔿 No

Skip To: usmleone If National Examinations - USMLE Did you or are you planning on taking any of the following exam... = Yes

Skip To: biressel If National Examinations - USMLE Did you or are you planning on taking any of the following exam... = No

Display This Question:

If National Examinations - USMLE Did you or are you planning on taking any of the following exam... = Yes

National Examinations - USMLE

Did you take USMLE Step 1?

◯ Yes

🔘 No

Skip To: usmlefr If National Examinations - USMLE Did you take USMLE Step 1? = Yes Skip To: usmleck If National Examinations - USMLE Did you take USMLE Step 1? = No

Display This Question:	
If National Examinations - USMLE Did you or are you planning on taking any of the following exam = Yes	
And National Examinations - USMLE Did you take USMLE Step 12 - Ves	

If you did take the USMLE Step 1, did you pass on your first attempt?

O Yes

O No

Display This Question: If National Examinations - USMLE Did you or are you planning on taking any of the following exam... = Yes

Did you take USMLE Step 2 CK?

○ Yes

O No

Skip To: usmleckf If Did you take USMLE Step 2 CK? = Yes Skip To: usmlethr If Did you take USMLE Step 2 CK? = No

Display This Question: If Did you take USMLE Step 2 CK? = Yes And National Examinations - USMLE Did you or are you planning on taking any of the following exam... = Yes

If you did take the USMLE Step 2 CK, did you pass on your first attempt?

YesNo

Display This Question: If National Examinations - USMLE Did you or are you planning on taking any of the following exam... = Yes

Are you planning to take the USMLE Step 3 after graduation?

◯ Yes

○ No

 $X \rightarrow$

Did you experience bias in the residency selection process because of your DO degree? Bias includes being excluded from residency programs or consideration by programs for interviews or selection, not ranking programs or specialties because they do not take DOs, or being required to take the USMLE to be considered by programs.

◯ Yes			
◯ No			
O Unsure			
Page Break			

If Did you experience bias in the residency selection process because of your DO degree? Bias includ... = Yes

Or Did you experience bias in the residency selection process because of your DO degree? Bias includ... = Unsure

Please share a brief description of the bias(es), if any, that you experienced.

Did you find a residency position prior to taking this survey?

◯ Yes

O No

Skip To: match If Did you find a residency position prior to taking this survey? = Yes Skip To: vslofour If Did you find a residency position prior to taking this survey? = No

Page Break -

If Did you find a residency position prior to taking this survey? = Yes

How did you Match?

- O I matched in the Military Match
- O I matched in the Urology/Urologic Surgery Match (the "Early Match")
- O I matched in the Ophthalmology Match (the "San Francisco Match")
- I matched in the NRMP Match (the "Match")
- I matched in the post-Match Supplemental Offer and Acceptance Program (the "SOAP")
- I matched to a residency program in another way, please describe

Display This Question:

If Did you find a residency position prior to taking this survey? = Yes

To what specialty did you match?

▼ Allergy and Immunology ... Undecided or Indefinite

Display This Question:

If Did you find a residency position prior to taking this survey? = Yes

Did you also match to a separate PGY 1 program?

◯ Yes

🔿 No

Skip	To: matpyoth1	If Did you a	lso match	to a separate	PGY 1	program?	= Yes
Skip	To: matonpg1	lf Did you a	lso match t	o a separate l	PGY 1	program?	= No

If Did you find a residency position prior to taking this survey? = Yes And Did you also match to a separate PGY 1 program? = Yes

What PGY 1 program did you match to?

Display This Question:

If Did you find a residency position prior to taking this survey? = Yes

Did you only match to a PGY 1 program?

◯ Yes

○ No

Display This Question:

If Did you find a residency position prior to taking this survey? = Yes

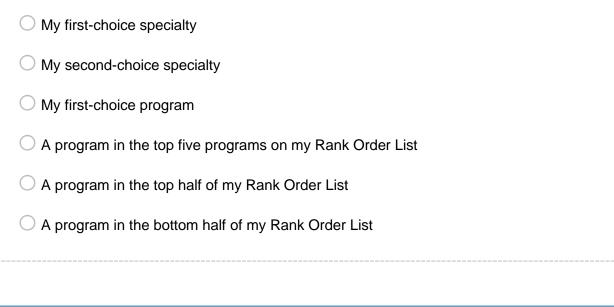
To what program(s) institution(s) did you match?

PGY 1	
PGY 2+	

Display This Question:

If Did you find a residency position prior to taking this survey? = Yes

I matched to:



Display This Question:

If Did you find a residency position prior to taking this survey? = Yes

Did you not rank any specialties or programs because they do not accept or have DOs?

○ Yes

🔿 No

Did you seek any visiting student rotations in your 4th year?

◯ Yes

O No, please explain why you did not do a visiting student rotation.

Skip To: vslospc If Did you seek any visiting student rotations in your 4th year? = Yes

Skip To: erasexm If Did you seek any visiting student rotations in your 4th year? = No, please explain why you did not do a visiting student rotation.

Skip To: erasexm If Condition: No, please explain why you ... Is Empty. Skip To: Did you report scores for both the US....

Skip To: erasexm If Condition: No, please explain why you ... Is Not Empty. Skip To: Did you report scores for both the US....

Display This Question:

If Did you seek any visiting student rotations in your 4th year? = Yes

In what specialty(ies) did you seek visiting student rotations?

Allergy and Immunology
Anesthesiology
Child Neurology
Dermatology
Diagnostic Radiology
Emergency Medicine
Family Medicine
Internal Medicine
Interventional Radiology
Medical Genetics and Genomics
Neurodevelopmental Disabilities
Neurological Surgery
Neurology
Nuclear Medicine
Obstetrics and Gynecology
Ophthalmology
Orthopedic Surgery
Osteopathic Neuromusculoskeletal Medicine

	Otolaryngology
	Pathology
	Pediatrics
	Physical Medicine and Rehabilitation
	Plastic Surgery
	Preventive Medicine
	Psychiatry
	Radiation Oncology
	Surgery
	Thoracic Surgery
	Urology
	Vascular Surgery
	Undecided or Indefinite
Page Break	

If Did you seek any visiting student rotations in your 4th year? = Yes

If you sought one or more visiting student rotations accepted through VSLO, please answer the following questions.

Display This Question:
If Did you seek any visiting student rotations in your 4th year? = Yes
*
The total number of Visiting Student Rotations applied for through VSLO:
Display This Question: If Did you seek any visiting student rotations in your 4th year? = Yes
In Did you seek any visiting student rotations in your 4th year? = res
The total number of Visiting Student Rotations accepted through VSLO:
Display This Question:
If Did you seek any visiting student rotations in your 4th year? = Yes
*
The total number of Visiting Student Rotations accepted through VSLO that you
attended:
Display This Question:
If Did you seek any visiting student rotations in your 4th year? = Yes
*

The total number of rotations accepted through VSLO at which you interviewed for a residency position:

Display This Question: If Did you seek any visiting student rotations in your 4th year? = Yes Did you list any rotation sites accepted through VSLO in your Rank Order List? O Yes O No Display This Question: If Did you seek any visiting student rotations in your 4th year? = Yes Did you list any rotation sites accepted through VSLO in the top three positions of your rank order list? O Yes O No Display This Question: If Did you seek any visiting student rotations in your 4th year? = Yes Did you match to a program where you did a rotation that you arranged through VSLO? O Yes O No

Display This Question: If Did you seek any visiting student rotations in your 4th year? = Yes
Did you do one or more visiting student rotations accepted outside of VSLO?
○ Yes
○ No
Skip To: vslootapl If Did you do one or more visiting student rotations accepted outside of VSLO? = Yes Skip To: vslobias If Did you do one or more visiting student rotations accepted outside of VSLO? = No
Display This Question: If Did you seek any visiting student rotations in your 4th year? = Yes And Did you do one or more visiting student rotations accepted outside of VSLO? = Yes
*
The total number of Visiting Student Rotations applied for outside of VSLO:
Display This Question:
If Did you seek any visiting student rotations in your 4th year? = Yes
If Did you seek any visiting student rotations in your 4th year? = Yes
If Did you seek any visiting student rotations in your 4th year? = Yes And Did you do one or more visiting student rotations accepted outside of VSLO? = Yes
If Did you seek any visiting student rotations in your 4th year? = Yes And Did you do one or more visiting student rotations accepted outside of VSLO? = Yes
If Did you seek any visiting student rotations in your 4th year? = Yes And Did you do one or more visiting student rotations accepted outside of VSLO? = Yes

The total number of Visiting Student Rotations accepted outside of VSLO that you attended:

Display This Question: If Did you seek any visiting student rotations in your 4th year? = Yes And Did you do one or more visiting student rotations accepted outside of VSLO? = Yes

The total number of rotations sites accepted outside of VSLO at which you interviewed for a residency position:

Display This Question:

If Did you seek any visiting student rotations in your 4th year? = Yes And Did you do one or more visiting student rotations accepted outside of VSLO? = Yes

Did you list any rotation sites accepted outside of VSLO in your Rank Order List?

○ Yes

🔘 No

Display This Question: If Did you seek any visiting student rotations in your 4th year? = Yes

And Did you do one or more visiting student rotations accepted outside of VSLO? = Yes

Did you list any rotations sites accepted outside of VSLO in the top three positions of your rank order list?

◯ Yes

O No

Display This Question: If Did you seek any visiting student rotations in your 4th year? = Yes And Did you do one or more visiting student rotations accepted outside of VSLO? = Yes Did you match to a program where you did a Visiting Student Rotation that you arranged outside VSLO? Yes

During your VSLO Rotations, did you experience any of the following biases because of your DO degree?

Did you have to provide a USMLE score for one or more visiting student rotations?

◯ Yes

🔿 No

Skip To: vsloextyp If Did you have to provide a USMLE score for one or more visiting student rotations? = Yes Skip To: vslofee If Did you have to provide a USMLE score for one or more visiting student rotations? = No

Page Break —

If Did you have to provide a USMLE score for one or more visiting student rotations? = Yes

Did you have to provide a:

○ USMLE Step 1 score

○ USMLE Step 2 CK score

Both scores

Display This Question:

If Did you have to provide a USMLE score for one or more visiting student rotations? = Yes

Were you not permitted to do one or more VSLO rotations because you did not have a USMLE score?

◯ Yes

🔿 No

Skip To: vsloprtyp If Were you not permitted to do one or more VSLO rotations because you did not have a USMLE score? = Yes

Skip To: vslofee If Were you not permitted to do one or more VSLO rotations because you did not have a USMLE score? = No

Page Break

Display This Question:

If Were you not permitted to do one or more VSLO rotations because you did not have a USMLE score? = Yes

And Did you have to provide a USMLE score for one or more visiting student rotations? = Yes

Did you have to provide a:
○ USMLE Step 1 score
O USMLE Step 2 CK score
O Both scores
Page Break
Did you have to pay a higher fee than your MD-student colleagues for one or more visiting student rotations?
○ Yes
○ No
Page Break
Did one or more of your desired visiting student rotations not accept you because you were earning a DO degree?
◯ Yes
○ No

Page Break

If you had (an) experience(es) of bias in Visiting Student Rotations, please describe.

Please note that there is a 1,000 maximum character length for the comment section.

<u> </u>	 	 	
Page Break			

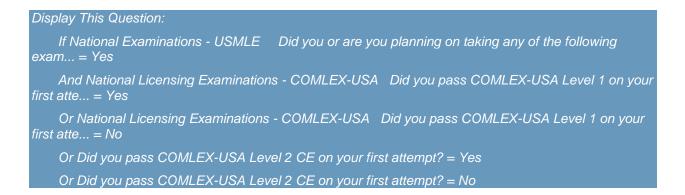
*

Please comment on your experiences with the Visiting Student Learning Opportunity service.

Please note that there is a 1,000 maximum character length for the comment section.



*



Did you report scores for both the USMLE and COMLEX in your ERAS application?

○ Yes

🔿 No

Page Break

Display This Question: If National Examinations - USMLE Did you or are you planning on taking any of the following exam... = Yes And National Licensing Examinations - COMLEX-USA Did you pass COMLEX-USA Level 1 on your first atte... = Yes Or National Licensing Examinations - COMLEX-USA Did you pass COMLEX-USA Level 1 on your first atte... = No Or Did you pass COMLEX-USA Level 2 CE on your first attempt? = Yes Or Did you pass COMLEX-USA Level 2 CE on your first attempt? = No

Were there any questions on the ERAS application that you felt were biased against students earning the DO degree?

◯ Yes

○ No

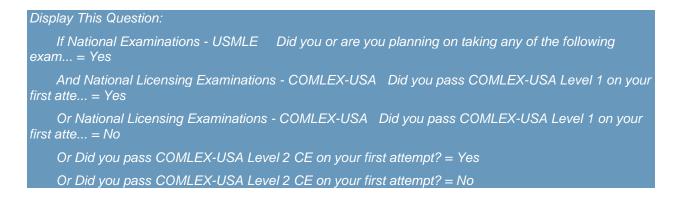
Skip To: erasbias If Were there any questions on the ERAS application that you felt were biased against students earni... = Yes

Skip To: intvtpsp If Were there any questions on the ERAS application that you felt were biased against students earni... = No

Display This Question: If National Examinations - USMLE Did you or are you planning on taking any of the following exam... = Yes And Were there any questions on the ERAS application that you felt were biased against students earni... = Yes And National Licensing Examinations - COMLEX-USA Did you pass COMLEX-USA Level 1 on your first atte... = Yes Or National Licensing Examinations - COMLEX-USA Did you pass COMLEX-USA Level 1 on your first atte... = No Or Did you pass COMLEX-USA Level 2 CE on your first attempt? = Yes Or Did you pass COMLEX-USA Level 2 CE on your first attempt? = No

Please describe the bias(es) you experienced during the ERAS application.

Page Break



Did you get any interviews in your top choice specialty?

◯ Yes

🔿 No

Page Break

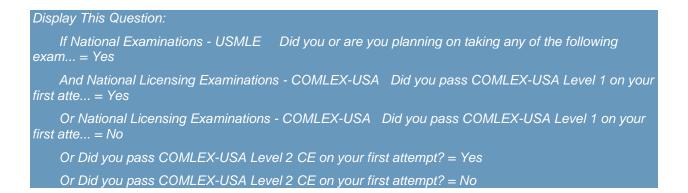
Display This Question:
If National Examinations - USMLE Did you or are you planning on taking any of the following exam = Yes
And National Licensing Examinations - COMLEX-USA Did you pass COMLEX-USA Level 1 on your first atte = Yes
Or National Licensing Examinations - COMLEX-USA Did you pass COMLEX-USA Level 1 on your first atte = No
Or Did you pass COMLEX-USA Level 2 CE on your first attempt? = Yes
Or Did you pass COMLEX-USA Level 2 CE on your first attempt? = No

Did any programs to which you applied for an interview communicate to you that they do not interview or select students earning the DO degree?

◯ Yes

O No

Page Break -



Did you have any other experiences of inequity in applying for residency positions through ERAS?

Yes, please explain _____
 No

Page Break —

In what specialty(ies) did you interview?

Allergy and Immunology
Anesthesiology
Child Neurology
Dermatology
Diagnostic Radiology
Emergency Medicine
Family Medicine
Internal Medicine
Interventional Radiology
Medical Genetics and Genomics
Neurodevelopmental Disabilities
Neurological Surgery
Neurology
Nuclear Medicine
Obstetrics and Gynecology
Ophthalmology
Orthopedic Surgery
Osteopathic Neuromusculoskeletal Medicine

	Otolaryngology
	Pathology
	Pediatrics
	Physical Medicine and Rehabilitation
	Plastic Surgery
	Preventive Medicine
	Psychiatry
	Radiation Oncology
	Surgery
	Thoracic Surgery
	Urology
	Vascular Surgery
	Undecided or Indefinite
End of Bloc	k: ERAS/Invol Clk/Exams/Bias

Start of Block: Interviews/Match

Page Break

Did you have any interviews that were conducted virtually?
◯ Yes
○ No
Skip To: intvtolvt If Did you have any interviews that were conducted virtually? = Yes Skip To: intvpr If Did you have any interviews that were conducted virtually? = No
Page Break
Display This Question: If Did you have any interviews that were conducted virtually? = Yes
*
How many interviews did you have virtually?
Page Break
Did you have any interviews that were conducted in-person?
○ Yes
○ No
Skip To: intvtolpr If Did you have any interviews that were conducted in-person? = Yes Skip To: intvadv If Did you have any interviews that were conducted in-person? = No

Page Break

Display This Question:

If Did you have any interviews that were conducted in-person? = Yes

*

How many interviews did you have in-person?

Page Break

Display This Question:

If Did you have any interviews that were conducted virtually? = Yes

Or Did you have any interviews that were conducted in-person? = Yes

 X^{\perp}

Do you believe:

Display This Choice:

If Did you have any interviews that were conducted virtually? = Yes

You were advantaged by having virtual interviews.

Display This Choice:

If Did you have any interviews that were conducted in-person? = Yes

• You were advantaged by having in-person interviews

Display This Choice:

If Did you have any interviews that were conducted virtually? = Yes

O You were disadvantaged by having virtual interviews

Display This Choice:

If Did you have any interviews that were conducted in-person? = Yes

You were disadvantaged by having in-person interviews.

Display This Choice:

If Did you have any interviews that were conducted in-person? = Yes And Did you have any interviews that were conducted virtually? = Yes

 \bigcirc Both in-person and virtual interviews were equally advantageous to you

Page Break	· · · · · · · · · · · · · · · · · · ·
At your inte	erview were you:
Interviewec	d by any attending physicians with a DO degree?
◯ Yes	
◯ No	
◯ I do	not know
Page Break	
Interviewed	d by any residents or trainees with a DO degree?
◯ Yes	
◯ No	
◯ I do	not know
Page Break	·
Asked why	you went to DO school rather than MD school?
○ Yes	
○ No	
Page Break	······

Asked about the quality of your clinical training?

◯ Yes			
○ No			
Page Break	 	 	

Were you able to ask about DOs who teach in the residency program, practice in the hospital, or treat patients in the community?

◯ Yes				
◯ No				
◯ Not a	pplicable			
Page Break				

Were you told your program does not usually or ever match students with a DO degree?

◯ Yes				
○ No				
Page Break	 	 	 	

Were you made to feel uncomfortable about your medical education or clinical training?

◯ Yes					
◯ No					
Page Break					

How did	your osteo	pathic trainir	ig impact	the Match	process?
---------	------------	----------------	-----------	-----------	----------

Overall, I think that my osteopathic training:

• Was viewed by others as an advantage in my residency interview and match process

O Was viewed by others as not an important factor in my residency interview and match process

• Was viewed by others as a disadvantage in my residency interview and match process

.....

For me, I think that overall my osteopathic training:

Was an advantage in my residency interview and match process

O Was not an important factor in my residency interview and match process

• Was a disadvantage in my residency interview and match process

Page Break —

If you need a break, please take one. Your responses will be saved, just use the same survey link you were provided.

You can take a break at any time while completing the survey

You're halfway there!

End of Block: Interviews/Match

Start of Block: OMT/Ger

The next set of questions will evaluate the training you received during medical school and how confident you feel using these skills as a physician. Please indicate your agreement with the following statements regarding your training in Osteopathic Manipulative Treatment and Osteopathic Principles (OMM/OMT), and Practice (OPP).

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
Well prepared to diagnose structural problems	0	\bigcirc	0	0	0
Well prepared to treat structural problems	0	\bigcirc	\bigcirc	\bigcirc	0
Well prepared to document findings in a structural examination	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Had opportunity to practice OPP during first two years in medical school	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Had opportunity to practice OPP during in-hospital rotations	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Had opportunity to practice OPP during ambulatory primary care rotations	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Had opportunity to practice OPP during ambulatory non-primary care rotations	0	\bigcirc	\bigcirc	\bigcirc	0
Had osteopathic physician role models during the first two years in medical school	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Had osteopathic physician role models during required in-hospital	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc

rotations					
Had osteopathic physician role models during ambulatory primary care rotations	0	0	\bigcirc	\bigcirc	\bigcirc
Had osteopathic physician role models during ambulatory non- primary care rotations	0	0	\bigcirc	\bigcirc	\bigcirc
Had osteopathic physician role models during selectives/electives	0	0	\bigcirc	\bigcirc	\bigcirc
Page Break					

genatiles and gen	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I can identify situations where co-morbid conditions, life expectancy, and/or functional status should modify (or override) standard recommendations for screening tests in older adults	0	0	0	0	0
I can anticipate and identify hazards of hospitalization for older adults	0	\bigcirc	0	\bigcirc	0
I can identify those medications that should be avoided or used with caution in older adults	\bigcirc	\bigcirc	\bigcirc	0	\bigcirc
I can differentiate the clinical presentations of delirium, dementia, and depression in older adults	0	0	\bigcirc	0	0
I can assess a patient's self- care/functional capacity, e.g. ADLs & IADLs	\bigcirc	0	0	0	\bigcirc
I can assess an older adult patient's fall risk,	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Indicate whether you agree or disagree with the following statements about your geriatrics and gerontology education during medical school.

identify underlying causative factors, and make recommendations for further evaluation and initial management					
I can describe the differences in the presenting signs, symptoms, and laboratory findings of common conditions in older, as compared to younger, adults	0	0	0	\bigcirc	0
Dago Prook					
Page Break ——					
End of Block: OM	T/Ger				

Start of Block: Competency/Exam

The following questions are being asked by AACOM to evaluate the competencies expected of medical school graduates who will soon be entering residency.

	Completely Confident	Mostly Confident	Fairly Confident	Not at all Confident	No Opportunity to Perform
Perform an accurate, complete, and focused history or physical exam in a prioritized, organized manner without supervision and with respect for the patient.	0	0	0	0	0
Integrate patient data to formulate an assessment and develop a list of potential diagnoses that can be prioritized, leading to a selection of a working diagnosis.	0	0	\bigcirc	\bigcirc	0
Select and interpret common diagnostic and screening tests using evidence- based and cost- effective principles when approaching a patient in any setting.	0	\bigcirc	\bigcirc	0	\bigcirc
Write safe and indicated orders and prescribe therapies or interventions in a variety of settings (e.g. inpatient,	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc

How confident are you in your current ability to perform the following activities:

ambulatory, urgent or emergent care) without direct supervision. Provide accurate, focused, and context-specific documentation of a clinical encounter in either written or electronic formats. Present a concise oral summary of a patient encounter to achieve a shared understanding of the patient's condition. Identify key clinical questions in caring for patients, identify information resources, and retrieve information and evidence that will be used to address those questions. Perform safe and effective transitions of responsibility for patient care from one health care team or practitioner to another. Participate as a contributing and integrated

0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
0	\bigcirc	\bigcirc	\bigcirc	0
0	\bigcirc	\bigcirc	\bigcirc	0
0	\bigcirc	\bigcirc	\bigcirc	0
\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

member of an interprofessional team and fully embrace the value of teamwork in patient care.

Promptly recognize a patient who requires urgent or emergent care, initiate evaluation and treatment, and seek help.

Obtain consent for tests and/or procedures for which I know the indications, contraindications, alternatives, risks and benefits.

Understand systems, identify system failures, and intervene in systems to improve quality and safety in health care.

	\bigcirc	0	0	0	0
	\bigcirc	0	0	0	0
	\bigcirc	\bigcirc	\bigcirc	0	0

Page Break -

How confident are you in your current ability to perform the following skills without direct supervision (i.e., with no supervisor in the room)?

	Completely Confident	Mostly Confident	Fairly Confident	Not at all Confident	No Opportunity to Perform
Intravenous (IV) line insertion	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Phlebotomy	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Bag-valve-mask (BVM) ventilation	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Cardiopulmonary resuscitation (CPR)	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Osteopathic manipulative treatment	\bigcirc	\bigcirc	0	\bigcirc	\bigcirc
Simple laceration or excision repair	0	\bigcirc	\bigcirc	\bigcirc	0
Page Break					

	Completely Confident	Mostly Confident	Fairly Confident	Not at all Confident	No Opportunity to Perform
General adult examination	0	0	0	\bigcirc	\bigcirc
General pediatric examination	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Well-baby examination	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Breast and pelvic examination	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Prostate and testicular examination	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Osteopathic structural examination	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Sports participation examination	0	0	0	\bigcirc	\bigcirc
Page Break –					

How confident are you in your current ability to perform the following examinations?

Page Break -



Please offer any comments that may help the AACOM determine the usefulness of these questions for benchmarking and improving medical education at the local and national levels.

Please note that there is a 1,000 maximum character length for the comment section.

End of Block: Competency/Exam

Start of Block: Sat/Act/Allo



Enter percentage amounts without percent signs or decimals. If none, enter 0.

Please estimate the percentage of time you devoted to the following activities during the third and fourth years. Please be sure the sum of all equals 100.
Inpatient care, including reading x-ray films & laboratory work : ______
Outpatient care : ______
Extended/long-term care : ______
Test preparation : ______
Research : ______
Other : ______
Total : ______

Page Break —

	None	1 - 25%	26 - 50%	51 - 75%	76 - 100%
During the first two years of medical school	0	0	0	0	0
During required in- hospital rotations	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
During required ambulatory primary care rotations	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
During required ambulatory non- primary care rotations	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc
During selectives/electives	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Page Break					

What percentage of your clinical training was delivered by allopathic physicians?

End of Block: Sat/Act/Allo

Start of Block: Sat/Survey Comments

	Very Satisfied	Satisfied	Neither Satisfied nor Dissatisfied	Dissatisfied	Very Dissatisfied
Academic counseling	0	0	0	\bigcirc	\bigcirc
Accessibility to administration	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Awareness of student problems or concerns by administration	0	\bigcirc	\bigcirc	0	0
Career counseling	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Computer resource center (i.e. IT, available software)	0	\bigcirc	0	\bigcirc	\bigcirc
Disability insurance	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Electronic communication (e-mail, Internet/Intranet)	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Faculty mentoring	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Financial aid administration services	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Library	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Participation of students on key medical school committees	0	0	\bigcirc	\bigcirc	0
Personal counseling	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Indicate your level of satisfaction with the following.

Student health insurance	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Student health services	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Student relaxation space	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Student study space	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Tutorial help	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Research or scholarly activity involvement	0	\bigcirc	\bigcirc	0	0
Page Break					

*

Please submit suggestions for improvement or positive comments on your osteopathic medical education. Your comments will be fed back to the schools ANONYMOUSLY in the spirit of helping to improve osteopathic medical education.

Please note that there is a 1,000 maximum character length for the comment section.



If you need a break, please take one. Your responses will be saved, just use the same survey link you were provided.

You can take a break at any time while completing the survey.

You're nearing the finish line!

End of Block: Sat/Survey Comments

Start of Block: Career Plans

Part IV: CAREER PLANS

 $X \rightarrow$

Please indicate your plans immediately following graduation.

\bigcirc	Transitional	vear with	Osteo	oathic	Recoar	nition
<u> </u>	i i di i o i i o i i di i	, oa	00.00	paano	1.000g.	

- O Transitional year without Osteopathic Recognition
- O Residency with Osteopathic Recognition
- O Residency without Osteopathic Recognition
- Osteopathic Focus/Integrated Residency
- O Governmental/military service residency with Osteopathic Recognition
- O Governmental/military service residency without Osteopathic Recognition
- O Research or other non-residency activity

Page Break -

Please select ONE item that best describes your plans for board certification.

○ AOA boards

○ ABMS boards

O Both AOA and ABMS boards

O Not planning board certification

O Undecided or indefinite

Other

Skip To: spec If Please select ONE item that best describes your plans for board certification. = AOA boards

Skip To: certopt If Please select ONE item that best describes your plans for board certification. = ABMS boards

Skip To: certopt If Please select ONE item that best describes your plans for board certification. = Both AOA and ABMS boards

Skip To: spec If Please select ONE item that best describes your plans for board certification. = Not planning board certification

Skip To: spec If Please select ONE item that best describes your plans for board certification. = Undecided or indefinite

Skip To: spec If Please select ONE item that best describes your plans for board certification. = Other

Page Break -

Display This Question:

If Please select ONE item that best describes your plans for board certification. = ABMS boards Or Please select ONE item that best describes your plans for board certification. = Both AOA and ABMS boards

X-

Please give ALL the reasons why you plan to pursue ABMS boards or both AOA and ABMS boards.

	Board certification is more widely recognized
	Board certification has more colleague acceptance
	Board certification carries more prestige
	Board certification provides more opportunities (career, residencies, etc.)
	Personal desire for selected board certification
	Hospital privileges more readily obtained with selected board certification
	Licenses more readily obtained with selected board certification
	It is a requirement of the residency program
	Other
Page Break	

Area of Interest: Select ONE specialty in which you are most likely to work or seek training.

- O Allergy and Immunology
- O Anesthesiology
- Child Neurology
- Dermatology
- O Diagnostic Radiology
- O Emergency Medicine
- Family Medicine
- O Internal Medicine
- O Interventional Radiology
- O Medical Genetics and Genomics
- O Neurodevelopmental Disabilities
- O Neurological Surgery
- Neurology
- O Nuclear Medicine
- Obstetrics and Gynecology
- Ophthalmology
- Orthopedic Surgery
- Osteopathic Neuromusculoskeletal Medicine
- Otolaryngology
- O Pathology

O Pedia	trics
---------	-------

O Physical Medicine and Rehabilita	ation
------------------------------------	-------

O Plastic Surgery

O Preventive Medicine

- O Psychiatry
- Radiation Oncology
- Surgery

\bigcirc Th	oracic	Surgery
---------------	--------	---------

○ Vascular Surgery

O Undecided or Indefinite

Page Break —

Please indicate the importance of each of the following factors affecting your specialty choice decision.

	Major Influence	Strong Influence	Moderate Influence	Minor Influence	No Influence/NA
Intellectual content of the specialty (type of work, diagnostic programs, diversity)	0	0	0	0	0
Like dealing with people (type of person, type of patient) more than techniques	0	0	0	0	0
Prestige/income potential	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Debt level (level of debt, length of residency, high malpractice insurance premiums)	\bigcirc	\bigcirc	0	0	0
Lifestyle (predictable working hours, sufficient time for family)	0	0	0	0	0
Like the emphasis on technical skills	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Specialty has programs with Osteopathic Recognition	0	\bigcirc	\bigcirc	0	0
Role models (e.g., physicians in the specialty)	0	\bigcirc	0	\bigcirc	\bigcirc
Peer influence (encouragement from practicing physicians, faculty, or other	0	\bigcirc	\bigcirc	0	0

students)					
Skills/abilities (possess the skills required for the specialty or its patient population)	0	0	\bigcirc	\bigcirc	0
Academic environment (courses, clerkships in the specialty area)	\bigcirc	0	\bigcirc	\bigcirc	0
Opportunity for research/creativity	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Desire for independence	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Previous experience	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Page Break ----

Long-Range Plans: Select ONE item that best describes your intended activity five years AFTER residency training.

O Practice in an HMO
Practice in a Federally Qualified Health Center (FQHC)
Employed in a hospital or physician group
Self-employed with or without a partner in private practice
\bigcirc Governmental service, e.g. military, NHS Corps, Indian Health Service, V.A., state/local health dept.
◯ Fellowship
O Academic Medicine
Other professional activity, e.g. teaching, research, administration, fellowship
Page Break

X→

Do you plan, at some point in your career, to work as a hospitalist (i.e., full-time care of hospitalized patients)?

◯ Yes

🔿 No

O Unsure

Skip To: hosptim If Do you plan, at some point in your career, to work as a hospitalist (i.e., full-time care of hosp... = Yes

Skip To: futst If Do you plan, at some point in your career, to work as a hospitalist (i.e., full-time care of hosp... = No

Skip To: futst If Do you plan, at some point in your career, to work as a hospitalist (i.e., full-time care of hosp... = Unsure

Page Break -----

Display This Question:

If Do you plan, at some point in your career, to work as a hospitalist (i.e., full-time care of hosp... = Yes

If you plan to work as a hospitalist, do you anticipate providing patient care full-time or part-time?

○ Full-time (at least 36 hours a week)
O Part-time (less than 36 hours a week)
◯ Unsure
Page Break
Display This Question: If Do you plan, at some point in your career, to work as a hospitalist (i.e., full-time care of hosp =
Yes
Yes If you plan to work as a hospitalist, to what extent do you expect to participate in
Yes If you plan to work as a hospitalist, to what extent do you expect to participate in research?
Yes If you plan to work as a hospitalist, to what extent do you expect to participate in research? Full-time
Yes If you plan to work as a hospitalist, to what extent do you expect to participate in research? Full-time Significantly involved

Where do you expect to locate after the completion of your internship or residency?

▼ ALABAMA ... OTHER

What is the population of the city/town/area of legal residence where you plan to be employed or in practice after completion of internship or residency?

\bigcirc	Maior	metropolitan	area (1	.000.001	or more)
\sim	iviajoi	monopolitari	ulou (I	,000,001	01 111010)

- O Metropolitan area (500,001 to 1,000,000)
- City (100,001 to 500,000)
- City (50,001 to 100,000)
- O City or town (10,001 to 50,000)
- O City or town (2,501 to 10,000)
- Area 2,500 or less

Page Break

Are you planning to practice in any underserved or shortage areas after completion of internship or residency?

◯ Yes

O Unsure

Skip To: typund If Are you planning to practice in any underserved or shortage areas after completion of internship = Yes
Skip To: income If Are you planning to practice in any underserved or shortage areas after completion of internship = No
Skip To: income If Are you planning to practice in any underserved or shortage areas after completion of internship = Unsure
Page Break

Display This Question:

If Are you planning to practice in any underserved or shortage areas after completion of internship... = Yes

In what type of underserved or shortage area do you plan to practice?

	community
--	-----------

O Inner-city community

O Suburban/urban but shortage of my specialty

O Other

Page Break -

The following question relates to your expected income after internship and residency.

Dollar amounts should be entered as whole numbers without dollar signs, commas, or decimals. If none, enter 0.

What annual gross income do you expect to earn before taxes during:

* First year in practice after internship and residency? * Fifth year in practice after internship and residency? Tenth year in practice after internship and residency? End of Block: Career Plans Start of Block: Fin Aid/Demo 1 Part V: FINANCIAL AID

The following section relates to debt you have incurred to complete your education.

When completing the following questions please refer to the National Student Loan Data System (NSLDS) for your loan information by clicking here. To access the NSLDS you will need your username and password. If you do not have a FSA ID you will need to create one to log in.

Dollar amounts should be entered as whole numbers without dollar signs, commas, or decimals. If none, enter 0.

*

Upon entering medical school, how much did you owe from your undergraduate education? Do NOT include osteopathic medical school debt.

Page Break

*

Upon entering medical school, how much did you owe from your graduate education? Do NOT include undergraduate or osteopathic medical school debt.





When completing the following questions please refer to the National Student Loan Data System (NSLDS) for your loan information <u>by clicking here</u>. To access the NSLDS you will need your username and password. If you do not have a FSA ID you will need to create one to log in.

Dollar amounts should be entered as whole numbers without dollar signs, commas, or decimals. If none, enter 0.

Indicate the principal amount you borrowed from each loan source listed below to finance your osteopathic medical education. Exclude loans to finance your

undergraduate or previous graduate education and non-educational debt.

Unsubsidized Stafford Loan (FFEL or Direct) : ______ Subsidized Stafford Loan (FFEL or Direct) : ______ Federal Graduate PLUS Loan Program : ______ Perkins Loan in whole dollars : ______ Loans for Disadvantaged Students (LDS) : ______ Primary Care Loan (PCL) : ______ Other loans insured by a state government : ______ Osteopathic association loans (For example: AOA, state or local osteopathic society) : ______ Alternative loan (For example: Robert Wood Johnson, student loan program, PEP, StillLoan, MedFunds, CitiAssist, MedEXCEL, Med-Cap, Med-Achiever, Signature Health) : _____ Any other loans for your osteopathic medical education in your name : _____ Total : _____

Family Loans: If your parents or other family members borrowed to help finance your osteopathic medical education, please indicate the total amount of their loan(s). Omit any loans in your name.

*

Total loans taken out by family members

Skip To: Inrepfam If Condition: Total loans taken out by fa... Is Not Empty. Skip To: How much of the previous amount of&nb....

Page Break —

Display This Question:

If If Total loans taken out by family members Text Response Is Not Empty

*

How much of the previous amount of ${\rm Intotfam/ChoiceTextEntryValue}$ for loans taken out by family is to be paid by you?

Page Break -



Dollar amounts should be entered as whole numbers without dollar signs, commas, or decimals. If none, enter 0.

Indicate the total amount you received as scholarship/grant, fellowship funds from the sources listed below to finance your osteopathic medical education. Exclude any scholarships or grants received to finance your undergraduate or previous graduate education.

National Health Service Corps Scholarship : _____

Armed Forces Health Professions Scholarship : _

Veterans Affairs Health Professionals Scholarship Program (HPSP) : _____

Post-9/11 GI Bill : ____

Indian Health Service Scholarship Program : _____

Department of Defense Tuition Assistance Program : _____

Scholarships for Disadvantaged Students : _____

Diversity/Minority Scholarship : ____

Western Interstate Commission for Higher Education (WICHE) : _____

State government scholarship/grant : _____

Scholarship/grant/fellowship from osteopathic medical school or its parent university : ______ Tuition waiver : _____

Osteopathic association scholarships (For example: AOA, state or local osteopathic society) :

Other sources : _____

Total : _____

Page Break —



This question relies on your previous responses to the survey. If you need to change your response please do so by using the "Back" button below.

Enter percentage amounts without percent signs or decimals. If none, enter 0.

Estimate the percentage of the total cost of your osteopathic medical education that was paid by each of the following sources. Please be sure the total equals 100. Loans - Total from your previous response loan question : _____

Scholarships/grants - Total from your previous response scholarships/grants question :

Personal savings : Personal earnings - (Only include monies earned by you or your spouse during your 4 years of medical school.) : Parents : Other relatives : Others : Total :
Page Break

*

How much non-educational consumer debt (such as car loans, credit card, and medical expenses) did you incur while in osteopathic medical school? Dollar amounts should be entered as whole numbers without dollar signs, commas, or decimals. If none, enter 0.



How many years do you expect to take to repay the indebtedness for your osteopathic medical education?

▼ 1 ... More than 30

Page Break -----

Federal) for repayment?
○ Yes
○ No
Page Break
Do you plan to enter a loan forgiveness or repayment program?
○ Yes
○ No
Skin Texprestyn If De yey plan to enter a loon fareigenees or reperment program? Nos

Do you anticipate participating in a student loan consolidation program (Federal or non-

Skip To: progtyp If Do you plan to enter a loan forgiveness or repayment program? = Yes Skip To: Q121 If Do you plan to enter a loan forgiveness or repayment program? = No

Page Break

Display This Question:

If Do you plan to enter a loan forgiveness or repayment program? = Yes

Please list the type of loan-forgiveness or repayment program you plan on participating in:

	Department of Education's Public Service Loan Forgiveness Program (PSLF)
	Armed Services (Navy, Army, Air Force)
	National Health Service Corps Loan Repayment Program
	Indian Health Service Loan Repayment Program
	National Institutes of Health Loan Repayment Program
Program	Health Resources and Services Administration Faculty Loan Repayment
	State loan forgiveness program
	Hospital program (e.g. sign-on bonus)
	Other
Page Break	

Part VI: DEMOGRAPHIC DATA

This information is for classification purposes only and is considered confidential. Information will only be used by the AACOM and affiliated organizations in totals or averages.

<		
* Date of Birth (MM/DD/YYYY):		
ad of Diock: Fin Aid/Domo 4		
nd of Block: Fin Aid/Demo 1		
tart of Block: Demo 2		
ssigned sex at birth: What sex were you assigned at birth, on your original birth ertificate?		
age Break		

Current Ge	ender Identity:	How do	you describe	yourself?

◯ Male		
◯ Female		
O Transgender female		
○ Transgender male		
◯ Gender variant/non-cont	forming	
◯ Intersex		
◯ Not listed		
\bigcirc Decline to answer		
Page Break		
Martial Status		

\bigcirc	Married/cohabiting
\bigcirc	Single

Dependents: Not including yourself or your spouse/partner, how many dependents do you support financially?

○ 1	
○ 2	
O 3	
4	
O 5 or more	
Page Break	

Race/Ethnicity: Indicate your race and/or ethnicity from the categories provided. If you are selecting Hispanic or Latino ethnicity and/or Asian or Native Hawaiian or Other Pacific Islander race, you must check one or more of the sub-categories.

Ethnicity - Check all that apply

Hispanic or Latino

	Mexican, Mexican American, Chicano/Chicana
	Cuban
	Puerto Rican
	Other Hispanic or Latino

 $X \rightarrow$

Race - Check all that apply

American Indian or Alaskan Native

(

American Indian or Alaskan Native

 $X \rightarrow$

Asian

Asian Indian
Chinese
Filipino
Japanese
Korean
Pakistani
Vietnamese
Other Asian

Black or African-American

Black or African-American

X÷

Native Hawaiian or Other Pacific Islander

	Guamanian or Chamorro
	Native Hawaiian
	Samoan
	Other Native Hawaiian or Pacific Islander
X→	
White	
	White
White	White

Ethnic Description:

<u>American Indian or Alaskan Native</u>: A person having origins in any of the original peoples of North and South America (including Central America) who maintains cultural identification through tribal affiliation or community attachment.

<u>Asian:</u> A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

<u>Black or African American:</u> A person having origins in any of the black racial groups of Africa. <u>Hispanic or Latino:</u> A person of Cuban, Mexican, Puerto Rican, South or Central America, or Spanish culture or origin, regardless of race.

<u>Native Hawaiian or Other Pacific Islander:</u> A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

<u>White:</u> A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Page Break -----

Citizenship Status

O U.S. Citizen
O Permanent Resident
○ Temporary Resident
○ Non Resident
○ None
Page Break
Was English your first language?
◯ Yes
○ No
Page Break

What is your current state of legal residence?

▼ ALABAMA OTHER		

What is the population of the city/town/area of legal residence?
--

\bigcirc	Maior	metro	politan	area	(1.000)	0.001	or mo	re)
\smile	iviajoi	mouo	pontari	arca	(1,000)	,001		10)

- O Metropolitan area (500,001 to 1,000,000)
- City (100,001 to 500,000)
- City (50,001 to 100,000)
- O City or town (10,001 to 50,000)
- City or town (2,501 to 10,000)
- Area 2,500 or less

Page Break

Father's Education: Select the highest level of education your father attained. Complete this item even if he is deceased.

Professional Degree (DO/MD, JD, DDS, etc.)

O Doctorate (Ph.D. Ed.D. etc.)

○ Master's

O Bachelor's

- O Associate Degree/Technical Certificate
- O High School Graduate

C Less than High School

Unknown

Skip To: fathdomd If Father's Education: Select the highest level of education your father attained. Complete this i... = Professional Degree (DO/MD, JD, DDS, etc.)

Skip To: educm If Father's Education: Select the highest level of education your father attained. Complete this i... = Doctorate (Ph.D. Ed.D. etc.)
Skip To: educm If Father's Education: Select the highest level of education your father attained. Complete this i... = Master's
Skip To: educm If Father's Education: Select the highest level of education your father attained. Complete this i... = Bachelor's
Skip To: educm If Father's Education: Select the highest level of education your father attained. Complete this i... = Bachelor's
Skip To: educm If Father's Education: Select the highest level of education your father attained. Complete this i... = Associate Degree/Technical Certificate
Skip To: educm If Father's Education: Select the highest level of education your father attained. Complete this i... = High School Graduate
Skip To: educm If Father's Education: Select the highest level of education your father attained. Complete this i... = High School Graduate
Skip To: educm If Father's Education: Select the highest level of education your father attained. Complete this i... = High School Graduate
Skip To: educm If Father's Education: Select the highest level of education your father attained. Complete this i... = High School Graduate

Page Break -

Display This Question:

If Father's Education: Select the highest level of education your father attained. Complete this i... = Professional Degree (DO/MD, JD, DDS, etc.)

What is your father's professional degree, please select one of the following:

DO/MD
Other Health Professions
Other

Page Break -

Mother's Education: Select the highest level of education your mother attained. Complete this item even if she is deceased.

Professional Degree (DO/MD, JD, DDS, etc.)

O Doctorate (Ph.D. Ed.D. etc.)

O Master's

O Bachelor's

O Associate Degree/Technical Certificate

O High School Graduate

C Less than High School

🔘 Unknown

Skip To: mothdomd If Mother's Education: Select the highest level of education your mother attained. Complete this i... = Professional Degree (DO/MD, JD, DDS, etc.)
Skip To: parinc If Mother's Education: Select the highest level of education your mother attained. Complete this i... = Doctorate (Ph.D. Ed.D. etc.)
Skip To: parinc If Mother's Education: Select the highest level of education your mother attained. Complete this i... = Master's
Skip To: parinc If Mother's Education: Select the highest level of education your mother attained. Complete this i... = Bachelor's
Skip To: parinc If Mother's Education: Select the highest level of education your mother attained. Complete this i... = Bachelor's
Skip To: parinc If Mother's Education: Select the highest level of education your mother attained. Complete this i... = Associate Degree/Technical Certificate
Skip To: parinc If Mother's Education: Select the highest level of education your mother attained. Complete this i... = High School Graduate
Skip To: parinc If Mother's Education: Select the highest level of education your mother attained. Complete this i... = High School Graduate
Skip To: parinc If Mother's Education: Select the highest level of education your mother attained. Complete this i... = High School Graduate

Page Break -

Display This Question:

If Mother's Education: Select the highest level of education your mother attained. Complete this i... = Professional Degree (DO/MD, JD, DDS, etc.)

What is your mother's professional degree, please select one of the following:

O DO/MD

Other Health Professions

O Other

Page Break —

Parent's Income: Give your best estimate of your parents' combined income before taxes for the prior year.

Less than \$20,000
\$20,000 - \$34,999
\$35,000 - \$49,999
\$50,000 - \$74,999
\$75,000 - \$99,999
\$100,000 - \$199,999
\$200,000 or more
Deceased/Unknown

Page Break ----

Financial Independence: Do you consider yourself financially independent from your parents?

◯ Yes

◯ No

End of Block: Demo 2