Evidence-based Medicine Educational Prescriptions

Learner End-of-Year Evaluation Questionnaire

 1) Did you receive instruction from your clerkship director on how to perform EBM educational prescriptions? No Some Yes
2) Did the use of educational prescriptions change any aspects of the treatment of your patients? Never Rarely Sometimes Often Always
3) Did you use your educational prescriptions in topic presentations to your team? Never Rarely Sometimes Often Always
4) Do you think that performing educational prescriptions improved your ability to ask clinical questions? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
5) Do you think that performing educational prescriptions improved your ability to find clinical evidence? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
6) Do you think that performing educational prescriptions improved your ability to search evidence
databases? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
7) Do you think that performing educational prescriptions improved your ability to evaluate the quality of
clinical evidence? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
8) Do you think that performing educational prescriptions improved your ability to use evidence in
practice? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
9) Do you think that the use of educational prescriptions improved the care of your patients? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
10) Do you think the time necessary to perform educational prescriptions was appropriate? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
11) Do you think that the electronic educational prescription form effectively captured the work you did to answer the clinical question?
☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
12) Do you think that you received adequate instruction in how to perform the electronic educational
prescription? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
13) How often was the feedback that you received from fellows on your educational prescription helpful? ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Always
14) How often was the feedback that you received from fellows on your educational prescription timely? ☐ Never ☐ Rarely ☐ Sometimes ☐ Often ☐ Always
15) Overall, do you think that performing the educational prescriptions was a valuable experience? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes
16) Will your experience using educational prescriptions change how you approach patient care in the
future? ☐ Definitely no ☐ Probably no ☐ Neutral ☐ Probably yes ☐ Definitely yes

17) Were any of	the following barriers to you performing educational prescriptions?	
(Check all that apply)		
A.	☐ Wording of electronic educational prescription form	
B.	Available resources for finding evidence	
C.	☐ Your comfort asking clinical questions	
D.	☐ Your comfort using evidence resources	
E.	Your comfort evaluating the quality of evidence	
F.	Time	
G.	☐ Faculty knowledge of EBM	
Н	☐ Your attitude toward FBM	

- 18) Please list any other barriers to performing educational prescriptions that you experienced.
- **19)** Please list any benefits you found when performing educational prescriptions.
- **20)** Do you have any suggestions for improving the educational prescription website or the process for doing educational prescriptions?

Please Read:

Thank you for your participation over the last year in our new evidence-based medicine (EBM) curriculum – the EBM Educational Prescriptions. The primary purpose for this evaluation questionnaire is to provide us with the information necessary to optimize the educational program.

Because this program is new and a novel approach to the teaching of EBM, we plan to use the aggregate data from this evaluation in a research project to assess the feasibility and validity of EBM Educational Prescriptions for teaching and evaluating medical student EBM skills. Data from your completed Educational Prescriptions, your end-of-year EBM exam (which you will take directly following your Clinical Skills Inventory exam in Spring 2011), and this questionnaire will be used in the analysis. We will also include in the analysis an aggregated summary of your demographic information (gender, race, age, and whether you are enrolled in a dual graduate degree program) and grades from clerkships in which you completed an EBM EP. The only risk of this study to you is a loss of confidentiality. To protect your confidentiality, all data will be coded prior to use so that your names are no longer attached to the data. Also, data will only be presented in aggregate form. The faculty involved in the study are co-Pls: Craig A Umscheid, MD, MSCE, Jennifer R Kogan, MD and David Feldstein, MD.

If you are interested in more information about the study or if you do not want your answers to this survey, demographic information, or clerkship grades used in the study, please contact me with your request.

Thank you.

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