2011 Transitional Year Program Graduate Survey (Year	1)		Exit this survey
. Madigan Transitional Year Program Graduate Survey (Yea	ar 1)		
Please complete the survey below to provide valuable feedback Year Program. Your feedback will be used to make program in our residents. Thank you for your time and assistance.		_	
*1. Please list the year you graduated from the Madigan T Program:	ransitio	onal Year	r
*2. If you are currently in a residency program or will be sprogram soon, please write the name of the program and twill start the program:	•		_
Residency program			
Year started or will start program			
*3. If you did not enter residency immediately following the please list any duty assignment positions you held or are graduation from internship (i.e. GMO flight surgeon at Ft. Fin 2008):	currentl	y holdin	g since
*4. Preparation after the Madigan Transitional Year Progr	am		
-	Agree	Neutral	Disagree
The transitional year program effectively prepared me in the competency of interpersonal and communication skills (communicate effectively with patients, families, and/or other health care professionals):	0	O	O
The transitional year program effectively prepared me in the competency			

The transitional year program effectively prepared me in the competency

The transitional year program effectively prepared me in the competency

of patient care (assess and manage patient problems, make informed

of medical knowledge (understand the basic science of disease

apply analytical thinking to address clinical questions):

diagnostic and therapeutic decisions):

processes, understand rationale for approaches to clinical problems,

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[SURVEY PREVIEW MODE] 2011 Transitional Year Program Graduate Survey (Year 1) Page 2 of 3

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