Tips on Making the Most of Each Rotation

• **Be familiar with and able to apply the core content of the rotation specialty.** Before your rotation begins, take time to review one or two relevant textbooks and go over any notes you may have. Be sure to draw on this body of knowledge as you demonstrate your diagnostic and clinical skills.

• **Read as much as you can about the illnesses of the patients you are seeing.** Monitor your patients’ charts daily. Research patient problems using journals, reference manuals recommended by your team, and Internet sources, such as Medline or UpToDate. This will help you prepare for rounds.

• **Be a team player.** Get to know your ward team – who they are, what they do and how your role interacts with each of them. Having a good working relationship with the ward team is highly valued in the clinical setting. True standouts evenly share responsibility, are well liked, and communicate effectively with other team members.

• **Dress professionally, be on time and be enthusiastic.** Attitude and appearance count. Take extra care on your rotations to look your best. On the first day of a rotation, unless you know that scrubs are acceptable attire, dress professionally. Make sure your style of dress is appropriate for the setting. Showing up early or staying late could also score you points – as long as you are being productive and learning in the process (and not just “hanging out”). Finally, in everything you do, no matter how dull, boring or insignificant the task, show enthusiasm.

• **Establish an informal learning agreement with your preceptor, resident or attending at the beginning of each clinical rotation.** This exercise affords you and the supervising physician a touchstone for you to learn the clinical decision-making and procedural skills you want from the rotation. Agreeing on goals and understanding how information will be taught ensures that your clinical experience is valuable.

• **Keep a journal for each rotation.** Record such things as the number of patients you see every day, the types of illnesses your patients have, any of your medical “firsts” (i.e., the first physical you perform, the first baby you deliver, etc.) and any expectations you have for the rotation before you begin. This will help you remember your experiences and process your feelings. When it’s time to choose a specialty, your journal will help you reconcile your experiences with your expectations and goals.

• **Learn to ask enough questions to satisfy your hunger for knowledge without monopolizing precious time.** Although you don’t want to stifle an important question, it is necessary to make the most of limited time with attendings, residents and interns. Pay attention to other students and learn from them – if other students are getting on your nerves because of their constant barrage of questions, don’t repeat their mistakes.

• **Maximize time spent waiting during rotations.** Since you never know when you’ll have extra time, don’t go anywhere without something to read. Keeping journal articles or reference materials with you will afford you the opportunity to study, read up on a patient, or prepare for your next set of rounds.

• **During down time, resist the urge to engage in excessive non-rotation tasks, such as personal e-mail, Web surfing, blogging or personal phone calls.** Your residents and attendings may interpret this as boredom, distraction or disinterest. Instead, check out online resources such as Virtual FMIG, FAMILYDOCTOR.org and the AAFP’s Board.
Review Web site, all of which are likely to enhance your rotation experience.

- **When you are on call (or working a long shift on rotations), take time to go outside for a few minutes.** Even if you are extremely busy, you should be able to find at least 30 seconds to stick your head out the door and take in few quick gulps of air between patients or hospital errands. You’ll be amazed at what a breadth of fresh air can do to your psyche – especially when you’re going to work in the dark, going home in the dark, and you’re bathed in the fluorescent light of hospital bulbs during most of the day.

- **To stay awake and alert while you are on call, find ways to keep physically and mentally active.** Take the stairs, write notes while standing up, stretch, read stimulating materials, or talk to other staff members. According to experts, the normal circadian cycle involves a 4:00 a.m. to 6:00 a.m. slump. During this period, remaining awake or maintaining alertness is most difficult. The key is to keep physically active.

- **In the middle of each rotation, ask your senior resident or attending for a verbal evaluation.** Don’t wait until your final evaluation to find out how you’re doing. If you get feedback early in your rotation, you can use it to improve before you are formally evaluated.

- **If you are not afforded the opportunity to perform some clinical decision-making and procedural skills that you wish to perfect during a rotation, ask your supervising physician what you can do to gain more experience.** In a busy practice or on the wards, it may be difficult for the supervising physician to know which skills you want to enhance. If your supervising physician indicates that you will not have an opportunity to perform a particular procedure, ask what you can do to gain that experience.

- **When you have completed a rotation, take a moment to assess what you’ve learned.** Here are some key questions to ask yourself: *What did you learn about illnesses and diseases from your patients? Did you achieve a level of proficiency in any procedures during this rotation? Which ones? What procedures do you need to work on? What procedures would you like to gain a greater proficiency in? Are you more comfortable presenting patients? What areas do you excel in? What areas need improvement? What did you learn from your mistakes and those of others? How frequently did you seek out verbal feedback? How did you benefit from this feedback?* Use your responses to these questions to help make the most of your next rotation.

- **At the beginning of your ambulatory block experiences, identify opportunities to gain skills beyond doing H&Ps, documentation and procedures.** With your preceptor, identify the clinic’s most pressing needs as they relate to the care of patients. Examples might include patient education programming, developing stronger ties to community-based ancillary health agencies and participating in the clinic’s quality assurance process. Also, keep in mind that a preceptor may be hesitant to assign tasks if he or she thinks you are uncomfortable. Don’t be afraid to volunteer. However, be prepared if the preceptor prefers to do a task alone.

- **Avoid asking questions of the preceptor during the patient encounter.** You should have some time built in at the end of the day or between patients to ask questions.

- **If you find yourself on the receiving end of harsh criticism, don’t take it personally.** Remember that the attending, intern, resident or preceptor is not criticizing you as a person – they are criticizing your actions. No doubt you have experienced criticism many times by now, and you will experience even more during residency. Try to
understand that you are human and you will make mistakes. Distance yourself from the criticism or situation, deal with it and move forward.

• **Do your best to get through emotionally draining experiences and, when you get a chance, take a few minutes to process your thoughts and mentally recuperate.** Students as well as interns and residents can experience some powerful emotions during rotations and on call. Because these situations are often stressful and don’t allow you to get away immediately, find a quiet place or walk outside for a few minutes when you can. For really tough situations, consider discussing your emotional reactions with a student support group. Many schools offer such groups to help students get through the challenges of medical school. Ask your office of student affairs what resources are available on your campus.

• **As the end of third year approaches and you start to work more independently, it’s important to ask your preceptor for suggestions for improvement.** Preceptors are under pressures and time constraints and may not be as focused on teaching as you would like. Because of the hurried environment, your preceptor may not take the time to give you the counsel and constructive feedback that you need to improve. Remind your preceptor that his or her input is important to you by asking “What skills do I need to work on?” or “What can I do to become a better physician?”

• **If you are on an away rotation, take steps before the rotation begins to get oriented to your new location.** Many fourth-year medical students opt to do an away rotation in the fall. September seems to be an especially popular month for medical students to do a rotation at a particular residency program of interest. These rotations are sometimes referred to as “audition” rotations. If you are on an audition rotation or any away rotation, you will need to become familiar with your new working environment quickly. Here are some tips:

1. **Study the hospital layout ahead of time. Before your rotation begins, tour the facility.** Obtain a map, if necessary, and locate the essential areas, such as the patient floors, operating rooms, labs, cafeteria, etc. Knowing your way around will reduce some of the anxiety associated with being at a new place with new people.

2. **Find out where your ward team will meet on the first day.** Before your rotation begins, phone your contact or call the department’s main office at the university or program to confirm where you will meet the first day and at what time.

3. **If you know individuals who have done this rotation, ask them for pointers.** Find out what they felt were the greatest challenges and the most rewarding experiences. Pay particular attention to their comments about people you may be working closely with.

4. **Have copies of your CV, personal statement and other application materials.** This information will come in handy if you decide to request a letter of recommendation from an attending (to give the attending as supplemental information about you) or if the program asks to interview you while you are still on the rotation.