



Rural Medicine Interest Group



Elective Evaluation

Part D

NON-HEALTH RELATED COMMUNITY-BASED PROJECT

Name/Type of Project: _____

Date Project Occurred: _____

Describe Your Participation:

COMMUNITY HEALTH PROBLEM

Targeted Health Problem: _____

Type of Intervention: _____

How was this intervention implemented? What were the results?

Barriers and Resources

What types of barriers to healthcare access did you observe during this access?

What types of resources are available to the people in this community? How are they accessed?

RURAL VS. URBAN PRACTICE

Compare the practice of medicine in this community with that in the Metro Detroit Area. What differences and similarities did you notice?

If you were to decide to practice in this area, what types of training do you believe you would need that are not currently part of the WSU-SOM curriculum?

PRESENTATION

Are you interested giving a presentation on your experiences during this externship? _____ Yes _____ No

If yes, please provide contact information. _____