Alumni Survey - UW OEM Residency Program

Question 1
Current Employer:

Question 2
Job Title:

Question 3
What is your employment status? Please select one, if "other" please explain briefly in the provided comment box.

- Full-time (40+ hrs/wk)
- Part-time (< 40 hrs/wk)
- Other: ________________

Question 4
How much of your working time is spent in direct patient care?:

- None
- 1 - 25%
- 26 - 50%
- 51 - 75%
- 76 - 100%
- Comment(s): ________________

Question 5
What is your preferred method of contact?

- E-mail used for this survey
- Other e-mail or phone number: ________________

Questions or Comments?
Contact JESSICA R. OLSON at jesolson@uw.edu
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Question 6
Based on your experience since graduation from the UW OEM Residency program, would you have liked more training/experience in any of the following?

☐ Clinical - more orthopedics and/or PM & R
☐ Clinical - more procedures, like joint injections
☐ Clinical - more urgent care, like treating eye injuries and lacerations
☐ Clinical - more clinical training generally
☐ Population based - more corporate rotations (Boeing or similar)
☐ Population based - more public health (King County Health Dept or similar)
☐ Population based - more time at LNI
☐ Classroom instruction - more core preventive medicine topics
☐ Classroom instruction - more research methodology
☐ Classroom instruction - more ABPM Board Review
☐ Classroom instruction - more graduate coursework generally
☐ N/A - Training in each area was just right
☐ Other/comments: 

Question 7
Based on your experience since graduation, what would you list as the strengths of the UW OEM Residency program?


Question 8
Based on your experience since graduation, what would you list as the weaknesses in the UW OEM Residency program?


Question 9
What suggestions do you have to improve the UW OEM training program?


Question 10
Would you recommend the UW OEM training program to future trainees?

☐ Yes
☐ No
☐ Comment(s): 

Question 11
We value your feedback. Please use this space for any additional comments, thoughts, or questions.

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