2009 Student Satisfaction Survey
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Executive Summary

What is the Student Satisfaction Survey?

The UNTHSC Student Satisfaction Survey was administered in February 2009 to evaluate student satisfaction, a primary measure associated with the UNTHSC Strategy Map.

The intent of the survey is to determine students’ overall level of satisfaction with a variety of elements of campus life and determine which areas need improvement. The survey addresses institutional facilities and services, curriculum, student services and programs, the student health clinic, student counseling, educational program services, communications, and the Founders’ Activity Center (see Appendix C for the survey instrument).

Who participated in the survey?

The survey was administered online from February 2, 2009 to March 2, 2009. Of 722 students who participated in the survey, 332 were students within the TCOM-DO program, 75 in SHP-MPAS, 104 in GSBS, and 175 in SPH. The 722 students who responded represent a response rate of approximately 61%, and a 98% increase from the number of participants responding in 2008.

What were the results?

Results are presented in the order of the questions in the survey. Tables with scores and numbers of respondents for all questions may be reviewed within each survey section. Student comments are contained in Appendix A. Graphic charts for all questions may be found in Appendix B.

Institutional Facilities and Services

In the area of Institutional Facilities and Services, 17 of the 34 questions asked had Below Expectations scores under 10%. Eight other questions had Below Expectations scores above 20%. Areas of Strength include Library Staff, Campus Maintenance and Cleanliness, and Campus Security. Opportunities for improvement include Parking Availability, Food Services, and Classroom Outlets and Network Connections.

Academics

Within Academics, responses varied by program. Generally, Administrative Support and Curriculum were areas of strength while Faculty Advising and Course and Instructor Evaluations continued to be areas with opportunities for improvement.
Executive Summary

TCOM-DO students responded to seven of eight questions with Below Expectations scores at or above 20% and all questions scored lower than last year.

SHP-MPAS students responded to one question with Below Expectations scores at or above 20%: Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum. Four questions saw scores improve by five points or more from 2008.

GSBS-Medical Science students responded to one question with Below Expectations scores at or above 20%: Quality of Guidance Provided by Major Professor/Mentor. The seven other questions all saw scores improve by five points or more from 2008.

GSBS-MS students responded to no questions with Below Expectations scores at or above 20%. All of the questions saw improved scores and all of the questions except Administrative Support and Quality of Guidance Provided by Major Professor/Mentor saw scores improve by at least five points from 2008.

GSBS-PhD students responded to three of nine questions with Below Expectations scores at or above 20%: Quality of Faculty Advising, Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum, and Availability of Classes. Three questions saw scores improve by at least five points from 2008. Four questions saw scores decline by at least five points from 2008.

SPH-MPH students responded to four questions with Below Expectations scores at or above 20%: Quality of Faculty Advising, Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum, Program Teaching/Graduate Assistants, and Availability of Classes. Five questions saw scores improve by five or more points over 2008.

With their first opportunity to participate in the survey, SPH-MHA students responded to all but one question (Relevance of Curriculum) with Below Expectations scores at or above 20%.

SPH-DrPH students responded to five questions with Below Expectations scores at or above 20%: Quality of Faculty Advising, Course and Instructor Evaluations - Adequate Measure of Quality, Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum, Program Teaching/Graduate Assistants, and Availability of Classes. Two questions saw scores improve by at least five points from 2008. Five questions saw scores decline by at least five points from 2008.
Executive Summary

Three programs (SHP–MPAS, GSBS–Medical Science, and SPH-DrPH) saw average scores of at least 4.0 in response to the question: “Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education.” Average scores were based on the following responses: Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1.

<table>
<thead>
<tr>
<th>Program</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>TCOM-DO</td>
<td>3.58</td>
</tr>
<tr>
<td>SHP-MPAS</td>
<td>4.08</td>
</tr>
<tr>
<td>GSBS-Medical Science</td>
<td>4.21</td>
</tr>
<tr>
<td>GSBS-MS</td>
<td>3.82</td>
</tr>
<tr>
<td>GSBS-PhD</td>
<td>3.89</td>
</tr>
<tr>
<td>SPH-MPH</td>
<td>3.97</td>
</tr>
<tr>
<td>SPH-MHA</td>
<td>3.78</td>
</tr>
<tr>
<td>SPH-DrPH</td>
<td>4.00</td>
</tr>
</tbody>
</table>

The question upon which these scores are based has been modified for 2009 to match the wording used by the Liaison Committee on Medical Education (LCME) in their survey, the results for which are now being used by the Texas Higher Education Coordinating Board’s annual “Accountability Report.” As such, no direct comparisons to previous years are applicable.

Student Services and Programs

In Student Services and Programs, only Availability of Scholarships had a Below Expectations score at or above 20%. International Advising saw scores improve by greater than five points from 2008, while Career Services and Financial Aid – Overall saw scores decline by at least five points from 2008. Strengths continued to be the Registrar’s Office and Human Resources, while opportunities for improvement continued to include scholarship availability and Career Services.

Student Health Clinic

The Student Health Clinic continued to see Convenience of Hours with a Below Expectations score above 20%. Quality of Medical Care continued to be a strength.

Student Counseling

Student Counseling (EAP) was used by 8% of the survey respondents. There were no questions with Below Expectations scores above 20%. Professionalism of Service had an improvement of five points, while Convenience of Hours had a decline of five points.
Executive Summary

Student Services Provided by Individual Programs

In Student Services Provided by Individual Programs, TCOM-DO, SHP-MPAS, GSBS-Medical Science and GSBS-MS students had no questions with Below Expectations scores at or above 20%. Within other programs:

- The GSBS-PhD program rated Communication of Academic Deadlines & Regulations with Below Expectations scores at or above 20%.

- The SPH-MPH program rated Career Counseling - Availability and Career Counseling - Quality with Below Expectations scores at or above 20%.

- The SPH-MHA program rated Career Counseling - Availability and Career Counseling - Quality, Student Government, and Other Student Organizations with Below Expectations scores at or above 20%.

- The SPH-DrPH program rated SPH Computer Lab, Career Counseling - Availability and Career Counseling - Quality, and Communication of News Specific to Program/School with Below Expectations scores at or above 20%.

While nearly all the programs experienced at least one question with an increase or decrease of at least five points from 2008, several questions saw those trends across multiple programs. Questions with five point increases among three or more programs include Career Counseling - Availability, Communication of Academic Deadlines & Regulations, and Other Student Organizations. The only question experiencing a five or more point decline among three programs was Communication of News Specific to Program/School.

Founders’ Activity Center

The Founders’ Activity Center was used by 39% of students who responded to the survey, a decrease of eight points from the previous year. Students rated four questions with Below Expectations scores at or above 20%: Hours of Operation, Fitness Classes, Exercise Facilities and Exercise Equipment. Hours of Operation and Activities and Programs saw scores improve by five or more points.

Student Comments

At the conclusion of each survey section, respondents were asked to suggest improvements. The student comments may be found in Appendix A.
Executive Summary

Charts

A graphic representation of three years of trend data for each question is contained within Appendix B.

Next Steps

As part of UNTHSC’s ongoing continuous improvement efforts, Leadership Team members are encouraged to review both the individual section summaries and the categorized comments and develop specific approaches to address opportunities for improvement. The Office of Strategy and Measurement is positioned to assist responsible parties with process improvement strategies in those areas with the need or potential for improvement.
Introduction and Methodology

What is the Student Satisfaction Survey?

The UNTHSC Student Satisfaction Survey was administered in February 2009 to evaluate student satisfaction, a primary measure associated with the UNTHSC Strategy Map. The survey was developed in 2007 by a committee of key administrative stakeholders, including Jerry Alexander, Ph.D., the Student Affairs Action Group (Thomas Moorman, EdD, Rynn Sloan, EdD, Carla Lee, Diane Wynn, and Michelle Porter), and the Office of Strategy and Measurement (OSM). The 2008 survey was expanded following input from Carla Lee and Daniel Burgard, while the 2009 survey was updated following input from Carla Lee, Diane Wynn, Thomas Moorman, Rynn Sloan, and Daniel Burgard. As part of UNTHSC’s ongoing continuous improvement efforts, future surveys will be reviewed to determine what, if any, modifications are warranted before each year's evaluation.

The intent of the survey is to determine students’ overall level of satisfaction with a variety of elements of campus life and determine opportunities for improvement. The survey addresses institutional facilities and services, curriculum, student services and programs, the student health clinic, student counseling, educational program services, communications, and the Founders’ Activity Center (see Appendix C for the survey instrument). The quantitative section of the survey is based on student satisfaction level relative to their level of expectation, such that a given campus element exceeded, met, or was below the student’s level of expectation. Students are encouraged to offer additional comments at the conclusion of each sub-section.

Who participated in the survey?

The survey was launched as an online instrument by the Office of Strategy and Measurement (OSM) using CHECKBOX on February 2, 2009, and closed March 2, 2009. While the survey gathered anonymous input, limited demographic data was also collected. Of 722 students who participated in the survey, 332 were students within the TCOM-DO program, 75 in SHP-MPAS, 104 in GSBS, and 175 in SPH. The 722 students who responded represent an approximately 61% response rate (Table 1.1), and represent a 98% increase in the number of participants who responded to the survey in 2008. In addition, 55% of the survey respondents expect to graduate in either 2009 or 2010, suggesting that a significant portion of the pool has spent sufficient time at UNTHSC to have formed an opinion on the issues raised in the survey (Table 1.2). The gender make up of the respondents approximates that of the student body, with 43% of respondents male and 57% female (Table 1.3). Additionally, 93% of respondents were full-time students (Table 1.4).
Introduction and Methodology

Table 1.1 – Survey Respondents by Program and Degree

<table>
<thead>
<tr>
<th>Program/Degree</th>
<th>2009 Respondents</th>
<th>2009 Percent of Respondents</th>
<th>2009 Number Surveyed*</th>
<th>2009 Response Rate</th>
<th>2008 Response Rate</th>
<th>2007 Response Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>TCOM/DO</td>
<td>332</td>
<td>46%</td>
<td>625</td>
<td>53%</td>
<td>31%</td>
<td>32%</td>
</tr>
<tr>
<td>SHP/MPAS</td>
<td>75</td>
<td>10%</td>
<td>109</td>
<td>69%</td>
<td>40%</td>
<td>25%</td>
</tr>
<tr>
<td>GSBS/Medical Science</td>
<td>40</td>
<td>6%</td>
<td>67</td>
<td>60%</td>
<td>30%</td>
<td>NA</td>
</tr>
<tr>
<td>GSBS/MS</td>
<td>34</td>
<td>5%</td>
<td>67</td>
<td>60%</td>
<td>30%</td>
<td>NA</td>
</tr>
<tr>
<td>GSBS/PhD</td>
<td>66</td>
<td>9%</td>
<td>92</td>
<td>72%</td>
<td>42%</td>
<td>38%</td>
</tr>
<tr>
<td>SPH/MPH</td>
<td>130</td>
<td>18%</td>
<td>183</td>
<td>71%</td>
<td>32%</td>
<td>27%</td>
</tr>
<tr>
<td>SPH/MHA</td>
<td>9</td>
<td>1%</td>
<td>9</td>
<td>100%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>SPH/DrPH</td>
<td>36</td>
<td>5%</td>
<td>44</td>
<td>82%</td>
<td>28%</td>
<td>35%</td>
</tr>
<tr>
<td>Totals</td>
<td>722</td>
<td>100%</td>
<td>1191</td>
<td>61%</td>
<td>33%</td>
<td>32%</td>
</tr>
</tbody>
</table>

* The total for enrolled is less than the sum of the individual programs due to dual-degree students.

Table 1.2 – Survey Participants by Year of Graduation*

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>NA</td>
<td>NA</td>
<td>111</td>
<td>30%</td>
</tr>
<tr>
<td>2009</td>
<td>211</td>
<td>29%</td>
<td>78</td>
<td>21%</td>
</tr>
<tr>
<td>2010</td>
<td>187</td>
<td>26%</td>
<td>95</td>
<td>26%</td>
</tr>
<tr>
<td>2011</td>
<td>190</td>
<td>26%</td>
<td>69</td>
<td>19%</td>
</tr>
<tr>
<td>2012</td>
<td>116</td>
<td>16%</td>
<td>8</td>
<td>2%</td>
</tr>
<tr>
<td>2013</td>
<td>11</td>
<td>2%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>2014</td>
<td>7</td>
<td>1%</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>No Response</td>
<td>0</td>
<td>0%</td>
<td>4</td>
<td>1%</td>
</tr>
<tr>
<td>Totals</td>
<td>722</td>
<td>100%</td>
<td>365</td>
<td>100%</td>
</tr>
</tbody>
</table>

*No response rate is provided for this table because the expected graduation date for all UNTHSC students is not known at the time the survey is administered.

Table 1.3 – Survey Participants by Gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>2009 Respondents</th>
<th>2009 Percent of Respondents</th>
<th>2009 Number Surveyed</th>
<th>2009 Response Rate</th>
<th>2008 Response Rate</th>
<th>2007 Response Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>311</td>
<td>43%</td>
<td>534</td>
<td>58%</td>
<td>27%</td>
<td>28%</td>
</tr>
<tr>
<td>Female</td>
<td>409</td>
<td>57%</td>
<td>657</td>
<td>62%</td>
<td>36%</td>
<td>34%</td>
</tr>
<tr>
<td>No Response</td>
<td>2</td>
<td>&lt; 1%</td>
<td>0</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Totals</td>
<td>722</td>
<td>100%</td>
<td>1191</td>
<td>61%</td>
<td>33%</td>
<td>32%</td>
</tr>
</tbody>
</table>
Introduction and Methodology

Table 1.4 – Survey Participants by Full Time Status

<table>
<thead>
<tr>
<th>Status</th>
<th>2009 Respondents</th>
<th>2009 Percent of Respondents</th>
<th>2009 Number Surveyed</th>
<th>2009 Response Rate</th>
<th>2008 Response Rate</th>
<th>2007 Response Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-Time</td>
<td>671</td>
<td>93%</td>
<td>1089</td>
<td>62%</td>
<td>34%</td>
<td>33%</td>
</tr>
<tr>
<td>Part-Time</td>
<td>48</td>
<td>7%</td>
<td>102</td>
<td>47%</td>
<td>17%</td>
<td>21%</td>
</tr>
<tr>
<td>No Response</td>
<td>3</td>
<td>&lt; 1%</td>
<td>0</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Totals</td>
<td>722</td>
<td>100%</td>
<td>1191</td>
<td>61%</td>
<td>33%</td>
<td>32%</td>
</tr>
</tbody>
</table>

How are results presented?

Quantitative results for each section include a table providing a three-year history of scores, along with the number of responses. For the purposes of scoring, the responses for “Exceeded Expectations” and “Met Expectations” have been combined. Scores in **BOLD** text represent a five point or greater change from the previous year. “NA” is included in the table when data are not available for prior years due to survey revisions. Narrative sections discuss the results in greater detail.

A graphic representation of three years of trend data for each question is contained within Appendix B.

How are student comments presented?

At the conclusion of each survey section, respondents were asked to suggest improvements for any items within that section. While a respondent’s comments may have spanned a variety of topics within a particular section, comments have been divided and categorized by topic to aid in analysis. Specific names in the comment section have been redacted; the comments were not edited in any other fashion, and do not appear in any specific order other than by the categories presented. At the end of each narrative section, a brief statement noting the prevalence and tenor of comments is included. The comments may be found in Appendix A.

What are the next steps?

As part of UNTHSC’s ongoing continuous improvement efforts, Leadership Team members are encouraged to review both the individual section summaries and the categorized comments and develop specific approaches to address opportunities for improvement. The Office of Strategy and Measurement is positioned to assist responsible parties with process improvement strategies in those areas with the need or potential for improvement.
Institutional Facilities and Services - Summary

Results

Table 2.1 displays detailed survey results for this section.

In the area of Classrooms, 72% of students responding to the question felt that classroom temperature met or exceeded expectations, an eight point increase from 2008. Comments on this topic commonly expressed that rooms were too cold. The percentage of Met or Exceeded expectations responses for AV Equipment (93%), Maintenance (92%), and Cleanliness (92%) have remained over 90% the past three years. Outlets and Network Connections continued to be a concern of students, with 73% rating these connections as having met or exceeded expectations. Comments on this issue centered on lack of adequate connections and occasional network outages.

The Student Lounges category included the following percentages for Met or Exceeded Expectations: Lounges in EAD (84%), Lounges in CBH (92%), Student Lounges in Library (81%), and 7th Floor SPH lounge (81%). The need for additional study lounge space continued to be a common theme among comments.

In the area of Computing and Technology, all three questions met or exceeded expectations for at least 80% of respondents. Groupwise/Email had a Met or Exceeded Expectations percentage of 84%, down seven points from 2008, Printing/Copiers scored a value of 80%, and Wireless Quality scored 86%. Continuing student concerns over high printer and copying prices was a common theme within the comments. Students also expressed concerns over wireless availability and reliability.

Library questions met or exceeded expectations for at least 84% of respondents for all areas, including Open Sufficient Hours (93%), Building Conducive to Quiet Study (84%), Building Conducive to Social Interaction (94%), Access to Print and Electronic Resources (92%), Staff Able and Willing to Help Find What I Need (98%), Computers - Quality (87%, down nine points from 2008), Computers - Availability (90%, down five points from 2008), and Library Outlet and Network Connections (92%, up 13 points from 2008). Prevalent comment themes included the need for longer hours, more study areas, quieter study areas, and more and better computers.

Lab questions for 2009 were split into Teaching and Research categories and had the following percentages of Met or Exceeded Expectations: Teaching Labs – Equipment Quality (89%), Teaching Labs – Safety (96%), Research Labs - Equipment Quality (94%) and Research labs – Safety (97%). One theme noted in the comments was a request for more bone saws in the anatomy labs.
Institutional Facilities and Services - Summary

Campus category scores have remained over 90% for the last three years, with Met or Exceeded Expectations scores of 93% for Maintenance, 95% for Cleanliness, and 95% for Handicap Access. One trend among the comments concerned the leak in the ceiling outside Everett Hall, requiring a bucket beneath it whenever it rains.

The Campus Police score in the area of Security was 97% Met or Exceeded Expectations, while the Met or Exceeded Expectations score for Emergency Communications was 98%. The Campus Police category has scored over 90% Met or Exceeded Expectations for each of the three years of the survey. No themes emerged in the comments.

Parking Availability met or exceeded expectations for 66% of students, down six points from 2008. Parking Price met or exceeded expectations for 68% of those responding. The comments reflected that students felt the former OMCT garage should be opened to increase capacity on campus. Parking cost was also a concern for many students.

In the area of Food Service, Stairway Café met or exceeded expectations for 53% of respondents, Java Lab Coffee Shop for 76% of respondents and Vending Machines for 63% of respondents, down seven points from 2008. Café comments focused on high prices and the lack of healthy options. Students also lamented the lack of a “real” cafeteria available throughout the day. High prices were also a concern for the Java Lab Coffee Shop, and many comments reflected a desire for longer hours.
## Institutional Facilities and Services - Summary

<table>
<thead>
<tr>
<th>Table 2.1 - Institutional Facilities &amp; Services</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Classrooms</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AV Equipment</td>
<td>93%</td>
<td>7%</td>
<td>94%</td>
</tr>
<tr>
<td>Maintenance</td>
<td>92%</td>
<td>8%</td>
<td>92%</td>
</tr>
<tr>
<td>Cleanliness</td>
<td>92%</td>
<td>8%</td>
<td>91%</td>
</tr>
<tr>
<td>Classroom Temperature</td>
<td>72%</td>
<td>28%</td>
<td>64%</td>
</tr>
<tr>
<td><strong>Student Lounges</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lounges in EAD</td>
<td>84%</td>
<td>16%</td>
<td>91%</td>
</tr>
<tr>
<td>Lounges in CBH</td>
<td>92%</td>
<td>8%</td>
<td>89%</td>
</tr>
<tr>
<td>Study Lounges in Library</td>
<td>81%</td>
<td>19%</td>
<td>85%</td>
</tr>
<tr>
<td>7th Floor SPH</td>
<td>87%</td>
<td>13%</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Computing and Technology</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Printing/Copiers</td>
<td>80%</td>
<td>20%</td>
<td>81%</td>
</tr>
<tr>
<td>Groupwise/Email</td>
<td>84%</td>
<td>16%</td>
<td>91%</td>
</tr>
<tr>
<td>Wireless Quality</td>
<td>86%</td>
<td>14%</td>
<td>82%</td>
</tr>
<tr>
<td><strong>Lewis Library</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Open sufficient hours</td>
<td>93%</td>
<td>7%</td>
<td>95%</td>
</tr>
<tr>
<td>Building conducive to quiet study</td>
<td>84%</td>
<td>16%</td>
<td>84%</td>
</tr>
<tr>
<td>Building conducive to social interaction</td>
<td>94%</td>
<td>6%</td>
<td>94%</td>
</tr>
<tr>
<td>Access to print and electronic resources</td>
<td>92%</td>
<td>8%</td>
<td>88%</td>
</tr>
<tr>
<td>Staff able and willing to help find what I need</td>
<td>98%</td>
<td>2%</td>
<td>97%</td>
</tr>
<tr>
<td>Library Computers – Quality</td>
<td>87%</td>
<td>13%</td>
<td>96%</td>
</tr>
<tr>
<td>Library Computers – Availability</td>
<td>90%</td>
<td>10%</td>
<td>95%</td>
</tr>
<tr>
<td>Library Outlets and Network Connections</td>
<td>92%</td>
<td>8%</td>
<td>79%</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
# Institutional Facilities and Services - Summary

**Table 2.1 – Cont.**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Met/ Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td><strong>Laboratories</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching Labs - Equipment Quality</td>
<td>89%</td>
<td>11%</td>
<td>376</td>
</tr>
<tr>
<td>Teaching Labs - Safety</td>
<td>96%</td>
<td>4%</td>
<td>368</td>
</tr>
<tr>
<td>Research Labs - Equipment Quality</td>
<td>94%</td>
<td>6%</td>
<td>247</td>
</tr>
<tr>
<td>Research Labs - Safety</td>
<td>97%</td>
<td>3%</td>
<td>241</td>
</tr>
<tr>
<td>Equipment Quality</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Safety</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td><strong>Campus</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintenance</td>
<td>93%</td>
<td>7%</td>
<td>584</td>
</tr>
<tr>
<td>Cleanliness</td>
<td>95%</td>
<td>5%</td>
<td>583</td>
</tr>
<tr>
<td>Handicap Access</td>
<td>95%</td>
<td>5%</td>
<td>327</td>
</tr>
<tr>
<td><strong>Campus Police</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Security</td>
<td>97%</td>
<td>3%</td>
<td>512</td>
</tr>
<tr>
<td>Emergency Communications</td>
<td>98%</td>
<td>2%</td>
<td>479</td>
</tr>
<tr>
<td><strong>Parking</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Availability</td>
<td>66%</td>
<td>34%</td>
<td>532</td>
</tr>
<tr>
<td>Price</td>
<td>68%</td>
<td>32%</td>
<td>512</td>
</tr>
<tr>
<td><strong>Food Service</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stairway Café</td>
<td>53%</td>
<td>47%</td>
<td>477</td>
</tr>
<tr>
<td>Java Lab Coffee Shop</td>
<td>76%</td>
<td>24%</td>
<td>517</td>
</tr>
<tr>
<td>Vending Machines</td>
<td>63%</td>
<td>37%</td>
<td>512</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Academics - Summary

TCOM - DO

Results

As listed in Table 3.1, respondents reporting Met or Exceeded Expectations decreased in 2009 for all questions, including: Curriculum (81%, down nine points from 2008 and five from 2007), Quality of Teaching (70%, down 15 points from 2008 and 12 from 2007), Faculty Advising (64%, down 15 points from 2008, and equal to the 2007 percentage), Course and Instructor Evaluations – Adequate Measure of Quality (64%, down 13 points from 2008), Effective Use of Course and Instructor Evaluations by Faculty to Improve the Curriculum (59%, down eight points from 2008 and seven from 2007), Administrative Support (76%, down 18 points from 2008 and one point higher than 2007), Program Clinical Staff (80%, down eight points from 2008 and nine from 2007), and Program Teaching/Graduate Assistants (80%, down ten points from 2008 and eleven from 2007).

Seventy percent of DO students responded that, overall, they Agreed or Strongly Agreed they were satisfied with the quality of their education. Average scores were based on the following responses: Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1. The average score was 3.58 (Table 3.9). The question was modified from previous years to match a Liaison Committee on Medical Education (LCME) question used in new state reporting requirements.

Student comments touched on several areas, with the largest number of comments focusing on concerns raised about the curriculum, quality of teaching faculty, and concerns that leadership is not responsive to issues brought forth in the course and instructor evaluations.
# Academics - Summary

<table>
<thead>
<tr>
<th>TCOM-DO - Please indicate your overall level of satisfaction with the following institutional facilities and services. Comparison to My Level of Expectation:</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Met/ Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Curriculum, Relevance of</td>
<td>81%</td>
<td>19%</td>
<td>327</td>
</tr>
<tr>
<td>Quality of Teaching</td>
<td>70%</td>
<td>30%</td>
<td>328</td>
</tr>
<tr>
<td>Quality of Faculty Advising</td>
<td>64%</td>
<td>36%</td>
<td>291</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Adequate Measure of Quality</td>
<td>64%</td>
<td>36%</td>
<td>317</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum</td>
<td>59%</td>
<td>41%</td>
<td>296</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>76%</td>
<td>24%</td>
<td>287</td>
</tr>
<tr>
<td>Program Clinical Staff</td>
<td>80%</td>
<td>20%</td>
<td>308</td>
</tr>
<tr>
<td>Program Teaching/Graduate Assistants</td>
<td>80%</td>
<td>20%</td>
<td>221</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Academics - Summary

SHP-MPAS

Results

Seven of eight questions had scores of 87% or higher in 2009 for Met or Exceeded Expectations (Table 3.2), including Curriculum (92%), Quality of Teaching (87%, an increase of 11 points from 2008), Quality of Faculty Advising (90%, a 13 point increase from 2008), Course and Instructor Evaluations – Adequate Measure of Quality (88%, a 20 point increase from 2008), Administrative Support (97%), Program Clinical Staff (95%, a nine point increase from 2008), and Program Teaching/Graduate Assistants (91%). Course and Instructor Evaluations – Used Effectively to Improve Curriculum met or exceeded expectations for 65% of respondents, representing a 21 point decrease from 2007, although an improvement compared to 2008.

Ninety-one percent of Physician Assistant students responded that, overall, they Agreed or Strongly Agreed they were satisfied with the quality of their education. Average scores were based on the following responses: Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1. The average score was 4.08 (Table 3.9). The question was modified from previous years to match a Liaison Committee on Medical Education (LCME) question used in new state reporting requirements.

One theme among the student comments was that feedback from course and instructor evaluations was not adequately acted upon.
# Academics - Summary

<table>
<thead>
<tr>
<th>Table 3.2</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SHP-MPAS - Please indicate your overall level of satisfaction with the following institutional facilities and services. Comparison to My Level of Expectation:</strong></td>
<td>Met/Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Curriculum, Relevance of</td>
<td>92%</td>
<td>8%</td>
<td>75</td>
</tr>
<tr>
<td>Quality of Teaching</td>
<td>87%</td>
<td>13%</td>
<td>75</td>
</tr>
<tr>
<td>Quality of Faculty Advising</td>
<td>90%</td>
<td>10%</td>
<td>70</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Adequate Measure of Quality</td>
<td>88%</td>
<td>12%</td>
<td>73</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum</td>
<td>65%</td>
<td>35%</td>
<td>68</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>97%</td>
<td>3%</td>
<td>73</td>
</tr>
<tr>
<td>Program Clinical Staff</td>
<td>95%</td>
<td>5%</td>
<td>74</td>
</tr>
<tr>
<td>Program Teaching/Graduate Assistants</td>
<td>91%</td>
<td>9%</td>
<td>47</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD.**
Academics - Summary

GSBS - Medical Science

Results

As noted in Table 3.3, all eight categories survey scored 79% or higher Met or Exceeded Expectations, including: Relevance of Curriculum (82%, up five points from 2008), Quality of Teaching (89%, up 46 points from 2008), Quality of Faculty Advising (85%, up 35 points from 2008), Course and Instructor Evaluations - Adequate Measure of Quality (89%, up 32 points from 2008), Effective Use of Course and Instructor Evaluations by Faculty to Improve the Curriculum (94%, up 52 points from 2008), Administrative Support (95%, up 38 points from 2008), Program Teaching/Graduate Assistants (96%, up 18 points from 2008), and Quality of Guidance Provided by Major Professor/Mentor (79%).

Ninety percent of Medical Science students responded that, overall, they Agreed or Strongly Agreed they were satisfied with the quality of their education. Average scores were based on the following responses: Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1. The average score was 4.21 (Table 3.9). The question was modified from previous years to match a Liaison Committee on Medical Education (LCME) question used in new state reporting requirements.

Student comments touched mainly on concerns regarding advising and lack of communication.
Academics - Summary

### Table 3.3

<table>
<thead>
<tr>
<th>GSBS- Medical Science</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please indicate your overall level of satisfaction with the following institutional facilities and services. Comparison to My Level of Expectation:</td>
<td>Met/Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Curriculum, Relevance of</td>
<td>82%</td>
<td>18%</td>
<td>39</td>
</tr>
<tr>
<td>Quality of Teaching</td>
<td>89%</td>
<td>11%</td>
<td>37</td>
</tr>
<tr>
<td>Quality of Faculty Advising</td>
<td>85%</td>
<td>15%</td>
<td>33</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Adequate Measure of Quality</td>
<td>89%</td>
<td>11%</td>
<td>36</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum</td>
<td>94%</td>
<td>6%</td>
<td>32</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>95%</td>
<td>5%</td>
<td>37</td>
</tr>
<tr>
<td>Program Teaching/Graduate Assistants</td>
<td>96%</td>
<td>4%</td>
<td>28</td>
</tr>
<tr>
<td>Quality of Guidance Provided by Major Professor/Mentor</td>
<td>79%</td>
<td>21%</td>
<td>29</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Academics - Summary

GSBS-MS

Results

As noted in Table 3.4, all nine questions had scores of 84% or higher for Met or Exceeded Expectations, including: Curriculum (85%, an 16 point increase from 2008), Quality of Teaching (84%, an eight point increase from 2008 and a 27 point increase from 2007), Quality of Faculty Advising (88%, a 16 point increase from 2008), Course and Instructor Evaluations - Adequate Measure of Quality (87%, a 12 point increase from 2008), Effective Use of Course and Instructor Evaluations by Faculty to Improve the Curriculum (90%, a 20 point increase from 2008 and a 32 point increase from 2007), Administrative Support (97%), Program Teaching/Graduate Assistants (92%, an eight point increase from 2008 and a 19 point increase from 2007), Quality of Guidance Provided by Major Professor/Mentor (94%), and Availability of Classes (94%, an eleven point increase from 2008).

Seventy-six percent of MS students responded that, overall, they Agreed or Strongly Agreed they were satisfied with the quality of their education. Average scores were based on the following responses: Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1. The average score was 3.82 (Table 3.9). The question was modified from previous years to match a Liaison Committee on Medical Education (LCME) question used in new state reporting requirements.

Student comments touched mainly on quality of the faculty teaching.
## Academics - Summary

### Table 3.4

| GSBS-MS - Please indicate your overall level of satisfaction with the following institutional facilities and services. Comparison to My Level of Expectation: | 2009 | 2008 | 2007 |
|----------------------------------;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---| Met/Exceeded | Below | n | Met/Exceeded | Below | n | Met/Exceeded | Below | n |
|----------------------------------;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---;---| Met/Exceeded | Below | n | Met/Exceeded | Below | n | Met/Exceeded | Below | n |
| Curriculum, Relevance of | 85% | 15% | 33 | 69% | 31% | 29 | 70% | 30% | 30 |
| Quality of Teaching | 84% | 16% | 32 | 76% | 24% | 29 | 57% | 43% | 30 |
| Quality of Faculty Advising | 88% | 13% | 32 | 72% | 28% | 29 | 77% | 23% | 22 |
| Course and Instructor Evaluations - Adequate Measure of Quality | 87% | 13% | 31 | 75% | 25% | 28 | NA | NA | NA |
| Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum | 90% | 10% | 31 | 70% | 30% | 27 | 58% | 42% | 19 |
| Administrative Support | 97% | 3% | 31 | 93% | 7% | 28 | 87% | 13% | 30 |
| Program Teaching/Graduate Assistants | 92% | 8% | 26 | 84% | 16% | 25 | 73% | 27% | 11 |
| Quality of Guidance Provided by Major Professor/Mentor | 94% | 6% | 31 | 92% | 8% | 25 | 84% | 16% | 19 |
| Availability of Classes | 94% | 6% | 33 | 83% | 17% | 24 | 100% | 0% | 20 |

Increases/decreases of 5 percentage points or more from previous year are in **BOLD.**
Academics - Summary

GSBS-PhD

Results

As noted in Table 3.5, all nine questions had scores of 71% or higher for Met or Exceeded Expectations, including: Curriculum (89%, holding steady at a twelve point increase from 2007), Quality of Teaching (86%, a ten point increase from 2008), Quality of Faculty Advising (75%, a 14 point decrease from 2008), Course and Instructor Evaluations - Adequate Measure of Quality (88%, an 18 point increase from 2008), Effective Use of Course and Instructor Evaluations by Faculty to Improve the Curriculum (78%, an eleven point increase from 2008 and nearly returning to 2007 levels), Administrative Support (90%), Program Teaching/Graduate Assistants (87%, a seven point decrease from 2008 and 2007), Quality of Guidance Provided by Major Professor/Mentor (84%, a seven point decrease from 2008), and Availability of Classes (71%, a 23 point decrease from 2008 and a seven point decrease from 2007).

Eighty-three percent of PhD students responded that, overall, they Agreed or Strongly Agreed they were satisfied with the quality of their education. Average scores were based on the following responses: Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1. The average score was 3.89 (Table 3.9). The question was modified from previous years to match a Liaison Committee on Medical Education (LCME) question used in new state reporting requirements.

The most common themes among student comments concerned advising and mentoring, and concerns regarding the low perception of GSBS’s status relative to other programs at UNTHSC.
<table>
<thead>
<tr>
<th>Table 3.5</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>GSBS-PhD - Please indicate your overall level of satisfaction with the following institutional facilities and services. Comparison to My Level of Expectation:</td>
<td>Met/Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Curriculum, Relevance of</td>
<td>89%</td>
<td>11%</td>
<td>65</td>
</tr>
<tr>
<td>Quality of Teaching</td>
<td>86%</td>
<td>14%</td>
<td>65</td>
</tr>
<tr>
<td>Quality of Faculty Advising</td>
<td>75%</td>
<td>25%</td>
<td>63</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Adequate Measure of Quality</td>
<td>88%</td>
<td>13%</td>
<td>64</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum</td>
<td>78%</td>
<td>22%</td>
<td>58</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>90%</td>
<td>10%</td>
<td>62</td>
</tr>
<tr>
<td>Program Teaching/Graduate Assistants</td>
<td>87%</td>
<td>13%</td>
<td>47</td>
</tr>
<tr>
<td>Quality of Guidance Provided by Major Professor/Mentor</td>
<td>84%</td>
<td>16%</td>
<td>61</td>
</tr>
<tr>
<td>Availability of Classes</td>
<td>71%</td>
<td>29%</td>
<td>59</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in BOLD.
Academics - Summary

SPH-MPH

Results

As noted in Table 3.6, eight of nine questions for MPH students had scores of 70% or higher for Met or Exceeded Expectations, including: Curriculum (89%), Quality of Teaching (82%, a six point increase from 2008), Quality of Faculty Advising (77%), Course and Instructor Evaluations - Adequate Measure of Quality (85%, a six point increase from 2008), Effective Use of Course and Instructor Evaluations by Faculty to Improve the Curriculum (76%, a seven point increase from 2008 and a twelve point increase from 2007), Administrative Support (96%, a twelve point increase from 2007), Program Teaching/Graduate Assistants (76%, a nine point decrease from 2007), and Quality of Guidance Provided by Major Professor/Mentor (88%, a nine point increase from 2008 and 2007). Availability of Classes scored 63%, a 32 point increase from the previous year.

Eighty-six percent of MPH students responded that, overall, they Agreed or Strongly agreed they were satisfied with the quality of their education. Average scores were based on the following responses: Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1. The average score was 3.97 (Table 3.9). The question was modified from previous years to match a Liaison Committee on Medical Education (LCME) question used in new state reporting requirements.

The most common themes among student comments were lack of availability of classes and concerns regarding advising.
## Academics - Summary

**Table 3.6**

<table>
<thead>
<tr>
<th>SPH-MPH - Please indicate your overall level of satisfaction with the following institutional facilities and services. Comparison to My Level of Expectation:</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Met/ Exceeded</td>
<td>Below</td>
<td>n</td>
<td>Met/ Exceeded</td>
</tr>
<tr>
<td><strong>Curriculum, Relevance of</strong></td>
<td>89%</td>
<td>11%</td>
<td>127</td>
</tr>
<tr>
<td><strong>Quality of Teaching</strong></td>
<td>82%</td>
<td>18%</td>
<td>126</td>
</tr>
<tr>
<td><strong>Quality of Faculty Advising</strong></td>
<td>77%</td>
<td>23%</td>
<td>123</td>
</tr>
<tr>
<td><strong>Course and Instructor Evaluations - Adequate Measure of Quality</strong></td>
<td>85%</td>
<td>15%</td>
<td>116</td>
</tr>
<tr>
<td><strong>Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum</strong></td>
<td>76%</td>
<td>24%</td>
<td>105</td>
</tr>
<tr>
<td><strong>Administrative Support</strong></td>
<td>96%</td>
<td>4%</td>
<td>116</td>
</tr>
<tr>
<td><strong>Program Teaching/Graduate Assistants</strong></td>
<td>76%</td>
<td>24%</td>
<td>109</td>
</tr>
<tr>
<td><strong>Quality of Guidance Provided by Major Professor/Mentor</strong></td>
<td>88%</td>
<td>12%</td>
<td>121</td>
</tr>
<tr>
<td><strong>Availability of Classes</strong></td>
<td>63%</td>
<td>37%</td>
<td>123</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
**Academics - Summary**

**SPH-MHA**

**Results**

As noted in Table 3.7, two of nine questions for MHA students had scores of 75% or higher for Met or Exceeded Expectations, including: Curriculum (89%) and Quality of Teaching (78%). Trend data is not available as this degree program was not included in the survey in previous years.

Questions with Met or Exceeded Expectations scores below 75% included Quality of Faculty Advising (44%), Course and Instructor Evaluations - Adequate Measure of Quality (67%), Effective Use of Course and Instructor Evaluations by Faculty to Improve the Curriculum (67%), Administrative Support (67%), Program Teaching/Graduate Assistants (57%), Quality of Guidance Provided by Major Professor/Mentor (67%) and Availability of Classes (67%).

It should be noted that while 100% of MHA students participated in the survey, the entire population of this first-year program is nine students.

Seventy-eight percent of MHA students responded that, overall, they Agreed or Strongly Agreed they were satisfied with the quality of their education. Average scores were based on the following responses: Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1. The average score was 3.78 (Table 3.9).

The most common theme among student comments related to concerns regarding advising.
### Academics - Summary

Table 3.7

<table>
<thead>
<tr>
<th>SPH-MHA - Please indicate your overall level of satisfaction with the following institutional facilities and services. Comparison to My Level of Expectation:</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curriculum, Relevance of</td>
<td>Met/Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Quality of Teaching</td>
<td>78%</td>
<td>22%</td>
<td>9</td>
</tr>
<tr>
<td>Quality of Faculty Advising</td>
<td>44%</td>
<td>56%</td>
<td>9</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Adequate Measure of Quality</td>
<td>67%</td>
<td>33%</td>
<td>9</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum</td>
<td>67%</td>
<td>33%</td>
<td>9</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>67%</td>
<td>33%</td>
<td>9</td>
</tr>
<tr>
<td>Program Teaching/Graduate Assistants</td>
<td>57%</td>
<td>43%</td>
<td>7</td>
</tr>
<tr>
<td>Quality of Guidance Provided by Major Professor/Mentor</td>
<td>67%</td>
<td>33%</td>
<td>9</td>
</tr>
<tr>
<td>Availability of Classes</td>
<td>67%</td>
<td>33%</td>
<td>9</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Academics - Summary

SPH-DrPH

Results

As noted in Table 3.8, six of nine questions had scores of 75% or above for Met or Exceeded Expectations: Relevance of Curriculum (91%, a nine point decrease from 2008 but a nine point increase from 2007), Quality of Teaching (94%, a 15 point increase from 2008), Quality of Faculty Advising (76%, a 17 point decrease from 2008), Administrative Support (94%), Program Teaching/Graduate Assistants (75%, a 16 point decrease from 2008 but a twelve point increase from 2007), and Quality of Guidance Provided by Major Professor/Mentor (82%, an eleven point decrease from 2008 and an eleven point increase from 2007).

Questions with percentages below 75% include: Course and Instructor Evaluations - Adequate Measure of Quality (69%, a 17 point decrease from 2008), Effective Use of Course and Instructor Evaluations by Faculty to Improve the Curriculum (67%), and Availability of Classes (63%, a thirteen point increase from 2008 and 2007).

Eighty-six percent of DrPH students responded that, overall, they Agreed or Strongly Agreed they were satisfied with the quality of their education. Average scores were based on the following responses: Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1. The average score was 4.00 (Table 3.9). The question was modified from previous years to match a Liaison Committee on Medical Education (LCME) question used in new state reporting requirements.

The most common theme among student comments was lack of class availability.
### Academics - Summary

**Table 3.8**

<table>
<thead>
<tr>
<th>SPH-DrPH - Please indicate your overall level of satisfaction with the following institutional facilities and services. Comparison to My Level of Expectation:</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curriculum, Relevance of</td>
<td>Met/Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>91%</td>
<td>9%</td>
<td>34</td>
<td>100%</td>
</tr>
<tr>
<td>Quality of Teaching</td>
<td>94%</td>
<td>6%</td>
<td>33</td>
</tr>
<tr>
<td>Quality of Faculty Advising</td>
<td>76%</td>
<td>24%</td>
<td>34</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Adequate Measure of Quality</td>
<td>69%</td>
<td>31%</td>
<td>29</td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum</td>
<td>67%</td>
<td>33%</td>
<td>27</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>94%</td>
<td>6%</td>
<td>33</td>
</tr>
<tr>
<td>Program Teaching/Graduate Assistants</td>
<td>75%</td>
<td>25%</td>
<td>28</td>
</tr>
<tr>
<td>Quality of Guidance Provided by Major Professor/Mentor</td>
<td>82%</td>
<td>18%</td>
<td>34</td>
</tr>
<tr>
<td>Availability of Classes</td>
<td>63%</td>
<td>37%</td>
<td>35</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
### Academics - Summary

**Table 3.9** - Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education. \( n = 714 \)

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>n</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>No Opinion/Indifferent</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Average Score*</th>
</tr>
</thead>
<tbody>
<tr>
<td>TCOM-DO</td>
<td>329</td>
<td>14%</td>
<td>56%</td>
<td>12%</td>
<td>12%</td>
<td>7%</td>
<td>3.58</td>
</tr>
<tr>
<td>SHP-MPAS</td>
<td>74</td>
<td>26%</td>
<td>65%</td>
<td>1%</td>
<td>8%</td>
<td>0%</td>
<td>4.08</td>
</tr>
<tr>
<td>GSBS-Med Science</td>
<td>39</td>
<td>31%</td>
<td>59%</td>
<td>10%</td>
<td>0%</td>
<td>0%</td>
<td>4.21</td>
</tr>
<tr>
<td>GSBS-MS</td>
<td>33</td>
<td>18%</td>
<td>58%</td>
<td>12%</td>
<td>12%</td>
<td>0%</td>
<td>3.82</td>
</tr>
<tr>
<td>GSBS-PhD</td>
<td>65</td>
<td>15%</td>
<td>68%</td>
<td>9%</td>
<td>6%</td>
<td>2%</td>
<td>3.89</td>
</tr>
<tr>
<td>SPH-MPH</td>
<td>130</td>
<td>18%</td>
<td>68%</td>
<td>5%</td>
<td>7%</td>
<td>1%</td>
<td>3.97</td>
</tr>
<tr>
<td>SPH-MHA</td>
<td>9</td>
<td>11%</td>
<td>67%</td>
<td>11%</td>
<td>11%</td>
<td>0%</td>
<td>3.78</td>
</tr>
<tr>
<td>SPH-DrPH</td>
<td>35</td>
<td>23%</td>
<td>63%</td>
<td>6%</td>
<td>9%</td>
<td>0%</td>
<td>4.00</td>
</tr>
</tbody>
</table>

* Based on Strongly Agree = 5, Agree = 4, No Opinion/Indifferent = 3, Disagree = 2, Strongly Disagree = 1
Student Services and Programs - Summary

Results

As noted in Table 4.1, all the areas within Student Affairs had Met or Exceeded Expectations scores of greater than 84%, including Registrar (96%), International Advising (94%, up six points from 2008), Center for Academic Performance (CAP) (86%), Student Life (91%), Career Services (84%, down ten points from 2008 and 2007) and Student Affairs - Overall (93%). Common themes among the comments included the need for better communications from the Registrar's office, more and better CAP tutors, and a wider range of career services.

Financial Aid categories met or exceeded expectations for the majority of respondents, but were down slightly from 2008. Financial Aid Office - Overall scored 87%, down five points from 2008, while Access to Loan Information scored 90% and Availability of Scholarships scored 69%. Issues with the communication process and lack of available scholarships were the most prevalent themes expressed in the comments.

All the areas within Other Institutional Services and Offices had Met or Exceeded Expectations percentages of greater than 85%, including: Student Financials (90%), Human Resources (95%), Marketing and Communications (86%), and Alumni Affairs (85%). Common themes among the comments included the need for timely disbursements and better communications from Student Financials and more transparency concerning campus hot topics from the Communications office.

An additional question concerning the newly unified UNTHSC Catalog was added for 2009. While 77% of students had not seen the new catalog, only 2% did not like the new format (Table 4.2), and the comments were generally positive.
# Student Services and Programs - Summary

<table>
<thead>
<tr>
<th>Table 4.1 - Student Affairs</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please indicate your overall level of satisfaction with the following institutional facilities and services. Comparison to my level of expectation:</td>
<td>Met/ Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Student Affairs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registrar</td>
<td>96%</td>
<td>4%</td>
<td>616</td>
</tr>
<tr>
<td>International Advising</td>
<td>94%</td>
<td>6%</td>
<td>235</td>
</tr>
<tr>
<td>Center for Academic Performance (CAP)</td>
<td>86%</td>
<td>14%</td>
<td>461</td>
</tr>
<tr>
<td>Student Life</td>
<td>91%</td>
<td>9%</td>
<td>560</td>
</tr>
<tr>
<td>Career Services</td>
<td>84%</td>
<td>16%</td>
<td>410</td>
</tr>
<tr>
<td>Student Affairs - Overall</td>
<td>93%</td>
<td>7%</td>
<td>613</td>
</tr>
<tr>
<td>Financial Aid</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial Aid Office - Overall</td>
<td>87%</td>
<td>13%</td>
<td>610</td>
</tr>
<tr>
<td>Access to Loan Information</td>
<td>90%</td>
<td>10%</td>
<td>585</td>
</tr>
<tr>
<td>Availability of Scholarships</td>
<td>69%</td>
<td>31%</td>
<td>558</td>
</tr>
<tr>
<td>Other Institutional Services and Offices</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Financials Office</td>
<td>90%</td>
<td>10%</td>
<td>556</td>
</tr>
<tr>
<td>Human Resource Services</td>
<td>95%</td>
<td>5%</td>
<td>414</td>
</tr>
<tr>
<td>Marketing &amp; Communications - General UNTHSC News &amp; Plans</td>
<td>86%</td>
<td>14%</td>
<td>462</td>
</tr>
<tr>
<td>Alumni Affairs</td>
<td>85%</td>
<td>15%</td>
<td>303</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.

### Table 4.2 Do you like the new format for the UNTHSC Catalog?

| | Yes | 22% |
| | No | 2% |
| | I have not seen the new catalog | 77% |
Student Health Clinic

Results

The majority of respondents (60%) reported using the Student Health Clinic at least one time a year (Table 5.1).

The Student Health Clinic met or exceeded expectations for 82% or more of students who used its services in three categories, including Promptness of Service (82%), Professionalism (90%), and Quality of Care (92%). Convenience of Hours (58%) saw Met or Exceeded Expectations responses decrease nine points from 2008 and 27 points from 2007 (Table 5.2).

Key themes raised in the comments included the need for expanded hours and the desire for better customer service and professionalism.

Table 5.1 - How often have you used the Student Health Clinic?

<table>
<thead>
<tr>
<th></th>
<th>2009 (n=722)</th>
<th>2008 (n=365)</th>
<th>2007 (n=342)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never Used</td>
<td>40%</td>
<td>27%</td>
<td>31%</td>
</tr>
<tr>
<td>1 Time</td>
<td>31%</td>
<td>19%</td>
<td>33%</td>
</tr>
<tr>
<td>2-5 Times</td>
<td>26%</td>
<td>38%</td>
<td>30%</td>
</tr>
<tr>
<td>&gt;5 Times</td>
<td>3%</td>
<td>16%</td>
<td>6%</td>
</tr>
</tbody>
</table>

Table 5.2 - Student Health Clinic

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Met/Exceeded</td>
<td>Below n</td>
<td>Met/Exceeded</td>
</tr>
<tr>
<td>Promptness of Service</td>
<td>82%</td>
<td>18%</td>
<td>420</td>
</tr>
<tr>
<td>Professionalism of Service</td>
<td>90%</td>
<td>10%</td>
<td>422</td>
</tr>
<tr>
<td>Quality of Medical Care</td>
<td>92%</td>
<td>8%</td>
<td>414</td>
</tr>
<tr>
<td>Convenience of Hours</td>
<td>58%</td>
<td>42%</td>
<td>407</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Student EAP (Counseling) Service

Results

The Student EAP (Counseling) Service was used by 8% of students responding to the 2009 survey, a two point decrease from the previous year (Table 6.1).

EAP questions had Met or Exceeded Expectations percentages over 85% in Availability (93%), Professionalism of Service (91%, a five point increase from 2008), Sufficient Length of Service (85%, an eleven point decrease from 2007), Quality of Mental Health Care (85%) and Convenience of Hours (86%, a five point decrease from 2008) (Table 6.2).

No particular theme was noted in the twelve comments related to the Student EAP Service.

Table 6.1 - Have you ever used the Student EAP (Counseling) Service?

<table>
<thead>
<tr>
<th></th>
<th>2009 (n=722)</th>
<th>2008 (n=365)</th>
<th>2007 (n=342)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>8%</td>
<td>10%</td>
<td>8%</td>
</tr>
<tr>
<td>No</td>
<td>92%</td>
<td>90%</td>
<td>92%</td>
</tr>
</tbody>
</table>

Table 6.2 - Student EAP (Counseling) Service

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Met/Exceeded</td>
<td>93%</td>
<td>94%</td>
<td>NA</td>
</tr>
<tr>
<td>Below</td>
<td>7%</td>
<td>6%</td>
<td>NA</td>
</tr>
<tr>
<td>n</td>
<td>54</td>
<td>35</td>
<td>NA</td>
</tr>
<tr>
<td>Professionalism of Service</td>
<td>91%</td>
<td>86%</td>
<td>NA</td>
</tr>
<tr>
<td>Met/Exceeded</td>
<td>9%</td>
<td>14%</td>
<td>NA</td>
</tr>
<tr>
<td>Below</td>
<td>53</td>
<td>35</td>
<td>NA</td>
</tr>
<tr>
<td>n</td>
<td>53</td>
<td>35</td>
<td>NA</td>
</tr>
<tr>
<td>Sufficient Length of Service</td>
<td>85%</td>
<td>82%</td>
<td>96%</td>
</tr>
<tr>
<td>Met/Exceeded</td>
<td>15%</td>
<td>18%</td>
<td>4%</td>
</tr>
<tr>
<td>Below</td>
<td>53</td>
<td>34</td>
<td>24</td>
</tr>
<tr>
<td>n</td>
<td>53</td>
<td>34</td>
<td>24</td>
</tr>
<tr>
<td>Quality of Mental Health Care</td>
<td>85%</td>
<td>88%</td>
<td>87%</td>
</tr>
<tr>
<td>Met/Exceeded</td>
<td>15%</td>
<td>13%</td>
<td>13%</td>
</tr>
<tr>
<td>Below</td>
<td>47</td>
<td>32</td>
<td>23</td>
</tr>
<tr>
<td>n</td>
<td>47</td>
<td>32</td>
<td>23</td>
</tr>
<tr>
<td>Convenience of Hours</td>
<td>86%</td>
<td>91%</td>
<td>NA</td>
</tr>
<tr>
<td>Met/Exceeded</td>
<td>14%</td>
<td>9%</td>
<td>NA</td>
</tr>
<tr>
<td>Below</td>
<td>49</td>
<td>34</td>
<td>NA</td>
</tr>
<tr>
<td>n</td>
<td>49</td>
<td>34</td>
<td>NA</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Student-Related Services Provided by Your Educational Program - Summary

TCOM - DO

Results

As noted in Table 7.1, the majority of respondents reported Met or Exceeded Expectations in all categories, including Admissions (95%), Student Services (93%), Administrative Support (87%, down eight points from 2008), Career Counseling-Availability (89%, an increase of 22 points from 2007), Career Counseling-Quality (84%, an increase of 51 points from 2007), Student Government (94%), Other Student Organizations (92%), Communication of Student Activities (90%), Communication of Academic Deadlines and Regulations (81%), and Communication of News Specific to Program/School (86%, down seven points from 2008).

The most common themes noted in the comments included a lack of communication and the need for improved career counseling.

<table>
<thead>
<tr>
<th>Table 7.1 - TCOM - DO</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please indicate your overall level of satisfaction with the following program facilities and services. Comparison to my level of expectation:</td>
<td>Met/Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Admissions</td>
<td>95%</td>
<td>5%</td>
<td>297</td>
</tr>
<tr>
<td>Student Services</td>
<td>93%</td>
<td>7%</td>
<td>290</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>87%</td>
<td>13%</td>
<td>263</td>
</tr>
<tr>
<td>Career Counseling-Availability</td>
<td>89%</td>
<td>11%</td>
<td>201</td>
</tr>
<tr>
<td>Career Counseling-Quality</td>
<td>84%</td>
<td>16%</td>
<td>171</td>
</tr>
<tr>
<td>Student Government</td>
<td>94%</td>
<td>6%</td>
<td>268</td>
</tr>
<tr>
<td>Other Student Organizations</td>
<td>92%</td>
<td>8%</td>
<td>276</td>
</tr>
<tr>
<td>Communication of Student Activities</td>
<td>90%</td>
<td>10%</td>
<td>288</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>81%</td>
<td>19%</td>
<td>288</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>86%</td>
<td>14%</td>
<td>279</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Student-Related Services Provided by Your Educational Program - Summary

SHP – MPAS

Results

As noted in Table 7.2, the majority of respondents reported Met or Exceeded Expectations in all categories, including Admissions (94%, down six points from 2008 and 2007), Student Services (100%), Administrative Support (99%), Career Counseling-Availability (97%, up nine points from 2008), Career Counseling-Quality (96%, up 16 points from 2008), Student Government (98%), Other Student Organizations (100%, up six points from 2008), Communication of Student Activities (97%), Communication of Academic Deadlines and Regulations (92%, down five points from 2008), and Communication of News Specific to Program/School (89%, down five points from 2008).

Lack of communication during the admissions process was a common theme among the limited comments.

<table>
<thead>
<tr>
<th>Table 7.2 - SHP - MPAS</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please indicate your overall level of satisfaction with the following program</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>facilities and services. Comparison to my level of expectation:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Admissions</td>
<td>Met/ Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td></td>
<td>94%</td>
<td>6%</td>
<td>69</td>
</tr>
<tr>
<td>Student Services</td>
<td>100%</td>
<td>0%</td>
<td>67</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>99%</td>
<td>1%</td>
<td>70</td>
</tr>
<tr>
<td>Career Counseling-Availability</td>
<td>97%</td>
<td>3%</td>
<td>37</td>
</tr>
<tr>
<td>Career Counseling-Quality</td>
<td>96%</td>
<td>4%</td>
<td>27</td>
</tr>
<tr>
<td>Student Government</td>
<td>98%</td>
<td>2%</td>
<td>58</td>
</tr>
<tr>
<td>Other Student Organizations</td>
<td>100%</td>
<td>0%</td>
<td>61</td>
</tr>
<tr>
<td>Communication of Student Activities</td>
<td>97%</td>
<td>3%</td>
<td>66</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>92%</td>
<td>8%</td>
<td>64</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>89%</td>
<td>11%</td>
<td>64</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **bold**.
Student-Related Services Provided by Your Educational Program - Summary

GSBS - Medical Science

Results

As noted in Table 7.3, the majority of respondents reported Met or Exceeded Expectations in all categories, including Admissions (95%, up 24 points from 2008), Student Services (100%, up 14 points from 2008), Communication of Academic Deadlines & Regulations (95%, up 31 points from 2008), and Communication of News Specific to Program/School (97%, up 33 points from 2008).

No clear themes emerged in the comments.

<table>
<thead>
<tr>
<th>Table 7.3 - GSBS - Medical Science</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Please indicate your overall level of satisfaction with the following program facilities and services. Comparison to my level of expectation:</strong></td>
<td>Met/Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Admissions</td>
<td>95%</td>
<td>5%</td>
<td>38</td>
</tr>
<tr>
<td>Student Services</td>
<td>100%</td>
<td>0%</td>
<td>35</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>95%</td>
<td>5%</td>
<td>38</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>97%</td>
<td>3%</td>
<td>36</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Student-Related Services Provided by Your Educational Program - Summary

GSBS – MS

Results

As noted in Table 7.4, the majority of respondents reported Met or Exceeded Expectations in all categories, including Admissions (84%, down thirteen points from 2007), Student Services (97%), Communication of Academic Deadlines and Regulations (88%), and Communication of News Specific to Program/School (90%).

Lack of communications during admissions was the primary theme in the limited comments.

<table>
<thead>
<tr>
<th>Table 7.4 - GSBS - MS</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Met/ Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Admissions</td>
<td>84%</td>
<td>16%</td>
<td>32</td>
</tr>
<tr>
<td>Student Services</td>
<td>97%</td>
<td>3%</td>
<td>30</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>88%</td>
<td>13%</td>
<td>32</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>90%</td>
<td>10%</td>
<td>30</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Student-Related Services Provided by Your Educational Program -
Summary

GSBS - PhD

Results

As noted in Table 7.5, the majority of respondents reported Met or Exceeded Expectations in all categories, including Admissions (92%), Student Services (91%, up six points from 2008), Communication of Academic Deadlines and Regulations (80%, up 16 points from 2008), and Communication of News Specific to Program/School (84%, up five points from 2008).

Lack of communications during admissions was the primary theme in the limited comments.

<table>
<thead>
<tr>
<th>Table 7.5 - GSBS - PhD</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions</td>
<td>92%</td>
<td>8%</td>
<td>59</td>
</tr>
<tr>
<td>Student Services</td>
<td>91%</td>
<td>9%</td>
<td>56</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>80%</td>
<td>20%</td>
<td>64</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>84%</td>
<td>16%</td>
<td>61</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Student-Related Services Provided by Your Educational Program - Summary

SPH – MPH

Results

As noted in Table 7.6, the majority of respondents reported Met or Exceeded Expectations in all categories, including Admissions (97%), Student Services (97%, up eighteen points from 2007), Administrative Support (97%), SPH Computer Lab (82%, down six points from 2008), Career Counseling-Availability (80%, up 14 points from 2008 and 26 points from 2007), Career Counseling-Quality (79%, up 19 points from 2008 and 19 points from 2007), Student Government (91%, up seven points from 2008), Other Student Organizations (92%, up ten points from 2008), Communication of Student Activities (92%), Communication of Academic Deadlines and Regulations (89%, up 11 points from 2008), and Communication of News Specific to Program/School (92%).

Lack of communication during the admissions process was a common theme among the limited comments.

<table>
<thead>
<tr>
<th>Table 7.6 - SPH - MPH</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Met/ Exceeded</td>
<td>Below</td>
<td>n</td>
</tr>
<tr>
<td>Admissions</td>
<td>97%</td>
<td>3%</td>
<td>126</td>
</tr>
<tr>
<td>Student Services</td>
<td>97%</td>
<td>3%</td>
<td>119</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>97%</td>
<td>3%</td>
<td>115</td>
</tr>
<tr>
<td>SPH Computer Lab</td>
<td>82%</td>
<td>18%</td>
<td>114</td>
</tr>
<tr>
<td>Career Counseling-Availability</td>
<td>80%</td>
<td>20%</td>
<td>76</td>
</tr>
<tr>
<td>Career Counseling-Quality</td>
<td>79%</td>
<td>21%</td>
<td>73</td>
</tr>
<tr>
<td>Student Government</td>
<td>91%</td>
<td>9%</td>
<td>82</td>
</tr>
<tr>
<td>Other Student Organizations</td>
<td>92%</td>
<td>8%</td>
<td>83</td>
</tr>
<tr>
<td>Communication of Student Activities</td>
<td>92%</td>
<td>8%</td>
<td>114</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>89%</td>
<td>11%</td>
<td>123</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>92%</td>
<td>8%</td>
<td>121</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD.**
Student-Related Services Provided by Your Educational Program - Summary

SPH - MHA

Results

As noted in Table 7.7, the majority of respondents reported Met or Exceeded Expectations in the following categories: Admissions (100%), Student Services (100%), Administrative Support (100%), SPH Computer Lab (88%), Student Government (80%), Other Student Organizations (80%), Communication of Student Activities (83%), Communication of Academic Deadlines and Regulations (86%), and Communication of News Specific to Program/School (86%).

Career Counseling-Availability (33%) and Career Counseling-Quality (25%) were the lowest scoring categories.

No clear themes emerged in the limited comments.

<table>
<thead>
<tr>
<th>Table 7.7 - SPH - MHA</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions</td>
<td>100%</td>
<td>0%</td>
<td>NA</td>
</tr>
<tr>
<td>Student Services</td>
<td>100%</td>
<td>0%</td>
<td>NA</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>100%</td>
<td>0%</td>
<td>NA</td>
</tr>
<tr>
<td>SPH Computer Lab</td>
<td>88%</td>
<td>13%</td>
<td>NA</td>
</tr>
<tr>
<td>Career Counseling-Availability</td>
<td>33%</td>
<td>67%</td>
<td>NA</td>
</tr>
<tr>
<td>Career Counseling-Quality</td>
<td>25%</td>
<td>75%</td>
<td>NA</td>
</tr>
<tr>
<td>Student Government</td>
<td>80%</td>
<td>20%</td>
<td>NA</td>
</tr>
<tr>
<td>Other Student Organizations</td>
<td>80%</td>
<td>20%</td>
<td>NA</td>
</tr>
<tr>
<td>Communication of Student Activities</td>
<td>83%</td>
<td>17%</td>
<td>NA</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>86%</td>
<td>14%</td>
<td>NA</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>86%</td>
<td>14%</td>
<td>NA</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Student-Related Services Provided by Your Educational Program - Summary

SPH – DrPH

Results

As noted in Table 7.8, the majority of respondents reported Met or Exceeded Expectations in the following categories: Admissions (86%, down 14 points from 2008 and 2007), Student Services (94%, down six points from 2008 but up 44 points from 2007), Administrative Support (94%), SPH Computer Lab (70%, down 22 points from 2008), Student Government (95%, up six points from 2008 and 88 points from 2007), Other Student Organizations (88%, up 13 points from 2008 and 78 points from 2007), Communication of Student Activities (93%, down seven points from 2008), Communication of Academic Deadlines and Regulations (83%), and Communication of News Specific to Program/School (77%, down nine points from 2008).

Career Counseling-Availability (50%, up seven points from 2008 and 20 points from 2007) and Career Counseling-Quality (45%, down five points from 2008 but up 24 points from 2007) were the lowest scoring categories, both with a lower number of responses compared to the other questions in the group.

No clear themes emerged in the comments.

<table>
<thead>
<tr>
<th>Table 7.8 - SPH - DrPH</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please indicate your overall level of satisfaction with the following program facilities and services. Comparison to my level of expectation:</td>
<td>Met/Exceeded</td>
<td>Below</td>
<td>Met/Exceeded</td>
</tr>
<tr>
<td>Admissions</td>
<td>86%</td>
<td>14%</td>
<td>35</td>
</tr>
<tr>
<td>Student Services</td>
<td>94%</td>
<td>6%</td>
<td>33</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>94%</td>
<td>6%</td>
<td>32</td>
</tr>
<tr>
<td>SPH Computer Lab</td>
<td>70%</td>
<td>30%</td>
<td>33</td>
</tr>
<tr>
<td>Career Counseling-Availability</td>
<td>50%</td>
<td>50%</td>
<td>16</td>
</tr>
<tr>
<td>Career Counseling-Quality</td>
<td>45%</td>
<td>55%</td>
<td>11</td>
</tr>
<tr>
<td>Student Government</td>
<td>95%</td>
<td>5%</td>
<td>21</td>
</tr>
<tr>
<td>Other Student Organizations</td>
<td>88%</td>
<td>13%</td>
<td>16</td>
</tr>
<tr>
<td>Communication of Student Activities</td>
<td>93%</td>
<td>7%</td>
<td>28</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>83%</td>
<td>17%</td>
<td>30</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>77%</td>
<td>23%</td>
<td>31</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in **BOLD**.
Founders’ Activity Center - Summary

Results

The Founders’ Activity Center was not used by 61% of respondents, up eight points from 2008 and thirteen points from 2007. An additional 26% used the FAC fewer than three times a week (Table 8.1).

As noted in Table 8.2, the Founders’ Activity Center Met or Exceeded Expectations percentages include: Hours of Operation (80%, up five points from 2008), Activities and Programs (82%, up five points from 2008), Fitness Classes (74%), Exercise Facilities (68%, down nine points from 2007), and Exercise Equipment (70%).

The key themes raised in the comments included the desire for longer hours, more space, and more equipment.

Table 8.1 - How often do you use the Founders' Activity Center?

<table>
<thead>
<tr>
<th>2009 (n=722)</th>
<th>2008 (n=365)</th>
<th>2007 (n=345)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never Used</td>
<td>61%</td>
<td>53%</td>
</tr>
<tr>
<td>Once a week</td>
<td>17%</td>
<td>18%</td>
</tr>
<tr>
<td>Twice a week</td>
<td>9%</td>
<td>10%</td>
</tr>
<tr>
<td>Three or more times a week</td>
<td>14%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Table 8.2 - Founders' Activity Center

<table>
<thead>
<tr>
<th>Activity</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hours of Operation</td>
<td>80%</td>
<td>75%</td>
<td>85%</td>
</tr>
<tr>
<td>Activities &amp; Programs</td>
<td>82%</td>
<td>77%</td>
<td>85%</td>
</tr>
<tr>
<td>Fitness Classes</td>
<td>74%</td>
<td>67%</td>
<td>77%</td>
</tr>
<tr>
<td>Exercise Facilities</td>
<td>68%</td>
<td>67%</td>
<td>77%</td>
</tr>
<tr>
<td>Exercise Equipment</td>
<td>70%</td>
<td>68%</td>
<td>77%</td>
</tr>
</tbody>
</table>

Increases/decreases of 5 percentage points or more from previous year are in BOLD.
Appendix A

Comments
Comments – Institutional Facilities and Services

**Background:** At the conclusion of each survey section, respondents were asked to suggest improvements for any of the areas listed immediately above. While a respondent’s comments may spanned a variety of topics within a particular section, for the purposes of this report these comments have been divided and categorized by topic. The comments were not edited in any other fashion, and do not appear in any specific order other than by the categories presented.

**Classrooms**

**AV equipment** (n=39)

All teachers who will be teaching a course ought to be required to take A/V classes and pass a test on how to use each room. Too many times this year class has stopped down in the middle of something important because the professor had no idea how to dim the lights appropriately or turn on the overhead.

Allow the students to have video recordings of lectures as well as the audio that is currently present. Even the medical sciences program (part of the graduate school) is allowed to have some sort of video feed. The excuse of having students not attend class is ridiculous and should not be used as a reason for why video recording, which is present at numerous other medical schools (top 10 hsc centers as well), should not be allowed.

Although there is a large amount of AV equipment in each room, it does no good to just let it sit there and not be used. Professors should utilize all the equipment.

AV equipment is outdated - not bright enough; bathrooms are always dirty, classroom temperatures fluctuate like crazy, the network is slow on wireless

AV equipment is top notch but that is inconsequential since the professors are not trained to use it. Often they will give up on drawing something on the white board because they are unable to raise the projector screen. More often than not they are not able to use the dock cam. Only one of the many professors I have had thus far took advantage of on-screen-witting capabilities of Alcon Auditorium. It is not a matter of teaching style. Even with these 3 options for free drawing I have seen teachers complain: I wish I could draw this by hand...

AV equipment- the clip on mics always need new batteries, lets just keep a supply at the podium.

AV Equipment: The equipment itself is probably fine. I am very dissappointed, however, in the limits set upon our class in using the equipment. Apparently we are not allowed to video record our lectures and an audiorecording is a priveledge that can be taken away as punishment for not attending class. I think this is absurd. I attend class AND make extensive use fo the recordings to learn the volumes of information expected.
Comments – Institutional Facilities and Services

Batteries are constantly running out everyday for the microphone.

Classrooms should be better equipped technologically.

Every room should have state of the art AV equipment. No excuses.

Familiarize professors with equipment. More often than not professors do not know how to operate available equipment and compromise classroom experience to work around their lack of knowledge i.e. not utilizing the white board because of inability to raise screen projector or not utilizing dock cam because of inability to switch displays etc.

Having video and audio recorded lectures available to students to review without a possibility of them being taken away.

improve the audio and video recordings of the lectures.

Increase the size of the screen by 25%.

Although the A/V equipment meets expectations, our school is far from efficiently utilizing the technology we have.

I think we should have video recordings of the lectures as well.

Make sure that an AV personnel is easily available at all times since most professors do not know how to dim lights, fix microphones, etc. There should be either an easy call system or one should remain there for most of the lecture.

Many times class will start late because we have to wait for an AV person to come in to download the lecture. It seems like time would be better spent teaching the professors how to work the AV equipment to make better use of time.

providing an inservice for the professors and others who need to utilize the i-clickers?

More IT staff on hand so we don’t have wait so long for things to be set up.

The AV equipment is too complicated for most speakers and we waste too much time trying to figure out instead of actually learning

Need to update A/V, have recorded lectures, and fix microphones for instructors

Since the professors are using a MAC to project their presentations and there seems to be issues with images transferring, it would make sense to have everyone (students and faculty) on the same type of machine.
Comments – Institutional Facilities and Services

Speakers in the Lecture halls that can actually play a movie without distortion. Microphones with batteries that lecturers can use (and a back-up mic). Give back the green laser. The red ones are too faint.

the AV equipment is a little difficult to handle at times. the LCD projector behaves funny.

The AV equipment is nice, but in smaller rooms that my classes have been scheduled for we have to rely on someone bringing a laptop so that out instructor can show us his presentation, however on an occasion or two the tech guy has been tardy or not shown up to provide the laptop, so that has proven interesting.

The custodians are wonderful, and the tech guys are too, but there always seem to be problems with the microphones especially the ones that are hands-free. The ones up in the PTR for OMM are always acting up. Also the classrooms are often quite cold. Can we get internet connection in Alumni Plaza yet? I think that would be nice.

The instructors I have currently seem to do well with the AV equipment. In previous classes they had difficulty. The school may have already provided additional orientation for this issue since I have not seen it ongoing.

The lapel microphone in Beyer Hall has really bad feedback, and frequently cuts out while someone is speaking.

The monitors in the AV equipment are sometimes very hard to see. Monitors, in some cases, are too old and need replacement. Also, MS Powerpoint version is old and is not compatible to newer fonts and designs making the presentation look 'out of place'. If new MS Powerpoints are installed in classsrooms (both big and small) it would make the presentation easier.

The PA rooms cannot record video. The sound system makes random loud noises.

The professors have to use a microphone in order to record the lecture and most of them do not like to do that. The AV guys that help out do a great job.

The screen we have outside Luibel can do better than carry the daily schedule and announcement. Each day, it can carry one medical condition, its brief description, anatomy/animations/treatment. It can carry new issues concerning healthcare. I can also carry adverts from local businesses and the money can benefit scholarships.

sometimes the AV equipment malfunctions and it's really hard to understand the professors that use that room due to the squeeling noises that it makes.

There are excessive amounts of flatscreen televisions on this campus. I feel like that money should be put towards more important causes.
Comments – Institutional Facilities and Services

The last three weeks the speaker's mic has gone out d/t battery failure multiple times. This causes a disruption of the class each time.

there should be also video lectures other than core classes

Train all of the teachers on how to use the AV system. Half of the faculty wastes about 10-15 minutes of lecture time trying to figure out how to work the system and waste valuable teaching time, leading to incomplete classroom sessions and inefficient learning.

Video lectures will be more in line with current technology.

Video recording lectures would really assist in reviewing material and increase our competitiveness with other schools.

the AV equipment is fine, but not everyone knows how to use it!

Maintenance (n=35)

the table/chairs are always disarray

fix some broken chairs in EAD

Fix the leak in the hallway. There's been a trashcan collecting water for quite a while.

Get new carpets.

Give all the maintenance, and IT people a pat on the back and a thank you.

I have noted on several occasions, after rains, in between the EAD and RES 1st floor, structural deficiencies leading to water leaking. Brought this up at president's meeting with SPH as well. Speaks poorly of UNTHSC when giving tours and trying to retain pride in this area.

The seats are painful to sit in because many of them lean or don't sit up to the table so it is difficult to sit up straight. The new carpet and the replacement of the ceiling tiles, however has gone a long way to improve the look of the hallways.

maintenance makes a lot of noise

Many of the chairs in Main lecture hall need to be replaced, especially in the RES building.

Maybe replacing carpets, adding more locker facilities,
Comments – Institutional Facilities and Services

More contemporary styling. More space and seating.

Class exams do not need to be scheduled in rooms, for example Beyer Hall, when construction projects are going on in the same area or overhead. It is very distracting!

more trash cans, new carpeting and chairs needed.

the bent and broken seats in luibel and Everett are painful on the back, especially during exams.

RES-114 chairs are falling apart and need repair

Please fix the leak in the ceiling in the hallway between luibel and everett. it has been an eyesore since we began school in july and the trashcan sitting below it makes it even worse.

RES-110 is a trash heap. Many of the chairs are broken. At multiple times throughout the year, there were missing seats after they had broken off. The lights on the ceiling that were meant to highlight the board were removed whenever they burnt out instead of replacing the bulb. Also the carpet that was recently installed on the 1st floor is atrocious. It makes my day just a little worse every time I see it.

Restrooms needs to be checked regularly, especially those in the library. They are either no water running or broken and stinking.

Some of the furniture in the library are ripped up and dirty

Some of the older building rooms have a musty smell.

Some of the restrooms need to be updated

Fix the leak in the ceiling outside of everett, it has been leaking for a year now.

The ceilings leak

The chairs in Everett hall have too much give. They swing back too far under passive conditions.

the chairs in the auditorium type classrooms are uncomfortable. (the ones attached to the tables that swing out)

The chairs suck. Every one of them in all the lectures halls required for 1st and 2nd years. One of the reasons I don't come to class often is to avoid back spasms later.

The maintenance and cleanliness is not what it could be
Comments – Institutional Facilities and Services

the trash can in the hallway because of the leak.

There are always leaks in the ceiling. Can we not fix those? The ceiling grids are always spotting right in front of Everett hall.

There are chairs in the older class rooms that need repair badly and ceiling tiles!

There are several areas in EAD that are consistently dingy-looking, particularly the hallway that houses pictures of TCOM alumni. This area is frequently plagued with leaks and musty odors.

There has been a trash can in the middle of the hall in front of Everett for months. It apparently catches water leaking from the sealing....for months...

who picked the new carpet? yuck

While changing the carpets, why didn't you take the carpets of the wall? Those are hideous

Who picked out the new carpet? It looks like a kid made an oil painting then smeared sections of it?

Cleanliness (n=22)

Bathrooms could be cleaner...theres a big difference in the cleanliness of bathrooms between GSBS and the ones by the 1st/2nd yr Med School Lecture halls.

clean desk tops daily in classrooms.

Cleanliness: there always seems to be paper on the floor in front of the trash and in the stalls

Furniture, especially couches, that are heavily trafficked need to be cleaned.

I do not think that the classrooms are very clean. I also wonder in the air filters/vents are ever cleaned.

Have the cleaning crew come in before the library opens or after the library closes. Update all of the bathrooms, some of them are disgusting; especially close to the PTR.

It seems that the classroom tables/ desks are not cleaned/ disinfected that often. This is a health concern for students and should be done on a daily basis.

I've noticed that some areas of the school are cleaned inconsistently (stairwells, common areas).
Comments – Institutional Facilities and Services

no paper towels in bathroom frequently

not all rooms are checked for trash.

More frequent pickups of recycling boxes in classrooms

it looks like the girls bathroom on my floor only gets cleaned once a week, it should be cleaned daily, the toilets always look gross.

all of the restrooms need to be cleaned more often and more thoroughly.

Tables need to be wiped down with disinfectant due to students eating everywhere and unfortunately, not cleaning up after themselves.

take out classroom trash more often; clean library tables and in front of Java Lab

the bathrooms get disgusting over in the main building.

cleanliness has also been much better this year in the library than last year.

The library tables do not seem to be wiped down on a regular basis. Also, the library restrooms become downright disgusting over the weekend.

The library tables need to be wiped down each night. Unfortunately, not every student in the library cleans up after themselves, but the ones who do should not have to sit down to someone else’s mess. Also, the men’s bathrooms wreak of urine. If the urinals could be cleaned more regularly, that would be great.

The maintenance and cleanliness is not what it could be

The tables, chairs and desktops in classrooms and in the library are always sticky, stained and uncleaned. This is not due to daily use, but for weeks on end, I'll see the same messes that have not been cleaned by the staff.

wipe down desks/tables daily.

Classroom Temperature (n=93)

7th floor EAD is always freezing!

Classroom temp-Everett is always frigid, please bring it up to a level for humans, not cadavers.

Temperature: There are sections of Luibel (in the back left (from speakers point of view)of the room) that are extremely cold in the summer when the AC is running. This is very distracting when taking an exam.
Better temperature control in Luibel. On cold days its too hot in the lecture hall and vice versa.

Beyer Hall is either too hot or too cold, have someone check to make sure its a comfortable temperature before classes begin.

CBH building is usually too cold, but EAD and RES are fine.

Certain rooms on campus vary too greatly throughout the day in temperature...it's as if we're just a half day behind all the time.

Class room temp. seems to be too cold at times. Sometimes the AC is running even when it is cold outside (when the heater ought to be)

Classroom is either freezing cold or too warm (Luibel). Sometimes the temperature fluctuates several times during the day and we are putting jacket on or taking them off.

Classroom temp could be improved by putting thermometers in the classroom so the temp could be more easily controlled.

Classroom temperature has to be decreased in CBH building, it is very cold when we are attending the classes in the evening. Not only in the evening it is same case in the afternoon classes as well. Please consider this and take the action.

Classroom temperatures need to be more closely monitored to maintain ambient temperature. For the most part, the interior is relatively clean, but the walkways, parking lots and other outside need to be kept cleaner, as these are what make a first impression on campus visitors.

Classrooms are always too chilly!

Classrooms are freezing cold.

Closer monitoring of the weather might help those in charge of the thermostat to make better decisions regarding the temperature. Also, please consider the difference in temperature control of larger halls like Luibel and Everett, and smaller rooms.

Cold in the winter...especially during exams. I do wear extra layers, but the breeze blowing on the left side of luibel (looking up at the classroom), drys my eyes during exams and is very annoying.

EAD 719 where the majority of classes for community health track MPH are held is freezing both in summer and winter,

everett is freezing in the front, hot in the back. its ridiculous.
I understand our main classrooms our huge and Texas weather is erratic, but I still think we need a better way to control temperature.

I understand that the classroom temperature problem is not one that can be easily fixed. Many students like the classrooms to be at different temperatures. Personally, I feel that Luibel is very cold the majority of the time.

I'm always freezing whether it's summer or winter. But that might just be me.

In room 506 we all wear our sweatshirts and jackets in class because it's always cold. When we visit room 406 for meetings, etc. it is a much better temperature. I'm not sure how we go about adjusting it.

In the summer, the class room temperature was very cold. Was not friendly environment.

we need to put on jackets alsmost all time

It is always cold everywhere - in the classrooms, in the library, etc. I actually feel the cold air blowing out of the vents when it is 30-40 degrees outside.

It is entirely too hot sometimes during the Winter.

It is very cold in CBH classrooms...if possible please try to maintain it to 75 F.

It is way too cold in the classrooms=waste of money

It seem that at 8am in the morning in Everett the temperature is pretty suitable compared to the conditions outside, but then around 9am every morning the airconditioning seems to come on regardless how cold it is outside.

its either too cold or too hot in luibel

It's either too hot or too cold in Luibel. I don't know how the temperature could be better controlled but it would definitely help me concentrate more in class if I wasn't freezing or hot.

Its freezing in the classrooms and the library in summers.

It's quite frigid in the summer in the classrooms. The classrooms are adequately heated in the winter though.

It's really cold in the building - even in the summer time. My last T4 and TSH test came back normal - so I'm not hypothyroid.
Comments – Institutional Facilities and Services

Keep a finer control over A/C and heat... It is usually either considerably too warm, to too cold in the classrooms. The library is almost always too hot.

Keep the temperature in Luiebel and the library steady. Luiebel changes temperatures daily from too hot to too cold. The library study rooms are always too hot.

lecture halls too cold

Also the classroom temperatures are not according to the strength of the class. Could be better.

Luibel can go from one extreme to the other: Hot to cold. Better temperature management systems?

Luibel classroom is usually very cold, specially if sitting in the middle and you can feel the AC blowing at you.

Make classrooms less cold.

Make it easier to adjust obvious temperature problems. The professors don't even know who to contact for adjustments.

Make it easier to change the temperature in the classrooms. Some days it is freezing and no one knows who to call to turn up the heat.

Managing the classroom temperatures after 5 . in evening classes there is no one to manage it

Also, the temperature in the classrooms has become so cold it is distracting.

Monitor and adjust, if necessary, the automatic temperature settings for lecture halls. If the sun is out, even it's still 'cold' the classrooms often become extremely cold.

Temperature needs to remain constant - not cold.

Most classrooms are comfortable, but the 4th floor library computer lab is almost always stiflingly hot.

Temperature in the classrooms is always either too cold or too hot and not even throughout the room.

Personal preference for a warmer classroom!

Please control the temperature better. We're always freezing in our classroom!
Comments – Institutional Facilities and Services

Please regulate classroom temperature in CBH 2nd floor classrooms. It is extremely cold in there.

Regulate temperatures more appropriately;

Rooms are again either too hot or too cold. I constantly go into the halls to find a better temperature.

Rooms in the CBH do not have adequate outlets or network connections.

Luibel is always very cold.

Sometimes the classroom temperature is really low and we need to use jackets to be able to sit in the class, the temperature can always be maintained at normal room temp except during summer.

sometime the temperature is way tooo cold..its gets very uncomfortable... and for a person like me it makes my head hurt

Certain seats get the cold air blowing directly on them. I don't suppose there is anything that can be done about that.

Temperature at times was uncomfortable and the room in which most of my classes are held (EAD719) did not have a working thermostat.

Temperature in classes held in CBH has always been on the cool/cold side. This is especially the case in large classrooms. During the summer months, this isn't as much of a concern, but during winter, it has been a problem. Having a transparent mechanism in place for students to report this issue to facilities maintenance would be very useful!

Temperature in the classrooms should be adjusted according to the season (too cold, most in CBH building).

Temperature is too warm in the winter. We dress for warm weather, but have to contend with 78F classrooms.

Temperature too cold in library, labs and classrooms

temperatures turn extreme while in the lecture rooms. most of the times it gets too cold.

The class rooms are always so cold. I am a female, and am used to being cold when most others are not, but I have heard multiple people say that the class rooms are cold. Since UNTHSC is having to make budget cuts, per Dr. Ransoms e-mail message, this would be one area where it would be greatly appreciated.
Comments – Institutional Facilities and Services

The classroom temperature gets pretty wacky sometimes and has been VERY hot on multiple occasions this winter.

The classroom temperature is too low

The classroom temperatures in the CBH building during night/evening, most of the times reach very low temperatures which makes us feel uncomfortable in evening classes.

The classrooms are always freezing, especially in the winter. I find it is much warmer in the hallways (even near doors to the outside) and restrooms.

The classrooms are always set to an uncomfortable temperature (usually cold) making focusing on material very difficult.

The classrooms are continually either too cold or too hot. There never seems to be a middle ground.

The classrooms in CBH are very, very cold making it hard to concentrate a lot of the time

The classrooms (Luibel and Everett) are almost always much too cold--we have to wear our coats in the winter, even though we're inside.

The classroom temp of Luibel over the winter was on average, too hot. It seemed like daily we would call to have the staff make it cooler.

the classroom temperature is usually freezing

The number of outlets can be increased

The outlets are only on the walls and in CBH we fight to have access to them.

It would be nice to be able to control the temperature in the room.

THE temperature in few of the conference rooms in CBH remain too low. I had to wear couple of sweaters even in summer.

The temperature in Luibel is too unpredictable, keep it at a reasonable level at all times and do not change it

The temperature in Luibel is very uneven- I don't really know if there's any way to fix/change it, but on one side of the room, it's always freezing.

The temperature needs to be regulated according to the temperature outside and not the same.
Comments – Institutional Facilities and Services

The temperature of class rooms are either too hot or too cold.

Classroom temperature is a HUGE concern of mine and my fellow students. The temperatures in the classroom is frequently ridiculously cold - to the point that I bring a coat to school even in the summer months. There is no reason that these classrooms should be so frigid or that I should be sitting in class shivering and on the verge of developing frostbite.

try to regulate the temperature in Luibel.

Usually in the winter time the classrooms are a little too warm and in the summer they are a little too cold.

Classroom temperature is at times very cold in Everett.

We should reduce our energy bill by not having the temperature in the buildings at extremes (both hot and cold extremes).

When it is hot outside, it is FREEZING in Luibel. And even worse, when it is even slightly chilly outside I feel like the heater is on full blast. There have definitely been warm days also when I felt like the heater was on. Maybe a little moderation? The heat is definitely the worst.

Wish we could change the temperatures in the library study rooms. Sometimes they are so cold, and I can't focus! There is a thermometer there, but I can't change it.

Outlets and Network Connections (n=103)

There needs to be more outlets for laptops to be plugged in near the seats. Some classrooms have them and some do not -there needs to be consistency.

there should be more outlets to hook up the labtops. There is always shortage for those.

access to electrical outlets for use of personal computers in classrooms

add more outlets to classrooms, not everyone can have a laptop plugged in

Adding more outlets in classrooms, especially in the CBD and EAD buildings. There are very few currently installed and they are all located on the side wall, so when extended wires are plugged in, it creates a falling hazard for anyone walking by.

Almost every student within my program has a computer and sometimes there just isn't enough outlets and network connections to support everyone's computer.
the connections in Beyer could really be updated...this has been brought up in the past
during GSBS Townhall Meetings with Dr. Ransom last year, but it doesn't seem to make
much of a difference since he said that upgrades would be done but yet nothing has
come from it.

The WiFi in Everett is constantly on the blitz.

Better signal strength of WiFi throughout school.

better wifi or hook ups for internet, more outlets for laptops

Better wireless.

There is a lack of outlets in most classrooms. Network seems pretty good.

CBH classrooms do not have enough outlets for computers easily assessable. They are
only along the wall. These classrooms hold major classes they should be equipped like
RES 114.

CBH needs to be better equipped with outlets to handle larger numbers of computers in
class.

CBH-220 does not have adequate outlet connections for laptop computers. Outlets
should be installed in the tables as are found in Luibel Hall.

class rooms in CBH do not have an adequate number of power outlets. Laptop
batteries last about 2 hours if they are fully charged and will not last for a three hour
class. As courses become more paperless, this could pose a problem.

Sometimes my laptop refuses to connect to the wireless, but I'm not sure if that's a Dell
problem or a Luibel problem.

Outlet and Network connections can be improved in Everett by ensuring that all the
outlets work. There is one outlet in the 2nd row from the back in the middle in Everett
where the outlet doesn't work. It is an inconvenience for whoever sits there.

Outlets and Network Connections: On the 3rd floor of the library, not every table has
outlet connections; not every 'cubby-hole' has outlet connections- this makes it difficult
when the library is full

continue to work on better wifi coverage throughout all locations on campus, make sure
all classrooms have enough outlets to meet the number or students in the class if
everyone needs an outlet

there are only two outlets in the room for laptops which indicates that it may not be the
best room to hold classes. I suggest classes be held in other locations.
Comments – Institutional Facilities and Services

Easier access to power outlets is needed in some rooms (e.g., CBH-220)

Ensure adequate electrical outlets in any room at which classes are held

EVERY ROOM of the University campus should be wired.

Few power outlets in new building CBH 200 classrooms. No live network ports avail in any of the student break areas. A cable network connection allows greater access to library materials without having the restriction of the library. VERY useful when all of the rooms are taken up by 1 person each. This is an easy to address ... please fix the break areas on all floors (at least 2 and 3)

Fix the outlets in Everett for electric plugs.

Give all the maintenance, and IT people a pat on the back and a thank you.

half of the ethernet outlets in everett don't work. So we end up streaming cables across the rows and what not. This becomes a major problem during online exams and when the wireless goes down.

I fell like it would be useful to add outlets to the common tables on the 1st floor of the library--currently there are only 2 plugs at a 4 person table

I think that there should be more outlets in the GSBS lecture halls for laptops as is the D.O. students

I think we need to add additional outlets outside e.g. library

meeting rooms, and the library. Being as the school presents materials in electronic format..it is important that we have access to plugs in all locations.

I would make sure to include high number of outlets in every classroom, small

Improve network connections - increase locations for internet wireless connections

Make sure that there is wireless network in all labs (especially CBH 4th floor)

In certain areas of University connectivity of internet is very poor and also temperature is always very low in classrooms of CBH building- I think this two things have to be improved.

For our Epidemiology course we were in CBH 220 which had very few outlets to plug in our computers. Less than half the students were able to have power for their computers to take notes the entire lecture.
Comments – Institutional Facilities and Services

In some of the conference rooms in EAD building there are not enough computer outlets.

internet is miserable, it's very slow the labs could be cleaner temperature in library as well as the classrooms is pretty low,

It is understandable that Luibel and Everett are temporary situations, but wireless connections have been hit and miss.

It would be awesome to have outlets outside on the library balconies and the alumni plaza.

in the library, a lot of the individual booths dont have plugs, and there's no chairs at lots of the stations.

The plugs in Everett are loose. It might be cool to have individual microphones, as well as ethernet and power, in the classrooms of the new buildings.

Larger class room for the PA students with the right number of outlets for our laptops.

Lecture rooms in CBH have very few outlets for student who bring laptops

many of the classes we take are in conference rooms in RES and these rooms only have a few outlets on the walls which limits the ability to plug in a laptop.

more electrical outlets in classrooms

More electrical outlets need to be installed in the CBH building to support laptop use during 3 hour classes.

More electrical plugs for SPH rooms would be helpful for our laptops.

More extension cords for CBH

more needed in CBH 220

more outlets

More outlets in CBH

More outlets in CBH 220 since laptops can run out of battery power before class ends.

More outlets in class rooms for laptops, especially in CBH 220

More Outlets in classrooms that are in the larger auditoriums. i.e EAD 719 and 219
Comments – Institutional Facilities and Services

more outlets in stadium seating classrooms

more outlets in the bigger classrooms!

More outlets needed in all rooms for computer to plug in.

More outlets, especially in CBH.

more outlets/surge protectors in some classrooms need to be added; I HATE sitting in the back or far from a professor just because I need to plug in my laptop, would really like outlet access available at the front and middle of classrooms

Most classrooms I have been in EAD do not have convienent electrical outlets, or available outlets at all.

Most everyone in class brings laptops, but there are very few outlets. Obviously, we don't all expect to have our own outlet, but there seems to be too few.

Most of our classes are in CBH 220 (Alcon Auditorium) and there are not enough outlets for our laptops. There has been an attempt to better the situation but it is sub par. We have power strips Duck-Taped to the floor... no kidding! There are only 2 or 3 strips so there are always people who do not have a place to plug in. How do we do it you ask? We rotate when someone's battery is almost dead or we just don't use our lap top. We have paid just as much per hour for tuition and deserve outlets also. Most times the faculty says that Beyer Hall is old and sub par but I prefer it because I know I will have an outlet for my computer.

Most of the classrooms in the CBH do not have outlets for laptops so numerous students with computers are unable to use their laptops.

Need more outlets in study areas, especially outside

Need more outlets in the CBH classrooms

network connections are spotty in some labs, the wireless doesn't work everywhere. Seems like we have a lot of dead zones! don't like that in order to have the floors cleaned we have to ask, they should be mopped at least once a week. Not enough pluggs in the CBH classrooms.

Only some of the classrooms have outlets for laptops. All of the class rooms where the DO students have lecture are outfitted with outlet however, you would be hard pressed to find many usable/functional outlets for the SPH students.

outlets more prevalent when not in classrooms
Comments – Institutional Facilities and Services

Outlets need to be installed in CBH classrooms. Temporary solution of power strips has helped.

Also, there are no outlets available in the cafe area, which is somewhat inconvenient. Similarly, not sure if it's possible, but outlets on the balcony of 2nd floor of library would be nice.

Please put outlets in the CBH 220 room! we have to fight w/each other to plug our laptops in. Its horrible!

Plugs in all the classrooms for laptops.

Power outlets are much better when they are installed on top of the table between the desks. In the PA rooms, they are on the floor where they get stepped on, tripped over, and broken.

need to have more outlets for students in the CBH building to be able to plugin their laptops (considering that this is a newer building, most students are surprised that it is not equipped in such a manner to address newer tech needs of students...)

Rooms in the CBH do not have adequate outlets or network connections.

Some classrooms do not have enough outlets for laptops.

Some of the new classrooms in BCH only have extension cords with tacky duct tape.

Some of the power outlets in Everett do not work. Also in the library, there could really stand to be more power outlets. Some of the power strips that have been placed do not work, or are not attached to an outlet. I know this problem is already been brought to the attention of the administration and is being addressed.

Sometimes not all the computers in EAD719 work well. Constant check and maintenance is good

The rooms need to be equiped with more outlets so students can use their own booknotes.

network connection used to be good initially but over recent times its speed has significantly slowed down.

The Alcon Auditorium in CBH needs to have outlets and network connections installed if it is going to keep being used as a classroom. Many of the lectures are online and I was unable to use my computer as there was nowhere to plug it in. The power strips were nice but still didn't do the job if you weren't sitting close enough to them and the cords were a hazard for tripping.
Comments – Institutional Facilities and Services

The Alcon Auditorium needs to have plugs for each seat.

The network access is spotty and cannot handle excessive loads.

During several of our online exams, most of the class had trouble accessing the test. Time became a factor because of the slow connections.

Many times the wireless internet stops working without any warning, and it can be down for hours.

The connection to the network needs some work and the whole password system has a lot of bugs that need to be worked out so that all passwords are accepted, no matter what the computer thinks, and passwords should be synchronized when they are changed, and i have never been able to do that and i have two different passwords.

CBH 220 has minimal outlets. The current solution of running extension cords and duct taping them to the floor is still not quite sufficient, as if you are not one of the first few to class, you will not be able to sit close enough to an outlet to plug in a computer. Permanent outlets at each seat are needed (as in Liubel).

The library could use more outlets.

The library room still do not have network connections for a wire and sometimes wireless is down. Everette does not have good wireless connection.

The classrooms we've been in other that 506 do not have enough outlets.

The number of outlets and connections are AWESOME!

The power outlets for internet are randomly placed. We need more outlets for people with notebooks.

The rooms need to be uniform in what technology is available, such as power outlets and ethernet plug-ins.

The Wireless network coverage should be increased slightly to accommodate those who are not inside the buildings.

There are a few outlets in Everett that don't work. whenever students sit around those few seats we have to share the ones that do work

The outlets and network connections in Everett hall do not always work even though we've had numerous work orders and fixings.

There are many places on campus that it is difficult to get a wireless signal-EAD, even Everitt
Comments – Institutional Facilities and Services

There are no cable plugs in the PA rooms to connect to internet, but it is rarely a problem to get online, that is why it meets expectations.

There are still many areas in the library that do not have electric outlets nearby.

There aren't very many outlets in CBH

Network has failed several times. Some of the outlets in Everett do not work.

We had outlet issues and fraying while we were in class which I think have been addressed. 406.

We need more outlets for out laptops in the classrooms.

install more outlets

wireless internet is horribly slow even in the library
Comments – Institutional Facilities and Services

Student Lounges

Lounges in EAD (n=19)

And computers are not working well in EAD student lounge.

Computers in student lounges in EAD never work and maybe upgrade television

It would be nice if the student lounge in EAD had a little more privacy.

Lounges in EAD should include table tennis paddles all the time.

Lounges on EAD especially which are located at the end of the hallway, either occupied for some purposes or not available for use. They are locked after university hours, We cannot access them on weekends. Lounges on EAD should be like lounges in CBH where they are open and accessible all the times. This is about lounge located on 6th floor EAD.

Need to improve the EAD and add more couches and maybe include more vending machines

One more small lounge in EAD with snack machines; the refrigerated snack machine would be great

Some of computers do not delete the data saved in even after restarting even though they have been deleted before the restart in the EAD student lounge. So, please have a look on it.

Student lounge in EAD only has one large table. Maybe have two tables that can sit 6 each, or something so that more than 1 group can study in there at one time.

Take the games to another room and putting eating areas in the student lounge. We keep getting hit with balls when we try to heat up our food, and people playing don’t give a crap & take up a lot of floor space beyond the length of the ping-pong tables

The coffee should be replaced in EAD lounge (atrium) and TT bats should be replaced too.

The computer lab in the student lounge needs more computers in it.

The pool table in EAD game room needs to be leveled...badly.

The students lounge has table tennis facility but the school neither provides rackets nor balls any more for the students to play. I think the school should provide the racket and ball as before.
Comments – Institutional Facilities and Services

The Students need a refrigerator in the students lounge in EAD 1st floor not just Vending machine

It would be nice to have a couple of couches and a tv in the lounge across from Luibel. There is one where the employees work, but that area is not comfortable to lounge in.

compared to lounges in cbh ead lounges seem out of date.

The lounges in EAD could use more couches.

Though EAD lounge is okay, most of the times foam cups are not available. If someone is assigned to keep and distribute the cups, it might be easy to get them.

Lounges in CBH (n=4)

a ping pong table in the 2nd floor cbh lounge would be gr8. also one pc in the cbh lounge would be handy.

At the CBH, there is no coffee station for the students. Also, we need more computers so that people can use them while they are at CBH without having to walk up to the library. Also, we want more printing units.

T.V. in CBH 2nd floor doesn’t always work (satellite keeps messing up). Try and fix it

I appreciated the upgrade to the student lounge in the CBH building. Thank you

Study Lounges in Library (n=53)

24 Hour Access! to at least SOME spot on campus! As a long distance commuter there were many light night study sessions followed by a sleepy drive home.

a microwave oven in the 4th floor of the library would be very much helpful to the students during hungry times of hectic study schedules. It would help us save time and energy.

Add more study rooms in library

Create more meeting places in library

Excellent progress has been made, especially in the library, to make it an environment conducive to studying. Kudos on clearing out the 4th floor and adding outlets to every seat.

i do not know what is considered the study lounge in the library????
Comments – Institutional Facilities and Services

I don't want lounges in the library. I want a place to study. They removed cubicles to put in book shelves that aren't even housing books. More places to study would be helpful, as well as better sound proofing for the meeting rooms and offices that are housed in the library. Or better yet, why are there offices, non-library offices especially, in the library?

i guess the study lounge at the library is the one in front of the TV?

I would like to see some outlets in the lounge just outside the library (where the Java lab is), so that when we are there before the library opens we have somewhere to plug in our computers.

I would suggest they create more study room for large groups. We were constantly in competition with the medical students for rooms.

If there would be some way to expand the library that would be nice. D.O. students tend to overtake the space.

In the library it would be nice to sound proof the rooms because its hard to study when you can hear the conversation of the room next to you.

In the library study lounges there should be facility to have free coffee for students for students to be able to study and get a good boost when required.

Increasing the study rooms available for students.

It would be nice to have a few more private study areas in the library.

It's incredibly difficult to study in the library during work hours. People are very noisy even in the designated quiet spots... also when people book study rooms their voices tend to carry. I suggest making the entire top floor of the library designated SILENCE zone :)

Lounges need better lighting. Even after I turn on the lights, it is not very bright to work in the lounge. Not enough rooms available for students to use to study in groups in the library considering that the number of students have been consistently increasing and the capacity in the library appears to not meet this need. There are no study rooms for SPH students on the 7th floor so we are forced to study in the library or in the CBH lounge.

Maybe less vacuuming in the library - they're always seeming to vacuum during study hours (i.e. around 5-7pm)

More 4 person study rooms in the library.

More couches in the library. Expansion of lounge areas in library.
Comments – Institutional Facilities and Services

More of the private rooms would be nice. Everyone probably has a different opinion on this matter.

more quiet areas. more modern

More study lounges with boards in the library

more study rooms

more study rooms in library

More study rooms should be allocated for those who want to study with others but also utilize that time studying alone. From my experience, the study rooms have been used more for social gatherings rather than studying.

Need a better system for reserving study rooms in the library. Too many large rooms are taken up by single individuals (that's what cubicles are for!)

Need more group study rooms.

Not enough seating in the library, these areas could be improved. Also, could we get something besides PATIO FURNITURE for the foyer outside the library???

Not enough seating in the study lounge in the library

Quiet areas are not always quiet, but I'm not sure how to improve this problem. Also, the computer stations in the library are often very crowded with community patrons. I understand their right to access to the information and the resources, but often they are at the computer stations all day and all evening, and makes logging on to access the printers more difficult.

Some areas in the library should be set aside for conversation so that other areas can be considered quiet areas.

Tables in Library are always dirty. (food, hairs, etc) I have never sat down without having to clean the table first. I suggest more frequent maintenance of this area.

The library is too small for the amount of students that need to study. This needs to be addressed. Additionally, some of the facilities are old and unkept. There is mold in the ceiling on the 3rd floor of the library that has been exposed for some time with only a piece of plastic over the shelf under the hole.

The library needs more multi-person, private study rooms.
Comments – Institutional Facilities and Services

The library needs more study rooms - but you already know that. However, I do love the couches in the library. They are so nice and comfy.

The library needs more study rooms/area.

The library really needs an eating area, with a coffee maker and microwave, kind of like a small kitchen like they have in CBH.

The lounges are good, but I wish there were more. More comfortable study rooms in the library.

The school is growing but there are few individual or group study rooms.

The study lounge in the main level of the library is fantastic, the beautiful tv and couches. However, it is the only lounge that is comfortable.

The study rooms in the lib are dirty, nasty, old and need some upgrade!

The study rooms in the library are great; I wish there were better student adherence to the rules about reserving and using them.

There are no sound proof study room and not enough single rooms in the library.

There are not enough large group study rooms in the library to accommodate students, especially during finals.

There are not enough study lounges in the library. I would suggest moving out the offices that are not actually library related and the computer repair shop, and turn the administrative offices into study lounges. There are too many students fighting for not enough study room.

There is just not enough 'lounge’ space, which I know will hopefully be alleviated with the new buildings. But in particular, in the library, there just is not enough space anywhere.

There needs to be more study lounge space in the library.

This school need's to have larger study areas. Also the faculty does a poor job trying to maintain the quiet level of the library. In fact, some of them are loud themselves.

Too many of the study rooms in the Library are too small or they are always taken.

We desperately need more study rooms in the library and we need need power outlets in some of the open areas like outside on the balconies and also in the atrium area outside the library.
Comments – Institutional Facilities and Services

We need more areas to study, we are limited by the number of rooms available and/or the amount of outlets. Lounges are small and the computers are always down.

What student lounges in the library?

7th Floor SPH Lounge (n=12)

7th floor lounge should be the model for other lounges.

Again I must say the 7th floor lounge is too cold. Additionally it would be nice to have a tv, and maybe a sofa or love seat. Similar to the CBH lounges.

Even though the 7th floor lounge and classrooms are great facilities, medical students are not allowed to use them per the campus police.

Every other lounge has a TV, but the SPH lounge does not. Plus, there are more plastic chairs in the SPH lounge as compared to the other student lounges. The artwork is nice.

the 7th floor has the nicest kitchen setup but could use some better chairs to sit in

I wasn’t aware that there was a 7th floor SPH lounge???? It may be helpful to inform students of other lounge options.

Include Icemaker in 7th floor SPH lounge

It would be nice to have cups and/or plate for students to use in the 7th floor SPH Lounge.

just a bunch of tables, nothing really to do while lounging. I recommend a TV.

Please make the SPH lounge something we as students can be proud to go to.

Possibly adding a tv to the SPH lounge just to be able to be a place where people can take a break.

The 7th floor SPH lounge has a feeling of sterility to it. There should be more decorations on the wall, to make it feel more cozy,

Lougnes - Other (n=44)

As a PA, we do not have access to a lounge. Most of the seating areas scattered throughout campus are taken and noisy when there are breaks.
Comments – Institutional Facilities and Services

Bring about more facilities that would accommodate an actual break between the large class gaps being that the museums do not entertain as frequently.

AS with the EAD student lounge, there needs to be computer terminals in the lounge.

Better cleanliness and better if any juice available over it as it was before 1.5 years.

Clean tables!

Coffee machines in the lounge

Coffee. I make it to campus very early every morning and it would be incredible if student would be able to grab a cup of coffee during the day. I understand that budget problems make is difficult to provide free coffee, but if it were possible it would truly make me happy.

Cups near the ice machines/coffee makers

give the PA's a lounge on one of their 2 floors, the med students have everything else

have 24 hour access to all facilities

Have a heavy duty coffee machine put in that costs a minimal amount per cup of coffee. Possibly have fresh fruit available at certain times during the school day and for students studying late.

I suggest all lounges look like the one in CBH with leather couches and TV's, microwave, fringe etc to feel more homey.

I think some better furniture and perhaps a more updated look would make our school a bit nicer.

I think we need some more lounges, or larger lounges to accommodate more students. Also, I feel we should have a snack bar or smoothie stand to provide some revenue for the school as well as provide some food for the students.

I wish we had a nice lounge for graduate students who work in the RES building. It's not very convenient to walk over to CBH and mostly Medical Students lounge in the EAD lounges. I end up eating in the hall where we have no windows and its not conducive to reading papers, studying, etc.

It would be nice if there was room for a student lounge in RES.

I've never been to the lounge in the library. The lounge in CBH is really nice, but the other two always seem to be more geared to the DO students. It would be great to have a lounge where PAs can feel free and comfortable in too.
Comments – Institutional Facilities and Services

live bands
Long couches so people can lay down.
Maybe provide some plasticware.

More lounges are needed and more comfortable areas for studying and eating are needed.

More lounges are required considering the number of students who visit the lounge every day.

More spaces and relaxation sofas

Need more places to study when the library is closed.

New furniture in lounges.

On weekends where all schools have upcoming exams, it is impossible to find anywhere quiet to study.

PAs have no lounge... but that's ok, we have our own fridges. There are many times that I have needed a study lounge and there have been none available... the group study rooms are the most effective and are VERY hard to find open.

Please replace the couches to the Kiva Lounge.

Space it out.

The lounges do not have comfortable chairs/sofa. I didn't feel comfortable hanging out there.

The old couches and chairs around everett and luibel suck so bad. They are ghetto and really really uncomfortable. I know you can afford new ones... these old ones are from the day the school opened and have gotten their money's worth.

The student lounge should be bigger

Where are the coffee makers?? Way better than the 4 star coffee...at least it was fresh.

Wish there was a lounge where the PA students would feel welcome to relax in.

what happened to the lounge outside Everett?
**Comments – Institutional Facilities and Services**

We need new furniture outside of Everett and Luibell. This is stuff prospective students will see. We also need new appliances in Everett. The student lounge are adequate but not great.

The word lounge implies that these areas are comfortable and restful, however, they are not. I suggest that more couches be brought into these facilities to make them better. In addition, these couches must be properly maintained, as stains on a couch are off-putting and uninviting. Nobody wants to sit in a dirty chair.

There is no place to sit outside Everett.

there must be free coffee and some snacks should be available any time free of cost.

There needs to be lounges set aside in RES

very nice! a massage therapist would be lovely!! (ha, ha)

Walk-in restrooms so I don't have to touch door knobs.

We need areas that have more of a student union area with more access to computers, sofas, TV's, maybe even a coffee machine, etc...

We need better lounges with better facilities.
Comments – Institutional Facilities and Services

Computing and Technology

Printing/Copiers (n=100)

1 of the printers in the library is usually not working.

7 cents a copy? Are you kidding me? The university should explore the option of requiring SPH students to pay a fee for printing. Lord knows no one should pay 7 cents a copy.

Access to more printers, many times one printer may be down and the entire library is left with one printer so people end up having to wait in line

Would be nice if there were more printing stations, though.

All of the printers don't get updated every time our passwords are required to be changed. One of the printers actually only accepts my old password from my first semester. If I forget my ID one day, it is a huge burden to remember a password from two years ago.

All of these things need to be vastly improved.....Pharos is a horrible system because it does not work half the time and changes the format of the printing material.

Color copies are TOO expensive!!! 30 cents per page is ridiculous.

Copiers on first floor of library tend to break down often--but they do have good quality

Copies are kind of expensive.

For my computer to function, I had to completely uninstall Pharos. This is very difficult when I need to print anything.

Getting help for Pharos when you are part time student is hard unless you make a special trip. No online Pharos support.

Give each student a printing allowance per semester

goes out quite frequently, lots of spam, sometimes will eat printing work and not print (very rare) but often won't scan id badge

The printers do not support the newer operating systems such as Vista 64...so you have to print from the computers at the library or at the lounges which are always down. Printers are always out of paper or jammed or out of service.

Have students pay a fee during registration that allows them to print off a certain amount of pages.
I am not able to print wirelessly from my computer due to software issues.... the printers had to be removed and I am unable to access the printers.

I am sure the pharos printers are expensive, but it would be nice to have a couple more around in EAD and the library. The problem now is that you have to pick whether to send it to the color/black and white printers or the only black and white printers. At the color printers, there are only 2 printers, and if one of those is down, it can take a long time to get something printed. While some other printers might not be in use, you would have to go back to your desk and re-send it to another set of printers. I think if we could make the one cash printer on the main floor of the library into a cash or pharos account printer, that would help tremendously. Or make it strictly a pharos printer, and the public, etc. could go to the circulation desk to pay for their print jobs.

I believe that SPH should get some free copies, similar to the DO students

I can't use my Pharos account to print from the second floor CBH copier.

Your printers are almost always failing and there's still no Apple Mac support as far as I know.

that i have had to remove pharos from my computer so I am no longer able to print from my own computer. unexceptable. I have never had any previous problems with any of my dells or apples.

I pay for a Pharos account, but it never works. I can't rely on the printers if I need to print something right before class, because I never know when the Pharos accounts will work, and no one is able to help or answer questions at the Library.

I think the pricing for colored copies is a bit expensive.

I think we need to add more printers around the entire school and maybe include some additional ones in the library on the 1st floor

I would like to get the money from my printer account back that is not used each year. I would still like more of a benefit to printing 2-sided vs. 1-sided. If people want to print 1-sided, they should pay more per sheet since they are using twice as much paper.

if possible reduce the charges for printing.

it would be so convenient if there were printers on the EAD floors 4 or 5 for PA students.

Installing at least one and preferably two Color Printers AND Blak/White Only Printers on each floor of the library would be a start.
IS there any way to reduce the printing copies, because we have to take the prinouts for all the class lectures, we are spending almost 100 to 150 dollars in printing per semester.

It seems that the printers are in need of repair quite often, leaving only a few working ones. I believe that we need more printers on the first floor because often there are lines waiting to use them especially when one is down.

It will be good if we can pay printing and copiers cost directly to my account or my ID badge.

It would be nice to have a printer in the EAD other than the bottom floor, its a pain to have to run all the way down there and then half the time it doesn't work anyways and you have to go to the library.

It's ridiculous that you have to go to the 2nd floor to print Black and White copies if you have a Mac.

library needs more copiers/printers. also, a lot of the time the copiers/printers are out of order.

make the printouts slightly cheaper.

Also, I have lost printing jobs twice because the job started and then the printer ran out of ink on about the 3rd page without a warning and the job did not stop and could not be halted. So basically I lost time and money which is frustrating. We should get a warning and a way to stop a job and save it for correction for the problem.

Many colleges and universities have free printing. Although I know this may not be feasible, I feel that the printing prices are pretty steep.

Many times one printer/copier does not work in the library. Also perhaps it can be set up so that if a student prints to any of the printers, it can be picked up on any floor in the library.

Copiers outside of Everett or future 2nd year classrooms

More money should be alloted from our fees to allow for printing purposes.

more printers in the lounges and library!!

Need 1 or 2 more printers in the library. More students, more copies being made but only 3 printers in library.

Need more copies/printers at CBH.
Comments – Institutional Facilities and Services

Now that we can print/copy from our ID badges, the system is great!

Offering places where students can print off material without cost to them.

Often the RFID does not work on the printers, and I end up inputting my username and password anyway. This especially occurs in the EAD student lounge.

Printers and copiers are often malfunctioning and the library staff is not well trained in dealing with the problems. The printers and copiers often deduct money without producing the print job and there is no protocol for student refund recourse.

Printers are always broken!!!

Printers break down a lot and no one is there to fix them. Need more printers

Printers for students are needed in CBH. Students should be refund if a mistake is due to the printer etc...

printers in departments are some times out of service and is not available a lot

Printers in EAD student lounge disfuntion too often

Printers in the library keep breaking down. Need more printers and copiers accessible in other building besides library. Should be in a buildings that have classrooms for convenience for students to use.

Printers seem to be down all the time in the Library, with just Out of Order signs on them.

Printers/Copiers: in CBH there is only one printer on the 2nd floor in the whole building that I know of. Even if there are other throughout the rest of the building, we need at least one more computer and printer on the second floor. It is where we have most of our classes and professor often make last minute changes to the lectures that student wish to print out; or worse, they post the lectures last minute.

Printing and copying process is too complicated.

Printing costs too much.

Printing could be made free to the students for some 300 papers or so.

Printing is expensive.

Printing is fine when the printers are working and calibrated correctly

Printing is rather expensive.
Comments – Institutional Facilities and Services

printing is too expensive

Printing is very expensive.

Printing should be free for at least for students.

printing should be free till some limit for student atleast 10/ day

Printing should be included in tuition up to a certain amount. This whole Pharos account is really irritating and inconvenient.

Printing/Copiers: it seems like we need a couple of more xerox machines, since they get held up easily

Printing: Why is it 7 cents for printing on one side of the page, and 14 cents for printing on both sides? I'm paying for the paper twice, there is no benefit to saving paper.

Provide a printer machine in EAD building.

put more printers in library as everytime one of few printers is out of service.

Sometimes the printers get a little crowded during the day.

Technology is great, but when it breaks down and theres 1 printer for the entire library to share, is not great.

The new copiers/printers put into place at the end of last year are incredibly slow and constantly need maintenance.

The copiers, particularly the color copier/printers on the main floor of the library, do not seem to be able to handle the demands of the student body. They consistently have issues.

The difficulties with our assigned laptops has made it such that I can no longer keep Pharos on my computer for it to run properly. This has made printing a bit more cumbersome to the point that I just save my printing for at home.

Frequently money was stolen from my pharos account.

The new copiers are no good. They are slow and difficult to use when copying books and multiple pages. I would suggest to purchase new ones, but it might not be worth the investment.
Comments – Institutional Facilities and Services

The new printers and copiers are extremely slow to use as well as how slow to print. I also think you should get a discount for printing front and back, and not be charged the same as if you printed two pages front only.

The printer within the library is frequently has problems or is frequently unavailable for use.

The printers and copiers all over campus are too few and seem to be consistently malfunctioning. I also have an issue with the cost of double-sided printing. If you print something double-sided, it costs you $0.14 rather than the $0.07 for a single page. But you are not using another sheet of paper, just using extra toner. So essentially, we are all paying for the paper TWICE when we print double sided. I do not think that is fair.

the printers are a constant struggle. I am always getting charged for a document I didn't know had color or is printed in color.

The printers are entirely too confusing to use and don't work half the time. Also I am certainly not happy about the fact that if you don't use up your printing money, the school gets to keep the rest and you have to pay it more than once.

The printers/copiers are really slow and not always functional. Toner issues, etc are really time consuming.

The printers/copiers in the library are mostly broken. I think there needs to be a separate copy machine for those students who need to make copies from books. It seems the overwork or the copier causes the system to shut down

The printing machines dont always receive the documents you send to them. I dont know how to fix that. The driver issues need to be done by the computer experts. When they update drivers and tell us to update them ourselves, there is too much room for error. They should have a designated time that an entire team comes to update everyone's drivers.

The printing/copying is difficult because several printers/copiers outside of the library do not work with your username and password- frustrating to only be able to print in the library- suggestion is to have student IDs that hold money for printing and you just have to scan your ID and it works like a debit card (University of Utah uses that system and it works great!)

There are not enough printers in the library. Also, they are frequently out of service. In CBH, there is only one accessible printer for students--insufficient.

There are not enough printers in the main printing areas. I know there are a lot on campus, but some are in odd places.
Comments – Institutional Facilities and Services

There are not enough printers, especially in CBH. If a professor leaves notes online for us to print, all 75-100 of us are vying for the one printer available.

There are not enough printers...

Also the price for print copies should be reduced.

There is a problem with the printers very often. These printers are fancy but I wonder how useful they are. I like the technology but then it gets really frustrating when u have the printer giving you error messages esp when u are in rush for a class and waiting to print.

We should be able to pay for printing online instead of having to walk to the desk to pay for printing which i think is very archaic.If we are able to print remotely from our personal computers, we should be able to load our printing cards/ID cards without walking to the front desk.Another idea could be including printing to our tuition which automatically loads some prints in our acct by beginning of the semester since students are responsible for printing notes for almost all courses in this school.

Copying and printing are expensive (7 cents a side of a page!) - I refuse to print things on campus as a result.

Well, printers are good and ample in amount, but if you can lower the prizes of photocopy, that would be great help.

printing with our laptops is always a challenge because Vista and Pharos don't seem to always get along.

Copiers are broken at inconvenient times.

The copiers dont always work when there is a test nearing.

Also, the printers in the library are always down. Since we began this new system a lot of problems have occured. What was wrong with the old way? Don't get me wrong, this new technology is awesome, but can you make sure that we don't have to stand in a long line just to print or copy?

Groupwise/Email (n=51)

Add support for thunderbird, so that I can figure out how to send/receive UNTHSC e-mail using my preferred e-mail program.

More often than it should, the Groupwise server goes down

better archiving system. easier way to delete old emails
change email interface

Change to a messaging system (e.g. Microsoft Exchange) that can sync well with PDA's.

Don't email everything out twice

Every time I get a email from the university, I get 2 copies...that gets really annoying

Freedom of speech must be allowed even on the groupwise e-mail server. So many times, someone sends a political e-mail, and nothing is said until someone sends a rebuttal, then all of a sudden, it's a mortal sin to use the school e-mail server for political reasons, which is a crock.

Groupwise email frequently stops working.

groupwise email is miserable- the website doesn't work too often. there is no option for changing the color and font of the letters. we need to attach documents one by one. Groupwise frequently doesn't work. Not convenient for calendar/ appts.

groupwise is a very bad system. adopt learnlink instead! wireless pops in and out.

Groupwise is always down! The system is rudementary at best, needs to be more user friendly and faster.

Groupwise is down often.

Groupwise is not always able to handle the large files teachers use for PPT presentations. It is often difficult to distribute them to the class when they are not posted online, which is most of the time.

Groupwise is slow.

Groupwise is useless. I eagerly await the Microsoft exchange implementation.

Had problems in opening groupwise e-mail right when it is most needed!

I am very pleased with Groupwise email. The only thing that led me to chose meets expectations rather than exceeds expectations is the fact that I think it is easy for students to abuse the email system with spam and unnecessary emails. This is an aggravating nuisance, and it should be fixed.

I can't get to my groupwise/email during a certain hours

I dislike having to change my Novell Groupwise password every 3 months.
I hate the fact that we have to come up with a new password for email every 120 days. It's so hard to come up with a new password every single time since we can't reuse old ones. At least have a random password generator or something so that we don't have to come up with something unique all the time.

I have had several times when the email would not connect....

I like the organization of Outlook better than groupwise but I had trouble linking them.

I use outlook at work and find it a more user friendly program.

I would like for us to switch to using an OUTLOOK-based E-mail provider.

I would like to encourage the transfer to gmail or one of the other email services which offer more options.

Can't wait for a MS Exchange program!! I can sync email and schedules and calendars.

Is it possible to increase the sizes of the groupwise mail box?

Is there anyway the students can get an updated version of Groupwise? I know some faculty has better calendar capabilities (more user-friendly and color coding for organization, etc)

More memory space for email.

Wireless quality is often slow.

Groupwise: I receive duplicate emails ALL OF THE TIME! If there is a way to fix this we need to send a duplicate email out saying HOW TO STOP DUPLICATE EMAILS. I'm sorry if I'm just being ignorant.

The password system is tedious as the euid and groupwise lag behind in the use of renewed password

Some times, I am not able to connect to my groupwise account from home.

Groupwise is alright but I don't like the automatic logout. That gets annoying when using a browser with multiple tabs. I do like the ability to enter names for UNT students and faculty instead of having to enter full addresses.

Switch to a Microsoft e-mail system.

The email is slow or non-functional way more than it should be.
Comments – Institutional Facilities and Services

the email should have many more options available on it

the email will go out every now and then, always seeming at the most inopportune times, and the email capacity becomes full after a few months only.

The groupwise common ID and password have problems sometimes. I had a problem with the printers identifying my ID, It's fixed now after changing my password, thanx to the helpful librarian. Now the Blackboard vista where i access course materials doesn't accept the new passowrd. It still opens with the old password!

The Email system is outdated and frankly not very good. It seems to go down about one per week which is absolutely unacceptable. Also, almost every time you try to log in, it says Your log in is not current. No joke - that's why I'm trying to log in in the first place. It is extremely annoying to have to type my log in information twice every time I want to check my email.

Groupwise/Email is one of the most unproductive things: we get inundated with spam from colleagues, clubs, organizations, etc. that fill our email box and then we end up having to go and delete the dozens to hundreds of daily emails because the box fills up to nearly 100% of its capacity so quickly.

We need more. Groupwise does not have enough storage space. I hate having to delete because I know that I will always end up needing what I have deleted within a week of deletion. Groupwise goes down too much! Many times our correspondence is very time dependent...

There are several times when I can't get on groupwise.

There are so many days when we were not able to use groupwise email so that should be corrected.

Using a system that could sync with the outlook and i-phone.

Web-based Groupwise is fickle at times, will be hours (usually early morning) where the login attempt is met with a message that the server is unavailable - when this occurs the secondary server provides the same message.

Our email is continually filled with messages that don't seem school related. Some students have even resorted to only checking email once a week.

groupwise has failed on a few occasions.

Plus, groupwise is a old, not too user friendly email program, the use of microsoft outlook and outlook server could VASTLY improve the email functionality
Comments – Institutional Facilities and Services

You have to go through too many channels to get to groupwise. Why does it have to be so difficult? No suggestions, just my opinion.

Wireless Quality (n=56)

the wireless is not fast at all.

better wireless throughout the laboratories would be great, my lab is on the fourth floor RES and no one in my lab can keep wireless active very long

could we make sure to get a stronger wireless signal at the gym—for the student workers.

Create access to the wireless network within RES. A building right next to the library should have better wireless access.

generally very good....wish I didn't have to update my wireless printer drivers all the time.

Wireless quality is also pretty slow. It does not work even in the labs.

Wireless stops suddenly....sometimes ruins online practice exams!

I am not sure what it is but I easily get kicked off the internet in Everett and in some parts of the library. I think it may just be the buildings and don't quite know if this problem can be fixed.

I frequently have problems connecting to the internet. The wireless network needs to be better supported

I still find it difficult to get consistent wireless connections. Especially in interior rooms in many of the buildings.

At some places its hard to catch wireless so we need to increase its capacity/power.

I'm not sure what can be done, but the wireless is poor in certain rooms and tends to go out quite frequently.

improve the wireless quality in CBH.

In labs sometimes the network goes down. I hope something is done about it.

In RES I usually do not get a wireless signal in my lab.

In some corners of the library, I still do not get wireless internet.
Comments – Institutional Facilities and Services

Installing wireless printing capabilities for Mac laptops on and off campus.

Internet problems occur too frequently.

Make wireless signal stronger in Everette.

More hotspots outside.

More wireless terminals in the CBH. Wireless is poor in the offices and labs.

need better coverage over the entire library for wireless internet

Network Connection wise, have all of the MAC addresses for the laptops cached in a directory so we don't need to login every time.

No/limited wireless in RES. It would be helpful if you look into it.

Novell is outdated. Also, changing my password 3 times a year is a waste of time and energy. When you have to change it that many times; I end up just writing it down.

Wireless: Quality is excellent! I have never had problems with it.

wireless does not catch at all places even in the library

wireless internet is incredibly slow everywhere

slow wireless

Some of the labs in RES (3rd floor) do not get good wireless reception. There are many days when we cannot get it at all.

Thank you for improving the Everett coverage. There are much less dropped connections since school started.

WiFi in Everett could use help.

The wireless isn't always available, and sometimes lags.

The library wireless connection has always had dead spots on the upper floors in the far corners. The entire campus should be able to have a strong enough signal to get on the school network no matter whether you're outside or inside and especially at all corners of the library.

The wireless network drives me crazy, oftentimes, the night before an exam it will decide not to work.
Comments – Institutional Facilities and Services

The speed of the wireless is exceptional.

The wireless is spotty and disconnects between buildings.

The wireless network on campus has very poor signal quality. I've tried multiple laptops on multiple dates and the result is the same: varying signal quality and interrupted connection throughout different buildings, on different floors and especially in the PCC.

The wireless randomly stops working, especially in Everett.

There are many places on campus that it is difficult to get a wireless signal-EAD, even Everitt.

There are parts of the library where wireless signal is low and unreliable

As I have said before connectivity is very poor in many areas of library.

There are still areas in the library that have low wireless signal. One place I notice frequently is the large windowed room on the third floor looking out toward the parking garages.

Too many blindspots for wireless

used to be excellent till a few months ago...recent times not enjoying the internet speed..it is giving a lot of trouble.

Wireless at UNTHSC is vulnerable to viruses.

Wireless connection is still slow from EAD.

Wireless connections are spotty

Wireless does not work sometimes

Wireless in Everett is terrible

Wireless is off and on.

wireless is spotty in our lab, seems like some areas are dead zones

Wireless is very sketchy in some places and you are forced to use Ethernet cable.

wireless is weak in many places on campus.
Wireless quality is horrible in certain locations and virtually non-existent outside . . . maybe if we could have wireless that works out in alumni plaza and a few other choice outdoor spots!

you should be able to connect to the internet from anywhere on campus there are some locations this does not happen, the PA office is one of those places
Comments – Institutional Facilities and Services

Lewis Library

Open sufficient hours (n=38)

24 hour library access would be fantastic, but understandable that it's probably not likely.

24 hour library would be nice.

24-hr library

As a professional program school consisting of a medical school, graduate school, and numerous master's programs, the library should maybe be opened 24 hrs as opposed to closing at 2 am on weekdays and 12 am on weekends.

Consider Library hours to be open 24 hours during certain periods (Ex: around midterms and final exams).

Every student's study habit are different. For me, I like to study early in the morning and I like to do that in the library. I would prefer that the library open earlier on week days.

Extend hours, add more power outlets in small study rooms

Hours: open earlier (close earlier also if necessary to keep constant # of hours)

Hours: the only hours I would like to see extended are those on Friday and Saturday night. Most of the school does have Friday tests, but in our program, we often have Monday tests. This means that Friday and Saturday are just as busy for us as any other night. 2am would be sufficient.

I come from an undergraduate program where the library was open 24 hours. I believe the library should be open earlier in the morning.

The hours are perfect in my opinion. Expanding to 2:00 am was very helpful to me.

I strongly suggest to increase the library hours please. Especially at night time. I know many students who cant study at home and want library hours to be increased.I think library should be open all night or at least there should be study rooms that we can access to and study whole night there during our exams.

I think that a Top 10 HSC should have a library open 24hrs/7days. I appreciate the new, extended hours, but as the school progresses, so should the library hours.

I wish that the library opened earlier as opposed to being open till 2 am.

I wish the library was open earlier than 7:00am, although this is not a huge issue
I would like earlier weekend hours.

Ideally, the library should be open 24 hours and have card access. The library increased their night hours last year to accommodate evening studiers; however, their morning hours should be improved, at least on the weekends.

It would be nice if the library hours on Saturday and Sunday were longer, i.e. open at 9AM.

It would be nice if there were sections of the library that are open to students with ID cards 24 hours a day.

It would be really helpful if the library could open earlier on the weekends (i.e. around 8 AM).

Library hours should begin earlier.

Library needs to be open 24 hrs a day

Library should be 24 hr/day, 6 days a week.

library should be 24 hrs.

Make the library 24 hours.

more hours

Now that the library closes at 2 AM it's great.

Open too long...use the money to keep it up so late for other things. Do we really need to torture mother earth by squandering energy to keep it open at 2 AM?

opening at 6 a.m. would be nice for us early birds

Possibly have the library open earlier to coincide with earlier start time of classes.

The hours could be extended

The library hours added to the library last year have not been justified by the cost to accommodate the number of students that use it for those extended hours.

the library must be open for more hours
The library needs to be open 24hrs. As a long distance commuter this would have been a HUGE help for all of the nights when I left only to have to drive home sleepy, then turn around in a couple hours to drive back. Now on rotations, it would be helpful to have someplace in the vicinity of the rotation when I am on call.

The library should be open 24 hours or at least have a portion open 24 hours with access to seating and printing.

The library should be open 24 hours.

I also would like it if the library opened earlier on weekends.

Building conducive to quiet study (n=79)

I sometimes have to wear ear phones in the computer lab on the 2nd floor. I am not a noisy person and I don't expect others to be loud either.

Again, cleaning of entire floors could be posted ahead of time so that I wouldn't have to leave the third floor immediately after being notified that they were going to scrub the carpet.

As you already know there is not near enough independent study space

As you may have expected, it is hard to have a balance between social interaction and quiet study availability in the library. I personally do not use the library for social time, rather to sit and study quietly which is more and more difficult to do these days with all the construction, renovations, and various conversations lurking about in every quiet corner.

Depending on where you are studying in the library, people might be talking nearby. I don't expect the school to monitor whether people are talking.

during reading in the rooms many times its very disturbing that other students make noise may be they are discussing their study but its make noise for the other students who need silent. Because voice easily penetrate from one room to other...we need to do something for this disturbance...

Efforts should be made to “remind” students what QUIET AREAS are for.

Eventually the library is going to need more small rooms with a whiteboard. When we study in a group, it is essential to be able to talk without disturbing others, as we would in the open areas with tables, and being able to write on a whiteboard is of immense help.

Fixing the 4th floor patio doors so that they do not interrupt studying.
Comments – Institutional Facilities and Services

For the number of people that come through the library it is amazing how quiet it can actually be. It would be nice to have more small rooms though for study groups. In the afternoons it is difficult to find a room.

Group study rooms are a commodity during exam periods and the process for reserving them is unreliable. I have tried on numerous occasions to reserve a room and never hear back from anyone, thus our study group has starting trying to find places to study off campus.

I believe more study rooms are needed for groups of 4-6 people. the rooms currently designed for 4 people really only can handle 2-3 and no more, especially with everyone needing computers to be out as well as books and notes.

As mentioned in an earlier question, the study rooms need to be accessible to those who want to study and not socialize.

I enjoy studying in groups where you can talk, so I often try to find private rooms in the library. There simply are not enough rooms to do so, especially during finals and test weeks. If I am studying alone, and the library is busy, it is not quiet probably because people are not able to find rooms so they have group study in quiet areas.

I find it hard to find a truly quiet space in the library. Even when studying in rooms I can hear everything that is said in the room next to me. On the top floor the large area for quiet study is constantly disturbed by people walking in and out of the door leading to the stairs. This is usually noisy, especially when most people pull the door when they should push and visa versa.

I find the library to be a little noisy, but not enough that it has kept me from studying.

I like to study out in the open where at the big tables on the 4th floor, and people always decide to start whispering away. I wish the 'quiet area' would be true. Also, there are two 2nd year TCOMers that smoke on the 4th floor patio most nights they’re there. I don't think that’s nice of them.

I spend a lot of time in the library. The only complaint I have is about the amount of rooms. The tables and chairs are nice, and there could always be more of those as well.

I would love to see more study rooms available. There are simply not enough to accommodate the large study body in both TCOM, GSBS, and PA.

I would recommend facilities management operate during hours where there are low numbers in the library (i.e. vacuum late at night or around 10AM).
Comments – Institutional Facilities and Services

If you use a study room that is next another study room you can hear the people in the room next to you. I have also on several occasions had people “camp” outside my study rooms and talk which is very distracting.

i’m here more than i am home. and most of the time i’m ok with that. sometimes i wish there were more rooms to study in, but i’m thrilled that there are. the carpet could maybe use replacing in some areas?

I’m pretty pleased with the library hours, but I especially love that we can eat in the library! Thank you, thank you, thank you! The building is often very noisy, either because of construction or even just inconsiderate staff and students. I know there’s not much you can do to regulate students, but loud staff is really annoying. Some of the ladies at the front desk talk very loudly all the time, and its not just talking, but complaining! I can hear word for word what one lady complains about all throughout the evening, and its often times about students and not wanting to be there until the library closes! That’s ridiculous.

I’m really not sure what to do... but people talk way too much even in the quiet zones. It’s better at night. But during work hours it’s difficult to study even on the 3rd and 4th floors which are mostly designated toward quiet study.

In some of the library study rooms, especially those on the fourth floor, even in a room with a closed door, you can hear everything from nearby rooms.

Is there a plan to put in more study tables?

It is good that there are rooms set aside for private/group study, and that the library is a lot quieter now than, say, up to 1-2 years back; however, it is not at all apparent to some who consider the library a “quiet zone” that most users recognize proper library etiquette and decorum, while in the library environment. Maybe more needs to be done to increase users’ awareness and responsibilities, in as far as proper conduct goes. Contrary to present time, it would have been hard to agree a year or two ago that “the library meets expectations of a conducive environment for quiet study”; but today it is getting there. As for being an environment conducive to social interaction, I fail to see the import or necessity - in as much as the objectives of the current flurry of plans, designs and actions are to recognize or confirm this institution as a citadel for serious academic pursuits, let’s not detract from the worthy aims with unnecessary details. Keep the focus keen.

It would be beneficial to have additional study rooms available in the library. It is often hard to find a free room. Another suggestion would be to have designated areas or floors for quiet study and group study.

It would be nice if students...and especially staff behind the desk would remember that it is still a library and yelling across the room to someone is never appropriate.
Comments – Institutional Facilities and Services

Some of the study rooms have thin walls that causes sound to travel to nearby study rooms.

And trying to reserve rooms never seems to go very smoothly. There doesn't seem to be enough room for study groups.

It's my understanding that there are more books being cleared out to make room for additional study areas. This will definitely help to further improve the study spaces.

The library is not conducive to quiet study at all; “quiet area” signs placed all over the 3rd and 4th floors, as well as circulating staff on these floors to remind the students that this is a quiet zone. The study rooms are not insulated well enough to allow for talking either.

Library should have a silence zone where “no” conversation or noise can be made.

Could use more study rooms but otherwise its perfect.

Lower level is very loud when crowded

Make the temperature warmer

Many students are not quiet in the library. They talk loudly to each other and on cell phones. This can be very disturbing when trying to study.

More individual study rooms

More private rooms for access.

More study areas in library

More study rooms

more study rooms

more study rooms

more study rooms. they are usually all full, and it is hard to find a good place to study.

Need more individual study areas. Need better sound insulating material.

Need more study rooms for groups to meet in

i do wish there were more rooms to study in and better air circulation in the closed study closets-serious odor problem.
Comments – Institutional Facilities and Services

People need to be quiet while in the library, INCLUDING STAFF!!! I have heard staff laughing and carrying on conversations in office areas near tables that are often used for studying. This is quite distracting and I am disappointed that staff would be this inconsiderate.

Please change housekeeping times! It's terribly difficult to study when housekeeping vacuums during the day.

More group study rooms; they are often full. lounge area with tv should be separate from rest of library.

The groups resonate a magnificent amount of noise and there are not sufficient amounts of space nor study rooms. Some of the staff is pretty loud when walking around the library and so are the students.

The biggest problem however is insufficient capacity for the amount of students who need to study.

Sometimes the tours and staff that walk through the second floor (enterance level) of the library don't talk quietly or make too much noise as they are present.

Students in the small study rooms should endeavor to be quiet while in there. This is because voices resound through the walls and this disturbs other students in other small study rooms

Study rooms are really noisy.

The availability of outlets and network connections allows students to work on computers in every nook and cranny of the library, which is great for them, but it's hard to study anywhere (as there aren't places to work without being surrounded by sounds of people tapping/clicking away on their computers).

The library is still loud. This has more to do with students being too loud than construction.

the library needs more rooms to study in, the medical school seems to take over the entire library all the time and they are not very quiet. more space and better enforced quiet rules would be nice.

The library study rooms are ill insulated. I can hear soft conversations and it was very distracting to me.

The maintence guy that comes through vacuuming at 6 is really disturbing. It was brought up at dean's round table but still happens.
Comments – Institutional Facilities and Services

the noise level can get out of hand occasionally during afternoon hours. I generally just adjust my studying schedule around it though, so it's not a big deal.

The tables are dirty and hardly cleaned. I always find crumbs and hairs on them in the mornings.

the walls of the rooms on the 4th floor are paper thin and you can easily hear everything that people that people are saying in the next room.

There always seems to be a shortage of group study rooms. More of those would be great.

There are enough studying places for students. The small study rooms are never quiet and it is hard to focus.

Also, there needs to be more tables and study areas, which I believe is in the works. There should also be a designated talking floor and a designated no talking floor, rather than quiet areas.

There have been several times in the library when it gets excessively loud. We need better enforcement of library voices.

There is always a large group of individuals that are clearly not students utilizing the computers on the main floor of the library. These people seem to have little regard for maintaining a quiet atmosphere of study. And frankly, detract from the studious atmosphere.

There is not enough separation from the library to the lounge area. You are still able to hear people from the 3rd floor chattering at lunch. This is very disturbing to many students.

There need to be more group study rooms.

there should be more group discussion room.

There should be more study rooms in the library.

Those medical students don't really understand what quiet study means. I have had to personally asked them to quiet down. I guess they think they are the only one who need to discuss their study materials out loud. Perhaps QUIET areas need to be emphasized a little more to them.

vaccum cleaning during the peak period of productivity in the library..esp while studying in the evening around 5 pm in the 3rd and 4th floor of library are very disturbing.is it possible to shift the cleaning time to lunch period when most of the people arent studying around 12 noon, in the 3rd and 4th floor?
Comments – Institutional Facilities and Services

We need more desks to study & rooms b/c the student body is increasing at a greater rate than we have space for. It is very hard to find space to study with groups especially. Perhaps we can expand the lounge-like atmosphere in the first floor to allow more interaction, and maybe add 1 or 2 more TVs.

We need more study rooms in library. Normally there are 4 people in a room that can hold 10 or more.

When meeting rooms are being used for interviewing or other activities, you can hear the noise outside the rooms. Better soundproofing or insulation would be good.

With the study rooms it is like I said before, sound proofing

You need more multi-person, private study rooms.

Building conductive to social interaction (n=4)

Conducive to social interaction?! Why is this listed as one of the questions? A library should NOT be a social environment. That is the single biggest thing wrong with Lewis Library. I spent several months in the library on the bottom floor using the computers for writing my grant, and it is one of the noisiest, most unprofessional libraries I have ever used. People, mostly TCOM students, think that the area with the computers is a gathering spot, and they will all talk loudly, laugh, and make jokes, while the rest of us are attempting to actually accomplish something. The library staff have NEVER told them to be quiet. Maybe that's because it would be hypocritical, since the library staff will also talk loudly, laugh, and make jokes. It was not until I came to UNTHSC that I knew libraries existed where people were that loud. It seems to me that being quiet in a library is something we all learned in kindergarten. In all honesty, you will never be a top ten health science center if you can't even get the library right. This disregard for the rules is indicative of a schoolwide lack of pride and standards.

it is SO LOUD In the lib, even upstairs. I thought lib was suppose to be a quiet place! it is not a place to socialize.

It would be nice to have the 3rd floor be open to talking.

The library should not be worried about whether we would like to socialize there, libraries are traditionally places to research and study, which requires quiet.

Access to the print and electronic resources (n=14)

Access to more journals via the internet
Comments – Institutional Facilities and Services

Full articles are sometimes hard to come by through PubMed and Ovid. It may have to do with the school's subscriptions to medical and public health journals.

Alot of the articles I am needing to access for my master's project are not kept in the library and I am having to pay alot of money to get them from another source. Since the master's project is required for my program to graduate, I believe the fees required to obtain these articles should be waived.

I hope some more journals are included in the library.

I wish there were more books available on reserve.

I would love to have more books on course reserves, there are usually one, two or three which is quite insufficient considering the number of students in each class.

If books typical for graduate school can be arranged separately, it would be easier to find them. For example, most of the 'technique' books are hard to find. They are used only by grad students but to find them we have to scan the whole book section.

More journals should be made available.

Maybe get some periodicals that aren't about medicine. Something to read to relax.

More access to online journals.

More required text to be placed on reserve

more classes on how to use PubMed or Microsoft Office applications

Many journals are unavailable in print/electronic form.

There are still journals that the university should have full subscriptions to for research purposes. When I needed an article and requested an electronic copy so I could use the images, they charged me and then sent me a fax of the document. When I complained that it wasn't what I paid for, they said because a fax was sent by email, it makes it electron. Don't insult me, we both know that I needed a PDF so I could use the images. Plus, it was from a journal that the school or at least the CGEN department should have access to in the first place.

Staff able and willing to help me find what I need (n=9)

I must say that the library staff is AWESOME at helping. I had an issue that I needed help with and almost everybody came to assist. We finally figured it out. Thanks Library staff.
Comments – Institutional Facilities and Services

A library employee XXXXXX has been extremely rude on three different occasions. She uses a condescending tone and is almost “bothered” when you ask for her assistance. She has also been this way to one of her fellow workers which made me feel very uncomfortable. I have witnesses to this occurrence since that was the last “straw”. Please put friendly faces and people who enjoy working with students behind the desk. We (students) are tired, hungry and want to go home too, however, TCOM has taught us to always respectful, a quality XXXXXX lacks. There is nothing worse after a long day of studying than to be treated in this manner.

I have found the library staff to be very helpful. The first time I checked out a reserve item I was not told about the fee for use over 2 hours. I had it our for 2 hours and 3 minutes and we fined. You might need a sign off with this information for first time users.

Lewis library is a true credit to this campus. It is one of the best medical libraries in the state.

Lewis library is excellent. In fact, it is the best medical library I have been to.

Love the library and staff. It's like a home away from home for me

more friendly staff and more candy/treat possibly even free coffee

some of the library staff are actually not friendly and when asked for assistance have been known to get upset.

Also, the staff at the front desk is usually rude, and you should be able to sign up the receive a textbook next when it is out, all you would have to do is call us for two seconds.

Library Computers - Quality (n=32)

can have more available computer outside the lab area, and those already there should be upgraded

Limited and outdated software.

Computers in the library run very slowly

Computers on 2nd floor of library are not good...especially the ones outside LIB 225. They should at least open an internet browser.

I am very dissatisfied with the quality of the computers on this campus.1) They are way too slow.2) Applications such as SPSS and EXCEL are sometimes faulty on several computers. This causes me to have to dance from computer to computer trying to find a computer that will function properly so that I may complete my assignments.3) They
Comments – Institutional Facilities and Services

are incredibly slow.4) I think there should be a way for students to have to log in to use a computer. This will prevent ppl from downloading unnecessary files that will invariably cause the computer to not function properly.5) The computers are unbelievably slow.

I haven't used the desktops much, but the laptops from the front desk utterly suck.

Library computers sometimes freeze and/or are extremely slow (this doesn't include the labs).

Many computers are out of order and when there is an ongoing class in Lib 225.

Many of the computers in the library have junk downloads sitting on the desktop and many of them have viruses.

many of the library laptops have SPSS and SAS whose license is expired or they don't work.

ALSO COMPUTERS ARE SLOW OR PART OF THE TIME NOT WORKING.

Need some updated computers on the main floor. Usually very slow processing and freezes often.

some of the computer outside the lab doesn't always work that well. They are incredibly slow, and Firefox never seems to load on those machines!

Replace the old computers on floors 3 and 4.

Slow computers!

slow getting onto the internet, but good once on.

The computers are really slow.

The available computer are very dated.

Also, the computers are rarely “cleaned up” in regards to the desktop and my documents folders which makes the computers slower. The liscenses for SPSS and SAS needing to be recertified cause unnecessary unavailability of programs for SPH students which puts us behind in class.

The computers are soooooo slow and some of them do not even function properly (mozilla can not be opened on all the computers)

The computers are very slow, often broken and a bit old.
Comments – Institutional Facilities and Services

The computers don't run firefox, are very slow, and don't have updated office software; it would be nice to see those changed.

The library computers need to be updated.

The library computers on the outside of the computer lab on the second floor are too slow.

The library laptop quality is not satisfactory and are never available when most needed like during exams and when homeworks are to be submitted from which we need the sas software.

Many computers in the library have expired software licenses. They must be renewed.

Also many of the common use computers are very buggy. It would also be nice if the university contracted out for discounts on Microsoft products (ie. word) and Prism.

The maintenance of the computers needs to be done more regularly. They are always down and have many bugs. You always have to try 3-4 computers before one of them allows you online.

On some of the computers there however, Mozilla Firefox does not work, and Internet explorer is too slow.

There was an error on the computers causing me to have to redo SPSS assignments several times because when I tried to print, the output just went away. This needs to be fixed.

The computers are good, but the catalog computers should be updated...they are very old.

When I went in last week to do some SPSS work, the license was expired on many of the computers.

Library Computers - Availability (n=36)

We have a lot of computers in the library but the computer lab on the 2nd floor is sometimes closed because of a meeting or something. There is a scanner in that room and it seems like every time I NEED to use it, the room is occupied. Also, I like to use two computers (my lap top and the computer in the library) so I don't have to flip back and forth from what I am looking at and what I am typing. Seeing as though the computer lab upstairs is off limits (I think, I can never use it) and the computer lab on the 2nd floor is often occupied, maybe we should put some outlets near the computers that are not in the computer lab on the 2nd floor. (Just a thought)
Comments – Institutional Facilities and Services

Add at least a few new computers in the library; maybe even a 10-15 computer station in CBH.

can have more available computer outside the lab area, and those already there should be upgraded

Computers are either busy or not working whenever I tried to use.

During midterms last semester, the lab was closed and all of the computers in the lobby were taken. The lab really needs to make an effort to be open during peak hours.

the computers are often heavily occupied by community patrons.

They are never any available, they don't have OneNote and they crash constantly! If any of these issues could be addressed, it would be most appreciated.

It is disappointing that there is only one scanner in library and the scanner software is not very good. Earlier Canonscan was good, but for sometime that software is not working.No. of labtops that can be checked out should be increased. Staff is not mostly able to solve our problems. Yesterday I and my roommate checked out laptops. Both did not work after sometime and I had to borrow a friend's laptop to complete my presentation.

Availability of laptops for checkout varies. Many appear to be in repair.

there are not enough computer for students.

More computers in the library

more computers should be made available> 

THE COMPUTER LABS ARE OCCUPIED BY THE REGULAR CLASSROOM/ TEACHING SESSIONS.

More computers, especially when the main 1st floor computers are closed due to trainings being held.

More laptops for check out would be nice.

On the fourth floor there should be some computers for internet access. And on the 2nd floor sometimes due to classes in the computer lab less computers are available for internet access.

Only certain computers have SAS and the 4th floor computer room is restricted to classes and is not open for use especially when the 2nd floor computer room with SAS on its computers is being occupied by a class.
Comments – Institutional Facilities and Services

Perhaps have more computer labs

Having a computer lab in which no classes are ever held and is strictly for study purposes would help

Sometimes classes are held in the computer lab while we work in the lab forcing us to stop our work.

there have been many times where there aren't any library computers available - often I use campus email between 5 and 7am from home and then find myself out of touch via email until I return home that evening.

The Community patrons take up valuable computer usage that students could use.

The computers in the library are always available, but they are rarely ever cleaned. Some regular cleaning of the computer screens, and mouse would be great. Also, posting signs encouraging students to keep computer stations clean would be perfect (i.e. not to bring food into the computer lab, or just some general hand washing after eating and before using the computer mouse).

The computers in the lobby area are often used by people who are not students or employees of the school. This makes it very difficult to find a computer to use when the lab is in use by a class. More computers may help this.

There also need to be extra laptop computers available for those graduate students who do have them. They are a great asset to have in class and may not be affordable for everyone.

The library computers, if they are for classes, they should be used as such. If not then measures be put in place for avoid the frequent interruptions student face at the library. You may be in the middle of a project, and all of a sudden you have to get up for people to have a class there. That's annoying

The number of computers are limited that are available to students while there is a class in session in the lab.

The only library computers that are available for use are on the first floor or the area for social interaction.

There are always computers down, which limits the availability. We need more computers or the computers we have need to be better maintained.
Comments – Institutional Facilities and Services

Most of the computers in the downstairs area are down and if there are classes in the labs...students are unable to have access to the network for school and research. Laptop availability is not sufficient to meet the requirements of the students. Many do not have personal laptops and rely on the library to help them with this issue. My old school provided a sufficient amount vs here.

There are not that many computers in the library to use. I'm not sure if this semester there are any classes in the downstairs computer lab, but if there is then that leaves about 16-15 working computers available for everybody else. I started to use a different computer lab in EAD because of this.

There is only one main computer lab in the Library and it is often unavailable for use because of some training classes. It may be better to constantly schedule classes in other computer labs in the school other than the primary one located on the 2nd flr of the library.

There should be some more computers in the library and ofcourse more laptops for check outs...

To have some of the computer labs open during high peak times so students can have access to the computers.

library computers are ok in number but it gets tough when there is a class goin on in the lib lab 2nd floor.only 8 systems remain for use.

We need more computers

Library Outlets and Network Connections (n=19)

there is not near enough electrical outlets in appropriate places.

Outlets: Often the electrical outlets on the tables don't work.

I think a great job was done recently with adding power outlets at the individual cubicles.

I wish there was a rating for crappy ... “Library Outlets and Network Connections” Rooms are taken up by a single person and the tables do not have wired connection avail.

More wired (and functional) internet jacks need to be available. There should also be power outlets near the cubicles. Most of us study on our laptops, and if we can't plug them in, there's no point in sitting there.

More outlets are needed.
Comments – Institutional Facilities and Services

more outlets in sitting areas.

Put more electrical outlets in the desks

Need more outlets on the tables on the 2nd/main floor.

outlets are disorganized

some areas in the 4th floor need outlets (the area around LIB400)

Some parts of library have bad wireless signal.

Some study tables don't have network connections.

TThere could be more outlets on the cubby-desk study areas.

There should be enough outlet connections for the amount of seats at each station (outlet and ethernet connections)

There's never been enough outlets.

this is my first semester. I have not had the opportunity to utilize the library yet. The online connection can be a bit tricky at times, but I think that it is just a system that i have to get used to.

We need more electric sockets at the desks.

you need ethernet and power outlets at every desk.
Comments – Institutional Facilities and Services

Laboratories

Teaching Labs - Equipment Quality (n=48)

A lot of the research laboratories are very small with old desks, shelves and counters. The labs in CBH are excellent--it'd be nice to see that quality throughout campus.

Amazing Labs!

Anatomy lab is excellent, no improvements needed

cadavers for PA students are several years old and have become dried out. It would be beneficial for PA students to get the same access to quality specimens that the DO students get.

Eventually the Gross Lab and probably the Sim Lab (Standard Patient Lab) will need to be enlarged. The Gross Lab is especially important. I think no more than 4 students should be assigned to a tank. In the past two years, many tanks have 5 students, and with the TCOM class size growing, more tanks must be added. This is an essential learning experience.

HA lab is wonderful!

Half of the tables in the manipulation practice training room on the fifth floor are falling apart and are in need of repair or replacement.

I am over halfway finished with year 2 of the DO curriculum, and I have only used Stan and Norm about 2-3 times. We need to find a way to get some good use out of those guys.

I don't feel the Sky Cam in the anatomy lab is used as often as it should be. It's a great (and expensive device) and it's great for review sessions; however, I don't feel it was used as much as it should have been.

I think all of the computers in the anatomy lab should be upgrades to the new iMac. We have a couple new iMacs in there, and I noticed a vast improvement using them versus the old ones.

I think teaching labs (as in the computer/Norm/Stan Models) needs to be implemented more in 1st and 2nd year's education.

I think the school should invest more money in equipment for the techniques course because it is very useful for molecular biology research.

I was promised so many times throughout orientation that I would have all this quality simulation time with stan and norm and other integrated clinical experiences. I found
Comments – Institutional Facilities and Services

that this was not the case. I got to spend very little time with stan and norm in the
presence of an instructor and when I was there I was crowded around 15 other
students.

Is there a reason there are only 4 bone saws for 30+ tanks? We tend to spend hours
waiting on the saws.

It would be nice if the teaching labs were stocked with tongue suppressors, speculums,
cotton balls, gloves, etc. so that students did not have to search for them since things
like tongue suppressors are only found at medical supply stores

Medical students rarely use the labs. It was for show during medical school interviews
and still remains that way. What a waste.

More bonesaws.

More laboratory experiences for medical students (not just top 10-25%).

Not all labs will receive this very critique as it is know. Having old very much out-dated,
non-working equipment.

not enough equiptment for the anatomy department.

Not sure if this covers PTR. But PTR on 5th floor apparently never get vaccumed and
the tables never get cleaned. Wear a black trouser and sit on a table, you'll be pleased
to notice the amount of hair that gets stuck to your trouser. The first thing I have to do
after any PTR session is to get rid of the clothes I wore. The tables need to be cleaned
with some type of antimicrobial cleaner atleast once a week.

OMM labs need a lot of improvement. needles on the floors and a lot of tables don't
work. and it's ugly.

Our program does not have instruments that function properly on a consistent basis,
and all of our pipettes are breaking but not being replaced. It is difficult to get things
done because we have a limited supply of reagents.

some of the equipment I use was made before I was born.

Students would benefit more from the sim lab if the groups were smaller, and we went
up there more often (in lieu of listening to one XXXXX perhaps?)

The anatomy lab needs new equipment. The bone saws are constantly overheating,
partly from age, and partly from the fact that there are nowhere near enough of them, so
they are in constant use for 5 hours
The anatomy lab should be allocated the resources it deserves. A thorough understanding of anatomy is a key component of being a good physician, yet the anatomy lab and department do not seem to have adequate funding. Students should receive, as part of their tuition, enough equipment and gloves to last the entire year. Shared supplies, such as bone saws, need to be updated and be more reliable.

The anatomy labs are definitely low on certain equipment, including hammer/chisels but especially BONE SAWS (both manual and automatic).

The fire alarm goes off far too often, and disrupts our class. I'm sure that the majority of the time that the alarm has gone off, there was not a true fire.

Also, there was a major shortage of saws during the labs that required them.

The forensics genetics laboratory needs to be better funded so that we are able to have a more complete hands-on learning experience without having reagents be an issue.

The gross lab could have more tools, we tend to have to steal them from other groups. Also, the newer part of the lab (towards the back) doesn't have the plasmas that connect to the skycam.

The Gross Lab is in need of more bone saws. We had about 1 saw for every 5-6 groups, which means there was about 1 saw for every 25 students. Of those saws, by the end of lab, many of them were not working. I know that the saws are expensive, but I feel that they would be a good purchase.

The OMM tables of EAD 5th floor are old and falling apart. Funding for new tables would be great. The new flat screens and video system in those rooms is a great improvement.

The only labs available to the PA students would be the cadaver lab and the simulation lab. I don't believe the PA students have adequate lab facilities. There should be far more availability for skills training and practice (IV access, stitching, minor procedures, heart/lung sounds, etc.) The PA's have a ridiculous amount of documentation training and little practical experience. If we could have access to the same teaching material (stitching DVD with practice model for example), it would benefit PA's going out in the real world as far as ability and confidence levels.

The simulated patients should be kept in a larger room to accomodate more students so that everyone has access to the patient.

The student forensic laboratories are in DESPERATE need of new/newer pipettes and another thermal cycler would be very beneficial since PCR parameters that we use take several hours at a time and we cannot always put 96 samples on one thermal cycler as certain samples require alternate parameters. Also, I think some
Comments – Institutional Facilities and Services

additional/rearrangement of shelving would create a more organized work space, which would allows students more bench/work space.

There are not enough bone saws and other equipment for the Anatomy lab. It took us 2 hours to get one and less than an hour to do the lab once we did.

There either is not enough equipment or the equipment we have is broken. We keep hearing about the school growing, but we are not investing in the infrastructure to support the growing student population.

There is not enough equipment in the anatomy lab...i.e. bone saws.

There sometimes are not enough supplies. Also, the computers the are overhead could be utilized more often for teaching purposes.

We are lacking equipment and reagents in the forensic genetics teaching lab.

We don't spend enough time in the 1st two years with the simulators. TCOM shouldn't show them to prospective students. It's dishonest.

We need more bone saws.

We need more lab equipment such as bone saws in the anatomy lab.

We run out of bone saws and other equipment quite readily. It would be nice to have enough to efficiently work through the entire med student class (as in having more than a few operating bone saws).

Research Labs – Equipment Quality (n=5)

Equipment is outdated or absent. I have to do without or borrow supplies, incubators, etc. or bring/purchase them myself.

Much of the shared equipment (autoclave mainly) is outdated and breaks down frequently. Its hard to have 4 floors worth of labs working off of one autoclave, this takes away from the time that can be spent doing research.

The 7th Floor EAD does not have STATA.

The SPH computer lab needs updating.

We need to repair the autoclaves. Currently there is only one working autoclave on the 4th floor and the usage is so high that it seems it will break any minute. The back-up becomes a real inconvenience.
Comments – Institutional Facilities and Services

Safety (n=5)

compliance with established safety laws is lax

XXXXXX may want to use gloves for his own safety.

There appears to be no safety training or person that oversees that.

The first aid stuff in the anatomy lab is a little outdated. How about some simple bandaids and benzoine to clean yourself if you accidentally poke yourself.

Also, the student forensic laboratories autoclave and ice machine need to be better maintained as we use the ice almost daily, and at the current time we have MANY biological hazard bags that need to be autoclaved just sitting in the student lab... I know that we, as students, do not have access to use the autoclave but it’s still a hazard to us as it takes up a large amount of space in our lab, not to mention the contamination potential and safety issues.
Comments – Institutional Facilities and Services

Campus

Maintenance (n=31)

4th floor hallways in EAD have had torn window tinting for as long as I can remember. It needs to be fixed. It just looks sloppy and unprofessional. I wonder if any of the tours came up here during the science fair, because those windows probably would have been embarrassing for the school.

Although some updating on the campus have been done recently to improve the overall image, it still looks like a dated 1980 campus and is not comparable to other campus’ I’ve been to.

Appearance of the HSC is less than desirable. Very dated and basic. Not appealing.

beautiful campus

Campus seems old and falling apart. How come there are leaks in the ceiling that have existed in the same spot for over 6 months?

Everything that I have noticed are fine. I enjoy being on campus and find it a pleasant experience.

Fix the leaks in the hallways

I always see leaks in the building and cockroaches on the ground. The first thought that comes to mind is what other people think of the school when they come visit. I’m sure if we have enough funding to open a brand new building across the street, we have enough money to repair any damage that might be causing a chronic leak happening in the hallway of the EAD in front of Everett. The ceiling is actually turning a nasty brown shade.

I appreciate the recent landscaping work that has been going on.

I don't care for the new carpet. it could have been done well, but in all honesty, it looks like someone ran out of money and just started filling in the gaps with scraps. In the hall by Luibel, it’s nice with a regular pattern and looks well laid out.

I'm not handicapped so I don't typically notice the facilities, but some of the most commonly used elevators are out of service half the time.

leaks not fixed promptly

More flowers.

Paint (railings, parking lots, building exteriors) should be kept in better shape.
Comments – Institutional Facilities and Services

More green space would be nice, the new plan will be a great addition

occasional elevators problem pop out. it was a lot of inconvinience during last semester classes timings in the Bayer's hall while repairing ceiling and wiring.

Please, no loud maintenance work during exams!!

Seems that many of the chairs in the RES lecture hall (114 I think) are falling apart. Also, not sure if this is adjustable, but a lot of the chairs in the second floor CBH lecture halls lean a bit, which is uncomfortable for long periods.

Some of our building are old and even with good upkeep they still look dingy. I am not sure how you would remedy that situation.

sometimes bathrooms are overflowing with trash. some maintenance items take a long time to get resolved (i.e. the leak from the ceiling near everett hall)

The amount of construction going on at any one time on campus is tremendous! I think construction activity should be limited to off school hours as much as possible. As mentioned before, it is very distracting to be taking an exam with construction noises being heard all around. If construction hours can not be altered for exams, the exams need to be in rooms where construction is not being conducted.

The benches in the ground (near circle drive and alulmni plaza) should be cleaned on a regular basis.

the campus just looks old and dirty. Can we please get new lockers? they are rusted, old and smelly!

The custodians and maintenance people do an awesome job and are always very helpful!!

The 'fire alarm' in the RES building goes off very frequently causing everyone to evacuate. This is a regular problem

The leak from the ceiling in the hallway between Luibel and Everett and the trash can that constantly sits there is a huge eyesore and should be fixed.

The new carpet in the EAD around Luibel and Everett are hideous. The patterns don't match. Please pick one pattern or color.

The new carpet installed on the first floor of EAD are horrible.
Comments – Institutional Facilities and Services

The only thing I can complain about maintenance on campus is the construction that was VERY distracting near a room while we were having our exam on two different occasions.

There has been a leak from the ceiling in the hallway between Liibel and Everett hall since I can remember. So, as a solution, someone puts a garbage can underneath it with a paper sign that says, “don’t put trash in here”. Perhaps, the leak could be fixed.

There has been a leak in the ceiling of the hallway between Everett and Liibel the entire time I have been here. Instead of trying to fix the leak, a trash can was placed under it and a sign saying “do not throw trash in this trash can” was placed on it. That is not something that looks good to visitors or prospective students.

Vacuuming or changing carpeting more often would help improve the building view. WE NEED MORE LANDSCAPING and flowers besides that that faces camp bowie bordering the south side of parking lot A. It’s hard to say we have a nice-looking campus with a whole bunch of asphalt and concrete block buildings. the “Grass patch” is nice, but it needs more. aesthetics matter and really do make a difference to everyone who comes on the campus.

Who picked out the new carpet?

Cleanliness (n=20)

Again, some of the school doesn't appear to be cleaned regularly. The carpets look 1000 times better near Everett and Liibel. Perhaps move the class portraits to new building to showcase them.

Bathrooms are sometimes dirty and out of paper towels.

Does anyone actually clean the walls every once in a while?

Clean tables, desks, etc

Cleanliness is lacking in this school. PTR tables should be cleaned daily. All desks and tables should be cleaned daily. We are in a high stress situation where infections spread quickly. Cleanliness of our surroundings is paramount to maintaining student health.

Furniture needs thorough cleaning.

If it's really a nonsmoking campus, could someone please tell the women who sit on the retaining wall facing Montgomery at the south corner of the entrance to the circle drive? It looks really tacky for them to sit there and smoke with all the traffic going by.
Comments – Institutional Facilities and Services

keep bathrooms cleaner

More frequent cleaning of sidewalks, parking lots, etc.

Recycling bins would be helpful in more places around campus.

restrooms are not always cleaned everyday, I know for a fact that the restroom on my floor gets cleaned maybe once a week, when i say cleaned, i mean that toilets should be scrubbed and floors too, which may not be the case on the fourth floor RES!

Says “smoke-free campus” but people still smoke, right beside the signs. :( Kind of a poor example for a public health & medical institution.

Someone needs to tell XXXX and XXXX that they should not use their bare hands to dig stuff out of the trashcans in the bathrooms. Every time I see that, I squirm.

sometimes bathrooms are overflowing with trash.some maintenance items take a long time to get resolved (i.e. the leak from the ceiling near everett hall)

The amount of construction going on at any one time on campus is tremendous! I think construction activity should be limited to off school hours as much as possible. As mentioned before, it is very distracting to be taking an exam with construction noises being heard all around. If construction hours can not be altered for exams, the exams need to be in rooms where construction is not being conducted.

The bathrooms are often very dirty, especially in the library.

The bathrooms need to be cleaned with fresh water. They smell like they have been mopped with dirty water which leaves behind a very disturbing smell.

The tables, chairs and desktops in classrooms and in the library are always sticky, stained and uncleansed. This is not due to daily use, but for weeks on end, I'll see the same messes that have not been cleaned by the staff.

There should be significantly more glass, aluminum and paper recycling bins. The few that there are, are not always easily accessible, and are often full, or overfull.

Update Activities Center. The gym facility looks outdated. It does “entice” students to workout in the facility. Improved aesthetics = more student utility.

Work on cleaning the library desks and bathrooms. They are disgusting and the table need to be wiped down on a daily basis.
Handicap Access (n=17)

Oh, and could we, for once, actually enforce the handicapped parking. Few of the people that park there are actually handicapped. Some of the people at this school that ARE actually handicapped can never find a spot because they are taken by people who are using someone else’s handicapped placard since they are too lazy to walk from further away. Again, unprofessional.

Although I am not handicap, I see people parking in the handicap parking spaces that are clearly NOT handicap. This limits the spaces for people who really are handicap (friends of mine). The police should check that the handicap tags used my all the people are legitimate and not a relative of the person using ACTUALLY using the tags.

difficult to get around campus when on crutches

Handicap Access: The stairs outside of Luibel Hall make it difficult for persons with strollers, wheelchairs, etc. (the other day, I saw a 4th year medical student carrying a stroller with her newborn baby down those stairs)

Having been on crutches for several weeks, I found access to handicap doors after hours is almost nonexistent.

Having personally been injured during my stay, I was allowed to see the campus as a handicap student. I have a temporary handicap placard but that doesn't do me much good when it comes to parking. There are about 10 handicap parking spots in the administration parking lot but they are always full. Plus, all of the PCC handicap parking spots are mostly full. During morning hours, it is almost impossible to find a handicap parking spot. Either we need more handicap spaces or we need to be more enforcing on those abusing them. Also, Beyer hall is not handicap friendly. Both entrances are steps and any seat you wish to sit in is at least a step away. The “hill” in the hallway passing Luibel is also not handicap friendly. In order to get around it, you must go through the student fooseball area, take the “elevator” up and walk through the other doors of the lounge. Is there any possible way to make half of the hall way a slope and half of it stairs… or all slope?

I feel there is not enough ramps near Luibel especially.

I had a lecture course in RES in the fall (in the large lecture hall at the opposite end of the hallway from the elevators) - I didn’t notice until one of my professors came to class on crutches that both entrances of the classroom require the use of stairs.

I personally am not handicapped. Yesterday I was walking to the library from the parking garage and I encountered two elderly people. They were looking for radiology associates. I was confused as to why they had parked in this garage, but they had a pamphlet telling them to park in lot G (the garage) and wait for the shuttle to come get them. I have never seen said shuttle. Either way, they had a handicapped sticker, and
I don't think this was the most reasonable place for them to be told to park. This is just my two cents.

I suggest every administrator navigate the campus in a wheelchair and crutches. It is a convoluted route from one end to the other for sure with stairs everywhere.

I think it would best that the handicap access be addressed by this population. I'm sure it is difficult to navigate the hills on campus if one were disabled.

It appears that the campus is on a giant slope. From CBH to EAD it is an uphill struggle, if I was in a non motorized wheelchair, I would have a difficult time getting there.

Last semester I was on crutches which made it incredibly difficult to get around this campus. Temporary parking in a closer parking lot would have been great. Also, the handicap elevator in the EAD student lounge did not work and one of the maintenance guys told me it was almost always broken. What is the point of having it if it doesn't work?

Need more handicap access. Too many stairs.

Not all doors have automatic door function for those in wheelchairs - 2nd floor west entrance, circle drive area.

There are several employees, XXXXX being one, who take the handicapped spots in the EAD parking lot daily, though there are persons who actually need them.

There's too much handicap access. The only way that we could every use all of the handicap access is if there were a hover round scooter convention held at our school.
Comments – Institutional Facilities and Services

Campus Police

Security (n=26)

campus police seem very vigilant and are always a presence

for those of us who study late on campus, I think increased parking lot lighting and even parking lot patrols would increase security measures

Honestly...never had to use security. Rarely see police on campus.

needs to be more seen and more of a presence on school campus especially after 5pm hours.

I doubt that the police really needed a Dodge Charger for all those high speed chases on our campus. I feel like they really only need a golf cart and anything more is a waste of finances. They have also said that they will not enforce the no smoking ordinance we have on campus. This really erks me because that's their job, and I feel like they don't have much to do anyways besides hassling people over parking issues, so why can't they enforce the smoking ban.

I had a flat tire once and called the campus police for assistance. They sent a police officer who said that it was not his job to aid in incidents like this. He literally just left without helping.

I had an incident with my vehicle in the parking garage. The security was SOOO helpful and courteous. They came promptly. It was great.

I have found the police to be rude and resentful when helping students with car trouble. I was told it was not their job even though it is listed as one on the web site.

I never see police monitoring the actual school or walking through the hallways. Two of our largest classes are the first and second year classes. Someone in the past has just walked in, stolen a computer and left the campus. It makes me wonder how well and fast our police would respond if there was a tragic terrorist act, such as the one that occurred at Virginia Tech. This is why I believe the school security is below expections.

I wish they would patrol the parking garage and enforce the parking sticker requirement. It's frustrating to see so many people without parking stickers or with expired stickers.

If we forget our lab-keys and we contact the campus police to open the lab for us, they come 30 mins - 45 mins after the call. Nobody wants to wait for that long.

It is disturbing that there is no light outside the side entrance of the library. It is very dark leaving the library at night and does NOT feel safe.
Comments – Institutional Facilities and Services

It would be nice if the campus police tried a little harder to enforce the "yield to pedestrians" laws around campus. I've almost been hit by a car while crossing the street directly in front of a campus officer, who did nothing to the driver that failed to yield.

More call boxes and more lighting. Allow students to park in front of library during late evening hours. Keep front doors of school locked with only badge access during all times of day or have doors monitored. Our Atrium bathrooms have become a public restroom for the bus stop.

Needs to be a bit friendly, and greets when they see you at the hall way, instead of their usual straight face. Majority of us have been to colleges that have a very friendly police, so the ones here looks unfriendly. we are all for each other.

security is nice, offers to escort to car late at night! thanks!

Security is usually available on weekends when access to PTRs is needed. There is some inconsistency with the dispatchers.

Security sometimes is a little abrasive in regard to parking in the lots for "drop offs" or "quick errands"....

The cops should probably do more patrolling then they currently do. I see them parked in one spot the whole time when I come late at night. Also, I asked them to give me a ride during a major electrical storm and they denied me, I could have been struck by lightening.

The police always seems to be in the parking lot or walking around the building. I like that.

The police are little more than "meter maids," concerning themselves almost exclusively with who is parked where they should be and if they have a parking permit. Security at night is good, but during the day I feel the police are overly cautious about protecting the parking garage, while bums are literally walking into our classrooms from Camp Bowie and Montgomery.

The police have always been helpful and a comfort to have nearby

The security officers are always very cortious and helpful

There are no emergency telephones around campus as there are on other campuses. Students stay late and there seems to be an increase amount of "homeless" patrons who hang out in the library lobby. Students need to feel safe and know that it's ok to stay and study late, but the lack of patrolling police officers and the lack of emergency telephones makes it somewhat risky to take advantage of using the campus as a late night study place.
Comments – Institutional Facilities and Services

They have been very helpful whenever I need any assistance.

We are considered a smoke free campus why can't the police help enforce this? They are campus police and it doesn't seem like it would take that much effort. I think that the library parking issue is radiculous and needs to be ammended. They need to stop giving tickets to already poor students that park close to the library due to the fact that we get out at 2am in the morning and are concerned for our safety by walking far distances to our cars.

Emergency Communications (n=4)

do not like notification on cell phone-inconsistent at best-early closing sent but not the complete day shut down

Emergency communications (text/voice messages) could be more specific. I'm often not sure what the problem is when I receive an emergency message.

The ice storm communication was great!

There was no notification other than a small headline on the "ice day". I tried for 45 minutes to get 3 miles to campus only to learn it was closed. If the department is capable of sending test messages so frequently, they can certainly notify us of campus closures.
Comments – Institutional Facilities and Services

Parking

**Availability AND Price** (n=39)

Lower cost - then more students might buy parking permits, offsetting the lower costs. We really need parking closer to the actual buildings.

As a student, I feel that the parking availability is one of the worst, because we pay so much, and it is very difficult to get parking in the garage.

Considering you may come up to school at 9am occasionally and therefore may not have a parking spot in the garage, I feel the parking fee is too high. If we were guaranteed a spot, I wouldn't have an opinion.

during working hours, sometimes hard to get a parking spot. Rates could be reduced
Especially at the beginning of the school year (fall 2008) there were many days where no parking was available in the garage. This was due to a massive amount of people without parking stickers or with expired stickers that parked in the garage. This was annoying to the people who actually paid $90 to park in the garage, but were unable to. There needs to be more spaces of convenient parking for the students. The parking lot near Mattison Avenue and Bertrose Street is very far away because you have to make detours to avoid the construction on the new buildings.

Far too expensive for not enough parking spaces

For as much as students pay to park on campus there is never enough parking spaces. I don't know how this school will manage the situation when the class sizes are expected to increase substantially in the coming years.

For just one semester I thought the price of parking was a little expensive. Especially considering that we don't really have any other parking choices but the parking garage.

i dont understand why i am paying 92 dollars to park miles away in an empty parking lot when i thought i was paying to park in the garage.

I have had difficulty finding parking on campus and it is pretty expensive.

I think paying $90/year for parking on campus is extremely high. I don't know if it's even worth it if we have to end up walking up that steep hill (or take the slippery stairs to very top, where the bridges are almost always filled with puddles). I have some friends who park in AMON CARTER lot to save the money.

I think the parking permits are so expensive students would rather line the streets with their cars hoping that there will be a spot left when they get to the school. Also..I have had trouble finding parking after that front lot closed. I guess there is no solution for this if it needed to be done.
I would pay for a parking pass if there was enough parking spaces. The first month of school I parked in the garage, and there were many times when I had to leave and find a spot elsewhere. This resulted in me being late to class. But as a result, I park off campus and walk.

I wouldn't mind paying as much if I was guaranteed a parking spot in the garage.

I'm aware that many parking spots were lost due the construction of the new buildings on the west side of Montgomery, where the old hospital was, but it's almost impossible to find a parking spot in the garage after 8:30am and I have PAID for a parking sticker...which one would assume that a space should realistically be available somewhere on campus. For that reason, the price to pay for a parking sticker is too high if a person can't be guaranteed a spot...

It is very expensive parking. Relativity doesn't matter. It's still too expensive. The O's parking deck should be opened to help justify this expense.

Make M lot parking decals cheaper because people like myself park out there to free up spaces in the garage, but I don't think it's worth the $95.

Make more parking available that isn't so expensive. Honestly, I don't think we should have to pay for parking.

More parking space, and of course, bring down the price

More parking, at an affordable price. And please take away the entrance requiring our ID badge--if we have a permit, that should be enough. I think a motion-sensitive gate is enough of a deterrent; I really don't think that many people are sneaking in during the week.

Not enough parking for the price, the garage is often full

Once again when D.O. students start school along with all the other programs parking is impossible for the price that we have to pay

Parking fee should be reduce and more space should be made available for students. Parking fees should automatically be included in tuition as a service/institutional fee, but there still then would not be enough spaces for the institutional population.

Parking is inadequate or seriously limited, particularly for most student commuters. Besides, the price for parking seems to be at a premium for the few available spaces. If the population of students and staff increases, as expected, it is only sensible that extra parking spaces be provided at affordable prices. (Please compare the parking arrangements at UNT Denton and UT Dallas, and see what can be done here!) Parking is too expensive to not find a spot in the garage.
Parking needs to be enforced. It is not fair for people who have paid for parking decals to have to park in undesignated areas miles away from school just because the campus parking garages are filled to capacity due to the plethora of people taking up spaces who did not pay for parking passes. 1) Why did I pay for parking if I can't even park? 2) Why did I pay for parking, when other people who did not pay have the exact same privileges as I do?

Parking price went up for a garage that is most often full. There is a convenient unused garage on Montgomery that should be opened ASAP.

Price is reasonable, but often, we as students have to compete with faculty with parking. I feel that we desperately need more tiered level parking.

Price seems a little high for the limited space that students can park at special rate for third year PA students who only visit campus once a month. MORE PARKING FOR STUDENTS!!!!!!!

The availability does not meet standards for the student, faculty, and staff, and the price for parking decals is inverse to the availability. The price for decals is far too expensive considering that the parking spaces are often hard to attain.

The cost to buy a parking pass is outrageous for the number of spaces available. Once they get the other parking garage open, then the cost will be worth it. Right now, it is legalized stealing.

The garage is full too often. The gate to the garage is often open all day, which means that people who have not bought a parking pass can use the garage. I paid a lot of money for my parking pass and I don't really think this is fair.

The parking garage is too expensive and always full (anytime after 8am)

The price should be lowered since the parking garage is not always open, or they should reopen the parking garage on Montgomery St.

The pricing is perfectly acceptable, but the availability due to construction is limiting.

The pricing is too high considering there is only one garage for students.

There are not enough spaces, and the price is way to high. If we have to pay at all it should be associated to our student services so we can get additional financial aid to cover it.

There is virtually no where to park sometimes, even if you've paid for parking unless you are willing to walk half a mile, and I can park at the ballpark in Arlington or Texas stadium cheaper than I can park at the HSC.
Comments – Institutional Facilities and Services

There needs to be another lot to accommodate the growing student body. At times it can be very difficult to find parking. Pricing is a little high for students as well.

too expensive & not enough

too much to park in the garage and the garage should not be open after 5 .. the contract with the city is monopoly the city has on our parking

Availability (n=67)

a little more parking would be good there are dayd when there is no parking and one has to park on the road...

Add some more motorcycle/scooter parking around the main buildings. During the summer there are not always spots to park.

Although availability meets the expectation I have for a large university, it is annoying to pay for parking and then not have a single space available to conveniently park at certain times during the semester. Usually these times are at the beginning of the semester or during conference periods.

Although I would love to say that I hate the parking because sometimes I have to park farther than I want to, it really is not that bad. If I were to compare the parking to that of, say, Texas A&M's campus, then TCOM is doing great!

At the beginning of the year it was almost impossible to find a parking spot. Sometimes when I come to campus I have a hard time finding a spot, and there are only 3 or so available in the entire garage. Something that would greatly improve that situation is if they would stop allowing patients to park in the garage. I have personally witnessed multiple times when the parking booth attendant tells patients to park in the garage. Patients have multiple lots they can park in but we can not; they don't need to be parking in the garage that I paid for and they didn't. Otherwise continue to let them park there, but in that case parking needs to be free for students.

At times it is difficult to find a parking space in the parking garage across from CBH. For SPH students taking classes, this is the most convenient parking lot. Maybe there should be specific parking permits based on where you take your classes or what school you are associated with..?

At times there aren't any parking spaces available.

Borderline availability of parking.

During special events at Will Rogers finding parking is next to impossible.
Comments – Institutional Facilities and Services

Especially if we have a thursday afternoon class there is no parking. It is becoming a burden.

expand lots

I am glad to see work being performed on the other garage. I hope it opens soon.

I think everything will change with the new buildings. The M lot, which is only about half full most days, will be in high demand, as will the on OMCT garage. I think this will take pressure off the current garage. Eventually, if the campus grows according to the Master Plan, another garage is going to be needed.

I think it is unacceptable that events like the rodeo can close the parking garage and turn students away. I think that the parking garage should be for students only and that more parking close to campus is necessary.

I would like to see additional parking for students

If they want to expand the population, the parking will need to be expanded.

I'm sure parking availability will increase once the construction is completed and the neighboring parking garage is reopened.

I've seen non-students parking the garage which leads me to have a difficult time parking for something that I've paid for. This seems counter-intuitive as there is a parking garage on the opposite side of campus that is empty.

Last semester, it was common to be unable to find a parking spot in the student garage. This semester it hasn't been a problem yet.

More parking

more parking other than parking garage

More spaces, which is being addressed under current renovations/construction.

My first year my badge stopped working for the garage. Opening the old garage would be awesome. It really shouldn't cost a million dollars though. Seriously, find a cheaper way and open it up.

Need a little more extend area

Need more parking spaces.
Comments – Institutional Facilities and Services

Normally the parking situation is ok, but for special occasions it would be great if the student parking garage is spared. Students are expected to be in class on time, and some of us really like to be in class on time, but for example today my class was at 10 AM, I got to the student parking garage at 9:28 to find out that I cannot park there because of some luncheon. I had to drive around to find the recommended parking lot which didn't look very safe to me, but I parked there and had to walk by the construction site. The visitors parking was mostly empty, but as far as I know, students are not allowed to park there before 5PM. Due to this ordeal, I got to the class at 10:04 and missed the first two slides that instructor talked about. On top of that it is 10:35 PM now and I still cannot breathe through my nose because I have terrible dust allergies. I have taken more than recommended dose of my allergy pills and used my inhaler, but nothing has worked so far due to the amount of dust I had to inhale. If I'm paying for my parking, I appreciate having the parking garage I was promised available to me when I'm trying to get to a class.

Obviously we need more parking...

Often it is difficult to find parking when all schools are in session. I don't think there will be enough parking in the coming years since we are expanding the number of students drastically.

often not enough spots in close proximity

don't let so many med students into the school

Open the other parking garage

OPEN THE STUPID OMCT PARKING GARAGE!!!! Why has this been sitting vacant for 4+ years when it would be convenient, safe, covered parking for us on the west part of campus. Has any of the administration had to walk down Mattison through the construction dust/asbestos while walking to campus from the west hospital lot? Q lot is insufficient, and will be more so when the campus police move.

Open up that garage.

Open up the new previously closed parking garage.

Open up the OMCT parking garage! spend the money to improve it!

opening the old hospital parking building would be nice?

Our options are very limited and when the lots are full, it is a long walk.

Parking garage is often completely full, with literally no parkings spaces available (even at the top). Auxiliary parking is very scarce.
Comments – Institutional Facilities and Services

Parking is a problem unless you get to school before 8 am.

Parking is a struggle to find during the morning hours. Having another parking lot open for students, faculty, and visitors would help with this problem.

Parking is always an issue no matter what campus you are on.

Parking is far too limited. I pay for a garage pass and it is often full.

provide more parking around all of campus

Sometimes the parking garage is full. It would be better if we had a bigger garage, or two that were open.

sometimes there’s no spots left

Taking out the parking lot on Montgomery and Camp Bowie when construction took out a lot of spaces used by students. Those spaces are still missed and make finding parking problematic for students.

the first month of school it is impossible to park in the parking garage...I understand that you have to oversell the parking garage but there needs to be other places to park.

The parking garage is too often always full. By the time I drive around to the other lots to try and find an open spot, I am late to class. Also the other lots expose my vehicle to debris and dust from the ongoing construction project. I will continue to park in the faculty parking lots on days in which no parking is available at the garage.

The parking garage needs a few new levels added to it, or reopen the other garage!

The student parking lot can fill up fairly quickly. There ought to be some kind of system to let you know that the garage is full or not so you don’t have to go throughout the entire garage before realizing there aren’t anymore spaces.

There are days that it is difficult. This is the only reason to like 8am class.

There are times when the garage is full and the closest place to park is quite far away. More parking would be nice

There is a large empty multistory parking garage across the street that used to be used for the hospital. I've been told that it will be several years before that parking lot will be available. Why?

There is not enough parking
Comments – Institutional Facilities and Services

There is not nearly enough student parking, at least not close enough to the school to matter. I refuse to pay to park, then have a five minute walk. The garage that used to belong to the old hospital should be reopened by whatever means necessary.

There should be more places surrounding campus for students to park if they do not have permits.

They sell parking passes with no regard to how many spaces are actually available. So I may be paying for something that I cannot then utilize.

They should have more covered parking available for students.

This is far out and ground below current EAD lot may be impractical to excavate. However, having attended functions with elder senior citizens with less mobility EAD incline is hard to walk up. If EAD main lot could be excavated to lower floor level where Reception Desk is located access by elderly on a flat grade would be enormously enhanced and multi level lot then achievable would allow two level access areas of current entrance and new lower entrance to elevators.

Those of us who do not want to have to pay to park are greatly hampered in finding parking at all, much less something relatively close to campus. Even those who pay find parking spaces limited in the garage if we don't need to be at the school until midmorning or midafternoon. We need more parking available to us!

To expensive for few places to park

unclear as to where to park if the one parking garage for students is full? happened to me one time and I got so frustrated I just went back home!

We need more parking!!

We need WAY MORE parking.

We pay so many other fees for tuition. Paying for a parking garage that is full by 9am and not having other places to park because of construction is ridiculous.

why should student need to park too far from library?

Why should we pay that much to park in a garage where there are not always available spaces?

Price (n=30)

A little pricey.
Comments – Institutional Facilities and Services

Allow students who are not on campus everyday to pay a daily rate for the parking garage or surface lots.

be able to pay with credit card

Cheaper Parking.

free for students

From what I understand, parking permits are currently available on a year to year basis. It would make sense to have the option to buy a pass on a semester basis, especially if you're not enrolled the whole year.

having to purchase a decal every semester is expensive. I am really considering parking far away and therefore saving a couple bucks a semester.

I don't have a parking decal because its too expensive.

I feel students who are in third or fourth year rotations that are only on campus a couple of months out of the year should have the option of paying a monthly parking rate.

I park off campus to save the money...

I refuse to pay for parking, so I take my chances on free street parking.

I think there needs to be more options for people who don't need a parking spot everyday, but need to park occasionally.

I understood when I obtained a parking permit that it is good for 1 year but you can renew only in August - so even though I paid for it in January it would have to be renewed in August whereas if I purchased in September I would pay the same amount of $60 and get the benefit of a full year?

i would like to see a decrease in parking prices for 3&4 years as we are only on campus a few times a year or at most a couple months. $90 seems high for that few of times.

It's a little steep. Parking at my last school cost $20 per semester, needless to say, I had sticker shock when I came to UNT HSC.

need parking for part-time students who only occasionally come to campus during regular hours; I would not mind paying for the service.

parking is too expensive

Parking permit prices should be reduced.
Comments – Institutional Facilities and Services

parking permits are a bit pricey

parking should be cheaper

Parking should be free for students or atleast built into the tuition cost like all the other little things that we don't complain about because we don't see.

parking shouldn't be so expensive

Please do not raise the price of parking, but I was happy to pay the fees this year and have not had much trouble parking in the East Garage.

Please do not raise the price of parking, but I was happy to pay the fees this year and have not had much trouble parking in the East Garage.

Reduce parking price

reduce price for parking?

The price is way too high

There needs to be more parking opened up for students who only frequent the campus twice a week and would not want to purchase the parking sticker.

there should be a special parking pass for those students who are on rotations that only come to the school 1 day a month, its hard to justify the price of the full pass. If there is something like that then it is not a well known fact and should be offered to student at the begining of their rotations.

Too expensive

Other Parking comments (n=14)

A bridge over the street so we do not get run over. Many drivers do not grant the right of way to pedestrians even over the crosswalks.

do not like attaching parking sticker to inside of back window-messes with tinting-like the hanging tags better-and easier to transfer for new car or if have multiple cars

I AM ONLY THERE ONE DAY A WEEK AND I AM STILL UNSURE ABOUT WERE I CAN PARK WITHOUT GETTING IN TROUBLE.

I pay to park in the student parking lot, and yet the paying students get kicked out for a meeting among community leaders. This is just annoying and not conducive to good classroom attendance.
Comments – Institutional Facilities and Services

I see a few people parking in the garage without the badge during the normal hour. Also the gate is sometime always open or broken

When the garage is full, it will be nice if there was a sign indicating this rather than having us drive all the way to the top to find no parking.

some of us actually pay for parking, but the gates are usually open. many people just park in there for free and dont get penalized bc the cops dont really check. its unfair to those that actually pay.

The gate to the student parking garage should be down at during all school hours to prevent those who do not have a permit from taking the spots of those who do have permits.

The parking for the special event on February 19th was very poorly planned. There was no advance notice that the top floor of the garage was closed. There was one attendant at the top of the garage sending students all the way back down to find parking elsewhere. There should have been an attendant or clear sign at the entrances to the garage to let people know the top floor was closed/reserved.

There needs to be yield and speed limit signs in the parking garages. People dont know how to honk and use the garage properly. They speed through and dont park in the spaces correctly.

Those taking up parking spaces who did not have a parking pass has improved! Continuing to monitor the parking garages will allow those of us who paid for parking to always be able to find a spot.

Why does the construction company take over 4 parking spaces in the lot by the old parking garage with a dumpster? With the largest class sizes the HSC has ever seen, you'd think that we would want to preserve what parking spaces that we can.

would be good to make sure the garage entry gate is repaired in a timely manner if damaged. If we are paying a contractor to run the access system, then they should be able to make repairs faster. It seems that the damaged gate will go unrepaired for over a week, allowing people who should not have access to the garage and take up spots that should be reserved for those that have paid for parking.

Your parking blows but you probably already knew that. Some of your parking meter people don't know all the rules either such as the parking meter man not knowing that people are allowed to park in the last few rows of the clinic parking to use the FAC.
Comments – Institutional Facilities and Services

Food

Stairway Café (n=139)

A cafeteria would be nice...

A full blown cafeteria would be nice...

A more permanent food court with more eating space is needed for the amount of people.

Again your food services blow but again you probably already knew that. I'm sure this will all be fixed once that fancy new building opens up.

all of these foodsevices are great

As part of the School of Public Health, the food it totally unhealthy and at times unappetizing.

Bring us a real cafeteria!!!!!!!!!!!!!!!!!!!!!!! Thank you.

CAFETERIA

Can provide teh students with more food options and better pricing.

can we have more than two venders a day and more space to eat

Carribean/ African vartiey please..

Costly.

Definitely need an actual cafeteria. One that is open more than one hour in a day and that has more variety. Most of us students have no choice but to go around/outside campus and eat.

Find caterers who will provide food for around 5$ rather than having to pay 7-9$ for a decent meal. PLus get a new chinese food provider, the asia bowl is some of the worst chinese food I've ever had.

Food isn't bad at Stairway Cafe. For the demands of the school, it is serviceable. Although, an actual cafeteria would be nice.

Food options are limited or too expensive when you just want something little so I never eat on campus.
Comments – Institutional Facilities and Services

Food service can be improved with a regular service system of dining hall (for example, Texas Tech University has a good example of good service facilities)

Food service on campus needs to be vastly improved. Hopefully this will be addressed by building B.

In desperate need of a real cafeteria open all hours for students.

Get a real cafeteria.

Given the importance of nutrition, it's amazing that most of our eating options are deep-fried, high in fat or full of empty calories. A little variety would be appreciated as well.

have more selection

Healthier options, or any options as far as the Stairwell cafe is concerned--are we still referring to that at a cafe? :)

Healthy options as well as options for vegetarians.

hire a company with more options, choices, and that can provide what the school needs in a better way

Hope have one more cafe in campus

I am jealous of the food options that will be available to new students in the future. Food options right now seem so limited and the prices are not that great.

I don't understand why there is no form of permanent cafeteria. The stairwell cafe seems like a good temporary solution, but it probably should have only been temporary.

I feel that there needs to be options for the vegetarians and variety for students. There are a limited areas for students to obtain a meal and if students forget to pack a lunch and only have a 30 minute break in which to eat, how will they eat...especially vegetarians.

I have not eaten at the Stairway Cafe very often, but I think it would be beneficial to have more options. Ideally, a food court would be amazing. Many student do not have time to leave campus for lunch and maybe dinner too, yet there are not many options to eat on campus, or even near campus. If there was a food court, it would be very much used and appreciated. I think there is potentially money to be made there. It is at least worth a survey to the student body.

I have not really eaten in the stairway cafe, so I cannot comment on the quality of food there. I would really like to see Subway come once a week.
Comments – Institutional Facilities and Services

I have seen other campuses bring in Chick-fil-a sandwhiches available for lunch, and I think this would be a great option to have here at UNTHSC.

I have suggested that we have a collaboration with a fastfood shop, such as Subway to help contribute to the school revenue b/c many students do not have the time to leave campus to grab lunch. And the stairway cafe does not take other than cash, which is often a problem.

I just feel like there aren't a lot of different food options. It would be nice to have a few more vegetarian options, particularly like some sandwiches or something simple in the coffee shop and a few more low-cost options as well. Thanks!

I know improvements are coming with the new building, but a top 10 hsc should have more eating options for staff and students.

I rarely use the stairway cafe because they do not take credit cards and they offer high calorie, high fat food. I prefer fresh fruit and vegetables.

I think that if this HSC wants to make money in the services/facilities it would be intelligent to offer a better Cafe. I know that the new building will do a better job of that. Students here have money to spend and the school is missing out on money that it could be capitalizing on. I was not a business major in undergrad, nor does it take one to realize it, but even though students tend to be here all the time, a larger cafe room would not only bring in those that have to stay here for lunch but those that would be ok with staying to hang out with their friends.

I think that it is crazy for a HSC that promotes health and awareness to not have healthier food options. The stairway cafe food is expensive and the cheaper alternative is health McDonald's. What message does this send to students, visitors, and patients?

Stairway cafe vendors are kind of expensive, I assume the school is making money off of the space. Why not provide the space for free to vendors who offer the best meals at the best price. Sure the school may lose a little money, but should it be the goal of the school to make money off the food we eat. It would be a student service. This is all however provided that my assumption that the school charges vendors a fee that substantially impacts the cost of the meals provided.

I think there should be a cafeteria on campus with a variety of options and with hours longer than what we have now.

the Stairway cafe is very good!

I would like to see all vendors take credit cards in the stairway cafe

I would like to see more food options available besides the stairwell cafe from 12-1pm, Mon-Fri.
Comments – Institutional Facilities and Services

I would prefer that the stairway cafe start excepting debit/credit cards

I would really like to see more of a cafeteria type food service here if possible. I think it would be nice to have some sort of Subway/Quizno’s, etc available daily as well as a salad bar.

I'm very disappointed with the food service at UNTHSC. It's very difficult to find anything that is nutritious for lunch and I almost always bring my own. Please when the new building is up rent a space to vendors that offer more nutritious foods - i.e. salads, more vegetarian options, less processed food, not fried/greasy, less soft drinks - come on this is a medical school (and more)!!!!!! We're serving food at this institution that would make anyone obese and/or diabetic if eaten regularly. Not to mention what gets served at most club meetings...

If we could have a permanent cafeteria it would help us a lot Plus could there be some more veggie options with the vendors We do not have one vendor with at least one complete veggie dish in the menu. This makes all vegetarians not even consider the stairway cafe as an option for lunch. I wish if we could have at least something other than veggie salad as an option in the lunch menu.

Invite more and better vendors to sell food on campus. we are always stuck with fun on the bun.no variety.

It is difficult to produce health meals, especially for cheap but better options would be appreciated.

It is really hard to find inexpensive health food on this campus. I would like to see more places, and more options for food.

It would be great to have more vegetarian and healthier food options on campus!

It would be nice if there was a monthly or weekly menu distributed for the stairway cafe so we could plan which days to pack a lunch or not.

It would be nice if we did have a better variety in the stairway cafe

It would be nice to have a cafe atmosphere. What I mean is that there is no proper area on campus to eat, like a food court.

It would be nice to have a more sophisticated cafeteria, perhaps in the new building

It would be nice to have more options and healthier food
Comments – Institutional Facilities and Services

It's not always possible to catch the stairway cafe during its hours. I am on campus for lunch on Tuesdays and it would be nice to have a variety of things to eat rather than the same restaurant every week on a Tuesday.

The Stairway Cafe is definitely better than nothing, but it could be much better with a little more selection.

Stairway cafe does not have the quality. There should be a regular cafeteria where quality food should be available at the best price.

Maybe offer healthier alternatives for food and move stairway cafe into more of a cafeteria like setting.

More eating options should be available. Lowering price on food would be great too. Adding healthier items such as fruit smoothies, fruit cups, ..and a greater variety of sandwiches, salads would be fantastic.

More food choices! Need a cafeteria...

More food options would be nice.

More food options, separate room to eat from library, larger space

More healthy options in the stairway cafe!!

Stairwell vendors. Spiral Diner would be a great place to contact; they offer real, healthy food. Salads with just lettuce and tomatoes are not a healthy food choice. It is quite a shame that a health science center does not stress healthy eating choices for its own students.

Aside from the chinese food, the rest of the selections are very subpar or overpriced (quiznos).

More options would be nice.

MORE SELECTION

More selection for lunch

More selection, cheaper cafeteria-style options.

More variety (healthy) would be nice.

More variety and selection would be nice at all of the above.

More variety of food offered daily,
Comments – Institutional Facilities and Services

Need a better cafeteria or eating options. I guess because this is a smaller school there are fewer options. I am used to attending larger universities that are tailored to the students needs.

Need healthier choices. Seems like all you can get around here is junk food, not very conductive to a healthy lifestyle. Some more variety would be great.

need more choices for food

need more fresh food options with longer store hours

need more healthy choices

Need more on-campus food/coffee options.

Needs more choices in the Cafe. It is the same food every week.

No vegetarian option on campus. I like having all of the different vendors come and serve different food, but that area does not have enough seating.

not enough healthy lunch options especially when considering price. i know there are plans for eateries in the new buildings but until then we often have to leave campus to get anything reasonable. how expensive would a small temporary deli type sandwich area be? maybe put it under the stairs or something?

Offer food that is more nutritious.

Offer something more healthy.

Offerings limited and poor quality. Worse for health institution, no healthy choices!

Food are also a little bit pricy especially in the Cafe. I usually get McDonald's (which is not a healthy choice either).

PLEASE, PLEASE, PLEASE, try and get for some of us a small cafeteria where we can get food most of the times we are here. It looks like if you dont buy lunch at the Stairway cafe between 11:30 and around 1pm, then you are not going to get a decent lunch without going out of campus.

possibility of other on-campus food

Quantity, availability and fair prices

School needs a genuine cafeteria.
Comments – Institutional Facilities and Services

should at more options for food, and more healthy choices available like fresh fruits and salads

Should have cafe availability as for longer

Stairway cafe has very less options esp nothing for vegetarians.

Stairway Cafe is awful. In the new buildings consider getting fresh salad bar, Chick-Fila, Pizza, burgers, etc..

Stairway cafe only takes cash which is extremely inconvenient.

The food and prices at the stairway cafe are not my favorite but I'm not sure if there is much that can be done about that.

The food in the cafe is overpriced for the quality you receive.

the food provided is expensive.

The quality of food offered on campus is poor. We are a health institution and we have poor food choices?? (sends a conflicting message) hot dogs, barbeque, enchiladas, nachos???? Salad/soup bar would be a nice addition as well as more breakfast options (yogurt, oatmeal, fruit, etc)

The stairway cafe is fine; it would be awesome if they could take down the wood paneling and just paint the walls white. It is dark and ugly down there.

The stairway cafe offers unhealthy food choices. The efforts to maintain the vendors are much appreciated, as are their services. I just lend the suggestion that the current choices are often unhealthy (chinese food, italian food--laden with grease, cheese, starch, etc.). It would be appreciated if more frequent options were available for healthy sandwiches, salads, soups or otherwise healthier options. Also, the fact that nachos and hotdogs are standard default fair does not speak well of a school devoted to health. That really made me raise eyebrows when I toured here (and still does:)

The stairway cafe does the best it can.

there has to better places to eat for a campus of this size

No breakfast options, lunch is either one option in the stairway or sandwhich from Java lab.

There is not enough seating or comfortable places to sit and eat.

There should be healthier selections in the food services. Perhaps getting caterers with healthier menus such as central market.
there should be more fruit stuff in cafe.

these cafes are more expensive and hence not very student friendly. Moreover they do not have most of the common foods. There should be a canteen to provide food on discount for the students or at least same price as the market. Most of them have no veggi options.

I highly recommend to have a franchise of Taco bell or Subway on campus. Almost every single university have on campus franchise of any one of these! I don't understand why we are not having one!

This is the worst ever food service in a campus. Everything is lackluster.

There is not adequate food services,

This is the worst thing about our campus life. The food is mediocre, the options are terrible

this school needs to invest more in vendors and having a cafeteria.

Veggie food issues. Also it is expensive. And no other options are available on campus especially CBH.

The stairway cafe could be improved by more variety or the addition of a cafeteria if we are going to grow we need a cafeteria and a breakfast option

The fact the cafe/cafeteria is located in a basement level stairway indicates the importance of food quality/ availability. I doubt very seriously a Top 10 HSC has food vendors in a basement stairwell

We have a school of public health, and all we have is that stupid cart? You have to be kidding me!!!

We need a better cafeteria.

We need a lot better food selection, like a fast food chain

We need a proper cafeteria, perhaps some outside commercial business.

We need a real cafeteria with healthier options.

We need cheaper options for lunch.

We need more choices for food.
Comments – Institutional Facilities and Services

We need more food options and a better eating area. This school seems to be big enough to warrant more food service.

We need more food service. Also, a lot of the students don't carry around cash sometimes and it's hard to buy something to eat for lunch because everyone (except for java cafe) doesn't accept credit/debit cards.

We need more options of things to eat

We need more variety of food and bigger cafeteria

We need more variety.

We need more vegetarian options. Possibly an indian caterer?

we need some food centers in the campus so student can get food easily meanwhile classes which should remain open during school hours and not only provide meal but also snacks.

We need some food places here. I am tired of eating the same thing. the food at the stairway cafe and java is just TOO expensive and UNHEALTHY. We are a HSC and we should be offering alternative, healthy food-not nachos and cheese. Also, we are students, stop ripping us off by selling salad for 7 dollars.

Who are you kidding? What food sevice? A cafeteria is long over-due!

Would rather have more affordable and healthier food in the Stairway cafe.

I also think that the stairwell cafe could use larger trashcans since the ones in there now overflow nearly every day.

It'd be nice to have a cafeteria.

More healthy options should be offered at a medical school.

more vegetarian options needed for stairway cafe

Java Lab Coffee Shop (n=48)

Again, Java Lab is closed on weekends = bad.

The Java Lab Coffee shop is too expensive!

Book/souvenir store to accompany either of the above?
Comments – Institutional Facilities and Services

java cafe really does not have enough products.

Coffee shop has limited options, especially in the afternoon and evening

Extended hours of service

The Java lab coffee shop should be open when the library is open full time.

Have more coffee shops. I have class only in the CBH so I never actually get a chance to buy coffee, but would LOVE the opportunity to.

I know it is hard for the Java Lab to turn a profit, but it would be nice if they were open more hours. A lot could be done with vending machines, not just coke and candy machines. However, this could pull profits from the Java Lab and not encourage them to extend hours. A suggestion to encourage the Java Lab:

I love our java lab!

I love the Java Lab - and the people working are always super friendly!

I LOVE the java lab!!!

I wish the coffee shop had some sandwiches or something instead of just candy and chips.

I wish the Java Lab Coffee Shop was open some hours on the weekends.

I would like a better variety in the Java lab

I realize the Java Lab is available, but the food items seem overpriced. It is inconvenient to not be able to stay on campus to grab a bite to eat and return to studying in the library, especially when you don't live nearby, like myself.

The Java lounge has some decent salads and lunch options. However, I think they need some competition, their prices are exorbitant.

Java Lab does a good job and the Fun On A Bun man is also really nice.

Java Lab EXPENSIVE.

Java lab has gotten some what better at being there when they are supposed to. They were in the habit of taking way too many smoking breaks and they were never there. Also, can someone request that they clean up? It is embarassing to have students tour our campus and there are a million boxes thrown on the Java lab floor as well as other stocking supplies.
Comments – Institutional Facilities and Services

Java Lab has made recent improvements but still seems to have limited selection

Java Lab is excessively expensive.

Java lab is too expensive for anything.

Java lab needs to be open on the weekends.

Java Lab personnel are GREAT (esp. XXXXX)! And their sandwiches are healthy and fresh!

Longer hours for the Coffee shop, especially on weekends would be nice

more hours on java lab

Also the prices for the Java Lab are outrageously high for everything but regular coffee and soda. The people are very nice and helpful.

The hours of the Java lab are very limited, especially when considering how many hours the average student spends in the library.

The Java Lab in the only saving grace when it comes to food and drinks on campus.

Java Lab is closed on weekends. Consider having open during weekends.

Please have more food store options.

Coffee shop should be upgraded to a textbook store.

School should include some other food stores on campus. The times java lab available is very less.

Java Lab could be improved if soft drinks, iced tea, and a larger quantity of lunch items were available.

The Java Lab Coffee shop seems to be a bit pricy. We are students so should not there be some discounts for us?

The school should subsidize the Java cafe so it can be open more hours to match the library hours.

It would be awesome if the java lab could also make smoothies.

the timings for the java lav coffee shop should be increased. Sometimes we study late in the night and there isnt any refreshment.
Comments – Institutional Facilities and Services

The vending machines and change machine are consistently broken or empty. Java lab is pretty good, but terribly expensive. We are living off of loans!

The Java Lab coffee shop is just okay, very little options, need more things to buy plus their hours should be extended a little to accommodate people who study late since we have nothing else to buy unless we drive some distance elsewhere which is distracting.

The Java lab is often out of sandwiches, teh fountain drink machine has not worked in a long time and the coffee is not very good at all- in my opinion.

the Java Lab has closes way too early and is very overpriced. Very disappointed in this area of the school!

I wish the Java Lab was open later.

We need an actual place to buy merchandise

we need more coffee shops or coffee vending machines although the library is open for long hours there is no access to coffee

Also, Java lab is not open enough. It needs to be open later.

Students studying in the library after 8 pm really have no food options for those late night study sessions. All we have are the vending machines which is not the healthiest.

We need something healthy that is open all the time. We need more food selection and this needs to be open the same hours that the library is open so that we don't have to leave campus to eat.

Vending Machines (n=75)

Some vending machines in the library stairway do not work

And there really needs to be a coffee vending machine if it can't be kept open.

As a health center is would be great to get some healthier options in the vending machines in EAD. (ie dried fruit, nuts, power bars etc)

at least the vending machines work

coffee vending machine for when cafe is closed.

Every now and then the stairwell bottled drink machine decides to steal money. This happens every few weeks.

Fix the food machines as campus vendors typically leave between 1-1:30
food vending machine in bottom floor of library never works

For a public health school need more nutritious foods and snacks in vending machines.

Get vending machines that sell water!

Healthier food option in the vending machines, please!

How long has it been that the machine in the stairwell cafe area has been out of order? Also, why can there not be coffee on weekends? This is the main reason why I do not study in the library then.

Also, the vending machines in the student gameroom are often empty of drinks, and we need more table tennis tables!

I hope we have more vending machines

put in more vending machines, but have timers set so that the vending machines are only turned on when the Java Lab is closed, at least for library machines, but maybe not during lunch.

I think the coffee vending machine idea would be good for when the coffee place is closed. The reason that would be a problem that I can think of is competition with java lab. That could be remedied by: offering the vending opportunity to Java Lab so they are not losing money via competition, stipulating that whoever placed the vending machine would have to make their prices equal too java lab basic coffee price (who would want coffee out of vending machine if java lab were open), or a machine that was turned on after java lab hours.

I think we could more healthy options in the vending machines on campus.

Frequently the vending machines are out of product and/or won't receive dollar bills.

I would like to see bottled water added to the drink machines in CBH.

I would like to see vending machines with water and healthy snacks, especially at the CBH building.

i would really appreciate if the coke machine in the student lounge was refilled more frequently since it is out of the most popular sodas run out more quickly than it is filled.

Vending machines should be functional at all times and stop taking people's money. plus including some variety in the vending machines would be a great idea as well as more locations so people dont have to walk some distance to grab something to eat from the vending machine.
Comments – Institutional Facilities and Services

It takes forever to get the vending machines filled once they have run out. Service needs to be more frequent.

It would be nice to have more options for lunch. Maybe even fixing the large vending machine near the stairway cafe and stocking with low cost food items would be sufficient.

It's been really long since I used the vending machine. The last time I did my money got stuck in it. We need more. Plus, we need water in the machines too.

Make bottled water available because the water in the fountains tastes terrible.

More 20oz coke machines. Price is great though.

More diverse vending machines

More healthy options should be offered to students in vending machines

More often than not the vending machines in the stairwell cafe are empty or out of order.

Need more vending machines.

Need to service vending machines more frequently.

None of the vending machines sell water.

Please please please please please add vending machines that sell water!! Soda is not an essential beverage! Water is! I am frequently amazed that there is nowhere on campus to purchase a bottle of water besides the Java Lab Coffee Shop.

Offer healthier options and better caffeinated beverages. We are a medical and public health school. Practice what we preach! Include water in vending machines and sugar free or low carb energy drinks.

I don't like vending machines and I never use them because all of the food that is being sold is nothing that I as a future doctor would say it's okay to eat... The medical community understands the detrimental effects of poor diet and un-healthy foods, yet we make it more available to everybody at our campus, and it's cheaper to buy something un-healthy than it is to buy something that is good for you. This is an issue with our current society, and perhaps I ought not to be too harsh on UNTHSC for it, but it is something I would like to see changed. I would like our campus to not stand to be the hypocrites that every other campus is. Let's offer better, more healthy food to our students and faculty and rid our campus of unhealthy foods.
Comments – Institutional Facilities and Services

often vending machine eat up the coins.

One of the machines needs to be replaced and/or updated. Put in some healthy machine or something that works and has food in it.

People would like to complain and say We should have healthy food at the HSC in our vending machines, but who is going to eat a banana that has been in a machine?

Please stock as many healthy snacks as possible in the machines.

Provide non-carbonated beverages in vending and coffee more readily available.

Vending machines are unpredictable regarding dispensing drinks.

Some of the items in the vending machines are pretty old. If they're not used often, it's probably better not to have items in those slots.

Vending machines don't work many times.

Vending machines need more healthy options with WATER!!

Start putting healthier snacks in the vending machines, like Baked Lays or stuff like that.

the vending machines do not return the change.

the vending machines are always broken or take up money and the coffee shop is expensive and not open enough..

The vending machines are broken.

The vending machines are often empty. I think it would be helpful to have them managed better to ensure that they are constantly filled, especially on the weekends when the Stairway Cafe and Java Lab Coffee Shop are closed.

The vending machines are often out of order.

The vending machines below the library do not carry water!!! This doesn't make sense at a health science center.

The vending machines need to be stocked up better especially the one's by the staircase. More healthy choices as well.

The vending machines sometimes don't work.

The vending machines to have healthier choices.
Comments – Institutional Facilities and Services

There are new soda machines (they have an open glass face and a little conveyor belt that transports your soda to the exit . . . i know you've seen them!) that hold 1 liter bottles and a HUGE selection. they would allow for a much better drink selection and would be able to sell more bottled water!

there is only one place to get coffee or water. Vending machines need more options.

Also, vending machines on the 4th floor are often out of drinks or out of order.

There is only one diet bottled drink option in the campus vending machines. Diet Coke. Therefore we are always running out of Diet Coke bottles down by the Stairway Cafe!

there needs to be a coffee vending machine operational when the java lab is not open

There really are not very many vending machines, especially for drinks

This is the main concern on campus! There was a survey for coffee machines instead of vending machines. If possible try to replace these vending machines which are having most of the useless items and I have never seen anyone buying any of the junk food kept in it!

We need vending machine for coffee.

Vending machines are overpriced, but more importantly I'd like an ice cream machine stocked with better ice cream choices.

Vending machines need to serve water!

Vending machines need water as an option.

Vending machines should be more plentiful and have a greater variety of foods/drinks, like GATORADE, etc.

Vending machines should be stocked at a little more regularity so that students and employees can load up on sugar!

vending machines stay out of order for long times...at spots.

Vending machines are often out of products or change. as their primary food service option.

Water in the vending machines.

We are a health science center and we serve high calorie, high fat, high salt, and high sugar content food in the vending machines. I realize this may be what staff likes to snack on, but is is hard for those of us who would like healthy alternatives to find
Comments – Institutional Facilities and Services

suitable snacks on campus. Also, when the coffee shop is closed, there are few vending machines that sell bottled water.

We could use more vending machines and food availability.
for lunch

We need to have machines that take credit cards. Also we need machines that work.
More machines will help too.

Would like to see bottled water in vending.

Would like to see the vending machines offer monsters or an equally stronger beverage.
Soft drinks are just not enough. Plus a variety would be nice.
Comments - Academics

Background: At the conclusion of each survey section, respondents were asked to suggest improvements for any of the areas listed immediately above. While a respondent’s comments may have spanned a variety of topics within a particular section, for the purposes of this report these comments have been divided and categorized by program. The comments were not edited in any other fashion, and do not appear in any specific order other than by the categories presented.

TCOM: DO (n=203)

General Academics

A suggestion would be perhaps to have better organization and communication between different professors who teach the same class. I think that this is a great school, but there is always room for improvement.

Actually listen to the students when they say something is wrong with the curriculum. Do not assume that complaints from officers are only of the officers, they are representing the class for a reason. Give us our due focus group meetings, and take criticism as if the administration wanted to better the school. Do not think that good board scores by the class of 2011 is due to the curriculum. This class works harder than any before it, and they have to in order to know what they should. Either get the old faculty back, or do a better job of preparing the faculty who will be taking over positions. At the very least, get experts in the field that we are learning to teach us. We really should've had an endocrinologist teach us clinical endocrinology. Invest a little more in our education. Wow, where do I begin? I believe it was the vision of former president that the TCOM produce the finest physicians that it could. A lot of resources were invested in medical education, but not useless courses like research grand rounds, community resources, and Phizer's interviewing sessions. There used to be a sense of pride about TCOM. Students could take comfort in the fact that faculty were preparing them for boards, for rotations, and for life as a physician. This is not the case anymore. What am I paying tuition for? Choosing not to post certain power points this semester was a huge mistake. It forced students to search out other means to learn the material. This included lectures recordings and power points from years past. By the way, the power points from years past look very similar to the ones the new faculty use. How can they get away with just changing the name on the first slide without citing where they really got the slides from? Just because doctors use Cecil's as a source of information, does not make it satisfactory for a medical student to be introduced to a clinical topic. We know nothing when we begin a subject, and a book like Cecil's is overwhelming. Let the teaching faculty do their job in the classroom. Do not just hold them responsible in the clinic where it brings in dollars. Also hold them responsible for a quality education, and SHOWING UP TO THEIR SCHEDULED APPOINTMENTS (ie post exam review.) When did TCOM decide that students needed extraneous courses like grand rounds, research grand rounds, and community resources? Were any of
the students surveyed on whether they wanted more courses in their curriculum? I believe a majority said they did not want the research grand rounds class, so why did we end up having it? It DOES NOT help us prepare for the biostats section on boards. It DOES waste precious study/destressing time that could be used in other ways. TCOM has an uncanny ability to take up every free minute you have during the day. If what we are assigned to do is read many pages in big books, why do you keep us at school for 8 hours and expect us to go home and read? Students would be much more efficient and happier could they get a good night's sleep and not have to spend late hours doing the assigned readings. The disorganization of the administration is apparent to the students, and it is stressing students out and causing a decrease of pride and increase in unrest and unhappiness. Certain faculty may think that TCOM students are “depressed”. Unbelievable. Instead of looking inside and trying to figure out what is wrong with the way things are going, they were quick to give a diagnosis (even without a physician's degree). I am appalled at the effort that TCOM has put into truly educating the future physicians of Texas. OMM. XXXXXX is a poor course director. Period. They must be in complete control of all aspects of OMM, and their micromanaging tactics are driving the students crazy. One week they weren’t there, and students were happy. We even got out early!! This environment was more conducive to learning than the stressful trials they put us through on a weekly basis.

Add more DO's & MD's with extensive clinical experience as teachers. I feel physicians are better able to put relevant medical school information into context than those whose focus is research. As a member of the DO program, I feel that our clinical experience exceeds that of the majority of other medical schools, both Osteopathic & Allopathic. In speaking with a variety of medical students across the state, I get the sense that we are exposed to a wider variety of clinical scenarios and are allocated more responsibilities. This is a great benefit for training at TCOM.

administration doesn't seem there unless you make the connection, typical though for a institution

Although some of the newly introduced faculty has not met my expectations, most of the faculty here offers a powerful learning experience. The curriculum overall, is relevant, although most of Clinical Medicine seems to be a waste of time, and the Cranial unit of OMT class is also not appropriate to teach at this time. When I think of how little I knew before I started at TCOM, the amount I have learned and prepared for in just 2 years astounds me! Satisfaction with my education cannot be measured by anything other than if the student is able to grow and learn.
Comments - Academics

As a DO student, I am sadden by the overall performance of the OMM department. The academics and leadership are so far below par that a tone of incompetence has been set. Thus most students have responded by only putting in enough effort to make a passing grade. The department is actually turning DO students away from Osteopathy, and in doing so making the debate of adding an MD school trivial. As a medical student, I am shocked that TCOM is ranked in the top 50. If the experts who perform the rankings saw the level of organization of core classes like Cardio 2 and Renal 2, there is no way TCOM would be ranked in the top 50. Frankly, I don't expect TCOM to be in the top 50 by the time I graduate.

As a student it’s hard to answer the curriculum question. The qualifier “relevance of” is a way to protect survey results b/c students don't know what is/isn't relevant. A problem does exist with the curriculum. One problem with it is the discoordination and lack of communication between departments. I suspect that there exists some turf war for the students’ time between systems curriculum, clinical medicine curriculum, and OMM. Redundancy occurs between the three. Scheduling conflicts recur. Does there really need to be “busy work” for the sake of giving students something to do? Many of the things that are scheduled for the students are good ideas-the variety of interviewing classes, community resources, research, bioinformatics, etc. However, how far do you push students in consuming their time and energy for good ideas/grant money over their basic medical education. The bottom line is that it's too much. Perhaps it would be different if the school were allopathic and didn't have the time consumption of OMM. Lastly, in regards to the curriculum, discontinuity exists from year to year. I don't believe that basic medicine nor the licensing exams vary that significantly annually. It would help students if someone would coordinate each phase of the education such that the curriculum is consistent between years. It would help if educators were given a syllabus that delineates the topics to be covered that matches with test bank questions and board relevant material. Too often we receive conflicting information from clinicians/educators that becomes confusing on test taking. In a nutshell, consistency, coordination, and consideration of “the most important items to cover” will improve the satisfaction of the students as well as the curriculum. I chose an osteopathic school on purpose; I didn't back into it like a lot of my classmates. Unfortunately, OMM has had a very combative relationship with our class this year. It's unfortunate because it has really left a bad impression on students and undoubtedly will steer them from practicing OMM. Why is it that when students make suggestions, complaints, requests that are contrary to the idea that “everything is great here” their opinions are devalued/discounted as a disgruntled or depressed student? It's much easier to not say anything at all, to be indifferent or apathetic, than to work to try to make the experience of TCOM better for ourselves and other students.
Comments - Academics

As far as Quality of Teaching, I feel that we are losing a number of our experienced professors, which will be a great loss to the following classes. I think it is important to do what we can to keep them around. As far as advisors, I would like to see each student matched to an advisor from the very beginning of their 2nd year. Someone to ask questions to throughout the med school process as we try to decide what field of medicine to go into.

At TCOM there are so many classes that are not conducive to student learning at this particular level of school. It is sad to see classmates show up for such things as BioResearch b/c there is a sign in and skip lectures instead. The curriculum of the medical school is so fast paced that an individual must cut corners or be left behind. Most students would rather attend lecture but due to the nature and rigor of the curriculum it is better to skip lectures and study on one’s own especially when afternoons are filled with classes that students will not not directly benefit from at this point in their career. For example, motivational interviewing does not need to be taught 3 times over the same topic, how about two times maximum? Community resources is of no use at this time of the medical career b/c students are trying to learn and focus on pathology and course room work, aside from that the course is assuming most people will do residency or practice in Fort Worth and while that may be the case, that change in life is at least 6 years from now and by then most students would have forgotten about the resources in the area. I understand the objectives behind motivational interviewing, bioresearch and community resources but they are not necessary, especially community resources, and are currently placed at an inappropriate time. Motivational interviewing will be helpful in the future but is currently just poorly scheduled and repetitive. Community resources is honestly no real value to me as a student and I do not think is necessary it is just more time that I can be studying and really trying to focus on my material that is relevant to me practicing medicine. I do recommend removing community resources b/c although motivational interviewing and bioresearch may be time consuming they will be of benefit later on they just need to be better instructed. I do not always feel like I am being taught rather I am teaching myself and I just pray I do it well. For example, Cario 2 and Endocrine 2 were poorly taught. Such topics as Diabetes and medications to treat it were never taught yet every professor said it will be a large focus of our practice as future physicians. I got answers right on the exam because I listened to audios and used power points from previous years. If this is the cause then why is this time not allotted as a DSA but rather it is a CIL which is mandatory yet not even informative. It has gotten to the point where it is pretty much every man for himself so if a professor is not teaching properly then it is better to leave the lecture and teach oneself. I do not mind teaching myself material I would just like guidance as to where to get the best material from. Also by myself and other students not showing up for class or CIL I do not want to jeopardize the priveleges of those who do attend, but at the end of the day if the material is going to be tested on and I do not think it is properly taught to me then I must teach it to myself at what ever the cost. In Cardio 2 reading assignments and powerpoints were not posted until a few days before the test. How are students
supposed to understand and retain the material if they are not given any guidance? At that point you are just learning to get by for the test but unfortunately much of that material will show up on the Boards and later on in life.

Being in my third year, looking back I wish I could have had a lot of the material we learned second year now when it's finally relevant rather than then when I had no experience. Now that these diseases are tangible and have a face, it is crucial that I know them inside and out. There was so much information during the first and second years it was impossible to devote enough time to each topic to understand it completely instead it ended up being a lot of memorization which is later forgotten. Also I felt like I got very little benefit from KBIT during second year. It didn't change the way I diagnose patients or understand disease which is disappointing because I feel like that sort of program could be potentially very helpful but it was too inclusive. With so much information, none of it is relevant when you are already burdened with other course work and simply don't have the time to devote to learning it. The greatest thing I felt I gained from Clinical Medicine was doing the OSCE so many times. I can do a physical cold now. However, I wish we had spent more time reviewing physical exam techniques and understanding why and how to do them. Memorization is ok at first but there comes a point where you need to understand. I also wish we had spent more time reviewing things like how to interpret lab values in clinical medicine and had more hands on workshops in things like suturing instead of writing admit notes, etc. Anyone with Maxwells in their pocket can write a note but it takes knowledge to competently interpret labs and imaging studies. We did some suturing in clin med but I wish they would have taught is to tie knots instead of just teaching us instrument ties. Teaching sterile technique would have been very useful as well. I think the teaching during third year has been superb with the exception of outpatient pediatrics which has some room for improvement. I felt like the teaching first and second year a lot of time lacked the true clinical insight that my third year preceptors provide because we were taught by Phds and not physicians for a significant part of the time. So much of medicine is a departure from textbooks and the wisdom of treating patients is invaluable to a student. I felt like motivational interviewing was valuable to some degree but after reading an article in American Family Physician this month on outpatient counseling techniques, and seeing that there are many others out there and that different approaches should be used for different patients I wish we had really explored some of the other options like the 5As or BATHE technique instead of repeating motivational interviewing over and over. I am very grateful for the clinical training I received through the ROME program which I feel made a HUGE difference in my ability to interact with patients. We had several video taped critiques of our interviewing that I think about often when I see patients. We also learned a lot more suturing which has come in handy. I think the most significant part of ROME was having a small group of people being mentored by a physician. Having smaller groups of students, say 10, to a mentor or an adviser would be beneficial. I often read about this in books about Matching and wonder why
Comments - Academics

TCOM doesn't have assigned mentors or advisers to meet with on a regular basis, when it seems other schools offer this powerful resource. I am discouraged my the persistence of problematic test and quiz questions which students are more than happy to point out flaws with but that remain incorrect year after year. There needs to be a better system of accountability and improvement. I am concerned that so many faculty have departed that the educational quality at TCOM will suffer greatly unless the working climate improves to a degree that our institution is once again able to attract physicians to teach. Most of all I was most responsive to learning and got the most knowledge from instructors who were respectful, kind, and concise. I feel like third year has made up for a lot of what first and second year lacked. If I were answering this question just based on years 1-2 I would say disagree for the reasons I listed in question 26. Learning medicine is already enough to provoke great anxiety and additional attempts to raise the class anxiety in order to enhance performance were counterproductive for me personally. Professors ramble on and don't cover tested material.

Board scores reflect education

CARA ROCKS!!!!!!! great school, great curriculum, great students, great location

Certain professors seem to be very unapproachable (e.g., XXXXXX) and I wish XXXXXX was more approachable in the sense that he would offer a more friendly countenance, rather than telling us so often to “suck it up” and do the work. He almost always seems to be in a grumpy or hurried mood, really never gives a proper greeting (esp. to students he doesn't know) and I didn't expect this from a Vice Dean. XXXXXX (now gone) was a lot friendlier. It seems to me that XXXXXX is more concerned with trying to intimidate us as first-years to see who can “survive,” so to speak. I have rarely heard him give out constructive criticism. We are working VERY hard, but I'm sure that this is all worth it. There have been instances where I feel that the school seems more concerned with trying to reach the numerical top, rather than student satisfaction, but on the whole, I am happy to be at this school, and I know it will take me places.

clin med and OMM and community resources take WAY TO LONG- they could be taught in half the time and we could have more time for sleep and studying for boards. the clin med department is a joke. so disorganized, disrespectful of our time, wasting our time. I hate that they make us do things several times, like watching movies on pelvic exams 2 times, and the comlex PE video 3 times is ridiculous. I need to spend more time on difficult things like cardio and neuro, not watching a video about a test I will not take until 3rd year. stupid. the organization of this school is ridiculous- we need to have only 3 semesters of OMM and clin med so that we can study for boards!
Comments - Academics

Clin Med in 2nd year should be service-based (as in 3rd year core clerkship rotations) instead of system-based. It would be more helpful to know how we are to perform clerkship duties specific in each rotation. As it is now, the course is too generic. Examples include how to perform and write notes for: post-partum exams, post-op exams, pre-natal progress exams, medicine progress exams, etc. It could still be somewhat coordinated with the 2nd-year systems courses. For example, internal medicine and family (maybe even some ED and geri) could be done in the fall when renal, cardiovascular, respiratory, heme, and GI are done; then ob/gyn, peds, psych, and surgery could be done in the spring when endocrine, reproductive, neuro, musculoskeletal, and psych are given. XXXXXX lectures are way too detailed for retention into the 3rd year for all but a small handful of students.

Clinical education department needs more staff. I love TCOM!

Clinical rotations seems to very very poorly organized. Our input was not even requested for the 4th year schedules i.e. I want to go into ER and my ER rotation is not until March. Now I have to try to find somebody to switch with me, when there isn't alot of free time going around. The poor administration puts undue burden on the students when we need LESS stress in our lives to that we can focus on our education. This is probably a problem with most medical education, in that everything we are taught is out of date by the time it gets incorporated into the curriculum. There have been advances in medical education, but none of them seem to be utilized. We are basically still on the Hopkins system from the early 1900s. Where are the problem based approaches and and emphasis on utilizing the journals which will define standard of care and how medicine is practiced?

Clinicians should teach clinicians. Too many PhDs trying to teach clinically relevant information. I feel like I will become a good physician if I can progress through my program, but also feel that some of the hurdles placed before us are a bit high for the time limitations imposed on us.

Compare the faculty curriculum changes to the student suggestions from the student surveys. I feel that TCOM gives me the work ethic and the additional training needed to be competitive with other medical students from different schools. I feel that more time needs to be spent on OMM palpatory skills during the first year of medical school though.

Continue listening to student input with focus groups and similar student input forums. I am learning what I need to be learning, the faculty and staff are helpful in assisting us in achieving our academic goals.
Course and instructor evaluations don't have an easy to find place to leave comments regarding what they liked or disliked about the course. I filled out 3 evaluations before I found a place to leave comments. I like this evaluation form, where I can make a comment after each question, specifying the reasoning behind my choice(s). I also think there should be more specific questions added to the evaluations, such as “Was the professor an effective communicator?” or “Did the professor adequately address questions from the students?” “Did the professor demonstrate thorough knowledge of the information taught?” (I don't remember if this last question is in the evaluation or not). I feel the current questions are broad and with some more specific question weakness in teaching skills can be identified and improved. Jury is still out, I think I'm too green to make this call just yet.

Curriculum: As a fourth year osteopathic medical student, I have found not enough of our past graduates are, in my opinion, utilizing OMM in their practices. Part of this stems from the lack of evidence-based research out there to support what we as osteopaths believe is happening when we manipulate our patients. A research month might be a welcome addition to our curriculum, wherein each student works in one of the ongoing osteopathic research projects or, if we are already involved in such, we continue our work with the goal of publishing something. I know as much as do the students at UT Southwestern and Texas Tech, the two Texas schools with whose students I have worked alongside on rotations. I also have found my knowledge to be on par with students from Yale, Emory, and Stanford--students of which institutions I have worked with in the Army. Additionally, I have a skills set that I am moderately to largely comfortable with (everything except some HVLA moves, anyway) that I can apply to further the healing and well being of my patients. My education has, colloquially put, rocked!

Do something to limit the number of professors leaving for other institutions. And don't accept the nonsense that it has nothing to do with the payroll policies that have gone into effect since XXXXXX took over. My education is self-taught almost entirely. The administration is trying to weaken the value of the DO degree. Finally, the departments seem to have no accountability for making mistakes.

XXXXXX, XXXXXXXXXXXXX, XXXXXXX, and XXXXXXX/ XXXXXXX/ XXXXXXX are great. Most of the cell/biochem folks are great. XXXXXXX is unprofessional most of the time, and he can not teach well. I wish OMM could somehow be taught differently; and I'm sorry to not be able to offer up a suggestion as to how. It is just not very effective the way it's taught. Because when I speak with upperclassmen/ alumnae, they seem to come out alright.
Comments - Academics

Each medical student should be assigned a faculty advisor and be required to meet with them at least yearly. Preferably, clinical faculty and not PHD faculty. Also, the department of clinical education is a joke. Either hire more people to handle the volume of rotations that they must handle, or shut the whole department down and hold students personally responsible for scheduling rotations.

Each professor that teaches a class should write their own presentation and test questions, not use past material and test question. The curriculum this year has been very broken and the expectations do not carry through out every course. Professors should be expected to know what we already covered last year so that we don't waste the entire course reviewing last year's material and not learning any of the new stuff that is on the test. Also the test quality has dropped dramatically. Tests should not be published full of typographical errors. Professionalism should be expected from professors not only from the students. Too many test questions are based on the particular doctors opinion not on the textbooks or set recomendations, and too many disparities are found within the same subject. There should be more unity throughout the course. People should be able to make comments and suggestions to the professors about the course with out fear of retaliation.Also if there are going to be all of this extracurricular courses taken place they should be better executed and should not interfere with the main curriculum. To schedule 4 hrs of an extracurricular class the day before an exam is pointless. No on is going to get anything out of the class becuase everyone is studying for the class and then resents the class. So instead of the class being helpful it is just a waste of everyone's time. These sort of classes should be taught the couple of weeks before rotations or graduation, not in the middle of the curriculum, they are not beneficial to anyone at this point in time. Expectations and the quality of education has quickly declined this academic year. Especially the second semester. I would hope that future doctors and those who teach them be held at a higher standard, not allowed to fall through the cracks because the school rather spend the money on advertising!

Ensure that faculty uses their evaluations constructively rather then ignoring the suggestions that students make. Keeping the administrative support staff, mainly in the OMM department, from showing disrespect to the students. I love TCOM and I am honored to be a student here. I wish we had more choices and the ability to make better schdules during the clinical years. I feel we do not get enough time/exposure to different fields 3rd year before making a decision on a career path in the fall of 4th year.
Comments - Academics

Even filling out this survey seems like a waste of time as I feel admin does not care about our opinions as students. Course evals = waste of time. Countless times I have seen students raise concerns and they are just brushed off by admin. By our third and fourth year of med school here at TCOM, we are very jaded by this whole circus. Most of the best faculty have left TCOM during my time here. The most effective faculty have a way of making concepts easy to understand and enjoyable to learn. These faculty members also inspire students to think outside of the box, work harder, and desire to better themselves as physicians. I feel fortunate to be the last class of students who have been able to work with these faculty members. I do not have much hope for the future of TCOM given its current leadership and the loss of so many influential leaders among its faculty including its Dean. Ultimately I know that my education is my own responsibility and most students at TCOM will feel the same and continue to excel despite the educational quality suffering in the future.

every other medical school I am aware of assigns faculty advisors (who are drs themselves) to help the students with setting up 4th year rotations and applying for residency. we currently have a clinical education department that refuses to provide information in a timely manner, will not respond to email except to say don't email us, and seems to provide so many hoops for us to jump through it is quite miraculously that any rotation is ever set up.

faculty not always seem like they're looking out for students, more so the money brought in.

Feedback from students is rarely acted upon particularly when referring to complaints against UNTHSC departments. The best example of this is clinical education (ie XXXXX's office), but is also applicable to financial aid and student affairs. Different years, different students, SAME complaints - missed deadlines, poor oversight by admin, 'lost' paperwork. Why are UNTHSC employees not held accountable to the same degree that students are?The current instructor evals are antiquated in terms of the faculty listed and there is not way to write in the appropriate person. Yet you make me fill them out regardless. With better support, I would have had better educational opportunities. But the admin is ok with being 'ok'.

For the most part, our curriculum seems to be designed to turn us into successful physicians. The incorporation of useless courses, primarily community resources, do not have any practical implications for either our current education or our future careers. If TCOM thinks that we need some filler classes, they should get rid of community resources, and incorporate medical business training. I've learned more than I thought I could, but in other arenas, my time has been absolutely wasted.
Comments - Academics

Have instructors who have taught the material before, and review the material before coming to class. Have a teaching class for teachers on how to preform lectures and CILs and what the difference is. All the new professors seem completely lost. Also have the professors write their own questions, using old professor question with out the material being taught is unacceptable. The faculty teaching second year curriculum are complete unprepared to teach the curriculum. The pathology department is the only department who knows what they are doing. We spend too much time trying to figure out information on our own instead of being taught.

Have more curriculum meetings with class officers or interested students. Clinical Medicine needs a major overhaul (more skills labs, better grading, less didactics, more practice with Soapore notes). Clinical interviewing is a waste of time, too many students in the group make it boring, silly, and unhelpful. Research methods should be taught as a 1 week class with an exam, otherwise, we don't take it seriously. I'm mostly satisfied by TCOM. I feel like I got left behind a little during first year eventhough I sought help from OASIS. Also, I feel like the OMM department needs to tweak their curriculum and break up classes into two 2 hour sessions per week. NO one has the attention span for 4 hours.

Hire better faculty that know what to cover. I understand losing faculty is a normal process but to hire new professors and not tell them what to focus on i.e. pathophysiology for 2nd years and not clinical practice. Either that or don't lead 2nd years to study for pathophysiology. In addition, please look at the schedule before you just place filler classes (Community Resources and Clin Med). To be honest, I am learning a lot in Clin Med but the timing is so hackneyed that it's hard to focus on it when I have other tests looming. Community Resources is a complete waste of time at this point in time; I believe it would be more applicable once we've entered 3rd or 4th year. Finally, OMM needs to get off its high horse and be more student oriented. Restricting all LGTs and any resources that helps students learn and imposing a objective grading system for practicals that is obviously subjective is not what I signed up for. In fact, my experience with OMM at TCOM has made me resent OMM when that was part of why I came here in the first place.

Hire more Clin Ed people to help facilitate setting up rotations. Recruit/retain physician educators who are--this is really important--dynamic teachers/have teaching awards. Get rid of 4 wk geriatrics requirement (should be one week like most other schools). Having a 4th year rotation in geriatrics when the student is entering pediatrics is pretty silly. We should build a neuro dept., so we can have a required neuro rotation. That way our grads going into primary care won't embarrass themselves when they have ZERO neuro skills/knowledge. Get rid of the required OMM rotation which is almost universally weak. Concentrate on improving the rotation for those who are actually interested. Clin Med: TCOM desperately needs an inspiring/dynamic teachers to teach physical exams.
Comments - Academics

Hire more D.O.'s too many MD mentors that don't teach/know osteopathic principles. Too many DO mentors are being forced to leave the institution and are being replaced by MDs

Hire quality faculty dedicated to teaching. After meeting many medical students around the country both on away rotations and interviews I confidently affirm my education is sub par.

I am concerned for future students due to the large number of faculty who taught me who have left or are leaving.

I am extremely disenchanted by the fact that our curriculum is one big research project to make money for some of the professors at our school. They have completely ran off the professors who actually gave a damn about our knowledge and education as they have traded them in for ones that will bring in money for research means. They have loaded our schedule up with useless classes just because they received a grant to do so. Some of our courses in the past have been taught by reputable professors who have now left so therefore we are stuck with having someone come in and tell us to just learn it on our own . (DSA = do it yourself because we are too lazy to pay someone to accurately educate you on this) I didn't pay to come to school to have someone tell me to go read a book and learn it on my own without any assistance. You can feel the frustration from the OMM professors as I don't believe that they are supported enough by the institution. It is only going to get worse if we add the MD program. Compared to other osteopathic schools, our school does not facilitated an appreciation for osteopathic medicine and those attitudes cause the students to feel the same way. I understand the institution is a 'business' but it is primarily supposed to be a facility for learning and earning an education that will drive our careers. As of right now, I would not recommend anyone who wants to obtain that to come to this school because over the 3 years I have been here, I have watched it turn to a place driven by money to primarily make more money for themselves and not give a damn about our education in becoming good doctors. The quality of my education is in the hands of a people who are driven by making themselves more powerful and wealthy and not by making sure that we become successful doctors. The majority of our class is disgruntled by the classes and exercises forced upon us that primarily exist because of a grant or so that they can be patented to make them money.
Comments - Academics

Our school has turned from having the primary focus as our education to what will make the school "look" better and make them more money. Most of our class strongly dislikes OMM which is sad considering we are an osteopathic university but with the way it is operated here, it is hard not to dislike it. By adding the MD program, I foresee it only getting worse. I already feel like the OMM department does not exist for our education but for the purpose of research and to make the school richer. Only a small handful of our students attended Convocation last year when it was only an hour away, and the schools that were significantly further away had a lot higher attendance rate. When speaking to some other osteopathic students from other schools, it is obvious that they really have a strong appreciation for OMM, but they also have resources and school structure that facilitates those feelings. The students all can foresee the direction that the university is taking and many are very disgruntled about the quality of education we are receiving and the "useless hoops" they are having us jump through to make THEM money. Our class will do good on boards because there are many highly driven individuals in it but I can assure you that it isn't a result of some of the additional courses that they have burdened our time with.

I am extremely dissatisfied with the current state of academics at the school. The students are drowning and the administration doesn't care. Most of the professors do not lecture on the material they are assigned and they don't write the questions on the exam so when it comes to exam time the students have been lead off a cliff. Endocrine 2 is a prime example of what has become of TCOM. Every lecture was a waste of time, but we are required to be there. That is four to five hours a day wasted that could have been more effectively used with self study. Nearly every student used the material from last year b/c this year's material was of no use. Half the time the material is never posted on time. A lot of the professors never respond to students question emails. It's unacceptable for professors not to show up to class or to be late. It is even more unacceptable for the professors not to show up to the post exam reviews. When the professors do show up to the post exam, they are usually stubborn as a mule. When the class is showing the professor the evidence of why the given answer is wrong but refuses to listen. It is really unhelpful for the school to schedule classes 8-5 the day before major exams. Especially with classes that have nothing to do with the exam. The school wants us to treat OMM as seriously as are other classes, but the school doesn't treat it that way. We had classes 8-5 on thurs with an OMM exam Friday morning. And then to top it off they schedule classes for the rest of the day. We are humans, we can only take so much. The students are drowning but our calls for help are ignored. I fear that the only way the administration will start to look into the student concerns is when the board scores go down. Then the school will show what they really care about: the students or the scores.
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I am not quite convinced of the effectiveness of the 'asynchronous' learning yet. I think even when a 'random' piece of information is presented, it could be given a little more of a basic introduction to orient the student. For example, I recall talking about Addison's Disease and Cushing's Disease early on in CILs, but only being told the symptoms. It would have been much more effective a learning experience to at least be told that Cushing's involved too much Cortisol which has these effects..., and that Addison's was the destruction of the adrenal gland, which eliminates these hormones, and has these effects... I am not saying that any real detail had to be presented, but more information than what was provided would have been better. Overall I am satisfied. You only get out of an education what you are willing to put into it, and I am putting everything I have into learning this extensive material. One particular course that really should better organized is Clin Med. This course covers valuable skills, but I feel like I am not really being taught those skills as I am having to work extra hard to figure out what those skills and techniques are.

I am now a 3rd year DO student at TCOM, but over the first 2 years of my education, there were many areas that I felt could have been streamlined or adjusted to give more time back to students. I am happy to hear that the OMM dept has changed its method of delivering lectures as the PTR lectures were not very effective. Kudos! During the second year, and especially during the second semester, the four hour block for clinical medicine should have been changed to give students more time to prepare for board exams. Other medical schools are given a light schedule in the months leading up to boards and they continue to out-perform our school on the USMLE. I hope changes can be made to make better use of that important time. I would also like to have seen courses end on Fridays (instead of Mondays) to give students much needed breaks during the long semesters. As part of this team, I feel that I have learned and developed a good foundation for my medical education. I do not “strongly agree” for the reasons stated above. The calendar and the course load could have been better structured to give students a few days to rest. I have also been disappointed that we have lost some outstanding faculty (XXXXXX, XXXXXX, XXXXXX, etc.).

I am very unhappy about how the MD/DO degree option has been affecting the campus.
I believe TCOM offers everything vital to the medical student's future success. I believe that, overall, TCOM has a good core curriculum. With the transition to new teachers, there are always growing pains. I would especially like this area addressed. Especially with new teachers, it often seems that they're unsure what areas to cover. It would be excellent to give them a list of objectives/areas that need to be covered within a course, and do this as much in advance as possible (at least a few weeks). This would allow them adequate time to prepare materials rather than using a previous professor's materials with which they are unfamiliar. I also see that some professors are unsure of how much detail that they need to cover. Especially for our clinical faculty, they either go into too much detail or not enough, since typically they are not teaching from a textbook. A set of objectives/areas to cover should be supplied to them well in advance of their sessions. Regarding faculty advising, are we supposed to have advising? Careers in Medicine is a good resource, but I've never heard of faculty advising. In addition, I think that the evaluation system needs to be updated...again. It's nice to be able to see now how faculty are using it; however, I feel that there needs to be areas for written feedback for professors. I often feel that my evaluation has been inadequate because I can't leave specific feedback for a specific professor. I can leave written suggestions for the overall course, but I don't think the 1-5 scale adequately represents my feedback for each professor. Regarding administrative support, it would be ideal if we could get a professor's lecture materials at least a week in advance to be able to prep for his/her lecture. I understand that this is not always possible, especially with clinical faculty, but I believe that it can be accomplished especially with lectures that are similar year to year. Clinical faculty could be encouraged by being sent a document with a deadline for submitting their lecture material that also lists the particular areas to cover within their lecture. Additional classes that have been added to the curriculum have been a common cause for concern for many of my classmates and I. While I see the value of adjunct classes such as Community Resources and Biomedical Research, they have not been presented well. At this point, aside from a few anecdotes, I think I could have been handed a United Way Blue Book and learned just as much from Community Resources. However, I honestly can't think of a way to make this class more interesting or relevant. Sorry. Biomedical Research is a valuable class, as we will be reading research papers for the rest of our lives. However, first of all, none of the required textbooks were on our book list so nobody bought them. Secondly, the books are written for researchers, not medical student, and therefore are difficult to read. I think using something as simple as First Aid (or another board review book) would suffice and make the material much more relate-able to medical student. I know that many of us have not previously had a course in biostatistics, and I think that many people do not understand the basic concepts, and this makes the class very intimidating. You can't understand anything unless you speak the language first, and so I think the first few sessions of the class need to clearly, and in plain language, define some basic statistical methods (i.e. what a p-value is, when to use a certain test - chi-square, t-test, ANOVA - and how to interpret these results). I think somehow this information was given to us, but it
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was not reinforced with examples and seemed very abstract, and I know many of us didn't understand any of it. Then, I think that you can move on to beginning to read scientific papers, and these should be papers relevant to what we are studying in our systems course. You've got to crawl before you can walk, and I think most of us still haven't stood up. I think TCOM has a great faculty and a good pool of docs from which to pull good clinical educators. Though there have been transitions and growing pains with new professors, overall, I feel that I have gained a significant amount of knowledge. I think we receive a well-rounded education that, while time-consuming at times, will help us to be better suited to address our patients' concerns, not strictly limited to their diagnosis. The first 2 years seem to be all about passing the boards to make the school look good. I imagine the experience is similar everywhere else. I'm not learning how to become a doctor until I get to touch patients. Until that point its just another SAT/MCAT-like rat race disguised as something real. I'll play along to get what I want but there should be a better process to get there.

I chose the wrong mentor and now I'm stuck with his mania . . .

I dont even know where to begin.

I don't even know where to start with this one so I'll go from the top. Relevance; I think the material is relevant for a medical school with the exception of the courses such as community resources, research oriented classes, and other random courses, which seem to be there due to some grant money that is being given instead of the fact that they are relevant or necessary. While these classes may help make us a more diverse physician, it takes valuable study time away from the students. I know that the class averages are still high and the majority are doing well, however it is at the expense of student satisfaction. I have personally seen XXXXXXX (not sure who is reading this) ask a student what he thinks about student morale and received a comment that was much different from what that student expresses on a daily basis. Dr. Ransom, you are the HSC president, I completely support all of your recent decisions that have been made and the ones that are rumored of you planning on doing, but you simply cannot ask students at the library what they think of anything because the majority of them are scared to respond because of what may happen. I know that this may seem ridiculous to you since you probably did not attend a medical school where you feared what the administration would do if you expressed your opinion, however this faculty runs this school as if it were a military medical school. We are constantly reminded of wait until “Dr. such and such” hears about you arguing this question, not attending this useless class, or finds out you showed up late to a required event. This is ridiculous, if we are expected to behave as “professional adults” should we not also be treated as such???

Quality of teaching: there are some very good professors in this school and others that are in the complete opposite end of the spectrum. XXXXXXX, XXXXXXX, XXXXXXX, XXXXXXX, XXXXXXX, XXXXXXX, XXXXXXX and more, however there are professors in this faculty, both first and second year, that make a few
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students wonder how in the heck they were allowed to go in the front and teach. Course and instructor evaluations: These are definitely not used effectively. How do I know this, well its simple, I, as numerous other students, have friends that are now 3rd and 4th year medical students whom have expressed what the previous class complained about and it was not resolved. Also, one professor in particular has expressed not reading the course evaluations since after reading the first two or three, he decided they were too negative. Administrative support: if the support that we receive consists of great job we had X A's, Y B's, Z C's and only W failures, keep up the good work guys, this is pathetic. Also, whenever a student that is average or below does poorly on an exam or even ends up failing the course, the student is told by numerous people that he/she must not have studied hard enough or must have wasted too much time. I personally have gone through this, have spoken with a student that actually flunked out and was told this, and have even spoken with other students in both the first (2012) and the second (2011) year classes about this. OASIS has become a haven for “do practice questions” and “don’t waste time”. I wonder how many of the people that have had to go to them for “academic support” would not have had to spend time with them if some of these courses, especially those after the first year basic science courses, were taught or organized in a manner that was more conducive to learning. For instance, students in the second year have to go out and ask previous years if they have old notes, outlines, or even recordings of professors that were here years ago since they are still using questions from those professors. I have nothing against using questions written by other professors, this would be absurd on my or anyone’s behalf, however when we spend a good portion of the time in class being taught by a professor whom fails to note the importance of a certain subject and then find a good percentage of the questions on that exam on the same exact topic and it is written off as “oh it was in the book”, it gets to a point where you not only question why you went to class, but the sanity of those making an argument that because there was a paragraph in the 200+ page suggested reading we should have been prepared for a certain question. Especially when you go to find out that other students that had recordings or notes from previous years, not just 1 year ago, got the question right because it was in a slide. This could easily be solved if we took the approach that numerous other health science centers are taking by providing the students with a note taking service or a packet that has the material they are expected to learn. I know that this suggestion will be written off by those opposed to it by, “if we did that we would not be teaching the material but only preparing them for exams”. Lets be honest, if, hypothetically, we were offered a packet with the material we were expected to learn, we would not just be taught the material but also know how to take a test, including the very important USMLE as well as the COMLEX. As for the division of academic support, I don’t know how to fix that because I really don’t know that there is much anyone could do to clue you in as to how to succeed in medical school, when they personally have not gone through it. If someone has taken pathology or even has a Doctorate in Pathology, is it still the same as the medical student whom was required to learn that material in, what seems like a much shorter period of time?
Comments - Academics

I think its best to go back and get 3rd and 4th years that were average or slightly below average and ask them what they did to get better grades, because if you bring in someone whom has made As on all exams, how will they be able to relate to those that have not done as well academically. I think that doing this survey anonymously may be one of the first actual steps towards finding a solution to the problems that are present in TCOM as well as the other divisions at the HSC. I wish you the best of luck XXXXXX, this is definitely a difficult task, but as you have shown in the past few months, you will do what you think is best for the health science center and not what will make you the most friends or keep everyone happy. I feel very satisfied with the education that some professors have contributed to my learning, however there are some that I cannot even explain how poor they are. I think that this could be solved if there were a packet given to students at the beginning of the year, such as southwestern or UTMB does, which has been modified year after year. Also, since I know how faculty likes to interpret suggestions around here, I will clarify a little more. This packet should not consist of the word documents that has “course objectives” that we already have access too, but should be the powerpoints or outlines that are already roaming around. This will be very difficult to do, because it will require faculty members to take responsibility for what they put out, therefore I understand that it will take years before this is put into effect. Therefore, may I suggest that the first year that something like this be attempt to be put into effect, they hire a notetaking service as well as ask students to please donate any notes that they have received from previous years, in an anonymous manner, so that they may help to compile a “study packet” for the class. I personally would donate anything that I have received and while I cannot speak for everyone, I can say that I have spoken with others and they too have expressed their willingness to help towards a useful cause such as this. I know that we are competitive by nature, however it has gotten to such a ridiculous point in some of these courses that I would rather donate whatever I have that another person may not, and have an idea of what is expected of me to learn, instead of have the upper hand on someone whom may not have anything at all. XXXXXX, I know that if you try to bring something up like this you will receive a lot of "hell" from faculty, but I plead you to please look into creating some sort of organized packet of what is expected for us to learn instead of being given reading assignments from Cecils and Robbins in a time period which is unreasonable. While you are probably thinking, it cant be that bad, medical school is supposed to be hard, I AGREE. Medical school is supposed to be hard, however there are courses, especially second year where you feel like you dont even have a clue what you have to study because you are given reading assignments that are too large to do in the time given. I wish you the best of luck, this will probably be more difficult than getting an M.D. school since it will personally affect every faculty member that teaches for the medical school.

I don't have another comparison. I am learning what I can and enjoying it.
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I don't know why this question is even asked. I don't know how many evaluations I have filled out or how many people I have made suggestions to and they all fall on dead ears. Maybe someone could actually use the information they have already collected, process it and make the suggested changes. It seems we are building a new and expensive building, adding “ground breaking” classes, and letting the core education fall between the cracks.

I don't think most people put any real effort into the evaluations because we just want to rest and get our grades at that point. Also, the questions don't really seem like good measures, but I can't think of suggestions for that right now. The teaching is really up and down - some professors are great and some are awful. Things are generally relevant in the main courses, but there seems to be a lot of busy work in community resources, ethics, clinical medicine, etc. These classes are just not organized in such a way as to help us learn. Hint: This busy work type stuff, scheduled the day before tests, is wasted...completely wasted. And efforts to keep us from studying for our tests during this time is resented. Also, the fact that we do not have syllabi like every other med school absolutely blows my mind. I was told by med students from all schools that we would know exactly what we were expected to know in med school, that there would be no guessing like there was in undergrad. This is not true at TCOM, except for when specific questions are given away, which doesn't really help us. For example, nobody takes embryology seriously, including the professors. Embryo really needs to be its own crash course right after cell science, at least as a big picture, because it needs to be learned sequentially. Individual lectures within systems courses would be okay, but only after a big picture course first. I love TCOM. I feel like we do get a lot more than other schools, which is ultimately a good thing if we can actually learn all the extra stuff. The challenge for ya'll is that no matter how much we want to learn OMT, learn physical exams, maintain our humanity, and be well versed in community resources and cultural sensitivity, we are worn out and overwhelmed by all of it. Some of the classes just aren't conducive to learning (Why am I paying so much to watch clin med videos from the 80s, usually the day before a test? Nobody learns like that!). The administration needs to be very careful with scheduling the extra stuff. Also, the lectures need to be well screened, because some of the material has been worthless at best, and irritating to many (community resources could be nicknamed “white people feel guilty class” based on some of the lectures). The lecture on abuse was probably the best one, but even that had a lot of extra information that was hard to follow by the end of the 2 hours or so. And as far as regular lecture, its just all over the place sometimes, and it seems that TCOM isn't really doing whatever they can to help us learn the material no matter what. Why is it a problem for us to learn over the internet? Why can't we have a transcription service? If you really want to be a stickler about attendance, which I don't get, at least let us have a transcription service that requires attendance. The problem is that no matter how great you are at taking notes you will always miss stuff, either because the pace is just so fast, you can't write and see what is being pointed to (ex: histology lectures) or you just can't pay attention to every word for 4 hours. We basically need to
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transcribe lectures anyway, but its too much to do by yourself. Syllabi that have everything organized in one place would be helpful. The school recognizes that we all learn differently, and encourages us to study based on our learning styles (hence, CAP), but then doesn't provide us with resources that actually allow this. If we learn the material, what does it matter if we learn it in the classroom or on our couch or how we did it? Again, I love TCOM. I love the diversity of the people, the hearts of the faculty and staff, the DO mentality and the brotherhood within the classes. But the lack of organization in all aspects drives my type A mind nuts!

I don't think the administration on the 8th floor has any idea about the needs and wants of the students. They never visit the classes or clinical sites and they make poor decisions based on that. I think they need to hear more from the students but they seem to turn a deaf ear. I believe I have gotten the best education that is far superior to the other medical schools in the state of Texas. I think the most money for the school comes from the medical school which makes it the most important out of all the schools. This comes my perspective as a medical and graduate student.

I feel I will be well prepared for residency because of the training I received.

I feel like I am paying someone else to tell me to teach myself. I feel like there is no organization in our lectures and no guidance in our learning.

I feel like i wasted so much time trying to figure out what to study, and i could have learned so much more, and been so much more prepared for my boards and rotation if the professors had given us reasonable resources to master and then others to supplement. Currently they'd assigned us more that was possible for the average Joe to master, forcing us to pick and choose and play Russian roulette hoping not to fail each exam.

I feel like our classes does a good job preparing us for our futures, but at the same time there are a lot of classes that I feel like wastes the students time rather then help them.

I feel like the format of the schedule can be improved and more time can be given to students for elective rotation time.

I feel like they I have been adequately trained to go out in the medical world.
Comments - Academics

I feel like we have lost far too many quality teaching professors and have not done a good job replacing them. Those courses that were once benchmark courses are now mediocre at best (endocrine, reproductive, cardiovascular). Furthermore, students are expected to use book sources to cover the material expected. Myself, among others, have found this to be a very inefficient method of teaching when powerpoints were provided in the past. There is simply far too much information available to be expected to dig through all of it to find what is relevant. I am not happy with the quality of teaching for our second year. While some of the newer professors are wonderful, such as the pathology professors, much of the newer staff did not do a good job presenting clinical information to us. I have constantly been confused with what I am expected to know and the lack of powerpoints available to us has become a problem. On more than one occasion I found out about a powerpoint after an exam when it would have provided me a few valuable points.

I feel like we have tragically lost some of the best teaching faculty that we had. Also some of the faculty advisers seem a little unapproachable to students that aren't their favorites or top of the class. I feel like I have received a quality education that is comparable to schools around the country.

I feel like with the recent changes in administration (dean, faculty, president) the future of TCOM education is in trouble.

I feel TCOM does a good job of preparing us for board exams and clinical skills.

I feel that 3rd year is disorganized. It seems like we never get our schedules until the last minute and we are not informed about what to expect. Most of the time the meetings that are supposed to provide us with answers end up being a waste of time with no one able to answer any questions.

I feel that I am getting a good education even though it is slowly killing me as I am undertaking it. I talk to my friends at other medical schools, and even though they have a life, I know a little bit more than they do.

I feel that I am getting the highest quality of medical education possible, especially by getting an education in manipulative medicine and a thorough grounding in anatomy.

I feel that I've been well prepared for standardized exams that I have taken. I also feel adequately knowledgeable in clinical and hospital environments.
I feel that the systems curriculum is extremely relevant. However, I feel that the extra courses: Community Resources, Ethics, Clinical Interviewing, Bioresearch are all incredibly time consuming and detract from time I could be studying for the systems course. I think all of those courses could be made relevant, but the way they are taught now feels like it is taking away from important study time. I have been incredibly frustrated by bioresearch because I do not feel that I am gaining an appreciation of statistics that will be benefit me for the boards through the experience of the course. Again, I feel like it is a filler in our schedule that prevents us from being able to study systems material. I have taken statistics in both college and high school and have felt more confused regarding statistics since we began the bioresearch course. I think some professors are excellent (XXXXXX, XXXXXX, XXXXXXX, XXXXXXX) and come extremely well prepared and allow us a significant amount of time to prepare for their lectures and CILs. Many other professors, however, seem to wait until the last minute to post powerpoints or reading assignments, don't post any objectives, or post assignments that are entirely too long/unrealistic given the emphasis that will be placed on material. This was most evident in our cardio course and for the most part, things have improved since then. I was however, incredibly frustrated during Endocrine as I felt the first week was rushed and then second week we spent too much time on details and management (something we had been told we would not be responsible for until 3rd year) and the exam questions didn't reflect the material emphasized in class. I do not think the instructor evaluations accurately measure quality because I don't think they are asking all of the questions that need to be asked. They do not ask about the effectiveness of an instructor's teaching style, an instructors expectations regarding student preparation for a lecture or CIL, etc. These things can all be explained in the comments section, but I feel the questions that are answered by multiple choice only target more superficial issues. I have not been able to see the benefit of change that comes from evaluating instructors but perhaps the first year class has been able to experience this more. I have felt that our class has experienced a lot of firsts and perhaps TCOM is working out the kinks and learning from how we respond but I think it has been hard to be the first class to experience a lot of the new courses and instructors all at once. Please see above comments. I feel like a lot of time I could be studying is spent attending bioresearch, community resources, ethics, and clinical interviewing lectures. By the time I am finally out of class for the day I feel extremely tired and it is much harder to accomplish the quantity and quality of studying I would hope for at the end of each day. Additionally, I feel that most of my class chooses to skip these activities or do other things during these presentations (such as studying) which makes me feel very bad for the people who have given of their time and energy to prepare and present for us. I understand the benefit of these courses, but it almost feels like we do them too often or too much. It's hard to find a lot of benefit in community resources as I know many of the resources may have changed by the time we graduate and many of us won't practice in Fort Worth; so the course seems irrelevant. I think a course that informs us on how to learn more about them in a more general way would be more beneficial, and perhaps rather than an entire course, it could be a
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few informative sessions on networking with local organizations. I have felt we have done entirely too much clinical interviewing. I understand its importance and do feel that I have gained skills from practicing it, but feel that we have practiced so much that we all resent it. At times it almost feels like the administration is looking to fill our schedule so they continue to add more of these courses and sessions when I think they are in excess. I wish that I felt I could devote more time to studying rather than being in class. I also wish I felt that all instructors were prepared and informed us of assignments and expectations early enough so that we could prepare.

I feel the Clinical Education Department needs more staff to handle the volume and process of helping 3rd and 4th year students set up rotations in a timely manner. As far as basic sciences and board scores, TCOM more than adequately prepared me for clinical rotations.

I have been able to secure many great residency interviews.

I have been very frustrated with the curriculum. I think there are too many distractions. Too many activities that do not help us prepare to treat patients, prepare for boards, or in any way help us or the field of medicine. Suggestions for improvement: Eliminate medical informatics, grand rounds. Advise the OMM department to relax, and realize that they can not add more and more expectations onto students who are already involved in the most time intensive field imaginable. I have mixed feelings about this. There are some really good instructors here and I tried to reflect that in my surveys. But all in all I found this institution to be beyond frustrating. I felt that at times I had to succeed in spite of the school. I feel like various departments; OMM, Clin Med, Systems, Med informatics, were very insensitive too the amount of work being placed on the students and continued to, in a very destructive and distracting manner, selfishly require more and more of us. I feel that due to the complexity and excess of their requests I spent less time learning important information. As a consequence I have had to work harder than was necessary to keep up and my preparation for board exams has suffered.
I have been very upset with the quality of the teaching that has taken place this year. Too long have we been riding on the successes of the past few years when the professors that created those successes are no longer with the school to teach us. The curriculum is sick. I am constantly torn with the relevance of what is being taught for boards and what is being taught for real life. We are in a world of tests right now and the course needs to refocus on board tests and not on management (although some is good). OMM written tests are a joke and make me want to quit DO school; they do not reinforce what was taught in lecture and in the PTR. This is especially sad for the people who came to this school that were extremely interested in OMM (like myself) but have been totally turned off on the subject. Another problem is the lack of the administration listening to the class officers. It seems the administration thinks that the officers are only whining and it is not the true feeling of the class, well I am telling you that you should be listening to them and not write them off because they are a representative view of what is going on in the class. XXXXXX was a huge loss to the school, and the lack of follow up/communication from the administration about the events that transpired is appalling because the university starts and stops with TCOM. XXXXXXX vision is not the vision I see for the university and was not the reason I chose TCOM over other schools in the state.

I have learned immense amounts since I have been here, most of which is very relevant, and many of the professors truly facilitated my ability to learn the subject matter.

I know the secretaries bust their butts to make sure all the schedule updates are taken care of, files are posted, quizzes are printed . . etc. Give those ladies a raise! They truly keep the institution moving and are an invaluable resource. That being said, the quality of the second year TCOM instructors has been lacking. There have been a few good instructors, XXXXXX, XXXXXX, XXXXXX, XXXXXX, but sooooo many others have been scattered, disconnected, or taught us things we weren't tested over. This year has made me very happy that i can teach myself, because otherwise i would have failed out already. From a business standpoint, if my 2nd year education was something i could could buy off of a shelf, i would have asked for a refund by now; i mark indifferent because 1st year was run pretty well and the phase director, XXXXXX, is amazing and really cares and really wants to help make things run smoothly. Second year is pretty bad, and i don't feel like our phase director, XXXXXX, is interesting in hearing any of our concerns. Some of the courses seem to have been just thrown together at the last minute (Cardio 2, Renal 2, Repro 2) and the overall morale this year for the class has been pretty low.
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I know we fill out those evals after every class. The disappointing thing is that when I look at the schedule from last year, everything is exactly the same. The powerpoint presentations are the same, the instructors are the same. If we hated an instructor and evaluated him/her badly, I'm sure last year did too... But yet they don't change anything--- they just show up again with the same powerpoint and same test questions. OMM, Community Resources, and Ethics are huge wastes of time. I have talked to students at other schools and when I hear that they only have 2-4 hours of class per day, then they are left to study the rest of the day, I get really mad. We are stuck in class for 6-8 hours most days doing busy work and learning stuff that is not going to help with being a doctor or taking boards.

I may complain about school sometimes, even often (around exams), but I am grateful to be here and don't fail to recognize TCOM's commitment to academics and teaching. I feel that other medical schools may be more laid back, but that the method of teaching and testing at TCOM makes for better doctors. For me personally, it forces me to study and stay on top of things so even though it might be not fun sometimes, I know it's necessary. Also, I am impressed by TCOM's responsiveness to student concerns and feel that this does not occur as often at other schools. Proud to be a student of the top osteopathic school in the country! I trust you guys know what you're doing and have no real complaints! :)

I realize that the faculty on this campus is going through alot of changes, however, the new faculty seem to be thrown into their teaching duties without alot of preparation. Several instructors have used lectures from professors that are no longer here only replacing their name on the first slide. This means we are just getting recycled material over and over with no updates to the material. I think the new faculty should be making their own presentations so that they can include their new insight to the subject. Also, on several tests we have been tested over material that was never assigned or covered because the tests are being reused without anyone looking over the material and tests to make sure they cover the same topics. Our most recent exam was most frustrating because there were several pharmacology questions that were not covered until the lecture the afternoon AFTER the test. Also, due to the weather we were given an OMM test that included the 4 hours of class that had to be squeezed into the next lecture day. The test should have been rescheduled so that we did not have to cover 8 hours of material in 4 hours with only two days to review it. I also think that DSA assignments should not be double booked during other classes. Each class, ie Clin Med, OMM, the core subject, ethics, community resources, bioresearch, clinical interviewing (I'm probably forgetting a few because we are so overloaded now on extra classes) and so on has their own reading assignments and in order to complete all those assignments we should be given that DSA time to complete it. We are in class most days 8-5 including lunch due to grand rounds, I know students at several other institutions that are in class far fewer hours per day. I believe that a large part of our time is taken up with these "extra classes" that the schools is being given grant money to conduct (clinical
Comments - Academics

interviewing, biostats, KBITs). Perhaps the school could limit the number of these trial classes. Another problem is faculty not coming to post test review. This is not a sporadic problem but a chronic problem. Maybe if these reviews were not scheduled for 8 am more of the faculty would be able to show up. I knew I was looking at a lot of work when I was accepted to medical school, but compared to alot of my friends at other institutions both osteopathic and allopathic I am doing alot more. I appreciate everything I'm learning but I think that scheduling could be better and some of the “extra classes” could be reduced, eliminated, or incorporated into the core curriculum. Also, when complaints are made, they seem to fall on deaf ears.

I think in general I am getting a good education. As with any institution, there are some courses and professors who are better than others. I do feel like there could be some changes that would make it easier for the students to learn the material better. Presentations (in terms of ppts) are not always made available very quickly, and in addition the quality of the notes can be very variable. I feel like the schedule could be designed a little better, and that we could be informed about some of the items on it in a more timely manner. There have been times where we are unclear about what a particular block of time is for until the day before or the day of.

I think it is good. Maybe do more to reduce attrition of teaching faculty. I have done well on rotations and boards. I think that is proof.

I think steps have been taken to use teacher and course evaluations more effectively. Another issue that I know has been a plague at the school is the schedule. It is never posted more than 1 or 2 weeks in advance and even then it changes often. It makes it difficult for us to schedule vacations or even to participate in gov't proceedings or set up preceptorships. If we could get the schedule set at least a year before we would be able to know what days we can count on to use toward preceptorships/service hours. It would cut down on a lot of frustration. The excuse we get every time we bring this up is that “that will never happen because we are a progressive campus and things are always changing.” I know that we are a progressive campus but in my mind that is no excuse for poor organization. In fact as a progressive campus we should be an example of planning and excellent organization. I am prepared.

I think that second year has been problematic in the faculty area for awhile. Having enough faculty does not translate to having the right faculty to teach all classes. I think the curriculum itself is fabulous. I think that once we REALLY address the lack of faculty, it will be facilitated much better. One thing that I want to know is why we keep changing it if it is so award winning? I am tired of faculty adding to our already very busy time because they got a grant to teach me something. I am learning nothing from our bioresearch class and very little from community resources. Last year's informatics course was valuable for the grand rounds perspective but that is the exception.
Comments - Academics

I think that some of the instructors are not very effective in teaching their information, but it seems that although they have probably consistently received mediocre evaluations at best, there has been no change to their teaching. I think that my education is good, but I get the feeling that this institution is not in a good place which makes me nervous.

I think that the method of teaching for OMSII's is geared toward one specific type of student who can read everything and teach themselves. Those of us who need additional teaching and explanation have a difficult time. I also think that the OMM tests are not accurate representations of our understanding or level of effort and I don't think that the practicals should be graded. I understand that they are trying to not let them be so subjective but all the students know that if you get certain teachers you will pass and others will nit pick every move you make and no matter how well you think you did you will probably still have to remediate it.

I think that we need more professors in the clinical years of medical school that have had experience. I am tired of being given the excuse that there is a 3 year learning curve to adjust to our teaching style. This is bogus. What about those students that are stuck learning during those years? In my opinion, this school needs to do more to keep good faculty here. Over the past 2 years, we have lost so many excellent D.O. faculty and not adequately replaced them. I agree, but only because of the significant effort that I exert to learn. I think the curriculum is well thought out, but not always well executed. The goal should be to strive for printed notes packets, that would be consistent with year to year. A Top 10 HSC needs to have a method to ensure that a complete spectrum of information is presented to students from year to year, even if faculty leave or are replaced. I think that for the money that I pay to attend this school, I don't receive enough direct instruction. All too often excessive pages from many different books are assigned and no objectives or concise instructions are provided. To reiterate, the medical school needs to put more effort into standardizing the curriculum material into printed notes packets!

I think the OMM course needs to be overhauled. There are too many inconsistencies within the notes. The teachers all try really hard, and are great professors. The notes just need to be more standardized. By far, this would be my biggest complaint of my education.
Comments - Academics

I think there is very little actual teaching that goes on. Reading from a ppt slide that we can read ourselves isn't teaching to me. Especially if it's just a summary of the reading/book. There are exceptions to this. Off the top of my head, XXXXXXX and XXXXXXX do a good job of teaching and educating. Even if I've read the material I feel like I come away with even more after their lectures or CILs. But the majority of our faculty or professors just read off a slide. Please don't require me to go to classes when I can read on my own. Evaluations might better be reflected in the next years curriculum changes than what I will see so my opinion on that might not be accurate. I think I'll come away with a lot but I think it might be more due to what I put into it rather than what our professors brought into it. Adding more and more classes seems to be diluting our strong points. I think most of the extra classes that have been added are good ideas but poor executions (comm resources, research, etc). A lot of our classes seem to be a waste/inefficient use of time - and we don't have the luxury of time or it's at the expense of our well-being.

I would like to mention as a 4th year there have been changes mostly the exodus of the best teaching faculty since I was in my first 2 years so my exceeds expectations for quality of teaching is reflective of that at that time. However, from what I understand that is no longer the case and countless number of 2nd years have relayed to me that their complaints are not being heard, there are few to no focus meetings concerning curriculum so they just don't bother trying to voice their opinions anymore. My suggestion for improvement would be to start with the leadership because ever since the “become a 10 health science center” began the focus for quality education particularly in the medical school has quickly decreased. The quality of teaching is lacking as evidenced by the loss of qualified teachers and the pressure to get rid of faculty not performing research. Researchers and teachers are very different. As far as rotations are concerned, I have been satisfied. I think the office for and support for setting up rotations needs to be looked out very closely and the bottle neck needs to be removed. I'm graduating before the quality of the school continues diminishing.

I would like to see some way of ensuring a more uniformly high level of quality in the teaching for years 1 and 2 at TCOM. I feel like some of the professors are among the best I've ever had at the university level. Others are so surprisingly poor as to be shocking that they are allowed teach at TCOM. I don't believe that having published a bunch of papers on a topic should qualify one to teach it. I would much rather be taught by someone that knew much less about things like neuroanatomy (for example) than XXXXXXX knows, if that meant the person was an effective educator. The whole thrust of my TCOM experience has been to prepare me to take Step 1 this spring....I'll let you know after that!
Comments - Academics

If the president or dean(s) at TCOM think that students are happy and satisfied with the way things are going at TCOM, they are very wrong. I dare and BEG for ANY member of the administration to get a 3rd party who won't take names to interview groups of students in TCOM 2011 to see if they are happy and I KNOW that you will see that the students are very angry at how things are being handled and taught at TCOM.. Of course when the president gor dean goes up and asks me how I feel..what am I supposed to say? “Oh, do you have an hour for me to tell you all the crap the students have to deal with?” No, I'm going to protect myself and tell you that things are mostly fine and be on my way. The curriculum sucks. Plain and simple. Do you guys not realize you are accepting smarter people each year and that is the reason why people are doing better on boards and exams? It is not the curriculum, it is the students. It's not the I-clickers where 1/5 of the class cares to participate in and wastes our class time either. Why are we learning about treatment options (step 2) type questions when we haven't taken step 1 yet? Why do different professors have powerpoints that have conflicting information? Why do I have to rely on 3rd and 4th years to get old files that aren't posted online? Why do professors assign a ton of pages to read in a day or so (in some cases 50-100+ I think XXXXXgave is over 100 pages in Cecils over 2 days and gave a CIL that picked the randomest things) in Cecils or Robbins and end up asking us questions not related to what we read (hence, I no longer waste my time reading Cecils). Why do we have faulty questions year after year? Do so called "course directors" not realize that if is more than 1 right answer on a question during the test that I might pick another answer choice by using common sense and process of elimination? I have been screwed by this time and time again when it turns out that credit was given for 2 answers. Do you guys not realize that when professors leave (not suprising), that their replacement will be teaching different thigns and emphasizing different things? Therefore the test questions that theye wrote back in the day are now going to be missed because the new guy would not have talked about them. Case in point, XXXXXXXtried to play it off by acting like he made all of his endocrine powerpoints (which we were never given) when really he just took XXXXXXXpowerpoints and changed the background! I cannot believe he had the nerve to say that he put the slides together at times. Once again, the only way we knew this was because we had 3rd and 4th years tell us and give us old files so that we were able to study them. He was a very poor teacher. He needs to be wokring as a doctor, or grade school teacher like he was in the past because he is not fit to teach medical students. Once our wonderful classmates complained about his teaching, it only made it worse because he began to improvise. It wasn't surprising to see question on the exam that were never mentioned in class...and I just had to guess. Meanwhile, the selfish gunners in the front 2 rows (as I later found out) had XXXXXXXaudio lectures from last year and listened to those and were able to get questions that everyone else missed. So TCOM, what are you trying to do? It's obviously not about how much you study and how smart you are, it is about who you know from 3rd year and 4th year and who is in your little circle in the class that will give you resources that will put the rest of the class at a disadvantage. I have never been so discouraged and depressed in my life at how
Comments - Academics

things are going with school. I cannot believe I am paying you guys for this. Never have I felt more discouraged with school. Teachers - most of your teachers will make me get up at 8 and listen to them read off powerpoint slides word for word, not emphasizing anything. Am I supposed to learn from this? Make your teachers accountable for how they teach. I can wake up at 10 and download the powerpoint (if it is available) and read it and get more out of it at my own pace. But wait, class is mandatory, I forgot. I am an adult and I know my studying style. I also know my responsibilities, so if my grades are fine, leave me alone. I could see if I was a borderline student, you could then email me and tell me I am required to go to class. That is a better way of doing it than the way it is now, where the people in the 2 front rows start saying it is unfair because they have to go to class and others don't. Evaluations - obviously nothing is being done because I hear the same thing from 3rd years and here it is again. Same old stuff they had to deal with, we do. Evals are a joke. I fill them in to get my grade because I know nothing will be done. How about we get feedback to the class responding to what we say and promise to change them for next year or for upcoming classes. I will do them properly then. Looking at the calendar, we aren't getting much time to study for the boards. We have so much DSA this semester in Neuro and MSS. How am I supposed to get my board studying in if I am too busy putting up with the school's crap. Half the time I don't know what to study and I end up wasting my time. Ask the class what “Bic's notes” are and you will see how much we depend on previous years notes to survive. Last thing. Think of it this way. 2 people with the same IQ and brain are in the same school. Student A has notes from previous years and friends that tell him what to study, and ignores everything that his school tells him to study. Student B keeps to himself and reads everything the school tells him to read and doesn't rely on other people for advice or old notes and outlines. It is clear who will do better. I experienced it myself from first year to second year, and so have others. It shouldn't be about who you know. Our class is composed of students A and B and everything in between so you can see how unfair it is for students. My suggestion: cut the crap in the curriculum; stop bogging us down with unnecessary stuff so that we can learn what we need to know and not waste our time. If the curriculum was set so that student A and B would make the same grade, no one would have a problem. But that's just not that case, and even it it was, student B would have no time to eat and sleep. I barely have enough time to do other things, and I don't do half the stuff that is asked of me. Yet I do fine. I am a mid - high B student if it matters. I attribute this to old notes and talking to other people, and NOT the faculty and curriculum. I really wish to hear a response to what I and others are saying when President Ransom addresses these issues later on. I would like if our students were asked confidentially how they are really feeling (and make it MANDATORY). XXXXXXand the OMM department are just purely there to make us miserable. OMM speaks for itself. I don't think I need to say much about it. Its basically the worst TCOM has to offer put together once a week. Teachers (XXXXXX) are bad, test questions are bad. Bad curriculum and Bad faculty = Not Satisfactory.
Comments - Academics

I'm very unsatisfied with the curriculum. There really needs to be some thought into which doctors (DO and MD) who are selected to teach our core classes. Quite a few of them appear to have no teaching experience and do not follow simple rules, such as not asking patient care management questions. This school was nothing like I imagined it would be. It's very political and the new MD/DO idea is angering a lot of people. It feels like the faculty have no desire to hear our suggestions and shrug the students off as being “unprofessional.”

Improve the office of medical education - 3 people just doesn't cut it. Too many of my classmates have had rotations canceled because the paperwork didn't make it from the office to the rotation site in time. Rotating at other schools really drives this point home when you see what a real medical education office looks like and how it should function. Much of my learning in medical school, as I imagine is the case everywhere else, was self-taught. The faculty that were present prior to XXXXXXXXarriving were excellent teachers who made sure that students not only learned the material but were also able to apply it. XXXXXXX, XXXXXXX, XXXXXXX, XXXXXXX, and XXXXXXX were all excellent teachers who presented material in a way that made it relevant to clinical practice, and I feel I will be a better physician for having had them as teachers.

Increase the number of advisers available for the different fields especially radiology and anesthesiology that we can shadow or do research projects with. Replace the great faculty that were here last year. Increase the administrative support for all the 3rd and 4th year students setting up rotations etc. Instead of focusing to expand UNTHSC, perhaps we should invest money to hire quality professors (or have new professors undergo a training program), keep quality professors, and expand resources for students. How can TCOM remedy this problem? BRING BACK THE QUALITY PROFESSORS. Don't rely on an internist specializing in OMM to teach Endocrine. The curriculum at other medical schools often provide a syllabus that contains all the information you might need to know to succeed for the entire year. TCOM should adopt this policy. There is no faculty advising. Due to the new expansion of UNTHSC, I feel that priorities have been shifted from education and the students. UNTHSC is sacrificing the quality of education in order to expand the school. What is more important? That the community knows how UNTHSC is “Fort Worth’s Medical School and More” or the quality of doctors the school is producing? How can UNTHSC become a top 10 medical school when their medical students are unhappy? If at one point I was happy to be accepted into TCOM and attend here, I am no longer naive into thinking that TCOM is the premiere osteopathic medical school when most of their students are dissatisfied with the quality of the education they are receiving.
Comments - Academics

Instead of spending money on new gyms, cafeterias and gardens, the school should be paying teachers more so that the students get the education they deserve. I admire the professors and educators that teach because they love the students and have a passion for teaching. I was excited when Dr. Ransom first came to our school. I supported him at his inauguration and had hope for the future of TCOM. Now I realize that he is the last person to listen to students' needs. The faculty is struggling to gather enough clinicians and professors to put together a class. Even when enough clinicians have been found, they are too inexperienced and the students endure the consequences. Earlier this year I served as an ambassador, encouraging new applicants to see the benefits of TCOM. However, after receiving a below par education during my second year, I would not advise anyone to come to TCOM. The students are great and XXXXX and XXXXX, among others, really do care for their students. However, XXXXX remains and will not listen to what the students have to say. The education we are receiving is not what is should be, and that seems ok for him.

Instructors would laugh about student's evals in front of the class - not so effective

It is hard to know how relevant the curriculum is when I haven't had to apply the knowledge for boards or in clinics. I can only presume that the medical education I receive here is at a level of excellence based on our previous record, since I don't have much to which I can really compare it. I am generally happy with the personnel on campus and the overall attitude and atmosphere of our school. It seems like a friendly and personable environment, which makes for a good place to learn.

It is medical school, it is not suppose to be easy.

It would help to actually listen to student feedback instead of ignoring us and moving on with the status quo.

it's hard for faculty to make changes with the evals when students just mark answers and go instead of taking them seriously, so that being below avg is partly the students' fault. i, of course, can't compare our education to another med school since i've only been at the one. but, i don't feel that i've been cheated out of anything that another med school has. i just don't like- i hate actually- that i was schedule for 2 away rotations (odessa and tyler) when single people with no obligations in DFW didn't get scheduled for away in either 3rd or 4th year.
Comments - Academics

It is frustrating to not have the support of the OMM department when we are supposed to be an osteopathic school. If a question or suggestion is brought up to them they act abrasive and defensive. We were told to “shut” up by the director at one of our PIAT meetings since there was a discussion about a question. There were no points involved so the students were not concerned about points, they were truly concerned about the concept. I found that extremely insulting and was disgusted, however, I as do many others, do not feel like we can talk to someone at this school without the fear of being penalized in some shape or form. The evaluation should be AFTER THE LAST POST EXAM REVIEW! Why would someone collect incomplete data? That's exactly what you are doing when you make us evaluate a course before it's officially over. I have to disagree with this for various reasons. The biggest frustration is having courses that are not organized well, where professors teach what is not relevant to our exams, and where there are no documents or powerpoints to guide students. Sure we make it, the reason we are here is because we have always found a way to make it, but it's killing us and sucking us dry along the way, and it is getting a lot of students angry. We ARE and WILL ALWAYS be the voice of TCOM. What do we tell hopeful students when they ask us about TCOM? What are the great things we can say? That they overload us with nonsense classes, that they have a handful of competent professors teaching, that the best professors are gone because of political drama, that we have paid a lot of money to only end up teaching ourselves, that the divorce rate for TCOM students is higher than other med schools because TCOM makes it impossible to have a family life... the list goes on. If you really want to know what TCOM alumni think then next time we have a telephone fundraiser sit next to a student and call a recent alumni- and just listen to what they have to say. Yeah it made us sad too, I don't want to be that bitter about the school I graduated from. LISTEN, I MEAN REALLY LISTEN if you truly want to make things better.

Just keep listening to the students' voices and adjusting as necessary. I feel I have been taught adequately and been given the tools to compete with those around me in the clinics.

Make evaluations that are specific to different activities and to be able to comment during rotations during 3rd and 4th year. Not everyone receives the same information during 3rd and 4th year find a way to make sure some basic info is given. Better communication about rotations especially receiving information in a more timely manner. OMM has not been carried into 3rd and 4th year. Too many good doctors have left due to political problems. Fourth year rotations are not set up in a timely manner and the clinical department should help us more to find rotations that expand our experience.
Comments - Academics

I've posted a handful of daily course comments on the eval.hsc.unt.edu site and I've NEVER seen anything done to rectify any problems or concerns I've raised, so I've given up. Many of the new teaching faculty for DO Year 2 do not teach with precision and efficiency and the learning process is greatly diminished as a result. There needs to be faculty and back-up faculty cultivated for each lecture for 1st and 2nd year DO classes so there's continuous and steady talent teaching, instead of a revolving door of new internists. Clinical Medicine 3 and 4 also needs to be reduced in hours because that is the least time-efficient class filled with so many unnecessary hours of virtually no worthwhile knowledge or skills being taught/developed. CM3&4 seem like total reruns of CM1&2. Because it seems like when it comes to the curriculum, assuring that each lecture is worthwhile and taught well by capable and experienced teachers, the school has definitely failed the 2nd Year DOs this year. And, of course, all of the many, many components of Clinical Medicine are generally a poor, excrutiating squandering of precious and limited medical school hours. The new research component, the community resources course, redundant interviewing and ethics small groups, etc. add little to clinical education relative to the many hours expended.

It would be great if someone could look over our entire curriculum, not just the core classes, but OMM, clin med, community resources, and biostats - but everything, and balance out our curriculum so that it is not overwhelming or unreasonable on certain weeks. If an outside person (perhaps even a fourth year medical student) could sit in on random days and evaluate how to improve our curriculum to make it better (what is truly useful and a good use of our time), I think that it would help the 2nd year curriculum tremendously. We have some good faculty, and I like the fact that our school strives to be better. However, I do not feel that this school has many student advocates - advisors and administrators who have the students' best interests in mind. It feels as though the attitude of school officials is more about what our school can accomplish rather than the importance of each individual student as a future doctor in our society. There have been instances when the school did not truly try to help a student if the student had extenuating circumstances, and would often resort to the “solution” of having the student repeat the year. I have heard that a 10% attrition rate is common among DO schools but not among MD schools, and that truly disappoints me, because DO schools should be better in promoting the wellness of the each student in his/her entirety and in trying to help each and every student. Especially if TCOM is one of the best DO schools, we should be different, and setting an example of what the DO philosophy is about to other DO schools in the nation.
Comments - Academics

Make opportunities for doctor-student mentorship more easily accessible. Also include a few “lectures” from the class ahead at major transitional times (like the beginning of the semesters) that are designed to give the student perspective on what to expect and how to organize your time.... basically, what they wish they had been told and what was the most valuable advice they were given at that phase of their education. As for the course evaluations, one form for all courses is an ineffective way to evaluate them. A few questions can be compared across the board, but so many questions are relevant for one course but not the others and many questions that should be asked for a particular course are left completely unaddressed. (I am mainly referring to course evals for the clinical rotations.)

Many times when I complete a course evaluation the actual faculty members that I worked with are not even listed in the drop-down menu. I have very little faith and no information that the preceptor gets my feedback. It has been expressed to me by the preceptors that they do appreciate the feedback but don't feel they receive it in an efficient manner. This computer program needs revamping. It is relevant and works for the didactic courses in years 1 and 2, but when evaluating rotations in years 3 and 4, it leaves a lot to be desired.

Medical Students need an assigned adviser to help with match and residency selection.

More attention in making the schedule. Some days could be better.

More clinical education coordinators. Stop the removal of top clinical faculty. I received most of my education from top professors/assistant professors before they left. Overall, the curriculum is strong and XxxxxX does a fine job of maintaining quality.

More efforts done to recruit DO teaching faculty. I feel this way because I had the opportunity to be taught by great teachers such as XxxxxX and XxxxxX. Since then, professors have been leaving the school, whether for personal reasons or increase in job status. Other schools are recruiting our professors but it is not clear what is being done at our school to recruit DO faculty. The students feel left out of the loop so to speak.

More flexibility with the administration to help students with difficult situations that are encountered during the 3rd and 4th year of medical school.

More organized approach to notes. UT Southwestern gives outlines instead of powerpoints for courses. Certain professors are more disorganized than others, but overall I spend a lot of time organizing the information that I could have spent studying or practicing for OMM.

More teachers who are teaching in their researched/studied field.
More often than not we are left without adequate course material to study from, teachers who are not in touch with what's going on in the entire course as a whole, and an absurd amount of time spent in class. I am endlessly tired of inefficient wastes of time such as clinical/motivational interviewing and "biostatistics". They take up too much time and in the end we get nothing from them. I'm so tired of being treated like a child in regard to attendance policies when it comes to these classes. If I feel they're a monumental waste of time, I simply will not go. Also, OMM is its own entity...I disagree that allowing them such independence is in any way beneficial. They do whatever they want and absolutely NEVER take into consideration our comments/concerns. Most I know have become disenchanted with OMM in general as a result of a tremendously poor and immature course director.

Most of my complaints are in the OMM department. Many of the faculty members, especially XXXXXXX, tend to be very difficult to meet with. Many people in my class wanted to meet with them with worries about their grade in the class. They never got back to them despite numerous emails. Then a few of them didn't get passing grades. I can't help to wonder how they would have done if they had met with them. Also, the patient interviewing exercises we do for Clin med seem to be making me worse at patient interviewing. Is there any way we can make them more lifelike? I have never seen a doctor speak to a patient the way we are taught.

Most of the teaching is great, but there are a few who are terrible. I enjoy the school, but I think we should have more quality professors.

My main problem is with the OMM department. There just aren't enough teachers for the amount of students. I don't believe the tests are representative of what could be on boards. A solution to these problems might be to divide up the class like clinical medicine does and to create a test bank of questions that are relevant to what we are learning at that time. Maybe the school could hire more professors; I don't know if this is true, but I have heard that the OMM department has not grown to accommodate the amount of students like the other departments of the school has. How does the school expect us to learn the way we should if we don't have the teachers to teach us?

My primary complaint involves the OMM curriculum. It is very disappointing to have to rely on 3rd and 4th year medical students to teach us the material. As well, the faculty at least appears to lack any knowledge of our curriculum outside of their own department. It is as if we go to TCOM and OMM are two separate institutions.
Comments - Academics

No true guidance is given in the Medical Education office on rotations or
guidance to achieve your career objectives. Staff, and specifically the Director,
are at times sarcastic and even when elective requests in January, item are still
late to the schools/programs. Also, specific specialties are not covered in the
areas. Most of my advice came from attendings and program faculty at other
institutions while on 3rd/4th year rotations. I do, however, absolutely commend
the support that the students are given by the Student Life office. Students from
other programs are amazed at all the do for us! I have been prepared for all my
rotations/electives. I also have been told that I follow many TCOM students that
have done well and that I have met or exceeded expectations. The preparation
that we are provided by the school becomes more than evident on rotations.
Much credit for this preparation should be given to XXXXXXX and the Clinical
Medicine staff. I know that many students are not as thrilled about Clin Med
while they are in the classes (including myself) but when I was first on rotations
and was able to perform thorough PEs on day one without fear, I really
appreciated all the work the Clin Med staff put in to prepare me. Thanks.
Not sure what the quality is now, first two years was great when we had complete
faculty. I know about the same as any intern that I rotated with

Often, there is a disconnect with the figures that the professors post b/c often
they are not compatible with our format etc. I feel that if the professors would
communicate w/ the admin to make sure to edit & get the appropriate copyright
info. I feel that there are very good professors who are good resources, but it is
somewhat disconcerting that the professor is not familiar with the teaching tools
that they use, and use the excuse that “they didn't make the powerpoint, so that's
why it is inferior.” I think that we as students deserve that our professors know
what is on their resource that they are using to teach us.

Old power points being taught by newer teachers create discrepancies which is
problematic when the information we are learning will be used when treating
patients. Even review problems not having the right key can cause
problems...either we correct our thinking (incorrectly) or it takes extra time to look
up the answer and try to figure out if it is wrong and why. I used to be satisfied
but issues with power points, poor questions wording, professors who can't
answer straight forward questions, a president who suggests that our school isn't
adequate as it is, and little to no mention of OMM during regular classes. Some
of us had a choice to go else where and are starting to question our choice.

OMM needs work. Many are fearful to give their true input regarding OMM. I
think this is an outstanding institution and doing a great job, but the OMM
department needs some serious attention.

OMM TA's contradict teachers (to be fair even teachers contradict each other) &
that's really frustrating/confusing.
Overall I am satisfied with my education. Although some courses, specifically OMM, are not run as well as others. The OMM department attempts to validate their curriculum with tests that are "nit-picky" and very difficult. I would like to clarify that the material is not what makes the tests difficult, but rather the manner in which they write questions.

Overall, I am very impressed with the majority of teaching that we receive. However, we have run into a few instances where the teaching quality is not up to the quality of what TCOM expects and I feel that it has hurt our education process. I think it is important to always ensure that professors are ready to teach and readily have their material available to the students. Overall, I feel that TCOM is providing me with all the necessary education I will need to become a successful doctor. We have many professors that stand out and teach us in a manner that will allow us to remember the material and use it in our future as practicing physicians. However, there are some aspects of the curriculum and of the courses that I do not feel are necessary to help us become better doctors which is why I did not put strongly agree.

Overall, I love this university, love learning the material, and love the fact that I will be an osteopathic physician. Saying that, there are a few things that I believe have a huge impact on the curriculum, student's dissatisfaction with it, and our physical and mental health. My complaints are the following:

1. The course schedule. I feel like there is little effort on how the schedule is made. In certain courses, I feel swamped, stressed, underslept, and lack adequate studying time to learn the material appropriately. In particular, one of my biggest complaints is when OMM exams are schedules. These times are very stressful and lack a regard for our other course work. It appears that our schedule remains relatively stable, except when the curriculum decides to throw in OMM exams, OSCEs, clin med classes, etc. all at inopportune times. I believe, if they decide to add these extra classes/exams, please give us more time for our other core classes. For example, our recent Repro - OB/GYN class in Year 2 was I believe one of the worse schedules for me. We were given two weeks to study for the first exam with no OMM test. This was fine. For the second two weeks we had an OMM practical and an OMM written exam followed by second repro exam. We were given CILs for repro that we were not prepared for. We simply did not have enough time to study the material adequately. Overall, my main point is that I feel like there is not much communication among department on how our courses are scheduled each day/week/month. I strongly recommend students to help make these schedules each year, and to get the input from our class officers. Most of us are under the impression that very little thought is put into arranging our schedules. If this is not so, please at least educate the class that there is a considerable amount of thought and work that is done for it. Changing our schedule to be more manageable, will truly benefit this school, and the student's input on it. This is one of the biggest complaints regarding TCOM.

2. Our grand rounds format has overall not succeed in teaching us anything about Biostatistics and research in general. If you wish to teach us biostatistics, I
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greatly believe a short class would be immensely more beneficial, but I still do not believe it would be necessary. I think in our Boards preparation, we will develop this knowledge with the Kaplan courses. If it is to be taught, it should be concise, to the point, and well taught in relatively few classes. OMM - A constant complaint about the OMM department, as I said earlier is when to schedule the exams/practicals. In addition, the inter-grader consistency on practical exams is still lacking. We have had one grader for each practical, and students grades seem to be determined more by the grader and not their competency/knowledge in the practical application of OMM. This needs to be addressed. I think that since they have made the practicals worth more points, it has exaggerated this discrepancy in the grading system. Also, during our first year of OMM, we were given a blank grading sheet to help keep us on track during our exams. There are many aspects that they are grading on. It would help to have this resource during the practical to make sure we hit upon each of the important points. Overall, I feel like I have learned much and have developed as a student and person. I see that you have good intentions in trying to teach us and prepare us. I greatly appreciate many of our faculty and their love for teaching.

overhaul the OMT department. The Doctors talk of professionalism but do not display any themselves. They treat the medical students on the rotation as high schoolers. I had one physicians (not my preceptor) Tell me he had heard I was doing things I was not supposed (when I have done everything my preceptor has told me to) and then refused to tell me what it is he had heard through the grapevine I had done. It is ridiculous and immature. I have never been treated in such a way in any other professional field. Perhaps the lifetime academic doctors have lost touch of actual professionalism.

Pay good teachers more so they don't leave to go somewhere else. The last few years we have lost the highest quality of teachers. I feel like my educational experience was the best TCOM had to offer and all classes below mine will have a lesser classroom experience because of the lost faculty.

Please don't listen to all those TCOM professors writing against having an MD school here. This may not sound relevant, but one argument that a lot of professors use against having an MD school is by showing that President Ransom is a bad leader because he fired “all the excellent teaching faculty here.” This clearly shows how out of touch the professors at TCOM are with their students. There are only a few really excellent teaching faculty here, namely, XXXXXX, XXXXXX, all the Repro professors. The clinical medicine faculty still don't know what they're doing and they can all be fired because honestly, listening to XXXXXXXlecture for 4 hours counting as our clinical medicine experience is a joke. Also I don't think it requires a DO,Ph.D. to turn the pages for XXXXXXXduring the four hours of clin med. Clinical med should be in the clinic; it can't be taught in the classroom. I hate TCOM. I really mean that. I think TCOM's admissions office was really good at sucking you into this school and making you feel that it's a great school but the ineptitude of the faculty here really
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makes this a horrible place. The only reason TCOM is somewhat enjoyable is because the students here are so wonderful. We all support each other, we all care for each other, but the faculty here is terrible. Let's start at the beginning. First of all, XXXXXXX runs this place like a military institution. We are told where to be, and when to be there and we are treated all like grade schoolers; constantly threatened with Honor Code Violations unless we do what they say. He also yells at us like children rather than talking to us like adults. The best thing that happened to this place was seeing XXXXXXX (another military man) step down because all he did was do and say whatever XXXXXXX does or says and only agreed with students if XXXXXXX agreed with us. Secondly, the course directors. Let's start with XXXXXXX. I realize that perhaps setting up schedules is hard work and that not everyone would want that job. But XXXXXXX (I know you're reading this) have you taken a look at how ridiculous our schedule is? Please go look at it now. Who sets up a schedule where we have a whole day of class right after an exam at 8 AM? UT Southwestern does not. I should know, I have family members that go there. Speaking of which, UTSW while their students aren't as great as we are, their faculty are so receptive to the needs and wants of the students. For instance, Dr. Malik (UTSW equivalent of TCOM's XXXXXXX) gives hugs to people who fail classes and tells them that everything will be okay and just to relax and that UTSW will help you as much as possible. Does XXXXXXX give hugs to people who fail classes? I know for a fact that he just makes you feel bad about failing and that you're not trying hard enough. The whole culture of TCOM is to make the student feel bad about themselves and that they should consider themselves lucky to be here. Which is probably true, but why rub it in our faces? But I digress, going back to our schedules, we are constantly having this clinical interviewing classes that don't realistically portray how we should interview patients. It seems as if TCOM students are ginny pigs for everyone's educational research grants, Biomedical research, clinical interviewing - smoking prevention, community resources. All these are completely unnecessary classes that just take up our time and decrease our time for studying. Also, XXXXXXX, you may not be aware of this but do you know TCOM restricts access to notes for class? They refuse and/or are late in posting powerpoints for classes. They don't want to give us the notes; this is the only school I know that restricts the tools necessary for our success. Did your medical school say no you can't have these notes, or no we're not posting these notes? Also, we took an endocrinology quiz where the class average was low except for repeat students because they had last years powerpoints but that the current class did not have access too. When that student went up to XXXXXXX to inform him that the old powerpoints would help current students and that if he could post them, he said no and told the student to send those old powerpoints to the class. The people who succeed here are the people who know 3rd or 4th years who have old powerpoints and notes. XXXXXXX, please, please, please I implore you to talk to students directly. The faculty here are horrible and while I completely support your MD school, don't create another school here until you fix the problems here. We have #1 COMLEX scores because of the students NOT the school and faculty. In fact, I'd argue the reason you have top notch students here
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is due to TCOM's participation in TMDSAS and NOT AMCOMAS; it's easier to get better talent with one application. There is NO faculty that speaks for the students; WE HAVE NO VOICE here. There's a reason why Alumni participation at TCOM (compared to UTSW) is so low.

please please please get rid of bioresearch and community resources. they are wasting our times, noone pays attention because we have to study for other exams that are actually worth a grade. please stop putting all these extra classes on top of us. no other medical students have to go through this nonesense. we already have to deal with omm on top of our regular medical school curriculum, please give us a break with the nonessential stuff.

Poorly organized courses with some teachers not being prepared. Too many extra classes that do nothing but waste our time. For example: Crisis management, ethics, community resources, and the research class. The worst two are community resources and the research class. Community resources is only relevant if you plan on practicing in Tarrant county. Also, they do not give any extra information that you could not search on Google in 2 minutes. Considering we are trying to send out as many primary care physicians as possible, the research class is a complete and utter waste of our time. Again, nothing that we could not Google in five minutes if need be. Too many extra classes that do not teach and only add stress.

Professors ramble on and don't cover tested material.

provide amazing teachers with incentives to stay at TCOM rather than go to another school. there are always areas where i think our school could have placed more emphasis and other areas where there needs to be less emphasis. Given that i am a 3rd yr DO, I really don't see the point of having an extra PCP month rather than giving us an extra month off. Yes, our school mainly produces primary care physicians but if we choose to do that then most of our rotation in 4th year will be geared to that. Essentially same results

Provide faculty advisers who are knowledgeable about the current issues and concerns with applications to residency programs. Have open disclosure on what exactly instructors and preceptors are doing to change based on evaluations.

Quality of Teaching ---- When a professor reads their information straight from their power point slides, this is NOT teaching. There are many professors that do exactly this and if this is how they teach, I will not be going to class as it is a waste of my time (I can read them more quickly and more efficiently on my own). There are a few professors who are great, and could teach without their powerpoints, but I would love to be able to take power points away from certain professors and see if they would even have a clue how to convey their material.Course Evals --- It doesn't seem that filling out the evaluations has really
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changed much in terms of the curriculum. I'm sure there are many students that fill them out, yet we still continue to keep the professors of lower quality and keep classes that are nothing more than time wasting schedule fillers. I am happy with my education if I am talking about teaching myself, but I do not believe this should have to by the case. In medical school I would hope that the professors would all be amazing and the current faculty/administration would strive to keep great professors from leaving (not happening... XXXXXX, XXXXXX, the man who taught cardio last year to 2nd years, XXXXXX, XXXXXX). I am worried about the upcoming classes at TCOM... if they are not good at teaching themselves, they are going to have a rough time.

Quality of teaching: It really depends on the teacher. Some of them are really good (XXXXXX), and some of them aren't so great.

Repro - TOO MANY different teachers with too much overlapping material. Its usually a problem of not enough teachers but this department has too many. Instead of focusing on the material we have to focus on the teaching style of 10 different people. Clinical medicine needs to change to make it more efficient. XXXXXXX lectures are probably informative but nobody is listening so they mean nothing. Also, even if we were paying attention to him, his lectures are very dry and would not keep our attention for the entire 2 hours. Community resources is a complete waste of time and the information they would like us to have can be given to us in a few powerpoints. If they want a grade to go with it, test us over the powerpoints in a few minor quizzes. NO CLASS for community resources. Biostatistics is also very poorly organized. The research papers are a complete waste of time because we learn nothing. Lecture format would be more beneficial for boards. Overall, try to have 1 or 2 teachers teach the same subject from course to course. For example, instead of having 8 different pharmacologists teach us drugs, have 1 or 2 (I vote for XXXXXX). Instead of having a different pathologist for every course, have 1 or 2 (XXXXXXXor XXXXXX). Although their may be issues filling requirement for people teaching, as students, we dont care. We do not like having to learn new material AND having to learn a professors teaching style at the same time. Minimizing that would be of great help.

Second year in medical school has been tough this year. I feel like most of the teachers are clinicians that really dont want to be in the class room. Some of the time I dont even feel like being in class is worth it. Many of the professors simply use last years material that was taught by other professors. I am worried that the quality of teaching this year will be reflected with poor board scores for the class of 2011. I hope I am wrong. I felt like first year was great, but as I mentioned above, second year has been much different. I dont feel like I am being taught anything....most of my learning occurs when I read Robbins or other texts. I know that self study is part of the curriculum, but some times I feel like I could utilize my time better if I knew what to concentrate on rather than reading 100 pages and trying to retain it all.
Restructure upper levels. Recently there has been a change in upper levels leading TCOM, I have found that TCOM is no longer a thriving happy place but a place of uncertainty.

Second year OMM was said to have been worked on and the problems solved which TCOM 2010 had to deal with. They have not, and this class alone, specifically the course director, have pushed many to the point of regretting the D.O. choice and turning away from possible careers in OMM. Second year OMM has really put a damper in our class spirit. We are treated like children instead of adults, and there are quite a few students who have stated they would gladly jump ship to an MD program if it was presented. I respect the DO degree, and am overall satisfied with my education so far, but I feel that OMM needs to be restructured with a NEW course director. I would not wish on my worst enemy to have to go through 2nd year OMM again.

Slow down the curriculum. There is very little time to absorb what is being taught as most of our time is taken up with 'extra' assignments that seem to be targeted towards looking good on a 'sales brochure' For example: 'Our students use computers in the classroom' -- ok, so what? 'Our students learn about community resources' or 'Our students learn observational skills at an art museum' -- again, time that is spent on useless things when the first two years are all about studying and learning the basics of our craft. There seems to be an inordinate amount of time used very inefficiently at TCOM. Remember also that we have OMM to deal with and that most of second year Clinical Medicine is a waste of time. Walk into any 2nd year Clin Med lecture in Everett and you'll see people bored to tears, playing Warcraft or whatever. So - clean up the waste of time endemic in the curriculum and give students more time to study. Parse down all the 'extra' requirements and let us really learn the material.2) Listen to the students. Quit telling us 'Welcome to Medical School' whenever we have a suggestion or problem. We're not just whining. We want our school to be the best but quite frequently feel that no matter what we do or say, we're not being listened to. Most of the students I know can't wait to get the hell out of TCOM and never desire to be associated with the school again.3) Fire the OMM department. All of them. From XXXXX on down. That department has done more to cause strife with the students than all the other departments combined. With the ORC on campus, you would expect solid, evidence based techniques being taught, yet we're subjected to the 'voodoo' of cranial and outlandish techniques and theories that have no basis in science and no business in clinical practice. For example: it is absolutely ludicrous to say that you can palpate the celiac plexus (located on the anterior aspect of the lumbar vertebrae) by placing your fingers between the xiphoid process and the umbilicus. They actually expect students to believe that the celiac plexus can be felt through approximately 12 inches of tissue, fascia, GI tract, subcutaneous fat, muscle and skin? Please......4) Model the classes on the first year MSS class. Pick XXXXXXXbrain as to how to set up classes. That is THE best class at TCOM first year. For second year, model the class after XXXXXXXRespiratory class.5) Take
the students comments and evals seriously. By the end of Neuro 1, my class had learned that they were just a CYA exercise required by the institution. Again, disenfranchisement.... Rather than learning for understanding, I studied data points to pass exams. I can't tell you anything about Klebsiella other than 'red, currant jelly sputum'. I can't tell you anything about psoriasis other than 'silvery scales'. I'm having to go back now and really dig in and learn the material. I have classmates who made A's at TCOM that can't even begin to read an EKG. These same classmates scored in the top 1% of the USMLE and agree that all they did to score that high was memorize data points.....

Some of the curriculum is a waste of time and it has become very frustrating. The Clinical Medicine lectures and online tests are a great example of this. XXXXXXX knows a great deal of information, but he is not an effective teacher. Furthermore, we don't understand what he is talking about, and there is no way I'm going to remember his lecture 3 years from now. I would like to see more hands-on experience in clin med by utilizing the sim lab in small groups (SMALL groups is very important). I like most of the core curriculum instructors, and I think they have expertise in their fields. I get tired of the OMM department fighting with the students and vice versa. I mentioned Clin Med above.

Some of the faculty are excellent while others make the information more difficult to learn. Some of the material is not reflective of what will be represented on the USMLE. The focus seems to be on doing well on the tests, yet I am not sure that this will help us on the boards.

Some professors are above expectations, and some are below. Same with the teaching assistants. (XXXXXX is wonderful) I love TCOM! It is the only place I applied and the only place I wanted to go. I feel strongly about the Osteopathic Philosophy, and I have been very pleased with the way it has been taught here at TCOM. I reccommend it to anyone who is interested in applying to medical school.

Some professors are very good, others are not good at all. Too much variability. I feel that we are asked to do many unnecessary things that just waste our time. Then later I will find out that it is because that person is writing an abstract on it, or they are going to try and sell that product to people. That makes me very upset that my time is being wasted on their gain.

Stop losing faculty. I feel that I am learning medicine - but I also feel that we have to take classes that are not as relevant or as beneficial. Currently, I also feel that there is a lot of conflict and tension regarding the MD addition to the school which has affected the quality of education that we are receiving. Stop losing faculty. I suppose it could be better or worse. Medical school is difficult regardless.
stop giving us brand new professors that have never taught a course before and then test us using old professor's questions, the styles are so completely different its ridiculous. I really felt short changed during cardiology 2, that is such an important course, and the main professor often times couldn't answer our questions or told us something different from the book or other professors that it was really confusing. I wish my class had gotten fewer new professors this year, it basically has made me learn on my own. Further I want to know why the pathology professor from UTSW who brought the specimens hasn't returned since our respiratory course in october?

Stop letting our great professors go. Because I got a lot of the good professors before they left, I'm happy. However, I feel like many of my younger colleagues have missed out.

Students should not be tested on topics not covered in class but expected to know after a clinical experience. I feel the TCOM curriculum does not consider the health and lifestyle of students. There has to be a difference between a rigorous curriculum and an overcrowded curriculum

TCOM fails in its teaching of medical students, which should be its primary and only goal, but unfortunately it's not. Approach to Instruction in the 2nd year at TCOM: the ?Do It Yourself? approachWould you expect someone to basically read a flight manual with no instruction and then hop into a plane and fly it successfully? Would you be a passenger on this flight? No reasonable human being would. So why would anyone trust a 2nd year, who taught themselves the entire subject matter by simply reading Robbins and begging 3rd years for advice, on being prepared to undergo rotations?Being subjects of a curriculum study done by XXXXXXXand XXXXXXXStudents want a solid medical education and not one that is designed according someone's career aspirations, especially when they have a financial stake in it (ie KBITS)Taking classes based on individuals thesis projects doesn't seem appropriate nor is it fair to keep adding material to an already imperfect curriculum (ie XXXXXXXmater's in medical education, PA students and medical informatics and community resources, Pfizer grants and motivational interviewing - smoking cessation, etc?) Required attendanceUsally a red flag. In general, students will flock to anything that is useful. Similarly, they vote with their feet and avoid the time wasters. Does the faculty get embarrassed and require attendance? I'm also wondering if required attendance exists to test our ability to withstand insults. Research has shown that you cannot watch a powerpoint, listen to a lecturer and take notes all at the same time and maximize retention. How come we are still using this antiquated method? Bottom line - Is attendance required or not? Make a choice and stick with it!Clinical Medicine?Seriously antiquated resources; total lack of planning apparent in the class.Most medical schools I know of don't have this class and those that do, teach it very differently. In 2nd year, the whole class hinges off of XXXXXXX. If he's not around, we're screwed and resigned to watching COMLEX PE videos or some other arbitrary subject matter. XXXXXXXis becoming more and
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more disgruntled with his group partners leaving him to do all of the work and probably won't return some time in the near future...another casualty.

Preceptorships: Make worthwhile? experiences vary; not everyone wants to do primary care; in addition, how can a school require a student to complete this when it doesn't provide the resources to do so? Here's how it works: you need to shadow a physician and follow all of these rules in setting it up and whatever else the school demands of you; and by the way you have to do it all on your own. It just doesn't make sense. Expectations: Held to a very high standard, without being met in return by staff/faculty?Lack of pride in work by staff? typos, poor copies, images not appearing on exams?Incompetence - Objectives delayed, missing, or incomplete; powerpoints not updated, posted to the website on time, etc??Course directors ? ie XXXXXX? only solicit feedback from the top 10 students in the class due to his personal bias. A problem with that is the students who speak to him about the curriculum are too afraid to convey what is really wrong with the class out of fear that XXXXXXXor someone in TCOM will do something to affect their future career in medicine.?Course directors ? throw away or quit reading course evaluations. This is factual and not assumed I assure you.?OMM and the huge chip on their shoulder - Interesting to be in a place that expects that worse out of students, especially the OMM department. If you treat students like children, then that?s the way they will act.?Lack of student support: we?ve lost around 18 people?that?s unheard of.?Family emergency: asked the professor if it was ok if I left because I just received a call from my wife and I need to go home right away. I was told ?oh, the old ?wife calls me and I have to go? story. I?ve heard it before. You have 2 unexcused absences you?re allowed and this will count for one of them?. This is the exact opposite of compassion.?Student suicides: 2 of them at Baylor within the last 2 years; the rest of Texas medical schools notified students via e-mail why weren?t any sent out here? My guess is because the school really doesn't care about the student body.?No hospital affiliation for the institution = lack of opportunitiesLoss of Staff: ? XXXXXX? XXXXXXX? XXXXXXX? XXXXXXX? XXXXXXX? XXXXXXX? XXXXXXX? XXXXXXX? XXXXXXX?All I know is that I had a CHOICE in deciding where to attend medical school. It was between attending an allopathic institution and an osteopathic institution and I chose the latter. I am not here because I had no other option. I can tell you that I have never attended an educational institution that treats the students with such disrespect and contempt. There is no understanding or professionalism adopted in the treatment of the student body, which I find ironic since medicine explicitly teaches and demands these attributes of physicians. I have never been treated this way as an adult, nor have I been treated this way as a consumer (yes, we are consumers of your medical education; we?re paying to be here). Day in and day out I study and go beyond what TCOM asked me to accomplish as a student, exceeding expectations. Yet I am held to a standard that most of the staff/faculty/administration at TCOM are not willing to meet themselves. It probably makes no difference, but I?ll state it for the record anyways. After I graduate, I wish to have no more contact with TCOM. I don?t want to step foot back on this campus, nor do I wish to contribute money to this institution, ever. You may feel this is an opinion of the minority, but in addition to listening to
deans, course directors, and top 10 students try listening to actual majority of students in a class, I’m sure you’ll find that the majority of the class of 2011 feels this way. I have been in the medical field for over a decade and every physician I have spoken with since starting medical school is dumbfounded at what goes on here. It is quite embarrassing, because I know these people on a personal level and their medical school experiences were nothing like mine. Focus on teaching medical students, that’s all I ask. None of us are asking for the curriculum to be shorter, easier, etc—we want it to be fair and we want someone directing us who has an active interest in our success, not a disdain for it.

The 2nd year medical school curriculum is on the verge of collapse. If we lose one more of our core professors, XXXXXXX, XXXXXXX, XXXXXXX, or XXXXXXX, our educational experience will be no more. We are treading on thin ice and the cracks are starting to get bigger. In addition, it seems that the concerns that we have on our course evaluations fall on deaf ears. Our class officers tell us that the administration does not believe things are as bad as they are telling them. They also feel that the class officers are just complaining and are not expressing the true feelings of the majority of the class. BUT THEY ARE!!!! We are told that we are doing so well because of the institution of this new curriculum. However, what has been failed to be mentioned is that once this curriculum was instituted, TCOM joined the TMDSAS application process and got a surge in higher quality applicants. Also, this is the only educational institution that I know of where withholding notes and information from students is the norm. Very rarely do we ever get notes to study for our courses, and it is only because of the study guide CD and outlines produced by STUDENTS from years prior do we actually get the information we need to learn this material. I do not understand why we cannot be like every other school in the state and have notes provided to us to help us learn medicine. It seems that individuals in charge of our education feel that providing us with notes and powerpoints is deleterious to our education. I do not understand where this mindset has come into play. There needs to be a major intervention in the current state of the curriculum. If not, I fear that the quality of students coming out of 2nd year will start to go down. It is my belief that that quality of a good curriculum is only as good as the instructors that are teaching it. We were very fortunate to have good veteran professors that have since moved on. There needs to be a mechanism set in place to replace these veteran instructors. If there was a written out “designated all inclusive syllabus” than this issue that we are having currently would not be a problem. Also, it seems clear that there has been a decrease in funds allotted for the medical school education. In fact, for some of our classes we could not get fully trained physicians to come teach us, we had to settle for 1st year residents. This is the reality of things that are going on in the classroom day in and day out. Please help us!!!! We have tried voicing our opinions in our course evaluations but those comments do not seem to have done any good. I hope that these comments are not taken in jest but are received as one that truly wants to make TCOM the best medical school that it can be. And this process begins in the
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classroom. I love TCOM and feel very fortunate for being here. Thus why I care so much about improving the current state of affairs that are taking place in our 2nd year curriculum. By making us better students that are more knowledgeable, we will become that much better physicians and from there the DO profession will grow like wild fire. In closing, I would also like to comment on the addition to courses like bioresearch and community resources. Though the idea of these courses seems like a good idea, the implementation of them has been done very poorly. In fact, I would say that we are learning very little that would be of any benefit for our future careers. For bioresearch we were told that we were going to learn biostats. This promise has yet to be filled. Also, many students in our class feel like some classes like bioresearch are set in place for the benefit of the instructor being able to institute their NIH grant. Not for the educational benefit of the students. Again I hope these comments are read and fully considered. This is the reality of what we have been going through for the duration of 2nd year, and it needs to stop with us. The future and quality of students coming out of TCOM depend on it!!!

The administration could definitely be more helpful in providing information/support to the students. I don't feel that we really have much guidance. Also, it seems that there is a lot of procrastination on their part that instead of helping students, could potentially hurt them.

The administrative support actually causes more difficulties as far as problem solving and setting up rotations.

The administrative support staff should be held to higher standards. I have had multiple circumstances where I was "put out" because of a foul up on the part of the staff (the OMM department staff and clinical rotation staff in particular). TCOM is a well established medical school with excellent administrators who demand a lot from its students. Comparing curriculums with friends at other medical schools, they have told me they thought our school pushes it's students harder.

The biggest area that is lacking at TCOM is the administrative support sector especially the clinical education office. I know that they are trying to be efficient but I feel that there needs to be more staff dedicated to processing applications. Those students who are on the ball get punished and their applications aren't processed until the "deadline". I feel like my education was what I made out of it, not necessarily reflective of the quality of education.

The CIL sessions are great if they go at a faster pace and actually teach, but some of the new professors need training from XXXXXX. Also, it does not make sense to have 3-4 new powerpoints on Wednesday with OMM in the afternoon for an 8am Friday exam when they could have easily put 1-2 of the lectures the previous week. Most of us find ourselves cramming instead of learning the material.
The core curriculum is unorganized and poorly structured. Our new faculty rarely communicates valuable information, and in addition to their lack of direction they test on material which was poorly covered in lecture or CIL. Furthermore, tests are often made of questions from faculty in years past which are rarely representative of material presented and/or even covered. When students try to make comments on evaluations, they are not read, or at least are ignored. For the past year my class has attempted to go through appropriate channels to communicate our dispair through our officers, and yet the administration has yet to listen or make changes. Core curriculum aside....Clin Med, OMM, Community resources, BioMed Research need to make SEVERAL changes. Clin Med is a complete and utter waste of time. It is appropriate to learn skills; however, the department is unorganized and most of our time spent in the classroom is wasted on waiting for them to start talking. Overall the time spent in there could be greatly reduced. OMM - the entire department, in particular to course director for Yr 2, needs to relax. We are constantly getting griped at/yelled at for doing nothing but come to class. If we have questions they are poorly received and quickly ignored. It honestly seems as if the department WANTS us to do poorly. Community resources and BioMed research are also large wastes of time. Year 2 has an huge amount of core material and is extremely important to our medical education and having extra time to study this material would be of much greater value than sitting in a classroom for extended hours. Also, the constant changes in the schedule in those classes are extremely inconvenient and often come with little to no notice. Overall, year two has brought only feelings of frustration, anger, possible depression and dispair which is not my usual outlook and emotional state.

The curriculum that has been set up for the medical school is great in theory, but there has been no putting it into practice except for a small handful of faculty. XXXXXXX is the prime example of how the curriculum should run. We have lost so many good instructors lately that there is NO instruction, just random reading assignments and trying to figure out on our own what we are supposed to be learning. Full time teaching faculty need to be obtained and then retained by actually paying them a salary to fairly compensate them. Also, all these added "bonuses" like the research course and community resources are just a waste of student time the way they are being carrier out. Community resources should be a couple hour overview that we are given right before we start third year and the research presentations should be done away with. All we need to know is the biostats that will be on the board and how to look at a paper and see if it was a good study or not. That takes maybe about 3 or 4 lectures. I haven't learned anything from the research presentations, they have just wasted time that I could have used for studying. Honestly, with how badly the curriculum is failing I have been looking for other schools to transfer to. I feel that our administrators don't really care that the medical education is deteriorating and that the school has lost site of its purpose, to produce the best doctors that it can.
Comments - Academics

The curriculum lacks organization. The use of our time as students is sometimes compromised. Having classes from 8 am until 5pm with a test at 8 am the next day is harsh. I feel there are several opportunities where we could learn more, but we don't. The scheduling of the preceptorship for 2nd years was near impossible, especially with all it's conditions. On a positive note, some of our professors have been accommodating to our schedules and have done there best to help us. I was really satisfied with my education, until I realized we were losing our professors. I feel that our education is being put aside to make way for other areas for the school. I enjoy TCOM, but it's becoming difficult each day to appreciate the teaching. It's not even so much the teaching replacements. It's the quickness with which they find out they are teaching and the lag in teaching style. The curriculum is no longer conducive to my learning.

The education at this school is superb.

The fact that we change the curriculum to meet students requests is great. Don't change things too quickly. Not every change is necessary or a good one. Just because one student suggests something, does not mean that there are not many students out there who feel the opposite. Each idea needs to be weighed on its own merits, and consideration given to the fact that we cannot do everything; there are trade-offs. Each time we add something to the curriculum, we are taking time away from something else. Each thing we put our money and effort into, we are taking that away from another area. Nothing is free, and decisions and changes need to be made only after due consideration. This is the top osteopathic school in the country. Our clinical years students and graduates rival any other school's as clinicians, osteopathic or allopathic. In general, the first and second year TCOM students that complain do not currently have the benefit of hindsight to realize the education they are getting. Nor do they have the experience of attending another medical school to see how those students are prepared. It does not matter that they may have friends that attend those schools. What they hear from those students is not the same as sitting in another school's classes every day. When first and second year students complain that something is not relevant, or say that a manipulative medicine technique does not work, I want to ask them, “Who are you to say what is relevant, or what does not work? Give the administration and the physicians who have been practicing for years the benefit of the doubt until you have the experience to say one way or the other.” Additionally, many students would like more research opportunities, but I think there are plenty of opportunities to do research for the motivated student who seeks it out. Most students want it spoon-fed to them, and specific time allotted to research. The students that are really interested in research or who really want to improve their CV should find the time, or stay an extra year.
Comments - Academics

The faculty are fine. The curriculum is awful. You want your medical students to succeed? Stop wasting their time with unnecessary classes. If your students are in class for more than three hours a day, you are hindering their progress and coddling them like children. The curriculum is illogical, the administration is unwilling to change, and worst of all, the deans believe that we are the best school in the nation. I've never seen administrators so pleased with such extraordinarily low accomplishments. You want this place to be a top 10 health science center? It's time for some heads to roll and some fresh and talented blood to step in it's place.

The faculty evaluations tend to ask if the objectives were given and were the lectures posted and similar things that really apply more the the lecturer's administrative assistant. Very few ask if the lecturer was an effective teacher. Therefore, faculty who make powerpoints that are too busy to be useful or who read from the powerpoint without offering teaching points or who contradict themselves can still get good evaluations from students. Course evaluations seem to have little effect. Clinical medicine was particulary notorious in this regard. My class had many complaints about how the class was managed and how we were treated by the administrative staff and no changes were made as far as I know. The year 2 overall advisor was particularly unhelpful to me. I was criticized for minor lapses (I failed to complete 1 assignment worth 3 points in the whole of the first 2 years of medical school) and for being indecisive about my choice of specialty. Indecisive about specialty is not necessarily a bad thing and this could have been an opportunity for some constructive input. I like the OMM fellowship program and I feel that I am prepared for board exams. We could use a little more pharmacology though.

The faculty that made a huge impact on my education are no longer teaching at this school. I am deeply concerned since they have been replaced by MDs or PhDs. Clinical education needs to be provided by clinicians, ideally those who have a positive opinion about the importance of incorporating our osteopathic curriculum into our education. the DO clinicians who provided a bulk of my education in pre-clinical years prepared me very well for clinical rotations. Countless patients have complimented me on my diagnostic skills as well as my compassionate nature. I am proud to say that the reason why I excelled in interacting with patients is because the high quality osteopathic education I had received.

The instructors are excellent and I feel like I'm well taken care of overall as far as academics are concerned.
Comments - Academics

The inadequate organization of some of our courses this year have been absolutely ridiculous. I understand we're in a period of "transition" but I think someone needs to start pulling things together. Cardio and Endocrine were a bit blurry. I have hope for Endocrine. I thought XXXXXX was great, it was just too bad the test was over XXXXXX's material and not his own. I have heard this (and I tend to agree) we can count the number of good professors we've had on one hand. Course evals...we're told they matter, that's all we know. Lastly, please stop adding things to our curriculum. All that "side stuff" that we really don't have time for (and in the end don't care about). Biomedical Grand Rounds has not been the most effective/efficient way of teaching biostats to us. One class would've covered what we need to know for the Boards. If people want to learn more, they probably will on their own.

The Medical Education office needs to become more efficient in processing applications for rotations. As it is, I have been denied two rotations simply because my application had to wait while others turned in theirs last minute. I understand the need to work on the applications for the soonest rotation but when an application is turned in 6 months prior to the rotation and it is denied, it becomes more difficult to find a rotation last minute and especially one that is desired since most of the desired rotations are usually already filled by that point. Also, sign up lists for certain rotations should be more obvious. I was not aware of sign up lists for rotations such as dermatology and radiology until it was too late. I feel that I have been adequately trained but I do feel like I am lacking in some experience due to the schedule of rotations that I was given. For example, OB/Gyn in Odessa, this was not as a comprehensive experience compared to my classmates experience. Quality of the rotations should be investigated more before signing on with institutions outside of the HSC.

The office of Clinical Education could do with some improvement. The information coming from that office tends to be incomplete and arrives at what seems to be the last minute. Clinical education is something that students have many questions and concerns about and in most cases this office comes across as very disorganized. My 4th year DO rotations are starting in just a few months and many of my classmates and I still have no idea what we need to do to get them scheduled. Medical students tend to be of the "type A" personality, we would like to get all our facts straight as soon as possible so we can plan ahead, not wait till the last minute and be surprised at where we end up. I base my opinion on what I hear from my clinical educators. Most of them make nothing but positive comments on the quality of TCOM students and the work ethic that seems to be present in us. That makes me proud to be a DO student who will graduate from TCOM. Many of my clinical preceptors seem to be a bit confused that our school is considering the addition of an MD program. They seem to think that MD students will not be of the same caliber of our DO students, even though they will come from the same institution.
The office of clinical education needs to have more staff on hand. Students are losing opportunities at rotation sites and sometimes paperwork gets “lost” and never mailed off. No matter how on top of things you try to be, that office will be a HUGE obstacle for a 4th year rotating student. I feel I have been competitive and more knowledgeable than my MD student counterparts on rotations. The only reason I chose “meets expectations” for quality of teaching is because we have some exceptional teachers that make up for the not so gifted ones. Some of the professors we have are just not up to par. They cannot effectively teach, their presentations are useless and half of the time they go off on tangents about personal experiences that have no relevance to what we’re learning. Sometimes it just seems like they are their because they have to be in order to abide by their contract. We need a full time professor who is dedicated to teach pathology year round. We need a full time clinical professor who is dedicated to teach us year round. I am tired of having 20 different teachers come in to teach us every course. XXXXXXXused to be the guy that did it in the past. Don't understand why we haven't found anyone yet. It feels like the quality of the classroom is deteriorating quickly. Also, I don't know where to put this, but it seems like some of the faculty, during post exam reviews, accept answers from students they favor. Just because that student got the question wrong doesn't mean both answers should be accepted. If there is a LEGITIMATE reason why both should be accepted, then thats fine. But if the only problem was that the student didn't understand the question, too bad, instruct the student to read carefully next time. It seems like the faculty never has a good enough explanation for the answers -- I mean come on, you wrote the question!!!! How could it possibly be erroneous if you looked over it before you submitted it!!!

The only thing allowing me to say that our faculty meets expectations are the stellar teachers that comprise half of our staff. These are the faculty members which don't read their powerpoint slides, but rather know the material well enough to go beyond the standard ie make leaps of logic in physiology. I would feel stronger about this if the schedule for OMM/Clin Med seemed to be set up with an understanding of our other responsibilities. Overall though, I like TCOM and if Clin Med and OMM were restructured, I would be ecstatic.

The quality of teaching is not an adequate judge of the current situation because most of the doctors that taught us have left the school. The ranking system of evals is pointless because most people I know just fill in agree or neutral. Especially with the rotations it seems like students have had the same problems/complaints about rotations or the setting up of rotations for years. These problems have become accepted as just how it is.
The professors from different departments have NO communication. It is a good explanation of the osteopathic principles, where dysfunction in one part leads to dysfunction in another, but that is about the only purpose this serves. The anatomy and OMM instructors are constantly at odds, and seem to feel like a pair of parents about to get a divorce and convincing the children to come to live with them. They teach us different things, even in something as simple as where a muscle inserts, then tell us if we answer a question the way we learned in another class we are wrong, even if we can provide multiple sources that prove otherwise. Some of the teacher, while very knowledgeable, have no idea on how to pass that knowledge down to the students, and end up on hour long tangents, but expect us to know what they originally were talking about. Sometimes, teachers contradict themselves, but refuse to admit that something they said was wrong. Today, a teacher was shown something in a powerpoint earlier that half of the class used as an explanation for why they chose the answer they did on a test. The powerpoint and test were verbatim the same, but the professor said that she was asking a question from a different powerpoint presentation, so that obviously couldn't be the correct answer. This school, while the best osteopathic school in the nation, seems to be a lower tier university. The poor teaching skills, infighting, and now with the MD/DO mess, have left this school nastily divided. Med students at other universities report that they are happy with the integration that they find in their schools, they have good equipment, and their professors make learning fun. That does not seem to be the case here. This school seems to be either in the process of trying to find or lose its identity, and I am not sure which way that journey is going.

The quality of teaching directly reflects the quality of teachers. It is obvious that our institution has a severe disparity when it comes to teacher comparison. (Just look at attendance rates for certain teachers.) It only makes sense that the administration and course directors should ensure that all of the required information be provided and accessible for every student regardless of the teacher’s abilities. The curriculum is in desperate need of micromanagement and shouldn't be left up to the individual teachers. Recommendations: Provide a syllabus with all of the course objectives and answers to those objectives in a concentrated manner upfront. This could replace time spent searching for answers with time spent learning information. It could also make up for the lack of quality with some teachers. New teachers should never claim the material they are teaching is theirs if they are using hand-me-down powerpoints. That is insulting to students given that we are constantly searching for old information due to the lack of information provided. If all the information and notes were provided upfront then this wouldn't be a problem. The curriculum should not be limited to it's current format of lectures, dsa's, and cil's. This approach doesn't cover all learning styles. The curriculum should also include video and audio of past and present lectures that are always available. Attendance should not be mandatory. At this level of education attendance should be expected but not required. It certainly isn't necessary to learn the information. For my learning style, attending class is not a good use of time. 85% of class time is wasted time.
Comments - Academics

This said, I have to spend even more time outside of class to make up for the time wasted in class. The biggest and most important change to the curriculum has to revolve around scheduling. Tests on Mondays has created so much bitterness in my life it's almost a joke. It always seems that our schedule is anti-student health. I need time to participate in the community and enjoy those that are supporting me in my education. (These people schedule there recreational time on weekends, when it is impossible for me to do so.) Scheduling tests after every major holiday, community event, and sporting event ensures that i am unable to participate. And this is even more frustrating given that my family does not live in the metroplex and traveling is impossible because it interferes with preparation for a Monday exam. I've never been involved in any program where everyone involved is unhappy with some major aspect of the curriculum/schedule until attending UNT HSC TCOM. Which brings up an important point. How can this program expect to stand out in a state full of good medical schools when it produces such beat down and unhappy alumni. No one I know who has attended other programs has had the type of scheduling found here. It's almost as if their is a conscious effort to make up for feelings of inadequacy by taking it out on the well being of the students. And, if COMLEX scores are the one defining motive then it must be said that no other school in the state takes the COMLEX exam.

The second year course is a borderline disaster zone. If it were not for XXXXXXXand XXXXXXXwe very well could not have been taught a single thing all year. SOMETHING MUST BE DONE TO CHANGE THIS SYSTEM!!!! This is not something that needs to be overlooked!!! IF SOMETHING IS NOT DONE THEY COULD BRING 3 MD SCHOOLS IN HERE AND IT WOULD STILL BE TERRIBLE!!! THIS IS NOT A JOKE, DO NOT PASS THIS OFF AS JEST OR INSINCERE COMPLAINTS!!! I have heard recently that the administration and other faculty believe that the officers are just complaining and that there is not a real problem, THIS IS ABSOLUTELY FALSE!! As far as OMM goes, that course either needs to be taken off of the campus, or an entirely new faculty needs to be hired. THIS IS AN INCREDIBLY BAD CLASS. After 3 semesters of our class going to OMM, they have succeeded in lowering the already low quality of education by a significant margin. I don't know what else I can say about the second year curriculum, other than to say that drastic action is needed now or it will be too late. It took until our Repro course to have a class that has some semblance of organization. I had to pinch myself when we actually had powerpoints posted before class!! We actually new what we had to study!! During a post exam review XXXXXXXactually listened to us and made corrections as necessary!! Sounds an awful lot like teaching, maybe we should learn from him. Please see my comments about academics. Our class is incredible. Maybe it is because we feel as if there is a common enemy and we have bonded because of it. I don't know. But our class is unbeatable. If it were not for that we would have all quit a long time ago.
The quality of the teaching for year 2 students is not nearly up to par as compared to what we received in year one. I just want someone to realize that the great majority if not all of the class are going into a great amount of debt to be here. The question that always runs through my mind is- Does anyone in the administration or in charge of the curriculum know what it is like to be a student here? With every test we have to take a chance on what exactly to study. We find ourselves trying to make it through tests and classes through using study guide CD's and outlines passed down from previous years. We are given reading assignments BUT the questions are the tests are NOT drawn from those sources. (ie - cecil's textbook of medicine) Based on my experience if you attempt those reading assignments it puts you at a severe disadvantage both on the exam and in your overall knowledge of the subject. Commonly at times we have lectures that are not helpful at all in hindsight after the tests are over. Not all the professors are this way though- the following professors are loved by myself and many others- XXXXXX, XXXXXX, XXXXXX, XXXXXX, and previously XXXXXand XXXXXX. (these professors are definitely of benefit to the students and definitely strengthen the curriculum) I have heard it said that we as students complain too much, and that if you look at the grades and the board scores that come out of this school there is no apparent problem. While students might tend to complain too much- of course people are going to find a way to study and do well on tests and boards. That's what people tend to do when they are in tens of thousands of dollars of debt. I know (because I have friends at other medical schools) that students at other medical schools do not have to "guess" what to study before their exam. If the attempt is to challenge the students, it should not be done through confusion and misdirection. It seems that there is not a student in our class who does not feel confused by the teaching methods that are employed. If there is anyway to change this system it should be attempted. The previous statement is not meant to be a complaint- more constructive criticism. I don't know any other way to say it.

The questions that need to be asked: Are you happy? Do you feel that UNT HSC is concerned with student well being? Do you feel that the time you've spent at UNT HSC has been a positive experience? Do you feel that the UNT HSC administration cares about the students? Have you ever openly criticized the institution for it's handling of the curriculum? These questions need to be asked. The students are not happy with the current curriculum and the way it is administered. There never appears to be any consideration for student well being. The excuse that usually funnels down to us revolves around board scores. Personally, I would rather see the whole curriculum thrown out and replaced with one that is student oriented. One that recognizes that unhappy students don't make the best physicians.
Comments - Academics

The student evaluations are given before the post exam review. One question on the eval is actually about the post exam review. Seems disconnected. Some teachers spend a great deal of time on a subject and then don't test on that portion as if it was not as relevant. 120 slide power points for a one hour class basically sends a message that we must concentrate on more information than is going to be considered relevant by the teacher. Requiring attendance to get our recordings is unfair to the students who attend because it is not fair to remove them from one who attended but wanted to reinforce because they are better auditory learners or just wanted to review a point made by the teacher in class. I attend class regardless of whether I have had a chance to prepare. I attend because they are required but there are times when I feel I would learn certain types of material better on my own and other subjects I learn better by attending. We are required to be in class but there are many students who do not attend with a threat of "violation of professional conduct". This is an empty threat. Nothing happens to them. I have heard that they sign in electronically from another location by getting passwords from those in class or come in, sign in and leave but still nothing happens. It is very frustrating to spend four hours before a major exam in classes that are required attendance while my fellow students are getting a chance to relax and study for the exam. This gets particularly frustrating when they have the benefit of a better grade while I was in a class that essentially has no grade to acheive and a better use of my time would be to study for the exams and material which will be on my boards and effect my grade. Also, the community services course is great information that could be condensed from two hours to 15 minutes. It could run as a seminar at the end of the semester and make better use of our time. I also feel that clinical medicine could be shortened. In that course we essentially sit for two hours and have the material that we have already done a quiz on re read to us. (probably because they think no one actually read it for the quiz). I would rather sit in class and read the assignment than have them read 20% of it to me over a span of two hours. The OSCE tests on SOAP notes but we have spent very little time actually writing a SOAP note. We have been sent home to rewrite one that is essentially a cut and paste job. I would rather sit in class and review a case together as a whole and turn in our handwritten soap note on the with actually direction (hands on). I would know it much better. There would also be a definite attendance check this way. If you didn't come you could turn something in. Hope all this makes sense. I feel sometimes it is run haphazardly and with more emphasis on a few complainers in a crisis mode without serious attempt to make sure we know what is expected of us in our learning and not a lot of direction. Not all courses are this way but some have seemed quite disorganized.
The students at this institution feel like they are 3rd hand citizens. 1st we don’t trust the UNTHSC president due to his ?presentation? of ?facts? about the DO/MD situation. The students loudly feel like they have been mislead and for a purpose. We have been misinformed and feel like our voices aren?t being recognized. Most students feel like we aren?t even given a choice in the matter and XXXXXXX is just dictating what we ?need? to do. There are many conflicting facts with what he presented and the students are very disenchanted about the whole process. In regard to the curriculum, we have lost key professors which have not been replaced. By replaced I mean by another quality professor, instead we are given clinicians that are being pulled out randomly from the PCC to teach a course with material from the previous professor. Because they are just using old material they don?t teach us the necessary information that we need to know to succeed with our exams. If we didn?t have notes and powerpoints that we got from last years students our class would be doing horrible right now. I make this point because this year XXXXXXX decided to no longer give us powerpoints for CIL?s. By the way we are expected not to be taking notes in these CIL?s. If we don?t have ppts provided before hand or after we don?t have anything to review and with all the information that we are expected to know if we don?t write something down our expected retention is abysmal. That being said, we need to have powerpoints for everything even DSA?s so that we have something to review. The only class that I feel was genuinely productive in regards to learning properly was Endocrine first year when XXXXXXX gave our class a packet of all the information that we needed to know for our exam. We were able to study that and used his lectures as additional understanding and it worked very well. Other medical schools have such packets for each class and it seems to be much more beneficial then having 3 books that we have to review for a single class all of which are very dense and convoluted. And most of which the teacher says that they don?t expect us to understand the material form that book. Cecil is a good example and the Cardio professor this year stated exactly that. In regard to Teaching experience, XXXXXXX in particular stated to us I am not here to teach but to get through the power point. I would love to have one of our faculty come in and experience a lecture with XXXXXXX just so they can realize that it is impossible to retain anything considering the speed and amount they go through in order to ?finish?. Its almost a complete waist of time going or even listening because he doesn?t even slow down when we request her to because we can?t keep up. Mandatory attendance is an absolute joke when you plan a Class at 8am after an afternoon exam, or even giving us a lecture after an exam is a waist of the professors and the students time. We can not possible concentrate in such instances. The Center for Academic proformance alters students in the most unprofessional way possible. After a student doesn?t do well on an exam they already feel horrible, which is further exacerbated by getting an email by this office to affirm there failure. When you go and see these ?advisors? they proceed to explain to you that you are not trying hard enough, and they don?t do it in a way that is even understanding to a student already in a depressive state they do it in a very demeaning manner. You have to realize that for a student to
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be in medical school in the first place we are already our worst critics, then to have to go see someone that has never been through medical school or even an equally stringent study course try to tell you that you aren?t trying hard enough, or you are not doing enough, in such a crude manner is not just demeaning but causes a high degree of resent towards the office. I would highly suggest talking to them about there approach to students and making sure they don?t come across as judgmental, condescending and just plain hurtful to the students when they come in, its not helpful and just makes it worse.

The teaching itself is fine, but sometimes what is taught/talked about in lectures and CILs is not what is tested upon. Many of us have to get study material from previous years in order to get material relevant to test questions. This is particularly due to the fact that the question bank is made up of questions written by faculty that are no longer at TCOM, so the details that show up on tests aren't necessarily what was emphasized in class by the current faculty. Example: In our endocrine course, were taught by a new faculty member. I felt he did fine presenting the material and I felt like I usually learned something in class. But we were tested from material presented by XXXXXX who has lectured in endocrine in the past. If I hadn't obtained material and recordings of XXXXXX's lectures from third years and gotten tips from LGTs, I don't think I would have done as well. I selected “agree” mainly because I'm doing better than average. Is this because I'm being “taught” everything? Not necessarily. I'm doing as well as I am because I'm making the effort to get and learn the material I need to do well. But I'm not given this information, I have to go hunting for it myself. If I was doing poorly, I would probably rate lower because in general, it's not exactly clear what exactly I'm going to be tested on.

There are several courses in our curriculum (Community Resources and Bioresearch, for example), that are time consuming and do not really have a lot of relevance to those that do not plan to do research or work in the city of Fort Worth. If I wanted to do research I would have gone to graduate school. It's difficult to make this assessment before I take the boards and begin rotations. I need to evaluate myself and be evaluated in the field before I can make any judgement about this.

There are some hickups in the admin. and some of the curriculum, however overall I must commend UNTHSC for it's continuing efforts on making this really the best school in the nation! I would go no where else! The education is well thought out, well planned out, and is very effective. Our scores show it over and over again, and our training speaks for itself. I'm very proud to call myself a graduate of TCOM, a DO school.
there are too many new teachers that don't know how to teach. We are not given the powerpoints used in class. medical school is hard enough without having to fish for material to study because there is not time to do the assigned reading and the reading is too broad. Please take a note from southwestern and give us all the notes at the beginning of the year. The clinical medicine interviewing class is a waste of time as is the community resources, grand rounds, and biomedical research grand rounds classes. These extra classes are not benefiting the students and not allowing us time for ourselves so that we can do well in other classes. There needs to be more time off of school between years. There is no reason why we can't have a longer summer and longer breaks if you take out the classes that are not beneficial to us. Clinical medicine needs to be condensed because there is a lot of wasted time. The teaching is sub-par at this institution, notes are withheld from students and/or not given to us in a timely manner. Cecil's readings should not be required. Robbins as a main textbook is too in depth in itself...nothing needs to be added to reading Robbins. The faculty do not work with the students but against them because they give us too much work and not enough time to study what is really needed. Students are constantly on edge and the faculty doesn't seem to want to change for the better but add more tests and useless class. Please please condense clin med and cut out lectures that have nothing to do with material that we will need for step 1 boards.

There have been many times where we have been taught material that seemed out of date. I really like TCOM. We stay busy with many different classes, but we aren't overloaded and we are in the middle of Fort Worth.

There is no coordination in this school among various departments and even faculty. I think the administrative assistants a lot of times have a power trip and are rude to several students. A lot of students are really struggling trying to balance the unnecessary demands put by incompetent people running the school and their everyday life. This is one of the few schools that just does not care about its students well being. because we have all realized that its not really the faculty or the staff that is the real reason for success. the reason why this school does well is the caliber of its students and they work really hard and get through the rough times. the sad thing is that there is no advocate for the students in this school. Although there are handful professors and staff that have been incredible support and are excellent educators and we understand that its not the clinicians fault that the whole school is so unorganized. And not to mention that if we say anything, we are punished for it even more because we you never know how else they are going to make our life any harder.

There seems to be a disconnect between the new incoming faculty and what is expected of them during lecture vs CIL hours. In speaking with them I feel that they are not given enough freedom to lecture as they see fit. I've noticed that new faculty are making the points they deem pertinent but are using powerpoints created by older faculty. Testing seems to be done utilizing a question bank that
Comments - Academics

is not reviewed nor revised from year to year. I would suggest that each lecturer make his or her own presentations and that the questions used for examination come from that professor and not from older faculty that may no longer be here. Secondly, there has been great emphasis on “adult learning” in the TCOM curriculum which I take to mean “learn on your own” by utilizing the reading assignments presented. These reading assignments are often over a hundred pages per test and as such require a great deal of time to review. I feel that whomever is designing our curriculum has forgotten our adult learning emphasis and has been filling our schedules to the point that completion of the reading assignments is nearly impossible. Sufficient time must be given for review of the assigned material and having class time close to eight hours most days of the week is not conducive to the “adult learning” style TCOM has chosen to adopt. While I have nothing to compare this curriculum to I must demonstrate a feeling of great frustration with the hectic nature of our curriculum. I have listed several of the reasons for my frustration in the above section.

There seems to be a lot of new professors teaching this year, and they may have a lot of knowledge in their field, however, they do not seem to focus on the main information needed to know for tests... mostly they just spout out their knowledge on anything and everything they feel they want to talk about. It's hard to evaluate how well my education is without having taken the boards yet to see if I was well prepared or not. I however believe there can be made some vast improvements. XXXXXX and XXXXX are 2 of the best professors I have had the pleasure of learning from. I believe most professors need to see how they teach and base their future teaching styles off of them.

There were some courses where the instructor was extremely hard to understand verbally. I love this institution and I believe that it has a lot to offer me.

This is the worst school I have ever been to. Community college was better than this. This is the worst school I have ever been to. Community college was better than this.

This school has high expectation of the students. We are expected to perform well, yet our schedules are very full and demanding. How are we expected to perform well when we have lots of “extra” classes. I believe some of these classes can be turned into DSA or self study instead of mandatory class.

This year there is no correlation between the lectures and what is tested. Most instructors give lectures on pasted together power points, that have no questions that are on the test. All test questions are from last year and thus we get tested on material that is constantly not covered. Worst year ever, last year was amazing. Again the classes test on focused material that was covered last year and not this year. Most instructors have no idea what is tested.
Comments - Academics

Too many of the professors are absolutely terrible, and from talking to other students the reviews reflect that. Besides XXXXXX, XXXXXX, XXXXXXX and XXXXXX, I struggle to think of a professor that is even halfway decent. Although the teaching quality is for the most part sub par at best, I feel like I am learning a lot, albeit I am almost totally teaching myself.

Way too much required attendance in Clin. Med. and OMM. Compare with other schools. All this time contributed to me losing a lot in my life. I advise people I care about not to attend this school. OMM fellows have a very negative and abrasive attitude towards other students. I recommend changing their attitude or getting rid of the program. Overall, the people who go out of their way to do an extraordinary job teaching have made up for other negative parts of the TCOM educational experience.

We do not ever seem to get the full story from the administration. It seems that we are only given enough to keep us quiet. The course and curriculum are good, I just feel that it could be so much better. The Community Resources class, which does nothing but take up our time and provides us with no useful information is a great example. There should be no reason why it is forced upon us.

We have some great teachers on campus. But there are some areas that need work. In Neuro, I highly recommend working with the Neuroscience program at UNT-Denton and getting lecturers who are specialized in the field. It would have been good if some neuropsych disorders, like schizophrenia or MS were also discussed. In other classes, like GI, I feel like we're also not getting experts in particular fields. I think it would also be great if each body system had a specialist who could come talk to us about clinical correlates. I think every class should have a syllabus for us to refer to throughout the course the way that the Endocrinology course does. This way, we can make sure we all understand what is expected of us on the exam.

We have to do something to retain the tenured faculty here. Filling in faculty for courses at the last minute is unacceptable and subpar. We have to many clin med faculty and way too many OMM faculty; meanwhile we're barely scraping up enough core curriculum faculty to stay accredited. If the US News & World Report asked me, I wouldn't even rate the HSC in the top 50, much less the top 10. I don't even know what to say about the lame excuse for clinical rotations at this school. I feel like I can work harder than anyone at any other school during my classroom years, but for what. If I can't have quality rotations in the 3rd and 4th years, what have I gotten for all my hard work in the first 2. It is just very frustrating. I feel like compared to other schools in this state, we are pretty well behind the curve. I would like to say that I believe people like XXXXXX are genuinely trying to make progress in key areas, but too many people are standing in the way trying to keep him from doing his job.
We need some solid professors for second year. I thought first year was organized incredibly well - I always knew what information I was responsible for knowing and was very explicitly instructed on what information to focus on. I was a high B/low A student first year and saw a direct correlation with how much I studied and the grades I got on tests. Second year, I find myself working much harder than first year and making average to below average grades. I really don't know why I even bother studying - the test questions seem to be pulled from the teachings given a few years ago w/ no thought to what is taught this year. The tests second year really are such a crap shoot. It feels like I spend more time attempting to filter through the barrage of information determining what is important and what is not. Granted - some professors such as XXXXXXX and XXXXXXX do a great job cutting though a lot of the minutia and very explicitly instructing what information is important. Cardio and Renal was horrendous - the reading assignments were unrealistic, and there was little direction to guide studying. All year long, DSAs and powerpoints seem to be posted last minute whereas most of these are available in a much more timely fashion first year --> usually I look at least year's schedule to get the powerpoints and assignments. Many times, the clinical professors throw their presentations together last minute. This school needs to get its act together and hire responsible teaching faculty that will properly direct the course of study. This will take an investment of money. From my perspective, too much money from teaching is being cut for other purposes. Are we forgetting that the reason this institution was created was to educate? Again, let me emphasize that when clinical faculty teaches - we have the most problems. The regulars --> XXXXXXX, XXXXXXX do a fine job. The problems are when we have XXXXXXX, XXXXXXX, etc doing lectures and not taking to time to give carefully thought out reading assignments. I must say I am incredibly disappointed at the display of ineptness during the second year. I've heard XXXXXXX say and a very defeated tone of voice that “this is simply the way it is every year.” If UNT-HSC wants to be a top 10 institution -- then we need to become a top 10 institution by focusing on our students and not overemphasizing the expenditure of money, time and energy on our public image. We've seen the exodus of way too many wonderful professors in the past year. I was extremely excited about being a DO and learning OMM when I got into TCOM. We've lost our two FAAOs in one year! Please, Please, please invest your money, time, and energy more into securing good teaching faculty. And please, end this MD/DO nonsense. It seems painfully obvious from my perspective that XXXXXXX/ Board of Regents is giving the axe to anyone not in line with the new agenda. Gestapo-esque tactics do not make for a top 10 institution and cultivate the wrong atmosphere that is conducive to neither learning nor advancing this institution. The students are very frustrated --> and already the decline is showing in the grades of 2012. I'm certainly frustrated. From what I've seen at this institution, I would not recommend an aspiring medical student to come to this institution to study Osteopathy. Frankly, if we continue on the path we're on... I don't see how we'll have proper faculty for a DO school much less an additional MD school.
Comments - Academics

We need to cut out the classes that make the school look better, but detract from students' study time: Bio Med Research, Community Resources, Grand Rounds. We have advising? Too much time is wasted when the school should just focus on preparing me for the boards.

We need to maintain the quality of our professors, we're losing too many. I feel I was given adequate information to do well in my clinical rotations.

We were fortunate to have some of the best professors/lecturers, but unfortunately many of these same outstanding teachers have been forced out for one reason or another by the current administration. I feel sad for the classes that will follow us who don't have the same caliber of teaching we had. I was well prepared for rotations and, subsequently, for residency.

While making the Teacher evaluations at the end of a course mandatory is nice, it'd also be nice to shorten them and make them more relevant. Many of the questions asked to respond to are things that should be followed and when not would be complained about... so excess clicking without really giving much feedback about profs. The quality of my education was sufficient for me to pass my boards- so it was satisfactory. On the flip side, there are too many 'weak' teachers who are rewarded for making questions out of their powerpoints rather than what they actually teach... there isn't any incentive to attend class. Part of our education as professionals should be to be able to attend class with active learning. I want the material and I need it condensed in a manner that allows me to learn important things, but I also want my time to be respected. If I am going to spend my time going to class, then I want my time rewarded over those who stayed at home (on a regular basis) and over those who don't pay attention and just read the powerpoint the night before the exam. Learning is more than just regurgitation of powerpoint material.

While on rotations I have felt prepared for most of the situations I have been placed in. I have been able to answer most of my attending's/resident's/intern's questions and feel confident in my knowledge base.

While on rotations, have attendings & residents do more teaching. Sometimes students just don't know what questions to ask. I feel as if TCOM and staff provide the tools for a great education and opportunities to learn on your own as you do with boards/residency.

While our school has some of the highest COMLEX scores, I believe the amount of course load we have during the year with OMM, Clinical Medicine, and the core courses don't make it as conducive for students to excel on the USMLE. Instead of having Clinical Medicine being 4 hours on Monday, use those afternoons as board review days especially in pharmacology.
Comments - Academics

You never feel that you can be candid with your reviews/suggestions for course improvement, and some instructors enjoyed bragging about their negative feedback to the class. I know that there are MANY medical schools with fewer classroom hours that have higher test scores, where research is encouraged instead of discouraged.

Quality of Program Clinical Staff

2nd year clinical medicine class is an absolute, total, utter waste of time. XXXXXX rambles in a way that is unrehearsed, unprepared, and incoherent. I can't believe how bad this experience has been.

3rd year residents teaching for the first time is not what I expected.

A lot of crucial faculty was lost and I only hope TCOM can find replacements who can match the expectations that those professors had for their students.

a lot of the basic anatomy from 1st year is lost due to all of the heavy pathology in 2nd year. a review of basic anatomy would be helpful in 2nd year. since XXXXXXX left, it was hard to have continuity in path professors too until XXXXXXX and the other pathologist who i can't remember his name, the older MD gentleman, took it over. i enjoyed the cases during CILs when we did all cases. it would be beneficial to have more of those from clinicians and not just pathologists- usmle/comlex step 2 type questions in CILs. us having to decide on how to manage patients would prepare us better for 3rd & 4th yr and internship.

Again, I feel a lot of people are new this year and are inexperienced on how to help us focus on the main ideas of their lecture.

again, keep the good profs. stop bringing in professors that don't know what they're doing.

Be more mindful of our “complete” schedule and quit sending runam emails saying stuff like, “time to sign up for this...and that”. I feel random things like grand rounds, eye for detail, etc. just show up at the last minute and that our schedule doesn't take these things into consideration.

Better standardization of test questions, as in where the material comes from, the types of questions asked, and mainly the level of difficulty.

Better use of Clinical medicine course time. OSCEs were helpful.

Bring back the quality professors that have left.
Comments - Academics

Clinical medicine as of right now is a waste of time. It needs to be restructured to get rid of XXXXXXX lectures because he just reads the books to us. If he wants to make clinical scenarios and ask us questions like a CIL, that would be fine.

Clinical staff have been great. It would be real nice to have more lectures given by people who are actually involved in the field that they are lecturing on.

Clinical staff is great for some classes ---- The 2nd year class of repro had great clinical professors, but other, specifically cardio and endocrine.... the professors seemed to have never taught before and students were left in the dark before taking exams. The only way to remedy this is for the administration to realize that to keep the great professors, more nees to be funneled into education instead of taking away from it (specifically $$$). Professors who have left and are leaving have no issues with telling students that they are leaving because they are not being paid adequately and because their appointments with patients are being cut down in terms of time spent with patient so the health science center can make more $$.... $$ which they put toward research and new bulidings instead of academics. Academics were once strong, but I believe that should board scores fall.... it is NOT a reflection of the intelligence of the class, but rather it is a reflection of the poor organization and teaching of course curriculum materials.

Clinical staff needs some attention. That being said I am only a first year student, so my interaction with clinicians is limited as compared to some other students. I would enjoy having more CIL’s with clinicians other than XXXXXXX. Having a specialist come in and lead at least one CIL pertaining to that particular course would be a great thing.

Clinical staff needs to do much more teaching on rotations (Internal medicine/OB-gyn was great). Surgery, the attendings were barely around.

Continue to fund the school properly to grow it. This means recruiting great professors, try to retain the ones that are here, get rid of the ones that are not, and invest in the infrastructure needed to grow the student population. We cannot continue with the high standards that we have previously set if we continue down the current path that we are headed.

Courses need to be properly taught. It would be nice to keep the same professors from year to year, especially the ones that teach well, but that is probably some issues that are beyond the scope of the student.

XXXXXXX reading from a book to us doesn't seem to be the most effective use of time. There isn't enough time to really learn clinical workshops (suturing, phlebotomy, etc). If we aren't going to really learn it why waste our time and our faculties time w/ a poor introduction to it.
Comments - Academics

XXXXXXX was awful, inexperienced and did not teach us the material he held us responsible for because he used the previous professors questions but did not cover the material. Clin med lectures with XXXXXXX are a joke. He prattles on reading of the book and adding anecdotes that are just awkward for the class (crashing his car, giving a rectal to his sister, etc.) XXXXXXX would be a much better and welcome change to this dept. XXXXXXX makes too many mistakes and it is problematic getting any straight answers out of her. She should not be in such a position of power but in a supportive role behind someone who actually knows what is going on. Omm is much improved over last year.

XXXXXXX in year 2 clin med has GOT TO GO.

XXXXXXX lectures are a waste of time. Is there anything else we can do with our clin-med hours? On the bright side, he does give us a couple hours to do some Kaplan Q-bank questions!

Excellent clinical education

Except for pediatrics, EXCELLENT preceptors.

For first year clin. med, we need OSCEs sooner and more often. To me there's no reason not to have them. Give first years an afternoon off each week so they can go shadow a physician in town.

Get back the doctors that left

Give a pay raise to the professors who are actually teaching so they won't leave! Train the new professors on how to do EFFICIENT CIL sessions. Also, for first year, I never used past year's powerpoints to learn from. However, for second year, not having past year's powerpoints from a friend equals failure. That should say something about the second year curriculum.

Have professors come in to evaluate their peers; make changes to faculty if they have poor feedback from students.

Hire clinical faculty who are actually motivated to teach and not just draw a paycheck.

Hire more Dos

Hire more.

I do not believe that they place any priority on teaching therefore they keep getting drawn into clinic more and more dissatisfied with their job. Then the good teachers leave.
Comments - Academics

How about you guys stop holding us hostage every week and teach us real things that we might have to do, similar to what the ROME students get to do. I haven't learned a single thing in that class except how to use a table of contents and google and wiki my way though the worthless online tests. What a joke. If I wanted to have a google search contest I wouldn't be a doctor. What is the point really. Just ask the students about the online tests and you will see.

I am happy with the pathology lectures that are taught. However, there have been several instances when no objectives or guidance Power Points have been posted for lecture to understand what is important; this is especially the case for the clinical faculty.

I am worried that these above quality faculty will leave if the MD degree is approved.

I don't believe I have received the instruction I expected in ClinMed.

I feel that more time needs to be spent on OMM palpatory skills during the first year of medical school.

I had great clinical teachers. I don't have much input here

I have made suggestions for improvement in different sections.

I have no idea how it has changed after losing so many faculty and admin leaders.

I have really enjoyed much of the clinical faculty and appreciate their willingness to come and teach us. Sometimes it is difficult to integrate their material with the course as a whole because each one only comes to teach a small part, so it can be challenging to turn it into something cohesive.

I hope we can keep our experienced clinical instructors. It's been frustrating when we get poorly written exam questions or exam questions that do not represent material covered.

I think all documents for a course - powerpoints, word documents, objectives, reading assignments, etc. - should be posted before that course begins. This school is very bad about doing everything last minute. Students need to know what material they are going to be expected to work through over the next two weeks, not the day of, or the day after. If a student wanted to start reading the weekend before a course started, they have to take a shot in the dark as to what to read and what is important. As soon as one course starts, the next course should be set. This is not more work. It only means moving the timetable forward. If the timetable is moved forward before the semester starts and carried forward, then there is no extra work needed.
Comments - Academics

I think it would really help if the course directors ensure that all necessary material for DSAs, lectures, and CILs are posted before the scheduled times. Overall, the quality of the clinicians are very good and they teach us very important information and give us insight into the real life examples that we will see. It is very helpful when they do present the classic cases and put all of the pathology, symptoms, and lab tests into these cases. I find that I can get a lot more out of though when we have the material beforehand to allow ample time to try and learn the material adequately to participate in CILs.

If we keep losing good faculty I am afraid there will be no one left to teach us. Include the students as active participants in the total care of patients. I have had many rotation experiences which were more “shadow-like.” Passive participation is worthless.

Increase clinical preceptorships and quality of rotations

Increase the faculty number so that student to faculty ratio is improved for better learning experience.

Increase the number of doctors so there can be more one on one teaching. Have more interactive learning instead just lectures.

It meets expectations only because there are a few outstanding professors who balance out the terrible professors. To be honest, there shouldn't be any terrible professors. Let them design the course work or write the test questions or something rather than force us to sit and waste an hour to two hours listening to a lecture that we could better learn on our own. Part of this issue is being required to attend class. No other medical school that I know of requires their students to attend class if they learn better by not attending.

It seems like we have a lot of staff per course, maybe more than is necessary. The visiting physicians are great additions, but the extra secretaries and support staff is almost too much.

Keep the clinical staff.

Less students per staff

Less XXXXXXlecture hours, more procedure days.

Make sure that they really want students to follow them and make sure they are willing to teach them as opposed to having students just be the labor and not be able to talk or ask questions from the staff.
Comments - Academics

Make sure that we are working with faculty who really want to teach and take the time and effort to truly teach.

Many of the preceptors are FORCED to support students and the experience with many of the preceptors is that students feel like a burden. There are a few good clinical preceptors who like to teach but they are the minority.

Meet expectations when clinical staff is actually available to teach. Why are fellow classmate paramedics being approached to assist in teaching class in an official or unofficial capacity. This is unacceptable.

More board prep during the year

More Clinical Staff and less PhD Staff teaching

More clinicians are needed. The decrease in the number of clinical faculty is felt in the quality of education we receive.

More Dos

more DOs to teach us

More thorough selection process for who is allowed to teach. A lot of them lack experience.

Most physicians have exceeded or met expectations. the Clinical Medicine department was improving at the time my class went through it but needed more improvement.

Not lose them to new medical schools?

Our didactics are embarrassssing...‘independent study’ is not an acceptable substitute for learning from the experts. And, I mean no disrespect to midlevel practitioners, but I didn't sign up for a subspecialty rotation to be scutted out because the PAs and NPs in the PCC don't like to see patients.

Our staff is outstanding, but they are so worn out and spread thin with all of the extra's that they are having to do under the new practice plan that education has become secondary. I believe that punishing physicians financially for teaching (and not spending that time in clinic) is going to continue to drop the academic level at this university. The board scores that we have enjoyed in the last few years will quickly drop in the abscence of support of our physician faculty by the university. The university is spending too much money on advertising and the new building and no where near enough on education which should be its FIRST priority
Comments - Academics

Pay the professors the money they deserve.

Provide clinical faculty with a document that lists areas to be covered (even specific objectives) and a deadline for their materials to be submitted. That would alleviate a lot of student concerns regarding problems with irrelevant information, inappropriate level of detail (both too much and too little), and preparing for lectures from our clinical staff.

Quit putting the same requirements on the clinical staff as on the non-clinical staff. You can't expect someone who's teaching students to process and bill for the same number of patients as those who aren't. I would also, again, listen to the students evals. Some of the professors - like a certain D.O. orthopedic surgeon and a certain D.O. ENT surgeon need to be let go. The orthopod - XXXXXXXnever talked or instructed or even introduced me to patients while I was with him. I wound up spending most of my time leaning against the wall when I was with XXXXXXX- ENT. If you want to seriously improve the clinical education, you're going to have to do what other schools do - get a dedicated set of teams that do nothing but integrate students into the team and teach them the specific discipline. That should be their job. They should WANT to teach and then be given the training in HOW to teach -- not just stand up and pontificate from their fountain of knowledge. There is a difference.

Replace XXXXXXX, XXXXXXX, XXXXXXX, XXXXXXX. They were the best teachers we had.

Sadly, the politics of education administration often causes the students to ultimately suffer. Pay cuts to top clinical staff often send them elsewhere and there's really nothing we as students can do. I'm just glad I was able to have had all those awesome professors I had before they left.

some are awesome: some i want to avoid

Some of the clinical staff behave as though they do not wish to mentor students, and learning from these staff members can be difficult. Others, however, far exceed my expectations in that they seem genuinely excited to teach and to pass down a bit of knowledge. Students should be asked to work only with the staff that is not put off by our presence.

staff is great, the course structure is awful.

Stop making mistakes in powerpoint slides!!!

TCOM has many talented and dedicated clinical faculty.
Comments - Academics

Stop requiring that students sit and listen to someone read to us out of a book. We all have the book, we can read it to ourselves. You know it's bad when the best students in the class are wearing flesh colored ear plugs to study instead of listening to someone read to us. I would prefer to learn procedures. Not just a quick overview and a once every other month viewing with 20 other students, but hands on learning.

Stop wasting our time. XXXXXXXI lectures, while very informative are not applicable to us as second years. Also he's very distasteful with his off color jokes and stories. And the day we watched Patch Adams, we are med students, most of us have seen it a number of times. What we need instead of a movie to “give us a break” is time to study so that we can have a break later and be able to relax.

The clinical staff except for a select few fail to provide even an average learning experience. They are so clinically oriented and so detached from students that they proclaim that we are just complaining and we can handle it without trying to appreciate our situations at all. We are neglected and constantly taken advantage of to the point where most students feel like dtering any other student from comming to this institution.

The clinical staff has always met expectation, but in the past they exceeded expectations on the teaching front. The loss of several great clinical staff that were excellent teachers has downgraded the quality of teaching in the clinic. The clinical staff I worked with were great!

The Clinical staff is excellent- provides a broad base of 'commons' and teaches applicable material. Of course, most of the professors I speak of have not been retained (thanks in most part to XXXXXXX).

The clinical staff teaching us are not ready to teach. Having second year residents teach cardiac pathology and clinical cardiology is 100% unacceptable. We need seasons professors teaching about the number one killer in America.

The EMR system makes patient care extremely difficult and decreases potential teaching time from the preceptors.

The following faculty meets expectations in year 2. XXXXXXX, XXXXXXX, XXXXXXX, XXXXXXX, and previously doctors XXXXXXXand XXXXXXX. I feel that many of the other doctors who lecture to us are concerned about telling us about their specialty and/or hearing themselves talk. We get information that does not seem to be relevant to our education at this level of education. (I could be wrong about this- that is just the way it seems)

The OMM rotation needs to match the rest of the rotation in quality and expectations.
The physicians involved in teaching clinical skills are very motivated & passionate. However, when I had the courses, it seemed to be very disorganized and lacked daily objectives. I felt like we as students had to be more proactive than usual to glean the necessary info & skills.

The scheduling gets messed up all the time. This is important stuff to know, but it is kind of put on the back burner the way it is taught right now. We become more concerned with our systems courses; it becomes hard to take clin med more seriously.

The school needs to expand and improve some departments clinical faculty. Most JPS rotations are very good. Pediatrics at UNTHealth is too long - Cooks is great. OMM at UNThealth is great - elsewhere is a joke.

The school needs to focus on maintaining the high quality of osteopathic clinicians on faculty. The osteopathic faculty educated me how to compassionately diagnose and treat my patients. Thus, I was able to address patients chief complaints about why they are unhappy with the current medical system. Many patients complimented me on my skills, saying I will be such a good doctor because I had good osteopathic training.

The second year course should be termed a disaster zone by the US government. Please see my above comments. DO NOT IGNORE THE FACT THAT THIS CURRICULUM IS ABSURD. THE FACT THAT WE ARE WRITING PAPERS ABOUT IT AND BRINGING IN OUTSIDERS TO SEE HOW WE DO THINGS IS COMICAL.

The staff are very knowledgeable. I don't think they aren't all on the same page.

The staff is great, however the courses that we are required to sit in on could easily been done in a different manner. Clinical medicine should be done after the basic sciences and be made its own block. It would make sense to have this immediately before rotations since that way it would be fresh in our minds right before starting and students would actually study for it since it would be closer to doing rotations.

The staff that we have are wonderful, but that's not the problem. The problem is that there aren't enough clinical staff for rotations locally. When we have the same variety of specialties here in DFW as any medical center in the country, why should we have to go to places like Corpus Christi or Houston, or anywhere else.

There are several clinical staff that should not be allowed to have students. They either treat them very poorly or they use them more for scut work rather than as students they should be teaching. Other staff are absolutley wonderful.
Comments - Academics

There are some very good clinicians, but not enough.

There needs to be more clinical faculty present during years 1-2 that aren’t so overburdened by clinic that they have time to devote to actually design and prepare for a curriculum instead of having to do everything by the seat of their pants. The Clin Med instructors need to be given additional time away from clinic duties to work on the curriculum.

There seems to be a high turnover rate of faculty at our school, and from what I understand, we’ve lost some of our best members.

They are often harried, and over-worked clinically (understandably) so they are often “running late,” or “trying the best they can” when things do not go quite as scheduled. Also, I feel that clin med can be made better if we have regular contact with patients (something a lot of us enjoy) to remind us why we are learning the techniques. Perhaps we can take it seriously to learn the clin med techniques in order to apply it soon after we learn it. And also, I feel that we should utilize the simulated patients even more in clin med regularly to recognize dyspnea, tachy/bradycardia and other clinical manifestations.

they need to concentrate on what will be tested and link them to real world situations. Stay on topic please. I really don't care about anything that won't be tested on the boards. There will be plenty of time to learn how to practice medicine and the legal aspects of it 3rd year. They seem to be overworked.

Watching videos, then being told to feel each others stomachs guided by a checklist is something I could do at home. We need to spend more time learning procedures, rather than repeating everything we did in the first semester. The best day of clinical medicine, we rotated through multiple stations, getting to spend time practicing suturing, intubating, and worked in the sim lab on heart sounds and breath sounds. The problem was that each station was not given enough time, so while in theory I have learned how to intubate, I haven't actually had the opportunity to hold a lyrengoscope in my hands. This frustrates me, since we then take 2 hours to do something that we learned last semester in depth.

We have some of the best, most excited, motivated mentors and attendings available. While the part of me trained in research through my masters degree wishes there were more clinical research occurring on campus (both of and not of an osteopathic nature), I believe the attitudes of service, scholarship, and teaching through example were well-demonstrated by our faculty.

We keep losing quality professors and are lacking adequate prep skills needed for our clinical rotations.
Comments - Academics

We need more integration of osteopathic principles & philosophy & manipulation in the clinical setting. I have seen so many patients that may have benefited from OMM, but the physician was either not skilled to offer the service or did not take the time to do so.

We need more one-on-one interaction between students and faculty. We lose clinical sites constantly and we get crammed into already crowded rotations. TCOM students hardly rotate at Baylor or Harris, two of the biggest hospitals in Fort Worth.

We need more relevant material at times.

We need to have more opportunities to do rotations with doctors who use OMM. Also, many of our clinical instructors are not prepared for students - they don't know we're coming or they don't know what level of experience we have or they expect us to perform at a level for which we have not been trained. See one, do one, teach one is NOT adequate teaching.

With the recent occurrences of staff leaving the institution for various reasons it gives the air that the school is on shaky ground. Something ought to be done concerning this. Unfortunately, I don't have any solutions to offer. I can only tell you how I feel.
Comments - Academics

SHP – MPAS  (n=57)

At every rotation, my preceptors comment about the level of knowledge our PA program bestows upon us and our diagnostic skill fresh out of the box.

XXXXXXX was an extraordinarily helpful teaching/graduate assistant in the anatomy lab; I feel like all of our other graduate assistant lecturers may have known the material but were not effective enough at communicating their information to students in the lecture hall setting. I also would prefer not to have guest lecturers from other institutions who are taking opportunities to present a lecture to students as a portion of their job interview at UNTHSC. I don’t feel like that is appropriate, or fair to students who are familiar and comfortable with the instructing style and testing style of UNTHSC professors.

Didactic Staff - great. Could improve in pathophysiology. Clinical Staff - relatively positive experience, however some preceptors expectations need to be managed...ie: we are STILL students and have not had much practice prior to rotations - especially blood drawing, suturing, reading CTs, casting, OR situations, etc.

Give the quality people that we have at the school a raise and try to keep them. Too many to name, there are countless faculty, staff, an administrative personnel that strive to make my time there go smoothly and effectively.

Great campus and faculty for the PA department

I feel that the staff is very conscience about improving the quality of the education. I feel that if we seek help, we can get it.

I am very satisfied with my education so far, and I feel that our program is very well organized.

I do feel that lack of communication has been prevalent in our PA program. It is frustrating to witness as a student and I feel that this simple act would greatly improve this program. I have seen it between the teaching staff and the faculty that help give out the tests. EX: I have never experienced this in all of my academic career but fall semester 2008 we were given an anatomy exam for 1 hour but needed to last for two, in the middle of taking the exam we were told to turn our exam over and given a physiology exam for 1 hour, and then told to finish the anatomy exam. I feel that this whole mess of a situation could of been avoided had communication taken place.

I feel a lot has changed in the last 3 years, some for the better some for the worse, I believe the program really needs to look at how it compares to others in regard to length, requirement for masters project, and un-needed courses.
Comments - Academics

I feel I am being guided to the most relevant information within the time constraints of the program.

I feel like a lot of my studies have been self guided, which is fine except for wasting my time in class. More time in rotations and less time didactic, this is where the real learning is and a better use of my time. Stop wasting my time with stupid assignments that will have nothing to do with my ability as a clinician.

I feel like I am learning at good pace and I feel like the University does care about making sure we are good providers.

I feel like our faculty really care about training us to be effective in treating people, not just helping us to know more biological science.

I feel like the evaluations are great at improving the curriculum, but if there are important issues that need to be addressed with a specific member of the faculty those concerns are not dealt with. These issues are well voiced in the evaluations and yet nothing is done. Quite honestly I have heard that they are filed and not even read in some cases, depending on who is in charge of that particular faculty.

I feel like there is a great deal of collaboration between faculty and students in pursuit of quality medical education. I love the mutual respect and sense of responsibility and motivation found at UNTHSC. Overall, I am highly satisfied and very pleased with the quality of my education at UNTHSC. I must say that I am most impressed by and grateful for the dedication and involvement of our PA faculty and staff. The dedication and enthusiasm of XXXXXXX and that of the other PA faculty members has made the greatest difference in my positive experience here.

I feel satisfied with the staff, their methods of teaching. The materials and technologies are big helps.

The evaluation system for the faculty is poorly designed. The questions that are asked do not seem to relate and seem to give higher marks for someone that may not be doing a good job at all. If a faculty member provides a list of slides, posts the slides ahead of time, and shows up on time, they seem to get good marks on the evaluation even though they may not be doing a good job.

I feel that our program was a well oiled machine coming into my first year. The faculty was very helpful and supportive, but the PA program seems to have slowly hit a couple of bumps in the past year with faculty turnover. Otherwise I feel all of the lecturers and preceptors do an incredible job! I could never have felt as confident in my skills as I do now without their guidance.
Comments - Academics

I feel that some of the time spent in some classes could be decreased in order to facilitate more time outside of class studying materials from some of the harder classes.

I feel that the faculty/staff do not like my class. I feel because of the actions of possibly a few of the students in my class all have been grouped as troublesome. This has resulted in a feeling that I cannot communicate openly with faculty even if I am in a troubled situation.

I feel that this school is preparing me for my future profession

I have found the majority of clinical faculty to be helpful

I find that sometimes some courses that the PA classes are given are not as relevant as other material could be. Often times I feel that the teaching staff that we have had are not interested in the material or dismiss some of its importance.

I have been more frustrated with the disorganization of the PA program more times than I can count!

I know I gave alot of negative feedback above, but I think the overall quality of education here is excellent. It just seems if a few things were changed then the frustration experienced in this program would be reduced, and the quality of education would be even better. Most of our teachers are really great, especially the PAs.

I know that I'm in a graduate program and should be able to think and learn on my own, but if the lecture material is not presented in a fashion conducive to learning, I feel I'm not getting the education I paid for. I think course directors and instructors should be more open to constructive criticism provided by the course evaluations.

I love what I have the privilege of learning each day.

I sometimes feel that it is not difficult or comprehensive enough, but I am always learning and feel confident in clinics.
I was dissapointed in the turn over rate in faculty and preceptors for both the PA program and DO program. We have lost alot of good preceptors and faculty

I would like to have seen the program fight a little harder to retain the great staff that have left in the past 2 years. Some of the new professors coming in are not as personable and approachable to the students.

If we are refering to clinical preceptors, which I'm assuming this question is...then some are better than others of course. Currently I am in a horrible rotation with a preceptor which I do not believe should be sent any students from this program.
Comments - Academics

Instructors such as XXXXXX that repeatedly alienate class, are not knowledgeable in areas they are teaching, are underprepared, and therefore get consistently bad evals are still teaching and leading courses. It would be nice to have more professors that are dedicated to the teaching side of academia--i often feel we get the short end of the stick where instruction is concerned.

More communication with clinical staff concerning expectations when students go to clinics.

More experience based, hands on practice in clinics before rotations.

More independent study time would be beneficial and less in class lectures. Lectures should be a reiteration of the objectives for lecture and Q&A. Much of our time is spent teaching ourselves the material that is presented in lecture. Evaluations should be used as a tool for course improvement.

One of our teachers is consistently given terrible evaluations, yet he is still here. I understand an attempt should be made to help that teacher meet expectations, but after intervention by administration and no, or very minimal improvement, the teacher should be fired, or moved to clinic duty only. Certainly He/she should no longer be a block director. A student who failed to improve after multiple chances would be told goodbye, shouldn't the instructor be held to the same level of expectations. Also, someone said they thought it would be a good idea to have a few days between when a class ended and when evaluations were open to give students who may have just had a bad test time to cool off before the evaluation. At least it would make the evaluations a little more objective. Master's project does not really help in our preparation to be PAs. We have too many instructors giving feedback on the papers, and that feedback is consistently conflicting. The whole process of turn in recieve feedback, turn in recieve feedback, repeat previous fifteen times, is not only frustrating but also really does not contribute to the overall learning process. Overall point, I have spent way too much time working on masters when I could have been learning medicine.

Our class went through a lot of changes and faculty turnover that I feel diminished the quality of our education, but UNTHSC is still a good school. Once all the changes are made and new faculty become old faculty and all the kinks get worked out, I'm sure future classes will benefit from the changes and really enjoy their education.

Our school continually scores very high on the national boards, so even though it feels like we can never learn enough, it seems our graduates are well prepared.
Comments - Academics

Pathophysiology in the PA program is very weak. We are taught how to clinically identify disease by symptoms but we are not taught why/how the pathos occurs. The program would also benefit from: 1. A thorough EKG course - XXXXXX has a nice series of presentations EKG 101 (I was able to take part in during my rotation at Plaza). His approach to EKG, however, should be taught prior to rotations. 2. A diabetes educator should be integrated into the Endocrine section to better educate students regarding insulin adjustments, meal planning, use of glucometers, etc. 3. All students need a series of visits to the OR prior to rotations to learn about equipment, rules, roles of staff (anesthesia, scrub techs, nurses, radiologists). All surgery rotations should perform a refresher course regarding the specific facilities procedures and scrubbing techniques to ensure safety of everyone. 4. Hospital 101; resources available, equipment operation (bp monitor, ekg monitor (if you don't have ANY IDEA on how to turn off an annoying beeping machine...your credibility goes WAY down) staff hierarchy (attending, residents, nurses, PT, etc.), orders and consults BASICS. For ex: typical IV loadings, abbreviations and what they mean!!!

Poor pathophysiology. The student affairs office should also have means to diagnose and provide assistance for learning disabilities and ADD.

Students complain about a certain teacher and nothing seems to be done about it. ex: XXXXXX

The administrative assistants in the PA office should be given raises, and more respect. They do ALL of the real work, and are sometimes treated poorly in front of students. This is a real blemish to the program!!!

The environment & faculty is extremely supportive and despite the fast pace of our PA curriculum, I truly feel I am learning the material. The faculty are the key to an institution and I feel they are doing a great job. Additionally, they respond quickly to request for change in order to improve a class we is important in continuing to improve courses.

The faculty is approachable and when taking anatomy we were able to have access to the cadavers and the cadaver lab at all times.

The faculty, staffs and infrastructures at the UNTHSC help to create a conducive environment for me to study. My professors are very helpful and motivated to do their best in teaching the course that they are responsible for. I feel I can always ask questions to my professors anytime I need help and they are always be willing to help.

The PA faculty has been amazing!

The person who replaced XXXXXX is not as personable, and is often confusing in her demeanor towards students.
Comments - Academics

The staff is great

The vast majority of the faculty is great, but there are a few positions that could be filled with better suited people.

There has been a lot of change over the year and a half that I have been a student here (PA). These changes have resulted in growing pains that I feel my class has gotten the brunt of and have not been a benefit to our learning experience.

This is an outstanding institution with top quality personnel. I have always felt like I was an important part of the family here. I couldn't imagine being anywhere else.

Watch the professionalism level of faculty and leadership. I expect professional language at all times without exception regardless of circumstance. I do not appreciate anything below 100% professional language at all times. Faculty, is for the vast majority of the time professional; but, not always.

We have seen an incredible amount of turnover in the 2 years that we have been here and I truly think that has hurt our program. Ultimately it is our responsibility, but I do think things could be much better.

With all the changes in the program, I know that there will be some inconsistency, and I think that the staff tries to do their best. The staff we've had has been very informative and helpful

With the new addition of many new faculty it does make it difficult to effectively fill out an evaluation

Work on communication

work to retain the good instructors so there is not as much turnover
GSBS – Medical Sciences (n=24)

GSBS Admins (esp XXXXXX, XXXXXX, XXXXXX and XXXXXX) are great! GSBS Med Sciences curriculum (esp Biochem and Mole Cell Bio) could be tailored better for future medical students.

Because I’m learning tons of information, the majority of which I see as relevant to aiding me in med school.

Certain sections of certain courses, especially cell physiology, emphasize learning large amounts of minor details, such as acronyms, and gene sequences, that are impossible to remember 15 minutes after the tests. If there was more time spent on the underlying, more universally applicable concepts behind them, this knowledge would be better retained and more practical.

I am satisfied with the quality of the medical science program, however I am NOT satisfied with the administration of the program. There seems to be disorganization. The grading situation has not always been fair.

I came here in order to prepare for medical school and, as of now, I feel extremely prepared.

I feel like we take some courses just to fill the hour quota. Instead of taking clinical management, epidemiology, and biostatistics, we should take development of diseases, as that is the one class that we (the med sci students) don't exceed on in our first year at TCOM. The classes that we take seem irrelevant to our goal.

I feel that some of the courses we take are useless.

I feel the Medical Sciences will prepare me for medical school. Most of the professors are great and do care about your goals to become a physician.

Instructors do their best to work with and for students, despite the unnecessary complexity of scheduling. Too many contact hours, lighten the day, most of us learn best with self study.

It is very exciting and encouraging to be studying and preparing for medical school in the actual medical school facilities, with many of the same staff! It encourages me to keep focused on my future!

N/A - teaching is excellent here

Overall, the professors we have had do not seem very concerned about our professional goals and aspirations. The anatomy professors have been better than the professors we had last semester.
Comments - Academics

Perhaps setup times during the semester to meet with the students in the Medical Science program to check on status and career plans.

Some advising is vague. There is mixed communication on what is the minimum GPA to be considered for TCOM.

Some of the Medical Science courses will get revised this coming Fall. The feedback they have taken will make a big difference to improving the program. The evaluation is a good tool for providing feedback on courses and instructors.

Some of the professors are absolutely great! They are intelligent and caring towards their students.

Some professors are not at all engaging, and it is hard to stay interested. The course evaluations are done at the end of the course, after you have seen multiple professors. It is hard to evaluate a professor when it has been months since you have seen them, and you have seen multiple professors since. A way to evaluate a professor after they have completed their portion of the course would be nice.

Teachers and staff are always willing to help.

The education is good. I feel I am learning and using this material in the best way possible.

The material is similar to what I have seen in medical school materials. However, the course layout and overlap are not similar to what medical schools use, even the one here. If the purpose of the medical sciences program is to prepare us for medical school, then the courses should be run in a similar fashion.

The medical sciences program is very competitive. I wish the program wasn't designed in a way to foster this overly competitive culture. There is poor communication by the GSBS and TCOM administration regarding TCOM admissions and a lot of uncertainty and waiting. This doesn't help the camaraderie between the students who are very concerned about their futures and don't have any idea what to expect or when.

There was a big difference in my satisfaction between our Fall semester and our Spring semester. In the fall, I felt like our classes were training us to become a PhD when we are here to be future physicians. The Spring has been much better and tailored to our future.
Comments - Academics

The only advice we were given was to apply to medical school early. When it came to our personal statement, they sent us to the CAP where I emailed my essays. My only response was sounds good. More recently I submitted my essays to XXXXXX, who tore my essays apart and offered solid advice on what I should add or omit. XXXXXX was also very helpful in my application process, but again, I went to him on my own. We were not really advised to go to anyone, I just stumbled upon this help. It's unfortunate that I didn't find them until I had already submitted my applications. I guess my essays will be better if I end up having to reapply next year.

The professors are excellent, curriculum is very solid, and the facilities are quite good. I feel confident that a degree obtained from UNTHSC would be very valuable.
Comments - Academics

GSBS – MS (n=29)

A handful of the faculty appear to really care about teaching and relevant curriculum. However, a majority appear to be either not really good at it or are only fulfilling an obligation to something that gets in their way. Course and Instructor Evaluations are a joke. After making formal complaints about XXXXXX Core Biochemistry Section, I was told by the dean that he is a great, thoughtful instructor that receives great reviews on his evaluations. That is absurd. Many students, including myself, have given him poor reviews. In addition, the evaluation doesn’t ask about the exams and grading, which is where he fails to do his job. I was also told by several different layers of administration to not pursue my complaints about XXXXXX, for fear of reprisal. The teaching and admin here are not on the same level as UNT, Denton. I do not have great pride and satisfaction in the education that I paid and work for here.

Advising in some departments is not as good as others. I really feel that the students are at a level where they shouldn’t be told exactly what classes to take, but they do need guidance and advisors should know what you need to take to graduate as soon as possible. Luckily my advisor (XXXXXX) is knowledgable about this, but many of my classmates have told me that their advisors don’t have them on a timeline, such as when they should complete their research proposal and turn in their graduation paperwork. Also students are busy with their research, so it would be nice to get reminders that they are due to pick a committee.

At the moment I am not happy at all with my education. most especially in the CORE classes. For this past fall semester, it was too much information, too quickly and I felt that I did not learn anything except how to function in crisis mode.

Before deciding on a textbook to be used for one of the core classes, please make sure that it has a glossary in the back. It can be really frustrating to not have one!

Counseling staff has performed an excellent job for M.S. in Medical Sciences program.

Due to the fact that UNTHSC also houses TCOM, I felt that most of the program was only geared toward medical studies. GSBS has other programs other then medical sciences. There are too many teachers for the Core Classes. These should be limited to one or two professors.

I am very happy overall with the course work so far, and appreciate the fact that I'm challenged every day. The faculty is awesome. They genuinely want to improve students’ education and very effectively find new and interesting ways to make sure that they do.
Comments - Academics

I do not have great pride and satisfaction in the education that I paid and work for here. Although it appears that some attempts to improve the quality of the school, because of the disorganized atmosphere and the overall, Do just enough to be adequate effort put forth by the University, it makes me not very confident in the quality of education that I have received. When XXXXXX in the GSBS Core is detrimental to the university and the students, and students that complain are told there is nothing wrong, and to keep quiet by faculty and admin, it creates a lack in confidence as well. I do not recommend UNTHSC to co-workers that want to continue their education.

I don't feel that I am getting an education that is helping to prepare me for future endeavors. There are not enough worthwhile elective courses to take.

I feel like the quality of my education is adequate, but as we all know everything can be improved. I think adding more courses and of course more professors would vastly improve this program. I feel the best way to bring in more students and grant money in the future would be to pull the forensic genetics (FGEN) program away from CGEN and make it a department all of its own. The Center for Human Identification (UNTHSC CHI) brings so much grant money and notoriety to the school that if the FGEN could stand tall and proud on its own two feet I feel the community as a whole would recognize us and more undergraduate students would become interested in the program and school. Crime will always be around and therefore forensic scientists will never be out of a job.

I feel that for the most part the professors are always willing to help and really want students to learn. I feel that I have learned a lot and that it will help to carry me forward in my academic pursuits.

I feel that there is inadequate teaching labs (including equipment, reagents etc). Also there are a few faculty members, that don't communicate with students enough, which makes it really difficult.

I think adding more professors would improve the guidance provided as all of the current professors in the program are involved in a lot of work outside of just the classroom. Availability is limited and more professors could help reduce this and improve the availability to the students.

I truly think the forensic genetics program would benefit from more applicable courses and more professors (such as XXXXXX and XXXXXX -both are AMAZING!) I agree that basics are still basics and everyone needs to know them, so the CORE classes are acceptable. I feel like more lab/software (hands on) courses would benefit students immensely.
I really think that advising in CRM is below par...it might have to deal with the lack of knowledge the current faculty have with CRM but most of my questions regarding my practicum and project have been answered by me going out and finding someone to answer it for me. I have been given a timeline to complete certain projects but yet no feedback is really given from my advising staff in a timely matter. I have to fight with the 1st year Med Students schedule to be able to meet with her. It might have to do with her being stretched to thin in the many jobs/responsibilities that she has but a better job needs to be done for future students. A person with vast experience in CRM would be better suited to help advise students with specific questions when dealing with clinical research; the current staff is learning as they go and really benefit more from the students than the students benefit from the staff. If we are going to pay good money for tuition, then we should be able to get some quality help from our advisory staff.

It is a great campus but I feel that all the focus and efforts are put towards the medical school. I strongly suggest to separate the ceremonies (white coat, graduation etc) into the different departments. As far as education, I feel the forensic genetics program needs more funding for hands on learning experience.

It would be most convenient for incoming students if there was a laboratory course for the most fundamental/ most often used lab techniques, since not all incoming students have had experience in the lab. This would save the trouble of having to learn them during rotations which I feel would lead to a more productive and beneficial experience during that rotation.

Major professor could do a better job of being able to answer specific CRM questions...she definately is willing to help out but could really use another person with vast experience in CRM as her assistant.

Make class evaluations optional.

make sure that relevant subjects are included in the course curriculum.

My Major Professor/Mentor is very pre-occupied with teaching medical students, as it appears other professors are as well, compared to guiding and teaching graduate students.

One thing I noticed was how over-extended my major professor was. She has a lot of students and it would be nice for her to have some help. Even though her schedule is so tight she was always eager and willing to help.

Overall the course curriculum and teaching pattern is good but there should not be any class week before the final exam and two exams on the same day.

The core challenges by teesting knowledge and application of established facts, and instructorors include recent findings. Keep the exams in essay format for
Comments - Academics

GSBS students. I've never taken science courses that tests knowledge with essay questions until my first semester here. I don't usually retain what I learn for very long unless I practice it, however, I've still retained a vast amount of material I learned the previous semester. I feel this is due to essay examinations that force me to organize my thoughts and tie ideas together.

The quality & sense of proffesionalism & integrity instilled in me by this Institution as well as the degree will give me my best in my career.

The serious feedback to proffessors from course evaluations can help them in improving the curriculum in many ways.

There are some courses that some students have to take that will be irrelevant to their careers. There needs to be an anatomy program that fits the anatomy students

This is an excellent Institute in whole Texas and I am proud I will be a future graduate of this Institute.
Comments - Academics

GSBS – PhD (n=40)

advisors should be more informed about duties of the student and the faculty and they should be more involved with their students, I feel like my advisor never talks to me, only if I go to her does she interact. Advisors should be more interactive.

Areas of immediate attention: a course in bioinformatics, lowering the price of using confocal and electron microscopes, increasing the no. of electronic journals in library, increasing the no. of laptops in lib, providing better and discount price food on campus
Not immediate: increasing the no. of good quality movie DVDs in library

As a PhD student, my own education is mostly controlled by myself. Thankfully, I have a wonderful major professor who has helped to foster my education, encourage me when I need it, and reel me back in when I go to far. My only wish is that the graduate school will one day get a FRACTION of the praise that the TCOM students do. Often, I feel that the graduate students are overlooked and our accomplishments are ignored. A perfect example is the slogan Fort Worth's medical school...and more! Wow, thanks everyone for considering us and more. It's the graduate students are frequently the only ones here at the school at all hours of the day and night, on weekends and during the holiday vacations. This is mostly by our own choice, but it would be nice for all the 8th floor people to acknowledge this from time to time. And RAD is NOT acknowledgment, until you can get judges that have an understanding of ALL scientific fields instead of just molecular biology of the eye. Thank you for taking time to ready this.

As a PhD student, this is the last time (I hope) I will be a full-time student and what I consider my last chance to learn as much as I can about my area of specialty. So many of the requirements are so time-consuming (despite their questionable relevance) and deter or prevent (due to time restrictions) opportunities to work on research projects or register for more applicable, advanced classes. Perhaps after I complete the core this semester, I will feel differently - but right now it's often frustrating and disappointing, I feel like I am prevented from pursuing what I came here to do.

Because I'm very satisfied with the quality of my eduction, and that i learned a lot in this school.

Besides some of the few very bad mentors, overall I believe the quality of the environment and education met my expectations.

XXXXXX is wonderful!!

getting grants is the main focus and very less focus on guiding students.
I agree but not completely, because as far as the graduate program goes, certain things about the courses and the overall idea of handling the project is not conceived by the student till the last moment when he or she has to decide. I think a clear picture about the entire scenario about how the courses, exams and the grant writing will affect the students performance in the lab. It takes a while for the student to realize the whole picture of his or her own project and the understanding of how that should be handled.

I agree mainly because I took a lot of initiative to get more learning experiences. It was not due to any overt effort on the part of the school to make sure I was satisfied.

I believe I could receive a great education here at the HSC, but there are several professors who should retire their professor status since they do not teach well and I also feel that with my advisor, and I think that better advanced classes should be offered, more of them should be available for PhD/master's students.

I feel that I have a strong background in basic science and the practical research experience to go with it.

I feel that many of the people who walk out of this institution with a degree were simply handed the degree without actually deserving it. This brings the whole school down and lowers the reputation for those who actually worked for their degrees.

I have excelled much further than many peers and the general population.

I haven't seen the extent of evaluations like are done here. And we actually see feedback that is obviously from a review of that information which is unusual from past experience. It also comes fairly quickly rather than years later. Please continue to do this.

i think overall i am getting what i came here for,,

I think the core and advanced classes offered to GSBS students are sufficient especially with so many new advanced courses starting this year, I feel its sufficient.

I think this is a very nurturing environment with out holding your hand. I feel that I am challenged at every level of learning.

I'm paying and arm and two legs for it.

It has been my personal experience that not all person at the school are treated equally.
**Comments - Academics**

It's hard to give an opinion on the core curriculum when there are both good and bad teachers, because there are too many different teachers. However, I know things are once again changing, so my opinion will be even more outdated.

I've had better luck at pulling teeth than getting answers, needed paperwork or emails out of the gsbs office. It took me two weeks to get them to finally email me forms that I needed. 2 WEEKS TO CLICK THE SEND BUTTON........

Not enough focus on research and our school is not well respected because of the DO program.

Professors do not come up with new exam questions yearly and consequently students simply memorize old exams and pass with flying colors. Therefore, students come out of courses with A's yet still not truly understanding the fundamentals. Professors seem to know this yet don't seem to care a whole bunch.

some faculty advisors are helpful and interested in the needs of the student and some (XXXXXX for biochemistry) do not seem to care much of their student's needs and she has told me that she is not happy with the performance of her students this year and she named every single one of our names, that's very unprofessional! She doesn't meet my expectations as what a graduate advisor should be and I would like to change her with someone who does care like XXXXXX, but since we are limited to the number of advisors available in each dept, I feel that I will be stuck with her and her unprofessional, non-caring manner.

Some general classes like the core have way to many teachers. When it comes to their teaching they are experts in this particular subject and test on material as if we are experts.

some help should be given to those professors who may be excellent in their field but not in conveying what they would like to the student body, perhaps a weekend workshop during the summer

Students need to be told when things are due and where to find the necessary forms more clearly and BEFORE they are due, not a week after the fact. Due dates are not clearly stated or easily found, and no one seems to think that the new students might not know where that information is.

The advanced courses offered and their frequency of offering is still not adequate. Evaluations only at the end of the course is not adequate. Students should be allowed to convey their opinion during the course too.

The classes are tough and well taught by a good staff, and as such I feel as though my degree with mean something with I graduate.
Comments - Academics

The curriculum relevance is an issue of breadth versus depth - most students effectively suffer through portions that will never be relevant once they've graduated or passed qualifying exams. As a cell biologist, I will not use most of the materials in the spring courses and am limited by time, to pursue advanced material in my area of specialty; students in other areas may feel the same way about the fall courses (which I do find relevant). I don't know that the faculty can use the information in the evaluations because the students are all mixed together, and the core is an example of 'one curriculum does not fit all' - programs like the med. sci. have a lot more students, and their perspective will outweigh all others. Any changes will only benefit that group, and in many cases making it less relevant to the other groups of students. The same applies to department seminars - other institutions I have attended require attendance (usually monthly versus weekly), but not registration for credit hours. A quarter of my hours each semester are for weekly 'journal club' and 'department seminars' versus an actual course containing advanced materials of greater interest.

The instructors are very knowledgable. For starting out, the core is intense but definitely provides a good platform for extending knowledge even further. The only thing is the first semester there was so much information that I think it was a bit more difficult to retain much of that long term. I would scale down the volume or depth of information and really ensure students learn the principles and basics for long term knowledge on which we can build.

The number of required courses are too many. Leaves me with very little time in the lab and does not allow me to choose the courses most suited to my research.

The reason I chose below expectations on administrative support is not because of the GSBS Dean's office, but rather the president's office. It is a widely held belief among grad students that they don't care about us, this is because of all the publicity and improvements constantly being made for the medical school and the overall lack of publicity and programs coming from the presidents office to the grad school. They took away our white coat ceremony, they are worried about adding an MD and made the school slogan Fort Worth's medical school and more. That means we are just some more.

The statistics class met none of my expectations. When it came time for me to apply what I learned, it was very difficult to make the transition. If the class was more example based for basic science majors not public health then I believe the application of the knowledge would be more relevant.

Though I would like to e focusing more on my area of specialization, I understand that it might not be possible for the University (specialized for health sciences only) might not be able to provide it
Comments - Academics

This school is horribly run by Politically Correct cowards. Leave students alone rather than babying each interaction. Adults can be disrespectful to each other without Big Brother getting involved in the form of the extraordinarily mediocre XXXXX and his acolytes. I hate this place with the heat of a thousand white hot suns. Were it not for finding a good mentor, I would left this Micky Mouse place years ago.

UNTHSC is a small community of researchers so we can all get to know others in your research area to set up collaboration, etc.

We have excellent administrative support and graduate advisors for the MB&I department. The graduate advisor for Micro/Immuno is proficient in the campus procedures and if he doesn't know the information he finds it out very quickly! Additionally, he has a vested interest in how his students perform through their graduate careers.

We very badly need a full fledged course in bioinformatics. It is required by students of almost all disciplines. It will also help the GSBS students to perform better in labs and design better experiments. Serious attention should be paid to this. cost from other fields may be cut to pay someone really knowledgeable in the field.
Comments - Academics

SPH – MPH (n=80)

2 paths for students- working students and research students The move towards daytime classes only is sad. It reduces the chance of working students. I am currently writing state congressmen to complain about the reduction. I do not feel the school listens to working students. I feel when more Public Health trained professional are needed, we are limiting the availability of the talent pool. Research AND Teaching should be the focus of the school ... it should not be one or the other.

90% of my faculty experiences have been able to enhance/augment my own motivation and passion for studying public health, as well as provide for future job security

A lot of the elective courses are only offered in the summers, but many electives are required and we are expected to do our practicum in the summer also...please offer more elective courses in the fall/spring semesters, especially the springs. I am having trouble finding electives to take in the spring 2010 semester because all the required epi courses are only offered in the fall, a lot of electives (epi and otherwise) are also offered in the fall, and then there are very few electives in the spring.

Allow more availability of classes each semester than only having a class available once a year.

Although the SPH is improving as a graduating Masters student I still don't feel that I can compete in this economy,job market and against other top tier or even mid tier Public Health students. The courses are not well rounded enough. Ex. The Epi students think that qualitative research is a waste(read:poor future research in the future due to lack of understanding of the community) and the Community Health students will not have jobs when the graduate because they don't have enough quantitative background (read: lack of knowledge of biostats, intermed epi= poor future research due to subpar understanding of quantitative research).

As a working student, I would always like more courses to be offered in the evenings.

Choice of course selection is limited. For some required courses, another required course is a prerequisite and those courses are offered only once a year. so students have to wait whole year to take that course and the practical training is delayed. Unnecessary delay in the degree.

Evaluations should be made mandatory. This way, the schools are able to get every student's opinion.
Comments - Academics

Communication regarding feedback from the course evaluations would be helpful to ensure that 'someone' is listening to the students. It feels as if those are filled out and not taken very seriously. Find away to allow students an opportunity to see how their feedback is used.

Due to the nature & size of the campus and student population, the interaction of the faculty and administrators is excellent. There are many opportunities to learn or practice.

For the epi program we are missing alot of biostats background and would like to have those two programs integrated a little more with focus on epi in the practice of biostats.

Give an incentive to the advisors if they make their students feel like they've actually helped them.

Hire faculty who excel in teaching or have good teaching experience, not just who have knowledge and education in the area of expertise.

Hire teachers who want to teach! Some of the faculty we have don't like teaching and it shows. This is frustrating to students because we want to learn however when teachers are lazy and uncreative students will loose focus. XXXXXXX should be fired. He has the worst attitude towards students and is lazy. XXXXXXX should get an award. She is an example of an EXCELLENT teacher. She is motivated, challenges her students and creative. Please hire more teachers like her!

HMAP department was very hard to get through with the classes that were available.

I am a working student and I am surprised by how many classes I have had to take during working hours (fortunately I have a supportive supervisor.) I am also a little surprised by the lack of on-line options.

I am getting the information and skills necessary to equip me in workforce, but maybe professors could be more adept to master the english language.

I am very happy with the assistance I have received from professors, graduate assistants and those in the administrative offices. I get a sense that all are invested in my education.

I do not think graduate Assistant should be responsible for grading course work that can pass or fail a student. Most times the strongest relationship is between the Professor and the student, but i along with 98% of my classmates had a bad experience where the graduate assistant showed preferential treatment when grading a paper worth 30% of the total course grade.
Comments - Academics

I don't have a mentor/major professor if this title is also know as my academic advisor I recieve little support from them, in fact I feel detered from using this person to mentor/support me through the program The availability of classes is horrible for those in the working environment. The school is advertised as an school for professionals yet there is very little accommodations to those students who hold full time positions. It is impossible to get through this program without taking much time off of work! Please consider providing more evening courses as well as a Saturday course.

I feel like some of my questions are still not answered.

I feel that I have already learned so much and it is just three weeks into the semester.

I feel that SPH is not high on the HSC list of priorities. The school is very divided. To get the most out of an education, I feel that students need to be involved, and I don't see many oppurtunities for SPH students to be involved like I see in other departments. If these oppurtunities do exist, than SPH needs to get the word out about ways to become involved.

I feel that the institution and environment is good, but I feel that the quality of teaching in some courses are not very good.

I feel that when finished I will be able to go out into the real world and solve real problems that will have a direct impact on their lives.

i find the quality of education fine

I have had little interaction with my faculty advisor to the point of being enrolled in an independant study class being taught by her but I can't go because of work. Very little communication has been sent to me from her.

I have just started the program so I can only make a overall thorough evaluation at the end of my program. However, for now I have had a positive experience with the school and the program.

I have not found my advisor to be useful in helping me with my graduate plans. I believe this may be a personal problem. I also wish there was more variety in the courses and that they were not just limited to certain semesters. I feel very restricted with what courses are available each semester.

I have teachers that don't understand the language. I have had teachers that cannot teach adequately at all. I know the university wants research dollars, but when the students are suffering because of it, I begin to think the people in charge are pathetic.
Comments - Academics

I have to say I am not satisfied with my adviser. This person is not connect to the students and appears to be only interested in publishing papers and having one's name involve in publication or anything news worthy.

I used to totally satisfied with the first two semesters but the 3rd semester currently isnt interesting.classes are monotonous and complex.

I wish more summer course could be offered so for those of us that are doing our MBAs and are just taking a few courses at the Health Science Center wont be behind on graduating due to the lack of summer courses offered.

I wish there would be more student involvment in setting classes in the summer.

I would like to see classes offered more than once per semester. For full time students it's frustrating to have so many night class, but likewise when I was a part time student, it was frustrating not to have enough night classes to choose from.

Include Master's in Healthcare Administration. Do not forget the new program added! I currently work and very few classes are offered in the evening. More evening classes and online courses should be created to bring in more students to the program.

It has a very fixed curriculum.Very few course options to choose from.there is need of video lectures and of online courses. Difference in the flexibility for courses for new admits and old students.

It was not hard for me to register for classes. But it was difficult to get a hold of my advisor and he wasn't very helpful.

It would be wonderful to start in the spring and be able to graduate in the fall. Its FUN to be a part of UNTHSC!!!

I've had a big problem with the teaching assistant in Biostats not teaching the material correctly and giving the wrong answers in her tutoring sessions. Keep hiring new members.

Making the course available online does not call for a lot of manpower, rocket science or funds. So the questions is why the delay?

Mixed bag on instructors-some very engaged-like XXXXXX and XXXXXX. Some are ineffective and do little to engage-some indicate only here to do research.Same with advising

more clarity in terms of the goals of a course and expectation at the end of course.
Comments - Academics

Major professor is wonderful; always available by email and responds promptly, even on the weekend; whenever I ask for an appointment, he accommodates me. He is interested, positive, smart and well-prepared in his discipline. However, the other committee members act as if this is an extra burden and lack the courtesy to even respond to my email. Make clear to all faculty their responsibilities to graduate students or eliminate the committee review, which I happen to think is an important component of the scholarly process. I was frustrated by scheduling of classes, first with lack of availability and then with reduced evening courses. The SPH administration should review trends in higher education and compare their course offerings to other SPH. They also should decide if the institutional mission is to serve Texas residents by developing currently employed public health workers (read the IOM report on the PH workforce to determine the importance of this mission) or if the mission is to earn tuition dollars by serving international students. I hypothesize that both are important and can be accomplished simultaneously.

more classes need to be schedule on the same day to enable commuters to take more courses without driving everyday

More graduate assistants if possible for larger classes!

More interaction between the professor and student. We have more interaction with the TA’s as compared to the professors.

MOST CLASSES ONLY OFFERED ONCE A SEMESTER OR SOMETIMES JUST ONCE A YEAR.

My mentor is always out of town.

Need more classes of same type to be available. Very difficult for Dallas students to travel everyday to campus.

Need more options in class times, semesters when classes are offered and choice of professors for a class.

new timings are quite convenient, but some classes really need full three hours. but overall its fine.

Newer faculty are more energetic, enthusiastic and well-informed in subject area. Exception is biostatistics department. Those who are ESL should receive training to improve their English capabilities and teaching style. Faculty advising is a joke! I have had more than five different advisors not one made time to see me much less offer guidance, until I began work on my thesis.
Comments - Academics

not all professors are the same. Also everyday is not a sunday....so scenario differs from semester to semester.

of the 10 courses I've taken thus far at the HSC only 2 instructors have appropriately given course evaluations. While it seems customary to some to give out the evaluations at the end, it doesn't make sense to me of how that will benefit current students. By giving an evaluation at the midpoint in the semester the professor has time to improve on whatever aspect they are lacking. Offer courses round the year.

Related to health economics, finance 1, and health management related classes I have been sorely disappointed. I assume the university has hired them first for research and teaching ability comes last. Several professors do not know how to teach, but I strongly believe they have an excellent understanding of the material. The issue manifests when it comes to teaching that material. Come on UNTHSC. Students should come first and research second!

See answer to #25. Basically, I feel that I have not really learned what I thought I would be learning when I originally enrolled in this program. This is due to the frequently changing/elimination of classes.

Share the data and results from the questionnaire. There should be an evening / weekend track for professional students.

Since I have entered my program, I have had my curriculum change three times. I entered this school with the expectation that certain classes would be offered to me only to find that classes and my curriculum had been deleted at the last minute. If you decide to change/eliminate a curriculum, do not do this after admitting a class of people who think they will be studying under the original curriculum. It is not right and it is unfair to the students.

Some classes are available every other year, or every other semester. For example, biostatistics II. It would give students more flexibility to offer more classes every semester, or at least both during the summer and spring. Also, as course schedules change criteria, it can be difficult to navigate which classes you're suppose to take. If you come into the school with a particular set of curricular requirements, they should remain the same throughout the student's time at UNTHSC (although new students can have new requirements because they are aware of the changes right from the beginning of their degree plan).

students are facing great difficulties with SAS, irrespective of the instructor. the course is tough and demanding. currently there is no TA for the course. XXXXXXX doesn't post the lecture notes in advance. he posts them after the lecture. This makes it tougher to follow in the class without having familiarity.
Comments - Academics

TAs tend to not know what's going on. When you e-mail them it's a waste of time. You'd do better trying to hunt down the professor because they can't answer basic questions.

Teaching not satisfactory in epidemiology....spring 2009.....monday 5-30pm to 8.10

The core courses need to be changed for MPH majors. For instance, an individual with an epidemiology concentration should choose the ENVR 5300, SCBS 5110, or HMAP 5210 as an elective. We should not be required to take the intro courses for other concentrations. In replace of those courses we need more biostatistics courses preferably ones that require the use of SAS and SPSS. We do not have enough courses that use SAS, and we as students are at a disadvantage when we graduate and someone expects use to create a SAS program at an interview. Students need to be required to take Data Analysis prior to their last semester. If an individual is working on a thesis they will not have the tools they need if Data Analysis is not offered until the spring semester. Survey Methodology should not be a required course, and if taking it Data Analysis should be a prerequisite. You will not be able to understand what you are doing in the course or be able to create a data analysis plan without taking Applied Data Analysis. Also, if you are doing a thesis in the epi department you should be required to take Advanced Methods in Epidemiology.

The department of Epidemiology is tough, and prepares me for my future career.

The relevance and current issues that have been in all of my classes keeps things very current and interesting.

The SPH will do anything and everything to help me with my educational experience. They do this with a smile on their face and do not act as if I am a hassle. It is wonderful to be treated as a friend rather than a number.

The teaching assistants are pretty much confused themselves. sometimes what they teach when approached for extra help is completely different from what the prof said in the lecture. this ends up confusing us even more.

The trouble with lots of graduate programs is that some professors are terrific researchers and are profitable for the university but are lousy teachers. Some professors give off the perception that they don't really want to teach.

The way my adviser XXXXXX had guided me on the orientation day, I was really impressed. I hope rest professor are the same.
Comments - Academics

Theory should be accompanied with more practice in graduate schools. Students don't really feel adequately prepared after their program. No change is noticed after instructors evaluation, letting the feeling that nobody read or take into account students opinion.

There is no practical exposure related to public health field. For practicum, public health department don't have enough contacts and almost every professor is interested in their research instead of being little concerned about what student will do after graduation. Few professors only know how to show their research work and instead of giving voluntary experience to students in their projects(so that they learn the depth of subject), hire paid assistants. I know only 2 professors who showed little concern about students. Hope in nearby years my university opt to make one of the best school of public health in US.

there needs flexibility for taking elective courses.course evaluations need to be completely confidential with out need of giving our identifications.

There should be more availability of core classes (meaning offered in all semesters)

they have taken away almost all night classes and this is disapointing for those who are employed

this is my first class having a TA--she is great. The administrative staff at SPH ae barr none--the best and most efficient folks I have ever encountered. GREAT JOB!

this is my first semester. I am satisfied so far...but will have better data to evaluate in another semester or 2.

Unavaailabilities of some important classes during spring/summer semesters is major problem and so students are not able to take some required and helpfull courses for their career.

We should have more online courses

With the limited number of faculty and students starting their MPH on off semesters, maybe there should be a program/schedule set up as : If you start in the Fall Semester take these classes because they will be offered. If you start in the Spring semester take these classes. I find that a majority of students run into the problem of having to take the required courses before they can take other courses, if there was a way to teach the classes over the internet or something self paced where they could take an exam to whether or not they learned the material and are ready to be able to take the other classes ahead of time, that would unclog some people's problems
Comments - Academics

SPH – MHA (n=8)

hire/train professors. some just don't seem the least bit interesting in teaching, just research. one professor in particular is XXXXX.

I am optimistic about the program as I have already noticed its evolution from fall to spring so I hope it continues to get better.

I have had to change advisors multiple time and have not been given much guidance or support. Even when I went to discuss my degree plan I was mainly told I could take a list of items but not much advice about which classes could help me get where I want to be. I do now have a advisor I have worked with before and I am more comfortable now going forward. In terms of scheduling I know there is work being done to help improve the class offerings and times but I think that more should be done in this area. I know there are a pretty good number of students who work full time and go to school and it makes it difficult when many of the required classes are offered in the middle of the day. I think that improving the number of evening classes offered would be a step in the right direction.

I have not felt like the advising was there as a true resource. I have had multiple advisors and only see them to update degree plan and I didn't feel like they were able to give me direction on the areas or classes that would help me in my career goals.

I like that most of my classes have had assignments with real world application.

I understand that MHA is a new program and many of the faculty are still learning the details so, no real suggestion, just an explanation for the below ratings. My hope is that by next year everyone who teaches or advises MHA students will know more about the program and its distinction from MPH.

Most of my courses have had assignments with real world application. It had also been challenging.

teaching quality in economics, finance 1, and other business based classes is very poor compared to other departments in the school of public health,. advisors do not know how or what advise to give.
Comments - Academics

SPH – DrPH (n=43)

Allow me the preface that I appreciate the opportunities afforded to me by academic advisor and the incredible work of our Dean. My words do not apply to these great blessings. However, I want to take advantage of this chance to speak candidly about a separate specific aspect with which I hope these respected individuals may be able to help improve. I have been quite underwhelmed with my policy training in the SPH HMAP department. If policy is not going to be well taught by a variety of professors, then it should be a department of health management ceasing to claim and policy. I fully recognize the unforeseen blows dealt to the dept. as 2 policy faculty left in the past 2 years, but I have had to take 6 courses all taught by the same professor. That is unreasonable. I have been taught the same general ideas in 5 of the 6 courses. That is a waste of school and student resources and time. Also, it is a travesty that policy students do not have the option to take a course in policy analysis. I have had to work very hard to seek opportunities for this on my own outside of our school. How sad that we graduate students with a policy degree who have not had the basic instruction in policy analysis (though I believe policy analysis may be in the title of a course or two, the principles—nuts & bolts how-to—are not addressed contrary to what the syllabus lends itself to believe.) Further, the take the class to Austin course desperately requires an additional faculty member who can create a firm itinerary (and stick to it), coordinate logistics, and firmly delineate what students are to get from the experience. Students like the idea of being able to go to Austin so they are not openly speaking-out about the course (hence course eval don't show the story), but behind closed doors, I had 7 different students come to me asking why it wasn't structured and expressing their frustrations. Students do not speak frankly about instructors with kind bedside manners or with reputations for letting them get through—but that doesn't mean the instructor provides adequate training. Again, I am not intending to complain. I am grateful for the instruction I have received in SPH. I just want to lend a voice for the sake of improved training for future students.

A method by which students can make constructive criticism regarding teaching quality and their implementation of those comments is suggested. It is difficult to make such criticisms in small courses and students who make suggestions do not know if they have been implemented, as they will not take the course post-evaluation.

Advisors should intervene if a student is not on track. Sometimes the student is unaware of issues requiring action.

Although, DrPH degree would not fully equip me to do all that I need (a PhD is preferred) but I am getting good enough training for the DrPH. I am growing as I continue to learn. Most of the faculty members I really interested in the growth of the students; except a few... The world is not round
Comments - Academics

Classes are relevant, professors are (with few exceptions) attentive to students needs and provide instruction at the right level for the audience, all support staff is excellent, price for education is fantastic, library services are good - I think the majority of the faculty and staff support a goal to provide a great education.

Classes may be available but the scheduling needs improvement.

Classes only offered once a year make it challenging to adjust schedule to meet this schedule. Would like more interaction between doctoral students and faculty by including doctoral students in some of the faculty meetings or in separate meetings where doctoral students can network and discuss issues with dissertation research, qualifying exam prep, etc.

Concerns that I have voiced regarding specific faculty (which have been voiced by previous students as well) have been ignored, causing me (and other students) to switch departments and almost switch schools. This professor has no concern for student needs and ridiculous loads of homework (XXXXXX). If she stays, Epidemiology students will continue to switch majors. The problems was addressed to XXXXXX, who seemed not to care. I am close to switching universities.

Course evaluations need to be more appropriate for assessing the quality of the course work and the professors teaching ability. Previous evaluations don't appear to ask appropriate questions to ascertain this information.

Curriculum does meet SPH relevance but the variety of the subject matter needs to be expanded to cover other interests such as international health and global perspectives on health. We need more teaching assistants that are specifically allocated to classes and hold regular office hours.

Curriculum meets expectation, but could be improved to make some classes more practicable and not just purely theoretical - in relevant areas. Course instructor evaluations are subjective and not so informative, as presently designed and conducted. It is too easily abused by students who fail to keep up with academic responsibilities and look to take out their frustration on the faculty. The danger is that faculty might be penalized because they don't play 'popularity games', even if they offer rich and valuable instruction.

Everything is great thus far. I'm very excited about being here.

For the most part but not in every circumstance. Meetings should be held with doctoral students to obtain more specific information about our experiences since these are different from the masters level students.

I am an adult learner. If you show me where the answer is I will find it. The resources for finding answers is excellent at our school.
Comments - Academics

I am getting what i need but funding is less so i cant fully concentrate on my studies. Also more national representation of the school is required.

I am not satisfied with the classes that were offered in the past. It has tremendously improved over the years. However, the sequence of courses in the degree plan is little unsatisfactory

I am satisfied with the quality because this is my first degree pursued at a Health Science school. I feel the resources that all department can bring to each other enhances each program.

I believe that the school is making every effort to improve the quality of education. A learning curve is expected. Having studied as several other university undergraduate ann graduate programs nationally and abroad, the UNTHSC is, by far, the most progressive in terms of making the necessary changes to make it a top 10 university.

I do not see a very cohesive group of student or faculty. I have just started, but hope to find more cohesiveness in the future. Right now it feels much more like commuter school with little of the academic fervor I would hope to find in a serious research institution.

I expect more challenging work especially in research

I feel I have had very capable and supportive faculty. I believe their overall effectiveness and to a degree my progress was compromised by unchecked divisiveness within SPH. I give XXXXXX for credit for setting a more positive course.

I feel that I've received the education that I needed in my field and I think I can effectively exercise this knowledge in my future employment.

I have had a few instructors that were a bit disorgansized even though they are content experts if they can not convey the message it does not help the student.

I would consider more online classes as an option, as well as easily available training in how to provide full use of online teaching options to our faculty if that is not currently available.

Make the department qualifying exam more transparent for students to help them focus on what is relly needed to be studied.

More accademic and professional guidance from major professor / mentor
Comments - Academics

More evening courses PLEASE!!! There are still a great deal of students that work full-time and attend classes on a full-time or part-time basis. Evening classes would allow working students to graduate on schedule.

Mostly, the faculty members are consider the quality of student education.

My department has an excellent faculty who are constantly striving to improve as teachers and researchers, so I am very fortunate in that regard. However, I oftentimes feel that my school (SPH) is not considered as important as TCOM. For example, too much emphasis was placed on how TCOM and its students will be affected by the addition of an MD program rather than how the school as a whole will be affected.

My faculty adviser has gone far and beyond to help me. He has been an incredible mentor and a great help.

Need more senior faculty members for doctoral programs and more teaching assistants

Needs to work more closely with students to know what their expectations are

Other schools offer a combined concentration, in Biostatistics, whereas UNTHSC does not. It is very helpful to have a solid concentration for the workforce.

Quality of teaching has improved over the years. However, we need more effective instructors than researchers that can train PH professionals. Some of the instructors have low proficiency in English which also creates a learning barrier. We also need more applied classes in Public Health than all theory-bases classes.

Some faculty members are not prepared or not enoughly prepared for a class and does not provide any feedback from assignment or research project.

SPH faculty have been impressive by some and divisive by others. XXXXXX appears to be delivering better leadership than in past and establishing a cohesive organization.

Still I have not always had all the classes I need but it is not too bad. Some classes in my major area (concentration) still clash with a core class. I understand it is not easy to satisfy just everyone's special needs...

The Biostatistics Department faculty is top notch. They are professional, motivated and competent in training students to be applied biostatisticians. One area I'd like to see more help is in students obtaining Practice Residency placements. There doesn't seem to be a systematic way for students to identify placement agencies.
Comments - Academics

The curriculum is excellent but there is a need for more evening classes especially courses that are required for MPH/DrPH students.

The only problem/complaint I have had here in three years is that the SPH has changed the schedule and requirements every semester. Every time they have done that they have stated this will be the last time and it never is. It just makes me crazy to have such little consistency. And then even my major professor has trouble keeping up with all the changes. Between the two of us we are often having to try to figure out what the new requirements are.

The school has done a good job in improving these areas already.

There is still room for a lot of work to further improve the quality - someday, we'll get there; but, not yet.

While I have significant concerns about the HMAP department--as expressed above--I have received strong methods instruction from my academic advisor and other instructors in other departments. I feel fortunate that I had an advisor (XXXXXX) who took it upon herself to make certain I had strong methods training--be it from our department or others--and encouraged me to seek outside opportunities for the policy experiences I needed. She is singularly responsible for the majority of my education. I am forever grateful and feel, because of those efforts and encouragement, that I have received adequate training to accomplish my long-term career objectives.
Comments – Student Services and Programs

Background: At the conclusion of each survey section, respondents were asked to suggest improvements for any of the areas listed immediately above. While a respondent’s comments may spanned a variety of topics within a particular section, for the purposes of this report these comments have been divided and categorized by topic. The comments were not edited in any other fashion, and do not appear in any specific order other than by the categories presented.

Student Affairs

Registrar (n=12)

i think better notification on registration issues would be an improvement

I'm still showing on my to do list (at my.hsc.unt.edu) things that I completed at orientation. The online organization of that portal needs to be cleaned up, since it's mostly the way that I connect with student affairs/financials. I'd like to see a simplified to do list that includes immunizations, forms, etc. I should be able to go to that site and know it all.

It is interesting to me that our grades take so long to be posted onto our account. I also was curious that the final day for DO grades last year, the ONE person who is responsible for posting those was on scheduled leave. ONE person really? I happened to be facing a scholarship deadline at the time.

Registrar - doesn't sent status updates like they are supposed to for student loan verification.

Registrar ---- I have seen a couple students have issues with the registrar in terms of task complete. The registrar has promised the students that a certain task would be completed by, let's say, Monday.... and when the student comes to see about this task, they are fed an excuse that the registrar is too busy and hasn't been able to get to it so it'll take a couple more days. This would be fine, but if it is not going to be completed the registrar should not promise a date, especially for something that is very necessary to be complete.

registrar takes too long to post grades. they waited 3 months to post grades from semester 3.

Some people in the registrar are just so mean! Please smile, it will make our days better.

The registrar's office told my student loan company that I would be graduating 2 years before my graduation date, causing myself and my entire class stress in trying to contact sometimes multiple loan companies to straighten out the mess.
Comments – Student Services and Programs

The Registrar’s website forms are not up to date with the correct procedure for changing one’s name. I followed the form online, but I still needed 3 more forms of documentation not listed on the website. Had the procedure been listed properly on the website, it would have saved all parties involved some time.

The window for registering seems unnecessarily small. You should be able to register for classes (in the next semester) over a wider period of time.

This past Fall Semester the Registrar’s office failed to notify the national clearinghouse of my (and many of my classmates’) enrollment status. This led to many of us being threatened by our creditors, saying that we would be turned over to collection agencies! I even recieved several phone calls. Creditors can be very scary people! I wish the registrar’s office had corrected their mistake so I wouldn't have had to go through all that stress while trying to focus on my surgery rotation. In the end, I had to correct the problem on my own, even after the Registrar told me that she would handle the situation and not to worry about it!

Whenever I have been referred to the registrar, I have always been redirected elsewhere (even to student financial services for enrollment verification, which I still don't understand - although student financial services did provide assistance). It's often not clear which office handles what, but I wouldn't say it's more confusing than any institution I have attended previously.

International Advising (n=8)

Allow for more opportunities to international students to work on campus because of their visa status which is very specific.

Can we have actual advisors?

Fee structure in the I 20 was too high. We are international students. So, according to I20 we have to show enough bank balance to visa officer. In my I20 it was 38,000 per year. Tuition fees is very affordable. But living expense was around $ 22,000. So, it is very high. Accordingly we have to show 4.5 million in our currency for 2 year expense. So, it's quite high. Well I could do that, but one of my friend was rejected because he could not show enough bank balance according to I20. So, I think it's a loss of time and money to not only him but also to the school who has lost his fees and application process expense if school has approved the fellow but can not see as he has been refused by US visa officer. So, please consider it.

For international students there are less opportunities in the campus . very few jobs and scholarships are available. Moreover

I would like to see more interaction encouraged between the international student associations and programs and the rest of the student body.
Comments – Student Services and Programs

Increase the number of advisors and accessibility to those advisors.

More opportunities for international students. Having a look at all that other schools/universities have in place for international students will explain what changes need to be made as there a lot of them. :)

oncampus jobs for international students. relaxing the eligibility bracket from work study and citizens to a bigger class. even though hourly wage rate need not be high.. multiple job opportunities would be highly appreciated... example same job with multiple short shifts... can employ more students but within the same old budget. 1200 $ at the rate of 15 $ per hr going into a single student's pocket is less desirable than same 1200$ going into pockets of 3 students 400$ each... at the rate of 10 $ per hr would be gr8. more cost effective and more man hours. and meets the demand-supply ratio too., oncampus jobs for international students. relaxing the eligibility bracket from work study and citizens to a bigger class. even though hourly wage rate need not be high.. multiple job opportunities would be highly appreciated... example same job with multiple short shifts... can employ more students but within the same old budget. 1200 $ at the rate of 15 $ per hr going into a single student's pocket is less desirable than same 1200$ going into pockets of 3 students 400$ each... at the rate of 10 $ per hr would be gr8. more cost effective and more man hours. and meets the demand-supply ratio tooo.

Center for Academic Support (CAP) (n=34)

Academic services only identifies problems after they've surfaced, doesn't act preventatively.

At one time I was referred to tutoring with XXXXX. She was unprofessional and unhelpful. I can't believe the university was paying this person to advise students.

CAP does a great job!

CAP does good work, however, they are understaffed.

CAP doesn't help people that need it. Tutoring should be available to people who want it regardless of their need. I can't tell you how many times I wished I had the LGT powerpoint before 2 days prior to the test. The registrar needs to inform our loan companies that we are using with out us having to tell them to do so. The registrar also needs to be willing to give transcripts from the grad school to the medical school admissions department. I literally had to get my grad school transcript from here and physically walk it 5 feet to the admissions department for medical school. CAP is a waste of time.

cap is amazing and definitely makes life as a med student much easier.
Comments – Student Services and Programs

CAP is realllly supportive!

CAP is very helpful

CAP needs to be sure to get copies of quizzes.

CAP office personnel are wonderful!

CAP was presented to us as a method of obtaining help, regardless of current standing in our courses. However, when help was asked for the response was you are not failing, we can't help you. I should be able to receive help when asked for, regardless of my grades.

CAP, God bless their heart, are very good at non academic problems. But if you have questions on why I failed this test, or how to do better they have no clue. They're very nice though so if you're academic problems are more because of family problems, they're good to talk to.

Continue to give students who need it academic support to make it through their schooling

Get rid of CAP. I have used their services on occasion and actually performed worse when I implemented their suggestions. Again, you could save a lot in the budget with elimination of that program.

Have the people who run CAP spend a month trying to do what we do, then they would be more equipped to help us out and lead us to resources.

I don't dislike the advisors but they do not really seem to understand the circumstances of our life. When I am double booked for time to study and also be in class and they ask if I do my study time at the time appointed, it is clear they do not realize what my schedule really is. If I study a DSA during clinical medicine lecture then wouldn't that be a violation of professional conduct? To tell me to plan ahead when the material is not given to me ahead then how can I plan for it? I might get the presentation or reading assignment one day before the lecture and be in class until 5. I think it would be could to get them to simulate one week of our life before they attempt to help us figure out how to manage our time and study habits. A 20 question quiz on learning style is not quite a solution to how to make it through medical school. It seems like a pop psych tool. And I like to study the way people learn and psychiatry.

I have limited experience with these, but my sole visit to CAP left me very impressed. No improvements needed from what I can tell.
I have stated my opinion about CAP. It is ridiculous how they assume that when you do poorly it is because you were not studying. Also their do practice questions tips are great, if we did not already know to do them. I think the solution does not lie within the CAP program, but within a more properly organized curriculum. I do believe that a different approach should be taken when a student does poorly, however I'm sure that everyone has a different opinion on this.

I think that the CAP or Career Services, or whoever is in charge of keeping the students on the right track should try to meet with each student of each class to help them prepare for the following year. Ex: Help them stay on Track with their CVs and help with any questions they may have. Students get so busy studying for class they keep putting off preparing for Applications for scholarships, Grants, Residency...

I tried to schedule an appointment with CAP and was unable to make one for several weeks past when I tried to schedule it. I later received an email saying the person I was to meet with needed to reschedule and then she never did. As a result, I was never able to meet with a CAP counselor and was extremely frustrated by the way the experience was handled.

I used a tutor for biostats I and she seemed to need a lot of direction from me. It is hard to know what you don't know when you don't know it to direct someone else to help you.

I wish we could see tests from old courses.

I would like to see more resources available for students with learning disabilities, ADD, and test anxiety. The staff is very supportive emotionally but lacks concrete resources to help improve performance such as testing for LD, ADD and EAP services are unable to assist with necessary medications.

more availability of the center for academic performance, not just for people who are failing but also for people who want to do better.

more tutors should be hired for caps just in cases another tutors style of teaching is confusing

CAP - doesn't provide meaningful coordinated tutorial services for students, nor do they coordinate with the academic departments in question.

When students struggle with classes it is very difficult to get a tutor. Why do you have to fail a class or be on the edge of failing before you can get academic help? If the CAP staff would not see a doctor who makes C's in medical school why aren't they making every effort to help students, including the more free use of tutors to help them?
Comments – Student Services and Programs

The CAP advisor that I have been to more than a couple times has been of little to no help. This is someone we are told is supposed to help us with our study skills, but when I go in all she says is study more. I voice my concerns and problems and she just replies study more.

The CAP office insists on holding meetings with the students to try to shove learning methods down our throat that are from an educational perspective, but are not workable in medical school. It seems like they are doing it just to justify their jobs.

The Center for Academic proformance alters students in the most unprofessional way possible. After a student doesn't do well on an exam they already feel horrible, which is further exacerbated by getting an email by this office to affirm there failure. When you go and see these advisors they proceed to explain to you that you are not trying hard enough, and they don't do it in a way that is even understanding to a student already in a depressive state they do it in a very demeaning manner. You have to realize that for a student to be in medical school in the first place we are already our worst critics, then to have to go see someone that has never been through medical school or even an equally stringent study course try to tell you that you aren't trying hard enough, or you are not doing enough, in such a crude manner is not just demeaning but causes a high degree of resent towards the office. I would highly suggest talking to them about there approach to students and making sure they don't come across as judgmental, condescending and just plain hurtful to the students when they come in, its not helpful and just makes it worse.

The experiences I have had with the CAP have not been positive, they did not help me and their advice was to get a tutor from my own class, which I thought was inappropriate.

The reviews given by the CAP was not as helpful as expected. I feel reviews by TA's who actually sit through the class with the students would be more helpful.

The school lets too many students slip through the cracks and fail out. These are wasted spots in a competitive field. I think more effort should be done by the school to graduate everyone that is enrolled as a first year. Losing 18 or so students in the first year is unacceptable.

While the intentions of CAP is a good idea, I feel that the general study skills taught don't really pertain to medical school. The skills need to be directed more to it.

Student Life (n=10)

I feel that Student Life doesn't exist for SPH. We have never come together as a department. PHSA meets once a month, and that's it. I go to class and that is about all of the interaction I have at the school, which is not what I was expecting at all.
Comments – Student Services and Programs

i have had very little interaction with student life so far.

I think the Student Life does a great job getting everything organized and keeping up to date on when things are due. However, scheduling a meeting is extremely difficult and gets very frustrating when so many dates are blocked off and grand rounds constantly changing dates.

I would like to see more events that bring the SPH together other than meetings. Maybe some type of sport competition or even more things like the trivia night or game night.

More inclusion of medical science students on student life activities

Student life is a minimalistic experience.

Student life is poor due to the demands of the curriculum.

Student life needs to communicate much more to each other and to students.

The Student Life Office goes above and beyond the call of duty for students; they really make life on campus easier.

too much money gets wasted on student life... we are here for an education not a social experiment.

Career Services (n=26)

Career services are minimal in SPH. The school needs a stronger network of employers to which they can direct the students. They need to keep up to date on new employers in the area. Should have constant communication with potential employers.

Career services barely exist. Online job postings are pitiful. Compare to the UT LBJ website to see what is possible.

Career services can improve by introducing specialities earlier on medical school, possible have lists of specialist interested in mentoring a young student.

Career services could provide one and one help.

Career services seems a little behind schedule. We get the same 5 emails over and over.

Career services? What career services? XXXXXXX sends out an annoying number of links to websites. Our interest groups do a better job than the University in this department.
Comments – Student Services and Programs

XXXXXX is dedicated to her job and sends out useful information.

XXXXXX emails a little too much. Not all the emails are actually useful.

XXXXXX is as useless as can possibly be. The program should fire her and get someone that really can benefit the students. SHE gives useless information, as well as incorrect information at times. It often appears that she is desperately trying to justify her even existance at the university with her pathetic, useless emails. Fire her, and use that money to get someone that can really help.

I am very happy with Career Services. I needed help with my C.V., and the staff there were readily available, quickly reviewed my C.V., and gave me solid tips on how to enhance what I already had on paper! I left with a lot of good information on revising and improving my C.V.

I appreciate the student leadership meetings. Bravo on the CV writing meeting, just what i needed.

I dont think the Careers in Medicine is all that helpful.

I have been in each career fair and it is useless! Many times a particular table shows name of an epidemiologist but you see a management guy on that table....the reason is that that person didn't show up! I know 1 person from Tarrant county public health department and he is an outstanding guy. He explained what my professors and/or faculty advisor is supposed to! I am thankful to 1 of my friend and senior at UNT school of public health who showed me what they expect in job interviews, how to use your skills, etc. These are the things to be addressed by Career Services instead of weekly or monthly e-mails!

I think career services is a joke

I think that the CAP or Career Services, or whoever is in charge of keeping the students on the right track should try to meet with each student of each class to help them prepare for the following year. Ex: Help them stay on Track with their CVs and help with any questions they may have. Students get so busy studying for class they keep putting off preparing for Applications for scholarships, Grants, Residency...

I think that there could be a larger showing in terms of career fair and options for possible career paths for all degree programs.

I would like to see a little more variety in the career service section for students who are in the MHA or working towards a career in the Health Management and policy sectors. I feel like most things are geared toward public health.
Comments – Student Services and Programs

More career jobs to be sent out in Dallas area. More student events for off campus students who live in Dallas.

More needs to be done and focused on career services for public health.

Need more active career services

There are no career services or events directed towards graduate students. I have never even heard one in four years say they received help from this office. Please host events for the graduate student population.

There aren't very many jobs listed on the website for careers...it's a little scary.

There is discrimination in the way SPH students are treated based on the concentration. International Students of Epidemiology and Biostatistics concentrations get to work for 27 months after graduation while on Optional Practicum Training (OPT) whereas students of other concentrations get to work for only 12 months while on OPT. This is the most important concern for me.

We have Career Services? Seriously?

We heard about CAP in the beginning and have not heard from them ever since. We are not sure if there are tutors available. In the summer semester, it seemed like we would get help only if you didn't score well on your first exam. (Even though students knew they were struggling leading up to the exam)

We need more direct advising. What are we supposed to be doing and when? Can we meet with someone on the admissions committees rather than CAP?

Overall/Other comments (n=34)

All of our administrative support (at the student level) are always very helpful and nice...they do an excellent job

Anything run by XXXXXXX and his associates is a delight to work with. They all do a fantastic job.

Better communication with how to decide important rotations for 4th year, better access to understand ERAS and determine residency deadlines, and education how to sign contracts/ prepare for entering into residency.

certain faculty members, in attempts to be diplomatic come across manipulative and paternalistic

Dates need to be easier to find and more clearly listed or stated.
Comments – Student Services and Programs

Do not have much contact with this group.

Do not just cater to DO students. I understand the reason why, but with the healthcare administration program now in place it would be wise (financially) to incorporate those students.

Have more events designed to encourage camaraderie among the schools- more events in general-

Have not used many of the services before.

I am about to graduate, yet I still do not really know who in all of student affairs I could really go to with a problem that does not fit into one of the defined categories such as finances, counseling, grades, etc.

I am satisfied with work is being offered

I believe it is a close knit community which gives faculty, staff and students a chance to really know each other.

I can't offer any suggestions b/c I didn't utilize these services as a student.

I explained in an earlier response. Great job Student Affairs!

I have not used these areas much and do not know much about them.

I haven't had many opportunities to use these services. Not because they weren't available to me, I just haven't needed them yet.

It's hard to comment on student life when the curriculum doesn't really accommodate for much of a life.

I've had some but very little interaction with these people

Making services more streamlined and comparable to other larger universities with similar capabilities.

Many students had problems at the beginning of the semester, b/c their rent was due, but the deposits did not come in until much later.

Maybe a little more advertisement of these programs and services.
Comments – Student Services and Programs

XXXXXX is an incompetent, inbred hick. Promoting this PC thug shows the moral vapidity of this university. This university needs a reminder that the 1st amendment doesn't exist to protect the delicate sensibilities of administrators, that 'false' words are not punishable or even worth scrutiny. XXXXXX doesn't seem to recognize, nor care, about truth since you so easily confuse 'false' words with 'lies'. This university is a disgrace

More training for the ERAS liason.

Offer all forms online.

part time student with work tuition reimbursement

Some of the staff (student workers) is very rude. They work their and get payed. They shouldn't be unapproachable and rude. If you hate what you do and can't deal with students, quit. Don't do a poor job.

Student affairs is great. My only complaint is that I know some people have been caught cheating and gotten off with a warning. As far as I'm concerned we all were warned during orientation. There should be zero tolerance for cheating. Secondly, the word Unprofessional gets thrown around way too much here. Anything that rubs a faculty/administrator or even a secretary the wrong way gets labeled unprofessional. These people need to accept that they aren't always right, and stop persecuting us when we address certain problems (ie bad questions on exams).

Student services are awesome. Misty is awesome and so was Amber. I love that if you have a question about something you can catch Misty in her office and she is always helpful, although Misty might not love it. Also everyone in Student Affairs is very approachable starting with Dr. Moorman and all the way down.

The faculty in Student Affairs are ALWAYS willing to help and are so easy to work with. They deserve a KUDOS!

there should be more career fair on campus jobs

Update their respective web pages

Why don't we celebrate match day? Most schools have some event, we have nothing.

Although the plans for the new school are great, I dont think you should title the meetings MANDATORY. For those people who care to give their input can come to the meeting. Those of us who would rather go study, we should be able to and not be afraid of the mandatory meeting.

Cheaper bus fare for those who require bus passes.
Comments – Student Services and Programs

Financial Aid

Overall (n=59)

Decrease turnover of financial aid workers so that we can have some continuity in our relationship with them. It is nice when they understand your situation and you don't have to explain it a couple more times per year.

Disburse our financial aid on time. The students don't have additional income so please be sensitive to our concerns when our aid is disburse 1 week after it was promised.

Do I need to remind you about the loss of our disadvantaged student scholarships 2 years ago? We never got an apology or an explanation for that. However, XXXXXXX did fumble around and grin at us during the DRT where that was discussed. For the third semester in a row, financial aid has neglected to give us the opportunity to make payments by credit card. Many of us use the flyer miles awarded from the credit cards to travel for interviews. I estimated that this cost me about $600 this interview season.

Essay tips for scholarships.

XXXXXX loan by the way has changed to 6%, so it is now incorrect on the loan comparisons sheet.

FA does a great job!!

Financial aid office acts as if they are doing favors by signing students up for loans. I was told by XXXXXXX to go research which loan I wanted & to call her back. Isn't that her job? Also, My account is constantly wrong. I had to disput late fee charges for registering too late?? We don't sign up for our own classes. I wonder how many of my fellow classmates didn't relize the extra charge was on thier account??

Financial aid is very scan and very much disappointing.

Financial aid could factor in paying for boards in early jan of second year and early jan of third year. Financial aid could be in contact earliar for first year.

Financial aid has a lot of turn over and that makes simple issues like getting loan disbursements a trial and error affair.

Financial Aid has been a constant stress in my life as a student. Recently my lenders were told I was no longer a student and it was a huge hassel to get the situation straightened out. Also I find it strange that there is a lapse in time between receiving the money from the bank and it being deposited in my account. Is the school earning interest on that money during that time? I think the students should be given their money directly and pay the school after since the money belongs to the student and they are the one responsible for repayment.
Financial aid needs to go out before the first day of classes for the semester. Rent is due on the 1st of the month.

Financial aid office/ tuition service should email us or mail us once a semester to let us know when and how much tuition is due like many other institutions i have been to do. Financial aid really messed up this year. They did not communicate with the loan originators to indicate in school status for the entire class and several of us lost our 6 month deferment loan repayment period after we graduate. The loan disbursement for the Spring semester was late and several students had difficulty paying bills for a few days.

Fix the EIS service! Become more aware of non-traditional students and their needs.

Get loans out on time.

Great job!!!

Great! From day one the financial aid office has been very helpful. I never worried about funds.

Hire financial aid personnel that actually understand financial aid and accounting principles.

I don't know but feel its biased... criteria not decided.. and flexible...

I don't understand why it's against the rules for financial aid to help us get supplemental loans.

I felt that the student loan office was helpful at the beginning, but people have changed over and it is unorganized and takes multiple attempts on the part of the student to receive information.

I felt the Financial Aid Office had very little to offer those of us who have families and need to borrow more than the federal allowance.

I had to wait nearly a week after my refund was supposed to be disbursed before i actually received my money. I think that if this school holds me so strictly to my deadlines, it should be equally accountable and make sure its deadlines are met too.

I have found those in the financial aid office to be very helpful when I called on them.

I hope that they do not distribute our financial aid so late again next year. This was a big burden for many of my classmates.

I love this office! The staff is very helpful!
I think if services, fees and tuitions are increased, our financial aid offers should also be increased. Unfortunately, this past year our tuition/fees increased but our aid offers did not and it left many of the students in serious financial need.

I was very disappointed with the financial aid office this year--my status was not updated to my loan companies until August, prompting them to think I was no longer enrolled in school and thus to send out repayment invoices. I have had to repeatedly call and discuss the situation with my loan companies in order to not be penalized for what they are considering late payment. If I had known there would be this problem with financial aid, I would have taken care of it myself back in June before rotations began. I hope this problem does not occur again next year.

But thanks for starting to streamline the process. It's just about impossible to justify writing and essay for a scholarship...that you *might* get...for $1,000 out of $130,000 cost of attendance...that's only going to reduce your debt.

It has been four weeks since the beginning of this semester and I still have not received my financial aid disbursement. I am really starting to worry about how I am going to pay my bills. The staff in the office aren't very friendly and are less than forthcoming when approached with questions. I am NOT a fan of our financial aid office.

It's good.

XXXXXX was great. Sad to lose her as well

Make loan disbursements timely.

Many students had to call their individual loan companies because the school did not turn in the enrollment status on time.

Most schools that I talk to receive their reimbursement a week or two before school starts. This does not give students adequate amount of time to buy books and resources necessary before school starts.

Next to admissions, this has to be the best department at TCOM.

Reimbursement of loans needs to be organized and more efficient.

2 years in a row financial aid has failed to notify my lender in a timely manner that I was a full time student causing my loans to go into repayment. This needs to be fixed ASAP so it doesn't happen again.

Speed up the refunds!!!!!
Comments – Student Services and Programs

Student refunds take 7-10 days to process and deposit, sometimes 14...this is for direct deposit, to me the turnaround should be ~24 hours, which is more in line with other higher institutions of Texas.

The best department here is the financial aid department. Until the day they gave our financial aids very late that one day. XXXXXXX was the best financial aid person but she now moved on.

The Financial Aid Office always seems to be having some issues. I remember one semester, my tuition had been paid but EIS showed I owed several hundred dollars worth of tuition. If I hadn't proactively contacted Financial Aid, I don't know what would have happened. Money, finances is very important and requires a close scrutiny by staff. I don't know whether the Financial Aid Office is understaffed, or whether the EIS system needs evaluation, but I think some overhaul is needed (for the sake of students).

The financial aid office has been very helpful and has improved over the years.

The financial aid office is late on its distribution of checks and when my loan amount changed by being lowered by 4,000 dollars there was no information provided why and no help to make up the difference. I had to do everything on my own int he begining of the school year which distracted me from my studies.

The financial aid office was outstanding in helping me find out why my loans did not come through and getting an emergency loan to me. Unfortunately, that experience was marred by student financials who did not put it through in the time I was told. Very disappointing.

Also why does my loan company continually contact me to tell me that i've been withdrawn from school when that has never happened at any point in my three years at tcom

the folks in the financial aid office are terrific.

The issues with receiving our financial aid this spring were ridiculous.

The loan checks were slow coming in this January, which presented a hardship for a number of students.

The loans need to be released on time. I went two weeks over winter break living off of a credit card because the checks didn't come out on time. Also it's not helpful to have the money for the boards not given when we actually have to pay for them.

The office failed to do its job so students lost the opportunity to receive disadvantaged student scholarships last academic year. The office promised to seek other funds to make up for the mistake, but never did so...if they did...they did not follow-up appropriately.
Comments – Student Services and Programs

The overall Financial Aid office is amazing, but the cashier that gives us our checks and takes our payments has an attitude problem.

There is always a glitch or problem with maintaining one mode of check delivery. I still do not know what mine is at the moment- direct deposit or post mail

There is not much the school can do at the present time.

This EUID crap is annoying - I can never access it. And when I change my password it works once and then not again. Its so time-consuming to keep contacting the same person to help me (though they are patient and nice everytime) through this every few months.

Very very less scholarship for spring semester student, ask yourself what is wrong in giving scholarship to spring student. Why only fall students are getting advantage of it, even you can devide half in fall half spring and there is no criteria for scholarship is bad. It should be on GRE/GPA/Toefl.

WE NEED OUR DISBURSEMENTS ON TIME! IT SHOULDN'T BE SO HARD. ENOUGH SAID.

We need out loan checks on the FIRST DAY we return to school. Not a week in. We do not have jobs so the loan money is all we can use. The first week of school was rough. If it wasn't for me living in a new apartment and having the first month of rent free, I don not know what I would have done.

Why did XXXXXX go to CAP? Everyone in the Financial Aid office is very nice. I wish we could make the winter installment of loans on or before Jan. 1st for obvious reasons.

Access to Loan Information (n=17)

Can there be a larger database of relevant scholarships. I know there are search engines like fastweb and scholarships.com that have databases. Can something like that be done on our campus?

Do we have an index page of all scholarships normally available in any given year? If so, can that link be better advertised? (I am still not aware of it, although I have heard word that such a webpage is out there!)

Email about scholarship reminders

Have the financial aid produce each semester a summary of all student loan information for each student.
Comments – Student Services and Programs

I am an independant who made less than 3000 last year and there was no one approached me about how to go about applying for need based scholarships.

I believe that the 10 scholarships available for the MedSci program are insufficient and should be given more broad criteria.

I had a change in my financial situation during the middle of a loan period, and the advice I received from the financial aid office was good, but I would have appreciated some sort of system in place to refer students to recommended financial advisors outside the FAO as resources for those of us who needed financial counseling in addition to loan services.

I tried to go to Financial Aid for a printout of my loans to date and this was baffling to them, and I left empty handed. When XXXXXXX was there, however, she was awesome.

Make the dispursement dates well known to everyone well ahead of time so that we can budget accordingly, and find a way to give us our dispursements about a week ahead of time so we have adequate time to buy books & supplies. In this world, you can't do anything without money.

More email notifications would be nice. I feel a disconnect b/c other than the first of the semesters, I feel like I had no contact. I am a busy medical student. I know they are nice and accessible, so if they can just remind us to open discourse with them, it would be very good.

More emails on scholarships and who it applies to.

More programs accessible online.

XXXXXX is awesome very prompt about answering questions and finding out the answers.

XXXXXX is wonderful. She is so helpful and explains finances in a great way. The scholarships/loans seem thin. I think there could be more proactive involvement by the financial aid office. I feel they could initiate more interaction by doing presentations early in school, and a refresher course or two throughout, to keep students on the right financial course.

The financial aid system would be greatly improved if the dept would tell us the date they are going to disperse the funds and then actually stick with it. Being told one thing and then finding yourself waiting two additional weeks is really hard.

The website my.hsc.unt.edu is very confusing to navigate, especially the financial aid part. Maybe changing the format would be helpful.
Comments – Student Services and Programs

They just started taking 1% of student loans as a fee, and nobody received any notice about it. I don't mind the fee, but I would have liked some communication. I feel like when XXXXXX was there, we had a lot more communication. She always sent out emails about scholarships, and all sorts of information.

Availability of Scholarships (n=51)

As an out of state student, it would be nice to have more opportunities to apply to scholarships

Availability of scholarships available for PAs was increased significantly compared to last year but I still feel there is room for improvement.

CONSIDERING THE AGE AND SIZE OF THE SCHOOL, I THINK THAT THEY ARE MAKING GOOD ADVANCEMENTS IN THE AREA OF SCHOLARSHIPS.

Doctoral students should be funded properly. Lack of proper funding for doctoral students could be a compelling reason for me to transfer to another university.

Every out of state student should be given a $1000 scholarship every term to waive out of state tuition.

Find scholarships for white middle income people

for international students, few scholarships are available.

I expect more international students scholarship opportunities.

I feel like the scholarships are very centered on very specific requirements and is hard for the average student to receive one.

I have entered this school in this spring. No international student was made avail any scholarship. And what I heard from my friend in the home country that if they apply in next fall, 10 students are going get scholarship. This is absolutely unfair to us. Even for the campus job which was available few days ago, we were not eligible somehow. I don't understand why this discrimination happens to the international students who have entered in this spring. We are paying three times than that of the US citizens, still we are not eligible for campus job or we are not getting any graduate assistant ship. So, this thing you should seriously consider.

I hope more scholarships are made available in the future.

I would like to see more scholarship opportunities for students, since it seems many of them target populations such as women and minority/disadvantaged students. Increase funding.
Comments – Student Services and Programs

Increase the number of scholarship awards in general.

International students cannot work outside the campus. I suggest some measures be put in place to assist them a bit in terms of on-campus jobs. This is the only way they can enjoy the campus. They need help.

I've applied to every scholarship I could, which is not that many! and have yet to receive one.

Less minority scholarships, more for hard work or performance.

Less options for international students. The scholarships should help the international students by making their fees instate.

More assistantships are needed in the SPH. However, I know our Dean is aware of this and already working to make this happen.

More scholarships should be made available

More scholarships.

Multiple scholarships broken into smaller prizes would be more helpful than lumpsome few prizes. We are puzzled to solve the eligibility criteria. I mean, I knw that the S.P.H. has minimal funds...and more so when it comes to international funding. We understand. But still we are unable to figure out how we can fancy our chances. despite high G.P.A's of 3.7 and above...none of our classmates of spring 2008 batch received any kinda scholarship. How to be more potential candidates for the coveted rewards.

Need more scholarships.

No one wants to give scholarships to white people.

No scholarships for international students.

Not enough scholarships.

Offer more scholarships and announce them early, at least 2wks period.

Out of state students are exempt from most scholarships- and they already pay more than their 'in state' counterparts. It gives no advantage to keep Texas-trained physicians in Texas if they are from out of state. Perhaps sponsorship with service
Comments – Student Services and Programs

requirements for rural or underserved areas would help TCOM in this area. As an out of state student, I feel like I have no duty to stay in Texas, since Texas go twice my money for the same education as my classmates. Financial Aid should get on this.

provide more scholarships

Scholarships are limited by who can apply for them.

Scholarships are poor. More academic scholarships!! Let's reward students for working hard!!

Scholarships availability must be improved as there were minimum..particularly for the out of state students.

So far they've been good. More scholarships would be nice.

Spread the scholarships out to more students

The availability of scholarships is very less. There are so many international students who has not has either on campus job or scholarship. You can provide few on campus jobs so that it will be helpful to students.

The number and amounts of scholarships and grants offered offered to the TCOM DO students are anemic or nonexistent, to say the least. Also, increasing the availability and amount of low interest loans, such as the Loan for Disadvantaged Students or the Primary Care Loan would serve those students and the institution far better in the long run. The Financial Aid Office should more actively seek out scholarships, grants and loan programs offered by federal, state, local governments and those offered by private non-profit institutions. The indebtedness level of graduating students continues to go up dramatically every year, especially now with the high interest federal and state loan programs. How will these alumni afford to support the school when they'll be servicing $2,000 a month on their medical school loans for decades? Comparable schools like Baylor, UT Southwestern have far lower graduate indebtedness levels for their students because they offer much more scholarships and grants to their medical students.

I do not understand why a majority of the scholarships available are for disadvantaged or minority students. Most of us are paying our own way through medical school, and I feel we should all be included for scholarships, not just minority students or those from a difficult background.

There are basically NO scholarships available for people that take only 1 class and that's not right! I have to work 40 hours a week in order to support my family and then it's a pain to have to pay for school out of pocket, especially when you don't have it.

There are many more scholarships available for med students. Also, the deans office only grants scholarships to international students.
There are not many fellowships that are offered. Plus, there are so many other fellowships that are offered by outside agencies which are not advertised effectively by the office. I hope something gets done about it.

There are tons of DO/SPH scholarships, but only one for PA's.

there is never enough money to go around, PA program should have the same % of scholarships as all other programs

There only seems to be scholarships for minority/disadvantaged students.

There should be more scholarships for non-minority students.

We have no scholarships, I have searched far and wide and hardly found any. I have applied for all of them and have been rejected by all.

We need more scholarships of vary type e.g. merit based and need base

We need more scholarships.

What is the meaning of random scholarships to increase student enrollment in UNT school of public health??? Dear Sir/Madam, I also understand the importance of a huge student body and financial advantage therein but what will happen if current students are frustrated and won't advice anyone to join UNT because you never know how you can get a scholarship? Please try to increase or at least keep the scholarships competitive and solely on the basis of GPA. I am not asking anything special...just follow other good schools of public health to make our school better!

Woefully lacking in scholarships offered-grants.
Comments – Student Services and Programs

Other Services

Student Financials Office (n=18)

Financial aid disbursement before the first of the month when students need to pay rent.

get the computer system working properly. Of my 9 semesters on campus, i have had 5 where either the computer said i owed something and i did not, or the computer showed my loan had paid off something and the office said no. You really do not want to be worrying or fighting with money when you should be focusing on learning.

I can't figure out the difference between Student Financials and Financial Aid. I can never seem to talk to the right person without being transferred a few times. Although, they are always very nice & accessible.

I was underwhelmed with the customer service of this department this semester. If people can not come in to process loans in time to deliver them when they say they will, then find people who will or change what you tell students. This was unimaginably stressful for me and I'm sure many others.

In the 3 semesters I have been here, student financials has NEVER been on time with our loan disbursments, NEVER.

It would be nice to be alerted as to when a tuition payment is due. I did not receive a notice that tuition for this semester was due. I found out by looking at my account information which is not in an obvious place either.

Sometimes a lag time with receiving disbursements from financial aid. Hours of operation are not conducive to those on rotations.

Student Financials has messed up my account EVERY semester I have been there I think. They seem to be poorly trained on the softwear, and the softwear seems to be terrible as well. Invest in a better softwear system and better training for the people there. They are great people, just not well trained in the crummy softwear.

Student Financials is not time efficient.

Student financials is one of the biggest complaints I will have about administrative services. My account, which is paid in full, always shows a random, unexplained balance, that is continually being fixed by the nice lady in accounting. If I wasn't diligent, I would be paying fees that I did not owe. The accounting program is horrible, and the way the department/computer is accounting should be illegal.

Student Financials needs to issue refunds more quickly. Other Texas medical schools like UT Houston, UT Southwestern, etc. get their full semester disbursements days, if not weeks, before the start of classes.
Comments – Student Services and Programs

The debacle with the financial aid distribution this year was unacceptable for a graduate institution. Money should be credited to students' accounts before the first of January. No excuses. Get people to work over the break to process the loans. People's kids and families depend on the money that they receive.

The system needs to be improved over and over again I have had account details that have been faulty I have brought that to the notice of the student financial service.

This year, the Student Financials Office dropped the ball and failed to inform the loan companies of correct graduation dates for many students in the class of 2010. As a result, many of them received late loan repayment notices.

Those students who elect automatic deposit are punished and end up having to wait over the weekend to have access to their money because the school doesn't initiate payment until 5:00 p.m.

Stop turn over of student financial reps.

WE NEED OUR DISBURSEMENTS ON TIME! IT SHOULDN'T BE SO HARD. ENOUGH SAID.

Human Resource Services (n=8)

Consider international student for financial aid. They really need it. At least if you can not give them scholarship because of the recession but you can made them avail some work. So, they can meet their expenses in this country. Otherwise it is really difficult to survive with so much expenditure.

HR department very helpful and nice although not sure what to do when people are not there who normally do their job

Human Resources needs to be a little more organized as far as getting paperwork done on time for students to get their work checks on a regular basis.

I haven't visited many offices. I have checked out the website for jobs. Unfortunately there aren't many job opportunities for students.

I was on payroll for 3 years as a graduate student. When I needed a health insurance HR would not help me get it. When it was there mistake I was never called for orientation.

Human resources is terrible: why can't we find or retain good faculty?
Comments – Student Services and Programs

Outstanding human resource services. Will mention names of few people who are very good in their work.... XXXXXX and XXXXXX.

There is discrimination in the way SPH students are treated based on the concentration. International Students of Epidemiology and Biostatistics concentrations get to work for 27 months after graduation while on Optional Practicum Training (OPT) whereas students of other concentrations get to work for only 12 months while on OPT. This is the most important concern for me.

Marketing & Communications - General UNTHSC News & Plans (n=36)

A lot of people in the community do not seem to know that there is a medical school in Ft. Worth. Perhaps we can reach out more to the community by way of marketing to let them know that we're here.

Have you seen the marketing materials that have made their way into the Bass Performance Hall programs? I read past it four times before I realized it was for MY school! What a waste.

How about the administration be honest with us regarding their plans.

I think the marketing of the HSC has been very poor since I have been here.

I think a lot more could be done to raise awareness of our school in the community.

I think the slogan Fort Worth's Medical school... and more is ridiculous. I also think that the proposal to introduce an MD program at UNTHSC has been handled exceptionally poorly. Communication seems to have totally broken down between administration and the student body, with rumors of fleeing professors running rampant and questions arising about the quality of incoming faculty. I find it hard to believe that the school could be doing a worse job of communicating with the student body.

I think UNTHSC has spent too much money on marketing. How much did the new street signs cost? Couldn't that money have been better spent on supporting the teachers? or research?

I don't think the ice day was handled very well last Tuesday. Living in Dallas and having to commute left me very up in the air, especially when most other colleges in the Metroplex had closed. I ended up driving in almost in to Fort Worth when class was then canceled and then I had to turn around and drive all the way back home.

I would like to see the President of UNTHSC advertise his ideas for the school to the students as well as to possible funders. I think he is not doing his part to gain support for the MD/DO thing and I am afraid it will get undermined.
Comments – Student Services and Programs

I would suggest a banner at the top of the campus homepage regarding school closings like is used for the main Denton campus that is easily noticed instead of a small little notification that blends in to the other notices in the middle of the page.

It would be nice if students were at least notified before their pictures were used in advertising. Even nicer if they were asked for consent although, I suspect, we were probably made to sign that right away during orientation. It would still be nice.

It would help if Marketing and Communications departments communicate to Student organizations and clubs. Most of the clubs have no idea about how to promote their intra-University events and how to arrange their community services in a way that can help UNTHSC.

Marketing & Communications: while I understand the need to advertise the UNTHealth Group and the UNTHSC campus in general, they have purposefully not advertised that we are an osteopathic medicine and in some cases have told the students not to advertise that. Alumni Affairs have improved in the last few years and I hope it continues to improve but in the wake of the turmoil on campus surrounding the MD/DO issue I fear that won't happen.

Marketing and Communications - the news of a possible MD option at TCOM was not given to students in a timely fashion and in fact the administration denied any plan to develop an MD program (this was obviously deceptive).

Marketing and communications will not take students seriously when they are approached about student lead events. They offer little to no help at all with the exception of XXXXXXX who is too overworked to help in a timely manner.

Marketing for our school is still atrocious, you cannot expect to slap up a couple of billboards and expect this to be considered an adequate marketing campaign.

Marketing is not in touch with the students themselves. They only appear to play a role for the administration at this university. Therefore, when we need help advertising events, etc, they don't respond or care to help.

More marketing on DOs should be done.

more public awareness and incorporation of media within community. more community involvement.

No one knows about our school so I think marketing could pick it up a bit.

Promote more TCOM!!

Publicize actual concrete positives about accomplishments about the school instead of putting up billboards saying UNTHealth. We practice what we teach - says nothing
Comments – Student Services and Programs

really about the school. How about ads/press conferences about the DNA lab - only HSC that can enter data *into* Codis - the multitude of CSI fans will relate to that. Or what about the lack of antibiotic-resistant TB in Fort Worth due in large part to efforts by scientists/doctors at the school. Specific accomplishments or research into Alzheimer - like we got **two** NIH grants in a single year, which is unheard of.

Really need to get the name of TCOM out there, no body really knows that TCOM is an actual medical school. Promote TCOM first and then UNTHSC because when you mention UNTHSC people automatically assume that you mean UNTHSC in Denton. Somehow we need to market the school so we can get more residency spots and rotations spots. I don't think caving in to hospitals and adding an MD program is the correct route.

TCOM needs more marketing, not new administration

And as far as marketing, it is extremely poor. For the most part, people in Fort Worth don't know TCOM is in Ft. Worth- I don't know how Texas (or the rest of the US) really knows about TCOM.

The marketing is getting better, but for too long TCOM in particular has sat in the shadows waiting for our community to notice us. We need community outreach on this campus. We go to many health fairs around metroplex, but that is not as powerful as having health fairs on this campus. I think this should change once Building B is constructed, so that there will be a place for a health fair. These should not cost the UNTHSC money if we charge presenters fees for booths, and possible partner with JPS. In general, we should have a much tighter relationship with JPS.

The only backdraw to our program is that people in Fort Worth have no idea we have a medical school here and that is disappointing. I feel the marketing dept should try something to get the word out, maybe a tv commercial or something.

Also, the school has NEVER made a big effort to MARKET that Fort Worth has a medical school. This school has been around for decades, and the only advertising that has been done is that there may be an additional MD program? We should be proud of and advertise the osteopathic medical school.

Too many news flashes about matters that dont affect many people - This causes people to just delete them

too many different communications on email-3 different type of newsletters-why?

too much emphasis on marketing and not enough on education

UNTHSC news releases/magazines has improved.
Comments – Student Services and Programs

We should be marketing more about DOs most of those that are close to this intitution still don't even know who we are. TCOM was the founding institution for the entire health science center and I feel like we are being neglected.

Why do you say Ft. Worth's Medical School and More... when most people don't know there's even a medical school here. Businesses on the same block don't know there is a medical school here. Start with letting people know we're here before you try to tell them there's more. I'm tired of telling people that yes there is a med school in Ft. Worth and no I'm not going to medical school over the internet (T-COM)

The new UNTHSC website is not impressive

Alumni Affairs (n=12)

Alumni affairs needs to keep track of their alumni from the grad school who go into med school here at the same institution. All it would take is taking a roster from the current entering class of med school and look for people that were enrolled in the medical sciences masters program the previous one or two years. I can't tell you how annoying it is for the grad school to be calling, emailing, or mailing me requests for money when I'm still going to school here and still taking out loans.

Alumni Affairs office seems to be doing a better job now. However, they face the challenge of representing an administration that is not trusted by the school's alumni.

Alumni? What alumni?

Being the only DO school in the state, Alumni are easy to find. Most want to be involved with the school.

I have not seen nor heard hardly anything about our alumni

Someone in alumni affairs needs to tell the OMT alumni to shut their mouths and let our school achieve some form of progress. They have no business meddling in our affairs.

Quit sending recent graduates and current students invitations to play in $500 golf tournaments. That's just mean.

The current President of TCOM is ignoring Alumni- so I'm not sure what answer you expect from Alumni Affairs.

The fact that our alumni are not raising a bigger stir about this MD program is shocking

TCOM needs to keep better touch with past alumni.
Comments – Student Services and Programs

There was a huge gap in contacting alumni over the past several decades and encouraging their support for the school.

To improve alumni affairs, don't make an MD program at UNTHSC TCOM!

UNTHSC Catalog (n=18)

But it should be made better not worse.

Don't waste money sending them out to every student who can read them at school. Send them to alumni b/c they're the ones you want money from.

I haven't seen it yet, Do you mean the online catalog?

I see the new catalog as more resources that should have been allocated to obtaining more QUALITY faculty, not just more faculty.

I think the whole course plan for the entering class should be found in the catalog. As it is now it just contains the courses for each class enrolled for the current year.

I understand it is online. (Not applicable to my program as it follows structured enrollment).

Is it online? I never received one.

It looks good

Make it consistent.

Make it more readily available online. I always have to search for a while to find it. Maybe it's just me.

Make it more user friendly

MENTION HOW MANY SCHOLARSHIPS ARE AVAILABLE AND HOW THEY WILL BE AWARDED!

Perhaps showing us the catalog would be a good start.

Please give us a paper copy, some students just like to read from paper rather than computers.
Comments – Student Services and Programs

Well, this is the first catalog of UNTHSC. But I like the way it has been designed and the information. It has been proved very useful before I came to this school. Only thing I want you to mention is give proper description of fees structure.

Why do I need the catalog?

would like to have gotten it sooner.
Comments – Student Health Clinic

**Background:** At the conclusion of each survey section, respondents were asked to suggest improvements for any of the areas listed immediately above. While a respondent’s comments may have spanned a variety of topics within a particular section, for the purposes of this report these comments have been divided and categorized by topic. Comments in this section were merged into two general categories reflecting *time* and *service*. Thus, Promptness and Convenience of Hours comprises one set, while Professionalism and Quality of Care were combined to make up the other. The comments were not edited in any other fashion, and do not appear in any specific order other than by the categories presented.

**Promptness of Service / Convenience of Hours (n=105)**

Better accessibility for acute care.

Better hours.

Better walk in availability for students, we never know when we will have a chance to get over there!!! Oh, and parking for those of us w/o a garage pass!

Clinic hours are not convenient for students. Also, the payment system is extremely inconvenient.

different hours - maybe more lunch time hours so students can make it when on rotations.

Oh hours are sporadic and nor very convenient for the working student

XXXXXX is great, but the hours are not the best. It is complicated and iffy if you are going to get to see him in time or not.

Expand the operating hours

Getting to the clinic was pretty easy first and second year of med school. Harder to coordinate schedules this third year.

hard to get an appointment, always get answering service with no calls back.

Have to run around quite a bit to complete the whole process of trying to be seen at the clinic. It's really inconvenient.

Have to wait long for physician. Not available in late hours or weekends.

Having the clinic only open in hours that we are in class, along with unexpected closing of the clinic, makes it very hard to get in to see a doctor.

Hire another physician so students don't have to wait 2 days to be seen.
Comments – Student Health Clinic

hours are always during class

Hours are terrible, it is usually only open during our mandatory class period. Dr. It takes too long to get an appointment.

hours are usually during class time

hours need to be re-evaluated and extended. Having the clinic open a few hours during the week is completely unsatisfactory. I am sure there are plenty of physicians within the UNT Health group that are willing to take up the slack.

Hours should better accommodate for classes

I do not feel like it is very easy to schedule an appointment. For one, the staff seems like they don't have the time to work with you in scheduling, and secondly, there are never prompt times available when we do not have classes.

I don't think the student clinic is open nearly enough hours to provide adequate care for the students. At least with the DO schedule, we usually have class when it is open.

I found it extremely hard to make an appointment with them especially when your out on rotations. They should have one day when they are opened late!

I have been to the clinic a couple of times, and each time I have been denied service because the doctor didn't have time to see me, even if I had an appointment.

I have had to reschedule one appointment 3 times. As a student this is hard to do and has caused me to miss class two times.

I just called and walked in. Everyone was nice. No improvements!

i think there need to be longer hours/weekends or more physicians/nurse practicioners/females available for the health clinic because most of the students that may need health services are either in class or in rotations and have to miss crucial education to get health maintenance stuff done

I understand that the staff's time is limited, but it can be difficult do get an appointment-more hours would be nice. Thanks!

I would appreciate extended hours at the clinic (maybe even until 6 or 6:30 pm), because our course schedules are such that we are in class most of day.
Comments – Student Health Clinic

I was given the impression, during orientation, that our student fees covered basic primary care at the student health clinic. I have been shocked at how difficult it is to get an appointment in a timely manner. The clinic is only open until noon three days out of the week, and the days that it is open past noon are days that first years usually have attendance required classes all afternoon. I had to wait almost two weeks to be seen on one occasion. For my money, this is not adequate service, and, were I not automatically charged for student health, I would take my business elsewhere without thinking twice.

I wish the clinic had several appointments reserved for students each morning for students that wake up feeling lousy. Also, I'm not convinced that the clinic actually sees patients for the whole time that the website says they're open.

I wish they were open more hours...It's hard to schedule appointments when you are in class 8-5 most days, particularly the days student health is only open 8-12

I wish we would have more access to the clinic. it is too difficult to schedule an appointment.

If you are out on rotations it's almost impossible to get seen by a doctor. It would be one thing if they at least stayed open until 1 so we could try and swing by for lunch, but since they close most days by 12 its very hard.

I'm the only patient, getting a TB test (so no doctor is needed), at 8AM and I still have to wait 30 minutes?

Also, on a few occasions I have been there and they told me I could see the doctor in two days, for example when I have a sore throat. I understand that they are busy, but how long does it take to look at my throat?

In order to get an appointment, at least as a first year, we have to skip class...

The biggest problem however is the hours they are open. Only being open 8-12 is a great inconvenience to DO students who are required to be in class during that time, I've had to resort to seeing a doctor off campus in order to not miss class. More afternoon hours and even Saturday morning hours would be much better for our student schedule.

It is impossible to get an appointment there.

It is impossible to walk in sick and expect to see a physician b/c they are usually not available in the afternoons and all morning appointments are booked. I understand needing to make an appointment but its impossible to predict when you will have bouts of vomiting and diarrhea to make an appointment for such an incident. It would be nice if it was better staffed.
Comments – Student Health Clinic

It is near impossible to be seen. The hours are terrible and you have to wait half a week before they can fit you in. Once you are there the wait time has always been no less than 30-45 minutes and I'm being generous! I waited over an hour on my last visit and I had an exam the followinday. Needless to say I felt worse after I left.

It is too hard to get an appointment. If I am sick enough to miss a rotation then I need to be seen now - not in two days.

It is very difficult to get an appointment when you need it due to class schedules. I do not like missing class even if I am feeling sick and often times the only time the clinic is open is during the morning which is when we have the majority of our classes. Having a few more afternoons available would be very helpful.

It shouldn't take two weeks to get a refill.

It would be great if we could have more hours, and walk-in availability. Also, it would be great if the lab and the payment and student clinic services could be closer together.

It would be most convenient if I could be seen the same day I come in.

It's almost impossible to get in for an acute illness. They have odd hours. We pay for this service and don't get to use it.

It's great and very easy.

Limited hours makes it hard to schedule around class.

Medical school is demanding. When I get sick, I usually wait a week or two to try to get over it on my own, but after dealing with it for that long and not getting better, I usually want to get seen quickly. I understand that is what everyone wants. I do not know how busy they are or if they can work someone in to be seen quickly.

More available hours

More doctors staffing and better accomodation of walk ins. We are students, and sometimes we get sick and need a note so we can be excused from class. The best choice for us is the student health clinic, but it is so hard to get an appointment.

Need a strong improvement in all areas. It is not even dependable
Comments – Student Health Clinic

need more and longer hours to be able to get an appointment with clinic

need more hours because it's difficult to get an appointment in time

Need more student hours. Referrals to UNT-HSC docs should have some sort of student discount. Students should be able to access their records when needed.

Needs more health personnel so as to attend quickly to sick students

No suggestions. I require routine visits for injections and have always been able to schedule convenient appointments. Also when ill last semester, I was able to get an immediate appointment the same day which was excellent.

Offer more hours.

hours are horrible, I think the clinic forgot that we are students and have classes.

Once I was 15 min late to the student clinic and they told me they couldn't see me because I was late. So the next time I was 10 min early and I had to wait for 45 minutes to see a doctor. Does that sound crazy to you? But it isn't just once, everytime I've gone I've had an average of 25-35 min wait. The medical hours are horrible, once they told me to come in to have my PPD test read, they claimed they were open but they were closed. They close after noon on certain days. Also, why is the clinic at CBH and not PCC? It seems illogical to have it there.

Online scheduling for walk-ins.

open more hours bc we're in class all day

Our time is valuable and the clinic is not on schedule, have to wait a long time when I could be studying or should be in class.

perhaps a Saturday morning clinic

poor hours (are not open several afternoons a week),

Really need more available hours for students. I know it would be difficult, but it might be nice to have hours mainly after 5.

sometimes it is hard to get an appointment, b/c most of our avail time is in the afternoon and the clinic is typically open in the morning...we have mandatory classes. Student health hours should be extended into the evening so that students will not have to miss class or rotations if they have an appointment.
Comments – Student Health Clinic

Students should be able to work in a same day sick appointment so as not to miss more school than necessary if possible.

That place is never open and I waited over an hour to be seen and thats with an appointment it is clear that because you are a student they feel liek they can make you wait.

The clinic is usually closed when I want to go. They need to have hours that are before or after class so we don't have to miss class.

The clinic should be open 8-5 Monday through Friday

The hours are a little bizzare, and it makes it difficult to work around a medical students schedule. However, I know that they are limited because they also teach the 1st and 2nd year medical students.

The hours are crappy.

The hours are horrible

The hours are kind of all over the place. Making weekday hours the same for each day might help.

The hours are limited.

The hours are not convenient for students, which is frustrating because it is a student health clinic. It would be nice if they were open during the lunch hour and took their lunch break from either 11-12 or 1-2pm, so then students could go to the clinic over the lunch hour.

The hours are terrible, and not just because the posted hours are terrible. Sometimes there is no doctor there during scheduled hours. I was told once that the doctor had to do med school interviews. Really? I mean does UNTHSC care more about recruiting more students than it does the health of its current students? Ridiculous.

The hours are the only thing I would change. It is often hard to fit it in without missing class.

The hours of somewhat limited. And during holiday breaks, I found it hard to get an appointment because there was no doctor on duty.

The hours should be longer to accomidate the students schedules better.

Multiple days of the week the clinic is closed for half a day.
Comments – Student Health Clinic

The promptness of service needs to be improved. Scheduling and appointment needs to easier. I think communication within the clinic is fragmented and needs to be streamlined.

The SHC works normal hours, but these are hours when students are either in class or in clinics. Taking time off becomes difficult. Not sure how you could change the hours...

The hours and appointments available since XXXXXXX left are terrible.

the working hour should be increased. there is no emergency service provided by them.

Their hours of operation perfectly match my class hours. It'll be nice to have it open during lunch breaks.

There are only limited number of hours available in each day. No facility available in case of emergency but not very fatal in nature. If someone else calls instead of the student in the case where student is unable to call, they don't entertain until the student himself calls for taking appointment

There is almost no time that a student doing clinical rotations can come in for an appointment, since the hours are so limited, and generally are only in the morning, which is the most important time for us to be at the rotation. Most of the time the clinic hours are so inconvenient that I just have to deal with running out of meds or being sick, because I can't get an appointment at a time I could go.

There is delay in getting appointments at times

There should be a walk in clinic.

they need hours that work with students schedules, ie early in the morning and later in the evening, and also have someone available 5 days a week

They need to be open more. They have to realize that students have class and labs from 9-5 and can not afford to miss them.

Times seem to conflict with classes.

very hard to schedule a time; improve number of hours open for students

We are in class all day, it needs to be open during hours that we are not in class.

We often have class during clinic hours.

When I was trying to make an appointment last semester, the doctor was available only in the afternoons. This will restrict students from seeking healthcare.
Comments – Student Health Clinic

I had not known about being able to call to make appointments over the weekend. More advertising of ways to schedule an appointment and when they are available would be nice. I thought I could just stop in, and So I did, but was told I had to make an appointment and then come back, makes sense, but was an inconvenience at the time. Wouldn't it make more sense to have hours that are not during the students classes?

You can't get into the clinic anymore. Students used to be able to access XXXXXX when needed. Now, you need an appointment which is hard when you have no set expectation of being sick and the hours sometimes are impossible to get to when you are a 3rd/4th year.

Professionalism of Service/ Quality of Medical Care (n=63)

A female provider is needed to provide well-woman exams.

As a female, I am having a difficulty in scheduling my well woman exam with a male physician who is also my professor/attending. I've tried to explain that numerous times so I can get an appt with a female physician but no one seems to listen and understand. I wouldn't mind if he wasn't my professor but he is...I don't understand why I'm not allowed to see a female physician. This topic was brought up several times and we were told that we could schedule an appt with XXXXXX. But when I called, I was told by the receptionist AND the nurse (on three different occasions) that she's not available to see students.

Don't forget customer service! The front desk nurses are the first interaction with students/patients. We are customers. You need us as much as we need your services.

XXXXXX is not a particularly student friendly physician.

XXXXXX is wonderful!!!!

XXXXXX is an absolutely fantastic physician

I believe that the services/facilities are actually one of the best qualities of the school.

I enjoyed my visit to the clinic

Also extremely saddend to lose XXXXXX. She was awesome!

I have had nothing but problems with the Student Health Clinic staff. They still have not changed their contact information, so it is impossible to reach them. And when you do finally get their number/email, they do not respond for long periods. They are not helpful at all with completing the required prerequisites we needed to accomplish before
starting at TCOM--they waited until the day my loans were to be released to tell me there was a problem, and then refused to assist me in getting the desired records. They also failed to mention that a student physical that was required could be attained for free at their clinic; instead, they let me struggle with my doctor's office and pay $600 to get their precious physical. They have nothing but an attitude every time I go. Worst of all, i had no idea who to make complaints to so hopefully someone will read this survey:) I will never go to that clinic if I can help it.

I have never had a front desk staff who is friendly. They always seem to be in a bad mood and put out that you need them to so something for you.

I used this clinic only for my Tb test at the beginning of the year. Everything seemed fine based on this limited experience

I want to be very clear and say that my experience with XXXXX and the medical assistant XXXXXXX has been very positive, and those two individuals are always very professional and resourceful when I seek care at the clinic. However, XXXXXXX, the other medical assistant, has consistently been very frustrating to communicate and work with; her manner of communication comes across as condescending, and is often rude and unprofessional. XXXXXXX’s attitude contributed to the stress of balancing seeking care for my health problems while balancing my academic responsibilities. I feel like having competent, compassionate staff members who don't discourage patients' questions or concerns makes the difference in quality of care.

I was extremely disappointed in the promptness and professionalism of the student health clinic while it was in the PCC. Now that it is in a new office I am much happier with it and I do think that they are prompt and professional.

I was seen by a PA only, who then referred me to an unnecessary chest x-ray that cost $100. We deserve to see real doctors.

i do like the fact that you actually get to see the doctor instead of the nurse practitioner.

I would like to see a doctor who has more experience when I go instead of seeing someone a few classes above me. I would like to see the student health clinic advertise more to the students, to remind them that it doesn't cost them anything to go.

In my opinion the student health clinic is managed very poorly. They always seem to be running behind. The women who work up front often make snide comments to people. I believe they are doing it in jest, but sometimes when you aren't feeling very well it is easy to become irritated at them.

Instituting some way to pay for labs, imaging, etc... at the student health clinic instead of having to go to the cashier's office each time (which is across campus).

It is better now that it is not in the PCC. The PCC desk staff were bitter.
Comments – Student Health Clinic

It is difficult to call the student health clinic because there is not an option on the phone tree any longer which means you have to talk to an operator who then connects you to student health. On numerous occasions, there was no answer, even during open hours so I left a message as prompted with the assurance that my call would be returned. In the past 6 months I have left 3 messages and not one has been returned.

In particular there is this one nurse that sits at the desk. She is pretty rude and seems very unwilling to give an appointment. In addition, she also gave me false information on PPD skin test. XXXXXXX is AWESOME! I always ask to speak with her. They call it a student clinic but it seems that they are not here to serve students.

I don't know the one girl's name, not XXXXXXX the other one, can be very rude and is alway annoyed to dealing with you.

It would be nice if the student health clinic was actually called student health clinic instead of executive wellness. Creates confusion!

I've had to go back multiple times for the same problem because some of the attending physicians would not do appropriate lab tests to diagnose me, even after I suggest it.

Keep XXXXXXX!

Keeping the same practitioner would be good for continuity of care. Otherwise the nurses and staff are AWESOME.

XXXXXX is not fit for primary care since her specialty is palliative care.

Need a strong improvement in all areas. It is not even dependable

Never got my test result, I had to go back 3 months later to get it.

I've really appreciated the kindness and professionalism of the healthcare staff.

ok, the nurses at the clinic are very rude. they treat us like crap. they never smile and are really mean.

XXXXXX is the worse doc there. He has the worst bedside manner and acts as if he doesn’t care. XXXXXXX is the best.

one of the secretaries is one of the rudest people I have ever met.

when I went to get x-rays no one called me about results, I had to call 2 week later 3 times so the receptionist could tell me the doctor didn't say anything about it. Considering we're a medical school I was very unimpressed
Comments – Student Health Clinic

rude staff and expensive tests and dont like that you have to pay the registar in ead then go back and get the test done..

Some of the health care staff (not physician) seem uncaring, especially if we are ill and need to be seen right away. Please refer us over to PCC if the physician isn't available. When you are sick, you can't conform to the hours that the physician is in service. PLEASE refer us over to the PCC in this case.

Some of the nursing staff are not as informed of the policies regarding student health. Also, the student health office will not process an insurance claim for vaccinations even if completely covered by said insurance. The main PCC will make insurance claims but seeing how the student health is also the travel clinic, this makes things difficult when trying to get vaccinations covered by insurance. Why is this? They should process insurance claims for vaccinations especially if covered by insurance. The PCC will do this for the pediatric patients and in theory so should the student/travel clinic.

Something must be done about the billing/paying for procedures. There is a way to get it done electronically. I feel ashamed to say that we are well in 2000's and we still can't get our computers to work for us efficiently. Please figure out a way so that one doesn't have to spend 1/2 hour just going back and forth from the Clinic to the EAD and back for blood work. Thanks.

Female PAs or DOs on staff to perform pelvics and address GYN issues - without rotating students in the room.

The care was 'mediocre' at best.

The doctors I have seen have not been professional nor helpful - they did not provide adequate care nor concern and I ended up having to go elsewhere both times and will not be going back.

The first time I went was with XXXXXX - not professional at all. The second time was at the new office and it was great. The third time they never called me back to set up an appointment.

The front desk personnel could be trained to be more polite and friendly.

The means of paying is extremely inconvenient considering the location of the clinic and the location where students have to pay.

the nurses don't know what they are doing and the overall care was not good. They aren't organized and I wouldn't want to go there for more than a cold which is sad for a medical school.

The phones are never answered.
Comments – Student Health Clinic

the support staff and Docs working there are fantastic!

The staff at the health center, especially the front desk staff, are RUDE and terrible at their job!!! It is a HUGE mis-step for a DO/PA school to have such a TERRIBLE student Health center!!!! THis needs to be fixed!!!!!

The Student Health Office is a great service offered to students, and the medical care was excellant. The staff however has been rude every time I have gone in, even when it was just to drop off immunization papers.

The website needs to be updated with a page dedicated to student health. The direct phone line to student health is nowhere to be found and is not easily accessible. We have to get the run around for about 10 minutes just to get in touch with the office.

The whole go to the clinic then to the cashier to pay for XYZ then back to the clinic is somewhat tiresome, especially if you're sick. There has to be a better way to manage the way in which services are paid for.

There is a constant breakdown in communication that when the student health doctor is not available that there is to be cross cover with a doctor in the PCC. When I do get in for an appointment they take good care of me. The nursing staff is not always friendly though.

When I started, I did think it was odd that we had a nurse practitioner, but she was available much more often and the clinic was much easier to deal with when she was there. (although XXXXXX is great - what would you do without her!) Also, my pharmacy can never reach the student clinic since there seems to be no direct number, and I have to go through about 10 minutes of phone menu in order to call for an appointment.

There should be someone at the front desk to help you out. The location is confusing more signs of how to get to it.

We need a female provider.

I went three times last year and never saw the same doctor twice.

We were originally told that a new physician or PA would be added so that well woman exams wouldn't have to be given by our clinical faculty. It has yet to be done. I think if a man had to go in and get a rectal exam by a faculty member that he sees at least weekly this would have already been taken care of.

When it was in the PCC when i first came here it was terrible having to sit in a room filled with people of all types just waiting to get diagnosed. THE first day I waited for 2 hours and the receptionist who had an attitude issue told us we should leave an come back tomorroow, So I do that and get there early and just wait and finally seen the
Comments – Student Health Clinic

caretaker was quite amiable. Since it has moved into CBH I have not had long waiting
times, the Dr. was incredibly friendly.

I do really like seeing XXXXXX though, and previously XXXXXX. I feel like they can
handle more of my issues without referral.

The receptionist has a very poor attitude and is very rude. I had to make frequent visits
to the student health clinic to get lab slips so that I could do follow-up blood work after a
needle stick injury. I never saw her smile and she always seemed irritated when
patients would show up.
Comments - Student EAP (Counseling) Service

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**Student EAP (Counseling) Service (n=12)**

I didn’t get much helpful advice...

I didn't like that you could only see a counselor 6x for a problem.

I felt the assessment was made too quickly and my concerns were not addressed. I never went back. Moreover, these individuals are unable to provide Rxs.

I only went to one session but thought if I really needed the services that 3 sessions would not be sufficient.

I really had a positive experience.

I think we should have more than a maximum of 8 meetings. Medical school is four years, not one semester.

I would like if the EAP were available to students rotating in Baytown and Corpus.

My experience with EAP was pretty bad. The counselor just saw me for 20 mins per session and had no experience with Cognitive Behavior therapy. I thought this service was unhelpful.

The convenience of hours may just be with the specific therapist I encountered, not sure.

They were Awesome when helping me with my presentation. Thanks XXXXXX and XXXXXX (I think that's who they were)

very few after school hours available

Was very hard to get in to see them, especially if you wanted to stay with the same counselor. VERY INCONVENIENT! On the other hand, GREAT counselors.
Comments - Student-Related Services Provided by Educational Programs

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Program Services – TCOM-DO (n=41)

Administrative support as I said earlier.

Administrative support should work to accommodate students schedules. In the past I have found it very frustrating at the lack of leniency regarding test dates. Sometimes we have unavoidable obligations on weekends.

Admissions needs to tell people where they are on the waiting list. There is no organization whatsoever regarding the academic and social calendar. I am extremely disappointed in this school's lack of organization. The academic schedule never makes sense, tests are always spaced inappropriately, class does not need to follow tests, and the list goes on. Maybe if you got student approval of the schedule, you would have less complaining from students. The saddest thing is that students have volunteered to do this on their own time and they were turned down.

An email providing links to related deadlines, especially reminders about scholarships & FAFSA would be very helpful.

As a 3rd year dealing with trying to setup 4th year rotations, I feel a little lost & have not received much direction from XXXXXX office. I understand they want to help, but it seems we are left to our own devices with little help from their end.

Communication of news related to the program such as the addition of the MD program was announced publicly through the news long before the actual students of the school hear about the proposal. I am sickened that many of us heard about the proposal on outside rotations before the administration of this school sent a school-wide email. That is dishonest and embarrassing that outside physicians had knowledge of this proposal before current students knew.

communication of news specific to program/school - similar to comments for marketing and communications. students are being given very little information about the possibility of an MD option. Meetings with the administration on this topic have been
Comments - Student-Related Services Provided by Educational Programs

scheduled with only 2-3 days notice and have been planned for times when 3rd and 4th year students are most likely to be in clinic or at hospital.

deadlines especially with health stuff like tb tests aren't communicated unless you ask after you don't recieve financial aid

DO students should be assigned a faculty mentor to guide through 2nd, 3rd, and 4th years with rotation selection, etc. This should likely be a faculty member from their chosen specialty. Also There is a lot of unnecessary stress to students by the way the Medical Education department runs. Every thing is on paper and is about 2 months late in getting finished. Rotations are difficult to set up and meet with current regulations. There should be longitudinal rotations offered 4th year that meet online and run for an entire semester. Consideration MUST be given as to how to improve students access to days off for residency interviews.

XXXXXX sent a reminder to register for the AOA match about a week after the deadline passed. But that was only important for the students who had to pay an extra $50 to late register.

Have more advisors and staff working with students in helping them figure out the next step after medical school. More time and money needs to be spent helping students organize their rotations and helping them figure out their career path.

I believe students being interviewed should be informed of the changes that TCOM is making and TCOM's thoughts on MD programs.

I feel like there is a lack of communication when it comes to scheduling in the 3rd and 4th year. Students don't know when they are supposed to sign up for boards or when they can take them. I feel that most people find out by asking around and no one has the same information. I don't know if there is a 3rd & 4th year director like there is for 1st & 2nd year, but it would be helpful. It seems it would be easy for the school to send out an email a month or so in advance to tell students the general time line of when we should be doing things. For example, our step 1 board exam - I think we became eligible in Jan of our 2nd year. And most people didn't know that in order to get a June spot, you had to sign up for the test pretty early on in the year. Another example, is how to set up elective rotations 4th year. Most of us don't know how to go about doing this and it is something we need to do pretty soon. Since students have to do these things every year and it doesn't change that much, it would be helpful, if we received a blanket email on the time-line and process of these things.

I feel that communication of student activities could be improved, in particular for smaller clubs on campus. The new regulation of regulating the amount of mass emails,
Comments - Student-Related Services Provided by Educational Programs

in an attempt to cut down on people sending unnecessary mass emails makes it difficult for smaller clubs to let the school know about their activities. Using alternative methods, such as signs, etc. isn't as effective

I like reminder emails when things are due. It is a nice thing.

I think a holistic campus calendar with all school events, club meetings, and deadlines would be greatly beneficial.

I think it is sad that our school does not have a gift shop where we can buy items to express our school spirit and share it with others. Most other schools have this but I think that it is strange that ours does not.

I wish TCOM admissions would spend less time with a financial aid lecture and more with a panel of 4th year students that know everything about TCOM (unlike some of the people I've heard giving tours). Also, it would be awesome if you took students over to JPS and the hospital district and ate lunch with a TCOM alum who's a resident opposed to the meal over at the botanical gardens, which is just a strange environment. It would be awesome to know when we're in school. Today, February 6th, I just got an email saying when exactly our summer begins and ends. That's lousy.

I, and many of my classmates, am still in the dark as to how to go about setting up 4th year rotations. This may in part be because I am in Corpus instead of Fort Worth for the year, but just feel overall as if nothing has been explained to me about how 4th year as a whole works.

I'm not sure where to put this comment so I will put it here. I absolutely hate the fact that we are being lied to as students about this MD/DO thing. XXXXXX is doing everything in his power to sneak this program in and I don't understand it. We have heard more from outside sources than we have from our own president. When we try to inform ourselves the important questions are not answered and we are basically misled and deceived. This is terrible.

It seems like most of the clubs exist solely to have something to put on a residency application and not much thought/effort is put into their activities. For example, the Peds club went to a health fair and promoted making healthy eating choices. Honorable but the prize for playing their game was CANDY! That's just embarassing!

It would be nice if every time the class schedule was changed there was an alert either e-mailed out or posted on the website.

Looking at the inordinate number of children of local physicians admitted to TCOM, I am skeptical as to the equal opportunity practices of TCOM admissions.
Comments - Student-Related Services Provided by Educational Programs

Lots of lies coming out of admissions, from my cycle and from what I have heard coming from this past year's cycle. Please tell them to be honest.

XXXXXX always has an open door and loves to visit with students. We need more friendly faces like hers on campus.

News specific to the DO school/community was brought upon very late in the process. Not only was the MD option brought upon late, but also the students were misguided, were given options that were unfeasible, and straight out lied to. These acts by our current leadership does not effectively communicate what his plans are to lead our school/community, unless he means not to.

Once again, too many things are done last minute at TCOM, or the communication is not clear. Word-of-mouth is obsolete. Information, assignments, expectations, requirements, etc. from the administration, course directors, and professors need to be sent in email, even if announced in class.

Provide more guidance in the Residency application process

Sooner notification of changes in the schedule or required events.

Student government does not seem to be very upfront with the rest of the students with everything that is occurring in the school Academic deadlines and regulations- I think that the expectation of students to be present in class goes without saying, but making people sign in like little kids is aggravating and the program acts up half the time News Specific to program/school- two issues here 1) way too many curriculum issues made at the last minute. It is very aggravating not to be able to plan your week ahead of time because there are 30 class changes between Monday and Friday. Schedule should be set up ahead of time and not changed except for emergency situations once the course has begun. 2) The University should be upfront about issues affecting the university and the students, not give round about excuses about everything. Honesty is the best policy. Trying to trick people into supporting a political agenda is appalling at best!

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Comments - Student-Related Services Provided by Educational Programs

the students, not give round about excuses about everything. Honesty is the best policy. Trying to trick people into supporting a political agenda is apalling at best!

students should be able to readily and clearly receive information regarding their classes, rotation schedules, vacation time, grading criteria for courses, etc

The Daily News has to cover a whole campus. There needs to be a program specific email, with Deadlines and Updates specific to each school.

The problem is that new is not kept specific to my program... the amount of email I have to sift through every day that does not concern me or even my program is incredibly tedious and draining... and puts me at risk of missing important stuff because I am trying to delete things too quickly based on vague subject lines.

There is almost no communication from the school regarding important events - I finally was able to look up the information about our graduation date and location but it was really hard to find online. Other schools have much more guidance online, such as Southwestern's guide to the match, instead our school has a web page which basically has no useful information, and one meeting - but you can't go back and refer to the information presented in a meeting like you can refer back to online information. I guess I got bad advice regarding my competitiveness, since I only got one interview and now am very unlikely to match into my chosen specialty. Furthermore, what is our 8th semester? Where do we need to be? How long is it? Please, someone tell us before the first day!

We get too much information! There should just be a website with the upcoming events and news posted daily that we can go to on our own if we want to find something to do. All the emails desensitize us to emails and then people don't read all of them and they miss important things!

Why is it that when students make suggestions, complaints, requests that are contrary to the idea that "everything is great here" their opinions are devalued/discounted as a disgruntled or depressed student? It's much easier to not say anything at all, to be indifferent or apathetic, than to work to try to make the experience of TCOM better for ourselves and other students.

With better/more clinical administrative staff, deadlines won't missed.
Comments - Student-Related Services Provided by Educational Programs

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Program Services – SHP-PA (n=11)

Academic Deadlines & Regulations are not communicated to students clearly. The best method would be to send a reminder via email a few weeks before deadlines, such as financial due dates. The student portal is very very difficult to navigate and nearly impossible to find the information you are looking for.

I always feel like I am the last person to know what is going on, DESPITE reading the Daily News (via email), the monthly status reports via President Ransom, etc. The latest was when I was on rotation at JPS and a staff physician addressed me and asked me what I thought about the school adding a MD degree in order for JPS to agree to become associated with us as a University Hospital. I was taken aback and unprepared for response, which made me feel out of touch with MY campus.

I feel like I was led to believe I would find out information on the status of my application within a few weeks of my interview, but the reality was that it took 5 more months. I would have rather been told that I may not hear for months.

I felt really confused after going through the admissions process. I was told during my interview the date I would find out if I was accepted or not and when I called on that day, I was told another date. It was very confusing because this information and decision was very important.

I have participated in SGA at other universities and I do not feel as though our SGA is organized in a manner that is in the best interest of the students. There is too much meeting drag.

I think that the main means of communication is the e-mail, which makes for lots of emails, that sometimes go unread. I don't really have a suggestion for this except to post important events on bulletin boards near the classrooms where the student gather and in the central area of the library, java lab.

I was unhappy with the admissions department throughout the admissions process. Two days after I received a phone call telling me I had an interview, I received a letter in
Comments - Student-Related Services Provided by Educational Programs

the mail telling me that I had been rejected from the program (which caused me a great deal of stress until the matter was resolved). Also, I received another letter of rejection after being told over the phone that I had been accepted to the program. I feel that communication within the admissions department is very poor.

I wish that once you are accepted into the program they would give more information out. I never received anything on how much tuition was going to cost which would of been very nice.

more communication with PA students about campus wide opportunities and events

unaware of the change from PA in the medical program to now the school of public health till after

When entering school here, a lot of valuable information, like immunizations etc. was provided/changed in the middle of the summer so I had to go back and have more immunization stuff done. That shouldn't happen.
Comments - Student-Related Services Provided by Educational Programs

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**Program Services – Medical Sciences** (n=3)

Admissions could provide more with regard to acceptance to TCOM.

I believe that all the services listed can be better if constant communication with students via school email is essential.

I was initially rejected and then accepted, so there was short notice to get ready for school.
Comments - Student-Related Services Provided by Educational Programs

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Program Services – GSBS-MS (n=3)

XXXXXX and the secretarial staff for the graduate school are amazingly helpful. However, there has always been very little communication of academic deadlines and regulations and a lot of floundering by graduate students to meet them. This gets better as the mentor gets experience and can anticipate the deadlines but it is still very confusing.

Admission notices should be sent out MUCH earlier if GSBS expects students in the forensic genetics program. I noticed this year that starting in the summer (May 27) did not change when acceptance letters were sent out (April). This is not enough time for people to decide, move to Fort Worth, get situated, and start a graduate program.

My application into my program was due Jan 10. I was not notified of my acceptance until the end of April when the classes were to start in May. I had to go dig and find out whether or not I had been accepted as I was never notified.
Comments - Student-Related Services Provided by Educational Programs

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**Program Services – GSBS – PhD (n=6)**

I just went to the catalog but it would have helped if my mentor knew something about the program to give me some kind of strategy to deal with the many hurdles we have to overcome in graduate school.

Make a calendar that is easily accessible. Also, the student website is abysmal. It is difficult to navigate and overcrowded with useless menu options.

make the communication more communicative, I have no idea about deadlines and it doesn't seem that faculty i talk to know much about it either!

send out more email reminders of deadlines.

The GSBS admissions office should set higher standards for incoming students. There are many that come in and do not deserve to be here which decreases the quality of our degrees as perceived by the academic community. The people who work in Admissions are also not very friendly. Deadlines and regulations are not communicated except when it is time to file for graduation, everything else is expected to bee done by advisors or mentors, which they are not. GSBS specific news is lost in the daily news because of its boring format and too many stories.

There should be some health clinic for emergency services.
Comments - Student-Related Services Provided by Educational Programs

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Program Services – SPH/MPH (n=15)

admission process is pretty slow...and the sophas rules are not followed everytime....as the admissions were given without application to sophas......this spring 2009

I believe that the MPH webpage is not often updated.

I think the daily news is a little much...maybe just twice/week would suffice?

it would be nice if there is much more active rapport and interaction or scope of such events between tcom and sph students.

I've never been a part of student government, but I attend the PHSA meetings and I imagine its somewhat like that. Some people like to think of ways to spend tuition money, so that it would appear that they are trying to make things better for you when in fact their interest in you is marginal at best. "Journals in the library" It was proposed and it seemed like multiple people wanted more journals in the library, yet they didn't need them bad enough to let the people know about it for 2 months, maybe going on 3 months now. I don't think people should limit themselves to a single journal article for their work.

News should be communicate in timely manner

Set a standard schedule for students who are proceeding with Thesis option for MPH. The deadlines are not communicated properly to the advising staff or to the students, creating frustration with both groups. Additionally, similar protocols/requirements for all departments within the SPH would be helpful.

Some academic deadlines have been a little unclear on the website

The computer lab needs to be updated.

The school needs to do a better job of helping students find and secure jobs after graduating.
Comments - Student-Related Services Provided by Educational Programs

The SPH Computer lab has been a huge disappointment and an impediment to my acquiring quantitative skills. Computers are ancient and slow, programs not available on all computers, versions of software out of date. UNTHSC will not be a top-ranked college until it devotes some real energy and resources to updating information services. Common course management programs such as Blackboard are not used. Faculty computer skills are limited. Consult with faculty who are informaticall intelligent about the possibilities and advantages. It will require an investment but one with a good return.

The SPH computer lab needs serious updating.

The USB drives in the SPH computer lab are unusable and the computers with their towers very older and sometimes freeze while in-use.

There is an SPH computer lab?

Though I am a student of public health, I do not know about how I can use the computer lab of SPH. I thought it could be my fault, but none of my batch mates know this. So, please make us aware about it.
Comments - Student-Related Services Provided by Educational Programs

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Program Services – SPH/MHA (n=1)

sph computer lab is out dated. the computer a very slow and the printing system does not work. it should have th same type of printer that is in the library or ead student lounge area.
Comments - Student-Related Services Provided by Educational Programs

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Program Services – SPH/DrPH (n=7)

communication shoould be in a timely manner.

Keep the computers properly maintenanced.

More opportunities of career counseling stable on campus not just career faires and round table events

Need improve the career counseling both the availability and quality

Possibly have the SPH lab open on Saturdays.

See my comment on career counseling above. News from other departments besides your own needs to be communicated so that students in different departments can collaborate.

Thank you for extending the hours in the SPH computer lab!
Comments – Founders’ Activity Center

**Background:** At the conclusion of each survey section, respondents were asked to suggest improvements for any of the areas listed immediately above. While a respondent’s comments may spanned a variety of topics within a particular section, for the purposes of this report these comments have been divided and categorized by topic. The comments were not edited in any other fashion, and do not appear in any specific order other than by the categories presented.

**Hours of Operation (n=31)**

longer hours on Saturday and Sunday - at least until 5pm on Saturday.

I wish the hours were better too. Sometimes, I study late and wish the gym was open past 10. And I wish the weekend hours were extended!

Could we extend gym hours to 12am?

expand the hours

hours to be extended on weekends.

I am rotating in Baytown this year, but I am still required to pay fees for the FAC even though I do not even live in Fort Worth. To me, that is wrong. When I was in Fort Worth, I loved the FAC. The only thing I would change is to expand the hours of operation.

I was disappointed the FAC was closed over the holiday break.

I wish they could be open longer.

I wish it were open longer on saturday...

i wish the center was open for longer hours

I would like for the facility to be open until 9 or 10 on Sundays.

I would like to see longer hours on the weekend. Maybe 2 or 3 more in the evening for both sat & sun.

I would like to see more hours on the weekend. Currently it is only open 5 hours each day. I would like to see that move up to 8 hours each day, maybe 10am to 6pm.

Is it possible to get the FAC to be a 24hr access gym without taking the liability for injury to the persons using it outside the current hours?

It should be open longer on Saturday and Sundays
Comments – Founders’ Activity Center

It would be nice if the Saturday hours could be extended.

Like library FAC should increase its hours of operation...at least to some extent! Our school has one of the best FAC (I have been to few of the top schools of Texas and know this from my visits) but if it is not open then what is the meaning of that?

Longer hours on weekends would be nice

Longer hours would be nice

Longer hours would be nice but isn't a major factor - the FAC is pretty satisfactory overall.

longer sat and sunday hours please

Make later hours at night (midnight) and longer weekend hours, possible opening at 8am or 10am both days and being open until 5 or 8pm both days.

The hours are terrible for the 3rd and 4th year med students - we don't work regular business hours.

The FAC could be open more on the weekend.

can the hours be extended to go beyond 9 PM? Perhaps 11 PM would be great.

The hours are sparse, especially on the weekend.

The gym should be opened longer than 10 hours in all on the weekends. I know the traffic is slow, but I think that's partly due to most people just ignoring the fact the gym is opened at all on the weekends since it has such odd hours. It's also inconvenient that the gym is closed on breaks because that's when many people have time to work out.

they need to have 24 hr access !!!!!!!!!!!!!!

The hours are TERRIBLE. Closing at 10, for medical students, is a joke. The gym also seems to take every possible opportunity to close as early as they can. It was ridiculous that the gym closed for the entire winter break - that is about the only time we really had to enjoy the FAC. Instead of other students here, just high a highschool kid and pay them minimum wage. There is no excuse for the atrocious hours of the gym, period.

Hours of operation are terrible on weekends!! Saturdays the gym should stay open past 3pm (5-6pm atleast).

This facility should be available 24hr/7days.
Comments – Founders’ Activity Center

Activities & Programs (n=1)

more intramurals

Fitness Classes (n=19)

A step aerobics class would be great!

Get qualified teachers for the classes.

I know UNTHSC is getting a new FAC in the future, so future classes will not have the complaints/problems myself and classmates have. Its simply too small. You can't encourage more enrollment w/o needing to expand the fitness center.

Have more classes later on in the evenings. It seems like they are more geared for the faculty and not the students!

I attended the kickboxing class when XXXXXX taught it, but don't enjoy class with the new instructor. I wish there were other classes (like boot camp, power pump or a more upbeat yoga/pilates class) or more classes at different times.

I used to go to the fitness classes almost 2-3 times a week. I have not attended any in over a year. The quality of the instructor is sub par. The hours the classes are held (for instance during lunch) is not compatible with the DO schedule. Like many students, I am spending money to be a member of a gym because it is more convenient. We need MORE Aerobics classes taught by quality instructors.

I would enjoy more fitness classes offered in the evenings.

I would like more yoga classes.

krav maga classes

More programs would be good, i.e. a yoga class or aerobics class

More classes, more times.

More fitness classes before and after academic classes.

need more fitness classes and better instructors

offer more classes at more times
Comments – Founders’ Activity Center

Classes are terrible. I have never attended worse fitness classes and I hope we do not actually pay people to teach these classes. The yoga class was terrible and actually dangerous. The instructor guided students into positions that should never be attempted without proper warm-up and proper instructions of contraindications to the pose. The kickboxing class was something you would find in a nursing home. The fitness classes at this school are embarrassing.

I wish there were more fitness classes offered in the evening.

Unfortunately, the indoor court is often being used for aerobic classes in the evening, which is the only time that most students have off together and are able to play together.

I really enjoy the kickboxing class and think XXXXXXX does a great job.

To offer classes that work for the students! noontime or 5pm.

Exercise Facilities (n=49)

air out the downstairs occasionally,

As a health science center promoting the health and well being of individuals, we desperately need a improved facility.

As a medical school, we should seriously stress the importance of exercise! I feel like there is enough at the FAC for me to work out, but it's about what I can find in my an apartment gym. I can definitely work with what the FAC has to offer, but it was definitely below my expectations.

Need more room and bigger building to improve at level of students expectations of a health science center.

Better/bigger basketball court.

bigger gym

Basketball court is a joke, it has done terrible things to my jump shot because of the low ceiling.

Facility is about as good as it can be with current building. Improvements would require major expansion/renovation.

facility needs to be bigger
Comments – Founders’ Activity Center

Get a swimming pool. It sounds very childish/expensive/crazy however I guarantee the appeal of UNT HSC overall will rise markedly if one could be crammed somewhere around here.

I hope that when the new facility opens up there is a more respectable gym available. If there were a gym that were something like the size of 24hour fitness or some smaller undergrad institutions you could even have support if you were to charge students.

I love going to the FAC and I have no complaints...I would like to say that I look forward to a new, improved, and modern FAC!

I think the FAC needs more space because the front part of the gym seems cramped

I think the people do a fine job, but the entire facility is in dire need of renovations and space.

I wish it was not so hot in the cardio room. I also know these things will not be changed no matter how many times it is communicated.

I really, really don't like that a UNT-HSC badge is required to use the facility. That is very inconvenient. If a badge is necessary to open the door, (unlike ANY other gym anywhere) why then is it necessary to pay someone to sit up front? If our dues are going to paying an employee to sit up front, then why not have that employee improve the convenience of the gym and watch you type your number in without needing a badge?

It is dreary to workout there. The facilities are clean and the equipment is fine but I had to get a membership to 24hr fitness because is depresses me to work out on campus.

I've only used it a few times, but I checked the 1x/week box.... it's fine. It's not great, but it works. And the staff is nice.

just a bigger and more efficient area and newer equipment. Most people have a gym membership somewhere else because this one is so lacking

Larger facility. There is only so much they can do with the limited space.

limited space, very poor basketball gym, staff is friendly and helpful

Maybe a pool? :

Need a bigger basketball court with a higher ceiling.

better building construction - ventilation is horrible.

New building
Comments – Founders’ Activity Center

New equipment & building
update facilities to include more showers

The FAC already has limited space and equipment yet XXXXXX allows one of the main areas to be taken up for Cowtown business. Is there not another space available on campus for this? I personally have complained about this every year I’ve been at UNTHSC.

Please consider building a pool!

Please have racquetball court in the new FAC plan

Shower/locker rooms could benefit from some work - especially changing areas!

Softer towels!

Staff is really great. Build a new building.

The cardio room has a dust problem. You can see dust bunnies hanging from the ceiling fans.

the FAC could use some updating, but overall it functions well

The FAC does not have a good ventilation system

The FAC is perfectly adequate for the space and limits of the current location. The new Health promotion manager is such a hard worker and does an exceptional job! I think some regulation (using the ID badges to check in) could be improved in the new location and would also possibly create new jobs.

The FAC is rather small especially considering the number of people that frequent it.

The facilities are old, but again this will probably be fixed when the new building opens up.

The gym is definitely in need of an upgrade.

The indoor basketball court does not seem to be a very good option for playing basketball. It has very small dimensions and the height of the ceiling makes it nearly impossible for good play. I suggest more standard dimensions be used for future attempts at providing an indoor basketball court.

the rooms are small and it feels stuffy after a while.
Comments – Founders’ Activity Center

The indoor basketball court is not appropriate. The ceiling is too low, and I have to shoot the ball more flat, which requires me to change my form...which is bad. The only court to play a full game of basketball on is outside. However, the court outside is hard on the knees and deters us from wanting to play out there.

ey have enough equipment, the building just needs some help. i know things will be better when we get the new building across the road open.

The equipment there is adequate, but cannot handle a large crowd. I really hope that the new buildings being built will contain a larger center

We are a health science center, so it does seem like a more updated Exercise Facility would be available, but I believe there are plans to include that in future buildings.

we dont have a swimming pool. Its unfortunate that the school doesn't have a pool which is considered to be the most strenuous, relaxing and coolest exercise. we students wonder if we can ever have a swimming pool anywhere in the campus...it will be gr8 delight. a dream come true.

wish had a pool or track, then would use more

And it would be nice for the aerobic equipment to be in a bigger room - it feels VERY claustrophobic in there.

Update the center to the 21st millennium. It has an intimate feel which is nice but when you go in there during peak hours there are not a lot of machines available and I personally feel bad about walking through a yoga or kung-fu class. So basically, expand it so there can be a room for those classes and there is room for more machines

Exercise Equipment (n=39)

It would be nice to have working equipment that isn't 15 years old

Better equipment for cardio and free weights.

equipment is outdated

Equipment too old, and there is not enough of it.

get new equipment

Get up to date equipment

I didn't see a pull-up equipment. could we get that please?
I feel the equipment is a little outdated and limited.

I know it will cost, but could the FAC get more updated cardio equipment to replace the current equipment.

It be nice to have a bigger gym with newer equipment. Some of the equipment is falling apart!

There is a ton of other equipment that I would like to see in there, but I realize that space is an issue.

I think the FAC needs complete overhaul with the addition of newer exercise equipment and free-weights.

I wish there were some more equipments.

It would be nice if every cardio machine had it's own TV so people wouldn't get neck strain.

limited equipment

More room with more cardio equipment would be great.

More weight machines would be nice.

Need new equipment (especially treadmills)

need new equipment and we need to expand!

Need new equipment.

New equipment & building

NEW EQUIPMENT

Of course the basketball court has some problems (low ceiling, etc.) but aside from structural limitations of the building itself (keeps things too spread out), there is a sufficient variety of equipment and minimal I would say needs absolute improvement until the new facility breaks ground and is finished. Until then, the only strong recommendation that comes to mind is another free weight incline bench. The current one cannot be used by anyone over probably 6’2.

Only XXXXXX would approve a plan to install flat panel televisions, yet not bother to update the equipment. I go to the FAC to work out - not watch television.
Comments – Founders’ Activity Center

Outdated

Some of the elliptical machines are old and squeak really badly. Some WD-40 would be nice.

Some of the equipment could use an update. Overall, the layout of the equipment is very effective.

The equipment for most part is old. Most free weights don't match, machines are less than smooth motion, indoor basketball court is useless since ceiling is so low.

The equipment is old and not very nice.

The equipment is outdated and the facilities are cumbersome to navigate and not effectively utilized.

there are not enough elliptical machines. The ones they do have are in constant need of repair.

The FAC needs new equipment

there should be more equipment for helping weight reduction

the space is just not good. it's small and much of the equipment is outdated.

some of the treadmills do not show the heart rate.

There aren't really a lot of good machines at all, but I guess nothing can be done about that because of spatial concerns.

The weights are OLD, the bench press is tilted about 20 degrees to the right. Instead of a $2000 TV in the weight area, it should have been spent on better equipment. The dumbbells only go to 100lbs while there are MULTIPLE sets of dumbbells ranging from 5 - 20.

and more and newer machines, seriously, one of the worse things about this school !!!!!!!!!!!!!

Thigh abductor/adductor machine should be added.

We really need more aerobic equipment. Particularly, the treadmills are never all in use but the good (comfortable) stationary bikes and the elliptical machines often have a line.
Appendix B

Charts
Chart 1.1 - Response Rate by Program & Degree

NA - Not Applicable, data merged with MS program (Med Sci), or program did not exist (MHA)
For more information, please see the tables associated with this topic.
Chart 1.2 - Response Rate by Gender

For more information, please see the tables associated with this topic.
Chart 1.3 - Response Rate by Full Time Status

For more information, please see the tables associated with this topic.
Chart 2.1 - Classrooms

For more information, please see the tables associated with this topic.
Chart 2.2 - Student Lounges

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 2.3 - Computing and Technology

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 2.4 - Lewis Library

<table>
<thead>
<tr>
<th>Service</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Open sufficient hours</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Building conducive to quiet study</td>
<td>NA</td>
<td>95%</td>
<td>93%</td>
</tr>
<tr>
<td>Building conducive to social interaction</td>
<td>84%</td>
<td>94%</td>
<td>94%</td>
</tr>
<tr>
<td>Access to print and electronic resources</td>
<td>88%</td>
<td>92%</td>
<td>98%</td>
</tr>
<tr>
<td>Staff able and willing to help find what I need</td>
<td>97%</td>
<td>95%</td>
<td>96%</td>
</tr>
<tr>
<td>Library Computers – Quality</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Library Computers – Availability</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Library Outlets and Network Connections</td>
<td>79%</td>
<td>92%</td>
<td>92%</td>
</tr>
</tbody>
</table>

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 2.5 - Laboratories

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching Labs -</td>
<td>96%</td>
<td>94%</td>
<td>97%</td>
</tr>
<tr>
<td>Equipment Quality</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching Labs -</td>
<td>89%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safety</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research Labs -</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equipment Quality</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research Labs -</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safety</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 2.6 - Campus

For more information, please see the tables associated with this topic.
Chart 2.7 - Campus Police

For more information, please see the tables associated with this topic.
Chart 2.8 - Parking

For more information, please see the tables associated with this topic.
Chart 2.8 - Parking

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 3.1 - Academics - TCOM-DO

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 3.2 - Academics - TCOM-DO

For more information, please see the tables associated with this topic.
Chart 3.3 - Academics - TCOM-MPAS

<table>
<thead>
<tr>
<th>Measure of Quality</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curriculum, Relevance of</td>
<td>92%</td>
<td>92%</td>
<td>92%</td>
</tr>
<tr>
<td>Quality of Teaching</td>
<td>76%</td>
<td>87%</td>
<td>77%</td>
</tr>
<tr>
<td>Quality of Faculty Advising</td>
<td>96%</td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td>Course and Instructor Evaluations</td>
<td>NA</td>
<td>68%</td>
<td>88%</td>
</tr>
</tbody>
</table>

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
For more information, please see the tables associated with this topic.
Chart 3.5 - Academics - GSBS-Medical Science

NA - Not Applicable, data merged with MS program
For more information, please see the tables associated with this topic.
NA - Not Applicable, data merged with MS program
For more information, please see the tables associated with this topic.
Chart 3.7 - Academics - GSBS-MS

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 3.8 - Academics - GSBS-MS

For more information, please see the tables associated with this topic.
Chart 3.9 - Academics - GSBS-PhD

- Curriculum, Relevance of: 89% (2007), 89% (2008), 77% (2009)
- Quality of Teaching: 84% (2007), 86% (2008), 76% (2009)
- Quality of Faculty Advising: 89% (2007), 89% (2008), 77% (2009)
- Course and Instructor Evaluations - Adequate Measure of Quality: 75% (2007), 88% (2008), 70% (2009)
- Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum: 79% (2007), 78% (2008), 67% (2009)

NA - Not Applicable, question not asked

For more information, please see the tables associated with this topic.
Chart 3.10 - Academics - GSBS-PhD

For more information, please see the tables associated with this topic.
Chart 3.11 - Academics - SPH-MPH

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 3.12 - Academics - SPH-MPH

For more information, please see the tables associated with this topic.
Chart 3.13 - Academics - SPH-MHA

Percent Met/Exceeded

- Curriculum, Relevance of
- Quality of Teaching
- Quality of Faculty Advising
- Course and Instructor Evaluations - Adequate Measure of Quality
- Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum

2007 2008 2009

NA - Not Applicable, program did not exist
For more information, please see the tables associated with this topic.
Chart 3.14 - Academics - SPH-MHA

NA - Not Applicable, program did not exist
For more information, please see the tables associated with this topic.
Chart 3.15 - Academics - SPH-DrPH

<table>
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<th>Category</th>
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<th>2008</th>
<th>2009</th>
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</thead>
<tbody>
<tr>
<td>Curriculum, Relevance of</td>
<td></td>
<td></td>
<td>100%</td>
</tr>
<tr>
<td>Quality of Teaching</td>
<td>82%</td>
<td>91%</td>
<td></td>
</tr>
<tr>
<td>Quality of Faculty Advising</td>
<td>81%</td>
<td>79%</td>
<td></td>
</tr>
<tr>
<td>Course and Instructor Evaluations -</td>
<td></td>
<td></td>
<td>86%</td>
</tr>
<tr>
<td>Adequate Measure of Quality</td>
<td>71%</td>
<td>76%</td>
<td></td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Used</td>
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<td></td>
<td>69%</td>
</tr>
<tr>
<td>Effectively by Faculty to Improve the</td>
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<td>60%</td>
</tr>
<tr>
<td>Curriculum</td>
<td></td>
<td></td>
<td>70%</td>
</tr>
<tr>
<td>Quality of Faculty</td>
<td></td>
<td></td>
<td>67%</td>
</tr>
</tbody>
</table>

NA - Not Applicable, question not asked

For more information, please see the tables associated with this topic.
Chart 3.16 - Academics - SPH-DrPH

For more information, please see the tables associated with this topic.
Chart 3.17 - Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education. - TCOM-DO

For more information, please see the tables associated with this topic.
Chart 3.18 - Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education. - SHP-MPAS

For more information, please see the tables associated with this topic.
Chart 3.19 - Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education.
GSBS-Medical Science

For more information, please see the tables associated with this topic.
Chart 3.20 - Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education. - GSBS-MS

For more information, please see the tables associated with this topic.
Chart 3.21 - Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education. - GSBS-PhD

For more information, please see the tables associated with this topic.
Chart 3.22 - Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education. - SPH-MPH

For more information, please see the tables associated with this topic.
Chart 3.23 - Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education. - SPH-MHA

For more information, please see the tables associated with this topic.
Chart 3.24 - Indicate whether you agree or disagree with the following statement: Overall, I am satisfied with the quality of my education. - SPH-DrPH

For more information, please see the tables associated with this topic.
Chart 4.1 - Student Affairs

For more information, please see the tables associated with this topic.
Chart 4.2 - Student Affairs

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 4.3 - Financial Aid

For more information, please see the tables associated with this topic.
For more information, please see the tables associated with this topic.
Chart 4.5 - Do you like the new format for the UNTHSC Catalog?

For more information, please see the tables associated with this topic.
Chart 5.1 - Student Health Clinic: Frequency of Use

For more information, please see the tables associated with this topic.
Chart 5.2 - Student Health Clinic

For more information, please see the tables associated with this topic.
Chart 6.1 - Student EAP (Counseling) Service: Used by Students

For more information, please see the tables associated with this topic.
Chart 6.2 - Student EAP (Counseling) Service

<table>
<thead>
<tr>
<th>Service</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability</td>
<td>NA</td>
<td>NA</td>
<td>91%</td>
</tr>
<tr>
<td>Professionalism of Service</td>
<td>86%</td>
<td>91%</td>
<td>87%</td>
</tr>
<tr>
<td>Sufficient Length of Service</td>
<td>82%</td>
<td>85%</td>
<td>88%</td>
</tr>
<tr>
<td>Quality of Mental Health Care</td>
<td>85%</td>
<td>85%</td>
<td>NA</td>
</tr>
<tr>
<td>Convenience of Hours</td>
<td>NA</td>
<td>86%</td>
<td>91%</td>
</tr>
</tbody>
</table>

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 7.1 - Institutional Services Provided by Educational Program - TCOM-DO

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 7.2 - Institutional Services Provided by Educational Program - TCOM-DO

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 7.3 - Institutional Services Provided by Educational Program - SHP-MPAS

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 7.4 - Institutional Services Provided by Educational Program - SHP-MPAS

- Student Government: 94% (2007), 97% (2008), 98% (2009)
- Other Student Organizations: 95% (2007), 94% (2008), 100% (2009)
- Communication of Student Activities: 100% (2007), 97% (2008), 97% (2009)
- Communication of News Specific to Program/School: 94% (2007), 89% (2008), 94% (2009)

NA - Not Applicable, question not asked

For more information, please see the tables associated with this topic.
Chart 7.5 - Institutional Services Provided by Educational Program - GSBS-Medical Science

- Admissions: 95% (2007), 100% (2008), 95% (2009)
- Student Services: 71% (2007), 86% (2008), 97% (2009)
- Communication of Academic Deadlines & Regulations: 64% (2007, 2009), 95% (2008)
- Communication of News Specific to Program/School: 64% (2007), 95% (2008), 97% (2009)

NA - Not Applicable, data merged with MS program
For more information, please see the tables associated with this topic.
Chart 7.6 - Institutional Services Provided by Educational Program - GSBS-MS

<table>
<thead>
<tr>
<th>Service</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
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</thead>
<tbody>
<tr>
<td>Admissions</td>
<td>84%</td>
<td>85%</td>
<td>97%</td>
</tr>
<tr>
<td>Student Services</td>
<td>83%</td>
<td>83%</td>
<td>97%</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>NA</td>
<td>NA</td>
<td>88%</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>NA</td>
<td>86%</td>
<td>90%</td>
</tr>
</tbody>
</table>

NA - Not Applicable, question not asked

For more information, please see the tables associated with this topic.
Chart 7.7 - Institutional Services Provided by Educational Program - GSBS-PhD

<table>
<thead>
<tr>
<th>Service</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admissions</td>
<td>86%</td>
<td>88%</td>
<td>92%</td>
</tr>
<tr>
<td>Student Services</td>
<td>83%</td>
<td>85%</td>
<td>91%</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>NA</td>
<td>64%</td>
<td>80%</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>NA</td>
<td>79%</td>
<td>84%</td>
</tr>
</tbody>
</table>

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 7.8 - Institutional Services Provided by Educational Program SPH-MPH

For more information, please see the tables associated with this topic.
Chart 7.9 - Institutional Services Provided by Educational Program SPH-MPH

<table>
<thead>
<tr>
<th>Service Category</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Government</td>
<td>96%</td>
<td>91%</td>
<td>84%</td>
</tr>
<tr>
<td>Other Student Organizations</td>
<td>88%</td>
<td>82%</td>
<td>NA</td>
</tr>
<tr>
<td>Communication of Student Activities</td>
<td>89%</td>
<td>92%</td>
<td>NA</td>
</tr>
<tr>
<td>Communication of Academic Deadlines &amp; Regulations</td>
<td>78%</td>
<td>89%</td>
<td>NA</td>
</tr>
<tr>
<td>Communication of News Specific to Program/School</td>
<td>89%</td>
<td>92%</td>
<td>NA</td>
</tr>
</tbody>
</table>

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 7.10 - Institutional Services Provided by Educational Program SPH-MHA

For more information, please see the tables associated with this topic.

NA - Not Applicable, question not asked
Chart 7.11 - Institutional Services Provided by Educational Program SPH-MHA

For more information, please see the tables associated with this topic.

NA - Not Applicable, question not asked
NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 7.13 - Institutional Services Provided by Educational Program SPH-DrPH

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Chart 8.1 - Founders Activity Center: Frequency of Use

For more information, please see the tables associated with this topic.
Chart 8.2 - Founders Activity Center

NA - Not Applicable, question not asked
For more information, please see the tables associated with this topic.
Appendix C
Survey Instrument
Welcome to UNTHSC's 2009 Student Satisfaction Survey. **Your responses are anonymous.** Please feel free to be candid, while being constructive, in your input. Following data analysis by the Office of Strategy and Measurement, the report will be distributed to UNTHSC's administrators for review and appropriate action, where needed. Your participation will move UNTHSC closer to our vision of *Becoming a Top 10 Health Science Center*.

Some changes made as a result of last year's survey include:

- Expanded Student Affairs services to include Career Counseling programs and services
- Created the Center for Academic Performance and expanded co-curricular educations enhancement programs.
- Created an on-line common scholarship application which allows students to apply for multiple scholarships through the completion of a single on-line application.
- Added lockers for all PA students outside of their primary classrooms.

**Awards for participating in this year's survey include:**

- **drawings for Target gift cards**
- **$250 to the scholarship fund for any school that reaches a participation rate of 50%**
**Student Demographics**

*What is your PRIMARY program? (check all that apply)*

- TCOM - DO
- SHP - PA
- GSBS - Medical Sciences
- GSBS - MS
- GSBS - PhD
- SPH - MPH
- SPH - DrPH
- SPH - MHA

---

How many years have you been enrolled at UNTHC?

- Less than 1
- 1-2
- 3-4
- 5 or More

---

*What is your expected graduation year?*

- 2009
- 2010
- 2011
- 2012
- 2013
- 2014

---

What is your enrollment status?

- Full Time
- Part Time

---

What is your gender?

- Female
- Male
Please Check Your Major [GSBS Only]

- Biochemistry and Molecular Biology
- Biomedical Sciences
- Biotechnology
- Cancer Biology
- Cardiovascular Science
- Cell Biology and Genetics
- Clinical Research and Education: Osteopathic Manipulative Medicine
- Clinical Research Management
- Forensic Genetics
- Integrative Physiology
- Microbiology and Immunology
- Neurobiology of Aging
- Primary Care Clinical Research
- Pharmacology and Neuroscience
- Physical Medicine
- Structural Anatomy
- Visual Sciences
Compared to your expectations for the institution, please rate the following institutional facilities and services.

### Classrooms

<table>
<thead>
<tr>
<th>Facility</th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>AV equipment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintenance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cleanliness</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Classroom Temperature</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outlets and Network Connections</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the facilities listed above?

### Student Lounges

<table>
<thead>
<tr>
<th>Location</th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lounges in EAD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lounge in CBH</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Study Lounges in Library</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7th Floor SPH Lounge</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the facilities listed above?

### Computing and Technology

<table>
<thead>
<tr>
<th>Facility</th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Printing/Copiers</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Groupwise/Email</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wireless Quality</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the facilities listed above?

---

Lewis Library
<table>
<thead>
<tr>
<th><strong>Open sufficient hours</strong></th>
<th><strong>Exceeds Expectations</strong></th>
<th><strong>Meets Expectations</strong></th>
<th><strong>Below Expectations</strong></th>
<th><strong>No Opinion</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Building conductive to quiet study</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Building conductive to social interaction</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Access to the print and electronic resources</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Staff able and willing to help me find what I need</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Library Computers - Quality</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Library Computers - Availability</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Library Outlets and Network Connections</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the services/facilities listed above?

<table>
<thead>
<tr>
<th><strong>Laboratories</strong></th>
<th><strong>Exceeds Expectations</strong></th>
<th><strong>Meets Expectations</strong></th>
<th><strong>Below Expectations</strong></th>
<th><strong>No Opinion</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Teaching Labs - Equipment Quality</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Teaching Labs - Safety</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Research Labs - Equipment Quality</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Research Labs - Safety</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the services/facilities listed above?

<table>
<thead>
<tr>
<th><strong>Campus</strong></th>
<th><strong>Exceeds Expectations</strong></th>
<th><strong>Meets Expectations</strong></th>
<th><strong>Below Expectations</strong></th>
<th><strong>No Opinion</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Maintenance</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Cleanliness</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Handicap Access</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the services listed above?
### Campus Police

<table>
<thead>
<tr>
<th></th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Security</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Emergency Communications</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the facilities listed above?

---

### Parking

<table>
<thead>
<tr>
<th></th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Price</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the facilities listed above?

---

### Food Service

<table>
<thead>
<tr>
<th></th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stairway Cafe</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Java Lab Coffee Shop</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Vending Machines</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the services/facilities listed above?
Compared to your expectations for the institution, how would you rate the following?

Academics

<table>
<thead>
<tr>
<th></th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curriculum - Relevance of</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of Teaching</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of Faculty Advising</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Adequate Measure of Quality</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Course and Instructor Evaluations - Used Effectively by Faculty to Improve the Curriculum</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of Teaching/Graduate Assistants</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative Support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the areas listed above?

[Box for comments]

Indicate whether you agree or disagree with the following statement:  (Scale: 5 = Strongly Agree to 1 = Strongly Disagree)

Overall, I am satisfied with the quality of my education.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>No Opinion / Indifferent</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level of Satisfaction</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Why do you feel this way?

[Box for comments]
## Compared to your expectations for the institution, how would you rate the following?

<table>
<thead>
<tr>
<th>SPH/GSBS Academics</th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of Guidance Provided by Major Professor/Mentor</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>Availability of Classes</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the areas listed above?
Compared to your expectations for the institution, how would you rate the following?

SPH/GSBS Academics

<table>
<thead>
<tr>
<th></th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of Guidance Provided by Major Professor/Mentor</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the areas listed above?
**Compared to your expectations for the institution, how would you rate the following?**

TCOM DO/PA Academics

<table>
<thead>
<tr>
<th>Quality of Program Clinical Staff</th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the area listed above?
Compared to your expectations for the institution, how would you rate the following student services and programs?

### Student Affairs

<table>
<thead>
<tr>
<th>Services</th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registrar</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>International Student Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Center for Academic Performance (CAP)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Life</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Career Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the services listed above?

---

### Financial Aid

<table>
<thead>
<tr>
<th>Services</th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Aid Office - Overall</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to Loan Information</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Availability of Scholarships</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the services listed above?

---

### Other Institutional Services and Offices

<table>
<thead>
<tr>
<th>Services</th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Financials Office</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human Resource Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marketing &amp; Communications - General</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>UNTHSC News &amp; Plans</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alumni Affairs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the services listed above?
Do you like the new format for the UNTHSC Catalog?

- [ ] Yes
- [ ] No
- [ ] I have not seen the new catalog

What do you suggest be done to improve the UNTHSC Catalog?
How often have you used the Student Health Clinic in the last year?

- Never Used
- 1 Time
- 2-5 Times
- >5 Times
Please indicate your overall level of satisfaction with the following institutional facilities and services.

Student Health Clinic

<table>
<thead>
<tr>
<th></th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Promptness of Service</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professionalism of Service</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of Medical Care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Convenience of Hours</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the services/facilities listed above?
*Have you used the Student EAP (Counseling) Service in the last year?

- Yes
- No
Please indicate your overall level of satisfaction with the following institutional facilities and services.
Student EAP (Counseling) Service

<table>
<thead>
<tr>
<th>Service</th>
<th>Exceeds Expectations</th>
<th>Meets Expectations</th>
<th>Below Expectations</th>
<th>No Opinion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Availability</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professionalism of Service</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sufficient Length of Service</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality of Mental Health Care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Convenience of Hours</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What do you suggest be done to improve the service listed above?

[Blank space for input]
Please indicate your overall level of satisfaction with the following services provided by your program. Student-Related Services Provided by Your School

<table>
<thead>
<tr>
<th>Admissions</th>
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[399]
*How often have you used the Founders Activity Center in the last year?

- Three or More Times a Week
- Twice a Week
- Once a Week
- Never Use
Please indicate your overall level of satisfaction with the following institutional facilities and services.

**Founders Activity Center**

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What do you suggest be done to improve the services/facilities listed above?

___
Thank you for taking the survey. Please **click here to exit the survey site and enter our drawing** for special prizes. Your survey responses will remain anonymous.