For my mid-site evaluation, I presented a case on a patient who had low back pain. I decided to choose to write about this, given how common back pain is, and how important it is to recognize the red flags in patients and assess the different types of etiologies. His presentation was most consistent with a disk herniation, and he had radiculopathy symptoms, so I was able to distinguish this presentation from musculoskeletal benign concerns. Ultimately, he was managed with conservative measures and did not require any imaging at the moment. Through this case, I learned the importance of categorizing low back pain by assessing its associated symptoms and seeing if it is a musculoskeletal, radicular, or concerning for a more serious cause. This experience reinforced proper clinical decision-making to help avoid unnecessary imaging while still providing adequate patient care. In my visit, I learned that a short assessment was also needed instead of a long explanation because it was a straightforward case.

During my final site evaluation, I presented an H&P on a diabetic patient who developed symptoms of a genital mycotic infection, which is a complication of her condition and the use of her medication, SGLT2 inhibitor, Empagliflozin. From this case, I learned that the A1C value is important to assess whether a patient's glucose is being adequately controlled, and I will incorporate it in my future documentation on diabetic patients. What was important with this case is the management, alongside just being prescribed medication, with an emphasis on patient education regarding hygiene, and counseling patients on their medication side effects. This case allowed me to recognize common medication side effects along with condition complications.

Overall, the site evaluations were a great learning moment in improving presentations by receiving feedback in person and further incorporating that into later patient presentations. While I am still continuously learning and refining my presentation skills, this rotation has allowed me to become more comfortable in delivering patient presentations, and with future rotations, I anticipate delivering better cases and making fewer mistakes.