

ASSESSING THE MICHIGAN COLLEGE OF OPTOMETRY'S  
CURRICULUM AND ADMISSIONS PROCESS

by

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## ABSTRACT

*Background:* This study provides information about the Michigan College of Optometry's (MCO) current curriculum and admissions process from the view point of the students. This project also cross analyzed many different criteria including the number of schools applied to, grade point average, admission test scores, and reasons for choosing MCO over other optometry schools in order to obtain a reason for the abnormally high applicant scores for the class of 2010. *Methods:* A survey was distributed in order to assess MCO's curriculum and admissions process. The information obtained from this study could provide the school with a basis for making adjustments to the current program. *Results:* Based on the results of this study microbiology was recorded as the least useful class while, ocular health assessment was recorded as the most useful class. Students also felt that more ancillary testing procedures and interpretation of results needed to be taught by MCO faculty. When looking at the admissions process, most students chose MCO due to instate tuition and small class size and the majority of applicants with scores of 330 or greater on the Optometry Admissions Test (OAT) only applied to MCO. This study also concluded that statistically there is not a difference between the Classes of 2007, 2008, 2009, and 2010 at MCO based on OAT scores and grade point average (GPA). *Conclusions:* Students are an invaluable asset to helping critique and exemplify current curriculum and admissions, thus their thoughts should be considered before modifications are made.

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## **Introduction**

Every school or college of optometry faces similar challenges every year, including filling all of the seats for their entering class and providing proper and up to date curriculum to cover changes in scope of practice. A school's curriculum and admissions process are two of the most important aspects for creating a successful optometry program. A weak admissions process will defer more qualified candidates, while a weak curriculum will result in less qualified and knowledgeable graduates. While most schools have special committees designated to each of these areas, typically these committees only represent the opinions of the faculty and staff leaving out the important opinions of the students.

This study was designed to obtain information about the Michigan College of Optometry's (MCO) current curriculum and admission's process from the view point of the students. Through descriptive analysis, MCO's curriculum was assessed to determine which classes were the most and least useful for practicing "real-world" optometry as well as to determine which parts of the admissions process were most effective for drawing new students to MCO. Comparative analysis was also used to assess the differences between the Classes of 2007, 2008, 2009, and 2010 at MCO. This comparative analysis was performed in an effort to determine a reason for the abnormally high applicant scores for the Class of 2010.

## **Methods**

A survey was created and distributed via the Internet to 164 current MCO students and recent graduates on January 20, 2007. Thirty-six surveys were sent to the Class of 2010, 35 to the Class of 2009, 29 to the Class of 2008, 33 to the Class of 2007, and 31 to recent MCO graduates. Before this survey was sent out, however, much preparation had to be done to ensure that each individual's responses would be kept unanimous. The following will describe the steps which were used to create this unanimous online survey.

On January 15, 2007 a free email account was created at yahoo.com with a username of [mcosurvey@yahoo.com](mailto:mcosurvey@yahoo.com). On this same day, a message titled, "MCO student

admissions/curriculum survey” was sent from my personal email address, nikki\_z18@hotmail.com, to [mcosurvey@yahoo.com](mailto:mcosurvey@yahoo.com). This message not only contained a brief explanation of the survey’s goals, but it also contained the survey itself (see Appendix A). On January 20, 2007 another email was distributed from my personal email account to all 164 recipients email accounts. This email once again explained the goal of the survey and provided directions on how to access and properly respond to the survey (see Appendix B). Once student’s received their email explaining the study they were to log into the [mcosurvey@yahoo](mailto:mcosurvey@yahoo.com) account and reply to the message titled, “MCO student admissions/curriculum survey”. By replying to this message in the way described, respondents were able to remain anonymous. The deadline for all surveys to be returned was January 29, 2007. After the deadline arrived, all of the responses were printed out and analyzed using a combination of Microsoft Excel statistical tools and descriptive analysis.

## Results

Of the 164 surveys that were distributed, 73 (44.5%) were completed and returned. Of these 73 surveys, 2 were discarded due to failure to provide pertinent information, including age, grade at MCO, and optometry admission test scores. Of the surveys that were returned 48 were from females and 23 were from males. From an undergraduate standpoint, 33 respondents went to Ferris State University (FSU) for undergraduate studies, while 38 respondents were from a college or university other than FSU (see Table 1).

### *Curriculum Assessment*

Of the 73 respondents, only the fourth year optometry students and recent graduates were surveyed (n= 25) on which classes were the most and least useful in preparing them to practice optometry. Of the 25 respondents, 14

	Totals
Gender:	
Male	23
Female	48
Undergrad School:	
Ferris State	33
Other	38
Grade at MCO:	
1 <sup>st</sup> year	15
2 <sup>nd</sup> year	17
3 <sup>rd</sup> year	14
4 <sup>th</sup> year	14
Recent graduates	11

Class Description	Total Responses
Microbiology	14
Neuroanatomy	4
Public Health	2
Low vision/Ethics	2
Ophthalmic Optics	2
Human Anatomy	2
Developmental Vision	2
Environmental Vision	2
General Pathology	2



participants stated microbiology as being the least useful class followed by neuroanatomy with 4 votes, and public health, low vision/ethics, ophthalmic optics, human anatomy, developmental vision, environmental vision, and general pathology all with 2 votes each (see Table 2). The class which received the most votes for being the most useful class was ocular health assessment (n=14), followed by ocular disease (n=12), ocular pharmacology (n=4), geometrical optics (n=3), contact lenses (n=3), and visual fields, ocular anatomy, and practice management all with 1 vote each (see Table 3). Note some respondents wrote down more than one class for each question.

Class Description	Total Responses
Ocular Health Assessment	14
Ocular Disease	12
Ocular Pharmacology	4
Geometrical Optics	3
Contact Lenses	3
Visual Fields	1
Ocular Anatomy	1
Practice Management	1

In assessing the curriculum, students were also asked to rate how well MCO prepared them for practicing optometry by using a scale numbered 0-10, with 0 being the lowest and 10 being the highest. Of the 25 responses the average score for the fourth year class was 7.46 with a maximum score of 10 and a minimum score of 1. The average score for the recent graduates was a bit higher at 8.4 with a maximum score of 10 and a minimum score of 7. Overall, the average for both groups combined was 7.85.

Current fourth year optometry students and recent graduates of MCO were also asked to comment on any additional skills, testing procedures, or additional information they felt was not sufficiently taught while in school. While there was a large range of answers for this section the top responses were: more exposure to ancillary testing such as OCT, GDx, HRT, fundus photography, Optomap, and topography and more experience on how to analyze the results from these tests (n=8); teach more “real” world optometry including more on practice management, emphasizing more commonly seen diseases rather than covering every disease to the same extent, and better coverage of proper protocol and follow-up intervals for surgery co-management and for following patients on

Skill/Procedure	Total Responses
Ancillary Testing	8
“Real World Optometry”	8
More Patient Diversity	4
Minor Surgical Procedures	4
Low Vision	2

certain medications such as Interferon or Plaquenil (n=8). Other responses included, not enough diversity of patients in the clinic (n=4), more exposure on how to perform minor surgical procedures including foreign body removal, dilation and irrigation, sub-conjunctival injections, and intralesional injections (n=4), and more low vision experience (n=2). Exact comments in response to this question can be found in Appendix C located at the end of this paper.

<b>1<sup>st</sup> Major Reason:</b>	<b>Total Responses</b>
Instate Tuition/Cost	40
Small Class Size	14
Location	9
<b>2<sup>nd</sup> Major Reason:</b>	<b>Total Responses</b>
Class Size	26
Instate Tuition/Cost	19
Location	13

### *Admissions Assessment*

In order to assess the Michigan College of Optometry’s admission process, current students and recent graduates were asked to answer questions about why they choose MCO over other schools and what part of the admissions process heightened their interest in MCO. Respondents were also asked to answer questions about whether anything seemed to be missing from the admissions process and if anything could have been done that would have helped to make the transition to MCO an easier one. Between all respondents the major reason for attending MCO over other optometry schools was instate tuition/cost (n= 40), followed by small class size (n=14) and location (n= 9). The second major reason for choosing MCO was class size (n=26), instate tuition/cost (n=19), and location (n=13) (see Table 5).

Students were also asked to comment on what part of the admissions process most heightened their interest in MCO. Thirty-five people stated interviewing and meeting with the faculty/associate dean as the most important factor in heightening their interest followed by meeting with current MCO students (n=11) and early admissions (n=5). Seven people chose “other” as their answer in which written responses were then obtained.

In an attempt to further assess the admissions process, students were asked to respond to whether or not they felt anything was missing from the admissions process that would have made MCO stand out above other schools. Overall, 35 of the respondents either

responded with “no changes needed” or left this section blank. The most common change that was requested by students was that MCO needs a more organized and professional admissions process including a more organized tour, lunch, and informational packets about the school (n=14). Students believed that information packets should include information on financial aid, housing options, MCO’s curriculum, and externship options. Students also felt there should have been more opportunities to talk with current students during the admissions day and more contact from the school after the interview day. Students also suggested that sending free t-shirts, personalized phone calls, and personalized letters were great ways in which the school could show their interest in applicants. Other responses to this question included:

- 1 MCO was the only school I applied to (n=7)
- 2 Nicer facilities (n=6)
- 3 Emphasize the pros of attending MCO including small class size, low cost of tuition, and low student to faculty ratio (n=3)
- 4 Have an open house style “meet and greet” where interested students could meet with faculty and current students in a more relaxed atmosphere before even applying to MCO (n=1)
- 5 Begin a program that helps graduates find jobs (n=1)
- 6 Accept students with less political bias – more on qualifications and less on who you know (n=1)

Students were also asked if there was anything that could have been done that would have helped to make their transition into MCO an easier one. Overall, 52 of the respondents either responded with “no changes needed” or left this section blank. Seven other respondents reported that the transition to MCO was great and that the faculty, staff, and students were very welcoming and energetic. The most common suggestions for ways MCO could make the transition easier for students included the following:

1. Encourage undergrad students to take a heavier course load and/or make more classes pre-requisites for being accepted (n=4)
- 2 More help with housing options (n=3)
- 3 Better orientation weekend and possibly on a different weekend (n=2)

#### 4 Better Big/Little process (n=1)

##### *Class Comparison*

Of the 73 surveys that were returned 15 were from the Class of 2010, 17 from the Class of 2009, 14 from the Class of 2008, 14 from the Class of 2007, and 11 from recent MCO graduates. The average age, grade point average (GPA), optometry admissions test (OAT) score, and ACT scores for each class can be found in Table 6.

	Class of 2010	Class of 2009	Class of 2008	Class of 2007	Recent Graduates
Avg. Age (years)	22.87	24.176	24.5	25.71	27.27
Avg. GPA	3.616	3.40	3.406	3.553	3.50
Avg. OAT score	334.286	316.177	319.286	332.5	323
Avg. ACT score	27.167	24.8	25.714	26.308	25.18

Statistical analysis was performed on all of the received data and has shown that overall for all students and graduates there is a direct correlation between GPA, OAT scores, and ACT scores. My analysis has also shown that as a collective group there is a very strong direct correlation between the number of schools applied to and the number of schools accepted to ( $c=0.714469$ ) and a high direct correlation also exists between the number of schools interviewed with and the number of schools accepted to ( $c=0.977133$ ). An Anova single factor statistical analysis was also performed to compare whether or not a difference existed between the five different classes based on OAT scores ( $p=0.128$ ,  $F=1.861$ ,  $F_{crit}=2.52$ ,  $df=16$ ) and GPA ( $p=0.182$ ,  $F=1.614$ ,  $F_{crit}=2.518$ ,  $df=16$ ).

This survey also allowed me to analyze and compare classes based on OAT scores and number of schools interviewed with (see Table 7). For the class of 2010 there were 10 respondents with OAT scores greater than or equal to 330. Of these students, 6 of them only interviewed with MCO, while the remaining four interviewed at one or more schools besides MCO. For the class of 2009, there were 3 respondents with an OAT score greater than or equal to 330 and of these students all three of them only interviewed with MCO. For the class of 2008, there were 4 students with an OAT score greater than or equal to 330. Of these four only two of them interviewed only at MCO. For the class of 2007,

there were 9 respondents with an OAT score greater than or equal to 330 and 7 of these students only interviewed at MCO. Overall, of the 26 students with OAT scores greater than or equal to 330, 18 or 69.2% only interviewed with MCO.

	# of Respondents with OAT scores $\geq 330$	Only Interviewed at MCO	Interviewed at Schools other than MCO
Class of 2010	10	6	4
Class of 2009	3	3	0
Class of 2008	4	2	2
Class of 2007	9	7	2
Overall Totals	26	18	8

**Discussion**

This study allowed us to fully assess the current curriculum and admissions process at the Michigan College of Optometry based on the opinions of students and recent graduates. Based on the results from the curriculum section of this study, the least useful class at MCO was microbiology, while the most useful class was Ocular Health Assessment. This study also showed that most respondents felt that ancillary testing procedures and interpretation were not sufficiently taught while at MCO. The results from the admissions section of this study showed that the major reasons for attending MCO were in-state tuition/cost, small class size, and location, while the key component of the admissions process that heightened student interest was the interview with the faculty and Associate Dean. The most common change in the admissions process that was requested by students was that the admissions process be more organized and professional with a more organized tour, lunch, and informational packets. The findings of this study also clearly suggest that statistically there is not a difference between the Classes of 2007, 2008, 2009, and 2010 based on OAT scores and GPA results. This finding however, may be skewed due to the number of respondents who participated from each class. This study had a sample of less than half for each respective class and the respondents who did fill out the survey may have been those who were more comfortable sharing their GPA and OAT scores.

While my research has resulted in no other studies that directly assess the curriculum and

admissions at MCO, a study was performed by Dr Maier in which the curriculum was compared between sixteen schools of optometry in the United States and Puerto Rico. This study ranked the schools based on total hours of curriculum dedicated to clinical experience and number of hours of classroom studies. MCO ranked sixth out of sixteen in terms of total clinic hours in the curriculum and sixteenth out of sixteen for total didactic hours.<sup>1</sup> Dr Maier's study also ranked MCO as having some of the lowest curriculum hours devoted to practice management, optical science, and pre-clinical instruction, however in my study very few students reported feeling not prepared in these areas.<sup>1</sup>

In respect to the admission process at MCO, a study was performed at the University of Waterloo School of Optometry (UWSO) in which it was determined that the ideal optometry admissions interview should gather information about the candidates, verify application information, provide information to candidates, and select candidates by appraising their "people skills", "professional skills", and "attitude orientation".<sup>2</sup> While most of these aspects of MCO's admissions process were not assessed in this study, students did report that MCO could do a better job at providing prospective students with more information about the school, including curriculum, financial aid, housing in Big Rapids, and available externship sites. The above mentioned study through UWSO also discussed how admission committees for optometry need to implement an interview process that eliminates bias, while placing more emphasis on the evaluation of humanistic skills rather than cognitive skills.<sup>2,3,4</sup> Of all of the respondents, only one student felt that admissions at MCO was based more on who you know, rather than on how qualified you are.

Due to the nature of this survey, some of the results especially pertaining to the curriculum section are subject to bias. If a respondent really liked a particular professor or really liked a particular subject, it is likely that the student rated this class as the most useful class at MCO, while a respondent may have marked a class as being the least useful due to personal conflicts with either the professor or subject matter. The way in which the survey was distributed also could have an effect on the results of this study.

While the method of survey distribution kept everyone's identities anonymous, it did not restrict how many times a single student could respond, thus one student could have responded multiple times causing the data to be skewed or falsified. As with any survey, the results are also dependent on the participant's responses, thus making it possible that quantitative values such as GPA, ACT scores, and OAT scores are falsified.

### **Conclusion**

The Michigan College of Optometry should take into account student opinions and ideas pertaining to the current curriculum and admissions process in order to not only provide the best education possible, but also to attract the best candidates possible. Students are an invaluable asset to helping critique and exemplify current curriculum and admissions, thus their thoughts should be considered before actions are taken.

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APPENDIX A

ADMISSIONS AND CURRICULUM SURVEY

MCO ADMISSIONS / CURRICULM  
RESEARCH PROJECT

The goal of this research project is to obtain information about the Michigan College of Optometry's admission process from the view point of the students. This project will cross analyze many different criteria including number of schools applied to, grade point average, admission test scores, and reasons for choosing MCO over other optometry schools. This survey will also look at the current curriculum and gather opinions on the level of preparedness it has provided for fourth year interns and recent MCO graduates. In order for this project to be a success, I am asking each student/graduate to please fill out the survey below and return it to [nikki\\_z18@hotmail.com](mailto:nikki_z18@hotmail.com). The easiest way to do this is to simply reply to this email.

Thank you for your time and cooperation.

Sincerely,  
Nicolette L. Zawilinski  
(Fourth Year MCO student)

**MCO ADMISSIONS & CURRICULM SURVEY**

**Section A: General Info: Type the response that best describes you:**

Gender:

Undergraduate College (FSU or other):

State of Permanent Residency:

Grade at MCO: (ex 1,2,3,4, graduate)

Current Age (yrs):

Final undergraduate GPA:

OAT score (200-400):

ACT score (10-30):

**Section B: Admissions Assessment: Please type the letter of your response:**

How many optometry schools besides MCO did you apply to? a. 0 b. 1 c. 2 d.  $\geq 3$

How many optometry schools besides MCO did you interview with? a. 0 b. 1 c. 2 d.  $\geq 3$

How many optometry schools besides MCO were you accepted to? a. 0 b. 1 c. 2 d.  $\geq 3$

How many times did you take the OAT test before being accepted? a. 1 b. 2 c. 3 d.  $\geq 4$

What was the major reason you chose to attend MCO over other optometry schools?

- a. Small class size / High faculty to student ratio
- b. Friendly and knowledgeable faculty and staff
- c. Only school I applied/was accepted to
- d. In-State tuition/Cost
- e. MCO's clinic and facilities
- f. Location
- g. Relative/Friend went to MCO
- h. Other (explain):

What was the second major reason you chose MCO over other optometry schools?

- a. Small class size / High faculty to student ratio
- b. Friendly and knowledgeable faculty and staff
- c. Only school I applied/was accepted to
- d. In-State tuition/Cost
- e. MCO's clinic and facilities
- f. Location
- g. Relative/Friend went to MCO
- h. Other (explain):

What one part of the admissions process heightened your interest in MCO the MOST?

- a. Online application process
- b. Early admissions opportunity
- c. Talking/meeting with current MCO students
- d. Talking/meeting with current MCO faculty
- e. Interview with Associate Dean
- f. Interview with Faculty
- g. Tour of facilities and clinic
- h. Other (explain)

Was there anything that you felt was missing from the admissions process that would have helped to make MCO stand out above other schools you interviewed with? Please explain.

Was there anything that could have been done that would have helped to make your transition into MCO an easier one? Please explain.

**Section C: Curriculum Assessment (FOR 4th YEARS & GRADUATES ONLY)**

Of the following classes which do you feel was the LEAST useful in preparing you for practicing in the "real-world"?

Contact Lenses I & II Developmental aspects of Vision Ethics and Practice Management General Pathology General Pharmacology Human Anatomy & Physiology Low Vision & Geriatrics Microbiology for Optometry Neuroanatomy Neuro-optometry Ocular Anatomy and Physiology Ocular Health Assessment	Ophthalmic Optics & Environmental Vision Optics I & II Ocular Pharmacology Ocular Disease I & II Pediatrics Perceptual Vision Practice of Optometry Public Health aspects of Optometry Strabismus & Vision therapy Visual Fields Visual Information Processing & Perception
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Of the following classes which do you feel was the MOST useful in preparing you for practicing in the "real-world"?

Contact Lenses I & II Developmental aspects of Vision Ethics and Practice Management General Pathology General Pharmacology Human Anatomy & Physiology Low Vision & Geriatrics Microbiology for Optometry Neuroanatomy Neuro-optometry Ocular Anatomy and Physiology Ocular Health Assessment	Ophthalmic Optics & Environmental Vision Optics I & II Ocular Pharmacology Ocular Disease I & II Pediatrics Perceptual Vision Practice of Optometry Public Health aspects of Optometry Strabismus & Vision therapy Visual Fields Visual Information Processing & Perception
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Are there any skills, testing procedures, or additional information that you feel was not sufficiently taught while in school, in which you learned while on rotations, during residency, or during work?

Overall, how well do you feel that your education from the Michigan College of Optometry has prepared you for "real-world" optometry?

Use a 0-10 scale: 0-didn't prepare you at all  
 10-prepared you extremely well

Additional Comments:

APPENDIX B

STUDENT LETTER

Hi,

For everyone who doesn't know me, my name is Nicolette Zawilinski and I a fourth year student at MCO. As part of our four year we are required to perform a research project. For my project I have decided to do a student survey that is intended to gather information about MCO's admissions process and curriculum from the view point of the students. This project will cross analyze many different criteria including number of schools applied to, grade point average, admission test scores, and reasons for choosing MCO over other optometry schools. This survey will also look at the current curriculum and gather opinions on the level of preparedness it has provided for fourth year interns and recent MCO graduates.

In order for this project to be a success, I am asking each student/graduate to please take a few minutes and complete my survey. In order to keep everybody's responses unanimous, I have created a yahoo email account through which the survey should be completed.

How to obtain the survey:

- 1.) Log into [www.yahoo.com](http://www.yahoo.com) with email address: [mcosurvey@yahoo.com](mailto:mcosurvey@yahoo.com)  
Password: optometry
- 2.) Reply to message titled, "MCO student admissions/curriculum survey"

I am asking that everyone respond no later than January 29, 2007.

Thank you for your time and cooperation.

Sincerely,  
Nicolette Zawilinski

APPENDIX C

WRITTEN RESPONSES TO SURVEY QUESTIONS

*Note: All responses in this section are direct quotes from participants in the study*

**Question #1:** *Was there anything that you felt was missing from the admissions process that would have helped to make MCO stand out above other schools interviewed with. Please explain*

Although the MCO building has proven to be sufficient for my education after all, a better facility would have helped solidify my decision to attend MCO sooner than I did. The appearance of the building prompted me to investigate much more about the specifics of the college before I made my decision.

Other schools provided a better tour, took me out to lunch and assigned me to a group of current students to talk to. The process was more professional.

Other schools gave tours of the entire campus, gave a lunch, and had presentations such as on financial aid

It would have been nice to be able to sit down with current students on the interview day and ask them questions, get a tour, and maybe have lunch. (BTW, I think these changes have been implemented already.)

No (38 responses)

Really emphasizing the small class size. Talking about the standards that each rotation site has to meet.

Stress the fact that tuition and cost of living is extremely low compared to other schools, especially for in-state students. Stress the fact that there is a very high doctor to student ratio.

Accept people with less political bias (more qualifications, less on who you know)

I didn't apply anywhere else, but I think they are doing a much better job this year with the admissions/tours. Much more welcoming.

Better tour – I know these are in effect now.

ICO offered lunch with students, which was nice. Here, I just got a 5 minute tour by a student who was on a break.

It would have been nice to have lunch with a few students and faculty members just to get a more personal feel for what the school was like and what was to be expected and what was expected of me.

I really didn't realize how great the people were and how qualified the faculty was.



Did not interview anywhere else (7 responses)

Nice lunch, additional info about the school in a folder and t-shirt (little things to show that they really want the students to come)

I think an open-house style meet and great for anyone interested could be held once a year. That way someone who plans to apply even a couple years down the road has the opportunity to attend in a more casual setting and obtain information on the program and meet both faculty and students for a more personal experience.

Other schools seemed more interested in me when I began to research their curriculum, etc. For instance NEWENCO called me several times to ask if I had any questions about the admissions process

When I applied, the other schools sat down and talked to you individually about financial aid, took you to lunch, gave you free stuff like t-shirts. I understand we are doing some of this now, so it's probably irrelevant, but at the time it made the other schools seem like they invested more in the admissions process.

When I interviewed here I asked about rotation sites and they seemed taken aback, they had to dig up a list for me. Other schools had that right in their packet. Of course, other schools have more sites to brag about. The information sent by other schools also included course descriptions for all four years and a better approximation of cost. Everything sent by other schools was more professional looking as well, also, when I interviewed at MCO they had to grab a random person to give me a tour. I think they're better about it now with an organized tour and lunch and whatnot, which is what other schools do. They stood out because this interview was the most disorganized, but hopefully they're breaking even now with the changes they made this year. When I was accepted to IU they sent me a t-shirt and a congratulations card, which was really nice, even though I opted not to go there. I think they even called me to tell me about a scholarship, or the head admissions lady at least sent me a personalized email which was something unique.

It would have been nice to have a nice lunch with current students and been given an opportunity to talk to them as well as had a more professional and organized tour of the facility. When I came for my interview they just picked some random student in the hall to give me a 15 minute tour, it didn't seem very professional.

Nicer facility (2 responses)

Nicer facilities, more organized/professional interview day including sit down lunch with current students to get a more personal feel for the school. Also it would have been nice to hear from the school more than once over the summer after being accepted.

MCO could offer some type of program that helps graduates find jobs and eventually build a good track record at doing it...that or more BBQ pizza from the holiday inn.

There was no early admission when I applied. That is a great improvement. Also a better building would have made a better impression.

I will say that the essay was odd and seemed unnecessary. Obviously a nicer building. But more information about 4<sup>th</sup> year externships would be helpful

A student panel available for questions, although not very feasible, may be more inviting.

**Question #2:** *Was there anything that could have been done that would have helped to make your transition into MCO an easier one? Please explain.*

A schedule of events that were offered/required to attend at the start of the semester.  
More help with housing

Perhaps make orientation weekend, a little earlier in august b/c it was so overwhelming moving, getting situated and then having orientation all weekend before school starts.

I always go the vibe in pre-opt that getting into MCO was the biggest hurdle to becoming an optometrist... I really had no idea how difficult it is to take 20credits a semester with national board's on the horizon.

No (51 responses)

NPK sent out a lot of letters to prepare us, Colleen helped me with housing and work. The transition was really smooth for me.

I feel like some people have trouble b/c of the change in their requirements for incoming students when it comes to classes...I think more classes should be required because I know that I was very glad that I had had some of the Biochemistry material before, that some people had not had

They do a very good job with helping students transition. I think that they can do this because of the ratio of students to faculty

All of the activities to welcome us to MCO and help us get to know our classmates were outstanding.

I think the hardest thing was that 14 of the 36 students all knew each other really well all coming from FSU. Also having similar classes as the FSU students had previously taken made the transition harder for students that did not go here. I think that it will be hard to equalize all of the students because of the large number of FSU students. One thing would be to have different profs then they have had before.

Ease the students into the new curriculum. Also, don't overwhelm first years the first

week with coursework! There is a lot to adjust to and absorb for ALL first years, push assignments, tests, and quizzes out a week or two, it will make a huge difference.

I think it would have been good if the Big/Little process was better.  
Living in a better location

Maybe a campus tour

I already knew what to expect from the pre-opt club at FSU  
The faculty and students made it very easy to adapt to MCO

More thorough orientation maybe? I was lucky because I already knew people who attended MCO

Not having Shansky as a prof

I thought everything was good...the orientation was nice and the staff was very energetic  
I actually felt at home and very comfortable at MCO, so I wouldn't change much

I would have taken more credit hours per semester in undergrad to help prepare for the heavy workload of optometry school.

The only difficulty was the application process. As a Ferris student I had to apply through the ferris admissions office which was a huge pain.

More help with housing. I know that we get some random names and things that are brought to the school's attention, but not being there, it's hard to find out about any other opportunities. Now the paper puts out that rentals section. It seems like maybe we should make note of the retinal companies or something in there and pass that out. Maybe get some reviews or names of places/landlords where people have lived to help people make a decision.

It would be helpful if the apartments and realtors in the area were all online, but colleen was good about trying to help. As for the transition to MCO itself, it would be helpful if they would be a little quicker about getting information to us. It wasn't too bad first year, but there's always room for improvement, sure we get memos each semester about getting our racquet refund, but do I know anything about this senior project we're supposed to do? nope

Decrease tuition, have lots of sample equipment for us to use in lab and clinic, so we don't have to buy any until 2<sup>nd</sup> or 3<sup>rd</sup> year when we've found our favorites, and less BBQ pizza from the holiday Inn.

I feel that MCO has a great program involving the OSG and orientation weekend. I was a student that did not attend FSU and I did not know anyone prior to orientation, so it was a great icebreaker.

**Question #3:** *Are there any skills, testing procedures, or additional information that you feel was not sufficiently taught while in school, in which you learned while on rotations, during residency, or during work?*

I felt that disease was the most important class but it was not taught to be effective clinically but rather it was taught to memorize as much as you could and then dispose of it.

Not exposed to enough diversity while at MCO, most of my clinical confidence and clinical skills were gained while on my rotations. It would have also been nice to have more experience using OCT, fundus camera, and other ancillary testing, rather than having to use them for the first time while on rotations. Lastly, I think MCO should teach more real-world optometry.

How to use GDX, Optomap, topographer, and specialty equipment. Fitting CRT CLs.

Foreign Body removals, Ancillary testing and interpretation (ie GDX, OCT)

Protocol for testing needed and follow-up intervals when patients are on certain medications (ie Plaquenil, Interferon, etc)

Peds exams and LV evals.

I think students weren't exposed enough to equipment like OCT, GDX, Fundus photography...things like that. How to use them, and how to analyze the data. I still don't know how to use or analyze the OCT. I think certain docs (walling) should have shared those instruments more with the students.

- Low vision (not enough clinical experience) and ocular drug names
- Still need more practice management/billing and coding
- Exam efficiency, thinking like a doctor
- Greater emphasis on brand names with pharmaceuticals

There should be a greater emphasis on glaucoma, ARMD, and cataracts instead of jamming everything equally down our throats. These things are much more common in real world than VKH or Tay-Sach's.

Organizational optometry, practice management/finances

MCO needs to get more patients into the clinic be it in Big Rapids or at alternative off-site locations. We need to be seeing more during our 2<sup>nd</sup> and 3<sup>rd</sup> years so that we are even better prepared to see patients on our rotations.

I feel prepared, but not extremely. I think feeling extremely prepared comes with years of working out in the real world.

I have learned that the “real world” is NOTHING like MCO world

There’s always room for improvement, but overall it did a very good job of teaching optometry.

Choosing MCO was the best decision I’ve ever made

I think practice management should be emphasized more from the start of optometry school. Most of us already know how to study and learn about the eye, but we don’t have any experience in business. It is easy to blow off the practice management classes because they are not emphasized and we feel more stressed about memorizing drugs, etc. It is hard for students to feel these classes are relevant to them while they are still in school, but I think more emphasis in this area can help students to become more comfortable with the subject and realize how important it is. Things that would have helped me: guest lecturers from various modes of practice, explaining what they did after graduation and why; “field-trips”/mandatory visitations to different practice modes with specific questions that should be answered while you are visiting (may be very helpful to have a list of docs around the state who would have agreed to participate.)

I feel MCO is weak in the area of clinic. Other schools have many more opportunities to see patients and see more interesting cases during their 2<sup>nd</sup> & 3<sup>rd</sup> years. I don’t think MCO has a diverse enough population to provide valuable clinical experience. All of our experience had to be gained during the rotations.

Refractive surgery co-management, D&I procedure

No

I think that 3<sup>rd</sup> years should have more experience with the OCT, GDx, and retinal camera. These are valuable tools in the “real world” that can help a fourth year transition into their rotations a little easier.

Equipment maintenance, sounds crazy, but when you’re the only doctor in an office, and something breaks, you have to know how to fix it. More on billing and coding, although what we had was very helpful.

How to maintain credentialing, malpractice insurance, etc.

More of punctal plugs and being fast in it. Seeing more ocular disease. I was fortunate and did a VA rotation and another site with ocular disease, but some of my classmates really struggle in the real world today. A book doesn’t always do justice. Some signs/symptoms are not “classic” for a specific disease. Some classmates had 2 or 3 total pediatrics patient their whole time at MCO and are terrified to see a child. Plus it has made them non-believer’s in VT.

Sub-conj injections/injection of the lid lesions

Though we had access to the OCT (not sure if we had the GDX or HRT) and specialty imaging tests, we weren't really allowed to work with them. Learning how to interpret them and their clinical usage would have also been helpful.

How to care for a prosthetic lens, how to evaluate the peripheral retina with a 3-mirror, how to use an OCT (GDX or HRT), how to use a B-scan, how to do minor procedures (removal of FB, removal of lesions), how to do vision therapy

4mirror gonio, ret bars, RNFL analysis, a good glaucoma risk assessment model.

Besides real world optometry preparation. They need to focus more on national board preparation. MCO statistics are horrible.

Upon graduation I felt extremely competent to practice primary care optometry. I had a great knowledge base and was well rounded.

I think that overall, MCO is a great institution to learn from.

This is the only school I ever wanted to go to and I didn't have my bachelors degree before I applied, so I would have had to wait another semester before applying to any of the other schools. I could have been overlooked, due to my GPA and my average OAT scores, but my interview went well and I was accepted. I love being an optometrist and I am constantly told "that was the most thorough eye exam I've ever had: Not everyone will be prepared 100% when they get out of school. There are always going to be questions, but tools (like webct) and colleagues that ferris offers after graduation are always available.