



Icahn
School of
Medicine at
Mount
Sinai

APPLIED PRACTICE EXPERIENCE POSTSCRIPT REPORT

Instructions: Complete your Postscript Report using the outline below and submit your report to:

- 1) Preceptor: Attach the completed Postscript Report to your Preceptor Evaluation Form to be reviewed by your preceptor.
- 2) Specialty-Track Advisor
- 3) Office of Public Health Practice (Christine Cortalano, Program Manager): CAM Building, 17 E. 102 St., West Tower – 5th Floor Rm D5-141

Formatting: Please include the bold section titles in your report. The discussion points below are to help guide you in completing each section. Discussion points and questions should be addressed using complete sentences/paragraphs, with the exception of the learning objectives and competencies. The report should be 4-7 pages in length, not including supplemental documents. Please number each page of your report.

- **Title Page** (Title of APE, Site, Student Name, Preceptor Name, Date)
- **Description of the Practice Site**
 - Mission/goal of the site
 - Type of institution
 - Preceptor role within organization and project
- **Nature & Scope of the Project/Experience**
 - Goal of the Applied Practice Experience
 - Description of project
 - Description of your responsibilities and activities
 - Background information and relevance to Public Health
 - Did the project change from what you described in you proposal?
- **Learning Objectives**
 - State the proposed learning objectives.
 - Did the learning objectives change? If yes, please list any new learning objectives.
 - Specify how the learning objectives were met.
- **Competencies**
 - State the competencies achieved through completion of your APE. Competencies are available in the Student Handbook and on Blackboard. Identify each competency as core or [track]-specific.
 - Did the competencies change from your proposed competencies?
 - Provide a self-assessment on how well you achieved each competency.

- **Service Objectives**
 - Did this project provide a direct or indirect service to the community? If yes, please describe the service and the community that was served.

- **Results**
 - Discuss any results/findings associated with your Applied Practice Experience, if applicable.
 - Description of deliverables, if applicable
 - Did you produce any final products for the organization? If so, please provide a copy of your deliverable(s).

- **Duration of Practicum**
 - Provide actual start and end dates, number of days you worked each week, and the number of hours each day. Please attach any supporting documents (i.e. time log).

- **Follow-up**
 - Do you anticipate being involved now that the formal Applied Practice Experience has ended?
 - If yes, please explain.
 - Do you anticipate using this experience as the foundation for your Culminating Experience?
 - If yes, please explain.

- **Personal Reflection**
 - For example, you may include any challenges you faced, and what you gained personally and professionally from the experience.
 - Is there anything about this experience that you would have changed, if you were to repeat it? If yes, please explain.
 - Please rate how satisfied you were with your experience. On a scale of 1 to 5 where 1 = Unsatisfied and 5 = Very Satisfied
 - Would you recommend this experience and its site to other students? Why or why not?

- **References**, if applicable