



**University of Mount Saint Vincent Physician Assistant Studies Program
Master's in Physician Assistant (MPA)**

PRECEPTOR MANUAL

The ARC-PA has granted Accreditation-Provisional status to the University of Mount Saint Vincent Master of Science Physician Assistant Program sponsored by University of Mount Saint Vincent.

Accreditation-Provisional is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA Standards or when a program holding Accreditation-Provisional status appears to demonstrate continued progress in complying with the Standards as it prepares for the graduation of the first class (cohort) of students.

Accreditation-Provisional does not ensure any subsequent accreditation status. It is limited to no more than five years from matriculation of the first class.

We would like to take this opportunity to express our sincere gratitude for your hard work and dedication to the University of Mount Saint Vincent Physician Assistant Program and its students.

This handbook has been constructed as an aid for you in the coming year(s). In the following pages you will find policies (ranging from dress code to attendance), contact list, and sample forms required to evaluate the students during their clerkship.

Please keep in mind that the students coming to your institution are just that, students. They will look to you for guidance and knowledge. At no time should they be substituted for regular staff; that is, they must be supervised at all times.

Again, we thank you for your cooperation and look forward to a long and productive working relationship. We welcome your comments, suggestions, and input regarding the education of our students. Please do not hesitate to contact us.

Sincerely,

University of Mount Saint Vincent Physician Assistant Program

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MISSION STATEMENT

I. University of Mount Saint Vincent Physician Assistant Program-Mission Statement

The Mission of the University of Mount Saint Vincent's Master of Physician Assistant Program is to prepare and mentor students to deliver high-quality primary and specialty healthcare that is affordable, compassionate, and accessible in collaboration with physicians and other members of the interprofessional health care team. The program accomplishes this mission by building upon and prioritizing the *Graduate Core Competencies* of the physician assistant profession. The curriculum design places emphasis on preparing students to practice within diverse and culturally sensitive communities while also developing the critical thinking skills vital in today's expanding healthcare environment.

II. University of Mount Saint Vincent Physician Assistant Program-Vision Statement

The University of Mount Saint Vincent Master of Physician Assistant Program strives to educate those individuals who aspire to achieving a higher level of medical knowledge so as to return to their communities and deliver quality medical care to all individuals across a culturally, socioeconomic and diverse patient population. The PA program will offer guidance to all student's so as to fully develop the professional maturity necessary to achieve the highest levels of excellence and leadership in their professions, while becoming leaders within their communities. The University of Mount Saint Vincent-PA Program Faculty through mentorship, scholarship, teaching, enthusiasm, and creative pursuits, will foster a vibrant and exciting educational environment where students will develop the foundational skills necessary to excel in leading meaningful and productive professional careers.

The faculty, administrators, and staff are dedicated in pursuing innovation in pedagogy within academic and clinical programs. The faculty, administrators and staff will always operate with integrity, following through on our commitments to students, faculty and staff. All faculty and staff are fully committed to holding ourselves accountable for our decisions and actions. We embody an ethos of respect for, and celebration of, our diversity, creating an inclusive and welcoming environment where every person is encouraged to contribute to the betterment of life freely and respectfully at the University of Mount Saint Vincent

III. University of Mount Saint Vincent-Mission Statement

Founded by the Sisters of Charity of New York, the University of Mount Saint Vincent is an academically excellent, authentically inclusive, independent liberal arts University. Committed to the Vincentian/Setonian tradition and to ecumenism, the University combines a strong undergraduate core curriculum with a full array of majors in the liberal arts and, within the tradition of liberal education, selected professional fields of study.

The University also provides high quality opportunities for professional advancement, accomplishment, and service through graduate and certificate programs.

At Mount Saint Vincent, a student's education extends beyond knowledge, skills, and preparation for work. We seek the development of the whole person. In the spirit of Vincent de Paul and Elizabeth Ann Seton, we foster an understanding of our common humanity, a commitment to human dignity, and a full appreciation of our obligations to each other.

IV. Program Goals and Associated Learning Outcomes

The University of Mount Saint Vincent Physician Assistant Program will create an academic environment that will attract faculty, staff and students who are dedicated to the Program's mission to provide quality and culturally sensitive medical care.

1. Prepare and develop within each student the core basic medical knowledge along with the clinical and critical thinking skills that will allow the graduates to function at an optimal level within the interprofessional healthcare delivery team as a competent and respected primary care provider.
 - **LO #1:** Demonstrate knowledge within the basic sciences
 - **LO #4:** Perform a comprehensive history and physical examination
 - **LO 9:** Articulate the rationale including the risks and benefits of specific diagnostic tests and procedures to assess core diseases encountered in primary care community
 - **LO 10:** Safely gather specimens, perform routine diagnostic tests and procedures to assess core
 - **LO 11:** Integrate the knowledge of a patient's presentation with clinical and laboratory findings, pharmacology and clinical medicine to diagnosis and treat patients in a cost-effective manner
 - **PA LO #15:** Enter the workforce with the skills and knowledge required to obtain and maintain licensure in New York State as a practicing physician assistant
 - **PA LO 16:** Demonstrate the ability and skills to provide primary care services across the life span.
2. Develop and nurture within each student the necessary cognitive understanding and technical skills that will allow the student to provide competent and quality healthcare to a culturally diverse and medically underserved population across the life span
 - **PA LO 2:** Perform a comprehensive culturally sensitive patient history
 - **PA LO 3:** Be aware and alert for the culturally diverse and relevant patient concerns when performing a comprehensive physical examination
 - **PA LO 5:** Enhance an integrate the communication skills that allows the student to communicate effectively and sensitively with a diverse range of patients and their families
3. Cultivate collaborative patient care through integrated interprofessional training experiences.
 - **PA LO 6:** Effectively communicate with members of interprofessional health care teams.
4. Develop students that will possess enthusiasm, focused determination and drive that will lead them to becoming self-directed life-long learners who will utilize their critical thinking skills to advance their medical knowledge growing their strong evaluative skills.
 - **PA LO 7:** Demonstrate advanced critical thinking skills to evaluate sources of healthcare information
 - **PA LO 13:** Apply knowledge of study designs and statistical methods to the appraisal of clinical studies
5. Provide a robust and diverse didactic/clinical curriculum with an emphasis on problem-based learning that will enhance the student's academic knowledge preparing them to excel within a clinical environment by developing the critical thinking skills needed to care for a culturally diverse patient population.
 - **PA LO 1:** Demonstrate knowledge within the basic sciences
 - **PA LO 4:** Perform a comprehensive history and physical examination
 - **PA LO 9:** Articulate the rationale including the risks and benefits of specific diagnostic tests and procedures to assess core diseases encountered in primary care community

- **PA LO 16:** Demonstrate the ability and skills to provide primary care services across the life span
6. Recruit diverse and highly qualified applicants who can successfully complete the rigorous Master of Physician Assistant (MPA)
 - *This is covered in detail within the admissions criteria for the physician assistant program*
 7. Students who actively participate in community service, and professional leadership opportunities that will enhance their future progression within their private communities and the physician assistant profession
 - **PA LO 8:** Students who actively participate in community service, and professional leadership opportunities that will enhance their future progression within their private communities and the physician assistant profession
 - **PA LO 14:** Participate as leaders within the physician assistant profession at the local, regional, state and national levels.
 8. Provide academic and clinical experiences that will enhance students comfort and competency when caring for special populations
 - **PA LO 12:** Be aware and develop a cultural sensitivity, competency, understanding and compassion in treating special needs patients, their families and caregivers

PROGRAM CONTACT INFORMATION

V. **Program Faculty and Administration**

The University of Mount Saint Vincent Physician Assistant Studies Program is administered by the faculty and staff listed below. Communication between students and faculty is essential to professional development and intellectual growth. Whenever a problem arises, you should contact the program office as soon as possible. Students must immediately inform the program of any change in address and/or telephone number in order to maintain proper channels of communication.

<p>Chair/Program Director Anthony J. Garofalo DPM, FABPM, PA-C Associate Professor The University of Mount Saint Vincent Riverdale Campus 6301 Riverdale Avenue Riverdale, NY 10471 Office: (718) 405-3730 Fax: (718) 405-3764 Anthony.garofalo@mountsaintvincent.edu</p>	<p>Medical Director David Lichtenstein MD Associate Professor The University of Mount Saint Vincent Riverdale Campus 6301 Riverdale Avenue Riverdale, NY 10471 (718) 718-405-3739 David.lichtenstein@mountsaintvincent.edu</p>
<p>Director of Medical Education Anthony D’Antoni Assistant Professor The University of Mount Saint Vincent Riverdale Campus 6301 Riverdale Avenue Riverdale, NY 10471 (718) 405-3739 Email: Anthony.dantoni@mountsaintvincent.edu</p>	<p>Associate Program Director/Director of Clinical Education Gail Lavin-Murphy MPAS, PA-C Assistant Professor The University of Mount Saint Vincent Riverdale Campus 6301 Riverdale Avenue Riverdale, NY 10471 (718) 405-3717 Email: gail.lavinmurphy@mountsaintvincent.edu</p>
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PRECEPTOR SUMMARY

University of Mount Saint Vincent
Physician Assistant Program

Preceptor Summary

VI. What is expected of the preceptor?

- a. We encourage preceptors (or clerkship site staff) to provide students with an orientation at the beginning of each clerkship. This will allow students to get better acclimated to the setting allowing for improved daily activities for both the preceptor and student.
- b. Early on in the clerkship, discuss with students what is expected of them. Topics to discuss include hours, general attendance, call schedules, overnight/weekend schedules, procedure requirements, patient interaction requirements, participation in presentations, participation during rounds and conference requirements.
- c. Students are not employees of the hospital and, therefore, work entirely under the preceptor's supervision. Preceptors are required to evaluate all patients seen by students.
- d. Although the supervising preceptor may not be with a student during every shift, it is important to clearly appoint students to another physician, PA, or NP.
- e. Preceptors are encouraged to provide continuous feedback throughout rotation regarding student's abilities and areas of concern, reflecting on student's knowledge base and critical thinking skills.
- f. Assist students with completing required clinical procedures.
- g. To sign off on student patient logs and properly performed clinical procedures.
- h. Evaluate students halfway through the clerkship utilizing the "mid-clerkship evaluation". This evaluation is designed to promote communication between preceptor and student. Preceptors are encouraged to discuss student strengths and weaknesses as to encourage students as well as provide students with an opportunity to improve upon weaknesses. Students are permitted to fax this evaluation back to the program.
- i. To provide an evaluation at the end of the rotation, reflecting on student knowledge and skills as well as their improvement throughout the rotation, and assess student in comparison to other students at their same level. This is a graded evaluation.
- j. To aid student in gaining as much experience as possible.

VII. What is expected from the PA-S?

- a. Students are required to perform activities under the supervision of the preceptor, to act in a professional manner at all times, and to be aware of their strengths, weaknesses and limitations.
- b. If preceptor deems necessary, students may observe patient encounters. However students should be evaluating patients by the end of the first week. We encourage preceptors to allow students to evaluate patients followed by a discussion of the case including assessment and plan. Preceptors must evaluate all patients seen by students.
- c. Students are expected to participate in rounds, develop and implement patient management plans, record notes, as well as present cases to their preceptors.
- d. Performing and/or interpreting common lab, radiological, cardiographs, or other procedures.
 - **Students have been trained to perform** history and physical exams, venipuncture, IV cannulation, arterial blood gases, oxygen administration, injections, foley catheterization, nasogastric catheter insertion, 12 lead EKGs, incision and drainage, suturing, splinting, and casting, surgical scrubbing and sterile glove/gown donning.
- e. Instructing and counseling patients regarding compliance with therapeutic regimens, emotional problems, and health maintenance.
- f. Students are expected to attend rounds, lectures, and conferences available to them.
- g. Students are expected to attend clerkships as scheduled.
- h. Students are expected to demonstrate emotional resilience and stability, adaptability, flexibility and tolerance of ambiguity and anxiety.

VIII. What is expected of the PA program during the clinical year?

- a. Address preceptor concerns, questions, and comments.
- b. Address clinical year student concerns, questions, and comments.
- c. Provide preceptor with a set of student learning objectives.
- d. Provide preceptors with student feedback regarding clinical sites.
- e. Perform yearly evaluations of clinical sites.
- f. Formulate clinical year schedules.
- g. Provide the preceptor with a student fact sheet.
- h. Provide preceptors with documentation of student health clearance.
9. Provide the preceptor with a copy of insurance policies

CHARACTERISTICS OF EFFECTIVE CLINICAL TEACHERS

A review of selected literature has revealed that the following are characteristics of effective clinical teachers:

I. COMMUNICATION

- a. Possesses and demonstrates broad knowledge
- b. Explains the basis for actions and decisions
- c. Answers learner questions clearly and precisely
- d. Open to conflicting ideas and opinions
- e. Connects to information to broader concepts
- f. Communicates clear goals and expectation
- g. Captures learner's attention
- h. Makes learning fun

II. CAREFUL ANALYSIS OF THE LEARNER

- a. Accurately assesses learner's knowledge attitudes and skills
- b. Uses direct observation of the learner
- c. Provides effective feedback
- d. Performs fair and thoughtful evaluations

III. SKILL IN PRACTICE AND TEACHING

- a. Provides effective role modeling
- b. Demonstrates skillful interactions with patients
- c. Presents information with organization and clarity
- d. Generates interest in the subject matter
- e. Organizes and controls the learning experience
- f. Balance clinical teaching responsibilities
- g. Gives appropriate responsibility to the learner

IV. MOTIVATES THE LEARNER

- a. Emphasizes problem solving
- b. Translates specific cases into general principles
- c. Promotes active involvement of the learner
- d. Demonstrates enjoyment and enthusiasm for patient care and teaching
- e. Develops a supportive relationship with the learner.

INTEGRATING THE LEARNER IN THE BUSY PRACTICE

Your office or clinic is a busy place and becoming even busier. At the same time, your office is an increasingly valuable site for training health professionals. How can you integrate these learners into your practice while maintaining your sanity and your bottom line? The following suggestions have been supplied by experienced community-based preceptors. Read more suggestions at the preceptor development web site: <http://www.ncahec.net/hcprofessionals/preceptor.htm>

I. ORIENT THE LEARNER

- a. Solicit staff help in orienting the learner to your practice.
- b. Develop a checklist of orientation topics; if you teach a lot, write out policies and expectations.
- c. Go over expectations with learner at lunch on the first day or night before the rotation starts.

II. SEEK PATIENT ACCEPTANCE OF THE LEARNER

- a. Tell patients that you teach: put a sign in your waiting room or an article in the newspaper.
- b. Ask for patient permission to be seen by learner, emphasizing patients' role as teacher.

III. SCHEDULE FOR THE LEARNER

- a. Assign independent projects such as reading, a literature search, a chart audit, or development of patient education materials.

IV. KEEP THINGS MOVING

- a. Have learner see every third patient: learner sees first patient as you see second: learner presents to you and see patient together; learner writes chart while you see third patient.
- b. For learners that take a long time with patients, set time limits for each encounter.

V. FIND TIME TO TEACH

- a. Focus on brief teaching points during the day.
- b. Keep notes and address larger teaching topics at set-aside times (end of the day or start of the next day) or "down" times (as you drive to the hospital for rounds, on call, or at lunch).

VI. ADVANTAGES TO PRECEPTING STUDENTS

- a. To educate the future medical providers of our community.
- b. To assess future employers for possible hire into your institution or practice.

SETTING STUDENT EXPECTATIONS

I. BEFORE THE ROTATION

- a. Know the school's expectations. Review course objectives and evaluation criteria as listed on the evaluation form.
- b. Identify your own expectations as a preceptor.
- c. Solicit staff help in orienting learner to practice and community.
- d. Block out time on the first day of the rotation to discuss expectations with learner.

II. AS THE LEARNER ARRIVES

- a. Orient the learner to the practice, the community, and the rotation.
- b. Assess learner's level and background.
- c. Meet with learner to discuss the schools, the learner's, and your expectations of rotation.
- d. Let clinical staff know learner's clinical objectives of rotation, so they can help.

III. DURING THE ROTATION

- a. Refer to expectations and rotation objectives as you give learner feedback on cases presented during daily debriefing, and at mid-rotation evaluation.
- b. Make sure clinical staff are bringing learner in for cases related to clinical rotation objectives.

IV. AT END OF THE ROTATION

- a. Refer to expectations and rotation objectives as you evaluate learner.
- b. Collect feedback and note changes needed in process of orientation and clarifying expectation for next rotation.

General Comments

- I. If a conflict or problem is encountered with a student, we encourage preceptors to contact one of the clinical coordinators or principal faculty members immediately. Depending on the nature of the problem, preceptors are encouraged to have a verbal discussion with students as well.
- II. The UMSV will provide preceptors with the end of clerkship evaluation. This will be sent to the preceptor's email via EXXAT. The preceptor will upload the completed evaluation into EXXATY. Feel free to discuss this evaluation with students. Completed evaluations must be completed and uploaded by week #4 of the student's clinical rotation. *Faxes are also acceptable however please contact one of the clinical coordinators before faxing to ensure preceptor authenticity.*
- III. A representative from the program may make a site visit or telephone contact during the middle of the rotation to discuss program and/or clerkship activities.
- IV. Students are required to complete a minimum of 36 hours and a maximum of 80 hours per week on clerkships. Students may complete rotation hours by attending on weekends and overnights. This is encouraged if preceptors feel students will be exposed to an improved experience by doing so.
- V. Students must report absences to preceptors and to the program. **No Exceptions**
- VI. Students are required to attend all Call Back Day Activities which are delineated in the monthly schedule supplied to each preceptor as well as the student schedule emailed to you. Students have adequate time to study for the end of rotation examination throughout the clerkship and **should not be permitted** to leave early or be given the day before Call Back Days off.
- VII. *Program policy permits students to document on charts,* however hospital policy may differ. If students are not permitted to document on charts, they are encouraged to practice documentation on a separate sheet and have reviewed by preceptors. We would appreciate your assistance/encouragement with this activity.
- VIII. *Program policy doesn't allow students to write prescriptions enter e-prescriptions.* Students are encouraged to practice writing prescriptions on a separate sheet and have them reviewed by preceptors. We would appreciate your assistance and encouragement with this activity.
- IX. *Program policy doesn't allow students to write admitting or daily orders.* Students are encouraged to practice writing orders on a separate sheet and have them reviewed by preceptors. We would appreciate your assistance/encouragement with this activity.
- X. Students are required to perform a certain amount of procedures as part of their graduation requirements. Your assistance in helping students to complete this requirement is appreciated. At the end of the clerkship, students will have preceptors "sign off" on appropriately completed procedures.
- XI. The program will conduct an annual site evaluation to ensure that each site used during supervised clinical practice experience (SCPE) meet program prescribed expectations for learning outcomes and performance evaluation measures. Any site that is found to be of concern by program faculty, or adjunct faculty, or any site that falls beneath the program benchmark of 3.5/5.0 on a Likert Scale by student evaluation will be site visited by faculty on a continuous basis until improvements have been met.
- XII. Contact one of the clinical coordinators if you have any questions or comments.

CLINICAL POLICIES

I. Professional Conduct

Students are professional trainees and representatives of the University of Mount Saint Vincent. They come in contact with patients, families, and a variety of health professionals during their education. The faculty monitors the professional and academic development of all students. In addition, students are expected to conform to the American Academy of Physician Assistants Code of Ethics to maintain patient confidentiality, safety, and dignity.

II. Attendance

Motivation, enthusiasm, and commitment to the study of medicine are directly reflected by regular attendance, punctuality, and preparation for clerkships. The Program has an important obligation to maintain a positive rapport with clinical sites and preceptors. Attendance and preparation for all clerkships, classes, seminars, and any other activities designated by the Program faculty is expected. Students are required to complete a minimum of 36 and a maximum of 80 hours per week. In the event of an absence, student must contact the preceptor and program faculty, and if time permits make up the absence by reporting on an additional day/s.

*Clinical year students **are required to attend rotation sites** on days designated as “holidays” i.e., Thanksgiving, Christmas etc. if the supervising preceptor requests the student be present. No student may unilaterally take off any holiday unless expressly approved by the preceptor. A student who requests a particular day off must discuss this possibility with preceptors and if approved, contact the Clinical Coordinator with pertinent information.*

Students are sometimes required to meet faculty for oral presentations, usually during the 3rd or 4th week of the rotation. They are required to return to rotation once the assignment is complete. If preceptors have any questions regarding PA Program attendance policy please contact one of the clinical coordinators

III. Preceptor Contact

Students must contact preceptors at least 1 week prior to the start of the clerkship. This requirement helps to improve communication between students and preceptors as well as ease transition into a new clinical arena. Start time and location, necessary equipment, appropriate attire, and preceptor expectations of students are some topics often discussed. Please provide the Program clinical coordinators with your preferred, most up to date phone, address, and email contact.

DRESS CODE

IV. *Clinical Year Attire*

- a. In some clinical locations certain surgical attire (scrubs) may be required, in this instance the student will follow the protocol of the clinical rotation.
- b. Men should wear conservative slacks (no jeans) and shirts.
- c. Women should wear slacks/skirts with shirts/blouses (skirts should be of a conservative length).
- d. No sneakers or open toed shoes are permitted, shoes must be worn with socks or stockings; heel height should be conservative (2-inch).
- e. Jewelry, make-up and cologne are best if conservative and subtle.
- f. Hair for both men and women should be worn in a neat, conservative style.
- g. Half-length white lab coats with Program patches and Program ID tags clearly identifying the wearer as a University of Mount Saint Vincent-Physician Assistant Student are required unless otherwise directed by the clinical preceptor.
- h. Clinical supervisors, preceptors or PA Program faculty reserve the right to remove any student from a clinical site/experience who is not appropriately dressed.
 - If a student is sent home due to inappropriate attire, the student will not be permitted to make-up any clinical work, assignments or experiences for the missed day.
 - Any such episodes will be documented in the student's file.

V. *Universal Precautions*

All PA students are required to complete a training session for healthcare professionals in infection control/universal precautions provided by the Medical Society of the State of New York and New York State Department of Health, before entering clerkships. Documentation of compliance with this must be provided by the student and kept in their files prior to beginning the clinical year. Contact the Program Director of Clinical Education/Clinical Coordinator should you require copies of student infection control certificates.

VI. *Identification*

- a. Physician assistant students should be identified by a clearly marked program identification badge while on clinical experiences at other institutions.
- b. At minimum, students will introduce themselves as physician assistant students and sign all documentation with their legible full signature followed by 'PA-S' or 'PA student'.
- c. Students should clearly display their current UMSV identification while on campus.
- d. At no time should a student, either by virtue of his or her skills or knowledge attained while progressing through the program, misrepresent him or herself as being other than a physician assistant student.
- e. While in the program, students may not use previously earned titles (i.e. RN, MD, DC, DPM, DDS, PhD, etc.)
 - Failure to identify oneself appropriately or misrepresenting oneself will result in either academic probation or possible dismissal from the Program.

VII. *Patients' Rights and Confidentiality*

- a. All PA students are required to complete a training session for healthcare professionals in infection control/universal precautions provided by the Medical Society of the State of New York and New York State Department of Health, before entering clerkships.
- b. Documentation of compliance with this must be provided by the student and kept in their files prior to beginning the clinical year.
- c. Contact the Program should you require copies of student infection control certificates.

VIII. Patient Record, Physician Review, Countersignature

- a. All patients evaluated by the PA student must be evaluated by the supervising health care provider.
- b. It is the student's responsibility to ensure that the supervising health care provider also evaluates all his/her patients.
 - The supervising health care provider is required to review all student notes written in medical records and countersign these documents.
 - If there is any doubt as to the correct format, students must consult with their preceptor.

IX. Charting

- a. Program policy permits students to document on chart, however hospital policy may differ.
- b. If students are not permitted to document on charts, they are encouraged to practice documentation on a separate sheet and have reviewed by preceptors.
 - We would appreciate preceptor assistance/encouragement with this activity.
- c. Students are reminded that the medical record is a legal document and whenever a student makes an entry into a patient's medical record (i.e., H&P, progress notes, etc.), the student must indicate that they are a physician assistant student when signing the entry.
 - Either of the following is acceptable:
JOHN/JANE DOE, P.A. – S (Not Acceptable)
JOHN/JANE DOE, P.A. – STUDENT (Acceptable)

X. Prescriptions

- a. Program policy doesn't allow students to write prescriptions or inpatient hospital orders. Students are encouraged to practice writing prescriptions and orders on a separate sheet and have them reviewed by preceptors.
- b. We would appreciate your assistance/encouragement with this activity.
- c. Students may not sign a prescription for the physician and then write your initials after the physician's name.

XI. Incidents/Accidents in the Clinical Setting

- a. Occasionally, accidents will occur on the clinical site.
- b. Should a student, patient, or other staff member be injured as a result of an accident involving a student, the student must first comply with all accident and injury protocols established at the institution.
 - This might include the Risk Management Department of the individual institution as well as any other offices deemed appropriate by the preceptor or precepting institution.
 - Subsequently, the student must notify Program staff and file a Physician Assistant Program Incident Report as soon as practical.

XII. Employment Opportunities/Operational Policy regarding Students Performing Service Work

Reference to Specific Clinical Interactions

- a. During supervised clinical practical experiences (SCPE's), enrolled UMSV PA Students will not be assigned to a healthcare affiliate clinical site for which they are direct employees.
- b. Students who have been identified as employees or staff of affiliated clinical sites of the Program site will be required to attend a different clinical site.

- c. If a student is advised, or encouraged, to function as clinical or administrative staff during a supervised clinical practical experience, the student is required to report this incident immediately to the Program Director, Director of Clinical Education/Clinical Coordinator (DCE/CC or the Director of Medical Education/Academic Coordinator (DME/AC).
- d. If student feels or is encouraged to substitute or function as clinical site instructional faculty the student should report this incident immediately to the Program Director, Director of Clinical Education/Clinical Coordinator (DCE/CC or the Director of Medical Education/Academic Coordinator (DME/AC).
- e. The Program Director, Director of Clinical Education/Clinical Coordinator (DCE/CC) or the Director of Medical Education/Academic Coordinator (DME/AC) will verify at the beginning of every term that the course director or instructor of record for any component of the curriculum is not a student of the UMSV PA program.
- f. Student exit survey, completed at end of clinical year, will require of the student an affirmation that neither substituted or functioned as instructional faculty for any aspect of the UMSV PA Program.

XIII. Clinical Procedures Expected of Students

- a. During each clinical clerkship, students shall perform and/or interpret the following diagnostic procedures, as indicated by the supervising physician/preceptor and the clinical setting. These include, but are not limited to:
 - Venipuncture to obtain blood specimens and to start intravenous fluids
 - Arterial puncture for blood gas determination
 - Give intramuscular, subcutaneous, intravenous, intradermal injections
 - Blood cultures
 - Red and white blood cell count with WBC differential
 - Urinalysis including microscopic exam
 - Insertion and removal of a naso-gastric catheter
 - Insertion and removal of a urinary bladder catheter
 - Stool, sputum, urine, wound, specimen or drainage for culture
 - Occult blood in feces, urine, sputum, and gastric contents
 - Gram stain
 - PPD, Tine, and fungal skin tests
 - Wet mounts and KOH prep
 - 12 lead EKG
 - Administer inhalation oxygen
 - Radiographic studies
 - Routine blood chemistries and indices
- b. NOTE: If unsure about the appropriateness of any clinical procedure, please contact the clinical coordinator.
- c. During each clinical clerkship, physician assistant students shall perform and/or assist in the following procedures only under DIRECT SUPERVISION:
 - Endotracheal and/or naso-tracheal intubation
 - Paracentesis
 - Thoracentesis
 - Lumbar puncture
 - Joint aspiration or injection
 - Insertion of a central line
 - Peritoneal dialysis

- Cutdown
- Suturing
- Splinting or immobilizing an extremity
- Incision and drainage of abscess
- Involved in resuscitative measures

XIV. Clinical Procedure Logging

- Students are required to complete a certain number of clinical procedures as a graduation requirement.
- We encourage students to discuss procedure requirements with preceptors early in the clerkship. Preceptor assistance with completing these requirements and educating students on proper technique is appreciated.
- Students will request preceptors to “sign off” on procedures at the end of the clerkship.
- Please sign and stamp your name.
 - Sign off only if students have demonstrated competency in the particular procedure.
- It is the student’s responsibility to notify preceptors that procedures will be signed off on at the end of the clerkship.
 - It is the student’s responsibility to keep track of the number of procedures completed.

XV. Mid-Clerkship Evaluations

- Mid clerkship evaluations are designed to give the preceptor an opportunity to provide feedback to student’s midway through a clinical rotation on their performance.
- Preceptors are encouraged to discuss student strengths and weaknesses and to encourage and provide students with an opportunity to improve their performance.
 - The preceptor mid clerkship evaluation is designed for students to self-reflect on their clinical experience as well.
 - Students must upload this mid clerkship evaluation into their EXXAT portal for review by the UMSV PA Faculty.
 - Students **are not allowed** to sign a blank mid clerkship evaluation without review. In doing so defeats the feedback process

XVI. Preceptor Evaluation

- The program has adopted a standard preceptor evaluation online form that is utilized to assess student performance.
- Students will be evaluated on the basis of their general medical background, knowledge and ability to obtain a medical history and perform an appropriate physical exam.
- Included in the evaluation will be student ability to propose a management plan, present cases, and demonstrate rapport with patients and co-workers, dependability, attitude toward learning, and work habits are also part of the evaluation

XVII. Student Evaluation of Clinical Site

- Each student is required to complete a student critique of the clerkship site, which will be uploaded into EXXAT for review by the Director of Clinical Education/Clinical Coordinator at the end of each clerkship.
- Student evaluations of sites provide feedback to assist in identifying site strengths and weaknesses.
 - A compilation of the student critique will be reviewed with preceptors during the annual faculty evaluation of the site.

- This compilation may be either emailed, mailed or given to you in person.

XVIII. Faculty Evaluation of Clerkship Sites

- A faculty member will make arrangements with preceptors regularly to discuss such issues as overall performance of students, suggestions for changes in curriculum, overall performance of the clerkship site, changes in Program policy/procedure, review of student evaluations of site, strengths of site and area of improvement for site.
- A scheduled appointment may be arranged or may occur during site visits with students.
- The program will conduct a site evaluation to ensure that each site used during supervised clinical practice experiences (SCPE) meet program prescribed expectations for learning outcomes and performance evaluation measures.
 - Any site that is found to be of concern by program faculty, or adjunct faculty, or any site that falls beneath the program benchmark of 3.5/5.0 on a Likert Scale by student evaluation will be site visited by faculty on a continuous basis until improvements have been met.
- All preceptors must hold a valid license that will be verified by program.
- Physicians should be specialty board certified in their area of instruction.
- Physician assistants should be teamed with physician's board certified in their area of instruction.
 - Other licensed health care providers should be experienced in their area of instruction.
 - Physicians who are not board certified or other licensed health care providers serving as preceptors shall be evaluated and determined by the Medical Director and Program Director to be appropriate for the specified area of instruction.

XIX. Call Back Day

- Students must return to the Program location at the end of each rotation to complete the following activities.
 - Written examinations
 - Oral presentations
 - Lecture series
- Student call back days are on the "Senior Year Clerkship Schedule" and are delineated on the student rotation schedules.
- Students should not be permitted to leave early or take the day off before call back days.

XX. End of Rotation Examinations (EORE)

- Specialty specific end of rotation exams (EORE) are administered on call back days.
- Questions on these exams are based on the learning objectives for each specific clerkship.
- Preceptors are not responsible for exam preparation or grading.
- Preceptors are not responsible for formulating or distributing end of clerkship exams

XXI. Clinical Documentation: History and Physical/ SOAP Notes

- Each student is instructed that they must complete and return to the Director of Clinical Medicine/Clinical Coordinator a set number of patient notes (admission history and physical, SOAP notes, discharge summaries etc.) that will be pre-determined by the UMSV PA Clinical Faculty for review and grading
 - Preceptors are not responsible for collecting or grading these student notes.
- All notes must be uploaded into a student specific portal within the EXXAT software where it can be retrieved and reviewed by the assigned UMSV PA clinical faculty.

- c. Students are not permitted to submit documentation that contains or make reference to patient identification material.

CLINICAL CLERKSHIP COURSE DESCRIPTIONS

UMSV 701 Behavioral Medicine and Healthcare Clinical Rotation

Course Description: 6-credits

During this six-week clinical clerkship the student will be exposed to and actively participate as a member of the behavioral health team and function under the direct supervision of the assigned clinical preceptor, supervision of attending physicians, house staff, physician assistants or other credentialed providers for the specialty. The goal of clinical clerkship is to provide the student with practical clinical exposure to patients, including common behavioral health conditions, diagnostic procedures, interviewing and counseling techniques and treatments and technologies that are common for the behavioral health specialty addressing patients across the life span. Preceptors will guide the students learning activities to assist them in achieving the course learning objectives. It is likely that not all clinical conditions required for the mastery of this content area will be encountered during the clerkship. Student self-directed learning activities, and clinical clerkship support materials will complement the preceptor directed activities.

UMSV 702 Emergency Medicine Clinical Rotation

Course Description: 6-credits

During this six-week clinical clerkship the student will be exposed to and actively participate as a member of the facility's emergency healthcare team and function under the direct supervision of the assigned clinical preceptor, supervision of attending physicians, house staff and physician assistants. The goal of this clinical clerkship is to provide the student with practical clinical exposure to patients with emergent or urgent medical conditions, diagnostic procedures, treatments and technologies that are specific to the emergency medicine specialty addressing patients across the life span. Preceptors will guide the students learning activities to assist them in achieving the course learning objectives. It is likely that not all clinical conditions required for the mastery of this content area will be encountered during the clerkship. Student self-directed learning activities and clinical clerkship support materials will complement the preceptor directed activities.

UMSV 703 Family Medicine Clinical Rotation

Course Description: 6-credits

During this six-week clinical clerkship the student will be exposed to and actively participate as a member of a facility's family medicine healthcare team and function under the direct supervision of the assigned clinical preceptor, attending physicians, supporting medical staff and physician assistants. The family medicine clinical clerkship will provide the student with practical clinical exposure to primary care patients, including common medical conditions, diagnostic procedures, treatments and technologies common to the family medicine healthcare environment. Preceptors will guide student learning activities to assist them in achieving course goals, learning outcomes and objectives. It is likely that not all clinical conditions required for the mastery of this content area will be encountered during the clerkship. Student self-directed learning activities and clinical clerkship support materials will enhance the learning experience of this course and complement the preceptor directed activities.

UMSV 704 Internal Medicine Clinical Rotation

Course Description: 6-credits

During this six-week clinical clerkship the student will be exposed to and actively participate as a member of the facility's internal medicine healthcare team and function under the direct supervision of the assigned clinical preceptor, supervision of attending physicians, house staff and physician assistants. The goal of clinical clerkship is to provide the student with practical clinical exposure to patients, including common medical conditions, diagnostic procedures, treatments and technologies that are common for the healthcare environment specific to the internal medicine specialty. Preceptors will guide the students learning activities to assist them in achieving the course learning objectives. Student will be provided an education module regarding the management of patients with end-of-life conditions, addressing issues and concerns of patients, family and the multidisciplinary team involved in the palliative care planning and care of the terminally ill patient. It is likely that not all clinical conditions required for the mastery of this content area will be encountered during the clerkship. Student self-directed learning activities and clinical clerkship support materials will complement the preceptor directed activities.

UMSV 705 Pediatric Clinical Rotation

Course Description: 6-credits

During this six-week clinical clerkship the student will be exposed to and actively participate as a member of the facility's pediatric healthcare team and function under the direct supervision of the assigned clinical preceptor, supervision of attending physicians, house staff and physician assistants. The goal of clinical clerkship is to provide the student with practical clinical exposure to pediatric patients, including common medical conditions, diagnostic procedures, treatments, and technologies common for the healthcare environment specific to the pediatrics specialty. The student will be exposed to not only the ill child, but also to the well child development and growth within the family unit and in peer interactions. Preceptors will guide the students learning activities to assist them in achieving the course learning objectives. It is likely that not all clinical conditions required for the mastery of this content area will be encountered during the clerkship. Student self-directed learning activities and clinical clerkship support materials will complement the preceptor directed activities.

UMSV 706 Surgery Clinical Rotation

Course Description: 6-credits

During this six-week clinical clerkship the student will be exposed to and actively participate as a member of the facility's general surgery healthcare team and function under the direct supervision of the assigned clinical preceptor, supervision of attending physicians, house staff and physician assistants. The goal of clinical clerkship is to teach the student to perform a thorough rapid and methodical assessment, evaluate acutely and potentially ill surgical patients. The student will work as a member of the medical team providing immediate pre-and post-op-care as well as gaining hands-on experience in the operating room setting, including the common diagnostic procedures, treatments and technologies common for the general surgery specialty. Preceptors will guide the students learning activities to assist them in achieving the course learning objectives. It is likely that not all clinical conditions required for the mastery of this content area will be encountered during the clerkship. Student self-directed learning activities and clinical clerkship support materials will complement the preceptor directed activities.

UMSV 707 Women's Health/OB-Gyn Clinical Rotation

Course Description: 6-credits

During this six-week clinical clerkship the student will be exposed to and actively participate as a member of the facility's women's healthcare team and function under the direct supervision of the assigned clinical preceptor, supervision of attending physicians, house staff and physician assistants. The goal of clinical clerkship is to provide the student with practical clinical and participate in the care of a variety of patients with obstetric or gynecological complaints. The student will become proficient in accurate assessment of the obstetric patient with emphasis on pre- and post- natal care. The student will also become involved with the practice of "preventive" obstetrics and gynecology as well as common gynecologic disorders. Preceptors will guide the

students learning activities to assist them in achieving the course learning objectives. It is likely that not all clinical conditions required for the mastery of this content area will be encountered during the clerkship. Student self-directed learning activities and clinical clerkship support materials will complement the preceptor directed activities.

UMSV 708 Elective Clinical Rotation

Course Description: 6-credits

Students may choose to seek specialty clinical clerkship to augment their clinical experience or choose to perform additional time to build a great foundation of one of the core clinical clerkship. During this six-week clinical clerkship, the student will be exposed to and actively participate as a member of the healthcare team of the elective clerkship and function under the direct supervision of the assigned clinical preceptor, supervision of attending physicians, house staff and physician assistants. The goal of elective clinical clerkship is to provide students either an experience in a new clinical area or additional exposure to patients, including common medical conditions, diagnostic procedures, treatments and technologies that are common for the healthcare environment specific to the clerkship or elective specialty. Preceptors will guide student learning activities to assist them in achieving the course learning objectives. It is likely that not all clinical conditions required for the mastery of this content area will be encountered during the clerkship. Student self-directed learning activities and clinical clerkship support materials will complement the preceptor directed activities.

Academic Policies

I. Program Learning Outcomes

1. Demonstrate knowledge within the basic sciences
2. Perform a comprehensive culturally sensitive patient history
3. Be aware and alert for the culturally diverse and relevant patient concerns when performing a comprehensive physical examination
4. Perform a comprehensive history and physical examination
5. Enhance and integrate the communication skills that allows the student to communicate effectively and sensitively with a diverse range of patients and their families
6. Effectively communicate with members of interprofessional health care teams
7. Demonstrate advanced critical thinking skills to evaluate sources of healthcare information.
8. Students who actively participate in community service, and professional leadership opportunities that will enhance their future progression within their private communities and the physician assistant profession.
9. Articulate the rationale including the risks and benefits of specific diagnostic tests and procedures to assess core diseases encountered in primary care community
10. Safely gather specimens, perform routine diagnostic tests and procedures to assess core diseases encountered in primary care.
11. Integrate the knowledge of a patient's presentation with clinical and laboratory findings, pharmacology and clinical medicine to diagnosis and treat patients in a cost-effective manner.
12. Be aware and develop a cultural sensitivity, competency, understanding and compassion in treating special needs patients, their families and caregivers
13. Apply knowledge of study designs and statistical methods to the appraisal of clinical studies.
14. Participate as leaders within the physician assistant profession at the local, regional, state and national levels.
15. Enter the workforce with the skills and knowledge required to obtain and maintain licensure in New York State as a practicing physician assistant.
16. Demonstrate the ability and skills to provide primary care services across the life span

II. Competencies for the Physician Assistant

1. Patient-Centered Practice Knowledge

- a. Gather clinical information, formulate differential diagnoses, order interpret laboratory and imaging, perform necessary core duty procedures, diagnose, prevent, treat, and manage illness among acute, chronic, and emerging disease states.
- b. Integrate into practice appropriate literature to make evidence-based decisions on patient care.

2. Society and Population Health

- a. Integrate into practice the cultural norms, needs, influences, and socioeconomic, environmental, physiological, and other population-level determinants affecting the health of the individual and community being served.
- b. Integrate into practice the interventions that diminish health disparities involving race or ethnicity, sex, sexual identity, age, disability, socioeconomic status, and geographic location involving individual patient and the community being served.
- c. Integrate into practice basic principles of public health including epidemiology, disease prevention, surveillance, reporting and intervention. Provide appropriate referrals involving the public health system to ensure patient advocacy and in the maintenance of population health.

3. Health Literacy and Communication

- a. Communicate effectively and respectfully with patients, families, and other health care professionals.
- 4. Interprofessional Collaborative Practice and Leadership**
- a. Coordinate care to optimize the health of patients and populations.
- 5. Professional and Legal Aspects of Health Care**
- a. Provide standard of care practice while demonstrating respect for the dignity and privacy of patients.
 - b. Incorporate a personal wellness plan to prevent impairment and burnout.
 - c. Demonstrate professional accountability.
- 6. Health Care Finance and Systems**
- a. Differentiate the types of health care systems and health insurance coverage, including Medicare, Medicaid, and the Children’s Health Insurance Program.
 - b. Practice health care informed by an understanding of the financial implications to patients, organizations, and society.
 - c. Recognize personal limitations and incorporate a quality improvement process designed to maximize patient safety, prevention of medical errors, and incorporate risk management.

III. Guidelines for Ethical Conduct for the PA Profession

(Adopted 2000, reaffirmed 2013, amended 2004, 2006, 2007, 2008, 2018)

<https://www.aapa.org/download/56983/>

The PA profession has revised its code of ethics several times since the profession began. Although the fundamental principles underlying the ethical care of patients have not changed, the societal framework in which those principles are applied is constantly changing. Economic pressures, social pressures of church and state on the healthcare system, technological advances, and changing patient demographics continually transform the landscape in which PAs practice. This policy, as written, reflects a point in time and should be reviewed through that lens. It is a living document to be continually reviewed and updated to reflect the changing times, be they related to societal evolutions or the advancement of medical science.

Previous codes of the profession were brief lists of tenets for PAs to live by in their professional lives. This document departs from that format by attempting to describe ways in which those tenets apply. Each situation is unique. Individual PAs must use their best judgment in a given situation while considering the preferences of the patient and the supervising physician, clinical information, ethical concepts, and legal obligations. Context and/or casuistry (extracting reasoning from case study), often play key roles in decision making.

Four main bioethical principles broadly guided the development of these guidelines: patient autonomy, beneficence, nonmaleficence, and justice.

Patient Autonomy strictly speaking, means self-rule. Patients have the right to make autonomous decisions and choices, and PAs should respect these decisions and choices.

Beneficence means that PAs should act in the patient’s best interest. In certain cases, respecting the patient’s autonomy and acting in their best interests may be difficult to balance.

Nonmaleficence means to do no harm, to impose no unnecessary or unacceptable burden upon the patient.

Justice means that patients in similar circumstances should receive similar care. Justice also applies to norms for the fair distribution of resources, risks, and costs.

PAs are expected to behave both legally and morally. They should know and understand the local, state and federal laws governing their practice. Likewise, they should understand the ethical responsibilities of being a healthcare professional. Legal requirements and ethical expectations will not always be in agreement. Generally speaking, the law describes minimum standards of acceptable behavior, and ethical principles delineate the highest moral standards of behavior

When faced with an ethical dilemma, PAs may find the guidance they need in this document. If not, they may wish to seek guidance elsewhere – possibly from a hospital ethics committee, an ethicist, trusted colleagues, or other AAPA policies. PAs should seek legal counsel when they are concerned about the potential legal consequences of their decisions. The following sections discuss ethical conduct.

The following sections discuss ethical conduct of PAs in their professional interactions with patients, physicians, colleagues, other health professionals, and the public. The "Statement of Values" within this document defines the fundamental values that the PA profession strives to uphold. These values provide the foundation upon which the guidelines rest. The guidelines were written with the understanding that no document can encompass all actual and potential ethical responsibilities, and PAs should not regard them as comprehensive.

Statement of Values of the Physician Assistant Profession

- a. Physician assistants hold as their primary responsibility the health, safety, welfare, and dignity of all human beings.
- b. Physician assistants uphold the tenets of patient autonomy, beneficence, nonmaleficence, and justice.
- c. Physician assistants recognize and promote the value of diversity.
- d. Physician assistants treat equally all persons who seek their care.
- e. Physician assistants hold in confidence the information shared in the course of practicing medicine.
- f. Physician assistants assess their personal capabilities and limitations, striving always to improve their medical practice.
- g. Physician assistants actively seek to expand their knowledge and skills, keeping abreast of advances in medicine.
- h. Physician assistants work with other members of the health care team to provide compassionate and effective care of patients.
- i. Physician assistants use their knowledge and experience to contribute to an improved community.
- j. Physician assistants respect their professional relationship with physicians.
- k. Physician assistants share and expand knowledge within the profession.

Outline of Physician Assistant Roles and Responsibilities

- a. Non-discrimination of Patients and Families
- b. Initiation and Discontinuation of Care

- c. Informed Consent
- d. Confidentiality
- e. Patient and the Medical Record
- f. Disclosure of Medical Errors
- g. Care of Family Members and Co-workers
- h. Genetic Testing
- i. Reproductive Decision Making
- j. End of Life

The above guidelines, statements and outlines are reviewed here to give the PA-Student a general format of their duties and responsibilities.

It is the focus for every student to review this entire document for a complete and clearer picture revolving around ethical conduct.

Complete document can be reviewed at:

<https://www.aapa.org/wp-content/uploads/2017/02/16-EthicalConduct.pdf>

Standards Associated with Academic Integrity

- a. *Plagiarism*
Plagiarism is the misrepresentation of someone else's words, ideas or data as one's own work. Students should be advised to state the source of ideas when these are known, since this lends strength to their answers and is part of the ethics of scholarship.
- b. *Unintentional Plagiarism*
Plagiarism is not only the failure to cite but the failure to cite sources properly. If a source is cited but in an inadequate way, the student(s) may still be guilty of unintentional plagiarism. It is therefore crucial that students understand the correct way to cite. The rules are relatively simple, and a broader definition can be found in ***Policies and Procedure Manual UMSV-308***
- c. *Cheating*
Cheating is an act, or an attempted act, of deception by which a student seeks to misrepresent that he/she has mastered knowledge on a test or evaluation that he/she has not mastered.
- d. *Fabrication*
Fabrication is the intentional use of invented information or the falsification of research or other findings with the intent to deceive.
- e. *Inappropriate Professional Behavior*
Inappropriate professional behavior includes unprofessional conduct in patient settings, simulations, professional meetings, and the classroom setting. Any PA student who demonstrates inappropriate professional behavior will be considered in violation of the ethical code set forth by the PA program.

As with any distinct standards this list is not intended to be an all-inclusive list of offenses. Students should consult their instructor if in doubt about the honesty of an action.

IV. Standards for Ethical Conduct and Behavior

Professional Behavior

University of Mount Saint Vincent-Physician Assistant Students, in keeping with the mission and goals of the Physician Assistant program are expected to conduct themselves in a professional and ethical manner that is consistent and aligns with the function of an institution of higher education.

All students will reflect on their own behavior and ethical actions and strive to abide by the highest standards of academic honesty, professional and personal ethics, and professional behavior.

Students are expected to demonstrate the legal, moral, and ethical standards required of all health care professionals either within the classroom environment or the clinical setting.

Professional behavioral guidelines listed below are not meant to be all encompassing. Included below are the minimal acts of professional behavior that if followed will lead to a better understanding of what is expected of each student and in turn will allow professional growth and maturity as you progress throughout your professional careers.

- a. Listens attentively and maintains eye contact when communicating with faculty, staff, and other medical professionals.
- b. Contribute to professional knowledge by demonstrating motivation and a positive attitude toward learning.
- c. Develop time and stress management behaviors that will demonstrates promptness in meeting course associated deadlines assigned to each student.
- d. Understand and have respect for your instructors by:
 - being on time for class
 - asking relevant questions that will enhance the educational advancement of the topic in discussion and at all times
 - refrain from being disruptive in class or clinic. (*See a more detailed description below*)
- e. Show respect for all instructors by addressing them utilizing their preferred title, i.e. Doctor, Professor etc.
 - At no time is a student allowed to address a faculty member by the use of their first name or nicknames such as “Doc” or “Prof”.
- f. Show respect and consideration to your fellow classmates by allowing them to express their concerns and questions and refrain from making judgements, or voicing opinions based upon personal biases.
- g. Recognizes the effects of tone of voice and body language when interacting with others and strive to speak in a clear and thoughtful manner allowing for time for the other party to comprehend your question and respond.
- h. Value the opinion of your peers and refrain from making value judgements
- i. Show compassion and understanding toward every individual whom you are privileged to be treating. Respect is a two-way street.
- j. React in a positive manner to questions, suggestions and/or constructive criticism.
- k. Recognizes that once a negotiated decision has been reached, further discussion or actions may be non-productive.
- l. Demonstrate nondiscrimination practices towards peers, faculty, staff and patients.

Timeliness and Lateness

Attendance and timeliness are important aspects of professional behavior. Students must report to all classes, labs, seminars, call back days, clinical sites, and other scheduled activities on time. Timely return from designated breaks is required. Students must return messages from program staff, faculty, clinical preceptors, patients, and clinical sites in a timely manner (i.e., in less than 36 hours). Students must submit all required assignments and forms on or before the designated date and/or time they are due.

Proper Identification

Role and title confusion are common problems encountered in dealing with patients. Students should be aware of this problem and avoid misrepresentation by politely explaining their role and position and by wearing their id badges/nameplates at all times. Students should use the designation "PA Student" following all notations in the charts or on medical forms. The abbreviation PA-S is less familiar and should be avoided to prevent title confusion.

Honesty and Trustworthiness

Physician assistant students at all times during their professional didactic and clinical training shall be honest and truthful in all respects. This refers to not only your peers but also faculty and ancillary staff, associated with the University of Mount Saint Vincent in all departments. This shall also include clinical preceptors, hospital, and clinic employees you come into contact with during your training. Students shall not intentionally mislead others.

Professional Demeanor

Physician assistant students by extension are representatives of the University of Mount Saint Vincent-PA Program and must dress in professional, neat, and conservative attire. Nametags or badges are required to be worn at all times. Good personal hygiene is always required (More detailed information on the dress code applicable to physician assistant students may be found in this handbook under Student Policies/Dress Code-UMSV-202).

University of Mount Saint Vincent Physician Assistant Student Responsibilities

Unethical behavior is never appropriate. UMSV-PA students are responsible for identifying and reporting unprofessional, unethical and/or illegal behavior witnessed by other health care professionals, fellow students, faculty, and staff of the UMSV-Physician Assistant Program. If a physician assistant student has a reasonable belief that such conduct has occurred, he or she should report it to the Program Director, preceptor, supervisor, or academic/clinical coordinator, as may be appropriate under the circumstances.

UMSV-Physician Assistant students at clinical sites must always work under the supervision of a preceptor and are strictly prohibited from assuming primary-care responsibility for a patient's medical treatment.

UMSV-PA students shall not treat or discharge a patient without prior consultation and approval of a clinical preceptor or physician supervisor.

Patient Treatment Orders

Under no circumstances should a student initiate orders for any patient while on a clinical rotation without immediate physician/physician assistant consultation and countersignature. Under no circumstances should a student sign or call in prescriptions. The only name that should appear on a prescription is that of the supervising physician or physician assistant

Any student whose actions directly or indirectly jeopardize the health and safety of patients, faculty, clinical site staff or fellow students may be immediately removed from the classroom or clinical site and/or face disciplinary action.

Patient Confidentiality

Students' will interact with patients, families, and a variety of healthcare professionals during their education and future professional career. Physician Assistant Students are expected to maintain patient confidentiality, safety, and dignity, as set forth in the American Academy of Physician Assistants' Guidelines for Ethical Conduct for the Physician Assistant Profession <https://www.aapa.org/download/56983/>

Students are strongly advised to never discuss a patient's medical records. This includes but is not limited to any situation or clinical setting that would reveal any information about a particular patient or their confidential records to person or persons not involved in the patient's immediate healthcare. Any information obtained regarding the patient and their illness or their social condition, including all items within a patient's medical history, is to be regarded as privileged information.

No patient information is to be removed from the hospital or clinical setting. If photocopies of work are to be submitted to the PA program for evaluation, then all specific references to the patient (i.e. name, address, id number) must be physically removed as per HIPAA regulations.

Concern for the Patient

Physician assistant students must, by their words and behavior, demonstrate concern the patient. Concern for the patient is manifested in many ways including, but not limited to, the following:

- a. Physician assistant students must treat patients and their families with dignity and respect.
- b. The physical and emotional comfort of the patient is of paramount importance.
- c. Students must use appropriate verbal and non-verbal communication to convey concern, pleasantness, and professionalism to the patient.
- d. The patient's modesty should be considered at all times.
- e. Students shall deliver health care services to patients without regard to their race, religion, national origin, age, sex, marital status, citizenship, sexual orientation, creed, disability, medical condition, socioeconomic status or political beliefs, or any status protected by law.
- f. Students may not accept gifts or gratuities from patients or their families.
- g. Sexual and romantic relationships with patients are prohibited and will not be tolerated.

Health and Safety

Any student whose actions directly or indirectly jeopardize the health and safety of patients, faculty, clinical site staff or fellow students may be immediately removed from the classroom or clinical site and/or face disciplinary action.

Maintaining Composure

It is noted that at times either in the classroom or clinical setting a physician assistant student may find themselves in a highly stressful personal or clinical emergency setting. It is at these specific times that the physician assistant student must maintain a professional and calm demeanor regardless of the situation presented.

Drugs and Alcohol

Students shall not appear at the University or clinical sites under the influence of alcohol or drugs (See Drug and Alcohol Policy UMSV-601). Should this occur, the student will immediately be removed from the rotation/class and referred to the Professional Conduct and Review Committee for disciplinary action.

Please Note: UMSV PA Program has a Zero Tolerance Level for illicit drug and alcohol use (UMSV-601) Professional Ethics

The following is an excerpt from the American Academy of Physician Assistants "Guideline for Ethical conduct for the PA Profession" (Adopted 2000, reaffirmed 2013, amended 2004, 2006, 2007, 2008, 2018) <https://www.aapa.org/download/56983/>

"The PA profession has revised its code of ethics several times since the profession began. Although the fundamental principles underlying the ethical care of patients have not changed, the societal framework in which those principles are applied is constantly changing. Economic pressures, social pressures of church and state on the healthcare system, technological advances, and changing patient demographics continually transform the landscape in which PAs practice. This policy, as written, reflects a point in time and should be reviewed through that lens. It is a living document to be continually reviewed and updated to reflect the changing times, be they related to societal evolutions or the advancement of medical science". <https://www.aapa.org/download/56983/>

All University of Mount Saint Vincent-Physician Assistant Program Students are expected to familiarize themselves with this important and vital document. This document will act as a template to guide the professional physician assistant student as they navigate their way through their professional career.

The professional conduct of physician assistant students is evaluated on an on-going basis throughout the professional phase (i.e., the didactic and clinical years) of the program. Violations of standards of conduct are subject to disciplinary actions administered by the University of Mount Saint Vincent and by the Physician Assistant Program.

V. Technical Standards

Granting of the PA degree signifies that the holder is a physician assistant prepared for entry into the practice of medicine. Therefore, it follows that graduates' must have the knowledge and skills to practice medicine as PAs in a broad variety of clinical situations and to render a wide spectrum of patient care. Candidates must also have the physical and emotional stamina to function in a competent manner in educational and practice settings that may involve heavy workloads and stressful situations. Accordingly, candidates for the degree must be able to perform specific essential functions that the faculty deem requisite for the practice of medicine. These functions, expressed as technical standards, fall into several broad categories, including: observation, communication; motor; conceptual, integrative and quantitative; and behavioral and social.

a. Observation:

- Candidates must be able to observe demonstrations in the basic sciences, medical illustrations and models, microscopic studies of microorganisms and tissues in normal and pathological states. They must also be able to directly and accurately observe a patient's demeanor, see a patient's physical condition, and obtain a medical history and perform a physical examination correctly on the patient in order to integrate the information derived from these observations in order to develop an accurate diagnostic and treatment plan. These skills require the functional use of vision, hearing, smell, and somatic sensation.

b. Communication:

- Candidates must be able to speak, hear, and observe patients in a clinical setting and elicit information, perceive nonverbal communications and detect changes in mood. They must be able to record information accurately and clearly, speak fluent English, and communicate effectively and sensitively with patients and families. Candidates must also be able to communicate effectively with other members of the healthcare team in oral, written and electronic form, and provide accurate information in patient care settings in which decisions based upon those communications must be made rapidly.

c. Motor:

- Candidates must have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers necessary to complete a full physical examination. They must possess motor function sufficient to perform basic laboratory tests (e.g., urinalysis, CBC, etc.) and carry out diagnostic procedures (e.g., venipuncture, arterial puncture, paracentesis, thoracentesis, lumbar puncture, etc.). These skills require coordination of gross and fine muscle movements, equilibrium, and sensation. Candidates must be able to execute the appropriate motor movements required to provide general care as well as emergency treatment to patients. Examples of emergency treatment reasonably required of physician assistants are cardiopulmonary resuscitation, administration of intravenous medication, the application of pressure to stop bleeding, the management of obstructed airways, the suturing of simple wounds, and the performance of simple obstetrical maneuvers. A candidate must be able to transport themselves from one location to another in a timely fashion in order to facilitate patient care responsibilities and receive educational training.

d. Interpretative, Conceptual and Quantitative:

- Candidates for the degree must have effective and efficient learning techniques and habits that allow for mastery of the complex PA curriculum. They must be able to learn through a variety of modalities, including, but not limited to, classroom instruction, small group activities, individual study, preparation and presentation of reports, and use of computer technology. They must be able to memorize measure, calculate reason, analyze, and synthesize. They must also be able to comprehend spatial relationships and three-dimensional models.

e. Behavioral and Social Attributes:

- Candidates must understand the legal and ethical aspects of the practice of medicine and function within the guidelines established by the law and by the ethical standards of the PA profession. They must be able to relate to patients and their families, colleagues, and other members of the healthcare team with courtesy, maturity, and respect for the dignity of individuals. This requires that they place the welfare of their patients foremost, and demonstrate honesty, integrity, dedication, compassion and nondiscrimination in the care of their patients. They must at all times demonstrate the emotional stability to be able to exercise good judgment, and carry out prompt completion of all the responsibilities attendant to the diagnosis and care of their patients in a sensitive and effective manner. This sensitivity includes self-examination of

personal attitudes, perceptions, and stereotypes in order to avoid potential negative impact on relationships and patient care. Applicants must be able to adapt to changing environments, display flexibility and professional responsibility to their patients, and to learn to function in an environment of uncertainty, in which changes may occur rapidly and without warning. A candidate must be able to accept criticism and respond by a modification of behavior. All of these personal qualities will be assessed during the admissions and educational process.

VI. Health Clearance Policy

In order to ensure the safety of students, staff, clinical agency personnel, and patients, and to comply with clinical agency contract mandates, no students will be permitted to participate in Physician Assistant clinical courses or rotations **unless they have been medically cleared**. If copies of health clearance documents are required, please contact one of the clinical coordinators. **Students must carry a copy of the completed health clearance documents with them to every clerkship.**

The following is a list of the Health Clearance items that must be completed:

- a. Health Clearance and Consent for Release of Confidential Health Information
- b. The following immunizations are required
 - Measles
 - Mumps
 - Rubella
 - Varicella
 - Diphtheria/Tetanus
 - Hepatitis B or completed refusal form
 - Covid-19 Vaccination Passport (Proof of Sars Covid-2 vaccination)
- c. The following may be required dependent upon the clinical site
 - PPD and or IGRA testing
 - Physical Examination

All students are required to have adequate health insurance. Students are responsible for their own health care while in school. If a health condition arises during the course of study that would in any way alter a student's ability to perform in the clinical setting, it is the student's responsibility to notify the Director of Clinical Education/Clinical Coordinator immediately.

Drug testing will be repeated at the end of the didactic phase of the program prior to starting clinical clerkships. A successful drug test is required for the student to progress into the clinical phase of the program. Students may be required to have an additional or a repeat drug test as a condition of performing a clerkship at a particular healthcare affiliate due to specific affiliate policies.

VII. Malpractice/Liability Insurance

Once a formal affiliation agreement has been fully executed, the UMSV PA Program has assumed the cost of a blanket malpractice liability insurance coverage.

- a. A copy of the Malpractice/Liability Coverage will be supplied to all Clinical Affiliates upon request
- b. Please contact the UMSV PA Program should you require a copy of this insurance certificate

VIII. Students with Disabilities

ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES:

- a. The University of Mount Saint Vincent’s commitment to equal educational opportunities for students with disabilities includes providing reasonable accommodations for the needs of students with disabilities.
- b. Students seeking reasonable accommodations and support services on the basis of a diagnosed permanent or temporary disability are required to submit documentation to verify eligibility under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990.
 - The Americans with Disabilities Act defines an individual with a disability as a person who has a physical or mental impairment which substantially limits one or more major life activities of the individual; has a record of such an impairment; or, is regarded as having an impairment
- c. The Office of Disabilities Services seeks to provide support services that enable students with documented disabilities to maximize their academic participation and learning experience. The purpose for reasonable accommodations is to provide equal access to academic opportunities by reducing or eliminating disadvantages due to a disability.
- d. The provision of all reasonable accommodations and services is based upon a case-by-case assessment of the impact of the student’s diagnosis on his/her academic performance and/or University participation at a given time in the student’s academic life.
- e. Reasonable accommodations do not guarantee specific outcomes or level of achievement.
- f. Students seeking information on the process and eligibility should contact the Office of Disabilities services through the Academic Resource Center.
- g. No one, including faculty, is authorized to evaluate the need and arrange for an accommodation except the Office of Disabilities Services.
 - Moreover, no one, including faculty, is authorized to contact the The Office of Disabilities Services on behalf of a student. For further information:
- h. Contact
 (718) 405-3718
 ods@mountsaintvincent.edu
 Elizabeth Seton Library 2nd Floor
<https://mountsaintvincent.edu/academics/support/students-with-disabilities/>
- i. Confidentiality
 - The information and documents provided to the UMSV in support of a student’s request for an accommodation shall be maintained as confidential.
 - Individually identifiable information will not be disclosed except as may be required or permitted by law or pursuant to a release signed by the student.

Complaints of Disability Discrimination

- If a student has concerns that he or she has been discriminated against because of a disability, he or she should contact
 - i. 718) 405-3718
 ods@mountsaintvincent.edu
 Elizabeth Seton Library 2nd Floor
<https://mountsaintvincent.edu/academics/support/students-with-disabilities/>

IX. Ill or Impaired Student

If at any time during the course of a clinical affiliation the supervising preceptor and/or their duly assigned representative feel a student is unable to function in the capacity as described in the paragraphs above as a

UMSV PA student due to illness, physical impairment (either physical, psychological or emotional) the preceptor or assigned representative must:

- a. Contact the Director of Clinical Education/Clinical Coordinator immediately for guidance
- b. Ensure the safety and well-being of the student at all times
- c. In an emergency within a clinical affiliate hospital setting:
 - refer the student to the clinical affiliate emergency department (if applicable)
- d. In an emergency within a clinical affiliate non-hospital setting
 - Arrange secure medical transportation to the nearest receiving facility

X. Sexual Harassment Policy

General Statement

The University of Mount Saint Vincent seeks to foster a safe and healthy environment built on mutual respect and trust. At the foundation of the University's mission is the recognition of the equal and inviolable dignity and worth of every person. Sexual Misconduct of any kind is a serious violation of these principles and will not be tolerated in any form.

The University defines Sexual Misconduct to include Sexual Exploitation, Sex-Based Harassment, Sexual Assault, Stalking, and Relationship Violence of a sexual nature. Sexual Misconduct can occur between strangers or acquaintances, including people involved in an intimate or sexual relationship. Sexual Misconduct can be committed by men or by women, and it can occur between people of the same or different sex. Sexual Harassment, including sexual violence, is a form of sex discrimination.

Any member of the University community, or clinical affiliations who encourages, aids, assists or participates in any act of Sexual Misconduct against another is in violation of the University policy, Title IX, and Article 129-B.

The University's policies on Sexual Misconduct can be found on the University's website <https://mountsaintvincent.edu/campus-life/campus-services/human-resources/employment-practices-and-procedures/sexual-misconduct-policy/>

CLINICAL CLERKSHIP EVALUATION FORMS



UNIVERSITY OF MOUNT SAINT VINCENT

ROTATION TIME SHEET

NAME: _____ ROTATION NUMBER: ____ TYPE: _____
SITE: _____ PRECEPTOR: _____

Monday Tuesday Wednesday Thursday Friday Saturday Sunday Preceptor Signature and Total Hours for Week

WEEK 1

WEEK 2

WEEK 3

WEEK 4

WEEK 5

WEEK 6

**CALL
BACK
DAY**

Students should fill in start and end times and total hours for the day and the week.
Students are not permitted to take days off to study
All days missed on rotation should be reported to the Program.
You will be assigned a date/time for you to return to campus for your OSCE
Student will fax or email to Program weekly and return original to the Program



UNIVERSITY OF MOUNT SAINT VINCENT

Clinical Skills and Procedures Form

Student Name: _____

Class of 20_____

Preceptor evaluation of student

Directions: Please check procedures/skills completed by the student during the rotation. Only indicate that the student has completed a procedure/skill if they have demonstrated minimal competency completing the procedure. It is understood that some procedures/skills may not be accomplished on this rotation. If the student is not able to perform the procedures/skills due to regulations, please discuss the applications of these procedures/skills to diagnose and treat specific disease states. Validation of student skills are reviewed by the PA Program after every clerkship. If the student is unable to meet perform the procedure/skill during the clinical year, alternate assignments or remediation procedures will be completed at the University.

Competency is defined as student's ability to successfully accomplish the skill with supervision and minimal guidance.

Preceptor evaluation of student

9. Clinical Procedures— Student ability to perform or assist in procedures appropriate to the setting and level of training. indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3).

Clinical and Technical Skills

Learning Outcome B3

With direct preceptor supervision, students will perform and/or assist in the performance of common medical procedures in this setting. (Evaluation: PES Question 9. Clinical Procedures)

Procedure/Skill	Date and Signature
Proper/appropriate PPE	
NG Tube Placement	
Rectal Exam & FOBT	
Bladder Catheterization	
Casting /Splinting	
Suturing	
Incision & Drainage	
Surgical Knot Tying	
Sterile Technique	
Suture Removal	
Staple Removal	
IM Injection	
SC Injection	
ID Injection	
Venipuncture	
Intravenous Line	
Arterial Blood Gas	

Glucose Testing	
Wound Dressing	
Cerumen Removal	
Prenatal Evaluation and workup	
Breast Examination - Gynecology	

Pelvic Examination- Gynecology	
Pre-operative Care	
Intra-operative Care	
Post-operative Care	
Well baby exam	
Newborn Assessment	
Peak Flow/Spirometry	
Hearing and vision Screening (may observe	
Slit lamp exam and fluorescein stain	
Observe vaginal delivery	
Foreign body removal (eye, ear or nose)	
Throat Culture	
Influenza/Covid Swab	

Student Name: _____



UNIVERSITY OF MOUNT SAINT VINCENT

Mid-Rotation Preceptor Evaluation of Student

PRECEPTOR-STUDENT EVALUATION	(5.0) Excellent	(4.0) Above Average	(3.0) Average	(2.0) Below Average	(1.0) Unsatisfactory	Not Observed N/A
Patient Encounters						
Medical Interview Skills						
Students ability to perform a complete physical examination						
Students ability to adequately prepare an Assessment/Differential Diagnosis List						
Oral Case Presentation Ability						
Ability to Form a patient Treatment/Management Plan						
Ability to order appropriate lab tests on patients						
Ability to order appropriate diagnostic imaging						
Ability to properly educate patients as to severity of disease or illness						
Chart/EMR documentation knowledge skills						
Professionalism	(5.0) Excellent	(4.0) Above Average	(3.0) Average	(2.0) Below Average	(1.0) Unsatisfactory	Not Observed N/A
Student was professionally attired daily						
Student was on-time for all daily activities						
Student exhibited Professional Behavior at all times						
Acceptance of supervision and constructive feedback						
Patient Care	(5.0) Excellent	(4.0) Above Average	(3.0) Average	(2.0) Below Average	(1.0) Unsatisfactory	Not Observed N/A
Works effectively with physicians and other health care professionals to provide patient-centered care						
Demonstrates decision making skills involving diagnostic and therapeutic interventions based on						

patient information and preferences, current scientific evidence, and informed clinical judgments						
Effectively implements patient care management plans						
Medical Knowledge	(5.0) Excellent	(4.0) Above Average	(3.0) Average	(2.0) Below Average	(1.0) Unsatisfactory	Not Observed N/A
Understands etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions encountered during the clinical rotation						
Understands the diagnostic signs and symptoms of medical and surgical conditions encountered during the clinical rotation						
Ability to properly interpret appropriate diagnostic studies that were ordered and relate these to the medical condition encountered						
Has shown the ability to effectively manage general medical and surgical conditions to include pharmacologic and other treatment modalities						
Effectively correlates medical history obtained and physical findings with development of an initial differential diagnosis						

Additional Comments:

Preceptor Name _____

Student Name _____

Institution _____

Preceptor Signature _____

Date _____



UNIVERSITY OF MOUNT SAINT VINCENT

Mid-Rotation STUDENT EVALUTION OF SELF To Be Discussed with Preceptor

PRECEPTOR-STUDENT EVALUATION	(5.0) <i>Excellent</i>	(4.0) <i>Above Average</i>	(3.0) <i>Average</i>	(2.0) <i>Below Average</i>	(1.0) <i>Unsatisfactory</i>	<i>Not Observed N/A</i>
Patient Encounters						
Medical Interview Skills						
Ability to perform a complete physical examination						
Ability to adequately prepare an Assessment/Differential Diagnosis List						
Oral Case Presentation Ability						
Ability to Form a patient Treatment/Management Plan						
Ability to order appropriate lab tests on patients						
Ability to order appropriate diagnostic imaging						
Ability to properly educate patients as to severity of disease or illness						
Chart/EMR documentation knowledge skills						
Medical Knowledge	(5.0) <i>Excellent</i>	(4.0) <i>Above Average</i>	(3.0) <i>Average</i>	(2.0) <i>Below Average</i>	(1.0) <i>Unsatisfactory</i>	<i>Not Observed N/A</i>
Understands etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions encountered during the clinical rotation						
Understands the diagnostic signs and symptoms of medical and surgical conditions encountered during the clinical rotation						
Ability to properly interpret appropriate diagnostic studies that were ordered and relate these to the medical condition encountered						
Has shown the ability to effectively manage general medical and surgical conditions to include pharmacologic and other treatment modalities						

Effectively correlates medical history obtained and physical findings with development of an initial differential diagnosis

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Additional Comments:

Preceptor Name _____

Student Name _____

Institution _____

Discussed with Preceptor Y or N



UMSV 701 Behavioral Medicine and Healthcare (SCPE)

Preceptor Evaluation of the Student (PES)

The following is the preceptor evaluation of the student. The learning outcome being assessed by the question for the SCPE follows the question in parenthesis.

STUDENT NAME:

SITE:

ROTATION NUMBER:

START DATE:

END DATE:

Please rate the student on each of the following elements using the following Likert scale:

- 0- Unable to evaluate - Not observed
- 1- Poor - Poor knowledge and/or skills; failing to improve
- 2- Below Average - Needs additional knowledge and/or skills to meet expectations, improving
- 3- Average - Adequate knowledge and skills; meets expectations and improving
- 4- Above Average - Great baseline knowledge and advanced skills: exceeds expectations
- 5- Outstanding - Excellent and consistent application of knowledge with superb skills

1. Student maintained HIPAA compliance at all times

0 1 2 3 4 5

2. Acceptance of supervision and criticism

0 1 2 3 4 5

3. Student enthusiastic about accepting new challenges and responsibilities

0	1	2	3	4	5
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4. During the Behavioral Health rotation, the student experienced patient encounters in the following settings. (Check all that apply)

Outpatient	Inpatient	Emergency Department

Evaluation Area and Description:

For the purposes of this evaluation, please use the age group parameters and encounter type definitions listed below:

Age Groups:

- Infant:** 0-2 years old
- Child:** 2-12 years old
- Adolescents:** 13-18 years old
- Adult:** 19-65 years old
- Elderly:** >65 years old

Encounter Types:

- Acute:** symptoms or conditions for <6mos
- Chronic:** symptoms or condition for >6mos
- Preventive:** wellness visits or for preventative treatment
- Emergent:** life threatening condition or likely to become life threatening

Knowledge, Clinical and Technical Skills

5. Medical Knowledge- Student’s ability to demonstrate a strong fund of knowledge of pathophysiology, pharmacology, clinical and behavioral manifestations of disease and apply these to the care of patients across the lifespan with behavioral and mental health conditions. (Learning Outcome A1)

	0	1	2	3	4	5
Child						
Adolescent						
Adult						
Elderly						

6. Evidence-Based Medicine- Student’s ability to demonstrate an understanding of medical research and evidence-based medicine and apply it to clinical practice in psychiatry and behavioral health. (Learning Outcome A2)

1	2	3	4	5
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7. Medical Interview- Student’s ability to utilize a range of communication and interpersonal skills to elicit an accurate and relevant medical history from patients with behavioral and mental health conditions (Learning Outcome B1)

1	2	3	4	5
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8. Physical Examination- Student’s ability to perform an accurate, focused assessment of patients with behavioral and mental health conditions, recognizing normal and abnormal findings (Learning Outcome B 2)

0	1	2	3	4	5
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9. Clinical Procedures— Student ability to utilize appropriate screening tools and diagnostic tests to assess patients with behavioral and mental health conditions. indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3)

0	1	2	3	4	5
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Clinical Reasoning and Problem Solving

10. Differential Diagnosis- Student’s ability to organize information gathered from the interview, physical exam and diagnostics tests to formulate a differential diagnosis, and assessment for patients with behavioral and mental health conditions presenting for the following types of care. (Learning Outcome C1)

	0	1	2	3	4	5
Acute						
Chronic						
Preventative						
Emergent						

11. Diagnostic Studies- Student’s ability to choose appropriate diagnostic studies and interpret the results for the purpose of diagnosis and disease management for patients with behavioral and mental health conditions presenting for the following types of care. (Learning Outcome C2)

	0	1	2	3	4	5
Acute						
Chronic						
Preventative						
Emergent						

12. Management Plans- Student’s ability to develop, initiate and follow through on appropriate management plans, that are consistent with patient’s needs and preferences, in the following types of encounters (Learning Outcome C3)

	0	1	2	3	4	5
Acute						
Chronic						
Preventative						
Emergent						

Interpersonal Skills

13. Oral Presentation- Student’s ability to orally present clinical information in a concise and coherent manner to the clinical preceptor and other members of the health care team. (Learning Outcome D1)

1	2	3	4	5
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14. Written Documentation- Student’s ability to summarize clinical information in an accurate and concise manner. (Learning Outcome D2)

1	2	3	4	5
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15. Patient Education- Student’s ability to provide appropriate health education and counseling to patients and their families if appropriate. (Learning Outcome D3)

0	1	2	3	4	5
---	---	---	---	---	---

16. Patient Rapport- Student’s ability to interact with patients and their families with respect, trust, positive affect, and cultural sensitivity. (Learning Outcome D4)

0	1	2	3	4	5
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Behaviors

17. Professional Relationships- Student’s ability to work with other members of the health care team, showing respect for peers, preceptors and staff. (Learning Outcome E1)

0	1	2	3	4	5
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18. Proactive Behavior- Student’s ability to demonstrate self-directed learning, initiative to participate in patient care, and be an active member of the health care team. (Learning Outcome E2)

0	1	2	3	4	5
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19. Attendance and Effort- Student’s ability to be punctual, be available when needed, and follow-through on assigned work. (Learning Outcome E3)

0	1	2	3	4	5
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20. Overall Professional Conduct- Student is ethical, compassionate, patient centered, and acknowledges limitations and mistakes. (Learning Outcome E4)

0	1	2	3	4	5
---	---	---	---	---	---

21. Knowledge of Interprofessional Team – Student displays general understanding of the roles of healthcare providers in behavioral health setting (Learning Outcome F1)

0	1	2	3	4	5
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Assessment of Competency: Competencies are the knowledge, interpersonal, clinical and technical skills, professional behaviors and clinical reasoning and problem-solving skills required for clinical practice. Please answer the following questions based on your observations of the student. *(For internal tracking only)*

22. During the Psychiatry rotation, the student demonstrated competency at providing care to patients in the following age groups.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectation
Infants				
Children				
Adolescents				
Adults				
Elderly				

23. During the Psychiatry rotation, the student demonstrated competency at providing care in the following types of encounters.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectation
Acute				
Chronic				
Preventive				
Emergent				

24. Narrative Comments

Please use the space below to elaborate on aspects of this student’s performance. Portions of this narrative may be used in program letters of recommendation.

25. Recommendations for Future Learning

Please use this space to summarize your suggestions for the student’s future learning. This information will be used as formative feedback.

26. Recommendations for Program

Do you have any suggestions for the PA program regarding curricular changes that would improve the student’s performance?

27. Overall Impression:

Do you feel that the student should pass this rotation?

Yes No

Comments:

28. Overall, how prepared was the student to participate at this clinical site?

(Please circle one)

Very prepared	Adequately Prepared	Underprepared
10 9 8 7 6 5 4 3 2 1 0		

29. How many days was the student absent or late for rotation?

Absent _____

Late _____

30. Have you discussed these findings with the student?

Yes No

Thank you for allowing our student to work with you.

University of Mount Saint Vincent PA Program

Gail Murphy

Gail.lavinmurphy@mountsaintvincent.edu

718-405-3717



UMSV 702 Emergency Medicine (SCPE)

Emergency Medicine Preceptor Evaluation of Student (PES)

The following is the preceptor evaluation of the student. The learning outcome being assessed by the question for the SCPE follows the question in parenthesis.

STUDENT NAME:

SITE:

ROTATION NUMBER:

START DATE:

END DATE:

Please rate the student on each of the following elements using the following Likert scale:

- 0- Unable to evaluate - Not observed
- 1- Poor - Poor knowledge and/or skills; failing to improve
- 2- Below Average - Needs additional knowledge and/or skills to meet expectations, improving
- 3- Average - Adequate knowledge and skills; meets expectations and improving
- 4- Above Average - Great baseline knowledge and advanced skills: exceeds expectations
- 5- Outstanding - Excellent and consistent application of knowledge with superb skills

1. Student maintained HIPAA compliance at all times

0 1 2 3 4 5

2. Acceptance of supervision and criticism

0 1 2 3 4 5

3. Student enthusiastic about accepting new challenges and responsibilities

0	1	2	3	4	5
---	---	---	---	---	---

4. During Emergency Medicine rotation, the student experienced patient encounters in the following settings. (Check all that apply)

Outpatient	Inpatient	Emergency Department	Operating Room

Evaluation Area and Description:

For the purposes of this evaluation, please use the age group parameters and encounter type definitions listed below:

Age Groups:

Infant: 0-2 years old

Child: 2-12 years old

Adolescents: 13-18 years old

Adult: 19-65 years old

Elderly: >65 years old

Encounter Types:

Acute: symptoms or conditions for <6mos

Chronic: symptoms or condition for >6mos

Preventive: wellness visits or for preventative treatment

Emergent: life threatening condition or likely to become life threatening

Knowledge, Clinical and Technical Skills

5. Medical Knowledge- Student’s ability to demonstrate a strong fund of knowledge of pathophysiology, pharmacology, clinical and behavioral manifestations of disease and apply these to the care of patients in the following age groups in emergency medicine. (Learning Outcome A1)

	0	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

6. Evidence-Based Medicine- Student’s ability to demonstrate an understanding of medical research and evidenced based medicine and apply it to clinical practice in emergency medicine. (Learning Outcome A2)

1	2	3	4	5

7. Medical Interview- Student’s ability to utilize a range of communication and interpersonal skills to elicit a thorough history from patients in the following age groups (Learning Outcome B1)

	0	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

8. Physical Examination- Student’s ability to perform an appropriate, specific, and accurate physical examination on patients in the following age groups recognizing normal and abnormal findings (Learning Outcome B 2)

	0	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

9. Clinical Procedures– Student ability to perform or assist in procedures appropriate to the emergency medicine setting and level of training. indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3)

0	1	2	3	4	5
---	---	---	---	---	---

Clinical Reasoning and Problem Solving

10. Differential Diagnosis- Student’s ability to organize information gathered from the interview, physical exam and diagnostics tests to formulate a differential diagnosis, and assessment for patients presenting for the following types of care in emergency medicine. (Learning Outcome C1)

	0	1	2	3	4	5
Acute						
Chronic						
Preventative						
Emergent						

11. Diagnostic Studies- Student’s ability to choose appropriate diagnostic studies and interpret the results for the purpose of diagnosis and disease management for patients presenting for the following types of care in emergency medicine. (Learning Outcome C2)

	0	1	2	3	4	5
Acute						
Chronic						
Preventative						
Emergent						

12. Management Plans- Student’s ability to develop, initiate and follow through on appropriate management plans, that are consistent with patient’s needs and preferences, in the following types of encounters. (Learning Outcome C3)

	0	1	2	3	4	5
Acute						
Chronic						

Preventative						
Emergent						

Interpersonal Skills

13. Oral Presentation- Student’s ability to orally present clinical information in a concise and coherent manner to the clinical preceptor and other members of the health care team. (Learning Outcome D1)

1	2	3	4	5
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14. Written Documentation- Student’s ability to summarize clinical information in an accurate and concise manner. (Learning Outcome D2)

1	2	3	4	5
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15. Patient Education- Student’s ability to provide appropriate health education and counseling to patients in the following age groups, and their families if appropriate. (Learning Outcome D3)

	0	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

16. Patient Rapport- Student’s ability to interact with patients and their families with respect, trust, positive affect, and cultural sensitivity. (Learning Outcome D4)

0	1	2	3	4	5
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Behaviors

17. Professional Relationships- Student’s ability to work with other members of the health care team, showing respect for peers, preceptors and staff. (Learning Outcome E1)

0	1	2	3	4	5
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18. Proactive Behavior- Student’s ability to demonstrate self-directed learning, initiative to participate in patient care, and be an active member of the health care team. (Learning Outcome E2)

0	1	2	3	4	5
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19. Attendance and Effort- Student’s ability to be punctual, be available when needed, and follow-through on assigned work. (Learning Outcome E3)

0	1	2	3	4	5
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20. Overall Professional Conduct- Student is ethical, compassionate, patient centered, and acknowledges limitations and mistakes. (Learning Outcome E4)

0	1	2	3	4	5
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21. Knowledge of the Interprofessional Team – Student displays general understanding of the roles of the healthcare providers in emergency medicine setting (Learning Outcome F1)

0	1	2	3	4	5
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Assessment of Competency: Competencies are the knowledge, interpersonal, clinical and technical skills, professional behaviors and clinical reasoning and problem-solving skills required for clinical practice. Please answer the following questions based on your observations of the student. *(For internal tracking only)*

22. During the Emergency Medicine rotation, the student demonstrated competency at providing care to patients in the following age groups.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectation
Infants				
Children				
Adolescents				
Adults				
Elderly				

23. During the Emergency Medicine rotation, the student demonstrated competency at providing care in the following types of encounters.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectation
Acute				
Chronic				
Preventive				
Emergent				

24. Narrative Comments

Please use the space below to elaborate on aspects of this student’s performance. Portions of this narrative may be used in program letters of recommendation.

25. Recommendations for Future Learning

Please use this space to summarize your suggestions for the student's future learning. This information will be used as formative feedback.

26. Recommendations for Program

Do you have any suggestions for the PA program regarding curricular changes that would improve the student's performance?

27. Overall Impression:

Do you feel that the student should pass this rotation?

Yes No

Comments:

28. Overall, how prepared was the student to participate at this clinical site?

(Please circle one)

Very prepared					Adequately Prepared						Underprepared
10	9	8	7	6	5	4	3	2	1	0	

29. How many days was the student absent or late for rotation?

Absent _____ Late _____

30. Have you discussed these findings with the student?

Yes _____ No _____

Thank you for allowing our student to work with you.

University of Mount Saint Vincent PA Program
Gail Murphy
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UMSV 703 Family Medicine (SCPE)

Family Medicine Preceptor Evaluation

The following is the preceptor evaluation of the student. The learning outcome being assessed by the question for the SCPE follows the question in parenthesis.

STUDENT NAME:

SITE:

ROTATION NUMBER:

START DATE:

END DATE:

Please rate the student on each of the following elements using the following Likert scale:

0- Unable to evaluate - Not observed

1- Poor - Poor knowledge and/or skills; failing to improve

2- Below Average - Needs additional knowledge and/or skills to meet expectations, improving

3- Average - Adequate knowledge and skills; meets expectations and improving

4- Above Average - Great baseline knowledge and advanced skills: exceeds expectations

5- Outstanding - Excellent and consistent application of knowledge with superb skills

1. Student maintained HIPAA compliance at all times

0	1	2	3	4	5
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2. Acceptance of supervision and criticism

0	1	2	3	4	5
---	---	---	---	---	---

3. Student enthusiastic about accepting new challenges and responsibilities

0	1	2	3	4	5
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4. During the Family Medicine rotation, the student experienced patient encounters in the following settings. (Check all that apply)

Outpatient	Inpatient	Emergency Department	Operating Room

Evaluation Area and Description:

For the purposes of this evaluation, please use the age group parameters and encounter type definitions listed below:

Age Groups:

- Infant: 0-2 years old
- Child: 2-12 years old
- Adolescents: 13-18 years old
- Adult: 19-65 years old
- Elderly: >65 years old

Encounter Types:

- Acute: symptoms or conditions for <6mos
- Chronic: symptoms or condition for >6mos
- Preventive: wellness visits or for preventative treatment
- Emergent: life threatening condition or likely to become life threatening

Knowledge, Clinical and Technical Skills

5. Medical Knowledge- Student’s ability to demonstrate a strong fund of knowledge of pathophysiology, pharmacology, clinical and behavioral manifestations of disease and apply these to the care of patients in the following age groups. (Learning Outcome A1). **Please answer for as many age groups as possible.**

	Not Observed	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

6. Evidence-Based Medicine- Student’s ability to demonstrate an understanding of medical research and evidence-based medicine and apply it to clinical practice in family medicine. (Learning Outcome A2)

1	2	3	4	5
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7. Medical Interview- Student’s ability to utilize a range of communication and interpersonal skills to elicit a thorough history from patients in the following age groups (Learning Outcome B1). **Please answer for as many age groups as possible.**

	Not Observed	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

8. Physical Examination- Student’s ability to perform an appropriate, specific, and accurate physical examination on patients in the following age groups recognizing normal and abnormal findings (Learning Outcome B 2). **Please answer for as many age groups as possible.**

	Not Observed	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

9. Clinical Procedures– Student ability to perform or assist in procedures appropriate to the family medicine setting and level of training, indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3)

0	1	2	3	4	5

Clinical Reasoning and Problem Solving

10. Differential Diagnosis- Student’s ability to organize information gathered from the interview, physical exam and diagnostics tests to formulate a differential diagnosis, and assessment for patients presenting for the following types of care in family medicine. (Learning Outcome C1). **Please answer for as many areas as possible.**

	0	1	2	3	4	5
Acute						
Chronic						
Preventative						
Emergent						

11. Diagnostic Studies- Student’s ability to choose appropriate diagnostic studies and interpret the results for the purpose of diagnosis and disease management for patients presenting for the following types of care in family medicine. (Learning Outcome C2). **Please answer for as many areas as possible**

	0	1	2	3	4	5
Acute						
Chronic						
Preventative						
Emergent						

12. Management Plans- Student’s ability to develop, initiate and follow through on appropriate management plans, that are consistent with patient’s needs and preferences, in the following types of encounters. (Learning Outcome C3). **Please answer for as many areas as possible.**

	0	1	2	3	4	5
Acute						
Chronic						
Preventative						
Emergent						

Interpersonal Skills

13. Oral Presentation- Student’s ability to orally present clinical information in a concise and coherent manner to the clinical preceptor and other members of the health care team. (Learning Outcome D1)

1	2	3	4	5
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14. Written Documentation- Student’s ability to summarize clinical information in an accurate and concise manner. (Learning Outcome D2)

1	2	3	4	5
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15. Patient Education- Student’s ability to provide appropriate health education and counseling to patients in the following age groups and their families if appropriate. (Learning Outcome D3)

Please answer for as many age groups as possible.

	Not Observed	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

16. Patient Rapport- Student’s ability to interact with patients and their families with respect, trust, positive affect, and cultural sensitivity. (Learning Outcome D4)

0	1	2	3	4	5
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Behaviors

17. Professional Relationships- Student’s ability to work with other members of the health care team, showing respect for peers, preceptors and staff. (Learning Outcome E1)

0	1	2	3	4	5
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18. Proactive Behavior- Student’s ability to demonstrate self-directed learning, initiative to participate in patient care, and be an active member of the health care team. (Learning Outcome E2)

1	2	3	4	5
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19. Attendance and Effort- Student’s ability to be punctual, be available when needed, and follow-through on assigned work. (Learning Outcome E3)

0	1	2	3	4	5
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20. Overall Professional Conduct- Student is ethical, compassionate, patient centered, and acknowledges limitations and mistakes. (Learning Outcome E4)

0	1	2	3	4	5
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21. Knowledge of the Interprofessional Team – Student displays general understanding of the roles of the healthcare providers in family practice setting (Learning Outcome F1)

0	1	2	3	4	5
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Assessment of Competency: Competencies are the knowledge, interpersonal, clinical and technical skills, professional behaviors and clinical reasoning and problem-solving skills required for clinical practice. Please answer the following questions based on your observations of the student. *(For internal tracking only)*

22. During the Family Medicine rotation, the student demonstrated competency at providing care to patients in the following age groups.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Infants				
Children				
Adolescents				
Adults				
Elderly				

23. During the Family Medicine rotation, the student demonstrated competency at providing care in the following types of encounters.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Acute				
Chronic				
Preventive				
Emergent				

24. Narrative Comments

Please use the space below to elaborate on aspects of this student’s performance. Portions of this narrative may be used in program letters of recommendation.

25. Recommendations for Future Learning

Please use this space to summarize your suggestions for the student’s future learning. This information will be used as formative feedback.

26. Recommendations for Program

Do you have any suggestions for the PA program regarding curricular changes that would improve the student’s performance?

27. Overall Impression:

Do you feel that the student should pass this rotation?

Yes	No
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Comments:

28. Overall, how prepared was the student to participate at this clinical site?

(Please circle one)

Very prepared Adequately Prepared Underprepared

10 9 8 7 6 5 4 3 2 1 0

29. How many days was the student absent or late for rotation?

Absent	Late
--------	------

30. Have you discussed these findings with the student?

Yes	No
-----	----

Thank you for allowing our student to work with you.

University of Mount Saint Vincent PA Program

Gail Murphy

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UMSV 704 Internal Medicine (SCPE)

Internal Medicine Preceptor Evaluation

The following is the preceptor evaluation of the student. The learning outcome being assessed by the question for the SCPE follows the question in parenthesis.

STUDENT NAME:

SITE:

ROTATION NUMBER:

START DATE:

END DATE:

Please rate the student on each of the following elements using the following Likert scale:

0- Unable to evaluate - Not observed

1- Poor - Poor knowledge and/or skills; failing to improve

2- Below Average - Needs additional knowledge and/or skills to meet expectations; improving

3- Average - Adequate knowledge and skills; meets expectations and improving

4- Above Average - Great baseline knowledge and advanced skills: exceeds expectations

5- Outstanding - Excellent and consistent application of knowledge with superb skills

1. Student maintained HIPAA compliance at all times

0	1	2	3	4	5
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2. Acceptance of supervision and criticism

0	1	2	3	4	5
---	---	---	---	---	---

3. Student enthusiastic about accepting new challenges and responsibilities

0	1	2	3	4	5
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4. During the Internal Medicine rotation, the student experienced patient encounters in the following settings. (Check all that apply)

Outpatient	Inpatient	Emergency Department

Evaluation Area and Description:

For the purposes of this evaluation, please use the age group parameters and encounter type definitions listed below:

Age Groups:

- Infant:** 0-2 years old
- Child:** 2-12 years old
- Adolescents:** 13-18 years old
- Adult:** 19-65 years old
- Elderly:** >65 years old

Encounter Types:

- Acute:** symptoms or conditions for <6mos
- Chronic:** symptoms or condition for >6mos
- Preventive:** wellness visits or for preventative treatment
- Emergent:** life threatening condition or likely to become life threatening

Knowledge, Clinical and Technical Skills

5. Medical Knowledge- Student’s ability to demonstrate a strong fund of knowledge of pathophysiology, pharmacology, clinical and behavioral manifestations of disease and apply these to the care of patients in the following age groups. (Learning Outcome A1)

	1	2	3	4	5
Adults					
Elderly					

6. Evidence-Based Medicine- Student’s ability to demonstrate an understanding of medical research and evidence-based medicine and apply it to clinical practice in internal medicine. (Learning Outcome A2)

1	2	3	4	5
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7. Medical Interview- Student’s ability to utilize a range of communication and interpersonal skills to elicit a thorough history from patients in the following age groups (Learning Outcome B1)

	1	2	3	4	5
Adults					
Elderly					

8. Physical Examination- Student’s ability to perform an appropriate, specific, and accurate physical examination on patients in the following age groups recognizing normal and abnormal findings (Learning Outcome B 2)

	1	2	3	4	5
Adults					
Elderly					

9. Clinical Procedures– Student ability to perform or assist in procedures appropriate to the internal medicine setting and level of training. indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3)

0	1	2	3	4	5
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Clinical Reasoning and Problem Solving

10. Differential Diagnosis- Student’s ability to organize information gathered from the interview, physical exam and diagnostics tests to formulate a differential diagnosis, and assessment for patients presenting for the following types of care in internal medicine. (Learning Outcome C1) **Please answer for as many areas as possible.**

	Not Observed	1	2	3	4	5
Acute						
Chronic						
Preventive						
Emergent						

11. Diagnostic Studies- Student’s ability to choose appropriate diagnostic studies and interpret the results for the purpose of diagnosis and disease management for patients presenting for the following types of care in internal medicine. (Learning Outcome C2). **Please answer for as many areas as possible.**

	Not Observed	1	2	3	4	5
Acute						
Chronic						
Preventive						
Emergent						

12. Management Plans- Student’s ability to develop, initiate and follow through on appropriate management plans, that are consistent with patient’s needs and preferences, in the following types of encounters. (Learning Outcome C3). **Please answer for as many areas as possible.**

	Not Observed	1	2	3	4	5
Acute						
Chronic						
Preventive						
Emergent						

Interpersonal Skills

13. Oral Presentation- Student’s ability to orally present clinical information in a concise and coherent manner to the clinical preceptor and other members of the health care team. (Learning Outcome D1)

1	2	3	4	5
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14. Written Documentation- Student’s ability to summarize clinical information in an accurate and concise manner. (Learning Outcome D2)

1	2	3	4	5
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15. Patient Education- Student’s ability to provide appropriate health education and counseling to patients in the following age groups and their families if appropriate. (Learning Outcome D3). **Please answer for at least one age group.**

	Not Observed	1	2	3	4	5
Adults						
Elderly						

19. Patient Rapport- Student’s ability to interact with patients and their families with respect, trust, positive affect, and cultural sensitivity. (Learning Outcome D4)

1	2	3	4	5
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Behaviors

17. Professional Relationships- Student’s ability to work with other members of the health care team, showing respect for peers, preceptors and staff. (Learning Outcome E1)

1	2	3	4	5
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18. Proactive Behavior- Student’s ability to demonstrate self-directed learning, initiative to participate in patient care, and be an active member of the health care team. (Learning Outcome E2)

1	2	3	4	5
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19. Attendance and Effort- Student’s ability to be punctual, be available when needed, and follow-through on assigned work. (Learning Outcome E3)

1	2	3	4	5
---	---	---	---	---

20. Overall Professional Conduct- Student is ethical, compassionate, patient centered, and acknowledges limitations and mistakes. (Learning Outcome E4)

1	2	3	4	5
---	---	---	---	---

21. Knowledge of the Interprofessional Team – Student displays general understanding of the roles of the healthcare providers in internal medicine setting (Learning Outcome F1)

0	1	2	3	4	5
---	---	---	---	---	---

Assessment of Competency: Competencies are the knowledge, interpersonal, clinical and technical skills, professional behaviors and clinical reasoning and problem-solving skills required for clinical practice. Please answer the following questions based on your observations of the student. *(For internal tracking only)*

22. During the Internal Medicine rotation, the student demonstrated competency at providing care to patients in the following age groups.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Adults				
Elderly				

23. During the Internal Medicine rotation, the student demonstrated competency at providing care in the following types of encounters.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Acute				
Chronic				
Preventive				
Emergent				

24. Narrative Comments

Please use the space below to elaborate on aspects of this student’s performance. Portions of this narrative may be used in program letters of recommendation.

25. Recommendations for Future Learning

Please use this space to summarize your suggestions for the student’s future learning. This information will be used as formative feedback.

26. Recommendations for Program

Do you have any suggestions for the PA program regarding curricular changes that would improve the student’s performance?

27. Overall Impression:

Do you feel that the student should pass this rotation?

Yes	No
-----	----

Comments:

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28. Overall, how prepared was the student to participate at this clinical site?

(Please circle one)

Very prepared Adequately Prepared Underprepared
10 9 8 7 6 5 4 3 2 1 0

29. How many days was the student absent or late for this rotation?

Absent	Late
--------	------

30. Have you discussed these findings with the student?

Yes	No
-----	----

Thank you for allowing our student to work with you.

University of Mount Saint Vincent PA Program
Gail Murphy
Gail.lavinmurphy@mountsaintvincent.edu
718-405-3717



UMSV 705 Pediatrics (SCPE)

Pediatric Medicine Preceptor Evaluation

The following is the preceptor evaluation of the student. The learning outcome being assessed by the question for the SCPE follows the question in parenthesis.

STUDENT NAME:

SITE:

ROTATION NUMBER:

START DATE:

END DATE:

Please rate the student on each of the following elements using the following Likert scale:

0- Unable to evaluate - Not observed

1- Poor - Poor knowledge and/or skills; failing to improve

2- Below Average - Needs additional knowledge and/or skills to meet expectations, improving

3- Average - Adequate knowledge and skills; meets expectations and improving

4- Above Average - Great baseline knowledge and advanced skills: exceeds expectations

5- Outstanding - Excellent and consistent application of knowledge with superb skills

1. Student maintained HIPAA compliance at all times

0	1	2	3	4	5
---	---	---	---	---	---

2. Acceptance of supervision and criticism

0	1	2	3	4	5
---	---	---	---	---	---

3. Student enthusiastic about accepting new challenges and responsibilities

0	1	2	3	4	5
---	---	---	---	---	---

4. During Pediatric Medicine rotation, the student experienced patient encounters in the following settings. (Check all that apply)

Outpatient	Inpatient	Emergency Department	Operating Room

Evaluation Area and Description:

For the purposes of this evaluation, please use the age group parameters and encounter type definitions listed below:

Age Groups:

Infant: 0-2 years old

Child: 2-12 years old

Adolescents: 13-18 years old

Adult: 19-65 years old

Elderly: >65 years old

Encounter Types:

Acute: symptoms or conditions for <6mos

Chronic: symptoms or condition for >6mos

Preventive: wellness visits or for preventative treatment

Emergent: life threatening condition or likely to become life threatening

Knowledge, Clinical and Technical Skills

5. Medical Knowledge- Student’s ability to demonstrate a strong fund of knowledge of pathophysiology, pharmacology, clinical and behavioral manifestations of disease and apply these to the care of patients in the following age groups. (Learning Outcome A1)

	0	1	2	3	4	5
Infants						
Children						
Adolescents						
Adults						

6. Evidence-Based Medicine- Student’s ability to demonstrate an understanding of medical research and evidence-based medicine and apply it to clinical practice in pediatric medicine. (Learning Outcome A2)

1	2	3	4	5
---	---	---	---	---

7. Medical Interview- Student’s ability to utilize a range of communication and interpersonal skills to elicit a thorough history from patients, or their family members, in the following age groups (Learning Outcome B1)

	0	1	2	3	4	5
Infants						
Children						
Adolescents						
Adults						

8. Physical Examination- Student’s ability to perform an appropriate, specific, and accurate physical examination on patients in the following age groups recognizing normal and abnormal findings (Learning Outcome B 2)

	0	1	2	3	4	5
Infants						
Children						
Adolescents						
Adults						

9. Clinical Procedures– Student ability to perform or assist in procedures appropriate to the pediatric medicine setting and level of training. indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3)

0	1	2	3	4	5
---	---	---	---	---	---

Clinical Reasoning and Problem Solving

10. Differential Diagnosis- Student’s ability to organize information gathered from the interview, physical exam and diagnostics tests to formulate a differential diagnosis, and assessment for patients presenting for the following types of care in pediatric medicine. (Learning Outcome C1)

	0	1	2	3	4	5
Acute						
Chronic						
Emergent						
Preventative						

11. Diagnostic Studies- Student’s ability to choose appropriate diagnostic studies and interpret the results for the purpose of diagnosis and disease management for patients presenting for the following types of care in pediatric medicine. (Learning Outcome C2)

	0	1	2	3	4	5
Acute						
Chronic						
Emergent						
Preventative						

12. Management Plans- Student’s ability to develop, initiate and follow through on appropriate management plans, that are consistent with patient’s needs and preferences, in the following types of encounters. (Learning Outcome C3)

	0	1	2	3	4	5
Acute						
Chronic						
Emergent						
Preventative						

Interpersonal Skills

13. Oral Presentation- Student’s ability to orally present clinical information in a concise and coherent manner to the clinical preceptor and other members of the health care team. (Learning Outcome D1)

1	2	3	4	5
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14. Written Documentation- Student’s ability to summarize clinical information in an accurate and concise manner. (Learning Outcome D2)

1	2	3	4	5
---	---	---	---	---

15. Patient Education- Student’s ability to provide appropriate health education and counseling to the family member of a patient in the following age groups and to the patient, if age appropriate. (Learning Outcome D3)

	0	1	2	3	4	5
Infants						
Children						
Adolescents						
Adults						

16. Patient Rapport- Student’s ability to interact with patients and their families with respect, trust, positive affect, and cultural sensitivity. (Learning Outcome D4)

0	1	2	3	4	5
---	---	---	---	---	---

Behaviors

17. Professional Relationships- Student’s ability to work with other members of the health care team, showing respect for peers, preceptors and staff. (Learning Outcome E1)

0	1	2	3	4	5
---	---	---	---	---	---

18. Proactive Behavior- Student’s ability to demonstrate self-directed learning, initiative to participate in patient care, and be an active member of the health care team. (Learning Outcome E2)

0	1	2	3	4	5
---	---	---	---	---	---

19. Attendance and Effort- Student’s ability to be punctual, be available when needed, and follow-through on assigned work. (Learning Outcome E3)

0	1	2	3	4	5
---	---	---	---	---	---

20. Overall Professional Conduct- Student is ethical, compassionate, patient centered, and acknowledges limitations and mistakes. (Learning Outcome E4)

0	1	2	3	4	5
---	---	---	---	---	---

21. Knowledge of the Interprofessional Team – Student displays general understanding of the roles of the healthcare providers in pediatric setting (Learning Outcome F1)

0	1	2	3	4	5
---	---	---	---	---	---

Assessment of Competency: Competencies are the knowledge, interpersonal, clinical and technical skills, professional behaviors and clinical reasoning and problem-solving skills required for clinical practice. Please answer the following questions based on your observations of the student. *(For internal tracking only)*

22. During the Pediatrics rotation, the student demonstrated competency at providing care to patients in the following age groups.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Infants				
Children				
Adolescents				
Adults				
Elderly				

23. During the Pediatrics rotation, the student demonstrated competency at providing care in the following types of encounters.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Acute				
Chronic				
Preventive				
Emergent				

24. Narrative Comments

Please use the space below to elaborate on aspects of this student’s performance. Portions of this narrative may be used in program letters of recommendation.

25. Recommendations for Future Learning

Please use this space to summarize your suggestions for the student’s future learning. This information will be used as formative feedback.

26. Recommendations for Program

Do you have any suggestions for the PA program regarding curricular changes that would improve the student's performance?

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27. Overall Impression:

Do you feel that the student should pass this rotation?

Yes	No
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28. Overall, how prepared was the student to participate at this clinical site?

(Please circle one)

Very prepared Adequately Prepared Underprepared
10 9 8 7 6 5 4 3 2 1 0

29. How many days was the student absent or late for this rotation?

Absent	Late
--------	------

30. Have you discussed these findings with the student?

Yes	No
-----	----

Thank you for allowing our student to work with you.

University of Mount Saint Vincent PA Program

Gail Murphy

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718-405-3717



PAS 706 Surgery (SCPE)

Surgery Preceptor Evaluation

The following is the preceptor evaluation of the student. The learning outcome being assessed by the question for the SCPE follows the question in parenthesis

STUDENT NAME:

SITE:

ROTATION NUMBER:

START DATE:

END DATE:

Please rate the student on each of the following elements using the following Likert scale:

- 0- Unable to evaluate - Not observed
- 1- Poor - Poor knowledge and/or skills; failing to improve
- 2- Below Average - Needs additional knowledge and/or skills to meet expectations; improving
- 3- Average - Adequate knowledge and skills; meets expectations and improving
- 4- Above Average - Great baseline knowledge and advanced skills: exceeds expectations
- 5- Outstanding - Excellent and consistent application of knowledge with superb skills

1. Student maintained HIPAA compliance at all times

0	1	2	3	4	5
---	---	---	---	---	---

2. Acceptance of supervision and criticism

0	1	2	3	4	5
---	---	---	---	---	---

3. Student enthusiastic about accepting new challenges and responsibilities

0	1	2	3	4	5
---	---	---	---	---	---

4. During the Surgery rotation, the student experienced patient encounters in the following settings. (Check all that apply)

Outpatient	Inpatient	Emergency Department	Operating Room

Evaluation Area and Description:

For the purposes of this evaluation, please use the age group parameters and encounter type definitions listed below:

Age Groups:

Infant: 0-2 years old

Child: 2-12 years old

Adolescents: 13-18 years old

Adult: 19-65 years old

Elderly: >65 years old

Encounter Types:

Acute: symptoms or conditions for <6mos

Chronic: symptoms or condition for >6mos

Preventive: wellness visits or for preventative treatment

Emergent: life threatening conditions or likely to become life threatening.

Knowledge, Clinical and Technical Skills

5. Medical Knowledge- Student’s ability to demonstrate a strong fund of knowledge of pathophysiology, pharmacology, clinical and behavioral manifestations of disease and apply these to the care of the patients presenting with conditions requiring surgical management in the following age groups. (Learning Outcome A1)

	0	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

6. Evidence-Based Medicine- Student’s ability to demonstrate an understanding of medical research and evidence-based medicine and apply it to the care of a patient presenting with a condition requiring surgical management. (Learning Outcome A2)

1	2	3	4	5

7. Medical Interview- Student’s ability to utilize a range of communication and interpersonal skills to elicit a thorough history from a patient presenting with a condition requiring surgical management in the following age groups. (Learning Outcome B1)

	0	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

8. Physical Examination- Student’s ability to perform a focused physical examination on a patient with a

condition requiring surgical management in the following setting, recognizing normal and abnormal findings (Learning Outcome B 2)

	0	1	2	3	4	5
Pre-operative						
Intra-operative						
Post-operative						
Acute						
Chronic						
Preventative						
Emergent						

9. Clinical Procedures– Student ability to perform or assist in the performance of common procedures during the care of the patient with a condition requiring surgical care in the following settings. indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3)

	Pass	Fail	Not Observed
<u>Pre-operative</u>			
Pre-op assessment/plan			
Self-gowning & gloving			
Scrubbing			
Positioning in OR and on the operative table			
<u>Intra-operative</u>			
Sterile technique while assisting in OR			
Intraoperative knot tying			
Wound closure			
Staple insertion			
Brief operative note			
Participation in open or laparoscopic or robotic surgery			
<u>Post-operative</u>			
Perform post-op evaluation			
Providing discharge instructions to patients			
Wound care			

Documentation: Discharge summary			
Documentation: Post-op SOAP note			
Staple removal			
Suture removal			
Review patient education and discharge instructions with patient			

Clinical Reasoning and Problem Solving

10. Differential Diagnosis- Student’s ability to organize information gathered from the interview, physical exam and diagnostics tests to formulate a differential diagnosis, and assessment of patients presenting with a condition requiring surgical management in the following types of encounters. (Learning Outcome C1)

	0	1	2	3	4	5
Acute						
Chronic						
Emergent						
Preventative						

11. Diagnostic Studies- Student’s ability to choose appropriate diagnostic studies and interpret the results for the purpose of diagnosis and disease management for patients with a condition requiring surgical management in the following settings. (Learning Outcome C2)

	0	1	2	3	4	5
Pre-operative						
Intra-operative						
Post-operative						

12. Management Plans- Student’s ability to develop, initiate and follow through on appropriate management plans that are consistent with the patient’s needs and preferences in the following surgical settings. (Learning Outcome C3)

	0	1	2	3	4	5
Pre-operative						
Intraoperative						
Post-operative						
Acute						
Chronic						
Preventative						

Emergent						
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Interpersonal Skills

13. Oral Presentation- Student’s ability to orally present clinical information in a concise and coherent manner to the clinical preceptor and other members of the health care team. (Learning Outcome D1)

1	2	3	4	5
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14. Written Documentation- Student’s ability to summarize clinical information in an accurate and concise manner. (Learning Outcome D2)

1	2	3	4	5
----------	----------	----------	----------	----------

15. Patient Education- Student’s ability to provide appropriate health education and counseling to surgical patients in the following settings. (Learning Outcome D3)

	0	1	2	3	4	5
Pre-operative						
Post-operative						
Acute						
Chronic						
Preventative						
Emergent						

16. Patient Rapport- Student’s ability to interact with patients and their families with respect, trust, positive affect, and cultural sensitivity. (Learning Outcome D4)

0	1	2	3	4	5
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Behaviors

17. Professional Relationships- Student’s ability to work with other members of the health care team, showing respect for peers, preceptors and staff. (Learning Outcome E1)

0	1	2	3	4	5
----------	----------	----------	----------	----------	----------

18. Proactive Behavior- Student’s ability to demonstrate self-directed learning, initiative to participate in patient care, and be an active member of the health care team. (Learning Outcome E2)

0	1	2	3	4	5
---	---	---	---	---	---

19. Attendance and Effort- Student’s ability to be punctual, be available when needed, and follow-through on assigned work. (Learning Outcome E3)

0	1	2	3	4	5
---	---	---	---	---	---

20. Overall Professional Conduct- Student is ethical, compassionate, patient centered, and acknowledges limitations and mistakes. (Learning Outcome E4)

0	1	2	3	4	5
---	---	---	---	---	---

21. Knowledge of the Interprofessional Team – Student displays general understanding of the roles of the healthcare providers in the surgical setting (Learning Outcome F1)

0	1	2	3	4	5
---	---	---	---	---	---

Assessment of Competency: Competencies are the knowledge, interpersonal, clinical and technical skills, professional behaviors and clinical reasoning and problem-solving skills required for clinical practice. Please answer the following questions based on your observations of the student. *(For internal tracking only)*

22. During the Surgery rotation, the student demonstrated competency at providing care to patients in the following age groups.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Infants				
Children				
Adolescents				
Adults				
Elderly				

23. During the Surgery rotation, the student demonstrated competency at providing care in the following types of encounters. (Please score 0 if not observed)

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Acute				
Chronic				
Preventive				

Emergent				
Pre-operative				
Intra-operative				
Post-operative				

24. Narrative Comments

Please use the space below to elaborate on aspects of this student’s performance. Portions of this narrative may be used in program letters of recommendation.

25. Recommendations for Future Learning

Please use this space to summarize your suggestions for the student’s future learning. This information will be used as formative feedback.

26. Recommendations for Program

Do you have any suggestions for the PA program regarding curricular changes that would improve the student’s performance?

27. Overall Impression:

Do you feel that the student should pass this rotation?

Yes	No
-----	----

Comments:

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28. Overall, how prepared was the student to participate at this clinical site?

(Please circle one)

Very prepared Adequately Prepared Underprepared
10 9 8 7 6 5 4 3 2 1 0

29. How many days was the student absent or late for this rotation?

Absent	Late

30. Have you discussed these findings with the student?

Yes	No

Thank you for allowing our student to work with you.

College of Mount Saint Vincent PA Program
Gail Murphy
Gail.lavinmurphy@mountsaintvincent.edu
718-405-3717



UMSV 707 Women’s Health/OB-GYN (SCPE)

Women’s Health/OB-Gyn Preceptor Evaluation

The following is the preceptor evaluation of the student. The learning outcome being assessed by the question for the SCPE follows the question in parenthesis.

STUDENT NAME:

SITE:

ROTATION NUMBER:

START DATE:

END DATE:

Please rate the student on each of the following elements using the following Likert scale:

0- Unable to evaluate - Not observed

1- Poor - Poor knowledge and/or skills; failing to improve

2- Below Average - Needs additional knowledge and/or skills to meet expectations, improving

3- Average - Adequate knowledge and skills; meets expectations and improving

4- Above Average - Great baseline knowledge and advanced skills: exceeds expectations

5- Outstanding - Excellent and consistent application of knowledge with superb skills

1. Student maintained HIPAA compliance at all times

0	1	2	3	4	5
---	---	---	---	---	---

2. Acceptance of supervision and criticism

0	1	2	3	4	5
---	---	---	---	---	---

3. Student enthusiastic about accepting new challenges and responsibilities

0	1	2	3	4	5
---	---	---	---	---	---

4. During Obstetrics and Gynecology rotation, the student experienced patient encounters in the following settings. (Check all that apply)

Outpatient	Inpatient	Emergency Department	Operating Room

Evaluation Area and Description:

For the purposes of this evaluation, please use the age group parameters and encounter type definitions listed below:

Age Groups:

Infant: 0-2 years old

Child: 2-12 years old

Adolescents: 13-18 years old

Adult: 19-65 years old

Elderly: >65 years old

Encounter Types:

Acute: symptoms or conditions for <6mos

Chronic: symptoms or condition for >6mos

Preventive: wellness visits or for preventative treatment

Emergent: life threatening condition or likely to become life threatening

Knowledge, Clinical and Technical Skills

5. Medical Knowledge- Student’s ability to demonstrate a strong fund of knowledge of pathophysiology, pharmacology, clinical and behavioral manifestations of disease and apply these to the care of patients seeking women’s health in the following age groups. (Learning Outcome A1)

	0	1	2	3	4	5
Adolescents						
Adults						
Elderly						

6. Evidence-Based Medicine- Student’s ability to demonstrate an understanding of medical research and evidence-based medicine and apply it to clinical practice in obstetrics and gynecology. (Learning Outcome A2)

1	2	3	4	5
---	---	---	---	---

7. Medical Interview- Student’s ability to utilize a range of communication and interpersonal skills to elicit a thorough history from patients seeking women’s health in the following age groups (Learning Outcome B1)

	0	1	2	3	4	5
Adolescents						
Adults						
Elderly						

8. Physical Examination- Student’s ability to perform an appropriate, specific, and accurate physical examination on patients seeking women’s health in the following age groups recognizing normal and abnormal findings (Learning Outcome B 2)

	0	1	2	3	4	5
Adolescents						
Adults						
Elderly						

9. Clinical Procedures– Student ability to perform or assist in medical and surgical procedures appropriate to the obstetrics and gynecology setting and level of training. indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3)

0	1	2	3	4	5
---	---	---	---	---	---

Student ability to perform or assist in the performance of common procedures during the care of the patient with a condition requiring surgical care in the following settings. indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3)

	0	1	2	3	4	5
Pre-operative						
Intra-operative						
Post-operative						

Clinical Reasoning and Problem Solving

10. Differential Diagnosis- Student’s ability to organize information gathered from the interview, physical exam and diagnostics tests to formulate a differential diagnosis, and assessment for patients seeking women’s health presenting for the following types of care. (Learning Outcome C1)

	0	1	2	3	4	5
Gynecologic						
Acute						
Chronic						
Preventive						
Emergent						
Prenatal						

11. Diagnostic Studies- Student’s ability to choose appropriate diagnostic studies and interpret the results for the purpose of diagnosis and disease management for patients presenting for the following types of care in obstetrics and gynecology. (Learning Outcome C2)

	0	1	2	3	4	5
Gynecologic						
Acute						
Chronic						
Preventive						
Emergent						
Prenatal						
Pre-operative						
Post-operative						

12. Management Plans- Student’s ability to develop, initiate and follow through on appropriate management plans for the patient seeking women’s health that are consistent with patient’s needs and preferences in the following types of encounters. (Learning Outcome C3)

	0	1	2	3	4	5
Gynecologic						
Acute						
Chronic						
Preventive						
Emergent						
Prenatal						
Pre-operative						
Post-operative						

Interpersonal Skills

13. Oral Presentation- Student’s ability to orally present clinical information in a concise and coherent manner to the clinical preceptor and other members of the health care team. (Learning Outcome D1)

0	1	2	3	4	5
---	---	---	---	---	---

14. Written Documentation- Student’s ability to summarize clinical information in an accurate and concise manner. (Learning Outcome D2)

0	1	2	3	4	5
---	---	---	---	---	---

15. Patient Education- Student’s ability to provide appropriate health education and counseling to patients seeking women’s health in the following age groups and their families if appropriate. (Learning Outcome D3)

	0	1	2	3	4	5
Adolescents						
Adults						
Elderly						

16. Patient Rapport- Student’s ability to interact with patients and their families with respect, trust, positive affect, and cultural sensitivity. (Learning Outcome D4)

0	1	2	3	4	5
---	---	---	---	---	---

Behaviors

17. Professional Relationships- Student’s ability to work with other members of the health care team, showing respect for peers, preceptors and staff. (Learning Outcome E1)

0	1	2	3	4	5
---	---	---	---	---	---

18. Proactive Behavior- Student’s ability to demonstrate self-directed learning, initiative to participate in patient care, and be an active member of the health care team. (Learning Outcome E2)

0	1	2	3	4	5
---	---	---	---	---	---

19. Attendance and Effort- Student’s ability to be punctual, be available when needed, and follow-through on assigned work. (Learning Outcome E3)

0	1	2	3	4	5
---	---	---	---	---	---

20. Overall Professional Conduct- Student is ethical, compassionate, patient centered, and acknowledges limitations and mistakes. (Learning Outcome E4)

0	1	2	3	4	5
---	---	---	---	---	---

21. Knowledge of the Interprofessional Team – Student displays general understanding of the roles of the healthcare providers in Women’s Health/OB-GYN setting (Learning Outcome F1)

0	1	2	3	4	5
---	---	---	---	---	---

Assessment of Competency: Competencies are the knowledge, interpersonal, clinical and technical skills, professional behaviors and clinical reasoning and problem-solving skills required for clinical practice. Please answer the following questions based on your observations of the student. *(For internal tracking only)*

22. During obstetrics and gynecology rotation, the student demonstrated competency at providing care to patients in the following age groups.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Infants				
Children				
Adolescents				
Adults				
Elderly				

23. During the obstetrics and gynecology rotation, the student demonstrated competency at providing care in the following types of encounters. (Please score 0 if not observed)

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Acute				
Chronic				
Preventive				
Emergent				
Prenatal				
Gynecologic				

24. Narrative Comments

Please use the space below to elaborate on aspects of this student’s performance. Portions of this narrative may be used in program letters of recommendation.

25. Recommendations for Future Learning

Please use this space to summarize your suggestions for the student’s future learning. This information will be used as formative feedback.

26. Recommendations for Program

Do you have any suggestions for the PA program regarding curricular changes that would improve the student’s performance?



UMSV 708 Elective (SCPE)

Elevation Rotation Preceptor Evaluation of Student (PES)

The following is the preceptor evaluation of the student. The learning outcome being assessed by the question for the SCPE follows the question in parenthesis.

STUDENT NAME:

SITE:

ROTATION NUMBER:

START DATE:

END DATE:

ELECTIVE ROTATION DISCIPLINE:

Please rate the student on each of the following elements using the following Likert scale:

- 0- Unable to evaluate - Not observed
- 1- Poor - Poor knowledge and/or skills; failing to improve
- 2- Below Average - Needs additional knowledge and/or skills to meet expectations; improving
- 3- Average - Adequate knowledge and skills; meets expectations and improving
- 4- Above Average - Great baseline knowledge and advanced skills: exceeds expectations
- 5- Outstanding - Excellent and consistent application of knowledge with superb skills

1. Student maintained HIPAA compliance at all times

0	1	2	3	4	5
----------	----------	----------	----------	----------	----------

2. Acceptance of supervision and criticism

0	1	2	3	4	5
----------	----------	----------	----------	----------	----------

3. Student enthusiastic about accepting new challenges and responsibilities

0	1	2	3	4	5
----------	----------	----------	----------	----------	----------

4. During the elective rotation, the student experienced patient encounters in the following settings. (Check all that apply)

Outpatient	Inpatient	Emergency Department	Operating Room

Evaluation Area and Description:

For the purposes of this evaluation, please use the age group parameters and encounter type definitions listed below:

Age Groups:

- Infant: 0-2 years old
- Child: 2-12 years old
- Adolescents: 13-18 years old
- Adult: 19-65 years old
- Elderly: >65 years old

Encounter Types:

- Acute:** symptoms or conditions for <6mos
- Chronic:** symptoms or condition for >6mos
- Preventive:** wellness visits or for preventative treatment
- Emergent:** life threatening condition or likely to become life threatening

Knowledge, Clinical and Technical Skills

5. Medical Knowledge- Student’s ability to demonstrate a strong fund of knowledge of pathophysiology, pharmacology, clinical and behavioral manifestations of disease and apply these to the care of patients in the following age groups. (Learning Outcome A1). **Please answer for as many age groups as possible.**

	Not Observed	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

6. Evidence-Based Medicine- Student’s ability to demonstrate an understanding of medical research and evidence-based medicine and apply it to clinical practice in this rotation. (Learning Outcome A2)

1	2	3	4	5

7. Medical Interview- Student’s ability to utilize a range of communication and interpersonal skills to elicit a thorough history from patients in the following age groups (Learning Outcome B1). **Please answer for as many age groups as possible.**

	Not Observed	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

8. Physical Examination- Student’s ability to perform an appropriate, specific, and accurate physical examination on patients in the following age groups recognizing normal and abnormal findings (Learning Outcome B 2). **Please answer for as many age groups as possible.**

	Not Observed	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

12. Clinical Procedures– Student ability to perform or assist in procedures appropriate to this setting and level of training, indicate which procedure that student demonstrated competency on the clinical skills and clinical procedures check off list (Learning Outcome B3)

0	1	2	3	4	5

Clinical Reasoning and Problem Solving

10. Differential Diagnosis- Student’s ability to organize information gathered from the interview, physical exam and diagnostics tests to formulate a differential diagnosis, and assessment for patients presenting for the following types of care in this rotation. (Learning Outcome C1). **Please answer for as many areas as possible.**

	Not Observed	1	2	3	4	5
Acute						
Chronic						
Emergent						
Preventative						

11. Diagnostic Studies- Student’s ability to choose appropriate diagnostic studies and interpret the results for the purpose of diagnosis and disease management for patients presenting for the following types of care in this rotation. (Learning Outcome C2). **Please answer for as many areas that apply.**

	Not Observed	1	2	3	4	5
Acute						
Chronic						
Emergent						
Preventative						
Pre-operative						
Post-operative						
Prenatal						
Gynecologic						

12. Management Plans- Student’s ability to develop, initiate and follow through on appropriate management plans, that are consistent with patient’s needs and preferences, in the following types of encounters. (Learning Outcome C3). **Please answer for as many areas that apply.**

	Not Observed	1	2	3	4	5
Acute						
Chronic						
Emergent						
Preventative						
Pre-operative						
Post-operative						
Prenatal						
Gynecologic						

Interpersonal Skills

13. Oral Presentation- Student’s ability to orally present clinical information in a concise and coherent manner to the clinical preceptor and other members of the health care team. (Learning Outcome D1)

1	2	3	4	5
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14. Written Documentation- Student’s ability to summarize clinical information in an accurate and concise manner. (Learning Outcome D2)

1	2	3	4	5
----------	----------	----------	----------	----------

15. Patient Education- Student’s ability to provide appropriate health education and counseling to patients in the following age groups and their families if appropriate. (Learning Outcome D3)

Please answer for as many age groups as possible.

	Not Observed	1	2	3	4	5
Infant						
Child						
Adolescent						
Adult						
Elderly						

16. Patient Rapport- Student’s ability to interact with patients and their families with respect, trust, positive affect, and cultural sensitivity. (Learning Outcome D4)

1	2	3	4	5
----------	----------	----------	----------	----------

Behaviors

17. Professional Relationships- Student’s ability to work with other members of the health care team, showing respect for peers, preceptors and staff. (Learning Outcome E1)

1	2	3	4	5
---	---	---	---	---

18. Proactive Behavior- Student’s ability to demonstrate self-directed learning, initiative to participate in patient care, and be an active member of the health care team. (Learning Outcome E2)

1	2	3	4	5
---	---	---	---	---

19. Attendance and Effort- Student’s ability to be punctual, be available when needed, and follow-through on assigned work. (Learning Outcome E3)

1	2	3	4	5
---	---	---	---	---

20. Overall Professional Conduct- Student is ethical, compassionate, patient centered, and acknowledges limitations and mistakes. (Learning Outcome E4)

1	2	3	4	5
---	---	---	---	---

21. Knowledge of the Interprofessional Team – Student displays general understanding of the roles of the healthcare providers in this setting (Learning Outcome F1)

0	1	2	3	4	5
---	---	---	---	---	---

Assessment of Competency: Competencies are the knowledge, interpersonal, clinical and technical skills, professional behaviors and clinical reasoning and problem-solving skills required for clinical practice. Please answer the following questions based on your observations of the student. *(For internal tracking only)*

22. During this rotation, the student demonstrated competency at providing care to patients in the following age groups.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Infants				
Children				
Adolescents				
Adults				
Elderly				

23. During this rotation, the student demonstrated competency at providing care in the following types of encounters.

	Not Observed	Needs Improvement	Meets Expectations for Level of Training	Exceeds Expectations
Acute				
Chronic				
Preventative				
Emergent				
Preoperative				
Intraoperative				
Postoperative				
Prenatal				
Gynecological				
Behavioral Health				

24. Narrative Comments

Please use the space below to elaborate on aspects of this student’s performance. Portions of this narrative may be used in program letters of recommendation.

25. Recommendations for Future Learning

Please use this space to summarize your suggestions for the student’s future learning. This information will be used as formative feedback.

26. Recommendations for Program

Do you have any suggestions for the PA program regarding curricular changes that would improve the student’s performance?

27. Overall Impression:

Do you feel that the student should pass this rotation?

Yes	No
-----	----

Comments:

--

28. Overall, how prepared was the student to participate at this clinical site?

(Please circle one)

Very prepared Adequately Prepared Underprepared
10 9 8 7 6 5 4 3 2 1 0

29. How many days was the student absent or late for rotation?

Absent	Late
--------	------

30. Have you discussed these findings with the student?

Yes	No
-----	----

Thank you for allowing our student to work with you.

University of Mount Saint Vincent PA Program
Gail Murphy
Gail.lavinmurphy@mountsaintvincent.edu
718-405-3717



UNIVERSITY OF MOUNT SAINT VINCENT

SCPE Professionalism Evaluation for UMSV 701-708 University of Mount Saint Vincent-Physician Assistant Program

Student: _____ Evaluation Date: _____ Evaluator: _____

4 = Outstanding	3 = Satisfactory	2 = Needs Improvement	1 = Unsatisfactory
-----------------	------------------	-----------------------	--------------------

Check Rating:

4	3	2	1	
				Personal Accountability
				Completed credentialing in a timely manner
				Submitted Orientation Checklist in a timely manner
				Submitted Rotation Timesheet in a timely manner
				Submitted mid-rotation self-evaluation in a timely manner
				Student submits all required assignments on-time in a professional format
				Notifies faculty in a timely manner if unable to attend rotation
				Respectful to the Rights of Others
				Respectful to faculty
				Respectful to all other students
				Listens attentively
				Demonstrates by individual actions cultural, gender, ethnic and racial sensitivity
				Professionalism
				On Time for Call Back Day
				Participated fully in Call Back Day
				Accepts guidance from faculty with regard to professional behavior
				Committed to enhancing professional growth
				Maintains professional demeanor
				Communication Skills
				Communicated with PA Program when needed during rotation
				Uses appropriate verbal and non-verbal communication skills
				Ability to Learn Effectively and be a Positive Classroom Influence
				Contributes to the overall classroom discussion in an effective manner
				Has to the ability to assist other classmates effectively
				Is a positive influence within the classroom environment

If student receives two or more scores less than satisfactory, they will be referred to the Professionalism Conduct Review Committee

Clinical Coordinator Signature: _____ **Date:** _____
Student Signature*: _____ **Date:** _____

*Signature indicates that the professional performance evaluation has been reviewed with the student.



UNIVERSITY OF MOUNT SAINT VINCENT

Student Evaluation of Clinical Site UMSV 326

1. Please rate the Clinical Clerkship Site according to the following scale:

5=Superior

4.=Very Good

3=Good

2=Fair

1=Poor

N/A=Non-Applicable

TOPIC	5	4	3	2	1	N/A	Comments
Adequate supervision of students							
Opportunity to perform clinical procedures							
Integration of student into part of medical team							
Quality of teaching							
Quality of the department conferences (if applicable)							
Ability of the clerkship to permit student achievement of stated objectives							

Ease of Travel to and from the facility							
Availability of on-site parking for student							
Safety of Surrounding Neighborhood							
Personal safety upon leaving clinical site							
Overall site safety (Consider safety if on-call)							
Security/safety protocol was reviewed with me							
Cleanliness of the clinical site medical facilities							

Please rate the Clinical Clerkship Site according to the following scale:

5=Superior

4.=Very Good

3=Good

2=Fair

1=Poor

N/A=Non-Applicable

TOPIC	5	4	3	2	1	N/A	Comments
Credentialing process							
Ease of obtaining meals when on-call							
Helpfulness of ancillary medical staff							
Treated Professionally by clinical site preceptor (PA-C)							
Treated Professionally by attending medical staff (MD/DO)							
Treated Professionally by medical residents and other PA staff (if applicable)							
My concerns were addressed quickly and professionally with regard to rotation							
My overall impression of this clinical site taking into account all of the above factors							

I would recommend this clinical clerkship to other Physician Assistant Students

YES _____

NO _____

Student Name _____

Institution _____

Rotation Discipline _____

Date _____



UNIVERSITY OF MOUNT SAINT VINCENT

Professional Development Assessment Tool (P-DAT) University of Mount Saint Vincent-Physician Assistant Program

Student: _____ Evaluation Date: _____ Advisor/Evaluator: _____

1 = Outstanding	2 = Satisfactory	3 = Needs Improvement	4 = Unsatisfactory
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Check Rating:

1	2	3	4	
				Personal Accountability
				Participates responsibly in learning activities
				Adheres to institutional policies and procedures
				Is on-time for all learning activities
				Is well prepared for all lecture and lab activities
				Student submits all required assignments on-time in a professional format
				Notifies faculty in a timely manner if unable to attend class or complete assignments
				Maintains confidentiality standards
				Freely admits errors and assumes responsibility
				Ethical, e.g., identifies/reports unprofessional behavior, truthful
				Committed to ethical principles of the PA profession
				Is not self-promoting at another student's expense
				Adheres to the decisions of all senior faculty and administration
				Respectful to the Rights of Others
				Addresses all Faculty Professionally utilizing appropriate titles
				Respectful to faculty
				Respectful to all other students
				Listens attentively
				Respectful to UMSV Administrative staff
				Honors the choices and the rights of others
				Demonstrates respect, empathy, and compassion for patients and colleagues
				Maintains patient confidentiality adhering to all HIPPA guidelines
				Demonstrates by individual actions cultural, gender, ethnic and racial sensitivity
				Professionalism
				Able to accept and offer constructive criticism
				Maintains a professional appearance at all times
				Maintains a professional demeanor during times of stress
				Committed to enhancing professional growth
				Integrates well into the medical interprofessional team model
				Incorporates feedback to make positive behavioral changes when necessary

				Acts professional when interacting with other students
				Accepts guidance from faculty with regard to professional behavior
				Adaptable to circumstances that come up unexpectedly
				Uses appropriate language at all times
				Communication Skills
				Is able to effectively communicate position to other medical professionals
				Able to effectively relay information
				Able to effectively deliver "bad news"
				Utilizes common clear language when relaying information to patient & family
				Has the ability to be an effective listener
				Uses appropriate verbal and non-verbal communication skills
				Uses language appropriate to setting
				Shows compassion in discussions with patients and family members
				Understands the importance of utilizing a translator when necessary
				Ability to Learn Effectively and be a Positive Classroom Influence
				Has the ability to identify academic weaknesses and correct the deficiency
				Has mastered time-management skills effectively
				Has developed effective study skills
				Understands and applies critical thinking skills
				Contributes to the overall classroom discussion in an effective manner
				Has to the ability to assist other classmates effectively
				Is a positive influence within the classroom environment
				Responds to the needs of others without regard to self-interest
				Contributes to creating an atmosphere conducive to learning

Comments and when applicable a Remediation Plan offered by advisor:

Advisor Signature: _____ Date: _____

Student Signature*: _____ Date: _____

*Signature indicates that the professional performance evaluation has been reviewed with the student.



UNIVERSITY OF MOUNT SAINT VINCENT

Preceptor Evaluation of Student Preparedness for Rotations Evaluation Form

	(5.0) <i>Excellent</i>	(4.0) <i>Above Average</i>	(3.0) <i>Average</i>	(2.0) <i>Below Average</i>	(1.0) <i>Unsatisfactory</i>	<i>Not Observed N/A</i>
Patient Encounters						
Medical Interview Skills						
Ability to perform a complete physical examination						
Ability to adequately prepare an Assessment/Differential Diagnosis List						
Ability to adequately defend the Assessment/Differential Diagnosis List						
Oral Case Presentation Ability						
Ability to Form a patient Treatment/Management Plan						
Ability to order appropriate lab tests on patients						
Ability to interpret cost effectiveness of laboratory and diagnostic imaging tests ordered						
Ability to order appropriate diagnostic imaging						
Critical Thinking Skills						
Prescription writing skills						
Chart/EMR documentation knowledge skills						
Professionalism	(5.0) <i>Excellent</i>	(4.0) <i>Above Average</i>	(3.0) <i>Average</i>	(2.0) <i>Below Average</i>	(1.0) <i>Unsatisfactory</i>	<i>Not Observed N/A</i>
Maintained professional demeanor with patients and their family						
Maintained professional demeanor with healthcare team and staff						
Reliable and dependable						
Positive attitude						
Professional appearance						
Demonstrated nondiscrimination practices towards peers, faculty, staff and patients.						
Acceptance of supervision and criticism						
Acceptance of responsibility						
Clinical Skills	(5.0) <i>Excellent</i>	(4.0) <i>Above Average</i>	(3.0) <i>Average</i>	(2.0) <i>Below Average</i>	(1.0) <i>Unsatisfactory</i>	<i>Not Observed N/A</i>

Ability to Perform Clinical Procedures						
Interpersonal & Communication	(5.0) Excellent	(4.0) Above Average	(3.0) Average	(2.0) Below Average	(1.0) Unsatisfactory	Not Observed N/A
Uses Effective communication skills to elicit patient information						
Uses Effective communication skills to provide effective patient, family and caregiver education						
Communicates effectively with physicians and other health care professionals						
Understood the role of the physician assistant						
Medical Knowledge	(5.0) Excellent	(4.0) Above Average	(3.0) Average	(2.0) Below Average	(1.0) Unsatisfactory	Not Observed N/A
Understands etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions encountered during the clinical rotation						
Understands the diagnostic signs and symptoms of medical and surgical conditions encountered during the clinical rotation						
Ability to properly interpret appropriate diagnostic studies that were ordered and relate these to the medical condition encountered						
Has shown the ability to effectively manage general medical and surgical conditions to include pharmacologic and other treatment modalities						
Effectively correlates medical history obtained and physical findings with development of an initial differential diagnosis						

Additional Comments:

Preceptor Name _____

Student Name _____

Institution _____

Preceptor Signature _____

Date _____



**Clinical Preceptor Assessment
Core Competencies for New Physician Assistant Graduates**

Domain	Excellent 5.0	Above Average 4.0	Average 3.0	Below Average 2.0	Unsatisfactory 1.0
I. Patient Centered Practice Knowledge					
COMPETENCIES					
<i>Recognizes normal and abnormal health states</i>					
<i>Discerns among acute, chronic, and emerging disease states</i>					
<i>Elicit and understand the stories of individual patients and apply the context of their lives (including environmental influences, cultural norms, socioeconomic factors, and beliefs) when determining healthy versus ill</i>					
<i>Develops meaningful, therapeutic relationships with patients and their families</i>					
<i>Determines differential diagnosis, order interpret laboratory and imaging, perform necessary core duty procedures, diagnose, treat and manage illness</i>					
<i>Partners with patients to address issues of ongoing signs, symptoms, or health concerns that remain over time without clear diagnosis despite evaluation and treatment</i>					
ESSENTIAL SKILLS					
<i>Student gathers information effectively</i>					
<i>History taking ability</i>					
<i>Physical Examination skills</i>					
<i>Student is able to differentiate between important and extraneous information</i>					
<i>Prioritizes actions and clinical care decisions based on the information available</i>					
<i>Is an empathetic listener</i>					
<i>Understands evidenced based decision making</i>					
<i>Exhibits basic clinical procedural competency</i>					
<i>Therapeutic management skills</i>					

Domain	Excellent	Above Average	Average	Below Average	Unsatisfactory
	5.0	4.0	3.0	2.0	1.0
II. Society and Population Health					
COMPETENCIES					
<i>Recognizes the cultural norms, needs, influences, and socioeconomic, environmental, and other population-level determinants affecting the health of the individual and community being served</i>					
<i>Recognizes the potential impacts of the community, biology, and genetics on patients and incorporate them into decisions of care</i>					
<i>Demonstrates accountability and responsibility for removing barriers to health, such as health literacy</i>					
<i>Demonstrates an understanding of how the patient contributes to the health of the community and society at large</i>					
<i>Engages members of the health care team in the surveillance of community resources</i>					
<i>Reflects on personal and professional limitations in providing care</i>					
<i>Elicits and hear the story of the individual and apply the context of the individual's life (including environmental influences, culture, and disease) when determining healthy versus ill patients</i>					
<i>Understands and applies the fundamental principles of epidemiology</i>					
<i>Uses appropriate literature to make evidence-based decisions on patient care</i>					
ESSENTIALS SKILLS					
<i>Develops professional relationships with the patient</i>					
<i>Interpersonal skills</i>					
<i>Resourcefulness</i>					
<i>Awareness of any biases</i>					
<i>Advocate for the patient</i>					

Domain	Excellent	Above Average	Average	Below Average	Unsatisfactory
	5.0	4.0	3.0	2.0	1.0
III. Health Literacy and Communication					
COMPETENCIES					
<i>Establishes meaningful therapeutic relationships with patients and families that allow for a deeper connection and create space for exploration of the patients' needs and goals to deliver culturally competent care</i>					

<i>Interpret information so that patients can understand and make meaning out of the information conveyed to them</i>					
<i>Communicates effectively with patients, families, and the public</i>					
<i>Provides effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs (CLAS)</i>					
<i>Communicates information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible, and checking to ensure understanding</i>					
ESSENTIAL SKILLS					
<i>Knows when to consult</i>					
<i>Exhibits patient education as a part of treatment management</i>					
<i>Exhibits active listening</i>					
<i>Emotional intelligence</i>					
<i>Utilizes a variety of techniques to determine patient's capacities for understanding</i>					
<i>Has the ability to recognize and overcome linguistic and cultural barriers to effective communication</i>					

Domain	Excellent 5.0	Above Average 4.0	Average 3.0	Below Average 2.0	Unsatisfactory 1.0
IV. Interprofessional Collaborative Practice and Leadership					
COMPETENCIES					
<i>Understands and is able to articulate one's role and responsibilities to patients, families, communities, and other professionals</i>					
<i>Understands and advocates for the focus of the health care team being on the needs of the patient</i>					
<i>Assures patients that they are being heard</i>					
<i>Ensure patients' needs are the focus over self and others</i>					
<i>Is able to effectively coordinate care</i>					
<i>Utilizes the full scope of their knowledge, skills, and abilities of available health professionals to provide care that is safe, timely, efficient, effective, and equitable</i>					
<i>Can describe how professionals in health and other fields can collaborate and integrate clinical care and public health interventions to optimize population health</i>					
<i>Has a good understanding of the roles of PAs and other team members</i>					
<i>Competent in self-awareness, self-management, communication, and interpersonal skills.</i>					
ESSENTIALS SKILLS					
<i>Understands the importance of teamwork</i>					
<i>Understands the importance of relationship building</i>					

Exhibits leadership skills					
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Domain	Excellent 5.0	Above Average 4.0	Average 3.0	Below Average 2.0	Unsatisfactory 1.0
V. Professional and Legal Aspects of Healthcare					
COMPETENCIES					
Understands standard of care practice					
Accepts criticism and admits mistakes and errors					
Participation in difficult conversations with patients and colleagues					
Demonstrates respect for the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care					
Demonstrates accountability to patients					
Understanding of the regulatory environment					
ESSENTIALS SKILLS					
Ethical decision making					
Shows accountability					
Is compassionate and exhibits humility					
Demonstrates professional maturity					
uses self-assessment and metacognitive skills to provide patient centered care regardless of the situation.					

Domain	Excellent 5.0	Above Average 4.0	Average 3.0	Below Average 2.0	Unsatisfactory 1.0
VI. Healthcare Finance and Systems					
COMPETENCIES					
Recognizes financial implications to the provision of healthcare					
Appreciates the value of the collaborative physician/PA relationship					
Understands different types of health systems, funding streams, and insurance, including the role of Medicare and Medicaid as payors (understanding of the economic factors that affect access to care, including how to deliver high quality care in a value-based system)					
ESSENTIAL SKILLS					
Understands the basic concept of reimbursement					
Understands the importance of proper coding					
Utilizes the EMR correctly					
Practices Care Coordination					

Preceptor Name _____

Date _____

Preceptor Handbook Attestation

Preceptor Policy and Procedural Guidelines for the following:

Physician Assistant Program Clinical Year-Preceptor Handbook

These handbooks outline the school-wide and program specific policies and regulations for preceptors in the didactic and clinical years. Preceptors should completely familiarize themselves with this preceptor handbook before beginning the clinical site rotation work.

Should the preceptor be in doubt about the intent or content of any of the material in this handbook, it is his/her responsibility to initiate a discussion with the Program Director or Director of Clinical Education/Clinical Coordinator.

I have read the policies, rules and regulations for both handbooks as noted above and agree, without reservation, to abide by their terms.

Preceptor Name (PRINT) _____

Student Signature _____

Date _____

Director of Clinical Education/Clinical Coordinator

Gail Levin-Murphy MPAS, PA-C