

**Lincoln Memorial University-Harrogate
Physician Assistant Program**

**Clinical Manual
2019-2020**

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Lincoln Memorial University-Harrogate Physician Assistant Program

Introduction

The Clinical Year Manual for the Physician Assistant Program is designed to provide some policies and procedures, along with information that is pertinent to your success in the clinical year. Please refer to the Student Handbook for all program policies and procedures. The didactic year of education provides a broad base of knowledge, which will be developed, challenged, and solidified through hands-on clinical training during the clinical year. It is important to remember that while Clinical Year students are rarely on campus, they are still LMU-Harrogate PA students who are expected to adhere to policies set forth in the LMU-Harrogate Student Handbook.

The policies, procedures and requirements outlined in the following pages are designed to assist the clinical student throughout the year. **It is the student's responsibility to read and follow this manual.** If there are questions regarding the manual, please direct them to the Director of Clinical Education for clarification. All students must sign a declaration of understanding prior to beginning the clinical year stating they have read, understand, and agree to abide by the contents of this manual.

Failure to comply and/or conform to the guidelines, academic requirements, rules and regulations of this manual could result in disciplinary action, up to and including referral to the Student Progress Committee and dismissal from the program. Stating that you were not aware a certain concept, guideline, or task was in the Clinical Manual is not an acceptable reason for not abiding by all guidelines and requirements in this manual.

The LMU- Harrogate Physician Assistant Program reserves the right to alter, change, add to, or delete any of the policies or procedures in the manual at any time. Students will be notified in writing of any changes in the clinical manual should they occur.

LMU-Harrogate PA Program Mission Statement

The LMU-Harrogate PA Program's mission is to educate future Physician Assistants to provide quality healthcare with an emphasis in primary care to the medically underserved of Appalachia and beyond.

LMU-Harrogate PA Program Goals

1. Professionalism: Create an atmosphere where integrity is valued and professionalism is expected.
2. Leadership: Engage students in opportunities to act as advocates and leaders within the PA profession.
3. Technology: Incorporate a technologically enhanced learning environment.
4. Critical Thinking: Promote early and ongoing clinical decision-making skills through various learning experiences.
5. Multidisciplinary Education: Utilize a strong eclectic blend of instructive techniques to enhance all learning styles.
6. Experienced Faculty: Employ faculty who have diverse clinical and educational backgrounds.

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Clinical Faculty Mentors

Each LMU-Harrogate PA Student is assigned a clinical faculty mentor for the clinical phase. These mentors are the key support and primary contact during the clinical phase. Clinical faculty mentors will:

- Assist students' understanding of policies and practices of the LMU-Harrogate PA Program
- Respond to questions or concerns about course requirements and expectations, performance criteria, academic standing, and professionalism
- Provide feedback to students on their progress in course requirements, preceptor expectations, graduate competencies, and program goals
- Provide support for students' personal and professional growth
- Discuss academic and clinical performance to optimize students' learning experiences
- Assist students with plans to address issues of academic difficulties on an as needed basis
- Mentor students' progress for Capstone portfolio and similar projects

ROTATION PROCEDURES AND GUIDELINES AND PROGRAM POLICIES FOR THE CLINICAL YEAR

The LMU-Harrogate Physician Assistant Program has specific policies and guidelines outlined for the clinical year. The clinical year is composed of several components which LMU-Harrogate PA students must successfully complete:

- a. Timely submission of all pre-clinical paperwork and tasks as assigned
- b. Two (8) eight-week clinical rotations
- c. Eight (4) four-week clinical rotations
- d. All required End of Semester (EOS) days
- e. End of rotations exams (EORs)
- f. All Summative Preceptor/Site Evaluations
- g. Typhon logging of required numbers and types of patients
- h. Procedure Logs
- i. A patient encounter and procedure log compilation report at the end of each semester
- j. Two written OSCEs
- k. Two PowerPoint Case Presentations
- l. Two reflective papers
- m. Med-Challenger questions as assigned
- n. Acland's Anatomy Review as assigned
- o. A Comprehensive Written Clinical Summative_Exam
- p. A Capstone Portfolio Project
- q. Summative OSCEs, SIMs, Practicals, and Write-Ups
- r. All rotation competency requirements

Prerequisites for Clinical Rotations –See Student Handbook

Required Clinical Rotations

Students are required to complete 12 months of clinical rotations. While students are allowed to arrange one (1) rotation preceptor if they choose to, the LMU-Harrogate PA Program will provide preceptors/sites for all other rotations. These will take place in the following areas:

| | | | |
|-------------------|---------|--------------------|---------|
| Family Medicine | 8 weeks | Orthopedic Surgery | 4 weeks |
| Internal Medicine | 8 weeks | Emergency Medicine | 4 weeks |
| Pediatrics | 4 weeks | Psychiatry | 4 weeks |
| Women's Health | 4 weeks | Selective | 4 weeks |
| General Surgery | 4 weeks | Elective | 4 weeks |

Selectives and Electives

These rotations sites must be approved by the Director of Clinical Education and are optimally scheduled for later in the clinical year.

- **Selective:** 4 weeks in a required core or a subspecialty of a required core rotation *of your choosing*
 - EX: GI, Nephrology, Pediatric Cardiology, Neurosurgery, Vascular surgery
- **Elective:** 4 weeks in a rotation *of your choosing*
 - EX: International rotations, Dermatology, Pain Management, Plastic surgery, Transplant surgery

NOTE: Students should wait and choose their electives and selectives carefully. Once the clinical rotation schedule and sites are confirmed, no changes will be made unless specific circumstances arise that would necessitate a change.

Student Progression During the Clinical Year

- All students must pass all first-year courses before progressing to the clinical rotation year.
- Any student who does not meet the expectations of the clinical preceptor as documented on the Preceptor Evaluation of Student Performance will automatically **fail** the rotation, regardless of any numerical score earned.
- If a review of the Preceptor Evaluation of Student Performance indicates deficits in either Clinical Performance or Professional Conduct, a change in future site(s) placement may be made whether or not the student receives a passing grade for the rotation.
- If the conduct or performance of the student is deemed unsafe or inappropriate by the Clinical Site or Program Faculty, the student will be removed from the rotation and referred to the SPC for further action.
- Termination of a rotation by a Preceptor or Faculty Member as a result of poor or inadequate performance or lack of professionalism on the part of the student shall be an automatic “F” for that rotation and the student will be referred to SPC for further action.

Pre-Clinical Tasks

Health Requirements

Prior to starting clinical rotations, students are required to have a health history and physical exam performed by a licensed medical provider. In addition, they must submit three (3) separate provider-signed forms: “Student Health History and Physical Evaluation Form,” the “Physical Evaluation Form” and the “Tuberculosis Questionnaire.” The student will upload these three documents into Blackboard by the program-established due date. These documents are contained in an isolated site that PA Program faculty and staff are not allowed to view.

The PA program, in conjunction with requirements of all hospitals accredited by the Joint Commission on Accreditation of Healthcare (JCAHO) and/or Healthcare Facilities Accreditation Program (HFAP) require the following immunizations prior to rotations:

1. Annual PPD - TB Skin test **or** if positive results: provide a clear chest radiograph within 3 years.
2. Influenza Vaccine for the current flu season
3. Hepatitis B immunization (established by three reported dates of immunization and by positive antibody titer).

4. Tetanus, Diphtheria, and Pertussis (Tdap). Documentation of Tdap booster within the past 10 years or a Td booster within the past 2 years.
5. Proof of immunity against measles, mumps, and rubella, MMR (Separate Requirements for each Component) At least one of the following is required: 2 vaccinations or a positive antibody titer for Measles, Mumps and Rubella (lab report required).
6. Varicella immunity - evidence of immunity in HCP includes;
 - Documentation of 2 doses of varicella vaccine given at least 28 days apart, or
 - Laboratory evidence of immunity - A positive antibody titer (lab report required), or
 - Laboratory confirmation of disease, or
 - Diagnosis or verification of a history of varicella or herpes zoster (shingles) by a healthcare provider.

NOTE: Please direct all questions related to vaccinations to the PA Program Compliance Officer, Dr. Paula Miksa: paula.miksa@lmunet.edu

Drug Screening and Background Checks

Clinical site Affiliation Agreements have additional prescreening requirements for students. These prescreening requirements are often the same as those required of employees (background checks and drug screens) at the clinical training facilities. The rationale for extending requirements to clinical students was the concept of due diligence and competency assessment of all individuals whose assignments bring them in contact with patients or employees. Competency extends beyond technical skills to an individual's criminal and substance abuse history. This approach often helps the facility to ensure uniform compliance with the Joint Commission on Accreditation of Healthcare Organization standards pertaining to human resource management.

Students are required to obtain a background evaluation prior to the clinical year curriculum, which includes a criminal background evaluation/history. Typically, no student will be permitted to participate in educational or patient care activities if the individual has been convicted of a crime, other than a misdemeanor driving violation. Students are responsible for the costs of any initial and subsequent criminal background checks.

Along with a background check, students are also required to have an up-to-date drug screen. Some facilities accept a one-time screen. However, in other facilities, drug screening and criminal background checks (which may or may not include fingerprinting), may have a specified time frame (sometimes 30-60 days in advance) as proof of screening. Students must be prepared to provide results of drug screening and background checks when required. This information is maintained on the Immunotrax and Corporate Screening websites and access is limited to individual users.

The above completed documentation along with proof of recent OSHA Bloodborne Pathogen, HIPAA, and BLS/ACLS/PALS training must be uploaded to Immunitrax by the program-established due date.

NOTE: *It is strongly recommended that each student maintain copies of all testing/results and certifications in the event those documents need to be presented to the clinical site. These results are often needed after graduation when applying for staff privileges.*

Student Health Insurance

Lincoln Memorial University requires all students have health insurance. Prior to starting clinical rotations, students must be covered under a health insurance policy and provide evidence of such. Students who do not have up-to-date health insurance will not be allowed to participate in any activity that involves patient contact. This may result in the student not being able to fulfill the requirements of certain courses and activities which could have a detrimental effect on the student's progress.

Pre-Clinical Credentialing

The Hospital Relations Coordinator is responsible for sending paperwork regarding each student to their respective rotation site. This paperwork must be completed and returned by the student **within 72 hours of receipt** from the Hospital Relations Coordinator so that the next rotation may take place. Students who travel to multiple sites on any rotation or who travel to multiple new core rotation locations can expect to receive and fill out new paperwork more frequently than others. Please respond and act accordingly when the Hospital Relations Coordinator contacts you regarding new credentialing paperwork.

Students who are delayed in completing any of the above tasks and/or turning in the required paperwork by the specified deadline will receive their first and only professionalism warning of the clinical year. In addition, lack of attention to these requirements could delay the start of a rotation if the situation is not remedied. Students who do not fulfill these requirements do not meet the required technical standards of a facility and therefore will not be allowed to begin or continue clinical rotations, with no exceptions.

Clinical Rotation Sites and Affiliation Agreements

The LMU-Harrogate PA Program maintains Affiliation Agreements with clinical rotation sites and clinical preceptors throughout the country. All clinical training sites require an Affiliation Agreement. Affiliation Agreements are legal documents that formalize the relationship between the Program and University and the clinical rotation site/preceptor, address issues such as liability and malpractice, and help to ensure that LMU-Harrogate PA Students will receive a quality clinical experience. **Students are not permitted to contact or attend a clinical rotation site where they have not been assigned by the Program and/or where appropriate signed legal Affiliation Agreements are not in place.** Students are **not** allowed to negotiate an affiliation agreement with a clinical rotation site. These agreements must be established and approved by the Program, University and the clinical rotation site/preceptor before student placement at a clinical rotation site can occur.

Students may only participate at the clinical site they are assigned to at the designated time. Students may **not** contact an established clinical rotation site prior to their assignment to that clinical rotation site or unless directed to do so by the Clinical Team. Any student who is in violation of the Affiliation Agreement policy will be referred to the Student Progress Committee (SPC) with the possibility of immediate dismissal from the Program.

Clinical Rotation Sites

A great deal of time and effort has been put into developing clinical sites and preceptors before they are used. In some cases, the preceptor may have gone through significant personal efforts to obtain approval as a clinical preceptor. It is essential that students keep the program informed of any activities that could result in a negative impact on future site utilization and that the student understands that he/she is an *ambassador for the LMU-Harrogate PA Studies program while being a guest in the preceptor's "home."*

Throughout the year, the Clinical Team contacts clinical rotation sites and clinical preceptors to determine their availability for student placement during the Clinical Phase. The Program is committed to maintaining positive relationships with and developing current clinical rotation sites and preceptors as well as developing relationships with new clinical rotation sites and clinical preceptors.

Clinical rotation sites are available in the Harrogate area; however, students should also plan to complete clinical rotations at sites distant from the Harrogate campus. In general, all students should plan to travel away from the local area for some rotations. The LMU-Harrogate PA program is not responsible for student housing during the clinical year, so students are responsible for procuring housing and travel to and from the clinical sites. Some clinical sites provide housing at reduced or no charge to the student; however, this is very limited and may not always be available.

Clinical rotation sites are evaluated by the Program initially and at a minimum of every two (2) years by telephone/video conferencing and every four (4) years in person. This provides an opportunity for assessment of the appropriateness and safety of each clinical site and feedback from the clinical preceptors regarding the clinical rotation experience and individual and aggregate student performance. Clinical rotation site visits may occur while an LMU-Harrogate PA Student is completing a clinical rotation at the clinical rotation site. Additionally, representatives of the Program may conduct formal evaluations of the student's progress in developing a comprehensive base of medical knowledge and procedural skills, clinical-decision-making, and interpersonal skills. Formal evaluations by Program representatives will be scheduled with the clinical rotation site/preceptor. Students will be notified via email or telephone if a formal evaluation is needed. Students should respond to communication from the Program within 48 hours of notification so that the clinical site visit arrangements can be confirmed.

Facility Orientation

Each hospital facility will require their own orientation training for each PA student that rotates within them. The appointment time for the orientation will be determined and scheduled between the hospital and the student. The LMU-Harrogate PA Program does not determine the content or scheduling of the orientation. Typically, students receive ID badges and computer access at orientation.

Preceptor Contact Prior to Each Rotation

It is the student's responsibility to contact the preceptor or his/her designated contact person **two weeks prior** to the start of a new rotation to determine what time, where, dress code, and to whom the student should report for the first day of that rotation. The preceptor's address, phone number,

etc. is all available in Typhon under the Preceptor Directory. All students are required to speak to someone by phone at the rotation site for confirmation. If a student cannot make contact or the preceptor is unsure of a student's eminent arrival, contact the Director of Clinical Education immediately.

Students are strongly encouraged to find their exact rotation site before rotation day one so they are familiar with traffic patterns, where to park, large office complexes, check-in procedures, etc. Tardiness as a result of unpreparedness is not excusable.

Clinical Rotation Schedule

The Program gives consideration to both the student and the clinical site preceptor(s) when planning and scheduling clinical rotations for the purpose of providing students with an excellent learning experience. **Once clinical rotation schedule and sites are confirmed, no changes will be made unless specific circumstances arise that would necessitate a change.** All special circumstances will be reviewed by the Clinical Team and a decision is made by committee. If a change to a clinical rotation assignment is necessary, the clinical team will notify the student as soon as possible to allow sufficient time for the student to make any necessary living/transportation arrangements in a timely manner.

Expectations of Physician Assistant Students

There are many characteristics that are desirable in a PA. These include comprehensive *medical knowledge*, *skill* in applying knowledge through the provision of medical care, and *professionalism* in one's conduct. A PA must possess attention to detail, reliability, punctuality, and the ability to work as a team player within all levels of a given organization – supervisors, peers, and subordinates.

By the second year of study, LMU-Harrogate PA students are expected to demonstrate all these traits, and at progressively higher levels as they move towards completion of clinical rotations. Thus, the evaluation of LMU-Harrogate PA students includes consideration of *knowledge*, *skill*, and *professionalism*. All of these factors will be assessed at all times. Specific forms of evaluation are established to ensure the complete student is evaluated. *Knowledge* is assessed through written testing at EOS. *Skill* is assessed via clinical preceptor evaluations and LMU-Harrogate Program faculty. *Professionalism* is assessed through cooperation with the program staff, attendance at mandatory functions, participation in conferences and group exercises, timely and courteous communication with the Program, preceptor, and patients, and adherence to all the guidelines of this manual.

First Days to Weeks with the Preceptor

Before the start date of the clinical rotation, the student should have reviewed the syllabus and rotation-specific requirements and learning objectives and thought about their expectations for the rotation. On the first day of the rotation, it is suggested that the student review the course syllabus, and especially the learning objectives, with the preceptor(s).

Students should expect that they may be observing a preceptor for a while before they are allowed to see patients or perform procedures with more autonomy. Students are strongly encouraged to remain engaged and take notes during this time. This observation period is determined by the preceptor, but is influenced by the student. Students who appear disinterested, unprepared, immature, inappropriate, or excessively timid will most likely not be trusted quickly with the preceptor's patients. Students should consider what they are projecting and ask for feedback. Typically, after demonstrating proficiency, students are permitted to undertake increasingly more difficult/defined activities under appropriate supervision and under the direction of the preceptor. (See Appendix L to facilitate this determination.)

It is recommended to inquire about the preceptor's expectations for you on this rotation. (See Appendix K to facilitate this conversation.) Students should be nearby and ready to go when Preceptors enter a patient's room, but not invading their personal space. Find out when the best time is for them to answer your questions, while making sure questions are not something you could look up on your own or something they have already answered. Be prepared to answer questions, especially when they have given a reading assignment. This is not meant to be humiliating; they are trying to assess what you do and don't know. Always answer honestly.

Receiving Maximum Benefits from Clinical Rotations

To help get the most out of rotation, consider the following attitudes and behaviors:

1. Students should routinely ask for feedback and be willing to listen to and apply the feedback they receive. (See Appendices K&L)
2. The student is strongly encouraged to send thank you notes or letters to all preceptors after having completed the rotation. Preceptors are often asked to serve as a recommendation source for the student when they begin searching for a job. This is entirely optional on the preceptor's part. The medical community (even nationwide!) is surprisingly small. Let the impression you make be the one you want to leave.
3. Some rotations are more challenging than others, yet each rotation has the potential to provide a unique experience. Remember, you as the student are an ambassador for the LMU-Harrogate PA Program. Students should present themselves in a professional, enthusiastic, willing-to-learn manner. Each task, regardless of how mundane, has a lesson attached to it. Look for the lesson.
4. Always treat patients with dignity, void of a judgmental attitude. Keep in mind that people from different cultural backgrounds may behave and act differently than you are accustomed. Try to remain self-aware and respond appropriately to others with cultural and socioeconomic differences. You only know a person's story when you take the time to listen first. Utilize the motivational interviewing techniques you have been taught.
5. The PA Program's responsibility is to provide opportunities to enhance the student's education. By this time, most of the learning achieved will come from *the student's motivation to teach oneself*, not from others teaching the student. Don't sit back and wait to be taught – take an active role in your education.
6. The student's educational experience may occur from others not immediately precepting the student, such as nursing staff, inter-professional allied health providers, administrative staff, and others. Be respectful of the role these individuals provide in the professional setting.

End of Semester Days (EOS)

At the end of each clinical semester, students will return to the Harrogate campus (or other designated location) for assessment activities. These activities will consist of, but are not be limited to, End of Rotation Exams (EORs), Objective Structured Clinical Examinations (OSCEs), case presentations, PANCE review lectures on topics relevant to PA practice, and administrative issues. **Attendance is mandatory at all EOS days. Personal days cannot be used on EOS days.** Requesting to be excused from an EOS in Harrogate for financial reasons due to travel from an out-of-state rotation is not acceptable. (See Student Travel Time Allowance below.) In the case of unforeseen emergency during an EOS, please contact the DCE. Make-up exams for excused absences must be completed within one week.

Students who are granted testing accommodations **MUST return to the Harrogate campus for all end of semester (EOS) days** during the clinical year to ensure all testing accommodations are properly met.

- If a student chooses to waive their accommodations at any point in their training, they must do so by formal request. This process begins by the student sending an email to the Director of Clinical Education, the PA Program Director, and the Director of Accessible Education. Following the email, the student will then be required to sign an acknowledgment of the waived accommodations for *each* exam taken without accommodations, which is added to their ADA file. Students should note this *may* affect the student’s ability to receive accommodations for future exams, including the PANCE and PANRE. (See Appendix O.)

*End of Semester Days (EOS) Schedule (*subject to change)

| Rotation/Block | Begin | End | EOS Days |
|----------------|--------|--------|---|
| 1 | Jul-22 | Aug-16 | EOS 8/16 |
| 2 | Aug-19 | Sep-13 | EOS and mid-year Activities 12/9 - 12/11 |
| 3 | Sep-16 | Oct-11 | |
| 4 | Oct-14 | Nov-8 | |
| 5 | Nov-11 | Dec-6 | |
| 6 | Dec-9 | Jan-3 | |
| 7 | Jan-6 | Jan-31 | EOS 4/23 – 4/27 |
| 8 | Feb-3 | Feb-28 | |
| 9 | Mar-3 | Mar-27 | |
| 10 | Mar-30 | Apr-24 | |
| 11 | Apr-27 | May-22 | Everyone returns to Harrogate for EOS/graduation activities |
| 12 | May-25 | Jun-19 | |
| Pre-Graduation | Jun-22 | Jul-17 | |
| | Jul-20 | Jul-31 | Graduation: Aug-1 |

- Semesters are coded together with the same color.

Student Travel Time Allowance

- **NOTE:** this travel time does not apply to mandatory hospital orientation

For the August and April EOS days, you **MUST** attend the EOS location closest to the rotation you are on at the time of the EOS. Students will not be excused to leave the rotation early for travel except otherwise noted below.

For the purposes of EOS testing only:

- Drive Time from site to the testing location:
 - 4 - 8 hours--May have 1 day for travel (**EX:** if EOS starts on Friday you must work some part of the work day on Wednesday which allows 1 travel day prior to EOS)
 - 8.5 - 16 hours-- May have 2 days for travel (**EX:** if EOS starts on Monday you must work through the end of the work day on Wednesday which allows 2 travel days prior to EOS)
 - Greater than 16.5 hours-- May have 3 days for travel
 - International--See Clinical Team
- If **flying** to the testing site, may have 1 day for travel

- Drive Time from testing location to next rotation site:
 - 12 hours or less from next rotation-- begin the rotation on Monday
 - 12.5 - 20 hours from next rotation -- begin the rotation on Tuesday
 - 20.5 hours or more from next rotation-- begin the rotation on Wednesday
- If **flying** to the next rotation, begin the rotation on Monday

For the purposes of end of rotation to beginning of next rotation:

- Drive Time from current site to next rotation site:
 - 8 or less hours --You are required to work through the end of the rotation
 - 8.5 - 16 hours --May leave the rotation 1 day early
 - Greater than 16.5 hours --May leave the rotation 2 days early
 - International--See Clinical Team
- If **flying**, to the next rotation, you are required to work through the end of the rotation

NOTE: Students will not be allowed to leave before the days/times listed above.

- Students cannot use personal days to leave their rotations early. If within 4-8 hours from their testing location, they must work (at least some part of) the last day of a rotation.
- Students on 8 week rotations with an EOS in the middle are not allowed to use personal days 24 hours prior to the last day of a rotation.
- Drive times must be determined using *Google Maps*.

Rotation Work Hours

Students must attend the rotation 100% of the time. Attendance at all assigned clinical rotation sites is mandatory. While clinical rotation dates are established by the Program, clinical rotation work hours will be determined by the clinical site preceptor(s). Students are required to work the same schedule as their clinical preceptor(s) with a minimum of **140 hours** per 4-week rotation, **280 hours** per 8-week rotation, and **120 hours** for Behavioral Medicine (PAS 625). If you are unable to obtain these hours, please notify the DCE immediately as insufficient hours could result in rotation failure.

Students are required to work all office hours, participate in nursing home and hospital rounds, take call, work nights, holidays, and weekends *as designated by the clinical site preceptor(s)*. Holidays and University breaks do not apply to the Clinical Phase when the preceptor asks you to work those times. Meal times and personal needs may be delayed by patient care activities and students are expected to be flexible and uncomplaining.

Absent Preceptor

If a preceptor will not be available for a given day and an *alternative* preceptor experience/assignment arrangement has not been made for the student by the preceptor, the student must notify the Director of Clinical Education immediately.

Tardiness

Students are expected to be on time to their clinical rotations, including meetings, rounds, etc. Tardiness is not accepted at clinical rotation sites or when attending End-of-Semester (EOS) activities. The PA program must be notified of any absence from the rotation, even for tardiness. Students should contact the preceptor/or designee and the Director of Clinical Education if they are going to be unable to be on time. Situations in which tardiness occurs will be documented in the student's record. Persistent/excessive tardiness reported to the Program from clinical preceptors will result in a mandatory mentor meeting, loss of professionalism points, and possible referral to the Student Progress Committee (SPC).

Student Absences

The Director of Clinical Education and the rotation site must be notified regarding absences for any reason. All absences are excused first and foremost by the Director of Clinical Education, regardless of preceptor approval. The Director of Clinical Education reserves the right to not approve absences and to receive written proof of absences. Please contact the Director of Clinical Education by email to obtain permission for scheduled absences and upload all absence reports *signed by the preceptor* to the following Dropbox link - **Absence Reports** - <https://www.dropbox.com/request/C7Fpz6n823aHMZ9JfCs5>

Personal Days

Time away from the clinical rotation should be coordinated with the clinical site preceptor in order to avoid/minimize conflicts with on-call or other clinical duties. *Preceptors are not the approving authority to determine excused or unexcused absences*. Students must obtain approval for the absence by the Director of Clinical Education via email and then the clinical preceptor and then submit a completed, preceptor-signed and dated absence request form to Dropbox prior to the absence for that absence to be considered excused. If a student does not follow these steps, the absence will be considered an unexcused absence. Students cannot miss more than five (5) excused days during each semester of the Clinical Phase without having to repeat the rotation. Furthermore, if a student misses more than two (2) excused days during a four-week clinical rotation or more than four (4) excused days during an eight-week clinical rotation, the student **must** repeat the clinical rotation. Personal days may not be taken during EOS days or within 24 hours of an EOS day.

Scheduled Absences for CME

Assuming the student is not on academic probation, students are allowed time off during the Clinical Phase for the purpose of attending a medical conference/certification program. Students may request no more than five (5) days off for this purpose during the Family Medicine (PAS 610) or Internal Medicine (PAS 620) clinical rotations OR no more than three (3) days off for this purpose during the Selective (PAS 665) or Elective (PAS 660) clinical rotations. Excused time off to attend a medical conference/certification program will not be allowed during any other the other clinical rotations. Students must obtain approval for the absence **and** conference from the Director of Clinical Education via email prior to the absence and submit a completed, preceptor-signed and dated absence request form to Dropbox. Time away from the clinical rotation should be coordinated with the clinical site preceptor in order to avoid/minimize conflicts with on-call or other clinical duties. If a student does not follow these steps, the absence will be considered an unexcused absence.

Absences Due to Emergencies

If a student is going to be absent due to an emergency, severe illness, injury requiring complete bed rest, or attendance at funerals of family members, the student must notify the preceptor or designee at the clinical rotation site and the Director of Clinical Education by 8:00 am on the day of the absence. Additionally, students must complete a preceptor-signed and dated absence form and return it to the Director of Clinical Education via Dropbox within 24 hours of returning to the clinical rotation site. If a student does not follow these steps, the absence will be considered an unexcused absence. Documentation regarding reported illness, death, or injury may be required by the Program.

Students with excused absences will be required to make-up the time missed for the clinical rotation. If the missed time is not made up by the completion of the clinical rotation, an "I" (incomplete) will be recorded for the course and completion of the missed time will be scheduled at the discretion of the clinical rotation site and the Director of Clinical Education.

Students with unexcused absences and/or persistent/excessive tardiness will be referred to the Student Progress Committee (SPC) and have professionalism points deducted for that rotation.

Clinical Rotation Assignments, Paperwork, and Deadlines

Students should keep a copy of all assignments/paperwork that they submit as well as the Dropbox and other confirmation emails that assignments/paperwork have been received. All assignments and paperwork are due on the deadlines below or as otherwise specified. Once an assignment has been submitted, there will be no further acceptance of revised or additional work. Late submissions of any assignment will result in a zero (0) grade and late submissions of any assignment/paperwork will result in a loss of professionalism points.

The clinical phase of the PA program has several assignments and paperwork and strict deadlines for the completion and submission of these assignments and paperwork for each rotation. These include:

1. Student provides the preceptor with the Evaluation Instruction Sheet (Appendix F) at least one week prior to the end of the rotation.

2. Student makes every attempt to have Preceptor fill out and submit the Preceptor Evaluation of Student Performance (Appendix G) into Typhon no later than seven (7) days from the last day of rotation
3. Student fills out and submits Student Evaluation of Rotation Site into Typhon (Appendix E) no later than 24 hours from the last day of rotation.
4. Student completes Patient and Procedure Clinical Logs via Typhon no later than 24 hours from the last day of rotation.
5. Student completes and submits Competency Compilation Reports (See Instruction sheet, page 31 and Table 1, page 32) In December, April, and July. These are due no later than seven (7) days from the 1st day of the EOS.
 - Please upload Competency Compilation Reports in the following Dropbox link:
<https://www.dropbox.com/request/TL9ASjImDWyqxShpayKM>
6. Student attends all End of Semester Day(s) at LMU-Harrogate or other designated location.
7. Student completes and passes EOR exam(s) during the appointed EOS meetings
 - If student scores < 80% on an EOR exam, the student completes the assigned Med-Challenger questions to be completed within 30 days after being assigned and scores 90%.
8. Student completes, submits, and passes Case Presentations, Reflection Papers, and other written assignments during the appointed EOS meetings at their appointed times. (See page 23 and respective syllabi.)
 - Please upload PowerPoint Case Presentations in the following Dropbox link:
<https://www.dropbox.com/request/QcybLwJDljf0oWvoTixH>
 - Please upload Reflection Papers in the following Dropbox link:
<https://www.dropbox.com/request/JJpxDL4Qif0VuTBpUqAG>
9. Student completes and submits Acland's Anatomy Review within 1 week of starting the Orthopedic, Surgery and Women's Health rotations. See these syllabi for specific details.
 - Please upload Acland's exams in the following Dropbox link:
<https://www.dropbox.com/request/GQPany5IR0vBzBT7mk7f>

Capstone Portfolio, Project, and Summative Activities

All Capstone approval forms, projects, and Portfolio are due on the deadlines as per the Capstone syllabus or as otherwise specified. Once a Capstone assignment has been submitted, there will be no further acceptance of revised or additional work. Late submissions of any Capstone assignment will result in a zero (0) grade and will delay graduation. All Capstone Summative activities must be completed and passed prior to graduation.

- Please upload Capstone Approval forms in the following Dropbox link:
<https://www.dropbox.com/request/zQe6nanY1HH3E2IVxZ3T>

ROTATION EVALUATION AND GRADING

The final rotation grade consists of 3 components:

1. Performance component (A), **and**
2. Written component (B), **and**
3. Professionalism (C)

| Assessment Method | Percentage of Rotation Grade | Grading Criteria |
|--|--|---|
| A. Preceptor Evaluation of Student Performance: “meets or exceeds expectations” | 40% | Demonstrate satisfactory self-directed learning skills, clinical reasoning skills, commitment to patient-centered care and professionalism as evidenced by satisfactory performance on the preceptor evaluation. |
| B. EOR exam or Case Presentation & Clinical Self Reflective Essays | 50% | Demonstrate acquisition of a strong basic and medical science knowledge base as exhibited on the written examination and/or elective/selective assignments. |
| C. Demonstration of Professionalism: <ul style="list-style-type: none"> • Completion of all rotation assignments and paperwork within specified deadlines • Pre-rotation communication with sites and timeliness of paperwork • Conduct, Attendance, Absence forms • Professionalism issues as per Student Handbook and Clinical Manual | 10% (10 points) based on feedback from program faculty and staff regarding communication and timeliness, and/or Preceptor and personnel at preceptor's office/site. | Demonstrate a commitment to learning and professionalism by actively participating in all clinical activities and exceeding the professional behavior standards and minimum requirements for clinical rotations as per the PA Student Handbook and Clinical Manual. |

A total Preceptor-assigned rotation score of 70% **and** the preceptor noting “meets expectations” is required to pass the rotation. **If a student fails either component A or B, he/she will fail the entire rotation.** Failure of any rotation by preceptor evaluation (A) **or** exam (B) will result in automatic referral to the SPC. If a rotation is failed and has to be repeated, the student will receive a maximum of 70% for the repeated rotation.

Additionally, students will receive a grade of “F” for a rotation if the student fails to:

- 1) Meet the professionalism standards of the program **or**
- 2) Participate in required EOS days **or**
- 3) Complete required administrative components, including Typhon patient logging, preceptor/site evaluation and compilation/procedure logs
- 4) Students who are removed from the clinical site by a faculty member or at the preceptor’s request will automatically receive an “F” for the rotation and will be referred to the Student Progress Committee.
 - **NOTE:** The removal of a student from a site for unprofessional conduct may also result in possible sanctions from the students’ state Medical Licensing Board when they seek licensure upon completion of the program and passage of the PANCE.

NOTE: Students are NOT allowed to use an elective or selective rotation in lieu of repeating a failed rotation. Any failed rotations must be repeated at the end of the rotation sequence or as determined by the clinical team.

Professionalism Points

Professionalism is also a component of the overall rotation grade. Professionalism points will be deducted as follows:

- 1) For the first professionalism infraction during the clinical year, a student will be given one warning. This warning will be recorded in the student file. No further warnings will be given. An initial email with the assignment, directions and/or a deadline date and time serves as the warning on most occasions. Please pay attention and act accordingly.
- 2) For the second professionalism infraction on any rotation, a student will lose 50% (5pts) of their professionalism points for that rotation block.
- 3) For the third professionalism infraction on any rotation, a student will lose 100% (10 pts) of their professionalism points for that rotation block.
- 4) For any subsequent professionalism infractions on any rotation, a student will lose 100% (10 pts) of their professionalism points and be referred to SPC.
- 5) If a student has more than 2 total deductions of their professionalism points during the clinical year, they will be referred to SPC.

Preceptor Evaluation of Student Performance

Preceptors are asked to fill out an evaluation of each student (Appendix G) in Typhon following the completion of each clinical rotation. The student is responsible for giving the preceptor the *Evaluation Instruction Sheet* (Appendix F) at least one week prior to the end of the rotation so that the preceptor has the web address and directions for resetting passwords, if needed.

- **NOTE:** students are responsible for verifying the preceptors' preferred email address from the list that the Assistant Clinical Coordinator sends out at the beginning of rotation.

Preceptors should complete the evaluation in a timely manner since this evaluation is also used to determine a numeric grade for the rotation. It is the *student's responsibility* to ensure the DCE receives the Preceptor Evaluation of Student Performance form within seven (7) days after completion of each rotation. While the Department realizes that occasional delays may arise, repeated offenses may lead to the lowering of a final rotation grade. Preceptor evaluations will only be accepted if received through Typhon. Receipt of the evaluation via any other means will not be accepted and will result in an Incomplete for the rotation grade.

One evaluation form is to be completed by the preceptor just prior to the end of the rotation. If the student has more than one preceptor, students are encouraged to have the preceptors collaborate and turn in only one evaluation. If this isn't possible, each preceptor can complete an evaluation and the grade will be calculated from the average of all evaluations. If the student is on an 8-week rotation that is split between two different offices, each preceptor should fill out an evaluation. If the student is on the Ortho-focus rotations, the preceptor should fill out an evaluation for each of the three rotations: Orthopedics, Elective, and Selective. The preceptor's evaluation is based on demonstration

of the student's medical knowledge and skill in the performance of history-taking, physical examination, procedures as designated and permitted by preceptors, and developing a diagnosis and treatment plan.

The preceptor is encouraged to have an exit interview with the student. This evaluation process should allow for more direct feedback between the preceptor and student regarding the student's performance. The student should also ask the preceptor for feedback if it is not given. The student should also provide feedback to the preceptor concerning the rotation in a constructive manner. Preceptor evaluation forms become a part of the student's permanent record.

A student has failed a clinical rotation if he/she earns a numeric score of < 70% and/or the clinical preceptor marks "did NOT meet expectations" on the clinical Preceptor Evaluation of the Student Performance form.

Clinical Rotation Evaluation Discrepancies

The student should meet with the preceptor for a final evaluation prior to the rotation ending. If the student is dissatisfied with the evaluation and has met with the preceptor to discuss the evaluation, the student should contact the Director of Clinical Education by writing a statement that outlines specific reasons why he/she disagrees with the preceptor's final evaluation. The statement needs to be submitted within one week of the final evaluation. The statement will be reviewed by the Director of Clinical Education and Clinical Faculty. A meeting with the student will take place if further information is required. If no further action is necessary, a written decision will be sent to the student within seven days. If further action is necessary, the Director of Clinical Education will contact the preceptor for more information. Once the preceptor has submitted their evaluation of the student, the student should **not** re-contact the preceptor to further discuss and/or negotiate the evaluation. Failure to abide by this will result in a professionalism violation and/or referral to the SPC.

Student Evaluation of Rotation

Students have the opportunity to provide input on their clinical experience at the end of each rotation. If the student is on the Ortho-focus rotations, the student should fill out a site evaluation for each of the three rotations: Orthopedics, Elective, and Selective. Each student is required to complete an evaluation of the rotation site on Typhon no later than 24 hours from the last day of rotating at the site and *prior to* any discussion concerning the preceptor evaluation of the student performance.

Students are encouraged to record the positive aspects and any areas needing improvement on the rotation evaluation. Constructive comments are the most helpful. Student evaluations of the site are reviewed on a monthly basis by the Clinical Team and any issues or concerns brought up by students will be addressed. Preceptors may receive anonymously themed copies of students' comments of their site if they specifically ask for them. (See Appendix E for example form.)

The Preceptor Evaluation of Student Performance and the Student Evaluation of Rotation forms must be submitted on time for every rotation in order for Professionalism points to remain intact.

End-of-Rotation Exams (EORs)

All required clinical rotations have a written examination specific to that experience that must be completed and passed with an acceptable grade. The Program utilizes the Physician Assistant Education Association (PAEA) End of Rotation exams (EORs) for all rotation exams with the exception of the Orthopedic rotation for which a Program-designed exam is administered. During each EOS, each student could be given between 1 to 4 comprehensive EOR exams specific to the rotations they just finished. The rotation-specific exams are based on the PAEA EOR Blueprint. For this reason, it is extremely important that students keep up with their studying no matter what rotation they are on.

Specific objectives for each rotation are provided to both the student and preceptor. Clinical experiences may vary depending on patient population and site strengths/weaknesses. It is the student's responsibility to review the objectives and augment clinical experiences with independent research and discussion with the preceptor as necessary. Students are responsible for knowing all the information in the rotation objectives and on the respective EOR Blueprint, even if those conditions were not personally seen during their rotation. (See: <https://paeaonline.org/assessment/end-of-rotation/content/> for a copy of the topics and blueprint.)

The PAEA uses a scaled score, which we convert to a percentage. If a student scores <70% on an EOR exam, they have failed the exam and the rotation and they will be referred to the SPC and may require additional testing specific to the rotation.

Med-Challenger

Med-Challenger is an online education and assessment platform that offers study material and question banks to healthcare professionals including PA's. Med-Challenger will be used for remediation purposes if a student scores <80% on any EOR exam. Any student who scores <80% on an EOR exam will be assigned a Med-Challenger exam to be completed within 30 days of assignment. The student must score at least 90% on the Med-Challenger remediation exam on or before the specified deadline to pass the remediation.

The LMU-Harrogate PA Program provides all students with access to Med-Challenger during their clinical year. The student is encouraged to use the Med-Challenger software to supplement their knowledge and bolster their standardized test-taking skills.

Objective Structured Clinical Examinations (OSCE)

Students will be required to pass any OSCEs given during the clinical year. Typically, a written OSCE is given at the December and April EOS times. The OSCE grade is applied to the pre-graduation summative grade. A minimum score of 70% must be achieved on each simulation/OSCE, or the student will be required to complete remediation on the topic that was failed. A remediation of the SIM/OSCE may be scheduled after graduation. Students will not be considered official graduates of the program until all coursework is successfully completed. If a student does not improve and pass the remediation, the student will be required to appear before the SPC.

PowerPoint Case Presentations for Elective and Selective Rotations

At least one week prior to their scheduled EOS presentation date, students should submit their desired topic (patient) for the presentation to the designated Google Doc sent out before the EOS. Students are responsible for determining that their topic is unique and not covered by another student and that their topic is of sufficient breadth and depth to meet the requirements of the Case Presentation Rubric. (See Appendix J.) Failure to do so will result in point deduction.

The submitted case **must** be a patient on whom the student completed the initial evaluation and work-up, thus making them familiar with all aspects of the case and able to give a complete presentation and answer most questions. Students should choose a patient who has a diagnosis that is of interest to them and their classmates. Students must remove all patient-identifying data in accordance with HIPAA guidelines. See the Case Presentation Schedule when it is sent out prior to the EOS to know your time slot.

The PowerPoint should include HPI, significant PMHx/FHx/SHx, pertinent positives from the ROS, allergies, meds, primary diagnosis with a differential, secondary diagnoses, and management plan (to include orders as appropriate).

Students should submit their final case presentation, in PowerPoint form, to the Dropbox folder at least 1 day prior to their presentation. <https://www.dropbox.com/request/QcybLwJDljf0oWvoTixH>. If the deadlines above for submission of topics on the Google Doc or PowerPoint cases are not met, the overall grade for the presentation may be lowered by one letter grade for each deadline missed.

The actual case presentation on the scheduled EOS date and time should follow the following format: History and physical exam should be limited to five (5) minutes. The next five (5) minutes should consist of the patient management (orders, plan, course, prognosis, etc.) and for questions from classmates and the faculty grader(s). The presentation will be made to at least one (1) faculty member and the second year students. The presentation will be graded by the faculty utilizing the Case Presentation Rubric.

A minimum grade of 70% is required. If the student fails the presentation, for whatever reason, the student will be referred to SPC to discuss options for remediation.

Clinical Self-Reflective Essay for Elective and Selective Rotations

Students must write a self-reflective essay that focuses on a specific clinical year experience they feel will significantly contribute to shaping them as a practicing Physician Assistant. The experience should have made a significant impact on their future practice, either in a positive or negative manner. Students may cite situations they observed or had close knowledge of or experienced directly. Please avoid trivial events, specific and direct criticism of care provided by another provider, or interpersonal relational issues. Students should provide sufficient details as to make the essay informative but equally mindful of protecting the identity of other role players and the location of the experience.

The essay should be no less than 600 words and be submitted as a Word document in Times New Roman, size 12 font, and include the student's name and date as a header. If the student fails to submit the paper following the above guidelines and deadline, the student will be referred to SPC to discuss options for remediation.

Students should submit their Self-Reflective Essay to the following Dropbox folder at least 1 day prior to the first day of the EOS following their elective and selective rotations (one essay for each).

<https://www.dropbox.com/request/JJpxDL4Qif0VuTBpUqAG>

Professionalism

The following non-exhaustive list must be completed on time (when indicated) in order to meet Professionalism (Category C) requirements:

1. Students should be familiar with all Clinical Rotation Assignments and abide by the submission instructions and deadlines that were introduced on pages 16-17.
2. Students contact the Director of Clinical Education and the preceptor on the same day concerning absences from rotations for sickness or emergencies and obtain permission for all other absences in advance from both the Director of Clinical education and the preceptor. All absences are documented via a preceptor signed, dated absence form submitted to Dropbox (Appendix M) within 24 hours of returning to the clinical site (or prior to the absence if for a personal day.)
3. Student attends (without early departure) all EOS days and required PA program activities.
4. Student upholds responsibilities to the clinical site noted on Preceptor Evaluation of Student Performance form or via other communication with the preceptor (i.e. professional behavior/attitude, assignments, hospital rounds, call, etc.).
5. Student refrains from any rude, disrespectful, or derogatory remark, gesture, or act towards any instructor, the Program, university faculty or staff member, clinical preceptor, peer, patient or staff member of any clinic or hospital, as this type of behavior is not consistent with professional behavior.
6. Student represents the University in a professional manner at all times, refraining from any negative comments or participating in or spreading gossip regarding the University, PA Program, faculty/staff, course requirements, preceptor(s), facilities, or preceptor's staff.
7. Student refrains from posting any information including photographs regarding clinical sites/preceptors or patients/cases on any form of social media.
8. Student responds to all program emails within 48 hours and all phone calls within 24 hours.
9. Student returns all requested paperwork to the PA Program within 72 hours of receipt or as per designated deadline.
10. Student returns all badges, borrowed equipment, etc. to the clinical site before leaving the rotation.
11. Student keeps all originals of submitted paperwork and confirmation emails.

Typhon Patient Encounter Logs (subject to Category C: Professionalism)

Students will be required to maintain a patient log, which gives the program an opportunity to further evaluate the clinical experience. The patient log will show the numbers and types of patients being

seen, their diagnosis, and the student's level of participation. It is the student's responsibility to assure that the patient logs accurately and thoroughly reflect the patients they have seen. These patients and numbers cannot be logged outside of the assigned rotation. Patient logs must be completed for every rotation within 24 hours after leaving that rotation site. This information is entered into Typhon and later gathered in Compilation Reports. The reports assist in providing data to remain in compliance with the Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA).

NOTE: Patient logs should never be pre-entered, altered, or falsified. Failure to follow these directions will result in referral to the SPC and automatic 100% loss of professionalism points for that rotation. This type of unprofessional conduct may also result in possible sanctions from the students' state Medical Licensing Board upon completion of the program. Clinical faculty will audit these logs at random times for completeness and accuracy.

Typhon Clinical Procedure Log (subject to Category C: Professionalism)

The Clinical Procedure log is required to be completed by students during their clinical year and should be logged into Typhon daily for each clinical rotation. This log shows the numbers and types of procedures performed during the rotation as well as the student's level of participation. (See page 33, Table 2 for procedure log minimums.) Upon graduation, this log is **required** by hospitals and ambulatory clinics for credentialing purposes. It is the student's responsibility to maintain a copy of this log for credentialing purposes when they seek employment. The program is not responsible for making copies of Clinical Rotation Assignments or sending in paperwork for credentialing.

NOTE: If you have any questions or difficulties with Typhon, please contact Mrs. Jennifer Butcher:
jennifer.butcher@lmunet.edu

Lincoln Memorial University-Harrogate Physician Assistant Program Understanding Clinical Competency Domains and the Compilation Reports

The LMU PA Program utilizes several measurable domains drawn from the ARC-PA accreditation standards as well as the Physician Assistant competencies in order to monitor and ensure that individual students are progressing and meeting Program determined minimums. As shown in the diagram below, all rotation assignments and determinants of professionalism directly relate to the monitoring of student clinical competency. Deficits in particular areas of competence can then be more effectively mentored and remediated in a timely manner *as needed*.



1) Patient Encounter Log Minimums/Compilation Report: (See page 32, Table 1 for example)

- a. Students are expected to play a direct role in patient care throughout their clinical phase of education. The Program has established minimum patient encounter numbers for each student per rotation; however, additional minimums have been set for patient acuity level, care setting, age, surgical settings and certain patient type encounters. As listed, each domain corresponds with a different clinical care aspect. Each domain has a set minimum total and sub-totals that must be achieved by every student to ensure a broad exposure to the healthcare system.

- b. Clinical students should refer to the Encounter Log Minimum Instruction Sheet (See page 31) when completing Typhon logging and compilation reports to help accurately log patients.
- c. Students may only log patient interactions that occur while on site with their clinical preceptor present. Volunteer work or working clinically in another manner will not be counted towards the minimums in any domain so as to ensure the quality of the interaction.
- d. Clinical students should only log interactions where they played a partial or full role in the care of the patient. Interactions that only involve observations (or “shadowing”) where little to no knowledge of the patient is known prior to the interaction should not be logged towards these minimums.
- e. Area IV (See page 32, Table 1), which relates to specific rotation assignments, shows the minimum number of patient encounters students must complete within the assigned dates of that particular rotation. These numbers cannot be logged outside of the assigned rotation.
- f. Areas I-III & V-VI cover interaction types that can be encountered and logged at any time during the clinical phase and, as such, may be logged at any time during the clinical phase regardless of the assigned rotation.
- g. It is expected that a single patient interaction will likely meet the criteria for several domains. For example, a thirty-year-old patient may present acutely to the outpatient clinic for a Behavioral Medicine complaint to the student who is currently on a Family Medicine rotation. In this scenario, the student will be able to log an encounter that counts towards Areas I, II, III, IV and VI.

2) Procedure Log Minimums:

- a. “Procedures” (See page 33, Table 2) logged in this section will generally relate to activities that require kinesthetic activities in addition to critical analysis of the patient interaction. Examples will include suturing, incision and drainage of abscesses, IV access and similar. However, other examples will include activities such as radiograph interpretation, medication counseling and others.
- b. Procedures are logged at any time during the clinical phase when they occur and need not be relegated or completed during a particular rotation.
- c. Logged procedures should include those where the student played an active role and performed at least part of the activity personally. While observational learning on the clinical phase is considered valuable and important, it will not count toward the competency requirements.

It is expected that the student should have 50% of their total patient encounters and procedures completed and logged in Typhon and a Compilation Report by the end of Fall semester (December EOS) and 80% completed and logged in Typhon and a Compilation Report by the end of the Spring semester (April EOS)

3) Minimum Clinical Time:

- a. This facet of achieving clinical competency relates to the minimum amount of time each student is expected to be on duty/on site with his or her clinical preceptor per rotation.
- b. The rotation minimum time requirement is distinct from the patient interaction requirements. Completing the minimum time on rotation does not exclude the need to see the minimum number of patients required for that rotation.
- c. For all four-week rotations, students must complete and log a minimum of 140 hours of on-site/on duty time with their preceptor except for the behavioral medicine rotation, which has a minimum of 120 hours. A minimum of 280 hours are expected for all eight week rotations. In addition, it is expected that on all rotations the student will work their preceptors' "full time" schedule to maximize learning. Students should seek out opportunities to learn on every rotation, even when they entail longer days, nights, and weekends. A student who becomes aware that they will be unable to meet the minimum hours should contact the program immediately so that a site re-assignment can be made.
- d. The minimum time limit is a programmatic requirement to ensure competency and to meet requirements for graduation. This is no different from an expected work schedule as required by an employer.

4) Preceptor Evaluation of the Student:

- a. This evaluation provides valuable feedback to the program; however, more importantly, it provides students with the opportunity to identify areas of strength and areas needing improvement based on their interactions with their preceptors. This is especially helpful considering that the evaluation is based on the Physician Assistant Competencies.
- b. Students must make certain that the preceptor is given the Evaluation Instruction Sheet so they can complete the evaluation in a timely manner since this evaluation is also used to determine a numeric grade for the rotation.

5) Professionalism:

- a. Professionalism is evaluated in several different ways and is considered to be more than simply showing up on time or the absence of complaints or problems. A big part of this area is evaluated by the student's preceptor on the aforementioned Preceptor Evaluation. In addition, student professionalism is evaluated on the timeliness of communications with the clinical team, pro-active behaviors regarding completing required rotation, credentialing, and capstone requirements, as well as the general ability to effectively time manage and engage in self-learning.
- b. This aspect is considered when assessing a student's clinical competence but also as part of individual rotation grades.

6) Rotation Examination or Assignment:

- a. All required clinical rotations have a written examination specific to that experience that must be completed and passed with an acceptable grade. These exams will be scheduled by the faculty and time set aside from rotation-related duties to complete the exams in a proctored setting. Passing these exams is not only key in determining clinical competence but is also used to determine a rotation's numeric score.
- b. Assignments are given in lieu exams for the clinical Elective and Selective rotations. These are graded by assigned faculty after the completion of the rotation period.

7) General:

- a. Students should consider their clinical phase a time to maximize their knowledge base through application. In general, the greater the number of chances to apply knowledge and learn from feedback and outcomes the greater the knowledge and competence.
- b. The characteristics of clinical competence can be legion; however, the Program has determined the domains listed above are pivotal in establishing an advanced level of clinical competence that, along with other variables, will ensure a graduate's success in entering the healthcare field and being able to rapidly adapt to the needs of the patient and the healthcare team.
- c. Minimum requirements listed should be considered just that, minimum requirements. Going above and beyond these will better ensure student success.

How the Program Tracks Clinical Student Competency Progression

The Program will use the Typhon tracking system for students to log their patient encounters, completed procedures, and clinical time. The Program will also use this platform to house and collect Preceptor Evaluations of Student Performance.

As mentioned, Professionalism will be evaluated from the preceptor's evaluation but also in the student's timeliness and completeness of required communication and paperwork. Frequent deficits and lapses are communicated to the Director of Clinical Education and can, if a student is unresponsive to mentoring, result in a referral to the Student Progress Committee for review.

The Program also utilizes the PAEA clinical exams with the exception of the Orthopedic rotation for which a Program-designed exam is administered. The students will be required to prepare a patient case presentation for the Elective and Selective rotations in lieu of an exam.

Remediation of Competency Deficits

All of the aforementioned components are considered integral parts in attaining the advanced level of clinical competency the Program has developed and expects from all students prior to graduation. With the exception of a few components, competency development is expected over the course of the entire clinical phase. This is especially true since all students do not have the same sequence of

rotations from beginning to end. Minimum progression thresholds will be monitored at the end of each semester and are dealt with proactively.

It is expected that students should have 50% of their patient encounters and procedures completed by the end of Fall semester and 80% completed by the end of the Spring semester. Students will be required to create and turn in a separate Compilation Report (based upon the Typhon logging; (See Table 1) to show their progress at the December and April EOSs. The student's final compilation report will be due when the student returns to campus for graduation activities in July. Clinical Faculty will monitor the Competency Compilation Reports for completeness, accuracy, and achievement of set competencies.

Requirements that are not achieved will result in communication with the student to ascertain barriers that may be interfering and to mentor strategies to surmount these barriers. If, after the completion of the Spring Semester it is deemed that a student will not be able to achieve a certain domain (i.e. procedure logs, patient encounter logs,) then the student's elective or selective rotation may be changed in order to make certain these domains are achieved.

Failed rotation exams and preceptor evaluations are considered more serious lapses in competency achievement and will result in evaluation by the Student Progress Committee (SPC). Delays in graduation are also considered for any competency domain that will not be achieved prior to graduation and will be considered even when numeric scores, used for rotation/course purposes, indicate a "passing" score.

Competency Compilation Reports: Encounter Log Minimum Instruction Sheet

These reports are due in December, April, and July within 1 week after the 1st day of the EOS.

1. In Typhon, go to Case Log Totals (Graphical)
2. Under date range, put in the dates of the blocks you just completed prior to the EOS (EX: Blocks 1-5 dates for Dec EOS, Blocks 6-9 dates for April EOS, Blocks 10-12 dates for July EOS) and click apply filters button. These dates will include all entries for your chosen blocks.
3. Using these numbers, fill out your competency worksheet for your chosen blocks (Remember there are two pages: one for patients and the other for procedures).
4. The worksheet will automatically update totals. It will also (eventually) change colors when minimum competencies are completed.
5. Save your worksheet as (**last name_first name competency worksheet**) and upload to the drop box folder- Compilation Reports - <https://www.dropbox.com/request/tshZfOiB8T8m7rEswQ2B>

Area I

Do not ever choose “other” because it doesn’t count toward your minimums. Please choose “scheduled procedure” when appropriate, but it will not count toward your Area I minimums. It will count in other areas if information is entered correctly.

Typhon field “Clinical Information” section under Reason for the visit

Preventative – Annual/Well person exam, employment/sports physical, Pt./Fam. Ed/Counseling, screening/health promotion

Emergent – ER/ED visit

Acute – New Admit, Initial visit, episodic (means an established patient with a new problem), New Consult

Chronic – Follow-up (Consult), Follow-up (Hospital visit), Follow-up (Routine), long term care, nursing home

In addition to logging in this area you also need to log under the “Other questions about this case” section. You will see a drop-down section where you are to choose: acute, chronic, emergent, or preventative.

Area II

1. Typhon field under “Student information” section under “Setting Type” choose: Outpatient, Emergency room/dept., Inpatient.
2. We can count long term care as Inpatient.
3. For Operating room experience, under “Student information” section in Surgical Management check “Operative Room”

Area III

Age of all patients is a required entry under “Patient Demographics” section

Area IV

Rotation minimums as listed; rotation type is a required field in “Student information” section under Rotation

Area V

Must check if patient is:

1. Pre-operative OR
2. Intra-operative OR
3. Post-operative OR
4. Leave blank if it does not apply

Area VI

1. If pre-natal, check the box under “Patient Demographics” section that reads “pre-natal visit” and enter age of the fetus.
2. For GYN patients you must use a GYN ICD-10 code; any appropriate GYN code will be accepted and you must choose an answer for the question “*Is this a GYN Patient?*” seen under the “Other questions about this case” section.
3. For Behavioral health patients you must enter the psych disorders seen under the “Other questions about this case” section and check the box “Psych Mental Health Case”

Table 1: Example Competency Compilation Report

| Competency Compilation Reports: Encounter Log Minimums | | | | | | | | | | | |
|--|--|----------------------|--------------------------|---------------------|-----------------------------|-------------------|-----------------|-----------------|----------------|----------|--|
| Area I (B3.02) T:1000 | Classification of patient encounter <u>based on the acuity level</u> regardless of setting, age or rotation. | | | | | | | | | | |
| | Preventative | Emergent | Acute | Chronic | | | | | | | |
| | 60 | 120 | 400 | 400 | | | | | | | |
| Area II (B3.04) T:820 | Classification of patient encounter <u>based on the setting</u> in which it took place regardless of acuity, age or rotation. | | | | | | | | | | |
| | Outpt. | ED | Inpt. | | | | OR | | | | |
| | 600 | 90 | 75 | | | | 30 | | | | |
| Area III (B3.03a) T:920 | Classification <u>based on patient age</u> at the time of the encounter regardless of acuity, setting or rotation. | | | | | | | | | | |
| | Infants (<2 yrs.) | Children (2-12 yrs.) | Adolescents (13-17 yrs.) | Adults (18-64 yrs.) | Elderly (65 yrs. and above) | | | | | | |
| | 20 | 75 | 40 | 400 | 230 | | | | | | |
| Area IV (B3.07) T:920 | Classification <u>based on the rotation</u> in which the encounters took place. | | | | | | | | | | |
| | Fam. Med | Peds | Emergency Medicine | Internal Med | Women's Health | Behav. Med | General Surgery | Ortho | Selective | Elective | |
| | 150 | 90 | 90 | 150 | 70 | 60 | 70 | 90 | 90 | 60 | |
| Area V (B3.03c) T:110 | Classification <u>based on the surgical setting/timing</u> in which the student played a role in the patient's care while on a surgical rotation. | | | | | | | | | | |
| | | | | | | | Pre-operative | Intra-operative | Post-operative | | |
| | | | | | | | 25 | 30 | 35 | | |
| Area VI (B3.03b & d) T:190 | Classification <u>based on specific type of encounter</u> regardless of the patient demographic, acuity or setting. | | | | | | | | | | |
| | | | | | Women's Health | Behavioral Health | | | | | |
| | | | | | 30PN, 40GYN | 80 | | | | | |

Procedure Log Requirements

Please see **Table 2** for the numbers and types of required procedures to be logged. You are required to log the specific numbers of procedures in the chart; however, you must log a minimum of 500 total procedures for the clinical year. For the remainder of the procedures you can choose from any of the other procedures listed in the Typhon procedure log.

It is expected that you should have 50% of your patient encounters and procedures completed by the end of Fall semester and 80% completed by the end of the Spring semester. You will be required to hand in a separate Competency Compilation Report to show your progress at the December EOS and at the April EOS. Your final report will be due when you return to campus for graduation activities.

Failure to adequately log patient encounters and procedures will result in delay of graduation until it is satisfactorily completed.

Table 2: Procedure Log Requirements

| <u>Procedures</u> | <u>Minimum to be logged</u> |
|---|-----------------------------|
| Adm. Of local anesthesia | 10 |
| Assist in surgery – this number represents actual participation | 30 |
| Auscultate fetal heart sounds | 10 |
| Culture collection (blood, throat, wound, vaginal) | 15 |
| Demonstrate aseptic technique | 30 |
| EKG interpretation | 20 |
| Explanation of medication to patients | 60 |
| Explanation of procedures | 40 |
| Injections | 10 |
| Pelvic Exam | 10 |
| Rectal Exam | 5 |
| Suturing | 20 |
| Well-child exam | 15 |
| Wound care & dressing | 20 |
| Radiologic Studies Interpretation - Skeletal Films | 30 |
| Radiologic Studies Interpretation - CXR | 20 |
| Radiologic Studies Interpretation - CAT Scan | 10 |
| Casting & splinting & applying a sling | 10 |
| PAP smear collection | 5 |

ADMINISTRATIVE GUIDELINES AND PROGRAM POLICIES FOR THE CLINICAL YEAR

Academic Probation/Dismissal – See Student Handbook

Dress Code – See Student Handbook

Proper Identification – See Student Handbook

Readmission following Leave of Absence: See Student Handbook

Student Background Check, Drug Screening, and Arrest Policy – See Student Handbook

Student Progress Committee - See Student Handbook

The LMU-Harrogate PA Program includes specific policies and guidelines for the clinical year. The policies are as follows:

A. PROFESSIONAL CONDUCT

Behavior consistent with high professional, ethical, and moral standards is paramount in the practice of medicine. Professional behavior refers to those acts reflecting the status, character, and standards of a profession. Ethical behavior is that behavior which reflects the accepted principles of right and wrong that govern a particular profession. Moral behavior refers to conforming to the acceptable standards of behavior and conduct as practiced by a community.

Any Physician Assistant student involved in behavior that is deemed unprofessional, unethical, or immoral is subject to disciplinary action, which may include reprimand, probation, rotation failure, suspension, or dismissal from the program. **Any rude, disrespectful, or derogatory remark, gesture, or act towards any instructor, the program, university faculty, or staff member, clinical preceptor, peer, patient or staff member of any clinic or hospital is not consistent with professional behavior.**

The relationship between the physician assistant student and preceptors and the physician assistant student and patient must always remain at a professional level.

Relationship with Preceptors:

The student is not to engage in conversations or relationships with preceptors construed as inappropriate, unethical, or illegal. Dating and intimate relationships with preceptors is inappropriate and is never a consideration. Unprofessional conduct with preceptors will be grounds for disciplinary action that may include removal from the site and dismissal from the LMU-Harrogate PA Program.

Relationship with Patients:

The student is not to engage in conversations or relationships with patients that are construed as inappropriate, unethical, or illegal. Dating and intimate relationships with patients is inappropriate and is never a consideration. Unprofessional conduct with patients will be grounds for disciplinary action that may include removal from the site and dismissal from the LMU-Harrogate PA Program.

Conduct and Professionalism – See Student Handbook for detailed Professionalism expectations

B. COMMUNICATION

The program makes every attempt to keep in close contact with each student and clinical site. The Director of Clinical Education is available for consultation via email or telephone with the student or site whenever necessary.

Communication between PA Clinical Faculty and Clinical PA Students is accomplished through several methods that may include personal or electronic site visits, email, telephone calls, and voicemail. Voicemail boxes should be checked regularly to be sure they are not full. Students should be allowed to check and respond to LMU email at least twice a day as they are required to respond to all email from LMU employees within 48 hours of receipt. It is important that students maintain professionalism in all personal and email interactions with faculty, staff, preceptors, and facility staff. Students are expected to respond promptly and respectfully to emails sent by these parties. It is good practice to re-read an email prior to sending, and avoid sending emails when frustrated or upset. Writing in all capitals can often be interpreted as 'yelling' and should also be avoided. If you send a request or ask a question, be sure to "close the loop" by acknowledging the response with a thank you. Whether checking email is done at the practice site or at another nearby facility (i.e. university/medical center or even public library,) is at the discretion of the preceptor.

While at clinical sites, students are to be sensitive and respectful to everyone and remember they are a *guest*. Minor problems can be quickly magnified into major issues through miscommunications and/or failure to communicate. Please be cognizant of these concerns, remain professional, and properly communicate with all clinical site personnel. That being said, problems, such as challenges in communication, can occur on rotations. They may be academic, professional, or personal in nature. If the issue is not related to safety, students should use the following guidelines and chain of command when dealing with any problems:

- Attempt to resolve problems with the individual directly.
- If this is not possible, discuss it with the preceptor or contact person.
- **If unable to resolve a problem, contact the Director of Clinical Education ASAP at 423-869-6508.** If the Director of Clinical Education is unavailable, please contact the Clinical Rotations Coordinator in the PA office, and if she cannot help you, she will put you in contact with an available faculty member. Main PA Program Clinical Team number: 423-869-6679
- See Section N regarding personal safety and Section Q in regards to Title IX.

C. STUDENT IDENTIFICATION AT THE CLINICAL SITE

It is state law in most states that students must only identify themselves as PA Students both verbally and on an I.D. badge. Students may be required to wear an additional security I.D. badge at clinical sites, especially hospitals. The clinical site(s) will make arrangements for you to obtain a badge during an orientation prior to beginning the rotation. Students are not allowed to take or post photos of themselves wearing these badges or wear them in public as they are not employees of the facility. Students are required to turn the badges in to the facility as soon as the rotation ends. Failure to follow all of these guidelines will result in deduction of professionalism points and possible SPC referral.

D. STUDENT RESPONSIBILITIES TO THE PRECEPTOR, FACILITY, AND PATIENTS

- It is the student's responsibility to contact the preceptor or his/her designated contact person **two weeks prior** to the start of a new rotation, to determine what time, where, and to whom the student should report for the first day of that rotation. All students are required to speak to someone by phone at the rotation site for confirmation.
 - If you cannot speak to someone at the rotation site directly to gather this information within 48 hours, contact the Clinical Rotations Coordinator immediately for assistance.
- Maintain professional behavior at all times and dress in the manner as prescribed in the student handbook. Students should wear a clean, pressed white coat/jacket with LMU name badge clearly identifiable at each rotation site as it complies with the rotation site dress code. Some sites may require additional identification. Students must only identify themselves as PA Students.
- Students should address the preceptor, clinical staff, and patients appropriately and with reverence.
- Students should avoid interrupting or disagreeing with preceptors in front of patients and other health care workers.
- Students must attend the rotation 100% of the time, work hours as designated by the clinical preceptor, avoid tardiness, and have any absences excused by the Director of Clinical Education. Students must make up missed time. Students are not to exceed a total of two (2) days missed during four week rotations or four (4) days during 8 week rotations or more than five (5) days total per semester.
- Students will independently review medical textbooks and articles to expand their knowledge of problems and procedures typically seen in the practice setting or those as assigned by the preceptor.
- Students are required to be supervised by a licensed PA, physician, nurse midwife, or nurse practitioner. PAs, NPs, and Nurse Midwives must be supervised by a licensed physician.
- Students must always work under the direct supervision of a preceptor: either the assigned preceptor or alternate. Students are at no time allowed to solely be in charge of a patient's care and all patients should be assessed with the preceptor before the patient is discharged. Students are not allowed to provide any services or advice without consultation and supervision of the preceptor.
- Students will not use their preceptors' EMR or ordering system-related usernames or passwords.
- Any documentation written by the student must have their name clearly written followed by the initials "PA-S" (Physician Assistant Student). Students who possess other titles (e.g. RN, RT, etc.), will at no time be allowed to use these designations.
- All documents (i.e., progress and discharge notes) prepared by students, must be reviewed and countersigned by the preceptor that is responsible for the patient's care. When applicable, this must be compliant with the CMS (Centers for Medicare and Medicaid Services) guidelines for medical students and residents.)
- Students should only participate in tasks that are appropriate to their stage of development; while they may perform procedures within the scope of practice as authorized by the PA program, preceptor, and clinical site, students are not to undertake any procedures without the approval and supervision of the preceptor.

- When students are performing breast, genital, and rectal examinations, a chaperone is required during the entire examination.
- Neither the nursing staff, nor ancillary support staff are permitted to carry out orders given by a PA student.
- Students are not allowed to write orders or prescriptions independently.
- Students should not relay any information or assessments to the patient or family members without approval from the preceptor to do so.
- Students are not allowed to work at any rotation site for compensation during the clinical year.
- Students should not receive or accept gifts in the form of money or material goods in return for his/her assistance at a clinic or facility, nor should they give them. All students are encouraged to send thank you notes to preceptors once the rotation ends.
- Students cannot be under the influence of alcohol or drugs (even OTC or prescription drugs) when working at a clinical site, taking call, or attending events at the site or University. Students must not compromise the safety and health of patients, students, faculty, or hospital/clinic personnel.
- Students should honor patient privacy laws (HIPAA), patient-physician confidentiality, and deliver health care service to all patients without regard to their national origin, race, creed, age, sex, disease status, sexual orientation, religion, socioeconomic status, veteran status, disability, and political beliefs.
- Each student should follow universal precautions while at the clinical sites. All students should understand appropriate PPE to use for given circumstances. If a student is not aware of the appropriate equipment to be utilized, they need to contact the Director of Clinical Education for additional training. (See Appendix H&I) Students are required to report any safety issues to the Director of Clinical Education immediately.

E. LMU-HARROGATE PHYSICIAN ASSISTANT PROGRAM RESPONSIBILITIES

- Serve as a resource in developing the PA role in a specific practice setting.
- Orient preceptors and students to the structure of the preceptorship and student learning.
- Serve the medically underserved populations.
- Provide each student with a malpractice insurance policy throughout the entire program. The Hospital Relations Coordinator provides this information to clinical offices, facilities and hospitals. (See Appendix N.)
- Evaluate the clinical experience through evaluations and periodic site visits and strengthen the experience as needed.
- Review student evaluations of the clinical site on a monthly basis and address any issues or concerns.
- Maintain close contact with students to answer questions, provide support, and assist with any problems before they arise, if possible.
- Provide objectives for each rotation, with the understanding that individual learning goals may be tailored to the student and preceptor. Objectives not met during the rotation should be researched by the student.
- Provide CME credit for MD and PA Preceptors.

- The Director of Clinical Education is responsible for assigning the grade for rotation performance. Information from all evaluations and completion of patient and procedure logs, end of rotation exams, OSCEs, case presentations, projects, and professionalism are the basis for the decision whether to pass the student, extend or repeat the rotation, place the student on probation, or in some instances, dismiss the student from the program. (See grade calculations.) These performance evaluations become a permanent part of the student's record.

F. PRECEPTOR RESPONSIBILITIES

- The student will be assigned to a specific Preceptor who will have overall responsibility for the student during the rotation. This does not preclude the student from being assigned to another provider within the practice during the rotation.
- The Preceptor or preceptor's designee will not ask students to substitute for clinical or administrative staff on any rotation at any time.
- The Preceptor will provide appropriate supervision of student activities, ensuring the highest standards for patient care and safety while maintaining a sound educational experience for the student.
- The Preceptor will review the pertinent clinical preceptorship objectives.
- The Preceptor will take the responsibility to introduce the student and inform appropriate personnel in the hospital and/or clinic of the student's arrival and role. However, this does not preclude the student from following up with appropriate personnel at each and every facility that the student will be utilizing during their rotation prior to rotating in that facility.
- The Preceptor will orient the student to the clinical setting and discuss practice policies and procedures and their expectations.
- Establishment of student work schedules is the responsibility of the Preceptor. LMU-Harrogate PA Program would prefer the student to experience a typical exposure to their practice. The student is assigned to the rotation with the requirement of working full time following the preceptor's schedule, including call, weekends, and holidays as requested by the preceptor. It is expected that the student will be on call for emergencies at any time they occur.
- The Preceptor may assign outside readings to promote learning, demonstrate clinical skills, and assess oral case presentations.
- The Preceptor will directly supervise, observe, and teach in order to develop the student's clinical skills and to ensure patient safety.
- The Preceptor is expected to ensure that the patient has given consent for the student to interact with the patient.
- The Preceptor will comply with current laws, regulations, and standards of educational and medical practice. The student should not be expected to initiate or terminate patient care that is not supervised by the physician or the hospital service algorithm (written or verbal) for the problem.
- All documents (i.e., progress and discharge notes) prepared by students, must be reviewed and countersigned by the preceptor that is responsible for the patient's care. When

applicable, this must be compliant with the CMS (Centers for Medicare and Medicaid Services) guidelines for medical students and residents. Please refer to the following link for more detailed information.

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Teaching-Physicians-Fact-Sheet-ICN006437.pdf>

- The preceptor will not assign the PA student to write orders or prescriptions independently.
- The Preceptor will participate in evaluating the student's performance by providing verbal and written feedback to the student and the program. At the completion of the rotation, the preceptor can access their Typhon account by using the informational sheet (See Appendix E) provided by the student. Based upon the Preceptor's recommendations and other factors that can be found in the grade calculation section of this handbook (See Page 19), the Director of Clinical Education will be able to assign the final rotational grade.
- The Preceptor will inform the program if significant problems develop (of personality or professional nature, etc.) which require faculty attention, knowledge, or consultation or if circumstances arise that may prevent the overall goals from being accomplished.
- The Preceptor will not discriminate against any student because of age, creed, handicap, national origin, race, gender or sexual orientation.

G. LMU-HARROGATE INCLEMENT WEATHER POLICY

Lincoln Memorial University holds student safety at its highest concern. In the event that a weather emergency is forecast, the LMU-Harrogate PA Program Clinical Team will contact students within the geographical area that will be affected by the emergency to determine if evacuation from the area is needed. If this is the case, the student must leave and will be given further instruction on return to the site once the emergency has passed and the student can safely return to the area. If evacuation is not needed, and the clinical site is within walking distance or if you can travel safely via public transit, the clinical student should report to the clinical site. If the student is working at a private practice or other outpatient site, the student should contact the preceptor to confirm that the site is open and operating. If travel to the clinical site would be dangerous, the student should let their clinical preceptor and Director of Clinical Education know that the site is not safely reachable. The procedure for documentation of this absence will be the same as for an excused absence, where the student must upload the absence form to the appropriate file with the preceptor's signature once return to the site is safe. If the rotation should end before the inclement weather allows return to the site, the Clinical Team will contact the preceptor for verbal confirmation with the preceptor. There will be no penalty for this decision.

Absences incurred due to inclement weather must be made up immediately following the absence. This may be done by working nights/call shifts if it is feasible within the duty hour restrictions and time left in the rotation. If this is not available for the student, additional exercises or makeup dates will be planned with the student to assure they complete all requirements for the LMU-Harrogate PA Program.

H. OSHA REQUIREMENTS AND TRAINING & HIPAA TRAINING

OSHA Guidelines and Training

Students are responsible for following required universal precaution guidelines at the clinical sites. This includes the use of personal protective equipment, proper care and disposal of sharps, and other precautionary measures. Students will receive training during the Didactic Phase and again prior to starting the Clinical Phase.

HIPAA Training

Students will receive HIPAA training prior to beginning clinical rotations. A certificate of completion will be provided to students for proof of this training.

I. HOUSING, TRANSPORTATION, AND MEALS

Students are responsible for all housing, transportation, and meals associated with rotations, EOS days, and pre-graduation activities while in Harrogate or other locations. On occasion, clinical sites may have housing/stipends available. That information can be provided by the site. It is the responsibility of the student to make all housing/transportation arrangements.

J. MEDICAL DIAGNOSTIC EQUIPMENT

All students should bring their own properly functioning medical diagnostic equipment with them to all clinical rotations. This includes blood pressure cuffs, stethoscope, ophthalmoscope, otoscope, reflex hammer, tuning forks, and “neuro exam kit.”

K. EMAIL

The official form of communication for the LMU-Harrogate PA program and the campus is the student’s LMU-Harrogate email account address. No other email is recognized as official and is prohibited from use except in the event of university email account outage. It is the student’s responsibility to arrange for continuous email service and to ***access it daily*** and as often as possible while out-of-town on rotation. Emails should be responded to within 48 hours. If the student is unable to access email, they should notify the Director of Clinical Education by telephone so other arrangements can be made.

L. CHANGE OF NAME OR ADDRESS

If an LMU-Harrogate PA Student changes their name, they must notify the Registrar, the Admissions Coordinator, Security, Information Services, Financial Aid Officer, and the Director of Clinical Education. They must also have their LMU-Harrogate badge updated.

If an LMU-Harrogate PA Student changes their personal and/or emergency contact information, they must notify the Director of Clinical Education.

The Registrar, Admissions Coordinator, and Director of Financial Services will need each student’s current name and physical address at graduation.

M. EMPLOYMENT

Employment is not consistent with the learning environment in the clinical year. During the clinical year, students are expected to work full time following your preceptor's schedule with a minimum of 140 hours per 4 week rotation except for Behavioral Medicine, which has a minimum of 120 hours. In addition, students may be required to take on-call, weekends, holiday, evenings, and/or nights. The emergency medicine rotation may require students to work 12 hour shifts. Surgery rotations will require students to be on-call and to participate in any surgery that occurs during the nights, weekends, or holidays.

N. PERSONAL SAFETY AND SECURITY

A. Personal Safety

i. Program's responsibility

1. To ensure student and faculty safety at clinical rotation sites, the program conducts and catalogs routine site visits to evaluate the safety of the clinical site. Any clinical site deemed unsafe, is immediately discontinued by the program.
2. The program takes seriously any student allegation or concern regarding safety, and will investigate promptly any safety concerns.

ii. General Safety

1. If you feel unsafe due to a patient or employee at your rotation site, immediately report this to your preceptor, the office manager or security. If this is not handled immediately by on-site personnel, then report it to the Director of Clinical Education.
2. If at any time during your clinical education you feel that your housing is unsafe please contact the housing manager. If this is not taken care of immediately, then report it to the Director of Clinical Education and alternate housing arrangements will be made to ensure safety.
3. If at any time while on clinical rotations you feel that your rotation site is unsafe, you are to immediately contact the Director of Clinical Education by phone at 865-585-0977. If the Director of Clinical Education is unavailable, please contact the Clinical Rotations Coordinator in the PA office, and you will be put in contact with an available faculty member.
4. Immediately notify the Director of Clinical Education of any expected or unexpected absences from the clinical rotation. All students must ensure that the program has the most current contact information for you at all times.
5. The main PA Program Clinical Team number is 423-869-6679, but **if you feel your safety is in immediate jeopardy you are to call 911 and report this to the police.**

iii. Student safety and security is of utmost importance, therefore certain common sense measures should be kept in mind as you travel to various rotation sites:

1. Don't leave valuables such as your wallet, checkbook, jewelry, or keys in open view.
2. Mark easily stolen items like portable TV's, radios, pocket organizers, and computers and keep a list of serial numbers, model numbers, and descriptions.

3. Lock doors and windows when going out, and never prop doors open when entering/exiting the apartment/dormitory building - it is too easy for someone paying attention to sneak in.
4. Don't store large amounts of money or credit cards in your apartment.
5. Take care of your keys; do not lend them to anyone.
6. Use the "buddy system" - go out with a friend, especially if you are headed for a late night snack or study break.
7. Walk purposefully. Look confident. Always watch where you are going. Avoid shortcuts through isolated areas. Be alert to your surroundings. If you still have concerns, call the health care facility security for an escort.
8. If entrance/hallway lights are burned out after working hours, report them to maintenance.
9. If you see unusual activity or someone loitering, call hospital security immediately.

iv. Driving/Parking Safety

1. Lock all doors and close all windows when leaving your car.
2. Park in well-lit areas and try not to walk alone to/from parking areas at night.
3. Have keys ready as you approach your car. Check car for intruders before entering and lock door immediately after getting into your car.
4. If you must store valuables in your car, store them out of sight (preferably locked in trunk).

O. EXPOSURE TO INFECTIOUS AND ENVIRONMENTAL HAZARDS AND PREGNANCY

Learning and practicing medicine involves exposure to infectious agents and other hazards that may cause disease or disability. The potential for injury increases when a person is pregnant, lactating, or temporarily disabled. The greatest hazards exist while working directly with patients, which may result in serious injury to any person or fetus involved. Exposure to formalin, toxic drugs, abortifacients, infectious agents, inhalation anesthetics, radiation, and other agents present additional hazards. Pregnant, lactating, or temporarily disabled students must complete the following requirements in order to continue participation in the LMU-Harrogate PA curriculum and activities:

- Any student enrolled in the LMU-Harrogate PA Program Clinical Phase who becomes pregnant, is lactating, or is suffering from a temporary disability must:
 - Immediately notify the Director of Clinical Education
 - Contact their treating health care provider immediately to obtain recommendations for minimizing exposure to hazards that may be associated with participation in the LMU-Harrogate PA Program curriculum.
 - Provide the Director of Clinical Education with a signed statement from the treating physician that defines permitted limits of exposure to possible hazards during the period of pregnancy, lactation, or temporary disability.
 - Provide the Director of Clinical Education with updated recommendations from the treating health care provider for each semester during which they are pregnant, lactating, or temporarily disabled.
 - Notify the Director of Clinical Education of any change in recommendations from their treating health care provider.

The Director of Clinical Education will decide, in consultation with the Office of Accessible Education Services, whether accommodations for the treating health care provider's recommendations are possible without fundamental program changes and while meeting essential academic requirements of the LMU-Harrogate PA Program. Time off due to pregnancy, lactation, or temporary disability may delay progression in the LMU-Harrogate PA Program curriculum.

The LMU-Harrogate PA Program recognizes that pregnant, lactating, and temporarily disabled students have rights and bear the responsibility for decisions concerning their health and should expect due consideration from Program faculty and staff. At the same time, the student must complete all requirements of the LMU-Harrogate PA Program curriculum by following a schedule or plan without fundamental change to the Program curriculum, while meeting essential academic functions, and which deem the risks assumable by that student and treating health care provider. An LMU-Harrogate faculty member may refuse to allow a pregnant, lactating, or temporarily disabled student to be actively involved in any activity whenever that faculty member considers the potential for accidents or exposure to hazards are too high and the treating health care provider has not cleared the student. Copies of all documents pertaining to a pregnant, lactating, or temporarily disabled student's assignment shall be maintained in the student file.

P. COMMUNICABLE ILLNESSES / EXPOSURE and INCIDENT REPORTING

It is the policy of the LMU-Harrogate PA program that all communicable illness exposures are to be handled according to CDC recommended guidelines. (See Appendix H&I for updated guidelines). Any student on clinical rotations subject to a communicable illness exposure at the clinical site (i.e., blood or body fluid exposure, TB exposure, or needle stick) should follow these steps:

1. Notify the preceptor immediately.
2. Initiate and follow the exposure protocols of the facility in which the exposure occurred.
3. Complete an Incident Report
4. Contact the Director of Clinical Education as soon as possible.
5. The Program will ensure that the student is appropriately informed and receives appropriate CDC recommendation guideline care.
6. Ultimately, the student is responsible for initiating follow up care after an exposure at a physician's office or at the clinic on campus (if in or near Harrogate).
7. See specific recommendations below.
 - i. Influenza (Flu)
 1. All students are to follow the Influenza vaccination policy found in the Student Immunizations, OSHA Requirements & HIPAA Training section in this manual.
 2. Any student displaying "flu-like" symptoms should notify their preceptor and the Director of Clinical Education. In an effort to minimize viral spread and to promote the

health and the well-being of the student, students with flu illness will temporarily stop all clinical activities until symptoms are resolved. The exact timeframe of return to clinical activities will be determined by collaborative communication with student and the Director of Clinical Education.

ii. Tuberculosis

1. All students are to follow the TB screening protocol found in the Student Immunizations, OSHA Requirements & HIPAA Training section in this manual.
2. Students with known TB exposure during a clinical rotation are to follow the office/hospital protocol for reporting the exposure and are to contact the Director of Clinical Education for guidance through the CDC exposure recommendations.

iii. Ebola, meningitis, or other highly contagious pathogens

1. Always exercise universal precautions with all patients.
2. In the event that Ebola or any other highly contagious pathogen is identified at the facility where you are training, contact the Director of Clinical Education for further direction to determine the safety risk and necessary actions to maintain your safety.
3. In the event of your exposure to Ebola or other highly contagious pathogen, notify your preceptor at once. Follow the office or hospital's exposure protocols and notify the Director of Clinical Education as soon as possible. The Director of Clinical Education will guide you through CDC recommendations for such exposure.

- iv. Any student absence resulting from a communicable illness or exposure will be handled on a case-by-case basis. Students are given a preset number of absences built into each semester of clinical rotations. In the event a student exceeds this preset number of absences as a result of exposure, the program will work with the student to determine the best course of action for continuing in the program without being delayed. The Student Progress Committee generally handles this process.

Q. ZERO TOLERANCE FOR SEXUAL VIOLENCE AND HARASSMENT

All students should be able to study in an atmosphere free of harassment, sexual violence, and gender discrimination. Title IX makes it clear that violence and harassment based on sex and gender is a Civil Rights offense subject to the same kinds of accountability and the same kinds of support applied to offenses against other protected categories such as race, national origin, etc. If you or someone you know has been harassed or assaulted, you can find the appropriate resources on the LMU website: <https://www.lmunet.edu/about-lmu/office-of-institutional-compliance/title-ix-policy-and-procedure.php>

R. STATE LICENSURE

Students need an evaluation statement from the Program Director in order to gain state licensure as a Physician Assistant. This statement must disclose to the licensing agency any and all anomalies in the PA student's education. Such disclosures include, but are not limited to: academic probation, leave of absence, academic course failures/repetitions, professionalism sanctions, drug/alcohol

offenses, or warnings/sanctions from any department within LMU-Harrogate. This may delay, inhibit, or limit licensure.

S. REFERENCES AND LETTERS OF RECOMMENDATION FROM FACULTY AND CLINICAL PRECEPTORS

Faculty and Clinical Preceptors are occasionally asked to provide references and letters of recommendation for scholarships, employment, and internships. Students are encouraged to formally contact them to request a reference or letter of recommendation. Receiving a reference or letter of recommendation from a faculty member or clinical preceptor is a privilege and not a right. These individuals are under no obligation to provide references or letters of recommendation to students. It is not a guarantee that such letters will be favorable, which is why personal discussions with the faculty member are important. When approaching faculty or clinical preceptors for the above, students are encouraged to keep the following in mind:

- Students should formally contact the individual in person or by email. Let them know why they are being asked for the reference.
- Students are encouraged to select faculty members or clinical preceptors who have had regular personal interaction with them. Letters of recommendation supported by specific professional interactions are more meaningful.
- Requests should be made in a timely manner (at least one month in advance).
- Many faculty or preceptors will want to meet to discuss the application as well as specific personal attributes, goals, and qualifications.
- All required materials to submit the letter of recommendation (envelope, stamp, address, email address, etc.) should be provided by the student.

T. PA JOB BANK

The LMU-Harrogate Office of Alumni Services maintains an online PA Job Bank for graduates.

Visit <http://Harrogatealumni.LMUnet.edu> and click on “PA Job Bank” to see the types of positions being advertised to LMU-Harrogate PA Program graduates.

**Lincoln Memorial University-Harrogate
Physician Assistant Program**

**Clinical Manual
Appendices**

Appendix A
LMU-Harrogate Physician Assistant Program
Receipt of Clinical Manual

I hereby acknowledge that I have received a current copy of the Clinical Manual. The Clinical Manual for the LMU-Harrogate Physician Assistant Program is designed to provide some policies and procedures, along with information that is pertinent to my success in the clinical year. I understand that I should refer to the Student Handbook for all program policies and procedures and to the Clinical Manual for all clinical policies, procedures and requirements.

It is my responsibility to read and follow this manual. I further acknowledge that I am responsible for all the information contained within this manual, and I will abide by the policies, rules and regulations set forth thereof. I understand that failure to comply and/or conform to the guidelines, academic requirements, rules and regulations of this manual could result in disciplinary action, suspension, or termination from the Lincoln Memorial University-Harrogate Physician Assistant Program.

If there are questions regarding the manual, I will direct them to the Director of Clinical Education for clarification.

Student Signature

Printed Name

Date

Appendix B
LMU-Harrogate Physician Assistant Program
Email Attestation

I understand that the official form of communication for the LMU-Harrogate PA program and the campus is my LMU-Harrogate email account address. No other email is recognized as official and is prohibited from use except in the event of university email account outage. It is my responsibility to arrange for continuous email service and to ***access it daily*** and as often as possible while out-of-town on rotation. I will respond to all programmatic and rotations-related emails within 48 hours.

If I am unable to access email, I will notify the Director of Clinical Education by telephone (823-469-6508) so other arrangements can be made.

Student Signature

Printed Name

Date

Appendix C
LMU-Harrogate Physician Assistant Program
Acknowledgement of Attendance Policy

I, _____ understand that if I am going to be
(Print Name)

absent from a rotation, I will immediately contact my Preceptor and the Director of Clinical Education notifying her/him of the circumstances causing the absence. I also understand that to complete the process for an excused absence, verbal notification must be followed by a written request along with a Preceptor-signed absence form uploaded into Dropbox. The Director of Clinical Education reserves the right to request sufficient documentation attesting to the reason(s) for the absence.

Failure to notify both the Director for Clinical Education and the Preceptor of any absence from a rotation, regardless of the reason, results in an unexcused absence. **A Preceptor's absence is not considered an excused absence for a student. If the Preceptor is going to be gone, I will contact the PA Program ASAP.** One unexcused absence requires review by the Director of Clinical Education. Two or more unexcused absences require review by the PA Student Progress Committee and could lead to failure of the rotation.

Student's Signature

Date

Director of Clinical Education's Signature

Date

Appendix D
LMU-Harrogate Physician Assistant Program
Rotation Absentee Form

Student Name _____
Rotation _____ Block _____
Date(s) Absent _____ Total Days Missed _____

REASON FOR OCCURRENCE:

_____ *STUDENT ILLNESS* _____ *FAMILY ILLNESS*
_____ *DEATH IN FAMILY* _____ *WEATHER*
_____ *MEDICAL APPOINTMENT* _____ *TRANSPORTATION*
_____ *ACCIDENT*

OTHER _____

Per clinical manual directions, I will email and obtain permission from the DCE, then obtain permission and signature from my preceptor, and then upload this signed form into Dropbox: <https://www.dropbox.com/request/C7Fpz6n823aHMZ9JfCs5>

STUDENT
SIGNATURE _____

PRECEPTOR
SIGNATURE _____ DATE _____

DATE NOTICE RECEIVED BY PRECEPTOR: _____
_____ *By Phone* _____ *In Person* _____ *Written* _____ *None*

PRECEPTOR
COMMENTS: _____

DIRECTOR OF CLINICAL EDUCATION _____ DATE _____

Appendix E
LMU-Harrogate Physician Assistant Program
Typhon: Student Evaluation of Clinical Site

Survey: "Student Evaluation of Clinical Site 2020"

Reviewer: Students (xxx,xxx)

Reviewee: Clinical Sites (xxxxxx)

Survey Period: 3/14/2020

Completed: 3/14/2020 1:29:03 PM ET

1. Rotation Type

XXX

2. Who was your primary preceptor?

XXX

3. If your rotation was SELECTIVE or ELECTIVE, please enter the specific specialty.

NR

4. Which block did this rotation START?

Block X

5. Was every patient discussed with your clinical preceptor following your encounter with the patient?

XXX

6. Do you feel you had adequate feedback and guidance from your preceptor DURING your rotation? If you answered rarely or never, please explain why you feel this way in the free space at the end of the survey.

XXX

7. On average, how many patients did you see and evaluate daily?

XX

8. Please estimate the percentage (%) of total patients you encountered that fit one of the demographics below:

| | | |
|---|---------------|----------------|
| Pediatrics (including adolescents up to 17 y/o) | 1-10% | [1 pts] |
| Adults | 40-50% | [5 pts] |
| Geriatrics (age 65 or greater) | 40-50% | [5 pts] |
| Patients with behavioral health disorders | 20-30% | [3 pts] |
| Spanish speaking only | 1-10% | [1 pts] |

Mean: 3.00 of 10 Points: 15 Score: 30.0%

9. Please utilize the following scale to indicate the degree to which you agree or disagree with each statement.

Does the site have adequate physical facilities, training and personnel to provide a learning environment where you felt safe emotionally and physically? **Agree** **[3 pts]**

Additional Comment: xxx

This rotation was generally well organized. **Agree** **[3 pts]**
Additional Comment: xxx

I was exposed to most of the rotation objectives (knowing it isn't possible to see everything in 4-8 weeks) **Agree** **[3 pts]**

Additional Comment: xxx

I participated as a team member in the evaluation and management of patients. **Agree** [3 pts]

Additional Comment: xxx

My knowledge and skills were increased. **Agree** [3 pts]

Additional Comment: xxx

This rotation stimulated me to work above and beyond the minimum rotation requirements. **Agree** [3 pts]

Additional Comment: xxx

My personal objectives (written and discussed with preceptor at the start of the rotation) were met for this course. If answering "disagree or strongly disagree" then please explain your answer. **Agree** [3 pts]

Additional Comment: xxx

Mean: 1.33 of 5 Points: 8 Score: 26.7%

10. Please use the space below to include any comments you may wish to provide regarding your experience during this rotation.

XXXX

Appendix F
LMU-Harrogate Physician Assistant Program
Preceptor Evaluation of Student Performance Instruction Sheet

Preceptors: ***The evaluation of the student's performance should be completed during the student's last week rotating with you.***

1. Please use this link: <https://www2.typhongroup.net/past/preceptor/login.asp?facility=>
2. If you have logged in before you would have changed your temporary password to a unique password that only you know. If you have not logged in before: Login with your username and temporary password that was previously sent to you in an e-mail from Typhon with the subject: **LMU PA Program-Schedule access – Typhon Group Login Information**. The Typhon account number that you will input on the login page is **7598**. (If you have never precepted a student before now, you may not have previously received a login, so please let your student know so that he/she can inform the program.)
3. If you do not have your username and password, you can now retrieve and change your password using this link: <https://www2.typhongroup.net/past/preceptor/login.asp?facility=> or you can e-mail Mitchell Calvin, Assistant Clinical Coordinator, at mitchell.calvin@lmunet.edu and he can send you a temporary password so that you can login to complete the evaluation.

This evaluation is needed so that the student can receive credit and a grade for completing this rotation. Thank you for taking time during your busy schedule to contribute so much to our student's education.

Appendix G
 LMU-Harrogate Physician Assistant Program
 Typhon: Preceptor Evaluation of Student Performance

Survey: "Preceptor Evaluation of Students Class of 2020"

Reviewer: Preceptors (XXXX,XXXXXX)

Survey Period: 4/1/2020

Reviewee: Student (XXXX,XXXXXX)

Completed: 4/1/2020 4:31:24 PM ET

1. First, please accept our thanks for giving your time and talents in the clinical training of our PA students. We could not provide a diverse and thorough experience without your participation.
 During the FINAL week of your student's rotation (Week 4 or 8), please evaluate the student based on how far along they are in their clinical year. We suggest you have a short feedback session, face to face, with the student prior to their last day so you can share your thoughts regarding their performance.
 Again, thanks for all you do.
 LMU-Harrogate PA Program Faculty and Staff

Which rotation type are you evaluating?

XXXXXXXXXX

2. Where was the primary clinical training site for this rotation?

XXXXXXXXXXXXXXXX

3. If the rotation was SELECTIVE or ELECTIVE, what specialty was primarily practiced during this rotation?

NR

4. In what block did this rotation BEGIN?

- Block XXX----xx/xx/2020

Directions: Please evaluate the student based on how far along they are in their clinical year.

5. What was the student's Overall Performance?

If you choose "**did not meet expectations**", please give further details in the comment box, as to how the student did not meet expectations & **do not complete any further questions-- skip straight to the end of the evaluation and click "submit" before closing out.**

Did Student Meet the Preceptor's Expectations?

Did meet expectations

[1 pts]

Mean: 1.00 of 10 Points: 1 Score: 10.0%

6. What was your level of interaction with the student?

Extensive

7. Patient Care

History taking: accurate and complete

[6 pts]

Meets expectations (85%)

Physical exam: needed components present

[6 pts]

Meets expectations (85%)

Complete assessment and plans

[6 pts]

Meets expectations (85%)

Provides quality patient education

[7 pts]

Exceeds expectations (100%)

Discusses preventive care appropriately

[7 pts]

Exceeds expectations (100%)

Case Presentation quality/clarity

[6 pts]

Meets expectations (85%)

| | |
|---|-------------------------------------|
| Documentation complete and logical [7 pts] | Exceeds expectations (100%) |
| Develops a complete differential diagnosis [6 pts] | Meets expectations (85%) |
| Mean: 6.38 of 7 Points: 51 Score: 91.1% | |
| 8. Medical Knowledge: | |
| Overall problem solving ability (100%) | Exceeds expectations [7 pts] |
| Anatomy and pathophysiological knowledge (100%) | Exceeds expectations [7 pts] |
| Pharmacological knowledge and usage (100%) | Exceeds expectations [7 pts] |
| Appropriate selection of diagnostic tests (100%) | Exceeds expectations [7 pts] |
| Appropriate analysis of findings and test results (100%) | Exceeds expectations [7 pts] |
| Uses evidence-based medicine in decision-making (100%) | Exceeds expectations [7 pts] |
| Mean: 7.00 of 7 Points: 42 Score: 100.0% | |
| 9. Practice-based Learning and Improvement | |
| Initiative/work ethic (100%) | Exceeds expectations [7 pts] |
| Responds to feedback positively (100%) | Exceeds expectations [7 pts] |
| Takes initiative to improve patient care through outside reading (100%) | Exceeds expectations [7 pts] |
| Appropriately applies scientific data (100%) | Exceeds expectations [7 pts] |
| Encourages a positive learning environment (100%) | Exceeds expectations [7 pts] |
| Mean: 7.00 of 7 Points: 35 Score: 100.0% | |
| 10. Interpersonal/Communication Skills and Professionalism | |
| Creates an effective patient/provider relationship (100%) | Exceeds expectations [7 pts] |
| Creates an effective PA student/provider relationship (100%) | Exceeds expectations [7 pts] |
| Sensitive to culture, age, gender, and disability issues (100%) | Exceeds expectations [7 pts] |
| Demonstrates caring and respectful behaviors (100%) | Exceeds expectations [7 pts] |
| Works well as part of a team (100%) | Exceeds expectations [7 pts] |
| Communicates well with patient and team (100%) | Exceeds expectations [7 pts] |
| Mean: 7.00 of 7 Points: 42 Score: 100.0% | |
| 11. Systems based practice | |
| Demonstrates knowledge of medical delivery systems (coding, billing, insurance) | Did Not Observe |
| Demonstrates appropriate referrals (specialists, PT, OT, dietician, counseling) (100%) | Exceeds expectations [7 pts] |
| Practices cost-effective medicine (100%) | Exceeds expectations [7 pts] |
| Mean: 7.00 of 7 Points: 14 Score: 100.0% | |
| 12. Was the student academically prepared for this clinical rotation? If not please list in the free text section how they could be better prepared. | |

Yes

13. Please provide informational or constructive comments you feel would be beneficial for the student and program in supporting our goal of growing and enriching our students during their clinical year.

XXXXXXXXXX

14. Attendance and Punctuality

(Student must also report all absences to the PA Program immediately)

Number of days absent?

All preplanned and approved

Number of days late?

No response

15. Names of others who participated in this evaluation:

NR

Total points for all rating scale questions: xxx
equally weighted)

(Each main question

Mean percentage score for all rating scale questions: xxx%
score by default

Q5 not included in this

Responses as of 4/23/2019

3:09:14 PM ET

Appendix H
LMU-Harrogate Physician Assistant Program
Policy on Needle Stick and Blood Borne Pathogen Exposure

Detailed information on the prevention of and treatment of exposure to blood borne pathogens is contained in the CDC brochure, “Exposure to Blood: What Healthcare Personnel Need to Know”. Students should familiarize themselves with this information. <http://stacks.cdc.gov/view/cdc/6853/>

If a student experiences a needle stick, sharps injuries or is otherwise exposed to the blood of a patient while on clinical rotation, the student should:

Immediately perform basic first aid. Wash needle sticks and cuts with soap and water. Flush splashes to the nose, mouth or skin with water. If exposure is to the eyes, flush eyes with water, normal saline solution, or sterile irrigates for several minutes.

Immediately report the incident to the attending physician/preceptor. Prompt reporting is essential. In some cases, post exposure treatment may be recommended and should be started as soon as possible. If there is potential exposure to HIV, it is imperative to initiate prophylactic treatment within two hours of the incident. Also, without prompt reporting, the source patient may be released before testing for infectious disease can be conducted.

Seek post-exposure services. The student should follow this policy. If in an office, contact the Site Coordinator for instructions on how to fulfill these requirements. If in a hospital, contact the nursing supervisor or employee health service. All clinical sites will have a policy in place for blood borne pathogens, with a point of contact. This point of contact can help you follow the correct procedures. If it is after hours or if the student cannot locate a person to guide them, they should go immediately to the emergency department and identify themselves as a student who has just sustained an exposure.

Obtain baseline laboratory tests, if indicated. The treating clinician should evaluate the type and severity of exposure and counsel the student on the risk of transmission of HIV, HBV, and HCV. This may involve testing the student’s blood and that of the source patient and initiating post-exposure treatment.

Complete the LMU Incident Report (attached). **The student should report the incident to the Director of Clinical Education and complete the LMU Incident Report within 24 hours of the exposure. The training site may require the student to complete a separate incident report for their facility.**

It is extremely important that students report incidents promptly to LMU-Harrogate to avoid problems that may occur later with payment for post-exposure treatment.

Costs incurred: Most training sites provide post-exposure treatment to students free of charge. If there are charges for services, the student must file all medical claims to their personal medical insurance first, then to the LMU intercollegiate policy.

Appendix I

LMU-Harrogate Physician Assistant Program Accident Claim Procedures: Step-By-Step Guide

1. File the claim with your personal insurance company as the primary insurance and First Agency as your secondary insurance. (DO NOT FILE AS WORKER'S COMP). Do not pay any fees or copays because First Agency should pay those as your secondary insurance. If you went ahead and paid any fees, you should be reimbursed through First Agency.

File as secondary insurance: **First Agency, Inc.**

5071 West H Avenue
Kalamazoo, MI 49009-8501
Phone (269) 381-6630
Fax (269) 381-3055

2. Fill out the *Student Accident Claim form*.
3. Fill out the *Authorization – To Permit Use and Disclosure of Health Information*.
4. Fill out the *Parent/Guardian/Student Information form*.
5. Fill out the *Incident Form*.
6. Make a copy of front and back of the insurance card.
7. Collect all bills associated with the injury that have not been paid. Attach all ITEMIZED bills (itemized bills include the date of service, procedure code, diagnosis code, etc. not balance due statements) for MEDICAL EXPENSES ONLY. Include all worksheets, denials, and/or statements of benefits from your primary insurer. (Each charge must be processed by all other insurances/plans before they can be processed by First Agency, Inc.)
8. Collect a UB-04 or HCFA billing statement concerning the injury from the billing office of the facility.
9. Return all these things via fax (423-869-6672), e-mail (mitchell.calvin@lmunet.edu) or mail to Mr. Mitchell Calvin ASAP. Mr. Calvin's phone number is 423-869-6672, if you should have any questions.

**If you receive any future bills from this incident, please send to Mr. Calvin as well, and he will forward all paperwork to First Agency insurance company.*

NAME OF SCHOOL: Lincoln Memorial University
ADDRESS: 6965 Cumberland Gap Parkway, Harrogate, TN 37752
STUDENT ACCIDENT CLAIM FORM

First Agency, Inc.
5071 West H Avenue
Kalamazoo, MI 49009-8501
Phone: (269) 381-6630
Fax: (269) 381-3055

STUDENT'S FULL NAME (PRINT) LAST _____ FIRST _____ M.I. _____

STUDENT'S SCHOOL ADDRESS _____

STUDENT'S HOME ADDRESS _____

S.S.# _____ DATE OF BIRTH _____ SEX _____ GRADE _____

HOUR _____ A.M.

DATE OF ACCIDENT _____ P.M.

DETAILED DESCRIPTION OF ACCIDENT: HOW DID IT OCCUR? (OR ATTACH ACCIDENT REPORT COMPLETED BY THE SCHOOL REPRESENTATIVE WHO WITNESSED THE ACCIDENT) _____

WHERE DID IT OCCUR? _____

PART OF BODY INJURED _____ RIGHT LEFT

ACTIVITY SPORT _____ INTERCOLLEGIATE INTRAMURAL

STUDENT ACCIDENT (describe) _____

HAS A CLAIM EVER BEEN FILED ON THIS STUDENT? YES NO

NAME OF SCHOOL AUTHORITY SUPERVISING ACTIVITY _____

WAS SUPERVISOR A WITNESS TO THE ACCIDENT? YES NO

IF NOT, WHEN WAS THE ACCIDENT FIRST REPORTED TO A SCHOOL AUTHORITY? DATE _____

SIGNATURE OF SCHOOL OFFICIAL _____ TITLE _____

DATE OF THIS REPORT _____

IMPORTANT: PLEASE ATTACH ITEMIZED BILLS

THIS FORM MUST BE COMPLETED AND RETURNED TO THE COMPANY WITHIN 90 DAYS FROM THE DATE OF TREATMENT ACCOMPANIED BY ALL MEDICAL BILLS INCURRED TO DATE.

HOW TO FILE YOUR **ACCIDENT** CLAIM FORM

1. Complete **ALL** blanks.
2. Please read and sign authorization on back of this form.
3. Attach all **ITEMIZED** bills (itemized bills include the date of service, procedure code, diagnosis code, etc. not balance due statements) for **MEDICAL EXPENSES ONLY**. Include all worksheets, denials, and/or statements of benefits from your primary insurer. (Each charge **must** be processed by all other insurances/plans before they can be processed by First Agency, Inc.)
4. Mail within 90 days of the accident to:

First Agency, Inc.
5071 West H Avenue
Kalamazoo, MI 49009-8501



PARENT/GUARDIAN/STUDENT INFORMATION FORM

First Agency, Inc.

5071 West H Avenue
Kalamazoo, MI 49009-8501
Phone (269) 381-6630
Fax (269) 381-3055

RETURN FORM WHEN COMPLETE TO →

Name of College/University Lincoln Memorial University
Attention _____
Address 6965 Cumberland Gap Parkway
City Harrogate State TN Zip 37752

This form is to be completed by the
Parents, Guardians, or Student

Note: Complete all blanks on this form. Failure to complete all blanks will result in claims processing delays.

If information is not applicable, indicate the reason it is not (e.g., deceased, divorced, unknown).

Name of Athlete _____ Sport _____
Social Security No or Passport No _____ Date of Birth _____
College Address _____ Cell Phone () _____
Home Address _____ Home Phone () _____
City _____ State _____ Zip _____

FATHER/GUARDIAN INFORMATION

Father's Name _____
Date of Birth _____
Address _____
Employer _____
Address _____
Telephone () _____
Medical Insurance _____
Company or Plan _____
Address _____
Policy Number _____
Telephone () _____

MOTHER/GUARDIAN INFORMATION

Mother's Name _____
Date of Birth _____
Address _____
Employer _____
Address _____
Telephone () _____
Medical Insurance _____
Company or Plan _____
Address _____
Policy Number _____
Telephone () _____

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| | | | | |
|---|-----|----|---|-----|
| Is this plan an HMO or PPO? | Yes | No | Is this plan an HMO or PPO? | Yes |
| Is pre-authorization required to obtain | Yes | No | Is pre-authorization required to obtain | Yes |
| Is a second opinion required before | Yes | No | Is a second opinion required before | Yes |

PLEASE COMPLETE AUTHORIZATION ON NEXT PAGE

First Agency, Inc.
5071 West H Avenue
Kalamazoo, MI 49009-8501



AUTHORIZATION - To Permit Use and Disclosure of Health Information

This Authorization was prepared by First Agency, Inc. for purposes of obtaining information necessary to process a claim for benefits.

Upon presentation of the original or a photocopy of this signed Authorization, I authorize, without restriction (except psychotherapy notes), any licensed physician, medical professional, hospital or other medical-care institution, insurance support organization, pharmacy, governmental agency, insurance company, group policyholder, employer or benefit plan administrator to provide First Agency, Inc. or an agent, attorney, consumer reporting agency or independent administrator, acting on its behalf, all information concerning advice, care or treatment provided the patient, employee or deceased named below, including all information relating to, mental illness, use of drugs or use of alcohol. This Authorization also includes information provided to our health division for underwriting or claim servicing and information provided to any affiliated insurance company on previous applications. If this Authorization is for someone other than myself, that individual has given me the authority to act on his/her behalf as explained below.

I understand that I have the right to revoke this Authorization, in writing, at any time by sending written notification to my agent or to us at the above address. I understand that a revocation will not be effective to the extent we have relied on the use or disclosure of the protected health information or if my Authorization was obtained as a condition to determine my eligibility for benefits. Revocation requests must be sent in writing to the attention of the Claims Supervisor.

I understand that First Agency, Inc. may condition payment of a claim upon my signing this authorization, if the disclosure of information is necessary to determine the level or validity of the claim payment. I also understand, once information is disclosed to us pursuant to this Authorization, the information will remain protected by First Agency, Inc. in accordance with federal or state law.

I understand that I or my authorized representative is entitled to receive a copy of this authorization upon request.

This Authorization is valid from the date signed for the duration of the claim.

Name of Claimant (please print)
or Next of Kin (please print)

Name of Authorized Representative,

Signature of Claimant (if claimant is 18 or older)
Representative of Next of Kin Date

Date

Signature of Authorized

Relationship of Authorized Representative or Next of Kin to Claimant _____

**LINCOLN MEMORIAL UNIVERSITY
INCIDENT REPORT**

Full Name: _____

Street Address: _____

City/ST/Zip: _____

Birthdate: _____

Hire Date: _____ Position Title: _____

Male/Female (**circle one**)

Date/Time of Accident: _____ AM/PM

Date/Time Reported: _____ AM/PM

Time Employee Began Work: _____ AM/PM

Names of Witnesses:

_____ Interviewed: YES NO (attach documentation)

_____ Interviewed: YES NO (attach documentation)

Treatment away from worksite?

Emergency Room: Yes / No

Physician or Other: _____

Facility: _____

Address: _____

Was injured person hospitalized overnight as inpatient? Yes / No

If injured person died, when did death occur? Date: _____

Name of building or area the injured person was in: _____

What was the injured person doing just before the incident occurred? Describe the activity, as well as the tools, equipment or material the injured person was using. Be specific. Examples: climbing a ladder while carrying roofing materials, spraying chlorine from hand sprayer, daily computer tasks. _____

What happened? Tell us how the injury occurred. Examples: When ladder slipped on wet floor, injured person fell 20 feet; injured person was sprayed with chlorine when gasket broke during replacement; injured person developed soreness in wrist over time. _____

What was the injury or illness? Tell us the part of the body that was affected and how it was affected. Example: Lower back pain; complains of wrist pain. _____

What object or substance directly harmed the injured person? Examples: Concrete floor, chlorine, radial arm saw. If this question does not apply to the incident, leave it blank. _____

Cause: Reason(s) for accident. Contributing factors, unsafe acts, unsafe conditions? _____

Prevention: Describe how to prevent a similar accident. _____

What action do you need to take? _____

Signature of Supervisor: _____ **Date:** _____
(If applicable)

Signature of Injured Person: _____ **Date:** _____
(If injured person refuses to sign, please note here)

Has corrective action been taken to prevent a similar accident? YES NO

By whom and what action was taken? _____

Appendix J

Clinical Year Elective/Selective Case Presentation Grading Rubric

| Content of Presentation | 3 Point Each | 4 Points Each | 5 Points Each |
|--|---|---|--|
| Precision and Completeness of Data | <input type="checkbox"/> Data is either missing or superfluous | <input type="checkbox"/> Minor details omitted and most data is relevant | <input type="checkbox"/> Data is complete and relevant |
| Content to be Evaluated <ul style="list-style-type: none"> ▪ Crucial Past History ▪ Symptoms Described ▪ Objective Data ▪ Assessment ▪ Plans for Action ▪ Consultation of appropriate sources for plans and EBM/Background information of diagnosis | <input type="checkbox"/> Past history is overly detailed or ignored <input type="checkbox"/> Description of each symptom lacks detail (e.g, location, intensity, etc.) <input type="checkbox"/> Student leaps to conclusions or blends all symptoms together <input type="checkbox"/> No plans are offered or lack necessary tests or treatment <input type="checkbox"/> No sources have been consulted to offer support to plans | <input type="checkbox"/> Past history incomplete or slightly irrelevant <input type="checkbox"/> Most aspects of symptoms are described <input type="checkbox"/> Student attempts to consider all possibilities through maintaining separate conclusions in assessment <input type="checkbox"/> Plans propose some inappropriate tests or treatment <input type="checkbox"/> Consulted a common or widely used source to support plans. | <input type="checkbox"/> Includes complete, relevant past history. <input type="checkbox"/> Symptoms are described clearly using appropriate adjectives and depth (e.g, location, intensity, etc.) <input type="checkbox"/> Student is able to point to most relevant and possible diagnoses, seeking differentials in assessment <input type="checkbox"/> Plans include appropriate tests and treatment <input type="checkbox"/> Consulted appropriate peer reviewed sources, selected using models for evidence. |
| Attention to Order of Presentation | <input type="checkbox"/> Disorganized presentation of Data; data is out of order | <input type="checkbox"/> Attempts to follow H&P model; Organized presentation of Data in logical order | <input type="checkbox"/> Follows H&P model and uses it to guide audience; Data focuses on the abnormal/chief complaint, sequentially |
| Communication Skills | 1 Point Each | 3 Points Each | 5 Points Each |
| PowerPoint Presentation | <input type="checkbox"/> Poor presentation of data or poor grammar/punctuation (>3 errors) <input type="checkbox"/> Too much on the slides; appear "cut and pasted" <input type="checkbox"/> No significant images/graphics | <input type="checkbox"/> Average presentation of data with average grammar/punctuation (<2 errors) <input type="checkbox"/> Slides easy to read; original <input type="checkbox"/> Some use of images/graphics | <input type="checkbox"/> Professional appearing presentation with no grammar/punctuation errors <input type="checkbox"/> Slides clear and concise; original <input type="checkbox"/> Excellent use of images/graphics |
| Effective speaking voice | <input type="checkbox"/> Speech is unclear, inaudible, reads straight off notes, etc. <input type="checkbox"/> Lacks confidence | <input type="checkbox"/> Speech is clear but may not be heard by all; occasionally glances at notes. <input type="checkbox"/> May lack confidence | <input type="checkbox"/> Speech is clear and easily heard by all; rarely reads notes <input type="checkbox"/> Confident |
| Response to Questions | <input type="checkbox"/> Has difficulty responding. | <input type="checkbox"/> Responds easily to questions. | <input type="checkbox"/> Elicits questions from audience and responds appropriately. |
| Background/EBM of Case Diagnosis | 1 Point Each | 3 Points Each | 5 Points Each |
| | <input type="checkbox"/> Background and/or EBM absent. <input type="checkbox"/> Topic inappropriate to rotation or no peer reviewed sources. | <input type="checkbox"/> Background and/or EBM with minimal relevant info. <input type="checkbox"/> Topic appropriate to rotation, <3 primary peer-reviewed sources. | <input type="checkbox"/> Thorough & appropriate background and/or EBM. Topic relevant to rotation with 3 or more peer-reviewed primary sources used |

Student Name: _____ Date: _____ Faculty/Evaluator: _____

Case Title: _____ Score: _____ / 70 _____

Note:

"Peer reviewed" means that the source has undergone a rigorous selection and editing process by scholars in the field before it is published. The process is meant to make sure that only the best, most clearly written and rigorously researched articles are published. WebMD, Medscape, Wikipedia are NOT peer reviewed and thus unacceptable sources.

- Please note that didactic year power points are unacceptable sources unless you have direct permission from faculty

Appendix K
LMU-Harrogate Physician Assistant Program
Clinical Rotations Performance Expectations Worksheet

To develop a set of mutually understood set of expectations, students and preceptors should discuss and complete the questions below on the first or second day of the rotation. This form should be reviewed with the Preceptor at the end of week 2 (or 2 & 6) to ensure expectations are being met. Expectations = *the quality of the vehicle you will use to achieve your goal.*

Clinical Rotation Type: _____ Date Meeting Conducted: _____

Student: _____ Preceptor: _____

Number & Type of Rotations Completed: _____

I. "Ask Yourself" Completion Section (completed prior to 1st day of rotation)

a. List 3 (three) specific expectations you have of yourself regarding clinical knowledge and experience, personal and professional growth and/or preceptor/patient interaction during this rotation:

1. _____

2. _____

3. _____

b. What skills and or content/experience would be most helpful to meet your expectations?

1. _____

2. _____

3. _____

II. "Ask the Preceptor" Completion Section

a. Does the preceptor have any specific expectations regarding student engagement, learning, preparation, patient and staff interaction and/or professional behavior?

1. _____

2. _____

3. _____

Appendix L
 LMU-Harrogate Physician Assistant Program
 Clinical Rotations Mid-Rotation Meeting

The Mid-Rotation meeting between the student and Preceptor should focus on discussing the student's performance to date and identify areas needing improvement and a plan to meet expectations.

| Competency | Expected Behaviors | Meets | Needs Work |
|--------------------------------|--|-------|------------|
| Engagement in Learning Process | <ul style="list-style-type: none"> • Demonstrated interest and remained engaged in the learning process • Sought opportunities to participate in learning from all staff | | |
| Medical Knowledge | <ul style="list-style-type: none"> • Demonstrated appropriate knowledge of the basic and clinical science pertinent to the rotation • Applied clinical knowledge and science to positively impact patient care | | |
| History & Physical | <ul style="list-style-type: none"> • Performed thorough, organized and accurate histories and physical exams as appropriate for the clinical situation | | |
| Assessment Skills | <ul style="list-style-type: none"> • Formulated appropriate differential and presumptive diagnoses and treatment plans in a logical manner • Accurately identified and addressed the acuity of illness for individual patients | | |
| Preventive Care | <ul style="list-style-type: none"> • Made appropriate assessment of patient health risks • Provided Evidenced Based recommendations for preventive screening | | |
| Clinical Documentation | <ul style="list-style-type: none"> • Accurately documented clinical encounters in a manner showing clear understanding of the clinical situation and setting | | |
| Clinical Skills | <ul style="list-style-type: none"> • WILLINGLY sought opportunities to learn new skills and procedures • Safely performed procedures and skills with assistance | | |
| Communication | <ul style="list-style-type: none"> • Effectively and appropriately communicated with patients and other health care team members | | |
| Teamwork Skills | <ul style="list-style-type: none"> • Made himself/herself a useful, helpful, productive and dependable member of the health care team • Demonstrated leadership and respect within the team | | |
| Patient-Centered Care | <ul style="list-style-type: none"> • Offered patients opportunities to express their needs, feelings, and preferences • Proposed care consistent with the patients feelings and desires | | |
| Interpersonal Skills | <ul style="list-style-type: none"> • Showed respect, consideration, concern and empathy for patients • Personal interactions with patients and health care staff enhanced patient care | | |
| Ethics | <ul style="list-style-type: none"> • Treated patients and health care team members in an honest, respectful and ethical manner • Maintained the confidentiality of medical and personal information | | |
| Life-Long Learning | <ul style="list-style-type: none"> • Adequately educated self as clinical situations required | | |
| Professionalism | <ul style="list-style-type: none"> • Projected a professional attitude in his/her punctuality, attire, behavior, speech, and readiness to complete tasks • Took responsibility for his/her own decisions and actions | | |

Date: _____

Student / Signature: _____

Preceptor / Signature: _____

Appendix M
LMU-Harrogate Physician Assistant Program
2019-2020 Dropbox Folder Links

Please use the following Dropbox Folders for the required documents throughout the clinical year.

Please note: when you upload documents to Dropbox, *please save the confirmation email*. If you don't and your submission status is challenged, it will automatically be considered "not received" without a corresponding confirmation email.

All Dropbox folders for the 2019-2020 Clinical year

PowerPoint Case Presentations - <https://www.dropbox.com/request/QcybLwJDljf0oWvoTixH>

- Save as: (last name_first name case presentation 1 or 2)

Self-Reflective Essays – <https://www.dropbox.com/request/JJpxDL4Qif0VuTBpUqAG>

- Save as: (last name_first name self-reflective essay 1 or 2)

Acland's Anatomy Review exams - <https://www.dropbox.com/request/GQPany5lR0vBzBT7mk7f>

- Save as: (last name_first name anatomy section) **EXAMPLE:** senkel_chrystyna ortho1

Competency Compilation Reports - <https://www.dropbox.com/request/TL9ASjImDWyqxShpayKM>

- Save as: (last name_first name compilation report)

Absence Reports - <https://www.dropbox.com/request/C7Fpz6n823aHMZ9JfCs5>

- Save as: (last name_first name absence)

Capstone Approval forms - <https://www.dropbox.com/request/zQe6nanY1HH3E2IVxZ3T>

- Save as: (last name_first name capstone approval)

Appendix O
LMU-Harrogate Physician Assistant Program
Clinical Year Waiver of Testing Accommodations

I, _____, was evaluated for, granted, and utilized testing
(Print Name)

accommodations during my didactic year at LMU-Harrogate Physician Assistant program. I understand that these accommodations can only be insured while testing at the Harrogate campus. Today, while taking my _____ exam, I am choosing to waive my right for any testing accommodations to be made for me.

I understand this form will be added to my ADA file. I also understand that my choice to currently waive testing accommodations *may* affect my ability to receive accommodations for future exams, including the PANCE and PANRE.

Student's Signature

Date

Director of Clinical Education's Signature

Date