General Goals for Students in the Clinical Year Curriculum

This is abbreviated content from the Preceptor Handbook, for more details including precepting resources, please reference your Handbook. If you need a copy, please outreach PAClinicalTeam@rrcc.edu.

Students should follow a progression from "developing" to "competent" as compared to a newly graduated practicing, primary care physician assistant. Some regression is expected when immersed on a highly specialized team such as cardiology hospitalists, ENT, urology etc. Global goals include:

- Expand and develop medical fund of knowledge
- Correlate abnormal exam findings to a given disease process
- Obtain an appropriate complete or focused history and physical exam
- Generate a reasonable differential diagnosis leading to an appropriate diagnosis and treatment plan
- Develop an appropriately concise but complete oral case presentation
- Perform appropriate patient documentation
- Performs technical procedures as appropriate
- Develop interpersonal skills and professionalism necessary to function as part of a collaborative medical team

See additional information including Learning Outcomes and the Programs website for further details.

Preceptor Responsibilities

The preceptor is an integral part of the teaching program. Preceptors will serve as role models for the student. Through guidance and mentorship, preceptors will help the student perfect the above skills.

Preceptor responsibilities include, but are not limited to, the following:

- Briefly meet with your student within the first 3 shifts of the rotation to discuss Learning Outcome requirements/expectations, student goals, your expectations and goals and any additional processes important to a successful rotation experience
- Provide ongoing and timely feedback regarding clinical performance, knowledge base, and critical thinking skills.
- Supervise, demonstrate, teach, and observe the student's clinical activities to aid in the development of clinical skills and ensure proper/safe patient care
- Enable the student to meet the designated Learning Outcomes for the rotation, outreach the program promptly if there are concerns about meeting this requirement (see onboarding emails for details)
- Delegate to the student increasing levels of responsibility as appropriate to the student's experience and expertise
- Audit and co-sign charts to evaluate the student's ability to write appropriate and complete progress notes, histories, physical examinations, assessments, treatment plans, procedure notes, and admission/discharges including orders.

- Complete and promptly return the evaluation forms provided by the program reflecting on student knowledge and skills as well as their improvement throughout the rotation
- Promptly notify the PA program of any circumstances that might interfere with the accomplishment of the above goals or diminish the overall training experience
- Maintain an ethical approach to the care of patients by serving as a role model for the student
- Promptly notify the PA program of any significant concerns about student deficiencies in knowledge, abilities, or professional behaviors

Orientation and Communicating Student Expectations

Early in the clinical rotation (by day 3), it is recommended that the preceptor and student formulate mutual goals regarding what they hope to achieve during the rotation. Please utilize our Learning Outcomes and Program Competencies as a guide. The preceptor should also communicate his or her expectations of the student during the rotation. Expectations can include:

- Hours (36-70 hours per week, program requirement – outreach if concerns)
- Interactions with office and professional staff
- General attendance
- Call schedules
- Overnight/weekend schedules
- Participation during rounds and conferences
- Expectations for clinical care, patient interaction, and procedures
- Oral presentation style preferences
- Written documentation style preferences and timeline expectations
- Assignments
- Anything additional that the preceptor feels is necessary

Supervision of the PA Student

The preceptor must be available (on-site) for supervision, consultation, and teaching, OR designate an alternate qualified preceptor. Although the supervising preceptor may not be with a student during every shift, it is important to clearly assign students to another qualified MD, DO, PA, NP, or CNM who will serve as the student's preceptor for any given time interval the primary preceptor is unavailable. In the case where supervision is not available, students may be given an assignment or may spend time shadowing ancillary staff (x-ray, lab, physical therapy, etc.), as these experiences are very valuable to overall training. The preceptor should always be aware of the student's assigned activities and whereabouts.

The Preceptor–Student Relationship

The preceptor should maintain a professional relationship with the PA student and adhere to appropriate professional boundaries. Social activities and personal relationships outside of the professional learning environment should be appropriate and carefully selected so as not to put the student or preceptor in a compromising situation. Contact through web-based social networking sites (e.g., Facebook, Instagram)

should be avoided until the student fully matriculates through the educational program or completes the rotation where the supervision is occurring. If the preceptor and student have an existing personal relationship prior to the start of the rotation, a professional relationship must be maintained in the clinical setting. Please consult the Clinical Training Manager and/or Director of Clinical Training regarding specific school or university policies regarding this type of challenge.

We greatly appreciate your support of our program and our students!!!