



**Clinical Manual  
2021 - 2022**

*Revised August 2021*

# PA Program Clinical Manual 2021-2022

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## Introduction

The didactic curriculum has provided a plethora of information, skills, and simulated patient interactions to prepare you for clinical rotations. The clinical curriculum offers you an opportunity to transition from the classroom to clinical practice. The remaining months of your training will be an exciting, demanding, enriching, and rewarding experience that prepares you to become a certified physician assistant.

Clinical rotations provide a student-driven opportunity for learning more medicine, enhancing patient care skills, and helping patients. You must take an active role during the clinical rotations to ensure the best possible outcomes. Much of what you learn during clinical rotations will be determined by the time, effort, and eagerness you bring to the experience of clinical medicine. During the clinical year, the educational process is no longer tightly structured, but rather is a team effort between you, your preceptors, and the EMU PA program.

Each clinical rotation experience is unique and provides an opportunity for you to apply knowledge from the didactic year, learn “best practice” principles from your preceptors, and adapt to new situations. You should experience as many patient encounters as possible. Remember, some of the richest learning and procedural experiences occur in the evening, early morning, and when you’re on call.

The EMU PA Program faculty and staff remain committed to guiding, encouraging, and supporting you throughout the clinical curriculum. Communication between the student, preceptor, and the Program is a priority, so contact us with any concerns.

This manual and the *2021-2022 Student Handbook* are guides to assist you throughout your clinical rotations. The Program Director and the Clinical Coordinator will consider and resolve any unanticipated situations or conflicts not already specified in the Clinical Manual or Rotation Syllabi. These issues will be considered on an individual basis and may include consultation with the PA Program Faculty and/or Program Director.

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### Clinical Year Curriculum

The second year of EMU’s Physician Assistant Program provides students with approximately 42 weeks of clinical education experience. Clinical rotations provide students with a wide variety of experiences in different aspects of clinical medicine to help them become excellent medical providers. All students complete seven four-week core clinical rotations in the following specialties: pediatrics, behavioral health, general surgery, women’s health, emergency medicine, family practice, and internal medicine. Students also complete two four-week elective rotations and the Program works with students to place them in electives that match their interests whenever possible. The clinical year concludes with a six-week preceptorship experience, a final clinical experience that provides physician assistant students with the opportunity to integrate and apply the competencies of the physician assistant profession to clinical practice. The preceptorship always occurs after the successful completion of all of the other clinical rotations.

The Program coordinates all clinical rotations. Students are matched with practitioners who serve as preceptors for each clinical rotation experience. Preceptors assist in the PA student’s education by supervising the student-patient interactions in real clinical settings. Preceptors may also have didactic requirements that include presentations, written reports, assigned readings, participation in journal clubs, or attendance at grand round presentations. Other health care providers (e.g., medical residents, nurses, pharmacists, social workers, registered dietitians, other learners) also play a vital role in the clinical educational experience by being a part of the patient care team. The Program provides a syllabus for each rotation to guide student learning. The Program requires both specific and general evaluation of student performance to certify acquisition of the PA competencies.

### Clinical Rotation Schedule

Students have an individualized schedule regarding the order and location of clinical rotations. Below is a sample clinical curriculum schedule:

Course Number	Course Name	Credit Hours	Number of Weeks of Rotations
	<b>Fall Semester 2</b>		
PAS 681	Introduction to Clinical Year	3	-
PAS 710a	Clinical Rotation: Pediatric Medicine	4	4
PAS 710b	Clinical Rotation: Psychiatric Medicine	4	4
PAS 710c	Clinical Rotation: General Surgery	4	4
	<b>Semester Total</b>	<b>15</b>	<b>12</b>
	<b>Winter Semester 2</b>		
PAS 710d	Clinical Rotation: Obstetrics & Gynecological Medicine	4	4
PAS 710e	Clinical Rotation: Emergency Medicine	4	4
PAS 710f	Clinical Rotation: Family Medicine	4	4
PAS 710g	Clinical Rotation: Internal Medicine	4	4
	<b>Semester Total</b>	<b>16</b>	<b>16</b>
	<b>Summer Semester 2</b>		
PAS 710h	Clinical Rotation: Elective Rotation	4	4
PAS 710i	Clinical Rotation: Elective Rotation	4	4
PAS 720	Clinical Preceptorship	6	6
	<b>Semester Total</b>	<b>14</b>	<b>14</b>
	<b>Clinical Year Total</b>	<b>45</b>	<b>42</b>

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## Clinical Rotation Overview

### Learning Outcomes

You will be provided with learning outcomes that provide examples of the skills and knowledge you should be acquiring during each rotation. Some of these outcomes are specific to an area of medicine, e.g. Pediatrics or Women's Health. Some skills and knowledge are found across rotations in general and you should be participating in these during every rotation, e.g. obtaining a comprehensive history or performing a focused physical exam. Some skills and knowledge may be specific to a rotation, e.g., assessing pediatric milestones or providing emergent care. Although each student should fulfill as many of the learning outcomes as possible, this is not always feasible. Rotational experiences can vary from site to site, preceptor to preceptor, and even month to month with the same preceptor. It is expected that you spend time outside of the clinical rotation to study and learn the things that you were not able to see during your clinical rotations. Curriculum Study time is available to you to do extra studying. (See course syllabi for details).

### Student Learning

Clinical rotations require a student-directed approach to learning. As a result, it is the student's responsibility to:

1. Know the learning outcomes described in the syllabus for each clinical rotation course.
2. Participate fully in each clinical rotation as directed and guided by the clinical preceptor.
3. Take an active approach to patient interaction, clinical rotation duties, and collaborative interactions with other health care team members.
4. Demonstrate proficiency in clinical skills.
5. Ask questions in a professional manner when uncertain about a clinical activity, decision, or outcome.
6. Take advantage of resources and learning opportunities during the clinical rotation. Grand Rounds, medical presentations, and other opportunities for learning should not be overlooked.
7. Seek feedback on a regular basis from the clinical preceptor regarding performance.
8. Provide timely and complete logging of attendance, patient encounters, procedures, and evaluations.
9. Promptly notify the Clinical Coordinators of any circumstances that may interfere with the accomplishment of goals or diminish the overall training experience.

### Clinical Competencies

The EMU PA Program endorses *The Clinical Practice Competencies for Physician Assistants* / [Competencies for the Physician Assistant Profession](#), which describes the skills and knowledge (competencies) necessary for a physician assistant to practice clinically. These competencies are broadly categorized as:

- Knowledge for Practice
- Interpersonal and Communication Skills
- Person-centered Care
- Interprofessional Collaboration
- Professionalism and Ethics
- Practice-based Learning and Quality Improvement
- Society and Population Health

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## Program Expectations of Competencies

It is expected that some competencies will be acquired during your PA education, while others will be developed and mastered as you progress through your career as a Physician Assistant. Your competency in each of the areas listed above will be evaluated throughout your clinical year with assessments such as preceptor evaluations, written assignments, EOR exams, and OSCEs. However, it is not expected that a Physician Assistant student will acquire full competency in all of the above areas in order to complete the program.

The EMU PA Program has identified Program Expectations that illustrate the minimum competencies each student must achieve before successfully graduating from the program. Achieving these minimum competencies provides a newly graduated Physician Assistant with the skills and knowledge necessary to enter clinical practice. The Summative Evaluation will assess all the knowledge and skills you have accumulated throughout your rotations. Successfully passing your Summative Evaluation shows that you have successfully acquired the minimal competencies necessary to enter clinical practice. (See Summative Evaluation, p. 12)

### *Program defined expectations are:*

- The ability to take a comprehensive patient history
- The ability to perform a technically correct and focused physical exam
- Interpretation of laboratory, radiologic and ancillary testing studies, e.g.
  - EKG, Chest X-rays, Laboratory results
- Perform program selected procedures or tasks that represent basic manual dexterity and proper procedural technique, e.g.
  - Simple interrupted suturing
  - Maintaining sterile fields
- Demonstrate critical thinking and medical decision making as evidenced by the ability to
  - Generate a complete list of differential diagnoses
    - Including most common, most likely, most concerning disease or condition
  - Formulate an accurate treatment plan, including, when appropriate, the concepts of evidence-based medicine and current recommendation guidelines.
- Demonstrate patient care skills, communication, and professionalism, e.g.
  - Oral case presentations
  - Effective Patient Communication
  - Obtaining patient consents
  - Delivering patient-appropriate education

## Rotation Evaluations, Assignments, Exams, & Grading

You will be evaluated throughout the clinical year to ensure that you are fulfilling as well as improving on program expectations as you progress from one clinical rotation to another. These will be formative assessments across the curriculum and will culminate in a Summative exam that you will need to pass to graduate from the EMU PA Program.

During clinical rotations, you will be evaluated in the following ways:

- Evaluations (self-evaluations, site and rotation evaluations)
- Preceptor Evaluations
- End of Rotation Assignments
- EXXAT Patient Logs
- End of Rotation PAEA Exams for Core Rotations

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- OSCEs
- PAEA EOR Performance Self Assessment

Syllabi will be provided that specifies the clinical rotation requirements and evaluation measures. The information supplied here provides an overview of the common clinical rotation requirements and evaluation measures.

### Evaluations

During each clinical rotation, there are required evaluations that must be completed by the student and/or clinical preceptor via EXXAT.

#### Midpoint Evaluation by the Student

The Student Midpoint Evaluation is completed via EXXAT and provides an opportunity for you to self-evaluate your progress midway through the rotation as well as recognize and address any personal bias or gaps in medical knowledge or other competencies. You will be required to identify areas of strength as well as areas of weakness. This form is to be completed by the student and discussed with the clinical preceptor or the preceptor's designee at the midpoint of the clinical rotation. It is your responsibility to request an appointment with your preceptor/s to discuss the self-evaluation and the preceptor's recommendations for the remainder of the rotation. Input from your preceptor/s for feedback on the self-evaluation helps you continue to improve throughout the rotation. Preceptors have the unique ability to watch your patient interactions and gauge your medical knowledge and clinical skills in "real-time", so their feedback is especially important to your growth during rotations.

Your Midpoint Evaluation is not graded, but you can lose points from your final grade if you do not complete your midpoint evaluation. The Midpoint Evaluation must be submitted to the program by 5 p.m. on the fifteenth day of each clinical rotation, including the clinical preceptorship. One point will be deducted from the course grade for every 24 hours the Midpoint Evaluation is late. \*For those completing two 2-week split rotations, Midpoint Evaluations are due by 5 pm on the eighth day of each rotation.

#### Evaluation of Clinical Site by the Student

This form must be completed by the student during the final week of the clinical rotation and is due by 8 a.m. on the EOR day. One point will be deducted from the course grade for every 24 hours the Evaluation of Clinical Site is late. \*For those completing two 2-week split rotations, Site Evaluations are due by 8 am on the last Friday of each rotation.

#### Evaluation of Preceptor by the Student

This form must be completed by the student during the final week of the clinical rotation and is due by 8 a.m. on the EOR day. One point will be deducted from the course grade for every 24 hours the Evaluation of Preceptor is late. \*For those completing two 2-week split rotations, Preceptor Evaluations are due by 8 am on the last Friday of each rotation.

#### Evaluation of the Clinical Rotation by the Student

This form must be completed by the student during the final week of the clinical rotation and is due by 8 a.m. on the EOR day. One point will be deducted from the course grade for every 24 hours the Evaluation of Clinical Rotation is late. \*For those completing two 2-week split rotations, Preceptor Evaluations are due by 8 am on the last Friday of each rotation.

#### Final Evaluation by the Preceptor

Preceptor evaluations will assess your medical knowledge, communication skills, patient care, professionalism, and practice-based learning. A blank copy of the preceptor evaluation can be found in EXXAT.

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The Final Evaluation by the preceptor will be released to the preceptor approximately two weeks before the end of the clinical rotation. It is the student's responsibility to request an appointment during the last week of the clinical rotation to discuss the student's performance. Students must earn at least an 80% on the final preceptor evaluation to receive a passing grade for the clinical rotation.

Please note, the preceptor of record is not always the preceptor the student works with or who fills out the student evaluation. Often the preceptor of record is the department chairperson or the department director of education. In addition, there are certain clinical settings where students may have several different preceptors throughout the rotation. In that case, more than one preceptor will fill out the evaluation and the preceptor of record will compile these into one evaluation.

Students may participate in rotations that are split between multiple locations **and** have more than one preceptor assigning a final evaluation grade. In those instances, the grades from each preceptor will be averaged and the student will be assigned one final grade.

### Assignments

#### End of Rotation Assignment

Each clinical rotation has a required assignment (e.g., written, quiz, presentation, skills demonstration, online virtual patient cases) which will assess medical knowledge, focused physical exam skills, written documentation skills, medical decision making and critical thinking skills, history taking skills, and/or the ability to generate a differential diagnosis. Written assignments must be submitted by 8 a.m. on the **fourth** Friday of the rotation. Five points will be deducted from the assignment grade for every 24 hours the assignment is late. Assignments will not be accepted after 72 hours have passed from the original deadline. Other assignments will be completed on EOR Day.

### Logging

#### Patient Encounter and Procedures Log (Px Dx)

EXXAT Patient logs will be used to evaluate the types of patient encounters you experience in each rotation including areas such as patient age, practice specialty, types of care, and types of diseases. Logging is used to track that you are having adequate supervised clinical patient experiences. Students must record **each** patient encounter and procedure that they experience during **every** clinical rotation. A patient encounter is any and every interaction with a patient while the student is participating at the clinical rotation site. If the student encounters the same patient multiple times per day, the patient encounter is to be logged once for each day. Patient Encounter Logs must be complete and include all required fields set up in EXXAT. Students must also document each diagnosis and procedure they observe, assist with, or perform.

Patient encounters must be logged **within 4 days** of the actual date of the encounter. During the rotation, one point may be deducted from the course grade for each day the Patient Encounter Log is late. The final Patient Encounter Log is due by 8 a.m. on the EOR day. For the final Patient Encounter Log, five points will be deducted from the course grade for every 24 hours the Patient Encounter Log is late.

Any paper notes about patient encounters the student takes must not have any patient identifiers (e.g., patient names, social security numbers, and medical records numbers) and must be shredded to avoid potential HIPAA and professionalism violations. Students must not record or save patient encounters including any portion of the patient workup or treatment on any electronic device (e.g., cell phones, thumb drives, personal computers).

#### Attendance Report (Hours Log)

Students must record all hours dedicated to the clinical rotation in EXXAT **within one week** of the actual date of the experience. The total hours, dates, and times of experiences will vary by clinical site and preceptor



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assignment. Students must have an average of 40 work hours per week. This occurs through a combination of in-clinic duty hours and curriculum study.

In-clinic duty hours are times that students are scheduled to be at the clinical site. This time may be dedicated to patient care, reading, or other on-site learning experiences. For example, students may be scheduled to rotate on the labor and delivery service but there are no active patient care opportunities during the scheduled time. In such situations, students are expected to spend this time studying.

Curriculum study is time spent doing independent learning experiences (e.g., reading texts, completing online modules). Students must meet the following standards around curriculum study:

- Curriculum study must be completed in an appropriate educational environment.
- A maximum of 10 hours of curriculum study per week can be used to reach the minimum of 40 duty hours per week.
- No more than 40 hours of curriculum study can be accumulated over the course of the entire rotation.
- In the event of unforeseen circumstances such that students are unable to participate in face-to-face patient care, the program has developed a contingency curriculum that will serve as clinical duty hours. See appendix A for the Contingency Plan.
- Time spent reading while on-site at the rotation cannot be logged as curriculum study time.
- Time spent working on the rotation's final project cannot be counted as curriculum study.

The final Attendance Report (hours for the entire rotation) is due by 8 am on EOR days. During the rotation, one point may be deducted from the course grade for each day the Attendance Report is late. For the final Attendance Report, five points will be deducted from the course grade for every 24 hours the Attendance Report is late.

### End of Rotation Exams

PAEA End of Rotation Exams will assess history taking, physical examination, diagnostic studies, diagnosis, health maintenance, clinical interventions, clinical therapeutics, and scientific concepts. There will be an End of Rotation Exam for each of the core rotations you complete. You are encouraged to go to the PAEA website <https://paeonline.org/assessment/core-tasks-and-objectives> and review the Core Tasks and Objectives. The key topics and exam blueprints can also be found in EXXAT.

An EOR exam must be taken on the final day of the rotation for each of the core clinical rotations (except for electives). Attendance for all EOR examinations is mandatory. Make-up examinations are only available in the event of a serious emergency (e.g., medical emergency, death in the family). If an absence occurs, it is up to the discretion of the Clinical Coordinators (with possible input from the other PA faculty/Program Director) if it is an acceptable emergency. In the event a student will miss an exam, the student must contact the Clinical Coordinators by email, phone, or in writing before the exam. Notifying a classmate rather than a clinical team member is unacceptable and will not be excused. The format and date of the make-up examination will be at the discretion of the Clinical Coordinators.

If a student arrives late for an examination, he/she/they will still be required to complete the entire exam in the time remaining. This includes remote proctoring and in-person testing. A student who arrives late to an exam will not be permitted to take the exam if any students have finished the exam and left the testing room. In specific circumstances, your clinical team may elect to make exceptions to this policy. Failure to take the exam will result in a grade of zero on that exam.

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For in-person testing: Students must notify the exam proctor if they need to leave the room while an exam is in progress. **Students will clear their desks of everything (the only exception being a drink on the desk).** Talking is not allowed during exams. Papers and electronic media may not be accessed during the exams. Please note, scratch paper is not allowed during these exams.

For remote testing: Review PAEA's student remote proctoring checklist:

<https://paeaonline.org/assessment/remote-proctor-checklist/>

### Objective Structured Clinical Examinations (OSCEs)

OSCEs offer students the opportunity to demonstrate knowledge, skills, and abilities learned during the didactic and clinical curriculum. OSCE's will be scheduled throughout the clinical year to assess your medical knowledge, history taking and physical exam skills, critical thinking, data interpretation, ability to generate a differential diagnosis, use of current guidelines and empiric practices, oral case presentations, procedural skills, communications skills, and professionalism. During each OSCE, students are evaluated on their ability to competently perform as entry-level clinicians. The OSCEs are only offered at specific times during the year and absence from scheduled OSCEs may delay a student's graduation.

These will be formative evaluations to measure progress through the clinical year.

### Clinical Rotation Grading

The following general grading scheme applies to all of the core clinical rotations.

1. EOR Exam	= 40%	A	(95 - 100%)
2. Preceptor Evaluation	= 40%	A-	(90 - 94%)
3. <u>End of Rotation Assignment</u>	= 20%	B+	(85 - 89%)
	100%	B	(80 - 84%)
		B-	(75 - 79%)
		C+	(70 - 74%)
		C	(65 - 69%)
		F	(< 65%)

The grading scheme for elective rotations and the clinical preceptorship, which do not have EOR exams, is as follows:

1. Preceptor Evaluation-Elective	= 75%	A	(95 - 100%)
2. <u>End of Rotation Assignment</u>	= 25%	A-	(90 - 94%)
	100%	B+	(85 - 89%)
		B	(80 - 84%)
		B-	(75 - 79%)
1. Preceptorship Evaluation	= 75%	C+	(70 - 74%)
2. Logging, assignment, <u>IPE participation</u>	= 25%	C	(65 - 69%)
	100%	F	(< 65%)

The Program Remediation and Deceleration Rules actions outlined in the *Clinical Manual's* Clinical Curriculum Rules and Regulations apply to all components of clinical rotation course evaluations.

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## PACKRAT

Students will be required to complete the Physician Assistant Clinical Knowledge Rating and Assessment Tool (PACKRAT) twice during the clinical year. The PACKRAT is developed by a committee of physician assistant educators and is modeled after the Physician Assistant National Certifying Exam (PANCE). This test is administered electronically and consists of approximately 225 multiple-choice questions.

The PACKRAT identifies areas of student knowledge that are strong and those in need of improvement. In addition, taking the PACKRAT provides a standardized test-taking experience. This is a formative evaluation; in other words, students are provided with their scores to guide their preparation for the PANCE. The EMU PA Program does not recommend any specific preparation for the PACKRAT since the student has amassed significant knowledge and skills throughout the didactic and clinical curriculum.

There is no pass/fail or grade assigned for the PACKRAT, though taking the exam as scheduled is required for completion of the EMU PA Program. This is a self-assessment paid for by the program to help you prepare for PANCE.

## End of Curriculum Exam

Students will be required to complete the PAEA End of Curriculum Exam (EOC Exam). This exam is built using a blueprint and content area list developed by PA educators and national exam experts and is required to be delivered in the final four months of the PA program. This exam is administered electronically and consists of approximately 300 questions.

More information can be found on the PAEA site: <https://paeaonline.org/assessment/end-of-curriculum/>

There is no pass/fail or grade assigned for the EOC Exam, though taking the exam as scheduled is required for completion of the EMU PA Program. This is a self-assessment paid for by the program to help you prepare for PANCE.

## Clinical Rotation Standards

The EMU Physician Assistant Program has designed its clinical year to give each student a variety of rotational experiences in a variety of practice settings and specialties. These experiences are meant to comply with the "Standards" set by the ARC-PA (our accrediting body) to ensure that students receive a comprehensive PA education. You may not always encounter each type of patient experience/clinical environment with every rotation; however, you must have patient experiences in all of these areas by the end of the clinical year. You will be assessed via the assessment tools already discussed, throughout the curriculum, to demonstrate that you have had these experiences and have gained knowledge and competency in all of these areas. Below is a list of the ARC-PA Standards which are assessed via your EXXAT logging.

### Types of Patient Encounters:

- Preventive
- Emergent
- Acute
- Chronic

### Patient Seeking Care for:

- Across the lifespan, including infants, children, adolescents, adults, and elderly
- Women's health including prenatal and gynecologic care

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- Conditions requiring surgical management including pre, post, and intra-operative care
- Behavioral and mental health conditions

### Specific Clinical Settings:

- Outpatient
- Emergency Department
- Inpatient
- Operating Room

### Preceptors who Practice in the Following Settings:

- Family Medicine
- Internal Medicine
- General Surgery
- Pediatrics
- Women's Health, including prenatal and gynecological care
- Behavioral and mental health care
- Emergency Medicine

The preceptors for your rotations are primarily practicing physicians (MD, DO) and PA-Cs. Physicians are board-certified in their area of specialty and PA-Cs are teamed with physicians (MD, DO) who are specialty board certified. You may have the opportunity to be on rotations with other licensed health care providers that are experienced in their area of instruction, as well.

## Summative Evaluation

The Summative Exam is an assessment process carried out over the last four months of the Clinical Year to evaluate each student's readiness for clinical practice. The Summative Evaluation assesses the educational experiences of the didactic and clinical components of the program; it evaluates the student on the program expectations and, upon successful completion, ensures that the student is prepared for clinical practice. The exam is meant to confirm that the learner has the knowledge, interpersonal skills, patient care skills, and professionalism required for entry into the PA profession, as demonstrated by the ability to take a comprehensive patient history, perform a technically correct physical exam, interpret medical data, demonstrate critical thinking and medical decision-making skills, perform selected procedures and demonstrate patient care skills, effective communication and professionalism.

### Summative Exam

The summative examination evaluates student competency learning outcomes via OSCE, Clinical Skills, and written stations.

- **OSCE Stations:** Medical scenarios that involve student interactions with standardized patients (live or virtual) to illustrate the student's ability to obtain a focused history, perform a focused physical exam, and/or demonstrate professionalism, communications skills, and patient care skills.
- **Clinical Skill Stations:** Evaluate practical skills such as interpreting EKGs or laboratory findings, performing diagnostic or therapeutic procedures, writing prescriptions, written documentation notes, and/or oral case presentations.
- **Written Exam Stations:** Short answer case-based assessment stations to assess clinical reasoning and medical decision-making skills.

Each skill station evaluates one or more of the Competency Categories using learning outcomes.

*Focused history*

*Physical Exam*

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*Interpretation of medical data*  
*Critical thinking/medical decision making*  
*Procedural skills*  
*Professionalism*  
*Patient Care*  
*Communication*

## **Summative Exam Format and Scheduling**

The summative exams are conducted over several sessions within the last four months of the program.

- They are scheduled as all-day, on-campus events and attended by the entire cohort of clinical year students.
- Every student rotates through each station and the stations are timed.
- Students will receive an event schedule prior to the event.

## **Evaluation Process:**

Student performance on the summative exam is evaluated by direct observations, videotaped observations, written presentations, and oral presentations.

Standardized patients (live or virtual) will be used during OSCEs to simulate medical scenarios.

Examiners are didactic, clinical, and instructional faculty, program director, and medical director.

Evaluators utilize standardized rubrics to evaluate each of the learning outcomes. Evaluators from both the didactic and clinical phases of the program collectively review and agree to the components of the rubrics to facilitate providing a standardized experience for each test taker.

Learning outcomes are provided to each student for OSCE stations, clinical skills stations, and written exam stations prior to taking each exam. These learning outcomes are published in Canvas Learning Management System.

Each student is required to score  $\geq 80\%$  for each of the learning outcomes assessed in the summative exam. Learning outcomes are a measurement of the competencies needed to graduate from the program and enter clinical practice; therefore, must be successfully demonstrated by each student.

Rubrics and grading for each station are located in the Canvas Learning Management System and reported to the students as Pass/Fail. The pass rate for each station is  $\geq 80\%$ .

## **Clinical Curriculum Rules and Regulations**

*All information herein is subject to change with timely notification to students in writing.*

### **1.0 Rules, Regulations and Policies of the University and Affiliate Institutions**

- 1.1 Program Rules and Regulations apply to all students, principal faculty, and the Program Director regardless of location, except in circumstances where certain discrepancies may exist between program policies and those established at clinical rotation sites.

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- 1.2 These Clinical Curriculum Rules and Regulations relate specifically to the EMU PA Program clinical curriculum. In addition to these rules and regulations, students must adhere to the Program Rules and Regulations in the EMU PA Program *2021-2022 Student Handbook*.
- 1.3 In addition to the rules and policies present in the EMU PA Program *2021-2022 Student Handbook* and the *Clinical Manual*, students must adhere to the rules, regulations, and policies of [Eastern Michigan University](#), the [College of Health and Human Services](#), and any other institution or facility where students are assigned. Conflicting policies should be reported to the Clinical Coordinators, and/or the Program Director.

### 2.0 Definitions

- 2.1 The Faculty Clinical Coordinators are the PA Program faculty members who lead the clinical portion of the Program.
- 2.2 The Administrative Clinical Coordinator is the PA Program Administrative member who assists with the clinical portion of the Program. The Administrative Clinical Coordinator manages many of the day-to-day administrative components of the clinical curriculum and may be involved in many aspects of the clinical curriculum, except those that require the clinical knowledge and expertise of a physician assistant.
- 2.3 A Clinical Preceptor or Clinical Instructor is a community clinician who is an employee of the hospital, clinic, or other health care setting. Clinical Preceptors are responsible for supervising and evaluating assigned students during their clinical rotation. Clinical Preceptors primarily consist of physicians who are board-certified in their medical area of practice and physician assistants who are certified and supervised by a physician who is board-certified in their medical area of practice.
- 2.4 The Site Coordinator is the primary point of contact for the Program at the clinical site who is responsible for organizing student orientation and instruction related to technical aspects of the site. The Site Coordinator may also be the Clinical Preceptor.

### 3.0 Clinical Site Acquisition & Student Matching

- 3.1 The Program controls the assignment of students to all clinical rotations and the clinical preceptorship. The Program ultimately determines for each student: the order in which the clinical rotations take place, the location of the rotation, the specific clinical preceptor at each clinical site, the specialties for elective rotations, and other pertinent details deemed necessary.
- 3.2 The Program provides each student the opportunity to request rotations in a particular medical specialty for the preceptorship. There are **no guarantees** that students will be placed in the requested disciplines.
- 3.3 Clinical rotations are generally at clinical sites within 70 miles of the EMU main campus, though students can expect to be assigned to one distant clinical rotation beyond 70 miles from the EMU main campus. After the first distant clinical rotation assignment, the student will have the opportunity to reject any further distant clinical rotation assignments. If a student specifically requests a distant assignment, he/she/they may also be assigned another distant assignment by the Program.
- 3.4 **No student may exchange his or her assigned clinical site or preceptor with another student. This action will result in a professionalism violation.**
- 3.5 Any student who fails to comply with the assigned clinical rotation schedule will be subject to dismissal from the Program.
- 3.6 **Students are not permitted to solicit clinical rotation experiences. Student solicitation of rotations is an ARC-PA violation. This action will result in a professionalism violation.**
- 3.7 The Program acknowledges that there may be students who wish to learn at a familiar clinical site or with a known clinical preceptor. Each student may contribute to their own education by identifying qualified

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practitioners (e.g., physicians, PAs) who are willing to serve as clinical preceptors. The following steps must be completed for the opportunity to be considered:

- a) The student must notify the Administrative Clinical Coordinator via email of a qualified practitioner who may be interested in serving as a preceptor. Requests made in any other manner will not be officially considered. The student is asked to provide: the name of the preceptor, specialty area, and any known contact information. Please note that it can take a minimum of three months to establish a clinical rotation.
  - b) The Program will then consider the request. The Program may decline the request or pursue the clinical rotation.
  - c) The final placement of a student at a clinical site and with the requested clinical preceptor is at the Program's discretion. Factors that the Program may consider include: student academic and clinical performance, student prior relationship with the preceptor, likelihood of future clinical rotations at the site or with the preceptor, student professionalism, suitability of the practice for educational purposes, location, potential conflict with other educational programs or learners, and/or other factors.
  - d) Students who refer a preceptor/clinical rotation site **are not guaranteed** to be placed in that clinical rotation.
- 3.8 No student (or representative of the student) is allowed to arrange, guarantee, or otherwise imply to a possible clinical rotation site or preceptor that he/she/they will participate in a clinical rotation at that site or with that preceptor. This action will result in a professionalism violation.
- 3.9 With the exception of site application fees, no student (or representative of the student) may provide or receive any money (or other item of worth) related to any clinical rotation.
- 3.10 Individual clinical site requirements may exceed minimum program requirements for placement. For example, clinical rotation sites and preceptors may require a student to undergo additional immunizations, site orientation, testing, or other requirements for the student to participate in the clinical rotation. Students are responsible for all associated arrangements and expenses.
- 3.11 The EMU PA Program periodically performs clinical site and preceptor evaluations to assess the student's learning experience and to assure and document factors associated with the clinical rotation experience. These evaluations may include faculty site visits which may be announced ahead of the date/time.

### 4.0 Student Contact Information

- 4.1 The Program provides each student's emich.edu email address in Exxat for Site Coordinator and Clinical Preceptors at the beginning of the clinical rotation.
- 4.2 Students must inform the Clinical Coordinator and the EMU PA Program of how to locate them at the beginning of the clinical year. This may include home phone number, cell phone number, pager number, address. Students are responsible for updating their profile in EXXAT and immediately emailing the Administrative Clinical Coordinator and the EMU PA Program of any changes to this contact information.
- 4.3 Students must inform the Clinical Coordinator and the EMU PA Program of the contact information of another responsible adult (e.g., parent, significant other) who may be contacted in case of an emergency. This may include home phone number, cell phone number, pager number, or work number. Students are responsible for updating their profile in Exxat and immediately emailing the Administrative Clinical Coordinator and the EMU PA Program of any changes to this contact information.

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## 5.0 Clinical Year Attendance

- 5.1 Under no circumstances may a student participate in clinical activities that are not sanctioned or endorsed by the Program. Once a student matriculates into the Program, no clinical activity (including shadowing in a clinical setting) is permitted unless the PA Program has given prior approval. This includes breaks in the student semesters and any other day while the individual is a student in the Program.
- 5.3 Before the start of each rotation, students will be provided with the name and contact information of the designated preceptor (clinical instructional faculty) at the clinical rotation site in EXXAT. It is the student's responsibility to contact the preceptor before the first day of the rotation to arrange the specific location and time for the student to meet with the preceptor on the first day. Students must not begin a clinical rotation before the assigned starting date or extend the end date beyond the assigned end date without permission of the Program.
- 5.4 Students are required to attend each day of the core clinical rotation course for the designated four-week timeframe. Students are required to attend their preceptorship course for the designated six-week timeframe.
  - a) An average of at least 40 hours per week (Sunday to Saturday) must be devoted to the assigned clinical rotation as outlined in the Attendance Report section of this manual (see page 9). If the student does not reach the minimum of 40 hours (including curriculum study) in the week it is his/her/their responsibility to bring it to the attention of the Administrative Clinical Coordinator by Monday at 5 p.m. of the following week.
  - b) The specific schedule will be determined by the preceptor and is contingent on the clinical site and preceptor availability. The required rotation schedule may include nights, weekends, and rotating shifts. Students may also be required to work on days when EMU is closed (e.g., Labor Day, Thanksgiving). There is no maximum number of hours required during clinical rotations. If a student is concerned about their health or safety, contact the Administrative Clinical Coordinator or Program Director immediately.
  - c) In the event of unforeseen circumstances such that students are unable to participate in face-to-face patient care, the program has developed a contingency curriculum that will serve as clinical duty hours. See appendix A for the Contingency Plan.
- 5.5 Any unreported absence results in an automatic professionalism violation. This could result in failing the clinical rotation and/or delaying graduation.
- 5.6 If a student must arrive late, be absent, or leave early from a clinical rotation, the student must report the tardiness/absence/early exit to the Site Coordinator following the site's protocols. The student must also report the tardiness/absence/early exit to the Administrative Clinical Coordinators within 24 hours of the event.
- 5.7 Late arrival or early exit of more than 15 minutes from the designated start or end time will be counted as an unexcused absence unless otherwise specified by the Preceptor or Clinical Coordinators.
- 5.8 Excused Absences:
  - a) An excused absence is an absence due to: personal emergency or illness of the student or a student's dependent (with a physician, PA, or NP note); death of a family member (with funeral program or other approved documentation); religious observances (with verification); participation in approved university-sponsored activities (with verification); or government-required activities (with verification).
  - b) With the exception of illness, arrangements to have an excused absence must be made prior to the absence.



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- c) In the case of illness, the Administrative Clinical Coordinator must be notified via email, voice mail, or in writing **within 24 hours** of the absence. The Program Director will ultimately determine if an absence is excused.

### 5.9 Unexcused Absences:

- a) An unexcused absence is defined as every absence that is not excused.
- b) Absence from rotations for job interviews is not considered an excusable absence.**
  - i. Please note that the primary responsibility of the faculty and the EMU PA program is to prepare you for clinical practice. Seeking and procuring employment is not part of the Clinical Year curriculum and these endeavors must not interfere with your clinical educational responsibilities.
- c) The Administrative Clinical Coordinator must be notified via email, voice mail, or in writing **within 24 hours** of any absence.

### 5.10 Absence Maximums:

- a) A cumulative total of five excused/unexcused absences is permitted **over the entire clinical year**, not to exceed two absences per a single rotation. Exceeding the maximum number of absences for the entire clinical year or per rotation may result in dismissal from the PA program. Extenuating circumstances will be at the discretion of the PA Program.

- 5.11 Unexcused absences are not permitted on EOR days; failure to attend EOR days without an excuse approved by the Program will result in an automatic failure of the clinical rotation. Each student must be on time for and attend the entire EOR day. If a student does not attend the entire EOR day, the student has not satisfactorily completed the clinical rotation course and the Program may require the student to repeat the clinical rotation and all associated course requirements. This will delay the student's graduation.

- 5.12 See the *2021-2022 Student Handbook* for policies regarding leaves of absence during the clinical year.

## 6.0 Patient Care

- 6.1 Students must maintain an ethical approach to patient care at all times.

- 6.2 Students are not permitted to make independent medical decisions regarding patient care.

- a) Students must not interact with a patient, carry out any diagnostic or therapeutic procedure, or administer any treatment or management (including prescriptions or completing any orders) without appropriate direction and supervision by the clinical preceptor or his/her/their designated instructional faculty.
- b) The clinical preceptor or his/her/their designated instructional faculty must be physically on the premises and personally involved whenever a student performs direct patient care activities.

- 6.3 Students can decline to follow preceptor instructions with regards to patient care if they do not feel qualified or comfortable performing said task or if the task is outside of the scope of practice of a Physician Assistant student. Any instance of declination must be reported to the Administrative Clinical Coordinator and Program Director **within 24 hours**.

- 6.4 Each student must be aware of her/his/their own limitations and regulations pertaining to PA students. At no time is a student permitted to make an independent official medical decision regarding any patient. Every clinical decision must be approved by the clinical preceptor or her/his/their designated instructional faculty.

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- 6.5 Each student must follow individual clinical rotation site policies regarding co-signature by the clinical preceptor.
- a) All student medical entries must be identified as “PA student” and must include the PA student’s signature with the designation “PA-S.”
  - b) Documentation of services in the medical record written by students, which does not appear in student-designated sections of the medical record, must be reviewed, edited, and signed by the preceptor.
- 6.6 Students cannot sign, phone in, or transmit prescriptions. More specifically, the student’s name is not to appear on the prescription. For clinical rotation sites that use electronic prescriptions, the preceptor or their designee must log into the system under her/his/their own password and personally sign and send the electronic prescription.

### 7.0 Clinical Student Professional Standards

- 7.1 EMU PA students are expected to approach their clinical rotations and patient care with the same professional standards expected of all health care providers. Students are expected to maintain a high level of integrity, respect, and excellence when interacting with patients during their clinical rotations. Failure to adhere to professionalism standards may negatively impact progression through the clinical year and/or result in dismissal from the program. (See Appendix B for Professionalism Expectations and the *2021-2022 Student Handbook* for Professionalism Policy).
- a) Professionalism requires the student to acknowledge their professional and personal limitations, practice free from impairments due to substance abuse, cognitive deficiency, or mental illness.
  - b) PA students must be sensitive to patient population diversity.
  - c) PA students must adhere to legal and regulatory requirements.
  - d) PA students must adhere to the ethical ideals and standards necessary to provide outstanding medical care in a professional and conscientious manner.
- 7.2 Students must observe strict patient confidentiality, respect patient privacy and dignity, and honor patient preferences regarding medical care. To this end,
- a) All students complete HIPAA training prior to clinical rotations. All students must comply with HIPAA rules and regulations at all times. Failure to do so is, at minimum, a professionalism violation.
  - b) The student must be clearly identified as a PA student and must also verbally identify themselves as such.
  - c) Patients must be informed that a PA student will participate in their care.
  - d) Patients must be informed that they will see their regular provider.
  - e) Patients have the right to decline the PA student’s participation in their medical care. This request must be honored.
- 7.3 Students must be readily identifiable at all times in all clinical rotation areas or places where other health professionals or patients are likely to be encountered.
- a) A Program approved name tag identifying the wearer as an EMU Physician Assistant Student must be properly worn. The Program will supply the first name tag. Students are required to pay for any replacement or additional name tags.

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- b) A Program approved patch identifying the student as part of the EMU Physician Assistant Program must be attached to the student's coat.
- c) When meeting another health professional or a patient, the student must clearly introduce themselves as a "Physician Assistant Student."
- d) Students must wear any additional identification required by the clinical site.

7.4 The student is expected to be well-groomed.

- a) Professional attire is mandatory for students in all circumstances in which a student will have contact with patients. Professional dress includes: conservative fashion, clean and pressed short white lab coat, and proper student identification. Males are to wear dress socks and dress shoes, dress slacks, and a long-sleeve, pressed dress shirt with a tie. Females are to wear dress socks/hose and dress shoes (no high heels or open-toe shoes are permitted) and dress slacks/skirt and blouse or a dress.
- b) All students must be fragrance-free (includes abstaining from wearing cologne/perfume), conceal any visible tattoos, wear minimal jewelry (limit of two earrings per ear, no facial or visible body jewelry), have short nails (no artificial nails of any kind), and have clean and neat hair, which includes facial hair.
- c) On clinical rotations, other attire may be required or recommended and will be communicated by the clinical preceptor. Students must follow any additional policies regarding dress codes in place at all rotation sites.

7.5 No student (or representative of the student) may receive any compensation for performance of duties related to any clinical rotation. Students are not to substitute for clinical or administrative staff or any other workers, during clinical rotations – this is a program accreditation requirement.

7.6 Students are required to check their emich.edu email at least once per day. Emails from the Clinical Coordinators, Program Director, and the Program Administrative Assistant must be at least **acknowledged**, if not fully answered, **within 24 hours** of the email being sent.

7.7 Students are required to complete any paperwork or additional requirements set by the clinical site promptly.

- a) Failure to complete requirements by communicated deadlines may prevent students from going on clinical rotations and delay graduation. Students may be required to complete requirements for future rotations during breaks from or between clinical rotations (e.g., electronic medical record training, paperwork). Failure to complete requirements by communicated deadlines may prevent students from going on clinical rotations and delay graduation.

7.8 Before the start of the clinical year, students are required to complete a background check and drug screening test. Failure to pass the background check and/or drug screening test will result in dismissal from the PA program. Extenuating circumstances will be reviewed and adjudicated by the PA Program and the PA Program Director with consultation of EMU offices as necessary.

### 8.0 Electronic Devices and Social Media

8.1 Electronic and social media include any and all electronic-based technologies that are used as a means of communication and interaction among its users. Examples include, but are not limited to: texting, email, and social networking.

8.2 Each student must take responsibility and use good judgment related to all forms of social media. Inappropriate, threatening, anonymous, or harassing communication towards peers, faculty, staff, and/or preceptors is strictly prohibited and will be considered a violation of professionalism.

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8.3 At the beginning of the rotation, the student should discuss with his/her/their preceptor what the preceptor expects regarding the use of electronic devices (e.g., cell phones, tablets) when the student is at the clinical site.

- a) Unless the preceptor states otherwise, the student should not use electronic devices during a patient encounter.
- b) With preceptor consent, the student may use electronic devices for reference.
- c) With preceptor approval, the student may access EXXAT to document procedures and patient encounters for educational purposes. This is to be done during “downtime” and should not interfere with patient care or clinic efficiency.

8.4 Patient Care:

- a) Students are forbidden from describing, depicting, or discussing any patient, aspect of patient care, photographic images, or laboratory or radiographic results in social media or any other electronic or public forum. The only time describing, depicting, or discussing a patient outside of the context of clinical care is acceptable is as a part of an educational or EMU PA program sanctioned setting and at the discretion of the PA Program faculty and/or staff.
- b) Discussions or case presentations of patients, aspects of patient care, laboratory or radiographic results, or images presented in an educational or program sanctioned activity should be presented without any patient identifiers (e.g., patient name, MRN, account number, social security number, birthdate, identifying photographic image).
- c) Students must not record, save, store, or accumulate information about patient encounters including any portion of the patient workup or treatment on any electronic device (e.g., cell phones, thumb drives, personal computers). This includes, but is not limited to, patient photographs, radiographic images, or any portion of a patient’s EMR or paper chart. This information must not be disseminated in any way to include electronic, hard copy, or photographic images.
- d) Failure to comply with the scenarios described in 8.4a-c may be considered a violation of HIPAA rules and regulations and a professionalism violation.

8.5 Students are forbidden from describing, depicting, or discussing any preceptor or institutional/clinic details in social media or any other electronic or public forum. Any such discussion or depiction must be done in an educational or EMU PA program sanctioned setting only and at the discretion of the EMU Physician Assistant Program faculty and/or staff.

### 9.0 Remediation

9.1 Refer to the [2021-2022 Student Handbook](#) for details.

### 10.0 Leave of Absence/Withdrawal/Suspension/Deceleration/ Dismissal

10.1 Refer to the [2021-2022 Student Handbook](#) for details.

### 11.0 Infection and Environmental Hazards

11.1 The PA Program addresses Universal Precautions and other methods of prevention as well as student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk. Students may review the following:

- a) [When to Wear a Face Mask](#) - Michigan Department of Health and Human Services
- b) [Hand Hygiene in Healthcare Settings](#) - CDC

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- c) [Use Personal Protective Equipment \(PPE\) correctly for COVID-19](#) - CDC
- d) eye protection

11.2 Before the clinical year students are required to pass the following assessments in ACEMAPP. Students can access their assessment results in ACEMAPP. The course content is also available for review in EXXAT.

- a) Bloodborne Pathogens Assessment
- b) HIPAA Assessment
- c) OSHA Assessment

### 12.0 Incident, Injury, and other Exposure Protocols

12.1 In the event the student has exposure to infectious or environmental hazards or is injured during a clinical rotation:

- a) The student should be treated according to current standard medical practice. This treatment may be at the site, the emergency department, or the provider of the student's choice depending on the severity of the injury.
- b) The student is to complete (in detail) an Incident Report at the site where the exposure occurred if required.
- c) Once the student is cared for, the Director of Clinical Education, the Faculty Clinical Coordinator, and/or the Administrative Clinical Coordinator is to be notified within 24 hours of the incident.
- d) The student must notify CastleBranch within 48 hours to have a "Post Exposure Documentation" section added to their tracker. It is the responsibility of the student to upload a copy of the PA Program's Department Incident Report, any incident report completed at the clinical site, and any other supporting medical documentation.

12.2 Be aware that financial costs incurred in the case of an injury, infectious or environmental hazard injury, or exposure may fall entirely on the student.

12.3 Understand that the effects of infectious or environmental hazard injury or exposure may significantly affect student learning activities. This may include, but is not limited to, taking a leave of absence or withdrawing from the PA Program.

12.4 In the event of an incident that may place a student in harm's way, but no injury has occurred, the student must notify the Director of Clinical Education, the Faculty Clinical Coordinator, and/or the Administrative Clinical Coordinator within 24 hours of the event. In case of emergency, call 911 immediately.

### 13.0 COVID-19 Related Requirements

13.1 For Physician Assistant Program policies related to COVID-19, visit the [EMU PA Program: COVID-19 website](#). (COVID-19 vaccine, accommodations, university updates, etc.)

### 14.0 Weather / School Closing / Unforeseen Circumstances Policy

14.1 For the clinical portion of the curriculum, if severe weather threatens the clinical rotation site, the appropriate individual(s) will decide if the clinical site will open or will remain open. If the site is closed, the student should regard this in the same manner as if the University was closed. Please note, however, that cancellation of classes by Eastern Michigan University does not automatically cancel students' participation in clinical rotations. In the event of extreme inclement weather, the EMU PA Program Director or Director of Clinical Education may elect to cancel student participation in clinical rotations. If this is the case, students will be notified via email and instructed not to attend clinical rotations until advised to do so. If a student is unable to get to a rotation due to inclement weather, he/she/they must

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notify both the clinical site preceptor and PA Program (via email to the Director of Clinical Education and the Clinical Coordinators) as soon as possible.

- 14.2 In the event a student does not pass screening requirements per clinical site policy, he/she/they must notify the Director of Clinical Education or Clinical Coordinators immediately.

### 15.0 Other Situations

- 15.1 Any other situation or condition not spoken to in these Rules and Regulations or the Program Rules and Regulations in the *2021-2022 Student Handbook* should be brought to the attention of the Program. Each will be considered independently according to the merits of the case. As far as possible, each will be dealt with in a manner comparable to similar conditions described in this document.
- 15.2 If any of these Rules and Regulations come into conflict with the student's religious or other beliefs, it is the responsibility of the student to communicate their concern with the appropriate Program faculty or Program Director immediately. The Program will determine if appropriate accommodations are feasible.
- 15.3 These Rules and Regulations may be amended **at any time by the program**. The student body will be notified of any changes and each student must confirm that they have read and understood the change/changes.

## Program Rules & Regulations in the *Student Handbook*

Students are encouraged to review the *2021-2022 Student Handbook* regarding rules that are pertinent to the clinical year. These include, but are not exclusive to, the sections regarding professionalism, and the student role in the classroom and clinical site.

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## Statement of Understanding

Student Name: \_\_\_\_\_

### A. Working with Diverse Groups

I understand that as part of the educational experience in the EMU PA Program, I will work with individuals representing a variety of cultural, religious, ethnic, racial, sexual orientation, and socioeconomic backgrounds. I agree to participate in such educational experiences with individuals regardless of their background.

### B. Health Status

I have reviewed the EMU PA Program Technical Standards and, to the best of my knowledge, I do not have any condition (physical or mental) that will compromise my ability to perform the duties expected of me as a student in this program. Further, I agree to fulfill any associated health testing or intervention necessary for me to participate fully in assigned clinical rotations. I will submit any necessary documentation regarding my health status (e.g., records of immunization) as required by the program or the clinical site.

### C. BLS & ACLS Certification

I understand that current BLS and ACLS - American Heart Association certifications are required before beginning the clinical phase of the program and that it is my responsibility to maintain certification during the entire clinical curriculum and will provide the appropriate documentation.

### D. Clinical Rotations Agreement

I understand that the EMU PA Program assigns all clinical rotations and that there is no guarantee I will be assigned to a specific location or preceptor. I also understand that clinical rotation sites are subject to change, sometimes without advanced warning. During the clinical curriculum, PA students may have to relocate for periods of time due to the availability of clinical sites. Students are expected to provide their own transportation and housing. Clinical sites may require access to some personal student information.

### E. Communication

I understand that email is the primary means of communication for the EMU PA Program outside of program activities. I will check my EMU email account daily and respond in a timely manner. Furthermore, I understand that I may be subject to disciplinary action for failure to respond to faculty or staff communications in a timely manner.

### F. PA Program Clinical Manual

I know how to access the online version (pdf) of the *Clinical Manual*, have reviewed it in its entirety, and have had all of my questions satisfactorily answered. Furthermore, I attest that I understand and agree to comply with all provisions outlined in the *Clinical Manual*.

**As a Physician Assistant Student at Eastern Michigan University, I have read, understand, and accept all terms of this statement:**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Appendix A: Contingency Plan for the Clinical Year

## Definitions

- Supervised Clinical Practice Experiences are supervised student encounters with patients that include comprehensive patient assessment and involvement in patient care decision making and which result in a detailed plan for patient management. They are abbreviated as SCPE's.
- Learning Outcomes are medical knowledge, interpersonal, clinical and technical skills, professional behaviors, and clinical reasoning and problem-solving abilities that have been attained at the completion of a curricular component, course or program.

In the event that students are unable to be in the clinical setting students may need to complete contingency plan assignments to support their learning to meet SCPE learning outcomes once they return to the clinical setting.

Events that may trigger a contingency plan include but are not limited to the following: inclement weather, natural disasters, pandemic-related limiting factors, preceptor requested time off.

Initiating a contingency plan is detailed in the Clinical Manual EMU Clinical Manual 2020-2021 on page 23 in section 12.0 Weather / School Closing / Unforeseen Circumstances Policy.

Contingency plan will be assigned by the Clinical Director to students that qualify. Students are expected to complete assignments that are equivalent to 6-8 hours of work each day the clinic is missed (or 32 hour work week).

Contingency plan assignments will be listed in the Clinical Year Contingency Plan Learning Community in Canvas. Content of assignments may be added, revised, or removed at discretion of the clinical director and clinical coordinators in order to provide the best content available to support students.



## Appendix B: Professionalism Expectations

**Integrity: PAs hold as their primary responsibility the health, safety, welfare, and dignity of all human beings**

Honesty, trustworthiness – demonstrated by accountability in testing, submitting original work, reporting academic dishonesty

Dependability - demonstrated by reliability in group work, lab performance, class participation, and class attendance.

**Respect: PAs recognize and promote the value of diversity**

Sensitivity and responsiveness to a diverse population – demonstrated by sensitivity and responsiveness to classmates, faculty, staff, EMU employees, standardized patients, all those who contribute to educational development.

Respect for professional and interprofessional colleagues – demonstrated by collaboration during IPE activities, group work, and peer teaching that respects the diversity of viewpoints of participants.

**Behavior: PAs work with other members of the health care team to provide compassionate and effective care of patients**

Subordinating personal interest to that of others; reflecting on actions and decisions – demonstrated by incorporating the views of others when choosing appropriate dress, mode of speech, and content of communication

Interpersonal skills necessary to provide compassionate and effective care of patients - demonstrated by professional communication through dress, email and written communication, mode of speech; active participation in class activities

**Excellence: PAs assess their personal capabilities and limitations, striving always to improve their academic performance and medical practice. PAs actively seek to expand their knowledge and skills, keeping abreast of advances in medicine. PAs use their knowledge and experience to contribute to an improved community**

Assessing personal capabilities and limitations – demonstrated by respectfully asking questions of instructors and peer teachers; actively seeking feedback; correctly utilizing appropriate resources and adhering to the EMU Physician Assistant Program Remediation Process and determinations of the Student Affairs and Progress Committee.

Striving to improve medical competence – demonstrated by integration and application of course content as reflected by formative and summative assessments; self-monitoring of progression of

medical knowledge, patient care skill and medical reasoning as reflected by student performance student portfolio, advisement meetings and recommendations from the EMU Physician Assistant Program Remediation Process and determinations of the Student Affairs and Progress Committee.