# PA Program Clinical Manual

## Table of Contents

**Introduction** ............................................................................................................................... 3

**Clinical Year Curriculum** [B3.02] .................................................................................................. 4

  - Clinical Rotation Schedule .......................................................................................................... 4

**Clinical Rotation Overview** ........................................................................................................ 5

  - Learning Objectives ...................................................................................................................... 5
  - Student Learning ............................................................................................................................ 5
  - Clinical Competencies ................................................................................................................... 5
  - Program Expectations of Competencies ....................................................................................... 6

**Rotation Evaluations, Assignments, Exams, & Grading** .............................................................. 6

  - Evaluations .................................................................................................................................. 7
  - Assignments ................................................................................................................................. 8
  - Logging ....................................................................................................................................... 8
  - End of Rotation Exams ................................................................................................................ 9
  - Objective Structured Clinical Examinations (OSCEs) ................................................................. 10
  - Clinical Rotation Grading ........................................................................................................... 10

**PACKRAT** .................................................................................................................................... 11

  - Clinical Rotation Standards ...................................................................................................... 11

**Summative Evaluation** .............................................................................................................. 12

**Clinical Curriculum Rules and Regulations** .............................................................................. 14

  - 1.0 Rules, Regulations and Policies of the University and Affiliate Institutions [A3.01, A3.02] .......... 14
  - 2.0 Definitions ............................................................................................................................. 14
  - 3.0 Clinical Site Acquisition & Student Matching [A3.03] ............................................................. 15
  - 4.0 Student Contact Information .................................................................................................. 16
  - 5.0 Clinical Year Attendance ....................................................................................................... 16
  - 6.0 Patient Care ........................................................................................................................... 18
  - 7.0 Student Professionalism ........................................................................................................ 19
  - 8.0 Electronic Devices and Social Media ..................................................................................... 21
  - 9.0 Remediation [C3.03] .............................................................................................................. 22
  - 10.0 Deceleration ......................................................................................................................... 23
  - 11.0 Incident, Injury, and other Exposure Protocols .................................................................... 23
  - 12.0 Weather / School Closing Policy ......................................................................................... 24
  - 13.0 Other Situations ................................................................................................................... 24

**Program Rules & Regulations in the Student Handbook** ............................................................ 24

**Statement of Understanding** [A3.02, A3.17] ............................................................................. 25
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 student, preceptor, and the Program is a priority, so contact us with any concerns.

This manual and the Student Handbook are guides to assist you throughout your clinical rotations. The Director of Clinical Education 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.

**Director of Clinical Education**
Maria Keelon, PA-C
Email: mkeelon@emich.edu
Phone: 734.487.9526

**Clinical Coordinator**
Jenifer Stanko
Email: jstanko2@emich.edu
Phone: 734.487.9415
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 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 dieticians, 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:

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Course Name</th>
<th>Credit Hours</th>
<th>Number of Weeks of Rotations</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAS 681</td>
<td>Introduction to Clinical Year</td>
<td>3</td>
<td>12</td>
</tr>
<tr>
<td>PAS 710a</td>
<td>Clinical Rotation: Pediatric Medicine</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>PAS 710b</td>
<td>Clinical Rotation: Psychiatric Medicine</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>PAS 710c</td>
<td>Clinical Rotation: General Surgery</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td><strong>Semester Total</strong></td>
<td><strong>15</strong></td>
<td><strong>12</strong></td>
</tr>
<tr>
<td>PAS 710d</td>
<td>Clinical Rotation: Obstetrics &amp; Gynecological Medicine</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>PAS 710e</td>
<td>Clinical Rotation: Emergency Medicine</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>PAS 710f</td>
<td>Clinical Rotation: Family Medicine</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>PAS 710g</td>
<td>Clinical Rotation: Internal Medicine</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td><strong>Semester Total</strong></td>
<td><strong>16</strong></td>
<td><strong>16</strong></td>
</tr>
<tr>
<td>PAS 710h</td>
<td>Clinical Rotation: Elective Rotation</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>PAS 710i</td>
<td>Clinical Rotation: Elective Rotation</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>PAS 720</td>
<td>Clinical Preceptorship</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td><strong>Semester Total</strong></td>
<td><strong>14</strong></td>
<td><strong>14</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Clinical Year Total</strong></td>
<td><strong>45</strong></td>
<td><strong>42</strong></td>
</tr>
</tbody>
</table>
Clinical Rotation Overview

Learning Objectives

You will be provided with learning objectives that provide examples of the skills and knowledge you should be acquiring during each rotation. Some of these objectives 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 objectives 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. Attain the learning outcomes described in the syllabus for each clinical rotation course.\[81.09]\n2. 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 clinical preceptor regarding performance.
8. Provide timely and complete logging of attendance, patient encounters, procedures, and evaluations.
9. Promptly notify the Director of Clinical Education or the Clinical Coordinator 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:

- Medical Knowledge
- Interpersonal and Communication Skills
- Patient Care
- Professionalism
- Practice Based Learning and Improvement
- System Based Learning

PA Program Clinical Manual

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 of medical knowledge, Interpersonal and Communication skills, Patient Care, Professionalism and Practice Based Learning and Improvement 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
Syllabi will be provided that specify 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 the course of 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 each 24 hour period the Midpoint Evaluation is late. *For those completing two 2-week rotations, Midpoint Evaluations are due by 5pm on the first Friday 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 each 24 hour period the Evaluation of Clinical Site is late. *For those completing two 2-week rotations, Site Evaluations are due by 8am 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 each 24 hour period the Evaluation of Preceptor is late. *For those completing two 2-week rotations, Preceptor Evaluations are due by 8am 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 each 24 hour period the Evaluation of Clinical Rotation is late. *For those completing two 2-week rotations, Preceptor Evaluations are due by 8am 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 on Canvas and Exxat. The Final Evaluation by the preceptor will be released to the preceptor approximately two weeks prior to 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., paper, presentation, skills demonstration) 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 each day 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 (PxDx)
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 on multiple times per day, the patient encounter is to be logged once for each day. Patient Encounter Logs must be complete and include all fields set up in EXXAT. Students must also document each procedure they observe, assist with, or perform.

Patient encounters must be logged within one week 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 each 24 hour period 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).
PA Program Clinical Manual

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 assignment. Students must have an average of 40 hours per week dedicated to the clinical rotation. 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 and occur during regular business hours (i.e., Monday through Friday from 8 a.m. - 5 p.m.).
- 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.
- 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 entire rotation) is due by 8 a.m. 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 each 24 hour period 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 http://www.endofrotation.org/exams/core-tasks-objectives/ and review the Core Tasks and Objectives. The key topics and exam blueprints can also be found on Canvas.

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 Director of Clinical Education or Clinical Coordinator’s (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 Director of Clinical Education or Faculty Clinical Coordinator by e-mail, phone, or in writing 12 hours prior to the exam. Notifying a classmate rather than a faculty member is unacceptable and will not be excused. The format and date of the make-up examination will be at the discretion of the Director of Clinical Education or Clinical Coordinator.

If a student arrives late for an examination, he/she will still be required to complete the entire exam in the time remaining. 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, the Director of Clinical Education may elect to make exceptions to this policy. Failure to take the exam will result in a grade of zero on that exam.
During the exam, students are not permitted to ask the proctor any questions. Students are not allowed to leave the classroom during any exams (e.g., no bathroom breaks) until their exam is completed. **Students will clear their desk of everything (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.

**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 in both the summer and the winter semesters 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 an entry-level clinician. Each student must attain an aggregate score of at least 80%. 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 clinical rotations.

1. EOR Exam = 40%  
   2. Preceptor Evaluation = 40%  
   3. End of Rotation Assignment = 20%  

   **100%**

   A = 96% - 100%  
   A- = 92% - 95.99%  
   B+ = 87% - 91.99%  
   B = 82% - 86.99%  
   B- = 78% - 81.99%  
   C+ = 74% - 77.99%  
   C = 70% - 73.99%  
   F = ≤ 69.99

The grading scheme for elective rotations and the clinical preceptorship, which do not have an EOR exam, are as follows:

1. Preceptor Evaluation-Elective = 75%  
2. End of Rotation Assignment = 25%  

   **100%**

   A = 96% - 100%  
   A- = 92% - 95.99%  
   B+ = 87% - 91.99%  
   B = 82% - 86.99%  
   B- = 78% - 81.99%  
   C+ = 74% - 77.99%  
   C = 70% - 73.99%  
   F = ≤ 69.99

3. Preceptorship Evaluation = 90%  
4. EXXAT Logging & IPE participation-TBD on yearly basis = 10%  

   **100%**

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

**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 standardized test taking experience. This is a formative evaluation; in other words, students are provided with their individual 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. The PACKRAT is offered on a limited basis, so not taking it at the scheduled time may delay a student’s graduation.

**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 encounter 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 e-value 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
- 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
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 boarded. 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 a testing process carried out over the course of the last four months of the Clinical Year to evaluate each student’s readiness for clinical practice. The exam is based on 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 Content

The summative exam is delivered by way of Objective Structured Clinical Examinations (OSCE) stations and Clinical Skills stations. The summative assessment is tied to the competencies by way of learning objectives from both the didactic year curriculum and clinical rotations. The program has defined expectations based on the competencies and these expectations are assessed to determine if the student has achieved competency. The summative examination evaluates student competency via OSCE and Clinical Skills stations:

- **OSCE Stations**: Scenarios that involve student interactions with standardized patients that illustrate the student’s ability to obtain a history, perform physical exams and/or demonstrate professionalism, communications skills and patient care skills.
- **Clinical Skill Stations**: evaluate practical skills such as interpreting EKG’s or laboratory findings, performing procedures or writing prescriptions, written documentation notes and/or oral case presentations.

Each skill station evaluates one or more “Competency Categories” which are based on the program expectations. Standardized rubrics individually assess each of the following “Competency Categories:”

- Comprehensive history
- Physical Exam
- Interpretation of medical data
- Critical thinking/medical decision making
- Procedural skills
- Professionalism
- Patient Care
- Communication

Summative Exam Format and Scheduling

12
The Summative Exam OSCE and Skill stations 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.
- In total, the summative experience is comprised of 15 stations.

**Evaluation Process:**
Student performance on the summative exam is evaluated by direct observations, videotaped observations, written presentations and oral presentations. Examiners are comprised of the didactic and clinical faculty, program director and medical director.
OSCE’s utilize Standardized Patients (SP) who “act out” specific medical scenarios. SP’s are trained to their specific case, prior to the summative event. Evaluators utilize standardized rubrics and checklists to evaluate each of the Competency Categories. Evaluators collectively review and agree to the components of the rubrics and checklists. This maximizes the potential for creating a standardized summative experience.

The final grade of the Summative Exam Experience is a cumulative grade.

There will be OSCE or Skill stations that are comprised of more than one Competency Category. Each student is required to score $>80\%$ for each of these Competency Categories. Program expectations are a measurement of competency and therefore, must be successfully demonstrated by each student.

Grading for each station is recorded in Canvas Learning Management System, and reported to the students as Pass/Fail. The pass rate for each station is $>80\%$.

A cumulative grade of $>80\%$ is required to successfully pass the Summative Exam.

**Remediation**
Students who need to remediate the summative examination will have their six week preceptorship to work on any areas of weakness that may need to be remediated. Clinical faculty will discuss areas of deficiency with the student prior to the preceptorship. Remediation will occur after the preceptorship is complete.

**Remediation Process:**
- Students must retake exams on any and all Competency Categories where they scored $<80\%$.
- The remediation takes place during the week before graduation, after the Preceptorship is complete. The date of the remediation examination will be posted in Canvas.
- All students requiring remediation will do so on the same day, at the same time.
- The remediation score of each category must be $>80\%$.

**Remediation Content:**
- Skill Stations will once again be used to assess/remediate the student. There is one skill station representing each Competency Category where the students can be reassessed in their individual area/s of weakness. Once again Competency Category rubrics will be used by evaluators to assess the skill station.
The remediated exams will test the same Competency skills but with different patient scenarios. Skill stations will be a repetition of the initial exam (e.g., suturing and sterile field).

Students who do not pass all components of the remediation examination with ≥80% will meet with the program director and program faculty to discuss deficiencies and determine a learning plan. The student will repeat a 4-week clinical rotation determined by faculty to optimally help the student improve areas of deficiency in order to demonstrate that he or she has the skills required for clinical practice as defined by the program. The individual learning plan will be determined before the student goes on the rotation and will be discussed with the student prior to the rotation so that the student is aware of his or her specific deficiencies and has a plan to improve these prior to retesting. Faculty will also discuss the basic format of the remediation examination prior to the student’s rotation (e.g., number of OSCE / skill stations that will be tested, specific areas to be tested (e.g., knowledge, decision making / critical thinking skills, history / physical exam skills, data interpretation, procedures, patient care skills, etc.) so that the student knows what to expect. This process will delay the student’s graduation.

If a student fails the second remediation of the summative examination, he or she will not graduate from the program.

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 [A3.01, A3.02]

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. [A3.01]

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 Student Handbook.

1.3 In addition to the rules and policies present in the EMU PA Program’s 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 Director of Clinical Education, Faculty Clinical Coordinator, and/or the Program Director. [A3.02]

2.0 Definitions

2.1 The Director of Clinical Education is the PA Program faculty member who leads the clinical portion of the Program.

2.2 The Administrative Clinical Coordinator is the PA Program Administrative member who provides assistance for 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 an instructional faculty member and 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 [A3.03]

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 elective rotations in a particular medical specialty. 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 or she 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.

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.

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

a) The student must notify the 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) 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 referring 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 she/he will participate in a clinical rotation at that site or with that preceptor.

3.9 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 ensure 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 Students must supply their emich.edu email address to the 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 immediately updating the Clinical Coordinator and the EMU PA Program via email of any changes to this contact information.

4.3 Student 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 immediately updating the Clinical Coordinator and the EMU PA Program of any changes to this contact information via email.

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.

5.2 Students are required to attend all activities scheduled during the Introduction to Clinical Year course for the designated three-week timeframe.

a) Introduction to Clinical Year will meet for an average of at least 40 hours per week.

b) The specific schedule for Introduction to Clinical Year will be determined by the Director of Clinical Education, additional Introduction to Clinical Year faculty, and/or the Administrative Clinical Coordinator. The course will typically take place between 8 a.m. and 5 p.m. Monday through Friday; however, there are times when class will start or end outside of this time range.

c) Each student must be on time for and attend all Introduction to Clinical Year activities. There is no allowance for unexcused absences during the Introduction to Clinical Year curriculum. In the event that a student does not attend the entire day, the student has not satisfactorily completed Introduction to Clinical Year course and the Program may require the student to repeat the course and all associated course requirements. Any absences will count towards the attendance maximums outlined in 5.10.
Prior to 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. It is the student’s responsibility to contact the preceptor prior to 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.

Students are required to attend each day of the core and elective 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 10). If the student does not reach the minimum 40 hours (including curriculum study) in the week it is his/her responsibility to bring it to the attention of the Director of Clinical Education and/or 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 on which 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 her/his health or safety, contact the Director of Clinical Education or Faculty Clinical Coordinator immediately.

Any unreported absence results in the automatic failure of the clinical rotation and may result in a professionalism violation.

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 Clinical Coordinator or Director of Clinical Education within 24 hours of the event.

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, Director of Clinical Education or Clinical Coordinator. Repeated late arrivals or early exits less than 15 minutes may also result in a professionalism violation.

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); 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 absence excused must be made prior to the absence.

c) In the case of illness, the Director of Clinical Education and/or the Clinical Coordinator must be notified via email, voice mail, or in writing within 24 hours of the absence. The Director of Clinical Education, with possible input from the Program, will ultimately determine if an absence is excused.

Unexcused Absences:
PA Program Clinical Manual

a) An unexcused absence is defined as every absence that is not excused.

b) Absences from rotations for job interviews are 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 SCPE
   responsibilities.

   c) The Director of Clinical Education and/or the 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
      due to the unique and intense nature of clinical experiences (clinical rotations). Exceeding the
      maximum number of absences may result in dismissal from the PA program. Extenuating
      circumstances will be at the discretion of the PA Program.

   b) A cumulative maximum of two absences is permitted per rotation, provided that he or she has
      not already exceeded 5 absences for the year. Even excused absences may not exceed two
      during a single rotation. Extenuating circumstances will be at the PA Program’s discretion and
      must be discussed with the Director of Clinical Education.

   c) Each student is permitted one unexcused absence per clinical rotation. More than one
      unexcused absence during a clinical rotation results in the automatic failure of the clinical
      rotation. Extenuating circumstances will be at the PA Program’s discretion.

5.11 Unexcused absences are not permitted on EOR days; failure to attend EOR days without an excuse
approved by the Director of Clinical Education 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 could
delay the student’s graduation.

5.12 See the 2019-2020 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 designated
   instructional faculty.

   b) The clinical preceptor or his/her 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 Director of Clinical
Education of Faculty Clinical Coordinator within 24 hours.
6.4 Each student must be aware of her/his 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 designated instructional faculty.

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 own password and personally sign and send the electronic prescription.

7.0 Student Professionalism

7.1 EMU PA students are expected to always approach their clinical rotations and patient care with professionalism. Please refer to the 2019-2020 Student Handbook, section 22.0 Professionalism and Appendix A Rubric which still apply in the clinical year. Failure to adhere to professionalism standards may negatively impact progression through the clinical year and/or result in dismissal from the program.
   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.
PA Program Clinical Manual

a) A Program approved nametag identifying the wearer as an EMU Physician Assistant Student must be properly worn. The Program will supply the first nametag. Students are required to pay for any replacement or additional nametags.

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 him/herself 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. [B3.01] Males are to wear dress socks and dress shoes, dress slacks, and a long-sleeve, pressed dress shirt with 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 clearly 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 employees of the hospitals or clinics and, therefore, work entirely under the preceptor’s supervision. Students are not to substitute for paid clinicians, clerical staff, or other workers at the clinical sites. Students are not allowed to substitute for clinical or administrative staff during clinical rotations – this is a program accreditation requirement. [A3.06]

7.6 Students are required to check their emich.edu email at least once per day. Emails from the Clinical Coordinator, Director of Clinical Education, 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 as communicated by the Clinical Coordinator, Faculty Clinical Coordinator, Director of Clinical Education, or Site Coordinator in a timely manner.

   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 trainings, paperwork). Failure to complete requirements by communicated deadlines may prevent students from going on clinical rotations and delay graduation.

7.8 Prior to the start of the clinic 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 includes 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. Students must maintain appropriate standards of conduct as it relates to the PA Program and professionalism as a physician assistant student.

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.

8.3 At the beginning of the rotation, the student should discuss with his/her 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 “down time” 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 [C3.03]

During the clinical year, students must successfully complete each of the following three components to pass each clinical rotation: EOR exam, Preceptor evaluation, and an EOR assignment. Failure of any of these components will be remediated in the following ways:

9.1 End of Rotation Exam (EOR)

PAEA EOR exams are the standardized tests used to evaluate each of the seven core clinical rotations (Internal Medicine, Pediatrics, etc.). There are two versions of the exam available per core rotation and these are randomly assigned to the student. Students must score ≥ 80% to successfully pass the EOR exam. If the student scores <80%, he/she will be required to retake the alternate version of the failed exam on the Monday (or within 48 hours) immediately following the EOR day. If the student fails the exam a second time, he/she will be allowed a third attempt to pass but will be expected to prepare for the retake exam while progressing into their next rotations. The student must schedule and pass the third exam one week before the start of the Preceptorship. The third exam will be randomly assigned from one of the two available core rotation exams that the student has already taken. The student will be assigned an EOR exam grade of 80% once they have successfully passed the exam. **If the student is unable to pass the exam on the third try, he/she will be dismissed from the program.**

The student must be aware that this remediation process may delay graduation.

9.2 Preceptor Evaluation Assessment Areas

The student will be evaluated by their preceptor/s at the end of each rotation via the *Preceptor Evaluation of Student* evaluation. The student must achieve at least a “Satisfactory” on every competency area assessed in the evaluation. (See blank evaluation in Canvas for details). If the student receives a “Poor” or “Unacceptable” in any competency area, he or she must meet with the Director of Clinical Education for a Student Learning Intervention Discussion (SLID), and create a plan that will address the area/s of deficiency. The plan will vary from student to student depending on the severity of the deficiency, but will include assessment or documentation that evidences improvement/s and may involve preceptor input. Once the student meets all of the requirements in the SLID plan, the deficiency will be considered to have been remediated and she/he will be assigned the grade earned on the *Preceptor Evaluation of Student*.

9.3 Preceptor Evaluation Overall Grade

The student must score an overall grade of ≥ 80% on every *Preceptor Evaluation of Student* for each rotation. The EMU PA program considers preceptor evaluations to be an important part of student assessment, therefore, a grade of <80% will be considered a failure of the rotation.

- Any student failing a rotation will be required to repeat the rotation. The repeated rotation will be of the same specialty (for core rotations) or a rotation that best addresses the student’s area/s of weakness (for elective rotations) and the student’s final grade for that rotation will be the one achieved during the repeated rotation. The student must be aware that this remediation process may delay graduation.

If the student fails the remediated rotation by scoring <80% on the *Preceptor Evaluation of Student*, he or she will be dismissed from the program.

9.4 End of Rotation Assignment

The student will be required to participate in an on-campus assignment or turn in a written End of Rotation assignment for every rotation. The student will be required to score ≥ 80% on each of these
assignments. If the student scores < 80% he/she will meet with the clinical year faculty for a Student Learning Intervention Discussion (SLID) to create a plan for addressing areas of deficiency. The student will be required to submit a revision of the assignment within 48 hrs. of the EOR day and must continue to submit the assignment until all areas of weaknesses have been addressed. The student will be given a final grade of 80% for the EOR written assignment.

10.0 Deceleration/Dismissal

10.1 If a student fails to successfully remediate any course by completing all required Learning Interventions, receives a final cumulative course grade of “F” in any PA Program course didactic or clinical year, or receives a third final cumulative grade of less than “B” in any PA Program course he or she will be dismissed from the Program.

Example: A student enters the clinical year with one “C” and then fails a rotation. This would be two cumulative grades of less than “B”. Should the student fail another rotation, they will be dismissed from the program. One exception to this rule is if a student fails the same rotation twice, (regardless if they have no “C” grades up until this point) they will be dismissed from the program.

The EMU PA Program does not permit deceleration for academic reasons.

10.2 Students who take a leave of absence for exceptional life events will be required to meet with the PA Program as soon as they are able to do so to discuss their status within the Program. The decision to grant deceleration will still be made on a case-by-case basis. The restart date for that student will be determined by the Program and may require the student to repeat or audit prior courses to ensure proficiency and readiness to rejoin the cohort. At the discretion of the faculty, the student may be required to demonstrate competencies (e.g., didactic and or clinical skills) and/or take a proficiency exam before restarting the Program. The student must receive 82% or higher on any evaluation in order to proceed in the Program.

11.0 Incident, Injury, and other Exposure Protocols

11.1 In the event the student has an 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 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 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.

11.2 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.
11.3 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.

11.4 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 Clinical Coordinator, and/or the Administrative Clinical Coordinator within 24 hours of the event. In case of emergency, call 911 immediately.

12.0 Weather / School Closing Policy

12.1 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 or she must notify both the clinical site preceptor and PA Program (via email to the Director of Clinical Education of the Clinical Coordinator) as soon as possible.

13.0 Other Situations

13.1 Any other situation or condition not spoken to in these Rules and Regulations or the Program Rules and Regulations in the 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.

13.2 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.

13.3 These Rules and Regulations may be amended 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 2017-2019 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.
Statement of Understanding [A3.02, A3.17]

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 prior to 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 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 on a daily basis 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