Preceptor Manual
Guidance for Preceptors of Physician Assistant Students

This manual was modified from the Preceptor Orientation Handbook developed by the:
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Introduction

The Eastern Michigan University (EMU) Physician Assistant (PA) Program’s faculty, staff, and students would like express their gratitude for our preceptors’ hard work and dedication. Students’ experiences in your practice are critical to their development because these experiences allow students to synthesize concepts and apply principles for quality health care delivery. Preceptors are key in this process. Students work closely with you and learn from your advice and example. Through your supervision, students progressively develop the skills and clinical judgment necessary to become successful practicing PAs.

This handbook is designed to cover the topics we feel are important for preceptors and students to successfully collaborate during clinical rotations. If you have any questions about the content of the Clinical Preceptor Manual or other issues please contact:

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Thank you for your commitment to PA education.
EMU Physician Assistant Program

The EMU PA Program is a twenty-four month, full-time, graduate professional program. The first year of the curriculum is didactic in nature and emphasizes primary care-based medicine, critical thinking, and communication skills. During the second, or clinical year, students work with practicing clinicians in outpatient, inpatient, emergency department, and operating room settings. [B3.04]

Program Vision, Mission, and Goals

Vision
Our physician assistant program is dedicated to teaching students the science and art of medicine. Our clinically-focused curriculum will promote critical thinking and patient-centered problem solving. We are committed to producing graduates who will master the skills required to competently and compassionately practice preventive and diagnostic medicine, and foster the interpersonal and collaborative attributes necessary to become exemplary medical providers.

Mission
The Eastern Michigan University Physician Assistant Program’s mission is to identify, train, and support a diverse population of graduate students to become highly respected ambassadors of the profession and extraordinary healthcare providers with a strong foundation in primary care medicine and interdisciplinary practice.

Goals for Student Competency
The EMU PA Program embraces and supports the Competencies for the Physician Assistant Profession as developed jointly by the four main PA organizations: NCCPA, ARC-PA, PAEA, and AAPA. The EMU PA Program Goals aligns with these competencies:

- Medical Knowledge
- Interpersonal & Communication Skills
- Patient Care
- Professionalism
- Practice-Based Learning & Improvement
- Systems-Based Practice

Curriculum
The EMU PA Program consists of six continuous semesters of rigorous graduate level training for a total of 103 semester credit hours. The curriculum meets the goals and mission of the PA Program, provides students with a firm background in medicine, and stresses problem-solving and the importance of patient interaction and teamwork. [B1.01, B1.02, B1.07, B1.08] Traditional classroom lectures are supplemented with small group learning and critical thinking experiences, simulated patient interactions, and mock medical procedure training and testing.

The second year of the program includes 42 weeks of clinical rotations and a clinical preceptorship in one of the core rotations. The rotations expose the student to many different aspects of clinical medicine and to help them acquire the competencies needed for clinical PA practice. [B3.02] Each student has an individualized schedule regarding the order and location of clinical rotations. Below is a sample clinical curriculum schedule: [B3.07]
Eastern Michigan University Clinical Preceptor Manual

<table>
<thead>
<tr>
<th>Clinical Rotation</th>
<th>Length</th>
</tr>
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<tbody>
<tr>
<td>1. Emergency Medicine</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>2. Family Medicine</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>3. Internal Medicine</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>4. Pediatric Medicine</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>5. General Surgery</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>6. Obstetrics and Gynecological Medicine</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>7. Behavioral Medicine and Mental Health Care</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>8. Elective</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>9. Elective</td>
<td>4 Weeks</td>
</tr>
<tr>
<td>10. Clinical Preceptorship</td>
<td>6 Weeks</td>
</tr>
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</table>

**Total** 42 Weeks

To guide learning during the clinical rotation, the Program provides a syllabus with specific objectives required of students.[B1.09] The Program conducts frequent, objective and documented evaluations of students related to learning outcomes for supervised clinical education experiences.[C3.01]

**Key People**

There are several people involved with clinical rotations. These include the clinical preceptor, site coordinator, EMU’s director of clinical education, and EMU’s clinical coordinator.

**Clinical Preceptor**

Clinical preceptors are clinicians who work in hospitals, clinics, or other health care settings. They are responsible for teaching, supervising, and evaluating students during rotations. 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.[B3.06]

**Site Coordinator**

Each clinical site also has a site coordinator who serves as the primary point of contact with the EMU PA Program for that clinical site. The site coordinator is responsible for organizing student orientation and instruction related to the technical aspects of the site. The site coordinator may be the clinical preceptor or another person who works at the clinical facility (e.g., human resources, office manager).

**EMU’s Director of Clinical Education**

EMU’s director of clinical education, Maria Keelon, PA-C, is responsible for developing the curriculum and teaching processes for the clinical year. Preceptors will work with the director of clinical education and clinical coordinators to assure student learning, completion of evaluations, provide feedback on student development during the rotation, and to address any concerns the preceptor may have.[A2.17] The director of clinical education can be reached by phone (734.487.9526) or email (mkeelon@emich.edu).

**EMU’s Faculty Clinical Coordinator**

EMU’s Faculty Clinical Coordinator, Jessica Stamatis, PA-C serves as a second faculty member in the clinical year, assisting the director of clinical education with curriculum development, as
well as scheduling and assigning student rotations. The faculty clinical coordinator can be reached by phone (734.487.3346) or email (jessica.stamatis@emich.edu).

EMU’s Administrative Clinical Coordinator
EMU’s Administrative Clinical Coordinator, Jenifer Stanko serves as a point-of-contact for the site coordinator for site logistics such as rotation specific requirements, compliance with required immunizations and certifications. The clinical coordinator can be reached by phone (734.487.9415) or email (jstanko2@emich.edu).

Preceptor Responsibilities
By allowing students into your clinical practice, you provide an important opportunity for students to further develop their clinical skills in a supervised environment and enrich their medical knowledge base. Your responsibilities are two-fold, serving as a medical educator and a clinical supervisor.

Preceptor Responsibilities as a Medical Educator:
• Ensure proper orientation of students at the onset of the clinical rotation to the practice/site’s policies and procedures.
• Develop and discuss the rotations’ expectations and objectives with the student at the beginning of her/his rotations. Potential topics include:
  o Attendance requirements,
  o Supervision and the potential to be assigned to other supervisors/preceptors,
  o Expectations for clinical care, patient interaction, and formal learning opportunities such as clinical rounding and conferences, and
  o Expectations regarding documentation and presentation of patient findings.
• Demonstrate, instruct, and observe student clinical performance as it pertains to:
  o Medical knowledge base,
  o Interpersonal communication skills (e.g., case presentations, patient interactions, staff-student interactions),
  o Patient care (e.g., therapeutic and diagnostic procedures, treatment plans, disposition plans, follow-up plans),
  o Professionalism,
  o Practice-based learning and improvement (e.g., analyze experiences, apply medical research, utilize other information resources for self- and practice-improvement), and
  o System-based practice (e.g., billing and coding, appreciation of underserved patient populations, knowledge of community resources).
• Offer opportunities for the student to increase her/his knowledge-base and further progress to independent practice.
• Delegate to the student increasing levels of responsibility, appropriate to her/his experience and expertise, which facilitates their progress towards a more independent practice.
• Assign readings to promote further learning.
• Meet with EMU’s director of clinical education during the initial site evaluation.
• Be available to discuss with EMU’s director of clinical education or clinical coordinator students’ progress or any concerns regarding the student.
• Provide routine and timely feedback to the student and the EMU PA Program regarding student performance including, but not limited to:
  o Mid-point evaluations and
  o Final written evaluations completed through E*Value.
• Maintain and adhere to professional relationship boundaries with the student. Student-preceptor interactions should be limited to the clinical/satellite locations. Interactions outside of the work environment should be related to formal educational programs or opportunities. Please contact the director of clinical education or clinical coordinator with questions.

Preceptor Responsibilities as a Clinical Supervisor:
• Be physically on site premises and personally involved whenever the student is participating in direct patient care activities.
  o Clearly designate another qualified clinician who will serve as the alternate preceptor/supervisor if the preceptor is unavailable. An appropriate substitution includes, physicians, PAs, and NPs.
  o The student can be assigned to observe other members of the health care team (e.g., nursing, x-ray, lab, physical therapy) to enhance her/his clinical experience. These interactions should augment the clinical experiences but not replace them.
• Supervise any and all procedures until such time the preceptor feels the student has attained proficiency to perform the task independently. The preceptor should be present and actively involved during the entirety of a procedure/task. The preceptor should evaluate the student’s work upon completion of the task.
• Remember that the student is not a licensed clinician and is not credentialed to provide health care services independently.
• Personally see all patients before disposition/discharge.
• Supervise any gender-specific physical exams (e.g., pelvic exam, breast exam, male GU exam, rectal exams, etc.). The student should perform gender-specific exams with an appropriate designated chaperone.
• Understand that the student, in order to maintain patient safety and student well-being, is allowed to, in a professional manner and location:
  o Question any instructions or orders given by the preceptor to the student,
  o Ask for additional clarification or assistance with any task including performing physical exams or therapeutic/diagnostic procedures, or
  o Inform the preceptor that she/he does not feel qualified or comfortable carrying out the instructions.
• Promptly notify the director of clinical education or clinical coordinators of any circumstances that might interfere with the student’s ability to successfully complete the rotation or diminish the student’s overall training experience.
  o It is the goal of the program to work hand and hand with preceptors to help students strengthen areas of weakness.
• Follow EMU’s procedures regarding injury and/or bodily fluid exposure (detailed on page 15) [A3.08]. In addition, policies and procedures at the clinical location must be followed.
Student Responsibilities

Each student must be aware of his/her own limitations and the regulations of the EMU PA Program. In addition, the student must abide by the individual rotation site and/or site coordinator’s policies.

To gain the most from rotations, the student is expected to be proactive and fully participate in all learning opportunities.

Student Learning

The student is expected to:

- Attain learning outcomes described in the syllabus for each clinical rotation course.
- Participate fully in each clinical rotation as directed and guided by the clinical preceptor.
- Take an active approach to patient interaction, clinical rotation duties, and collaborative interactions with other health care team members.
- Demonstrate proficiency in clinical skills. Over the course of the clinical year students should attain a minimum number of patient encounters and clinical procedures as detailed in the Student Clinical Manual. The student may also demonstrate proficiency through a preceptor’s direct observation of a clinical skill.
- Ask questions in a professional manner when uncertain about a clinical activity, decision, or outcome.
- Seek feedback on a regular basis from clinical preceptor regarding performance.
- Provide timely and complete logging of attendance, patient encounters, procedures, and evaluations.
- 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.

Involvement in Patient Care

- The student is not permitted to make independent medical decisions regarding patient care.
- The student must maintain an ethical approach to patient care at all times.

Attendance & Schedule

- The student is expected to attend every scheduled clinical day.
- The student must not begin a clinical rotation before the assigned starting date or extend the end date beyond the assigned parameters without permission of the Program.
- The student’s specific schedule is contingent on the clinical site and preceptor availability, but should be an average of at least 40 hours per week.
- The required rotation schedule may include nights, weekends, rotating shifts, holidays, and days that EMU is closed.
- If a student must arrive late, be absent, or leave early from a clinical rotation, the student must report this to EMU’s clinical coordinator or director of clinical education immediately. Students must also notify the site coordinator following the site’s protocols.
- Students have a predetermined number of excused/unexcused absences over the course of the clinical year. Excused absences should be prearranged and preapproved by EMU’s clinical coordinator or director of clinical education and the preceptor.
Unexcused absences negatively impact students’ learning; therefore, any unexcused absences must be reported immediately to EMU’s clinical coordinators or director of clinical education.

Student Professionalism

EMU PA students are expected to always approach their clinical rotations and patient care with professionalism. Professionalism requires the student to acknowledge their professional and personal limitations, practice free from impairments due to substance abuse, cognitive deficiency, or mental illness. PA students are expected to be sensitive to patient population diversity and adhere to legal and regulatory requirements. PA students are expected to adhere to the ethical ideals and standards necessary to provide outstanding medical care in a professional and conscientious manner. Students may refer to the student handbook for specific details on professional behavior.

Student-Patient Relationship

Patients are essential partners in this educational endeavor. All efforts are made to observe strict confidentiality, respect patient privacy and dignity, and honor patient preferences regarding medical care. To this end,

- All students complete HIPAA training prior to clinical rotations.
- The students must be clearly identified as a PA student and must also verbally identify themselves as such.
- Patients must be informed that a PA student will participate in their care.
- Patients should be informed that they will see their regular provider.
- Patients have the right to decline the PA student’s participation in their medical care. This request must be honored.

Student Identification\[B3.01\]

- The student 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 Program approved nametag identifying the wearer as an EMU Physician Assistant Student must be properly worn (full face and name visible).
- When meeting another health professional or a patient, the student must clearly introduce him/herself as a “Physician Assistant Student.”
- Some clinical sites may require additional identification to be worn.

Dress Code

The student is expected to be well groomed. 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.\[B3.01\]
- 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.
Electronic Devices
- 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.
- Unless the preceptor states otherwise, the student should not use electronic devices during a patient encounter.
- With preceptor consent, the student may use electronic devices for reference.
- With preceptor approval, the student may access E*Value (Clinical Data Management System) 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.

Compensation
- 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. The EMU PA Program does not allow students to substitute for clinical or administrative staff during clinical rotations – this is a program accreditation requirement. [A3.06]

Rotation Boundaries
- Under no circumstances may a student participate in clinical activities that are not sanctioned or endorsed by the EMU PA Program.
- Once a student matriculates into the program, no clinical activity (including shadowing) in a clinical setting is permitted without PA Program approval. This includes breaks in the student semesters and any other day while the individual is a student in the Program.
- If a PA student is working in a paid position in a different health-care related capacity any time during their PA education, the student is not permitted to assume the role of a PA student while on duty as a paid employee.
- Students may not assume a role from any previous profession while on clinical rotations.
- Professional boundaries must be maintained at all times between students and preceptors.

Unprofessional Behavior
Behavior considered unprofessional includes, but is not limited to, the following:
- Any form of dishonesty – examples include: plagiarism, cheating on assignments or examinations, lying, submitting false attendance reports or falsifying medical records.
- Chronic absenteeism or tardiness.
- Use of profane, vulgar, abusive, obscene or threatening language of any sort while participating in PA Program activities.
- Use of or being under the influence of drugs or alcohol while participating in any PA Program activity or while present in any facility where PA Program activities occur.
- Failure to maintain strict confidentiality of patient records or patient encounters (including but not limited to all HIPAA rules and guidelines).
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- Uncooperative, hostile, or disrespectful attitudes manifested towards patients and their acquaintances, instructional faculty, University or medical staff, visitors, or fellow students.
- Lack of respect for the privacy or property of others.
- Conviction of a felony or offense involving moral turpitude while a PA student.

Documentation & Presentation of Findings

If allowed by the clinical preceptor and facility, PA students may enter information in the medical record.

Cosigning Issues

- All student medical entries must be identified as “PA student” and must include the PA student’s signature with the designation “PA-S.”
- Preceptors are required to document the services they provide as well as review and edit all student documentation, except sections clearly designated for student use.
- PA students cannot sign 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 must log into the system under her/his own password and personally sign and send the electronic prescription. These guidelines must not be violated.
- Students must follow individual clinical rotation site policies regarding co-signature by clinical preceptor.

Billing Issues

- Students are not licensed clinicians and are not credentialed to provide health care services independently. Therefore, preceptors cannot bill for the services of the student.
- Preceptors should clearly understand how different payors view student notes as related to documentation of services provided for reimbursement purposes.
- Although student documentation may be limited for reimbursement purposes, students’ notes are legal and are contributory to the medical record.

Electronic Medical Records (EMR)

- EMRs (electronic medical records) may present obstacles for students if they lack a password or are not fully trained in the use of one particular EMR system. In these cases, students are encouraged to hand-write notes, which should be reviewed by clinical preceptor for feedback. [Interpersonal Skills and Communication]
- Students must not make entries to the patient’s chart under the preceptor’s Username/ID.
Student Evaluations

During the course of each clinical rotation, there are two student evaluations: midpoint and end of rotation evaluations. [C3.01, C3.02, C3.03] These give invaluable information to students, preceptors, and EMU’s PA program regarding student learning and opportunities for continued improvement.

Preceptors can expect to receive an email from E*Value (Clinical Data Management System). This email has a link to access students evaluations. When the evaluation is completed the preceptor can click on Submit and the evaluation will automatically upload into the E*Value system and will be available to the EMU program coordinators at that time. It is not necessary for preceptors to have a username and password to access the E*Value system to complete evaluations.

Midpoint Evaluations [C3.01, C3.02, C3.03]

- The midpoint evaluation is a student self-evaluation that must be discussed with the clinical preceptor.[Practice-Based Learning & Improvement]
- The student’s strengths and weaknesses should be discussed along with an action plan for improvement and successful completion of the rotation.

End of Rotation Evaluations [C3.01, C3.02, C3.03]

- The end of rotation evaluation is completed by the clinical preceptor. However, it may be beneficial to perform brief end-of-rotation evaluations privately with colleagues and staff to gain additional insight into the student’s professionalism and effectiveness.
- The end of rotation evaluation is completed through the E*Value system. Instructions will be provided to preceptors and/or site coordinators.
- The end of rotation evaluation should reflect on student knowledge, skills, and professionalism as well as their improvement throughout the rotation. [C3.01, C3.02, C3.03]
- Evaluations should reflect students’ acquisition of the competencies needed for clinical PA practice. [B3.02, Competencies for PA Profession]
- The student is required to achieve a score \( \geq 80\% \) on the preceptor evaluation to successfully pass the rotation.
- It is important to discuss the final evaluation with the student.
- The final end of rotation evaluation must be completed within one week of the end of rotation.

Program Rules & Regulations

The complete EMU PA Program Rules and Regulations are available in the Student Handbook and the Clinical Rotation Manual. The Program would like to highlight the following Rules and Regulations that impact clinical rotations:

Testing & Training

- Prior to entering the EMU PA Program and/or attending clinical rotations, all students undergo blood-borne pathogen training, HIPAA training, BLS and ACLS certification, and current CDC immunizations for health care workers.
- Students also undergo background checks and drug testing.
Liability Insurance
- Each PA student is fully covered for malpractice insurance by EMU.
- Students completing clinical rotations must maintain a "student" role in the clinic and must not assume responsibilities of an employee until after graduation from the EMU PA Program.

Discrimination
- The following link to the U.S. Department of Education's Office of Civil Rights (OCR) provides information about federal laws that protect students against racial, sexual, or age discrimination: http://www2.ed.gov/about/offices/list/ocr/know.html [A3.11]
- The following link to Eastern Michigan University’s nondiscrimination policy provides additional information about University policies that protect students against discrimination: http://www.emich.edu/title-nine/ [A3.12]

Preceptor Development
There are many tools to assist the clinical preceptor during student clinical rotations:

*Integrating the Learner into the Busy Office Practice*

This article outlines five strategies for effectively integrating a student into a busy practice; it helps answer preceptor questions, including “What do I do if I get behind?” and “What measures can help prevent me from getting behind?”
http://www.oucom.ohiou.edu/fd/monographs/busyoffice.htm

*The One-Minute Preceptor*

This resource outlines five “microskills” essential to clinical teaching.

*Getting Beyond “Good Job”: How to Give Effective Feedback*

This article outlines why feedback is important, barriers to feedback, and how to give constructive feedback.
http://pediatrics.aappublications.org/cgi/reprint/127/2/205

*Providing Difficult Feedback: TIPS for the Problem Learner*

This article provides an easy-to-use “TIPS” strategy to address difficult learners or learning situations. http://www.uthscsa.edu/gme/documents/ProvidingDifficultFeedback.pdf

*Other Resources*

The Physician Assistant Education Association has other useful development tools. www.paeaonline.org,
EMU's Injury and Exposure to Bodily Fluid Policy

Incident, Injury and Infectious and Environmental Precautions [A3.08]

The PA Program will address 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.

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

- 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.
- The student is to complete (in detail) an Incident Report at the site where the exposure occurred, if required.
- Once the student is cared for, the Director of Clinical Education (734.487.9526), the Faculty Clinical Coordinator (734.487.3346), and/or the Administrative Clinical Coordinator (734.487.9415) is to be notified within 24 hours of the incident.
- 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.

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.

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.

In the event of an incident that may place a PA Student in harm’s way, but no injury has occurred, the PA 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.