

WELCOME TO YOUR MPAS CLINICAL EXPERIENCE

Welcome to the world of clinical medicine. This is what you have worked toward since you decided to enter healthcare. The clinical clerkships of this program are not only designed to teach you about disease management with real patients but to prepare you for the transition into the healthcare workforce.



TABLE OF CONTENTS

Malaama ta Vaur MDAC Clinical Ev

| Welcome to Tour MFA3 Clinical Experience | ± |
|-----------------------------------------------------------------------------------------------------------------------|----------------------|
| Practicum Guidelines & Procedures | 2 |
| 1. General Guidelines | 2 |
| 2. Student Eligibility for Clinical Clerkship | 2 |
| 3. Clerkship Courses | 2 |
| 4. Attendance | 3 |
| 5. Preceptor Procurement | 3 |
| 6. Preceptor Qualifications | 3 |
| 7. Students as Faculty or Staff | 3 |
| 8. Site Agreements | 3 |
| 9. Roles & Responsibilities | 4 |
| 11. Professionalism | 5 |
| 13. Clinical Clerkships | 6 |
| 14. Clinical Instructional Methods | 7 |
| 15. Methods Of Assessment | 7 |
| 16. Clinical Clerkship Assessment, | |
| Reassessment and Remediation Policy | 8 |
| 17. Capstone Portfolio | 10 |
| 18. Clinical Call Back Days | 10 |
| 19. Prevention of & Response to Student Exposur | |
| to Infectious & Environmental Hazards | 10 |
| 20. Clinical Incidents | 13 |
| | |
| 21. Student Attestation | |
| 22. How To Succeed In Clinical Rotations | 13 |
| 22. How To Succeed In Clinical Rotations Orientation to the Clinical Clerkship | 13 |
| 22. How To Succeed In Clinical Rotations Orientation to the Clinical Clerkship Preceptor Receipt of resource Manual | 13 |
| 22. How To Succeed In Clinical Rotations | 13 13 13 |
| 22. How To Succeed In Clinical Rotations | 13 13 13 14 |
| 22. How To Succeed In Clinical Rotations | 13 13 13 14 |



PRACTICUM GUIDELINES & PROCEDURES

1. GENERAL GUIDELINES

The clinical year offers MPAS students an opportunity to apply newly developed skills and relate theoretical content to medical situations in acute, chronic, emergent conditions; preventative care; and counseling for health maintenance. The population of patients will range from infants, children, adolescents, adults and elderly.

Your approach to your clerkship is to function as much like a practicing physician assistant as possible, not just as a student. As such, you will be expected to follow the clinical schedule of your preceptor to satisfy the clerkship requirement, not the typical academic schedule you were accustomed to in your didactic year, which may include working nights, weekend and/or be on call.

This is your single greatest opportunity to have a hands-on learning experience and to enhance skills in communication, teamwork, critical thinking and professionalism. Take advantage of the time. Be involved in patient care, ask questions, be interested, seek skills practice, take notes. The more effort you put into learning, the more effort your preceptor will put into to teaching you.

2. STUDENT ELIGIBILITY FOR CLINICAL CLERKSHIP

Prerequisite/Corequisites Requirements for MPAS Students

To be eligible to participate in clinical clerkships, students must:

- Successfully complete all courses offered in the didactic year
- Be enrolled in PA-601 and PA-608
- Complete and clear all healthcare compliance requirements as outlined in the Chamberlain Healthcare Compliance Workbook

3. CLERKSHIP COURSES

- PA-610: Clinical Clerkship Family Medicine
- PA-612: Clinical Clerkship Internal Medicine
- PA-614: Clinical Clerkship Emergency Medicine
- PA-616: Clinical Clerkship Surgery
- PA-618: Clinical Clerkship Pediatrics
- PA-620: Clinical Clerkship Obstetrics & Gynecology
- PA-622: Clinical Clerkship Behavioral Health
- PA-624: Clinical Clerkship Underserved Population
- PA-626: Clinical Clerkship Elective I
- PA-628: Clinical Clerkship Elective II

4. ATTENDANCE

Students must successfully complete and satisfy the credit hour requirements, clinical expectations and course outcomes set forth in the course syllabi to achieve all regulatory requirements and obtain a passing grade.

Chamberlain University does not have a formal attendance policy for the Master of Physician Assistant Studies program. However, attendance is tracked for the first three days of the course. Faculty members may choose to incorporate a participation element in grading criteria. Grading criteria include requirements for class and/or clinical participation in academically related events and the extent to which work missed due to non-participation may be made up.

An academic event for the courses is defined by attendance in the on-site component or by submitting a class assignment, participating in threaded discussions or completing quizzes and exams in the online component.

Courses may require classroom, clinical site and/or online participation. A student who anticipates missing any academic event should contact the professor in didactic courses or the clinical coordinator and preceptor in clinical courses as soon as possible.

Prior to the absence, the student needs to arrange with the preceptor to make up any absence hours that works with the preceptor's schedule. The clinical faculty needs to be made aware of this absence and the scheduled makeup hours. Any extended absence should be discussed with the clinical faculty for further guidance.

Location:

Clinical clerkship sites vary for each rotation. The clinical clerkship information regarding preceptors, clinical sites and contact information will be provided by the MPAS Clinical Coordinator.

Day/Time:

Generally, rotations are five days/week for four weeks. However, schedules vary at each clinical site. Office-based rotations are usually 8:00 PM - 5:00 PM while inpatient and other hospital-based rotations may require longer hours (10 to 12 plus hours). Emergency Medicine rotations may require three 12-hour shifts, four 10-hour shift or five eight-hour shifts per week or a combination of the above. The student will keep the same schedule as the preceptor(s); this may include different shifts, weekends and on-call time. In a group practice, when the primary preceptor is out of the office, the student should arrange to work with another Physician, PA, NP or other healthcare providers in the practice. As much as possible, each student should obtain at least 36 hours per week but it is permissible to obtain more clinical hours as your schedule permits as long as there are not more than 55 hours in each calendar week. Students who average less than 30 hours/week may expect remediation, which can include additional make up hours.

5. PRECEPTOR PROCUREMENT

Students are not required to provide or solicit clinical sites or preceptors. It is the responsibility of the MPAS program to coordinate all clinical sites and preceptors for program-required and elective rotations. Coordinating clinical practice experiences involves identifying, contacting and evaluating sites and preceptors for suitability as a required or elective rotation experience. Students may make suggestions to principal faculty for sites and preceptors but are not required to do so. Student suggested sites and preceptors will be reviewed, evaluated and approved for educational suitability by the program. The MPAS program clinical faculty makes the final determination regarding establishing an educational affiliation with an individual preceptor or clinical site.

6. PRECEPTOR QUALIFICATIONS

Qualified MPAS preceptors include; Medical Doctor [MD], Doctor of Osteopathy [DO], certified Physician Assistant (PA-C) or certified Nurse Practitioner (NP). All preceptors must have an **active professional license and be board certified** in their area of instruction. Other licensed healthcare providers may be qualified as preceptors in their area of instruction depending on specific qualifications and/or experience. Preceptors cannot be a family member, relative, friend or a medical provider for the student.

All preceptors must have applicable expertise and the ability to help you achieve your learning goals. The use of multiple preceptors across the clinical clerkship courses is expected so that more than one person is working with you in learning and applying clinical practice skills.

7. STUDENTS AS FACULTY OR STAFF

Students enrolled in the MPAS program cannot substitute for practicing physician assistants or provide unsupervised services while at any clinical site. During supervised clinical experiences, students may not substitute for clinical or administrative staff and must ensure all services provided to patients are directly supervised. Students may not accept compensation for any services provided during supervised clinical experiences.

8. SITE AGREEMENTS

A Clinical Affiliation Agreement is required for all clinical sites. The MPAS team has secured the necessary affiliation agreements. Further questions can be addressed with the Clinical Coordinator.

9. ROLES & RESPONSIBILITIES

A successful clinical experience requires collaboration among course faculty, students, preceptors and the University. Students, faculty and preceptors must assure that supervised clinical practice experience (SCPE) hours are not misappropriated or falsely represented during the clinical experience. SCPE hours are intended to facilitate learning and must be focused on helping the student achieve learning goals.

1. Responsibilities of Faculty

- Is available via email or telephone to provide support to the student and the preceptor during each clinical course
- Provide appropriate course outcomes and learning objectives for the clerkship to both the MPAS student and to the preceptor
- Provide feedback mechanisms that identify and document student strengths and weaknesses
- Provide guidance and opportunity for improvement in identified areas of deficiency
- Perform site visits to the preceptor/student to evaluate the practice setting and to promote interaction among program, preceptor and student

2. Responsibilities of Chamberlain University

- Review and approve clinical site and preceptor for appropriateness for meeting student learning goals and course outcomes
- Instruct students to abide by clinical site policies, procedures and requirements
- Investigate and respond to complaints from the clinical site, preceptor or student
- Refrain from unlawful discrimination on the basis of gender, age, race, color, national origin, religion, sexual orientation, political affiliation or belief or disability
- Supply appropriate liability coverage for malpractice

3. Responsibilities of the Preceptor

- Collaborate with Chamberlain faculty to promote student success in the clinical clerkships
- Orient the student to the clinical site environment, policies and procedures
- Identify suitable experiential opportunities that align with the course outcomes
- Serve as mentor for students in professional development
- Ensure students do not replace paid staff
- Provide supervision of the student's clinical practice and provide constructive feedback about his or her performance in the clerkship

- Protect from disclosure all personal student-identifying information or records of student's participation except as set forth by an agreement or required by law
- Refrain from unlawful discrimination on the basis of gender, age, race, color, national origin, religion, sexual orientation, political affiliation or belief or disability

4. Responsibilities of the Student

- Be familiar with all policies and procedures related to clinical clerkship experiences
- Meet deadline dates for all assignments and learning activities
- Demonstrate competence in clinical assignments
- Abide by clinical site rules and regulations. If the case of a conflict between policies of the program and the clerkship site, students are to follow the policies of the site.
- Conduct oneself in a professional manner during each clinical clerkship
- Accept instruction from facility personnel as a learning opportunity
- Maintain communication with the course faculty
- Maintain patient and procedure logs as instructed by faculty
- Comply with all clinical site and healthcare compliance requirements throughout all clinical experiences, which may include but are not limited to: Proof of liability insurance, HIPAA training, proof of CPR certification or other requirements, background screening, physical examination, drug screening, proof of health insurance and current immunizations
- Perform an evaluation of the clinical experience
- Provide for and fund all travel arrangements and any expenses associated with the clerkship
- Inform the clinical coordinator if attendance at a particular clinical site presents a conflict of interest
- Refrain from performing any procedure or giving any advice that would knowingly harm the patient physically or mentally or detract from their human dignity
- Refrain from requesting or accepting medical treatment from the preceptor
- Assume responsibility for learning and completing requirement of the clerkship
- Demonstrate appropriate motivation in the clinical setting
- Accurately represent their status and capabilities as a PA student to patients, preceptors and other members of the healthcare team

10. DRESS CODE POLICY

Student professional dress and conduct should, at all times, reflect the dignity and standards of the medical profession. It is important that MPAS students dress in a manner that is respectful to their professors, classmates, patients and other interprofessional and administrative colleagues. Students are expected to dress modestly and in good taste while on campus and during educational activities at other affiliated clinical rotations or sites. Professional appearance includes good grooming and hygiene. In both clinical and non-clinical settings all students should use discretion with fragrances, as patients, classmates and instructors may have allergies or sensitivities.

- No tank tops
- No shorts above mid-thigh
- No exposure of midriff
- No low-cut shirts or blouses or other revealing garments
- No offensive language or pictures on clothing
- Clothing that is clean and without rips, tears or frayed hems
- No sandals, flip flops, open toed shoes

Student Identification in Clinical Settings

Chamberlain MPAS students are required to wear a student issued white coat during their Clinical Clerkships. Students must wear their Chamberlain ID tag, either clipped to their lab coat or worn around their neck with the Chamberlain student lanyard, which will clearly identify them as an MPAS student. Chamberlain MPAS student scrubs in ciel blue are mandatory.

11. PROFESSIONALISM

The MPAS student should show respect to faculty, preceptors, patients and peers by:

- Demonstrating professional behavior at all times in the classroom, campus or clinical settings
- Arriving promptly, making every attempt not to disturb others in the classroom
- Turning off or not using cell phones/pagers during classroom or clinical rotation times
- Observing all policies and procedures of the Student Handbook
- Seeking and following supervisory input in the care of all patients

12. PROGRAM COMPETENCIES

Chamberlain MPAS program is committed to ensuring that our graduates have the competencies required for PA clinical practice. The following are the program learning outcomes/competencies our graduates will have achieved:

Medical Knowledge

PC1: Apply medical knowledge in the assessment, diagnosis and management of patients across the lifespan to prevent, diagnose and treat acute, chronic, urgent and emergent disease states.

Interpersonal & Communications Skills

PC2: Communicates effectively with patient populations and other healthcare providers in managing the healthcare of individuals, families, aggregates and communities.

Clinical & Technical Skills

PC3: Incorporate clinical and technical skills while performing medical and surgical procedures essential to PA practice.

Clinical Reasoning & Problem-Solving

PC4: Synthesize history, physical examination and clinical diagnostic findings to develop management plans appropriate for the patient's medical and/or surgical conditions.

Professional Behaviors

PC5: Demonstrate a high level of responsibility, compassion, commitment to ethical practice principles, sensitivity to diverse patient populations and adherence to legal and regulatory requirements.

Practice-Based Learning & Improvement

PC6: Integrate evidence from scientific studies and multiple sources to improve practice using systematic methods in collaboration with other members of the healthcare team.

PC7: Create a holistic and inclusive practice environment with awareness to personal and system biases, culture, individual preference, gaps in medical knowledge and physical limitations of self and others.

Systems-Based Practice

PC8: Engage in inter-professional teams in various healthcare delivery settings and coordinate care to improve and optimize healthcare delivery and patient-centered care.

PC9: Consider environmental influences, socioeconomic factors, healthcare disparities and other population level determinants to promote health and wellness of communities and patients.

PC10: Advocate for health policies that promote quality, safe and cost-effective healthcare at the micro, meso and macro levels.

13. CLINICAL CLERKSHIPS

MPAS CLINICAL CLERKSHIP ROTATION GRID

| CLINICAL SITE & DESCRIPTION | COURSE CODE |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Family Practice (FM) Clinical Clerkship is a four-week required supervised clinical practice experience. The primary care experience will be in an outpatient setting and will focus on care of families for acute and chronic conditions, preventive care and counseling for health maintenance. | PA-610, required |
| Internal Medicine (IM) Clinical Clerkship is a four-week required supervised clinical practice experience. This experience will focus on adult and geriatric care in an ambulatory and/or inpatient setting. Students will participate as part of a healthcare team and apply clinical knowledge to the care of adult and elderly patients, with a variety of medical conditions, including complex, multi-system and chronic conditions. | PA-612, required |
| Emergency Medicine (EM) Clinical Clerkship is a four-week required supervised clinical practice experience. This experience will provide students with the opportunity to experience management of patients in an emergency care setting. Students will apply clinical knowledge and interventions to the care of patients with a wide range of medical and surgical emergencies as part of a healthcare team. | PA-614, required |
| Surgery Clinical Clerkship is a four-week required supervised clinical practice experience in the evaluation, diagnosis, management and treatment of common problems encountered in general surgery practice. Students will gain experience in pre- and post-operative assessment and care of the surgical patient, active participation in surgical cases in the operating room, outpatient follow-up care and performance of minor surgical procedures. | PA-616, required |
| Pediatrics Clinical Clerkship is a four-week required supervised clinical practice experience. This experience will focus on pediatric care in an ambulatory and/or inpatient setting. Students will apply their clinical knowledge in the evaluation and management of pediatric patients, from newborns to adolescents for a range of emergent, acute and chronic issues, from well child visits to children with illnesses and chronic conditions. | PA-618, required |
| Obstetrics & Gynecology Clinical Clerkship is a four-week required supervised clinical practice experience. This clerkship will provide PA students exposure to gynecologic and obstetric care of female patients. Students will participate in management and treatment of common gynecologic issues. They also will participate in obstetric care including prenatal, labor, delivery and postpartum care. | PA-620, required |
| Behavioral Health Clinical Clerkship is a four-week required supervised clinical practice experience. This experience will provide PA students experience in the management of patients seeking care for behavioral and mental health conditions in either an outpatient and/or inpatient setting. | PA-622, required |
| Underserved Population Clinical Clerkship is a four-week required supervised clinical practice experience. This clerkship provides PA students an opportunity to participate in delivery of healthcare services to an underserved population. Sites for this rotation will have been designated as a Medically Underserved Area and/or Health Professional Shortage Area site by the U.S. Health Resources and Services Administration or a similar designation by the Indian Health Service and/or other governmental organizations. There may be opportunities for students to combine this clinical experience with other clinical clerkships such as family practice or emergency medicine rotations if the populations for such rotations meet the criteria described above. | PA-624, required |
| Elective I Clinical Clerkship is a four-week required supervised clinical practice experience. This clerkship gives the student the ability to choose an area of clinical interest*. The student may choose from any area of medical practice, from primary care to sub-specialties. All experiences must be in clinical settings, be approved by the Clinical Coordinator and have adequate hours of patient contact.* | PA-626, required |
| Elective II Clinical Clerkship is a four-week required supervised clinical practice experience. This clerkship gives the student the ability to choose an area of clinical interest*. The student may choose from any area of medical practice, from primary care to sub-specialties. All experiences must be in clinical settings, be approved by the Clinical Coordinator and have adequate hours of patient contact.* | PA-628, required |

^{*} In cases in which a student has failed a clinical clerkship and/or has not obtained adequate clinical hours in their other supervised clinical practice experiences, the program reserves the right to require a specific clinical area for the student's elective.

14. CLINICAL INSTRUCTIONAL METHODS

- 1. Preceptor supervision and instruction.
- 2. Performance of delegated and supervised skills as detailed in the learning objectives for each rotation.
- 3. Written assignments
- 4. Clinical conferences as provided at the clinical site and during Clinical Call Back day(s) on campus.
- 5. Reading assignments see assigned topics in each clinical rotation. These topics are from the PAEA content blueprint and are the basis for the end-of-rotation exams. The preceptor(s) may also give additional reading assignments.

15. METHODS OF ASSESSMENT

1. CLINICAL EVALUATIONS*

Preceptor Evaluations:

- Mid-rotation Preceptor Evaluation of Student
 - This evaluation is intended to provide feedback to the student about his/her performance and gives the student a chance to correct any perceived weaknesses/deficiencies.
 - Due by the end of the second week.

• Final Preceptor Evaluation of Student

- Completed by preceptor and due on last day of clerkship.
- A student must receive a passing rating on all evaluation criteria to pass the rotation.
 Any unsatisfactory rating may result in failure of the course. The clinical faculty will address any unsatisfactory evaluation with the preceptor and the student and then make the final decision on the assignment of a grade. This evaluation contributes to 30 percent of the final grade.

Student Evaluations:

- Student Evaluation of the Preceptor and Site
 - Students provide feedback about their clinical clerkship experiences, including evaluation of the site and preceptor, in the End of Course survey.
- * All evaluations are the responsibility of the student. A student will receive an incomplete grade ("1") until ALL assignments and evaluations are complete.

2. WRITTEN ASSIGNMENTS

- Written assignments are due per instructions on Canvas.
- The assignment required for each clinical rotation depends on the specialty. Refer to the textbook, *Guide to Clinical Documentation* by Sullivan for examples of SOAP notes, history and physical exam (H&P), progress notes and other documentation types.
- Assignments will vary according to the discipline of clinical clerkship.

3. PATIENT & PROCEDURE LOGS

The MPAS program utilizes the clinical logging tool to track student progression throughout the clinical year. MPAS students are required to log their days/times/hours as well as keep a patient and procedure log. Detailed instruction on accessing and utilizing the clinical logging software will be provided by the Clinical Coordinator prior to the start of clinical clerkships. Additionally, each clinical clerkship syllabus will outline expected clinical competencies.

Patient/hour/procedure logs are worth six percent of the total grade

- Patient Logs
 - List of all patients the student has seen.
 - Patient logs must comply with HIPPA guidelines
- Clinical Hour Logs
 - Log of days/times/hours spent in clinical clerkship.

Procedure and Clinical Competency logs are worth five percent of the total grade

- A list of procedures completed during each rotation and must be completed at the same time as patient logs.
 - Students will upload a PDF summary of their patient logs weekly into Canvas.
 - See Appendix A chart of procedures to be logged by MPAS students. Students will log procedures that they have performed, assisted or observed.

4. END OF ROTATION EXAMINATION (EORe)

- PAEA is the Physician Assistant Education
 Association, a national organization that represents
 U.S, PA educational programs. PAEA has developed
 End of Rotation examinations (EORe) that are
 standardized evaluations intended to serve as one
 measure of medical knowledge PA students have
 gained during clinical clerkships.
- Students will return to campus on the last day of every clinical clerkship to take the EORe tailored to the specific clerkship type.
- Each clinical clerkship syllabus has a topic outline for the EORe, and PAEA recommends that students review the Topic List, Blueprint and Core Tasks and Objectives when preparing for the exam. These may be found at paeaonline.org/assessment/end-of-rotation/content
- The EORe will account for 35 percent of the total course grade for each clinical clerkship.



• The EORe is reported as a scaled score between 300 and 500. A passing grade is a score greater than or equal to 1.0 Standard Deviations below the published national mean on that particular exam. The scaled score will be converted to a percentage score ranging from 80 – 100 for all scores greater than 1.0 SD below the mean for recording in Canvas. A score between 1.0-1.5 SD will require a remediation assignment that, when completed, may result in a maximum passing score of 76 percent. An EORe score of less than 1.5 SD below the national mean is failure of the exam and the student will have an opportunity to take a reassessment EORe, at their expense, within one week after receiving their score.

EVALUATION GRID

| GRADED ITEM | POINTS | WEIGHTING |
|-----------------------------------------|--------|--------------------|
| Patient Logging | 60 | OSH Practice Quest |
| ROSH Practice Questions | 40 | 4% |
| Written Assignments | 200 | 20% |
| Mid Rotation Preceptor Evaluation | 50 | 5% |
| End of Rotation Preceptor Evaluation | 300 | 30% |
| End of Rotation (EORe) Examination | 350 | 35% |
| Total | 1,000 | 100% |

16. CLINICAL CLERKSHIP ASSESSMENT, REASSESSMENT AND REMEDIATION POLICY

The summative assessments in clinical clerkships include End of Rotation (EOR) examinations, preceptor evaluations, and procedure competency demonstration. (For Elective and Underserved Population Clinical Clerkships, the EoR examination will be replaced with an EoR assessment. See Section below on Elective and Underserved Population Clinical Clerkships*)

Reassessment (and potential remediation) in the Clinical Phase of the program will be necessary for a student if there is a failure to achieve a passing score for the 1) EOR examination or EoR assessment, or 2) final preceptor evaluation, or 3) failure to demonstrate competency on any required clinical procedures during the clinical clerkships

END OF ROTATION EXAMINATIONS (EORE)

The EOR examination is reported as a scaled score between 300 and 500. A passing grade is a score greater than or equal to 1.0 Standard Deviations (SD) below the published national mean for that EOR exam. The scaled score will be converted to a percentage score ranging from 76 - 100 for all scores > 1.0 SD below the mean for recording in Canvas. The EOR examination is worth 35% of the final course grade.

Students who score between 1.5 and 1.0 SD blow the mean will be required to meet with the clinical coordinator and be given a reassessment assignment to complete which, when completed, will bring their grade up to the passing grade of 76%. Students with this score will be asked to complete topic lists and/or answer questions pertaining to the areas of demonstrated weakness.

If the EOR examination score is < 1.5 SD below the national mean, the student fails the exam, but will have an opportunity to take a reassessment EOR exam, at their expense, within one week after receiving their score.

A second failure of the repeated EOR examination will result in the need for remediation and for the student to meet with their faculty advisor and the clinical faculty. The student will be placed on a Learning Contract and will need to repeat the clerkship at their expense (please see Extended Learning Contract below).

The student will be required to repeat the clerkship EOR examination after completion of the repeated clinical clerkship at their expense. Failure of the EOR examination for the third time will result in dismissal from the program.

For Elective and Underserved Population Clinical clerkships ONLY

For Elective and Underserved Population Clinical Clerkships the End of Rotation examination is replaced with an End of Rotation assessment. These EoR assessments are described more fully in each of the respective syllabi and are graded according to the rubrics provided. The points for the EoR assessment are the same as the EoR examination. A student must achieve a minimum score of 76 percent on the Underserved and Elective EoR assessments. If the student does not achieve a minimum score of 76 percent on any summative assessment, the student will be required to do an EoR reassessment. Students must achieve a score of 76 percent on the EoR reassessment examination to pass the course and progress in the program. The highest score awarded for the EoR reassessment exam in will be 76 percent. Failure to pass the EoR reassessment with a minimum score of 76 percent will result in the student entering into an extended learning contract.

PRECEPTOR EVALUATIONS

Evaluations done by preceptors are intended to assess the student progress toward program competencies in the clinical setting. Preceptors rate students on a scale of 4 (above average) to 1 (below average). The preceptor evaluations will be scored according to the Preceptor Evaluation Grading Rubric.

Remediation will be required of any student who receives:

- A rating of 1 (below average) on any of the competency/learning outcomes areas on the final preceptor evaluation form; or
- An overall score of less than 2 on the final preceptor evaluation form.

Students in either of these scenarios will be required to meet with their faculty advisor and the clinical faculty. The student will be placed on a Learning Contract for remediation and will need to repeat the clinical clerkship at their expense. The student must maintain scores of 2 or better in all competency/learning outcomes area on the repeated rotation final preceptor evaluation. Failure to achieve a score of 2 or better will result in dismissal from the program.

CLINICAL PROCEDURES

During clinical clerkships, MPAS students are required to demonstrate competency on designated clinical procedures (see MPAS Clinical Handbook, Appendix A). If a student is unable to demonstrate competency on any procedure within their clinical clerkships, they will be required to work with the clinical faculty and their faculty advisor to schedule a procedure competency checkoff.

This checkoff will require the student to demonstrate procedure competency on a task trainer or through other appropriate methodology. The clinical faculty and/or another MPAS faculty will assess the student performance of the procedure and will assign either a Pass or Fail. A Pass will satisfy the requirement for the procedural competency. If the student fails, they will be placed on a Learning Contract and will need to repeat the demonstration of the procedure after remedial instruction.

EXTENDED LEARNING CONTRACT

Students will be placed on a learning contract for a second failure of the repeated EOR examination, failure to meet minimum requirements on preceptor evaluations (as described above), or failure to demonstrate competency of required procedures in any clerkship. Students requiring remediation will meet with their faculty advisor and the clinical faculty to review requirements within the learning contract.

The extended learning contract will outline the requirements and be tailored to individual student needs. It may include, but not be limited to, creating blueprint outlines on assigned topics and academic counseling with faculty. A student on a learning contract will need to repeat the clerkship at their expense as part of the learning contract conditions. The graduation date of any student placed on a learning contract in the clinical year may be delayed because of the need to repeat the clerkship.

The student will receive a "Remediation" grade until the extended learning contract is completed. An extended learning contract will be signed by both the instructor and the student. Remediation grades must be resolved by the deadline specified in the Extended Learning Contract.

LIMITATION CRITERIA WITHIN THE CLINICAL YEAR

Students who are placed on a learning contract for failure of 2 EOR examinations will take a 3rd EORe as part of their learning contract. Failure of the EOR examination for the third time will result in dismissal from the program.

Students who are placed on a learning contract for failure of a preceptor evaluation must maintain scores of 2 or better in all competency/learning outcomes area on the repeated rotation final preceptor evaluation. Failure to achieve a score of 2 or better will result in dismissal from the program.

Students are permitted a maximum of two (2) learning contracts during the clinical phase of the program. Failure of a third clinical clerkship and need for a third learning contract in the clinical year will result in dismissal from the program.

17. CAPSTONE PORTFOLIO

Across the MPAS program, you will collect assignments and compile them as artifacts within your Capstone portfolio to demonstrate your professional growth and expertise. Your final Capstone portfolio, which will be submitted at the end of the degree program, will be used to assess your achievement of the program competencies. The Chamberlain MPAS program will provide detailed information regarding how and when to submit your Capstone portfolio in your final courses of the program. It is each student's responsibility to save and maintain all artifacts required in the Capstone portfolio. It is recommended that you begin creating pages in your Capstone portfolio and linking assignments from each class as you progress through your learning journey.

18. CLINICAL CALL BACK DAYS

At the end of each rotation all students are required to return to their campus for end-of-rotation exams, clinical class (feedback on clinical rotations/preceptors, student reflections on the clinical learning experiences, lecture/discussion of special topics, etc.) And the PA Professional Seminar class.

19. PREVENTION OF & RESPONSE TO STUDENT EXPOSURE TO INFECTIOUS & ENVIRONMENTAL HAZARDS

MPAS students' learning experiences occur in a variety of settings and, like the healthcare professionals in these settings, MPAS students are at risk for health and safety issues including exposure to blood-borne or air-borne pathogens, chemical and toxic drug exposures and other personal injury. Students will gain knowledge and experience in preventing, minimizing and responding to exposure through: (1) annual OSHA training; (2) clinical laboratory activities (e.g., suturing, IV starts, surgical skills); and (3) didactic coursework. Clinical agencies may also require students to attend/complete a site-specific orientation regarding infection control and environmental safety in preparation for supervised clinical practice experience.

PREVENTION

Compliance with all health and safety practices is a not just good technique, but also is a mark of professionalism. Failure to observe and practice preventive measures for infectious disease and environmental hazards may result in corrective action for unprofessional behavior as outlined in the Code of Conduct in the Student Handbook.

- Maintenance of immunity and health is an essential part of infection prevention and control. Since some infectious diseases are vaccine preventable, MPAS students must:
 - Meet all healthcare compliance requirements for immunizations* and immune titers by Friday of Week 7 in their first session of enrollment (refer to the Clinical Compliance Workbook).
 - Maintain healthcare compliance throughout the program.
 - · Receive annual influenza vaccination; and
 - Comply with Chamberlain's Student COVID-19 Vaccination Policy.
 - * If a student is unable to receive any immunization, an exemption request must be signed and submitted for approval to the proper office noted in the Clinical Compliance Handbook or COVID-19 Vaccination Policy. The exemption Chamberlain can offer is against Chamberlain's own policies and jurisdiction. Students who do not receive all required immunizations may be denied clinical access by the clinical facility and, therefore, may experience an interruption in or be unable to complete their programs of study. The third-party facility may have their own requirements and exemption policies that students who complete work there would be subject to follow.

- 2. Practicing Universal Precautions in all patient care or simulated patient care settings is essential in preventing contact with blood or other potentially infectious materials.
- Hand Hygiene. The CDC guidelines recommend use of 70 percent alcohol-based hand rub for hand hygiene; when hands are visibly soiled (e.g., dirt, blood, body fluids) or after caring for patients with known or suspected infectious diarrhea, soap and water should be used. Hand Hygiene should be performed in the following circumstances.
- Before touching a patient, even if gloves will be worn.
- Before exiting the patient's care area after touching the patient or the patient's immediate environment.
- After contact with blood, body fluids or excretions or wound dressings.
- Prior to performing an aseptic task (e.g., placing an IV, inserting an indwelling catheter).
- If hands will be moving from a contaminated-body site to a clean-body site during patient care.
- After glove removal.

• Personal Protective Equipment (PPE)

- Exam gloves will be worn when there is risk of contact with or when handling blood or body fluids or when there is a potential for contact with mucous membranes, non-intact skin or body orifice areas or contaminated equipment.
- Facial masks, protective eyewear and/or gowns (as well as gloves) will be worn when performing/assisting procedures with a risk of body fluid or other hazardous material splashes or sprays.

· Safe use of injection devices and sharps

- Never recap needles unless required by the specific procedure being performed.
- Use self-sheathing needles and/or needless systems when available.
- Keep an exposed sharp in view.
- Avoid hand-passing sharps and use verbal alerts when moving sharps.
- Be alert for sharps in linen, beds, on the floor or in waste containers.
- Place needles and other disposable sharps in designated puncture resistant containers as soon as possible after their use.
- Keep fingers away from the opening of sharps containers.
- Food, drink and cosmetics (including lip balms) are not to be consumed/used in environments where sharps contact or contact with blood, other body fluids or other potentially infectious material could potentially occur.



Safe handling of potentially contaminated surfaces or equipment

- Environmental cleaning: Areas in which patient care activities are performed will be routinely cleaned and disinfected at the conclusion of the activity.
- Medical equipment safety: Reusable medical equipment must be cleaned and disinfected (or sterilized) according to the manufacturer's instructions. If the manufacturer does not provide guidelines for this process, the device may not be suitable for multi-patient use.
 - Cultures, tissues or specimens of body fluids:
 Potentially infected human matter is placed in a container that prevents leakage during collection, handling, processing, storage, transport or shipping.

• Respiratory hygiene/Cough etiquette

- Cover mouth/nose when coughing or sneezing.
- Use the nearest waste receptacle to dispose of tissues.
- Perform hand hygiene after hands have been in contact with respiratory secretions.
- Consider using a mask to prevent aerosol spread.
 Consult with your preceptor regarding a specific clinical policy on when masks must be used.
- Sit as far away from others as possible when coughing or sneezing.
- Sensitivity to latex products can develop after repeated exposure. Limiting exposure to latex can help prevent allergic reactions.
 - Whenever possible, use non-latex gloves (vinyl, nitrile or polymer) when there is risk of contact with or when handling infectious materials.
 - During clinical skills activities on campus, students with known latex allergy should ask faculty to provide latex-free gloves.
 - During supervised clinical practice experiences, students with known latex allergy should advise their preceptor of the allergy.
 - Avoid oil-based creams or lotions when using latex gloves. They may cause the gloves to break down.
 - Wash hands with a mild soap and dry hands completely after using gloves.

POST-EXPOSURE RESPONSE

Students must notify the course director (if in the classroom/lab setting) or the clinical preceptor and MPAS program Clinical Coordinator (if in the clinical setting) as soon as possible following any exposure to blood and/or other body fluid, a needle stick or sharps injury, accident or other injury. A Chamberlain Clinical Incident Report form should be completed and submitted to the Program Director (for classroom/lab incidents) or program Clinical Coordinator (if a clinical incident) as soon as possible; however, students should not delay prompt evaluation and treatment to complete the Clinical Incident Report form and paperwork related to the documentation of the clinical incident.

In the event of serious injuries or life-threatening conditions, call 911 or go to the nearest emergency room. In the absence of an emergency, medical evaluation and treatment of injuries should be conducted at:

- The student's primary care provider, the nearest healthcare facility or the nearest urgent care facility if the incident occurred in a classroom or campus laboratory setting.
- The location directed by the preceptor when incidents occur during a supervised clinical practice experience.

In the case of any <u>needle stick injury or other accidental blood/body fluid exposure</u>, students should immediately take appropriate measures as follows.

- Remove and properly dispose of all contaminated personal protective equipment.
- Remove any soiled clothing and wash the wound or contaminated skin thoroughly with soap (preferably antibacterial) and running water.
- If blood/body fluid was splashed in the eye(s) or mucous membrane, flush the affected area with running water for 15 minutes. Remove contacts first, if worn.
- Seek timely medical evaluation; HIV prophylaxis for high-risk exposure should be started as soon as possible but not later than 72 hours after the exposure.
 - If the exposure occurs at an off-campus clinical site, the student should follow the Infection Control policy of that facility. If the student is unable to locate the facility's Infection Control policy, the student should immediately report the exposure incident to a preceptor.
 - If the exposure occurs on campus or the clinical site is unable/unwilling to provide medical evaluation, the student should go to a local hospital Emergency Department for 24-hour accessibility or an Urgent Care with extended hours, depending on the time of exposure and the proximity to the campus or clinical site.
- Students should follow the guidance of their evaluating clinician based upon established guidelines and have the appropriate follow-ups.

PROGRAM PARTICIPATION

Continued participation in the activities of the MPAS program will not be affected by any injury or illness that occurs while enrolled provided the student continues to meet all Technical Standards, with or without accommodations, fulfills all defined requirements for program progression and is not directly infectious by way of routine contact.

FINANCIAL RESPONSIBILITY

All medical or healthcare services (emergency or otherwise) that the student receives or requires are the student's responsibility and are at the student's expense. Clinical sites and Chamberlain University are not liable for the costs incurred during compliance with this policy. Students must maintain health insurance throughout their educational experience in the Chamberlain Physician Assistant Program.

20. CLINICAL INCIDENTS

A clinical incident is one that directly involves students, patients, faculty, a colleague or a staff member that results in injury or a threat to safety during clinical learning.

Examples of clinical incidents include but are not limited to the following:

- Student injured on site (e.g., slip and fall)
- Needle stick
- Exposure to blood borne pathogens
- Verbal abuse by preceptor or staff
- Abuse by patient
- Student fainting on clinical site
- Medication error
- Patient fall with/without injury

If a clinical incident occurs, the student should:

- Notify their clinical preceptor immediately
- Notify the MPAS clinical coordinator within one hour of the incident
- Follow the established policies and clinical site protocols as appropriate.
- Have personal health insurance information available healthcare is the financial responsibility of the student

Fill out a Chamberlain Clinical Learning Incident Form and send to the MPAS clinical coordinator by the end of the clinical learning day.

21. STUDENT ATTESTATION

Students are required to complete the Student Attestation for each course you are enrolled. The Attestation will appear in the course at the top of the Modules page.

Take the following steps to complete the Student Attestation:

- Review the MPAS Clinical manual
- Review the five statements in the item of the Attestation
- Next, mark "I accept"
- Then submit the Attestation.

22. HOW TO SUCCEED IN CLINICAL ROTATIONS

Come Prepared:

- Treat every rotation as a four-week interview for a prospective job. Arrive at least 10 minutes before you are scheduled to begin and stay until the end of your shift.
- Research parking/transportation prior to the first day
 of your rotation and make sure to bring your clinical
 rotation syllabus and learning objectives, all necessary
 medical equipment, a small notebook and few snacks.
- Make sure to review the evaluation criteria and learning objectives prior to each rotation.
- Professional dress is always required.
- Always wear comfortable shoes that allow you to be mobile for multiple hours. The preceptor will advise you if scrubs are needed.
- At all times, wear the Chamberlain University MPAS student name tag and white jacket with the school patch.

Honor Your Role with Patients:

- Always introduce yourself with your name and as a PA student. Never misrepresent yourself as a licensed PA or other healthcare provider.
- Ask your preceptor about their preferences on how they work with students. Ask when they prefer to discuss questions or cases, their preferences for taking the history, performing a physical exam, developing an assessment and plan and presenting your findings (less than five minutes is best for an oral presentation).
- Know your role, PA laws in the state of the rotation and your preceptor's practice and protocols.
- Ask how the preceptor would like you to spend any downtime. Take initiative and ask to observe other healthcare providers, conduct chart reviews, remain engaged and productive and limit use of personal devices.

Accepting Feedback:

- Ask for feedback and follow-up on suggestions.
- Obtain the required mid-rotation evaluation at the end of the second week and the final evaluation by the end of the rotation.

ORIENTATION TO THE CLINICAL CLERKSHIP

Information about clinical clerkships will be shared by the Clinical Coordinator.

PRECEPTOR RECEIPT OF RESOURCE MANUAL

The MPAS Preceptor Resource Manual will be sent to your preceptor by the Clinical Coordinator to ensure understanding of course requirements and the preceptor role.

APPENDIX A - CLINICAL CLERKSHIP PROCEDURE REQUIREMENTS

CLINICAL CLERKSHIP PROCEDURE REQUIREMENTS

During clinical clerkships, students must demonstrate competency in required procedures. Competency for required procedures will be assessed on final preceptor evaluations. Some required procedures are duplicated (italicized) in more then one clerkship. Demonstrating competency of these procedures in one clerkship will satisfy the requirement for the procedure in another clerkship. While competency assessment in only one clerkship is sufficient, students are encouraged to take advantage of opportunities to repeat required procedures as opportunity allows and improve clinical practice skills. Students are also encouraged to observe, assist and/or perform recommended procedures (listed below) as opportunity presents itself.

| REQUIRED PROCEDURES | |
|----------------------------------------------------|--|
| PA-610 Family Medicine Clinical Clerkship | |
| Cerumen irrigation/removal | |
| Digital rectal examination | |
| Fecal occult blood test | |
| Subcutaneous and intramuscular injection | |
| PA-612 Internal Medicine Clinical Clerkship | |
| Digital rectal exam | |
| Fecal occult blood test | |
| PA-614 Emergency Medicine Clinical Clerkship | |
| Intravenous access | |
| Local anesthetic for laceration and wound repair | |
| Application of suturing techniques | |
| Application of staples | |
| Suture and staple removal | |
| Incision and drainage of abscess | |
| BLS/ACLS | |
| Fluorescein eye examination | |
| Joint aspiration and/or injection | |
| Post mold application | |
| PA-616 Surgical Clinical Clerkship | |
| Endotracheal intubation | |
| Foley catheter placement | |
| Intravenous access | |
| Skin closure with sutures, staples, adhesives | |
| Removal of sutures or staples | |
| Wound dressing | |
| Surgical ties and scrubbing | |
| PA-618 Pediatrics Clinical Clerkship | |
| Child immunization schedule assessment | |
| Pediatric fever evaluation | |
| Complete well child visit | |
| Scoliosis assessment | |
| Asthma assessment | |
| BMI assessment | |
| Cerumen irrigation/removal | |
| PA-620 Obstetrics & Gynecology Clinical Clerkship | |
| Vaginal speculum examination | |
| Pap smear | |
| Bimanual examination/pelvic examination | |
| Clinical breast examination | |
| Wet mount for vaginal discharge | |
| Doppler placement for assessing fetal heart sounds | |
| Fundal height measurement | |
| PA-622 Behavioral Health Clinical Clerkship | |
| Mini mental status examination | |
| PA-624 Underserved populations Clinical Clerkship | |
| PA-626 Elective 1 | |

| RECOMMENDED PROCEDURES | SUGGESTED ROTATION |
|------------------------------------------------|-------------------------------|
| Arrhythmia management | EM |
| Central line placement | EM, IM, Surg, Elective |
| Chest tube placement | EM, Surg, Elective |
| Dermatological cryotherapy | FM, IM, Elective |
| Emergency wound management | EM, Surg |
| Foreign body removal | FM, IM, EM, Peds Surgery |
| HEENT foreign body removals | FM, IM, EM, Peds |
| Joint reductions, nursemaids elbow | FM, EM, Peds, Elective |
| Interpretation of different imaging modalities | All |
| Lumbar puncture | EM, IM, Peds, Elective |
| Management of puncture wounds and bites | EM |
| Neonatal assessment (0-4 weeks) | FM, Peds |
| Neonatal jaundice evaluation | FM, Peds |
| Nasogastric tube placement | EM, IM, Surg, Elective |
| Needle decompression | EM, Surg, Elective |
| NIHSS | EM |
| Orthostatic blood pressure | All |
| PPE (personal protective equipment) | ALL |
| Regional nerve block | EM, Surgery, Elective |
| Reduction of hernias | EM |
| Skin biopsies | FM, IM, Elective |
| Seizure management | EM |
| Slit lamp eye examination | EM |
| Throat swab collection | FM, IM, EM, Elective |
| Testicular examination | FM, IM, EM |
| Thrombosed external hemorrhoid | EM |
| Toxicology management | EM |
| Vaginal and penile cultures | FM, IM, EM, WH, Elective |
| Visual acuity | All |
| Ultrasound guided procedures | All |
| Urine dipstick | All |
| Wound care dressing | FM, IM, EM, Surgery, Elective |
| Wound cultures | FM, IM, EM, Surgery, Elective |

PA-628 Elective 2

No specific required procedures



THE MPAS CLINICAL TOOLKIT

LITERATURE



Viewbook

MPAS Curriculum Grid

Academic Calendar

