



University of Dubuque Master in Physician Assistant Studies Student Clinical Rotation Guide



2017–2018

Contents

General Policies and Procedures	3
Clinical Rotation Requirements	3
Immunizations.....	4
MPAS Student Exposure to Infectious and Environmental Hazards	4
Liability Insurance	5
Academic Policies	6
Grading and Evaluation.....	6
Moodle	7
E*Value.....	7
Clinical Rotation Attendance	8
Student Conduct and Professional Behavior	8
Nepotism and Fraternization	8
Student Contact Information.....	8
Family Educational Rights and Privacy Act.....	8
Appendix A—Request for Site Affiliation Form	9
Appendix B—Request for Site Affiliation Form	10
Appendix C—Absence Excusal Form	11
Appendix D—Student Exposure Incident Form.....	12
Appendix E—Student Acknowledgement of Receipt of MPAS Clinical Student Rotation Guide Form	14

General Policies and Procedures

Students entering clinical rotations are expected to thoroughly review this guide. This manual is in addition to, and not a substitution for, the University of Dubuque Master in Physician Assistant Studies (MPAS) Student Handbook that students received upon beginning the program. MPAS students are required to abide by the student handbook, and the policies and procedures contained in this student clinical rotation guide, at all times during the clinical rotation phase of the program. Questions related to these policies and procedures should be addressed to the MPAS Program Director or Clinical Liaison.

Clinical Rotation Requirements

The clinical phase of the MPAS program is an intense training period that takes place in a variety of clinical settings including, but not limited to, outpatient clinics; private practice clinics; community hospitals; and federal government facilities.

The clinical year has nine core rotations and two elective rotations as follows:

- | | |
|---------------------------|-----------------|
| • Pediatrics | 4-week rotation |
| • Emergency Medicine | 4-week rotation |
| • Geriatric Medicine | 4-week rotation |
| • Internal Medicine | 6-week rotation |
| • Obstetrics & Gynecology | 4-week rotation |
| • Psychiatry | 3-week rotation |
| • Surgery | 6-week rotation |
| • Family Medicine | 4-week rotation |
| • Rural Medicine | 3-week rotation |
| • Elective I | 2-week rotation |
| • Elective II | 2-week rotation |

Students must successfully complete all nine core rotations, and two electives. Students may elect to perform the two-week elective rotations in other specialty areas such as orthopedic surgery, cardiology, radiology, or they can elect to spend another two weeks in a core elective.

The MPAS program and ARC-PA regulations require formal affiliation agreements between the MPAS program and all clinical sites. Clinical site selection and approval rests with the MPAS program. The MPAS program ensures that clinical sites provide clinical instruction, education, and experiences requisite to physician assistant education.

Clinical rotations are scheduled according to site availability, site location, and student preference. Reasonable efforts are made to accommodate student preference, but the MPAS program cannot guarantee that any or all student preferences will be honored.

Circumstances may arise that require changes to a student's clinical rotation schedule. Should changes be necessary, students will be informed of changes as soon as possible. A student requesting a change in clinical rotation schedule must complete the MPAS Change of Clinical Rotation Request Form, (Appendix A1) herein, and submit requests to the Program Director and/or Clinical Liaison no later than 90 days prior to the rotation start date. Student requests for schedule changes will not be considered if made within 90 days of the start of the rotation, except in exceptional circumstances and at the discretion of the Program Director.

MPAS students are responsible for making their own arrangements for transportation to and from

clinical sites. Inability to reach a particular site is not considered an acceptable reason for a request to change any rotation.

Students wishing to rotate at a nonaffiliated site must complete the Request for Site Affiliation form, found in Appendix A herein, no later than 180 days prior to the rotation start date and must submit it to the Clinical Liaison. Affiliation depends on the MPAS program's approval of the site to be added and ability to secure an affiliation agreement. All affiliation agreements are subject to requirements set forth by ARC-PA and MPAS program.

Immunizations

The MPAS Program will follow Centers for Disease Control and Prevention (CDC) recommendations for immunizations. All MPAS students will be required to have the following immunizations/titers up to date prior to entering the program and clinical rotations:

- a. Measles, Mumps, Rubella
- b. Tetanus/Diphtheria/Pertussis
- c. Hepatitis B
- d. Chickenpox (Varicella)
- e. Influenza (appropriate to season)
- f. Purified protein derivative (PPD) screening for Tuberculosis (TB) or Chest X-ray if positive PPD history.

Immunization documentation will be kept in the MPAS program Admission Director's office. Students will receive information on services for local providers in the area. Students will also have to repeat their drug testing and background check through Certified Background (www.certifiedbackground.com) prior to beginning clinical rotations.

MPAS Student Exposure to Infectious and Environmental Hazards

The MPAS program follows the MPAS Student Handbook guidelines regarding exposure to infectious and environmental hazards while on campus and the institutional policies of its clinical affiliates regarding exposure to infectious and environmental hazards while at clinical sites. The MPAS Program student Handbook Blood-borne Pathogens Exposure Policy

<http://www.dbq.edu/Academics/OfficeofAcademicAffairs/GraduatePrograms/MasterinPhysicianAssistantStudies/StudentResourcesandUsefulLinks/> offers guidelines to protect students from the risk of occupational infection with HIV, hepatitis B, or other blood-borne pathogens, and to implement the United States Department of Labor Occupational Safety and Health Administration (OSHA) Standard 29 CFR Section 1910.1030 Blood-borne Pathogens.

The MPAS Program Blood-borne Pathogen Exposure policy, which is included in the MPAS Student Handbook, addresses methods of prevention, procedures for care and treatment after exposure (including definition of financial responsibility), and effect on student learning activities as follows:

1. All exposure incidents are regarded as serious and must be reported and documented immediately to the clinical site as well as the MPAS Program Director.
2. First aid shall be immediately administered for all types of injuries, including cuts and burns; exposed areas must be thoroughly washed with soap and water.

3. The provider supervising the student shall be informed immediately. If the MPAS Program Director is not immediately present, the student will contact the MPAS faculty member on call.
4. The supervisor must attempt to obtain witness reports of the incident.
5. The supervisor shall attempt to determine the nature of the exposure(s) and any associated biohazardous risks, including documentation of routes of exposure(s).
6. If possible, source material of the exposure should be retained and secured in a safe manner.
7. If the supervisor determines that the incident constitutes an occupational exposure to biohazardous materials, then he/she immediately will begin documentation of the incident using the Student Exposure Report form found in Appendix D.
8. All information related to student exposure shall be regarded as confidential.
9. Documentation of the incident shall include the activity in which the student was engaged at the time of exposure, the extent to which appropriate work practices and protective equipment were used, and a description of the source of exposure.
10. On-campus injuries: The student is directed to contact UD Medical Services at 563.589.3224 during normal business hours for appropriate follow up. If the incident occurs after working hours, or requires emergency care, then the student will be directed to the nearest emergency department for proper evaluation.
11. Off-campus injuries: The student is directed to seek care at the hospital's emergency department (according to the clinical affiliation agreement), or referred to the closest outpatient clinic.
12. The student assumes responsibility for all charges associated with diagnosis and treatment of exposure injuries not covered by his/her health insurance plan. A student may request the University's assistance by discussing the situation with a representative from the MPAS Program Director's office.
13. Students should follow up with their primary care physician.

MPAS students are informed of institutional policies in the MPAS Student Handbook, on the program's website, and during orientation to the program. Orientation includes instruction on fitting of respirator masks. Policies specific to clinical sites are documented in each course syllabus utilizing the site; students are apprised of site-specific policies during orientation to the rotation and/or site. Continued monitoring and enforcement of the Blood-borne Pathogen Exposure policy is critical for maintaining the safety of MPAS students, faculty, staff, and patients in all learning environments.

Liability Insurance

Each MPAS student is covered for professional liability under a professional liability insurance plan with the Healthcare Providers Service Organization (HPSO). Students can learn more about this program at www.hpso.com. MPAS students rotating at a clinical site must maintain the role of a student; they are prohibited from assuming any responsibilities outside those clearly defined and agreed upon for a student. Students are not allowed to substitute for or function as clinical or administrative staff. Students should be appropriately and routinely supervised by the preceptor of record and must perform duties within the scope of the agreed-upon clinical experience. Remaining within the scope of agreed-upon student duties and responsibilities is vital to preserving the professional liability coverage provided by the university and is important in protecting the student, UD and the clinical site in the case of legal action sought by a patient. Students are prohibited from participation in any patient care activity outside the formal rotation

assignment, even in the case that an occasion for participation is presented by the clinical site as a potential employer. Though these opportunities may be attractive and are seemingly benign, they must be avoided, as MPAS program's liability coverage does not cover the student in these circumstances.

MPAS students working in paid positions in a different health-care-related capacity at any time during their physician assistant education are not permitted to assume the role of MPAS student while on duty as a paid employee. Liability insurance will not cover any student assuming the role of an MPAS student outside an assigned clinical rotation.

Academic Policies

Students in the MPAS program must earn a grade of 77% (C) or better in all MPAS courses and course enhancements and must maintain an overall GPA of 3.0. For more details see the MPAS Student Handbook. Grading systems include assessment of participation in program courses and activities, and assessment of professionalism.

Grading and Evaluation

A minimum final grade of 77% (C) is required to pass each rotation.

The grading scale used in clinical rotations is as follows:

A	93-100%
A-	91-92%
B+	89-90%
B	85-88%
B-	83-84%
C+	81-82%
C	77-80%
F	<77%

Final grades will be based on calculations according to the following:

End-of-rotation Examination	40% of final grade
Final Preceptor's Evaluation	40% of final grade
Comprehensive written note/Case presentation	10% of final grade
Patient Logs on E*Value	10% of final grade

At the end of each rotation, MPAS students complete an end-of-rotation examination and receive an evaluation from the preceptor. Students also are required to complete either a written clinical note or an oral presentation on a patient encountered during their rotation. The written note is completed using an electronic medical record (EMR) designated by the MPAS program. Students also are required to maintain a patient log for each rotation. The patient log is maintained in E*Value and must be updated daily. Logging should be completed only for patients with whom the student interacts in an active care/management role. No identifiable patient information will be entered in the log or note to ensure HIPPA compliance; the note is not part of the official patient record. If a student fails a rotation, there may be mandatory remediation in accordance with the procedures described in the MPAS Student Handbook (<http://www.dbq.edu/Academics/OfficeofAcademicAffairs/GraduatePrograms/MasterinPhysicianAssistantStudies/StudentResourcesandUsefulLinks/>).

Students may receive a grade of Incomplete (I) in a clinical rotation. This will result in a referral to Student Evaluation Committee (SEC), which is composed of a class representative, faculty members.

Moodle

All rotation syllabi are housed in Moodle. Any additional announcements, lectures, assignments, and other documents related to rotations will be posted on Moodle. Students are responsible for checking Moodle at least weekly and for remaining up-to-date on current requirements, assignments, communications, and any other information.

E*Value

All patient encounters must be logged in E*Value on a daily basis. The preceptor evaluation and student evaluation also are recorded using this tool.

Clinical Rotation Attendance

During clinical rotations, 100% attendance is required of the student. Students should start their clinical rotations at the time determined by their preceptors. Unreliable or undependable behavior is considered unprofessional behavior. Scheduled activities and/or clinical rotations may take place on any day of the week (including weekends), and may take place during day or night hours. Students should follow the instructions from clinical site preceptor(s) regarding the schedule for a particular clinical rotation. MPAS students must maintain sufficient flexibility to respond to schedule changes and unexpected patient care demands.

It is recommended that all absences be approved PRIOR to their occurrence. A student's absence requires a Student's Absence Excusal form (Appendix B) and submission to the Program Director. Students cannot miss more than 10% of a clinical rotation, and all missed time must be approved by the Program Director.

In the event of an emergency, when it is not possible to obtain permission prior to the absence, students must notify the following by phone and a confirmatory e-mail within 3 hours of the time they were expected on site:

- MPAS Clinical Liaison or MPAS Program Director
- On-site preceptor
- MPAS program office

Students must also complete the Absence Excusal Form (Appendix B) within 24 hours of their absence. Failure to notify and to obtain approval from both the MPAS Program Director and the clinical site preceptor may result in referral to SEC. Students who are absent from a rotation site for two days without authorization and approval by Program Director will be referred to SEC for further evaluation.

Tardiness and early departures from clinical rotations are not permitted. A student is subject to receiving unsatisfactory scores on his/her clinical performance evaluation for tardiness and early departures, which may result in the student having to repeat part or all of the rotation. Attendance is a critical element in the student's clinical performance evaluation.

Student Conduct and Professional Behavior

Students are required to follow the rules of conduct, policies, and procedures outlined in the MPAS Student Handbook and those established at affiliated facilities. The responsibility of assuming the role of a physician assistant demands the highest moral and ethical standards. Developing these standards is a

lifelong process which continues as an integrated component of the MPAS student's education in the MPAS program. With this as a fundamental principle, the MPAS program does not tolerate violations of ethical and moral values. Therefore, violations such as cheating, plagiarism, and unprofessional conduct are not tolerated.

Nepotism and Fraternization

Occasionally students request to serve a rotation with a friend or relative (who is also a health care provider) that will serve as the preceptor. Due to the potential that personal relationships can interfere with the clinical evaluation process, which is both objective and subjective in nature, such rotation arrangements are prohibited.

Students may find themselves attracted to a preceptor (or vice versa) or other personnel at the site(s) at which they are rotating. Pursuit of amorous or sexual relationships between students and clinical rotation personnel during the rotation period compromises the integrity of the education and evaluation processes and should be avoided by students. Students also should be aware of the sexual harassment policy found at <http://www.dbq.edu/media/campuslife/vpofstudentlife/2014-15-Student-Policy-Handbook.pdf>.

Students with questions or concerns about the above issues should immediately consult the Clinical Liaison or Program Director.

Student Contact Information

Each student has been provided with a UD e-mail address. This is the only e-mail address used for MPAS program communication. Students are responsible for reading e-mail correspondence on a daily basis.

MPAS students must furnish contact information, including mobile phone number and information for an emergency contact, to the Program Director. It is the MPAS student's responsibility to keep contact information current with the Program Director.

Family Educational Rights and Privacy Act

In compliance with the Family Educational Rights and Privacy Act (U.S. Public Law 93-579; FERPA), the MPAS program requires its students' written consent to the sharing of personal information with its educational partners (clinical affiliates and practice sites) strictly on a need-to-know basis. This sharing of personal information may include social security number, email address, telephone number, results of drug testing, and/or results of background checks. Notice is hereby given that the MPAS program will require a background check and drug test through CASPA prior to entering the program, and an additional background check and drug test before the clinical rotation phase. Random drug testing or additional background checks may be requested of the student at any time while the student is enrolled in the MPAS program, as well as for placement in certain clinical sites as a matter of standard operating procedures for those sites. The MPAS student will be responsible for the cost of all background checks and drug testing.

A student's signature on the form Appendix D herein stating receipt of this student clinical rotation guide and acceptance of the terms and conditions contained within this guide is considered acceptance of above informed consent.



Appendix A—Request for Site Affiliation Form

Student Name: _____
(Print)

Practice Name: _____ Contact Name: _____

Practice Address (es): _____
Street City State Zip

Board Certification: ☐ Yes ☐ No

Specialty: _____

Number of years in practice: _____ Average number of patients (per day): _____

Number of Medical Doctors: _____ Number of Physician Assistants: _____

Student Signature: _____ Date: _____

For MPAS Office Use Only:

☐ Yes ☐ No ☐ Pending

Recommendations: _____

Signature: _____ Date: _____

Program Director



Appendix B - Change of Clinical Rotation Request Form

Student Name: _____
(Print)

Practice Name: _____ Contact Name: _____

Change **from** Practice Address (es): _____

Change **to** Practice Address (es): _____
Street City State Zip

Board Certification: ☐ Yes ☐ No

Specialty: _____

Number of years in practice: _____ Average number of patients (per day): _____

Number of Medical Doctors: _____ Number of Physician Assistants: _____

Student Signature: _____ Date: _____

For MPAS Office Use Only:

☐ Yes ☐ No ☐ Pending

Recommendations: _____

Signature: _____ Date: _____

Program Director



Appendix C—Absence Excusal Form

In the event of an anticipated absence requiring the student to miss one or more days of class or a clinical rotation, the student must complete this Absence Excusal Form and submit it to the Program Director at least **seven** days in advance of the anticipated absence.

In addition, students absent from a clinical rotation as a result of an **emergency** must complete and submit this form to the Program Director within 24 hours of their absence. Failure to do so may result in referral to SEC.

Student Name (PRINT): _____

Class: _____

Anticipated date(s) off: _____

Reason for Absence(s):

Student Signature: _____

Date Submitted: _____

Program Use Only

Request Approved: _____ Not Approved: _____ Date: _____

Program Director Signature: _____

Comments: _____



Appendix—D Student Exposure Incident Report

Dear Healthcare Professional:

One of our MPAS students may have been exposed to blood-borne pathogens during their clinical clerkship. This individual had direct contact with potentially infected blood or other potentially infectious materials.

In accordance with the requirements of OSHA's Blood-borne Pathogen Standard, the exposed student must immediately have made available to them a confidential medical evaluation and follow-up which must include at least the following elements:

- a. Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred;
- b. Identification and documentation of the source individual, unless the clinical education site can establish that identification is infeasible or prohibited by state or local law;
 - 1) The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the clinical education site shall establish that legally required consent cannot be obtained. When law does not require the source individual's consent, the source individual's blood, if available, shall be tested and the results documented.
 - 2) When the source individual is already known to be infected with HBV or HIV, testing for the source individual's HBV or HIV status need not be repeated.
 - 3) Results of the source individual's testing shall be made available to the exposed student, and the student shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
- c. Collection and testing of blood for HBV and HIV serological status;
 - 1) The exposed student's blood shall be collected as soon as feasible and tested after consent is obtained.
 - 2) If the student consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident, the student elects to have the baseline sample tested, such testing shall be done as soon as feasible.
- d. Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service
- e. Counseling
- f. Evaluation of reported illnesses

Student Exposure Incident Form Continued

In accordance with the requirements of OSHA's Blood-borne Pathogen Standard, you are being provided with the following information:

- a. A copy of the Blood-borne Pathogen Standard (https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=standards&p_id=10051)
Please pay special attention to sections 1910.1030 (f)(3 to 5) of the Blood-borne Pathogen Standard if you are not familiar with this regulation; the indicated sections deal specifically with post-exposure evaluation and follow-up, information provided to the healthcare professional, and the healthcare professional's written opinion.);
- b. A description of the exposed student's duties as they relate to the exposure incident);
- c. Documentation of the route(s) of exposure and circumstances under which exposure occurred
- d. Results of the source individual's blood testing, if available; and
- e. Copies of all medical records relevant to the appropriate treatment of the student, including hepatitis B virus vaccination status, which are the Employer's responsibility to maintain.

Please review the provided information and complete the post-exposure evaluation form. Return the original copy of the completed form to the MPAS Program Director and give a copy to the patient within 15 days of the completion of the evaluation.

The healthcare professional's written opinion for post-exposure evaluation and follow-up (copies attached) must be limited to the following information:

- a. That the student has been informed of the results of the evaluation; and
- b. That the student has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.

All other findings or diagnoses must remain confidential and shall **NOT** be included in the written report. If medical follow-up is indicated, please complete the medical follow-up form for each follow-up visit and return it to the address indicated.

Signature of Medical Provider _____

Signature of Clinical Preceptor _____

Signature of Program Director _____

Name of Affected Student _____

Signature of Student _____

Date: _____



Appendix E—Student Acknowledgement of Receipt of MPAS Student Clinical Rotation Guide Form

I, _____ (print name), have read and understand the policies and procedures found in this MPAS Student Clinical Rotation Guide. I have also reviewed the UD Student Handbook and the MPAS Student Handbook. I am familiar with the contents of these documents and the policies and procedures herein. I agree to abide by these regulations.

This form must be signed and returned to Program Director on the first day of class.

Student Signature

Program Director Signature

Date