

PHYSICIAN ASSISTANT STUDIES
**CURRICULUM AND THE
ROLE OF THE PRECEPTOR**



Preceptors play a vital role in the education of students enrolled in Le Moyne's Physician Assistant Studies Program by providing them with real-world, hands-on experience. Not only is precepting a key element of the 24-month program, but it also provides an opportunity for students to discern the type of health care setting in which they would like to work. It is not only a key element of the College's 24-month program, but it also provides an opportunity to help students discern the type of health care setting they may want to eventually work in.

We are fully accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). Prospective students must meet both academic and clinical experience prerequisites in order to gain acceptance into this rigorous and competitive program.

lemoyne.edu/pa

> Physician Assistant Studies Program

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SPECIAL EXAMINATIONS AND VARIOUS PROCEDURES STUDENTS ARE GIVEN THE OPPORTUNITY TO PRACTICE:

testicular exam
breast exam
pelvic exam
mental status exam
universal precautions
sterile technique
venipuncture
arterial puncture
suturing
nasogastric tube insertion
intubation
lumbar puncture
IV technique
central lines
incision and drainage
splinting
urinalysis
BLS and ACLS skills
foley catheter insertion

> THE DIDACTIC PHASE (YEAR ONE)

This phase spans the first 12 months and consists of a seven-credit clinical medicine course, which consists of traditional lecture-based learning as well as three hours of problem-based learning (a form of active, student-centered learning) weekly. In addition, students also gain interviewing skills. While the clinical medicine course forms the core of the first-year curriculum, the other courses support this core content by expanding upon it, enriching it, and providing specialized information. The students complete their comprehensive science and clinical preparatory coursework through the following:

- ▶ Medical terminology
- ▶ Orientation to the PA profession
- ▶ Clinical medicine
- ▶ Pharmacology
- ▶ Anatomy and physiology
- ▶ Medical humanities
- ▶ Counseling and public health
- ▶ Physical diagnosis, including simulation

> THE CLINICAL (YEAR TWO)

This phase spans the second 12 months and consists of eight rotations in the following areas: primary care (family medicine or internal medicine), pediatrics, women's health, general surgery, emergency medicine, behavioral medicine, inpatient medicine and one elective. Emphasis is placed on developing a solid foundation in providing patient care under the supervision of a precepting clinician in a variety of primary care and specialty settings. It is our hope that each rotation emphasizes cultural sensitivity, understanding of health in relation to the predominant culture, and the role of the health care provider in this setting.

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This phase is unique in that it requires the assistance and commitment of numerous clinicians in various clinical settings to act as preceptors. Any licensed physician (MD, DO), physician assistant, nurse practitioner, certified nurse midwife or psychologist may act as a preceptor. Other licensed health professionals, including nurses and social workers, may also serve as preceptors for a portion of the clinical rotation.

Rotations are generally six weeks in length but may occasionally be three-weeks long. The student can rotate with one provider or may be shared among two or more. Our goal is to have the students obtain direct “hands-on” patient care experience under the supervision of the precepting clinician in order to allow the student to fully accomplish the course objectives.

All students are insured for professional liability through Le Moyne College. We ask that all new training sites sign a preceptor agreement form and a new site request form which formalizes the relationship between the College, the preceptor, and the site. It is understood that availability changes due to unforeseen circumstances, and therefore preceptors are never obligated to take a student during a given time, nor is there a minimum number of students one must precept in a year. We are grateful for any time a preceptor offers to us.

In addition to didactic and clinical coursework, students take a research seminar, which begins in the first fall semester of the didactic phase and concludes in the spring of the clinical phase. This provides an opportunity for the PA student to complete a master's project that contributes to the student's knowledge and professional development, as well as to the profession.

THE ROLE OF THE PRECEPTOR

The primary objective of clinical rotations is for students to **develop their clinical thinking and patient management skills** through supervised patient encounters. The ideal situation would allow the student to:

1. Interview the patient and obtain the medical history
2. Perform the appropriate physical examination
3. Present his or her findings to the preceptor
4. Formulate an assessment with substantial input and teaching from the preceptor
5. Decide on a plan of therapy that integrates the student's level of knowledge with the preceptor's clinical experience
6. Document or dictate appropriate notes to be reviewed and countersigned by the preceptor

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OTHER PRECEPTOR RESPONSIBILITIES INCLUDE:

1. Provide the student a physical location and adequate space and arrange for the student to have a variety of patient encounters
2. Provide at least 36 hours for the student to perform clinical activities. During this time the preceptor or his or her designee must be available for supervision, consultation or teaching
3. Supervise, demonstrate, teach and observe the student in clinical activities in order to develop the student's skills and to ensure proper patient care
4. Delegate gradually increasing levels of responsibility to the student for clinical assessment and management as the student's skills develop.
5. Schedule time to review objectives with the student in order to identify any problem areas and provide specific experiences for the student to resolve those areas (such as appropriate readings, etc.).
6. Allow the student to utilize the electronic medical record system or access to the medical records.
7. Participate in the evaluation of the student's clinical skills and didactic knowledge base through observation, supervision, teaching, and completing the mid- and final-evaluation form
8. Notify the program promptly should any problems arise that would prevent the preceptor from accomplishing the above items or diminish the training

There are specific learning objectives and goals for each rotation. These goals and objectives have been developed with the input of practicing clinicians and are provided to ensure a comparable learning experience for all students.

Rotation Requirements: The student will be expected to work at least 36 hours per week. In addition, preceptors may require that students participate in other activities, such as taking call with the preceptor; attending grand rounds, conferences or lectures; reading assigned articles; or giving a presentation.

What You Can Expect: All second-year physician assistant studies students will be prepared to perform a complete history and physical and have knowledge of how to present a patient. They will also be able to discuss the differential diagnosis and appropriate work up, including laboratory and radiologic studies, as well as the treatment plan. The speed and facility with which these tasks are met are a function of the number of previous rotations the student has completed. Students should show progress in applying these skills throughout the course of the rotation and the year. They should be able to competently perform these tasks on the patients assigned to them, present the patient, and answer questions about a specific disease, its diagnostic work up, treatment and prognosis.

With the preceptor's guidance, the student will build upon his or her knowledge and is expected to gain valuable hands-on experience and expertise. Clearly, the primary duties of a preceptor are to impart medical knowledge, help the student refine clinical skills and serve as a clinical role model. Daily progress notes, SOAP notes, pre-operative notes, post-operative notes, procedure notes, history and physical notes, and discharge summaries should be written wherever applicable.



While physician assistant students are trained as generalists, we recognize that the various patients they will encounter will present with a multitude of problems ranging from simple to complex. Our hope is that our students will have the opportunity to experience the breadth of diseases seen in all clinical settings.