



Thiel College  
Physician Assistant Program

# Clinical Clerkship Manual

2022-2023

## Clinical Clerkship Manual Table of Contents

Introduction.....	1
Acknowledgement of Policies .....	1
Student Learning Outcomes.....	1
Attendance .....	5
Attire and Personal Grooming.....	7
Call Back Days .....	8
Documentation.....	8
Employment .....	9
Evaluations .....	10
Housing.....	11
Immunizations .....	11
Placements .....	13
Preceptor Information.....	13
Rotation Passport .....	16
Safety .....	17
Site Visits .....	17
Student Expectations and Responsibilities .....	18
Student Insurance Responsibility .....	20
Travel .....	20
Universal Precautions and Bloodborne Pathogens.....	21
Additional Rotation Policies .....	24
Forms .....	25

## Introduction

This clinical year manual has been developed by the faculty and administration of the Thiel College Physician Assistant Program to provide the student with specific guidelines, rights, and responsibilities regarding the PA Program. This manual is designed to supplement other existing College and program policies and procedures. We encourage every student to become familiar with and refer to those and other Thiel College publications for further information. Any questions regarding policies contained within this manual should be directed to the Program Director.

Although every effort has been made to make this manual as complete and up to date as possible, it should be recognized that circumstances will occur that the handbook does not cover. When the manual does not cover a specific circumstance or the interpretation is ambiguous, the Program Director will make the necessary decision and/or interpretation. Written policies that are not in the handbook should not be interpreted as an absence of a policy or regulation.

Changes may be necessary in the manual due to changes in the PA Program. Students will be notified of any changes or additions in writing, and they will become effective immediately. If the student has questions regarding a situation, they should discuss them with the Program Director. Any conflict between the specific policies and procedures set forth in this manual and general University policies and procedures, the Thiel College policies and procedures shall be the standard.

The Clinical Clerkships Course syllabi contain additional information for both students and preceptors. Please refer to the syllabi for details regarding specific learning outcomes, grading policies, and other important information regarding clinical rotations.

## Acknowledgement of Policies *ARC-PA 5<sup>th</sup> ed. Standards A3.01, A3.02*

The PA Program Clinical Clerkship Manual provides information on the policies, requirements, services, and expectations for all students enrolled in the Master of Science in Physician Assistant Studies (MSPAS) program at Thiel College. Students are required to read and acknowledge the policies and procedures detailed in the PA Program Clinical Clerkship Manual, and to sign the Acknowledgement of Policies Form at the end of this document. Please note that policies are subject to change, as stated above.

## Student Learning Outcomes

The Thiel College Student Learning outcomes are based on the *Competencies for the Physician Assistant Profession* document published by the National Commission on Certification of Physician Assistants. This document was developed to communicate to the PA profession and to the public a set of competencies that all physician assistants, regardless of specialty or setting, are expected to acquire and maintain throughout their careers; it was adopted in 2012 by ARC-PA, NCCPA, and PAEA, and by the AAPA in 2013. Thiel College has chosen to use the content from *Competencies for the Physician*

*Assistant Profession* as the basis for Student Learning Outcomes to ensure that all essential competencies will be included in the curriculum and foundation of this PA training program.

### **SLO 1: Medical Knowledge**

Medical knowledge includes the synthesis of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention. Physician assistant students must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In Addition, physician assistant students are expected to demonstrate an investigative and analytic thinking approach to clinical situations. Physician assistants are expected to understand, evaluate, and apply the following to clinical scenarios:

1. Evidence-based medicine.
2. Scientific principles related to patient care.
3. Etiologies, risk factors, underlying pathologic process, and epidemiology for medical/surgical conditions.
4. Signs and symptoms of medical and surgical conditions.
5. Appropriate diagnostic studies.
6. Management of general medical and surgical conditions to include pharmacologic and other treatment modalities.
7. Interventions for prevention of disease and health promotion/maintenance
8. Screening methods to detect conditions in an asymptomatic individual.
9. History and physical findings and diagnostic studies to formulate differential diagnoses.

### **SLO 2: Interpersonal & Communications Skills**

Interpersonal and communication skills encompass the verbal, nonverbal, written, and electronic exchange of information. Physician assistant students must demonstrate interpersonal and communication skills that result in effective information exchange with patients, patients' families, physicians, professional associates, and other individuals within the healthcare system.

Physician Assistant students are expected to:

1. Create and sustain a therapeutic and ethically sound relationship with patients.
2. Use effective communication skills to elicit and provide information.
3. Adapt communication style and messages to the context of the interaction.
4. Work effectively with physicians and other healthcare professionals as a member or leader of a healthcare team or other professional group.
5. Demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety.
6. Accurately and adequately document information regarding care for medical, legal, quality, and financial purposes.

### **SLO 3: Patient Care**

Patient care includes patient- and setting-specific assessment, evaluation, and management. Physician Assistant students must demonstrate care that is effective, safe, high quality, and equitable. Physician Assistant students must obtain a relevant medical history, adequately perform physical examinations, and implement treatment plans on patients of all age groups, appropriate to the patient's condition. In addition, Physician Assistant students must demonstrate proficiency in technical procedures and health care that is effective, patient-centered, safe, compassionate, and culturally appropriate for the treatment of medical problems and the promotion of health.

Physician Assistant students are expected to:

1. Work effectively with physicians and other healthcare professionals to provide patient-centered care.
2. Demonstrate compassionate and respectful behaviors when interacting with patients and their families.
3. Obtain essential and accurate information about their patients.
4. Make decisions about diagnostic and therapeutic interventions based on patient information and preferences, current scientific evidence, and informed clinical judgment.
5. Develop and implement patient management plans.
6. Counsel and educate patients and their families.
7. Perform medical and surgical procedures common to primary care practice.
8. Provide health care services and education aimed at disease prevention and health maintenance.
9. Use information technology to support patient care decisions and patient education.

### **SLO 4: Professionalism**

Professionalism is the expression of positive values and ideals as care is delivered. Foremost, it involves prioritizing the interests of those being served above one's own. Physician Assistant students must acknowledge their professional and personal limitations. Professionalism also requires that PAs practice without impairment from substance abuse, cognitive deficiency, or mental illness. Physician Assistant students must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population, and adherence to legal and regulatory requirements.

Physician Assistant students are expected to demonstrate:

1. Understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant.
2. Professional relationships with physician supervisors and other health care providers.
3. Respect, compassion, and integrity.
4. Accountability to patients, society, and the profession.
5. Commitment to excellence and on-going professional development.

6. Commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices.
7. Sensitivity and responsiveness to patients' culture, age, gender, and abilities and the relationship to health and health beliefs.
8. Self-reflection, critical curiosity, and initiative.
9. Healthy behaviors and life balance.
10. Commitment to the education of students and other health care professionals

### **SLO 5: Practice-based Learning & Improvement**

Practice-based learning and improvement includes the processes through which Physician Assistants engage in critical analysis of their own practice experience, the medical literature, and other information resources for the purposes of self- and practice-improvement. Physician Assistant students must be able to assess, evaluate, and improve their patient care practices.

Physician Assistant students are expected to:

1. Analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team.
2. Locate, appraise, and integrate evidence from scientific studies related to their patients' health.
3. Apply knowledge of study designs and statistical methods to the appraisal of clinical literature and other information on diagnostic and therapeutic effectiveness.
4. Utilize information technology to manage information, access medical information, and support their own education.
5. Recognize and appropriately address personal biases, gaps in medical knowledge, and physical limitations in themselves and others.

### **SLO 6: Systems-based Practice**

Systems-based practice encompasses the societal, organizational, and economic environments in which healthcare is delivered. Physician Assistant students must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that balances quality and cost, while maintaining the primacy of the individual patient. PAs should work to improve the health care system of which their practices are a part.

Physician Assistant students are expected to:

1. Effectively interact with different types of medical practice and delivery systems.
2. Understand the funding sources and payment systems that provide coverage for patient care and use the systems effectively.
3. Practice cost-effective health care and resource allocation that does not compromise quality of care.

4. Advocate for quality patient care and assist patients in dealing with system complexities.
5. Partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery and effectiveness of healthcare and patient outcomes.
6. Accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care.
7. Apply medical information and clinical data systems to provide effective, efficient patient care.
8. Recognize and appropriately address system biases that contribute to health care disparities.
9. Apply the concepts of population health to patient care.

*The language included above in the “Thiel College Physician Assistant Student Learning Outcomes” was taken from the document “Competencies for the Physician Assistant Profession” (Originally adopted 2005; revised 2012) Adopted 2012 by ARC-PA, NCCPA, and PAEA Adopted 2013 by AAPA.*

## Attendance

An assigned clinical site schedule will be determined by the preceptor (or his/her designee) and should include an average of at least 40 hours per week. Students should anticipate working some evenings, weekends, holidays, or “on-call” shifts on various rotations and must not refuse to work during these times if it is deemed necessary by the preceptor. College holidays do not apply to students’ schedules during the clinical year, and preceptors are not obligated to grant days off to students on holidays or weekends (but may do so at their discretion).

Students will email or fax their clinical rotation schedules to the Director of Clinical Education or Faculty designee (clinical coordinator) by the end of the first week of the rotation. Any changes to a student’s schedule while on rotation must be sent directly via email or fax to the instructor of record and clinical coordinator.

By Federal law, here are the regulations regarding duty hours of any/all students in the hospital setting (residents, interns, medical students, and PA students):

- ❖ Maximum 80 hours/week (this may be averaged over a 4-week period.)
- ❖ Not more than every 3rd day on-call.
- ❖ Continuous duty not to exceed 30 consecutive hours.
- ❖ Minimum 24 hours off per 7- day period. Can be averaged over 4 weeks.
- ❖ Post-call: minimum of 12 hours off-duty before starting the next shift.

If your clinical schedule does not follow these rules, advise the preceptor with whom you are working. Also notify the Clinical Coordinator, Instructor of Record and/or Program Director immediately.

**Reporting Absence:** Any and all absences, early dismissals, or cancellations made by the preceptor/site must be reported to the clinical coordinator and instructor of record immediately via email or telephone. An Absence Reporting Form must also be completed. The faculty will determine whether or not the student will be assigned additional clinical experience workdays and/or reassigned to another site. If the appropriate party cannot be reached, the student must leave a phone or electronic message regarding the absence, and a phone number where they can be immediately reached.

**Preceptor Absence:** If a preceptor cancels or calls off, the day(s) will not count against your required time at the site. However, if the preceptor is going to be off an extended amount of time, the student may be scheduled elsewhere, given supplemental educational activities, or need to make up the time at a later date.

**Bereavement Policy:** Three days of leave are granted to students when a death occurs in the immediate family (spouse, father, mother, brother, sister, son, daughter, or parent-in-law) of a student. One day of leave is granted to students for the death of a grandparent. If additional bereavement time is needed, students should discuss time needed with their advisor and may need to take a leave of absence.

**Medical Absence:** Absenteeism from illness that extends beyond 1 day requires a physician's clearance note to be emailed or delivered to the clinical coordinators. Illnesses requiring hospitalization and/or surgery may be given additional days off at the discretion of the clinical coordinators on a case-by-case basis. Students requiring hospitalization or surgery must provide the clinical coordinator and instructor of record with written clearance from his/her physician in order to continue or resume clinical rotations.

**Military Leave:** To be determined with the clinical coordinators on a case-by-case basis.

**Job interviews:** A maximum total of TWO (2) days per calendar year will be allowed for interviews. Students must first obtain permission from the Instructor of Record and Clinical Coordinator to attempt to arrange time off for the interview. Subsequently, the preceptor must grant permission for the absence, and students must make up the missed clinical time within the confines of that rotation.

**PSPA and AAPA Conference attendance:** Students who wish to attend these conferences must submit their intentions, in writing, at the start of the clinical year to the Clinical Coordinator. Permission from the preceptor must also be obtained one month prior to the scheduled absence. If these processes are followed accordingly, this absence will be considered excused. Absences for other scholarly activities will be considered on a case-by-case basis and must be addressed at least one month prior to the scheduled event.



## Attire and Personal Grooming *ARC-PA 5<sup>th</sup> ed. Standard A3.06*

As healthcare professionals, PA students are expected to maintain the highest possible standard of appearance. Students are expected to be neatly dressed and practice good hygiene throughout all phases of their professional education, as listed below:

- ❖ Slacks/skirts-at an appropriate length, with shirts/blouses that are non-revealing.
- ❖ Skirts or dresses should be no more than three inches above the knee.
- ❖ Denim, regardless of color, is not allowed.
- ❖ No shorts, sweatshirts, cut-off clothing, capri pants, cargo pants, or leggings without skirts.
- ❖ Scrubs may be worn if approved by the instructor and/or clinical site (e.g. OR and/or ER).
- ❖ No midriff tops, halter tops, translucent or transparent tops; no shirts with low-cut necklines or tank tops.
- ❖ Undergarments should not be visible, even with movement.
- ❖ No sneakers are permitted (unless wearing scrubs and approved by your instructor or preceptor), shoes are to be worn with socks or hose; heel height should be conservative.
- ❖ Open toe shoes are not permitted in any lab or in any clinical setting.
- ❖ Jewelry and make-up, if worn, must be subtle and appropriate for a professional setting. Perfume and cologne are not permitted, as some patients may be allergic.
- ❖ Fingernails must be clean and trimmed. Artificial nails are not permitted.
- ❖ Hair styles should be clean, combed, and neatly trimmed or arranged worn in a neat style. Long hair should be worn back if necessary, to avoid interference with work or patient care.
- ❖ Body piercings including, but not limited to, tongue, lip, eyebrow or nose piercings, should not be worn. Discrete pierced earrings are allowed.
- ❖ Tattoos should be covered.

In any clinical setting, PA students are expected to be in full professional attire and to comply with these additional program standards and any other rules outlined by the clinical site.

- ❖ Wear clean, pressed, short white jackets with the issued Thiel College PA Program patch attached to the left upper sleeve.
- ❖ Identification badges bearing the student's name and designating him/her as a "Physician Assistant Student" must be worn at all times.

In any off-campus course-related activity such as Clinical Practicum, students are expected to be neatly dressed and practice good hygiene as outlined above.

In clinical skills courses, dress code will be determined by the faculty member teaching the course. This may include scrubs or an alternative. Please ask your instructor for details. If certain activities fall on clinical skills course days (e.g. guest speaker for another course), students are expected to be neatly dressed and practice good hygiene as outlined above.

Clinical supervisors, preceptors, or PA Program faculty reserve the right to remove any student who is not appropriately dressed from a classroom, clinical site, or experience. If a student is sent home due to inappropriate attire or poor hygiene, the student may be marked absent and may not be permitted to make up any clinical work, assignments, or experiences for the missed day. All such incidents will be documented in the student's permanent record

## Call Back Days

### **Call Back Day Format:**

All PA students on rotation are required to attend Call Back Days. All Call Back Day activities are mandatory. There are many important activities that take place on Call Back Days, including:

- ❖ End of rotation examinations
- ❖ Grand Rounds: Student presentations on medical topics/patient case(s) n experienced on rotations
- ❖ Lecture Series: assorted lectures on medical topics, CV writing, PANCE prep, coding/billing, contract negotiations, etc.
- ❖ Practical Exercises: problem oriented practical exams, OSCE preparation, Clinical Skills
- ❖ PANCE review and preparation

Call Back Days will take place on the last Thursday and Friday of each five-week block. Depending on the planned activities, students can expect to be dismissed no later than 6 p.m. Call Back Day schedules will be posted one week prior to the date.

## Documentation

**Patient Records:** If allowed by the preceptor and/or facility, PA students may enter information in the medical record. Students are reminded that the medical record is a legal document. All medical entries must be identified as "student" and must include the PA student's signature with the designation "PA-S." Although student documentation may be limited for reimbursement purposes, students' notes are legal and are contributory to the medical record. Writing a succinct note that communicates effectively is a critical skill that PA students should develop. If a particular site does not authorize or allow PA students to officially document patient notes in a paper or electronic chart, it is advisable for students to document the patient encounter on a separate piece of paper so that they can continue practicing their documentation skills and obtain feedback from the preceptor.

**Medicare Policy:** The Center for Medicare and Medicaid Services (CMS) guidelines only permit students to document a portion of the History and Physical Exam (the Past Medical

History, Family History, Social History, and Review of Systems). The preceptor must personally document all other key elements of the visit.

**Preceptor Review:** The preceptor cannot bill for the services of a student. Preceptors are required to document the services they provide as well as review and edit all student documentation. It is the student's responsibility to ensure that the supervising preceptor also sees all his/her patients. The preceptor should review all PA student notes written in the medical record and countersign. If there is any doubt as to the correct format, students must consult with their preceptor.

**Prescription Writing:** PA Students are NOT permitted to prescribe medications. Students may assist in the writing of a prescription or assist the assigned preceptor or designee with transmission of a prescription, but the preceptor or assigned designee must sign all prescriptions. MORE SPECIFICALLY, YOUR NAME IS NOT TO APPEAR ON THE PRESCRIPTION. You may not sign a prescription for the preceptor and then write your initials after the preceptor's name. Any student violating the guidelines on prescription writing will have the case referred to the Student Progress Committee and result in possible dismissal from the PA Program.

**Countersignature:** All charts and written orders must be signed (if applicable) with the student's name clearly written, followed by the designation "PA-S." At no time may PA students use other professional titles (e.g., RN, EMT, DPT, etc.) while on clinical rotations. 10. The preceptor must countersign all chart entries and written orders immediately. 11. Students must know their limits while in training. Students must not consent to assess any patient or perform any procedure that is beyond their scope.

### Employment    *ARC-PA 5<sup>th</sup> ed. Standards A3.04, A3.05 a,b, A3.15e*

The program will not employ any Physician Assistant student as a graduate assistant or in any other capacity within the program. Students enrolled in the PA Program cannot substitute for practicing Physician Assistants or provide unsupervised services while at any clinical site. Students must not substitute for or function as instructional faculty. Students must not substitute for clinical or administrative staff during supervised clinical practical experiences

Thiel College employee policies do not apply to students while in the program. PA students who are credentialed or licensed in other non-PA professions cannot function in that role while in the role of a PA student.

The program does not encourage students to work during the didactic or clinical years of the program. The program will not make any exceptions, due to outside employment, in regard to course work or clinical assignments for the student who does engage in outside employment.

## Evaluations

**Student Evaluation of the Clinical Site:** This evaluation allows the Thiel College PA students to provide constructive feedback for preceptors and help guide the future use of clinical sites by the PA program. Student feedback should offer insight, constructive criticism, informative advice, and should not be judgmental or accusatory in nature. This contribution from students can be a powerful tool in improving medical education by providing the preceptor and PA program with important feedback. These evaluation forms are not graded on content, but submission is mandatory, and due on the first Call Back Day.

- ❖ Guidelines for giving constructive feedback include the following points:
- ❖ Evaluate based on your own experience; do not report second-hand knowledge or here say.
- ❖ Keep the tone professional, reasonable, and articulate
- ❖ Report specific information, rather than generalized impressions
- ❖ Provide suggestions for improvement, if needed
- ❖ Provide commentary that would help guide other PA students rotating on the site

**Preceptor Evaluation:** The PA Program has adopted a standard evaluation form which will be provided to the preceptor. The preceptor is responsible for assessing performance and discussing it with the student. The PA student will be evaluated on the basis of general medical knowledge, ability to obtain a medical history, and perform an appropriate physical examination. The evaluation will be utilized to ensure that the student is meeting all the learning objectives in the syllabi. Included in the evaluation will be the preceptor's assessment of the student in these areas:

- ❖ Dependability, attitude, and work ethic
- ❖ Ability to demonstrate effective communication with patients and other health care workers, and to present cases to preceptor
- ❖ Understanding of and respect for the various roles on the health care team
- ❖ Clinical Skills
- ❖ Medical Knowledge
- ❖ Evidence Based Decision Making
- ❖ Ability to develop a differential diagnosis and management plan
- ❖ Preventive Care & Counseling
- ❖ Professional Behavior

The student must obtain a 70% (C) or better on your preceptor evaluation to successfully complete the rotation. Anyone who is unsuccessful in meeting the minimum score on the preceptor evaluation will be required to repeat the rotation. The student can refer to each individual course syllabi for further information regarding the graded components.

**Interim Evaluation:** An interim evaluation by the preceptor will occur midway through the rotation. This evaluation will not be graded but will provide the student, preceptor and PA Program information on how the student is progressing through the rotation. The PA

Program hope is to objective measure how the students know their expectations. Additionally, the PA student will fill out a Mid-Clinical Rotation Self Reflection Check-in so the PA Program can know if the student is meeting the objectives highlighted in the syllabus.

## Housing

The program will attempt to make suggestions for housing; however, students are required to locate, secure and pay for their own housing for all rotations. The program does not coordinate housing opportunities for students, nor should a student request that a clinical site assist them in securing housing. If a clinical site offers to provide housing, the student may choose this option at their own discretion and must honor all rules associated with such housing. The program is not involved in any way with site-provided or any other housing options. At no time should a clinical student reside with a preceptor or employee of the clinical site.

## Immunizations *ARC-PA 5<sup>th</sup> ed. Standard 3.07*

The Thiel College Physician Assistant Program has a pre-matriculation immunization policy that is based on the Centers for Disease Control and Prevention (CDC) immunization recommendations for health care personnel and is periodically updated to comply with those changing recommendations. Prior to matriculation, all students must submit certification of immunizations or proof of immunity via Certiphi. Students are responsible for maintaining their personal immunization record. It is recommended that the student carry a copy of this record to the assigned clinical site on the first day of each rotation. Failure to demonstrate an up-to-date immunization status on request will result in removal from the rotation until valid proof of current immunization status is presented. Failure to maintain current immunizations will prevent a student from progressing in the program.

The list of **REQUIRED** immunizations includes:

- 1. MMR / MEASLES, MUMPS, RUBELLA VACCINE:** This combination vaccine is given because it protects from Measles, Mumps and Rubella. Two doses are required for entry into the Thiel College PA Program. One must have been received at 12 months of age or later and in 1971 or later. The second dose must have been received at least 30 days after the first dose and in 1990 or later. Provide lab evidence of immunity by doing a blood test to check for antibodies for Rubella. Submit lab evidence of immunity and complete Immunization Form. NOTE: All titers must include a lab report.
- 2. HEPATITIS A VACCINE:** Provide documentation of 2 shots or a positive quantitative antibody titer showing immunity to Hepatitis A. If the titer provided is negative; students must receive a booster. NOTE: All titers must include a lab report.
- 3. HEPATITIS B VACCINE:** Provide lab evidence of immunity by doing a blood test to check for antibodies for hepatitis B. Submit lab evidence of immunity and complete Immunization Form. Ideally the titer is performed one to two months after the third

vaccine. If the quantitative titer is negative, another three-dose Hepatitis B series should be completed, and a quantitative titer again drawn one to two months after completion of the re-vaccination series. If this titer is negative, please contact the program for further CDC/ACIP recommended instructions. NOTE: All titers must include a lab report.

**4. POLIO VACCINE:** Documentation of the completed primary series. There must be a record of at least three vaccinations.

**5. TDAP (Tetanus/Diphtheria/Pertussis) VACCINE:** A one-time dose of Tdap is required, if you have not received Tdap previously (regardless of when previous dose of Td was received). Td boosters are required every 10 years thereafter. Pregnant students need to get a dose of Tdap during each pregnancy.

**6. VARICELLA (Chickenpox):** Provide proof of two doses of varicella vaccine OR provide results of a blood test on a lab form verifying immunity to Chickenpox/Varicella. Submit lab evidence of immunity and complete Immunization Form. NOTE: All titers must include a lab report.

**7. INFLUENZA VACCINE:** Provide written record of having received one dose of the influenza immunization preceding matriculation and provide proof of having received an influenza immunization annually no later than October 1 of each year while enrolled in the program. If a student wishes to waive the vaccine; a signed waiver from a medical professional must be provided. Failure to receive an annual influenza vaccine may result in a clinical site denying placement and result in a change in clinical rotation scheduling.

**8. MCV4 (MENACTRA/MENVEO) / MENINGOCOCCAL MENINGITIS VACCINE:** The CDC recommends that those who are routinely exposed to isolates of N. meningitidis should get one dose.

**9. TUBERCULOSIS SCREENING:** Quantiferon Gold TB Test

Please provide documentation of a negative Quantiferon Gold TB test.

- If Quantiferon Gold TB test is positive, or if you have a history of previous positive TB testing, a negative chest x-ray is required to attend classes or clinical rotations. X-rays are valid for 1 year. For each subsequent year, an updated chest x-ray and a TB screening questionnaire must be provided.
- If the chest x-ray is positive, the applicant/student will not be allowed to enter or continue training until treated and cleared by an infectious disease specialist.
- BCG vaccination does not prevent testing. For students who have received the BCG vaccine, a QuantiFERON Gold TB test (QFT-G) is required.

Please note: TB Skin Tests are not accepted for the initial TB screening. Clinical sites may require retesting (which may be a 2-step skin test or other test) prior to clinical rotations.

**10. COVID-19 VACCINE:** Students should consult CDC guidelines and the Thiel PA Program webpage <https://www.thiel.edu/ee2assets/PA-Program-COVID-and-Vaccination-Policy.pdf> for the most up-to-date information. Please also refer to the COVID policy for each clinical site to which you are assigned.

Clinical sites may require additional vaccinations and documentation,

## Placements *ARC-PA 5<sup>th</sup> ed. Standard 3.03*

ARC-PA 5<sup>th</sup> edition Standard A3.03 states that “Students must not be required to provide or solicit clinical rotation sites or preceptors. The program must coordinate all clinical sites and preceptors for program-required rotations.” Students are welcome to make suggestions to the Program Director and Faculty for clinical sites and preceptors; however, no student is required to do so. Any site or preceptor suggested by a student will be reviewed and evaluated; if determined to provide a suitable educational experience, the site may be approved. Only the program can coordinate and arrange a placement with a clinical site or preceptor.

All students admitted to the Thiel College PA Program should expect that they will be placed at remote, underserved, and/or rural clinical sites away from campus at some point during their education. The program strives to afford all students the opportunity to work and receive training in a variety of clinical settings. The ultimate goal is to ensure that students will become well-rounded providers with experience treating patients from different demographic groups.

Students will not be placed in a clinical rotation with a first-degree family member or close friend.

Students may not switch rotations with another student or alter their assigned schedule in any way. If there is a hardship or extenuating circumstance, the student must notify the Program Director and Clinical Coordinator immediately, and an attempt will be made to find an alternative.

Students must adhere to the schedule given by the preceptor and/or clinical site. If a student cannot be at the site as scheduled, it is the student’s responsibility to notify the site, preceptor, instructor of record, and clinical coordinator immediately. Any missed time must be made up by the student.

## Preceptor Information

### **The Program’s Responsibility to the Preceptor:**

- ❖ Provide the preceptor and student with the Supervised Clinical Practical Experience’s educational objectives and the Thiel College PA Program Clinical Clerkship Manual, which contains all policies and rules that the student must follow. Assume responsibility for selection and assignment of students to the individual preceptor.
- ❖ Coordinate the educational and clinical activities involving the preceptor, clinical facility, student, and PA program faculty.



- ❖ Make training guides, evaluation measures, and other materials available to the preceptor.
- ❖ Provide information at appropriate intervals to the student and preceptor regarding evaluation outcomes. Inform students on Supervised Clinical Practical Experiences they are subject to the policies, protocols, rules, and regulations of the preceptor and clinical facility.
- ❖ Inform students that they are responsible for their own meals, lodging, transportation, uniforms, laundry, health, and personal liability insurance during their clinical Supervised Clinical Practical Experiences.
- ❖ Thiel College requires that each PA student carries professional liability coverage, is up to date on all program required immunizations, has completed a criminal background check, has undergone a physical exam, has passed a drug screen, has completed HIPAA training, and is currently certified in BLS and ACLS.
- ❖ Provide students training sessions regarding infection control, use of universal precautions, TB, and blood borne pathogens.

#### **The Student's Responsibility:**

- ❖ On the first day of the rotation (or when possible, prior to the rotation), the student should take care of any administrative needs, including obtaining a name badge and computer password, and completing any necessary paperwork, EMR training, and additional site-specific HIPAA training, if needed.
- ❖ Act as a responsible health care provider by behaving professionally, legally, and ethically at all times.
- ❖ Arrange the schedule in advance and promptly notify the preceptor and the PA program office of any schedule changes.
- ❖ At all times while at a clinical site, wear an identification badge which identifies the student as a Thiel College PA student while.
- ❖ Report patient data fully and promptly to the preceptor.
- ❖ Proceed with management of the patient only after consulting with the preceptor.
- ❖ Be respectful of the preceptor's primary responsibility to the patient and assist to the best of their ability and within the approved scope of practice for a PA student.

**The Role of the Preceptor:** Provide adequate patient contact hours and experiences to satisfy the learning objectives.

- ❖ Early in the clinical rotation, it is recommended that the preceptor and student formulate mutual goals regarding what they hope to achieve during the rotation.
- ❖ Orient students to the safety and security measures of the clinical site. Familiarize each student with the protocols, rules, and regulations of the facility.
- ❖ Maintain administrative and professional supervision of the student while on duty.
- ❖ Provide direct supervision by qualified staff while the student is performing procedures.



- ❖ Allow students to participate in and attend education offerings by and at the facility.
- ❖ Provide evaluations for each student on PA program forms.
- ❖ Allow and provide students with opportunities to meet objectives.
- ❖ Permit the PA program faculty to visit the site to assess the student, preceptor, and facility.
- ❖ Maintain full responsibility for the patient's medical care and treatment. Ensure that students are not used as a substitute for clinical or administrative staff.
- ❖ Review and sign all the student's entries in patient records. Notify the Director of Clinical Education in a timely manner of any unsatisfactory student conduct or performance.

**Preparing Staff:** The staff of an office or clinic has a key role in ensuring that each student has a successful rotation. By helping the student learn about office, clinic, or ward routines and the location of critical resources, the staff help a student become functional and confident. Students should communicate with the staff about procedures for making appointments, retrieving medical records, bringing patients into examination rooms, ordering tests, retrieving test results, and charting. The preceptor should inform the staff about how the student will interact with them and with patients.

**Informing Patient of Student Involvement:** The patients are essential partners in this educational endeavor as well. All efforts will be made to observe strict confidentiality, respect patient privacy and dignity, and honor their preferences regarding treatment. All students complete HIPAA training prior to their clinical year. Patients must be informed that a physician assistant student will participate in their care, and the patient's consent must be obtained. This may be done through standardized forms at admission or on a person-by-person basis. The students should be clearly identified as PA students and must also verbally identify themselves as such. If th

If the patient refuses the PA student's services, the request must be honored. Patients must know that they will see their regular provider, and they should have an explicit opportunity to decline student involvement.

**Documentation:** If allowed by the preceptor and/or facility, PA students may enter information in the medical record. Preceptors should clearly understand how different payers view student notes as related to documentation of services provided for reimbursement purposes. Students are reminded that the medical record is a legal document. All medical entries must be identified as "student" and must include the PA student's signature with the designation "PA-S." The preceptor cannot bill for the services of a student.

Preceptors are required to document the services they provide as well as review and edit all student documentation.

**Preceptor Evaluations of Students:** Receptors complete an evaluation of the student during their Supervised Clinical Practical Experience. The preceptor will complete a mid-rotation evaluation and an end of Supervised Clinical Practical Experience evaluation that

is a standardized form with categories of expected student competencies. These evaluations can be accessed and returned online. It is the student's responsibility to see that the evaluations are completed and sent to the PA program office.

**Medicare Policy:** Medicare reimbursement requires limited student participation regarding documentation. Students are permitted to document only aspects of the history that include the past medical history, family history, social history, and review of systems. The preceptor must document the History of Present Illness (HPI), Physical Exam (PE), and all medical decision-making for proper billing.

The CMS rules regarding student documentation can be found at:  
<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-NetworkMLN/MLNProducts/Downloads/Teaching-Physicians-Fact-Sheet-ICN006437.pdf>..

**Prescription Writing:** Students may transmit prescribing information for the preceptor, but the physician must sign all 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 his/her own password and personally sign and send the electronic prescription. These guidelines must not be violated by the student or the preceptor.

**Below are some models that can assist preceptors when working with PA Students:**

#### Ambulatory Settings

- ❖ Student follows/observes the first 1-2 days
- ❖ Student sees patients and formally presents
- ❖ Patient then seen by supervising preceptor with student - student feedback provided
- ❖ Student degree of independence to be governed by student experience and preceptor comfort level

#### Inpatient Settings, Medicine, Surgery

- ❖ Assigned inpatient teams
- ❖ Daily rounds, assigned patients, patient presentations
- ❖ Call as is customary, admission H&Ps, admission orders
- ❖ Daily progress notes, orders, labs
- ❖ Involve student in patient management decisions
- ❖ Periodic team educational conferences as is customary
- ❖ Grand Rounds
- ❖ Outpatient clinic duties if applicable
- ❖ As much "hands on" as possible

### Rotation Passport

The Rotation Passports identify specific diagnostic skills, competencies and disease processes that must be successfully learned and/or demonstrated by each student and

observed and documented by a faculty member (or, for some items, an upper-level resident). The goal of this program is to improve the clinical skills of our students, to encourage bedside teaching and feedback, and to enhance the exposure of our students to faculty on the clinical rotations.

Rotation Passports will encompass different competencies for each rotation. It is the responsibility of each student to ensure that the skills are demonstrated and observed, and the passport completed before the end of the clinical rotation.

The Passport is to accompany each student each day during the rotation and must be turned in by noon of call-back day. Lost or misplaced Passports may be reconciled on a case-by-case basis by the Clinical Coordinator.

**Student Passport Responsibilities:** Review the passport with the preceptor. Have the preceptor sign off on the clinical skills once they are performed satisfactorily. Hand in the completed passport. Students are reminded not to leave completion of the passport until the last few days of the clerkship.

**Preceptor Passport Responsibilities:** Review passport with student. Sign off on clinical skills once they are performed satisfactorily.

## Safety

Students must familiarize themselves with the Safety Procedures and Contacts for each clinical rotation site. If unsure, notify the preceptor and the Director of Clinical Education.

Students are also required to review the Thiel College Public Safety Website which can be found here: [https://www.thiel.edu/campus\\_life/campus-resources/public-safety](https://www.thiel.edu/campus_life/campus-resources/public-safety)

When on campus, if a student encounters any issues with safety may contact the following:

- a. Emergency Dispatch: 911 or 724-589-2222.
- b. Non-Emergency Dispatch: 724-589-2222.

## Site Visits

The site visit student evaluations will consist of a faculty member(s) observing the PA student with patients and/or presenting a patient to the clinical preceptor. While being observed, students will perform appropriate histories and physicals, present the cases to the preceptors, and are responsible for answering any questions regarding the problem asked by the faculty members. Discussion topics based upon these cases can be held in order to ascertain medical and clinical knowledge about these topics.

Other points to remember when being evaluated by faculty members include:

- ❖ Confirm date, time, and place of site visit. Directions are helpful.
- ❖ Introduce faculty members to preceptors and office staff.
- ❖ Prior to being observed, ask the patient's permission regarding observation by faculty members.

- ❖ When working with patients do not try to just satisfy the examiners.
- ❖ The patients are your primary concern.
- ❖ Be prepared to discuss disease entities with visiting faculty.
- ❖ Relax.

Reasons which may necessitate a second visit include:

- ❖ Unsatisfactory performances by students
- ❖ Interruption of patient-student encounters by staff, physicians, etc.
- ❖ “Unsatisfactory” patient encounters in which patient is uncooperative (e.g., screaming, contentious 4-year-old)
- ❖ Unprofessional behavior
- ❖ Improper attire and/or identification while at the site. *ARC-PA 5<sup>th</sup> ed. Standard A3.06*

Failure to perform satisfactorily during second site visits may result in program responses such as remediation, additional site visits, or decisions to extend clinical training.

The Program reserves the right to visit students at any time during the Clinical phase of education.

### **Student Expectations and Responsibilities** *ARC-PA 5<sup>th</sup> ed. Standard A3.05*

It is imperative that students enrolled in the PA Program cannot substitute for practicing Physician Assistants or provide unsupervised services while at any clinical site. Students have many additional expectations and requirements while in their clinical year, from both the program and preceptor/preceptor site.

#### **Requirements/Expectations to the Program:**

- ❖ Check email regularly while on rotations. Utilize and maintain the time away process
- ❖ Complete and submit all evaluations by the deadlines
- ❖ Retain copies of all correspondence from and to the program
- ❖ Successfully complete the requirements of the preceptorship as outlined in this syllabus
- ❖ Confer immediately with the Director of Clinical Education if it is felt that adequate clinical supervision is not being provided or that patient care is being compromised
- ❖ Locating living arrangements for rotations
- ❖ Must have health insurance for the duration of their clinical year
- ❖ Adhere to Blood Borne pathogen policy and process as set forth
- ❖ Complete patient logging data in a timely manner
- ❖ Complete onboarding requirements as set forth by the preceptorship site
- ❖ Complete HIPAA training
- ❖ Demonstrate emotional resilience and stability, adaptability, and flexibility

## Requirements/Expectations to the Preceptor/Preceptor Site

- ❖ Contact your site 4-6 weeks prior to the start of your rotation.
- ❖ Be responsible to the preceptor for attendance and satisfactory performance on each learning rotation, as well as comply with local stipulations regarding housing and other amenities.
- ❖ Begin the preceptorship at 8:00 a.m. (or earlier if the preceptor so states) on the first working day of the first week.
- ❖ Thereafter the schedule will be determined by the preceptor(s) (minimum of 40 hours per week, on average).
- ❖ Wear identification bearing her/his photo and name and the words, 'Physician Assistant Student' during working hours at the preceptorship site. *ARC-PA 5<sup>th</sup> ed Standard A3.06*
- ❖ Comply with preceptorship and program dress requirements.
- ❖ Conduct him/herself in a professional manner at all times. This includes behavior toward patients, faculty, peers, preceptors, staff and other members of the community.
- ❖ Sign notes written in patients' charts with 'PA Student' following the student's signature.
- ❖ If electronic medical records systems are utilized by the clinical site, the student will comply with the rules as set forth by the site.
- ❖ Write prescriptions when directed to do so by the preceptor. The preceptor will review and sign all such prescriptions.
- ❖ Respect patient confidentiality at all times in compliance with HIPAA.
- ❖ Care is to be taken to exclude identifying information in discussions outside the clinical setting.
- ❖ Confer immediately with the preceptor and the program if the student becomes aware of any potential medical liability incident regarding her/his activities.
- ❖ Ensure that all obligations with individuals or institutions at the clinical preceptorship site are satisfied prior to leaving.
- ❖ Behave in a responsible manner with his/her preceptor, and follow rules and regulations of the hospital or other institutions in which s/he works.
- ❖ Seek out opportunities to perform procedures on the Recommended Procedure List.

## Student Insurance Responsibility

### **Professional Liability Insurance**

All students are required to have a personal occurrence-based professional liability insurance policy with at least \$1 million individual/\$3 million aggregate coverage. This is available through the American Academy of Physician Assistants. Students are required to renew this as needed throughout the duration of the program. Any student who has a lapsed policy will be unable to continue until the policy has been renewed. This could result in disciplinary action and delayed graduation.

If the PA Student is involved in care of a patient and an incident occurs, it is imperative that the student notify the PA Program and the insurance carrier within 24 hours.

### **Health Insurance** *ARC-PA 5<sup>th</sup> ed. Standard A 3.08c*

Personal health insurance coverage is required for admission into and completion of the Thiel College PA Program. Students must maintain a valid health insurance policy throughout their time of enrollment in this program. Students are to complete the Coverage Selection Form to either elect or decline the insurance that Thiel College offers. Proof of College or other health insurance coverage must be provided to the PA program.

Failure to maintain a valid insurance policy will result in removal from clinical rotations until proof of compliance is provided, which in turn may result in delay of graduation from the program. At the initiation of and throughout the clinical year, students will be required to show proof of a valid health insurance policy. Any costs incurred through illness, injury (either on or off-site at any time during the course of the program), and/or a hospitalization during attendance at the PA Program is the students' sole financial responsibility.

## Travel

### **Clinical Site Travel**

Students are required to travel to their clinical sites as scheduled by the program and in accordance with their preceptor's schedule. MSPAS program rotations can occur in various geographic locations which may be at distance from Thiel College. Students will be notified in as timely a manner as possible of such placements and are required to coordinate their own travel arrangements. The cost of transportation is the responsibility of the student. In the event of an unforeseen circumstance, a student may have to travel at the last minute due to site availability.

### **Holiday Travel**

During the clinical year of the program, students begin to function as members of the healthcare team. For that reason, students will experience an irregular schedule and may be required to work during holidays, weekends, or nights. No student should make holiday travel arrangements without consulting with the clinical faculty and his/her clinical preceptor.

### **Inclement Weather**

Students on rotation sites which are not affected by the adverse weather conditions are required to attend their rotation even if Thiel College is closed. Conversely, students at a clinical site with significant adverse weather conditions must use their best judgment in consultation with their preceptors in determining their attendance at the site regardless of the College's status. Arrangements must be made with the preceptor/site to make up any lost time to satisfy the requirement for clinical hours on that rotation.

### **Travel for Job Interviews**

During the final semester of the clinical year, students may require limited time off to attend job interviews. All requests for travel to interviews must be discussed with and approved by the Clinical Coordinator and the clinical preceptor. Students must make up all missed time to meet minimum hour requirements for that rotation.

### **Return to Campus for Call Back Day**

Students who are greater than 500 miles away from Thiel College may be granted a day off prior to call back days, to return from their clinical site. This must be approved by the Instructor of record and Preceptor in advance, and the minimum number of clinical hours must still be met.

## **Universal Precautions and Bloodborne Pathogens *ARC-PA 5<sup>th</sup> ed. Standard A3.08***

Students are responsible for following OSHA Guidelines for universal precautions at clinical rotation sites, including the use of protective gloves, eyewear, and clothing, the proper use and disposal of sharps, regular hand washing/hand sanitation, and other precautionary measures.

The principle of universal precautions recognizes that any patient may be infected with microorganisms that could be transmitted to other persons. Observance of universal precautions will help to provide better protection for every staff member.

### **Universal Precautions and Bloodborne Pathogens Training:**

The guidelines are summarized below and will be presented in greater detail in the PA Professional Issues didactic modules and pre-clinical training activities prior to starting clinical rotations. Individual clinical sites may also provide orientation sessions regarding blood borne pathogens. Students should also familiarize themselves with the hospital/clinical sites' specific policies regarding universal precautions.

### **Universal Precautions Guidelines: *ARC-PA 5<sup>th</sup> Standard A3.08 a***

- Act as though all patients you have contact with have a potentially contagious blood borne disease. (Because a patient's status may not be known and because infected patients may be asymptomatic, it is necessary to use basic precautions with every patient.)

- Avoid direct contact with blood, body fluids, secretions, excretions, mucous membranes, non-intact skin, and lesions.
- Avoid injuries from all “sharps”; do not recap needles and use safety caps.
- Avoid direct contact with items, objects, and surfaces contaminated with blood, body fluids, secretions, and excretions.
- Dispose of all “sharps” promptly in special puncture resistant containers
- Dispose of all contaminated articles and materials in a safe manner prescribed by law.
- Wash hands frequently and thoroughly, especially if they become contaminated with blood, body fluids, secretions, and excretions.
- Depending on job duties and risk of exposure, using appropriate barriers, including gloves, gowns, aprons, caps, shoe covers, leggings, masks, goggles, face shields, and equipment such as resuscitation devices to protect skin and mucous membranes, especially eyes, nose, and mouth.
  - NOTE: These items of protective apparel, including gloves are removed after each use and are properly disposed. The same pair of gloves, etc., are NOT to be worn from one patient or activity to another.
  - Students should wear protective equipment as directed by their clinical preceptor or facility protocol.
- All patient specimens should be bagged per facility protocol before transport to the laboratory.

**Exposure to Infectious and Environmental Hazards:** *ARC-PA 5<sup>th</sup> Standard A3.08 b*

Accidents will occasionally occur in the laboratory or in the clinical setting. Exposure to blood borne pathogens is a risk assumed by all healthcare providers. The National PEP-line provides expert guidance in managing health care worker exposures to HIV and hepatitis B and C. Callers receive immediate post-exposure prophylaxis (PEP) recommendations. **1-888-448-4911** | Occupational PEP: 11 am to 8 pm EST, seven days a week - Non-occupational PEP: 9 am to 8 pm ET, Monday through Friday; 11 am to 8 pm ET, weekends & holidays

**Laboratory or classroom setting:** If a student is injured in a laboratory or classroom setting:

1. The instructor and Program Director should be notified immediately.
2. The student should seek prompt evaluation and treatment at the Student Health Center, Urgent Care Clinic, or Emergency Room.

**Clinical Setting:** In the event a student is injured by a contaminated “sharp” or is exposed in any manner to blood or potentially infectious bodily fluids in the course of their assigned clinical work, the following steps should be followed for proper treatment and follow-up for the student. Upon possible exposure to a blood borne pathogen:

1. For skin and wounds, wash the affected area with soap and water. Eyes and mucous membranes should be copiously flushed with water. Notify your clinical preceptor immediately.
2. Follow facility protocols regarding evaluation. Most facilities will require you to report immediately to employee health or the emergency department following



exposure. Failure to follow up properly may make it difficult or impossible to obtain source patient blood in facilities in cases in which this may be possible.

3. In sites without employee health or emergency departments, or if the site protocol is unclear, proceed immediately to the nearest emergency department for assessment. In cases in which prophylactic medical treatment is indicated, it is believed to be most effective when administered as quickly as possible.
4. The treating healthcare professional will request information about your medical history, the source patient's history (if known) and the nature of the exposure. They may request permission to draw baseline laboratory studies. They will discuss your risk of contracting a blood borne disease and the risks and benefits of prophylactic treatment. In deciding whether to receive post-exposure prophylactic treatment, students might also wish to consult with the National Clinicians Post-Exposure Prophylaxis Hotline: 888-448-4911.
5. Students should follow up as directed by their treating healthcare provider. Ongoing follow-up may take place at the initial treating facility or the student may be referred to a healthcare provider with expertise in infectious disease. The program may be able to assist the student in finding an infectious disease specialist as requested or required.
6. Because students are not employees of Thiel College or the clinical sites, payment for assessment and treatment is the responsibility of the student and their insurance carrier.
7. While there is no guarantee or requirement for such, many of the clinical sites can and will arrange for immediate medical care of students in the event of accidental injury or illness (costs incurred may be charged to the student's personal health insurance policy). However, they are not obligated to take responsibility for subsequent costs involved in follow-up care, treatment, counseling, hospitalization, preventive care, etc.

### **Student Incident Reporting**

Ultimately, the student is responsible for initiating care after exposure to possible blood borne pathogens and reporting the incident.

1. An incident form must be completed and submitted to the clinical site and the PA Program. The incident reporting form can be found in the Forms Section at the end of this manual or from the Program staff.
2. An incident report should be submitted to the Program Director as soon as possible, however, students should not delay prompt evaluation and treatment to complete paperwork.
3. The Clinical Coordinator must be notified within 24 hours via e-mail of any exposure/possible exposure (i.e., needle-stick injuries, splashing of body fluids on exposed mucous membranes, inhalation exposure, etc.).

### **Financial responsibility** *ARC-PA 5<sup>th</sup> ed. Standard A3.08 c*

All costs for treatment and follow-up of an injury and/or exposure are the student's sole responsibility. This includes any visits to a healthcare provider, emergency room or urgent

care facility, laboratory, or hospital. Please refer to the attendance and absenteeism policies in this handbook to account for all time missed due to clinical injury or exposure.

## **Additional Rotation Policies**

### **Meals:**

Some clinical sites may provide meals to student providers at their own discretion. The program does not require nor request that any clinical site provide meals to student providers. Students should not assume that they are automatically welcome or invited into physician's lounges or cafeterias at hospital institutions and should enter these areas only if invited by a staff member or preceptor.

### **Medical Records:**

You are not permitted to copy patient records even if they are de-identified under ANY circumstance. This includes using cell phones to take pictures of records, photocopying, scanning, etc. Accessing your personal health or anyone's records other than a person you are responsible for treating using any health system's EMR software is STRICTLY PROHIBITED.

### **Cell Phones and Social Media:**

The use of cell phones, iPads, notebooks, etc. should only be used as needed for work and personal emergency situations during clinical activities. Cell phones should never be used in a patient room, areas visible by patients, in a procedure room, or in the operating room. Taking pictures of anyone or anything while at clinical sites under ANY circumstance is STRICTLY PROHIBITED.

Students are not permitted to post material on social media that has information about a patient encounter even if identifying information is omitted. 2. Students are not permitted to post material on social media that contains pictures of a medical facility where they are rotating. 3. Students are not permitted to post any derogatory or disparaging material on social media that involves another student, faculty, staff, University representatives, Institution/Practice representatives, health care employees, patients, or preceptors.

### **Clinical Site Staff:**

Students do not substitute for clinical or administrative staff while on site at clinical rotations.

Students may not fraternize with preceptors, site staff, or site administrators.

PA students on clinical rotation must work under the direct supervision of a board-certified licensed physician, PA-C, or NP.

### **General Behaviors:**

No student shall engage in the use of any form of tobacco while at clinical sites. This includes chewable tobacco products, snuff, vaping, lighted cigarettes, cigar, pipe or other

vapor producing products. Students cannot appear at the College or clinical sites under the influence of alcohol or drugs.

Maintain a functional mobile phone number and Thiel College email. It is the responsibility of each student to make sure the PA Program always has the most updated contact information to reach him or her throughout the entire clinical year.

**Forms:** Please complete the following forms and return them to the PA program prior to the start of training.

- ❖ Acknowledgement of Clerkship Policies
- ❖ Incident Reporting Form



## Thiel College Physician Assistant Program Clinical Clerkship Manual Receipt and Acknowledgement

I acknowledge that I have received and read the Thiel College Physician Assistant Program Clinical Clerkship Manual and have had an opportunity to have any questions answered regarding its content.

I understand and acknowledge that I am bound by policies and procedures contained in the Thiel College Physician Assistant Program Clinical Clerkship Manual, the Thiel College Student Handbook, and the Thiel College Catalogue. I agree to abide by the policies and procedures contained in these documents.

The Thiel College Physician Assistant program reserves the right to update the PA Program Clinical Clerkship Manual a without prior notice. The most recent Physician Assistant Program Clinical Clerkship Manual will supersede all previously distributed versions.

My continuation in the Thiel College Physician Assistant program will be contingent upon submission of a signed and dated Receipt and Acknowledgement form

Name (print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Acknowledgement of Updates to the Thiel College Physician Assistant Program Clinical Clerkship Manual, if applicable:

Date \_\_\_\_\_ Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_ Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_ Name \_\_\_\_\_

Signature \_\_\_\_\_



## Thiel College Physician Assistant Program Incident Report

Student Name: \_\_\_\_\_

Date Form Completed: \_\_\_\_\_

Date Incident Occurred: \_\_\_\_\_ Time: \_\_\_\_\_

Location/Address where incident occurred:

\_\_\_\_\_  
\_\_\_\_\_

Preceptor/Site/Instructor Name \_\_\_\_\_

Preceptor/ Site/Instructor Telephone #: \_\_\_\_\_

Has an Incident Report been filed at the Institution/Office? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, who filed the report? \_\_\_\_\_

Describe the incident in detail. Include date, time, and names of any other personnel present, etc. Attach additional sheets, if necessary. \_\_\_\_\_

\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Name (Signature) \_\_\_\_\_ Date \_\_\_\_\_