



CHARLESTON
SOUTHERN
UNIVERSITY

PHYSICIAN ASSISTANT PROGRAM

Clinical Year Student Handbook
2023

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PROGRAM CONTACT INFORMATION

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2023 CLINICAL ROTATION SCHEDULE

ROTATION	CLINIC DAYS	CALL BACK DAYS
Rotation 1	January 2 – February 1	February 2 – 3
Rotation 2	February 6 – March 8	March 9 – 10
Rotation 3	March 13 – April 12	April 13 – 14
BREAK: APRIL 17 – 21		
Rotation 4	April 24 – May 24	May 25 – 26
Rotation 5	May 29 – June 28	June 29 – June 30
Rotation 6	July 3 – August 2	August 3 – 4
BREAK: AUGUST 7 – 11		
Rotation 7	August 14 – September 13	September 14 – 15
Rotation 8	September 18 – October 18	October 19 – 20
SUMMATIVE EVALUATION WEEK: OCTOBER 23 – 27		
Rotation 9	October 30 – November 29	November 30 – December 1
REMEDIATION AND BOARD REVIEW WEEK: DECEMBER 4 – 8		
GRADUATION: SATURDAY, DECEMBER 9		

PURPOSE

This handbook is provided to guide students through the activities, policies, and circumstances unique to the *Supervised Clinical Practical Experience*. Clinical education is referred to throughout this handbook as the Supervised Clinical Practice Experience (SCPE).

This *Clinical Year Student Handbook* functions in conjunction with the policies and procedures of the Physician Assistant (PA) Program as found in the *PA Program Student Handbook* and those of Charleston Southern University (CSU) found both in the *CSU Graduate Catalog* and the *CSU Student Handbook*. The information outlined in this handbook is specific to the CSU PA Program and does not supersede the policies of CSU except as specifically permitted by university policy.

This handbook is intended as guidance but does not address every situation that may arise in the CSU PA Program Clinical Year. The PA Program reserves the right to amend this handbook at any time. As such, amendments or revisions may or may not be in writing but will be communicated clearly. Any questions not addressed in this handbook should be discussed with the Director of Clinical Education.

MISSION STATEMENT

The mission of the Charleston Southern University Master of Medical Science in Physician Assistant Studies (MMSPAS) Program is to educate compassionate and highly motivated individuals in a Christian environment who excel in providing patient-centered care, practicing as an inter-professional team, serving as leaders in their communities, and advancing the PA profession.

PROGRAM GOALS

- Recruit diverse and highly-capable students to the program.
- Deliver an outstanding curriculum that prepares students to provide patient-centered medical care upon graduation.
- Foster a healthy and supportive Christian learning environment that prepares students appropriately to transition from student to clinician.
- Engage faculty and students in opportunities for service, leadership, and scholarly activities in the school, our community and the profession.

GOALS OF THE CLINICAL YEAR

The clinical year takes students from the theoretical classroom setting to an active, hands-on learning environment to prepare them for a lifetime of continued refinement of skills and expanded knowledge as a practicing PA. To this end, the goals of the clinical year include:

- Apply didactic knowledge to supervised clinical practice.
- Develop and sharpen clinical problem-solving skills.
- Expand and develop medical fundamentals of knowledge.
- Refine the art of history taking and physical examination skills.
- Sharpen and refine oral presentation and written documentation skills.
- Develop an understanding of the PA role in health care delivery.
- Prepare for the Physician Assistant National Certifying Exam (PANCE).
- Develop interpersonal skills and professionalism necessary to function as part of a medical team.

CLINICAL YEAR CURRICULUM OUTLINE

Course Number	Course Name	Credit Hours
MPAS 610	Family Medicine Rotation	5
MPAS 620	Internal Medicine Rotation	5
MPAS 630	Emergency Medicine Rotation	5
MPAS 640	Surgery Rotation	5
MPAS 650	Pediatrics Rotation	5
MPAS 660	Behavioral Health Rotation	5
MPAS 670	Women's Health Rotation	5
MPAS 680	Elective 1 Rotation	5
MPAS 690	Elective 2 Rotation	5
MPAS 601	The Graduate Project II	1
Total Clinical Year Hours		46

PHYSICIAN ASSISTANT COMPETENCIES

The PA Program has established course goals, course competencies and learning objectives that apply to all Supervised Clinical Practice Experiences (SCPEs) as documented in each SCPE syllabus. Each individual SCPE is a unique learning experience with rotation-specific course objectives that are designed to complement and further explain the course competencies. Each SCPE has an individualized syllabus that defines the rotation-specific objectives therein. You will receive a copy of this syllabus along with this handbook.

STUDENT COMPETENCIES

Upon completion of the clinical year, clinical education phase students will have acquired the knowledge, interpersonal skills, clinical reasoning and problem-solving abilities, clinical and technical skills, and professional behaviors required for entry into PA practice:

Knowledge

1. Demonstrate an understanding for the medical, behavioral and social knowledge necessary to evaluate and manage patients across all ages and patient populations in both primary care and specialty settings.
2. Demonstrate an ability to make informed decisions about the care of patients consistent with up-to-date scientific evidence and sound clinical judgment.

Interpersonal Skills

3. Demonstrate an ability to elicit an accurate medical history on patients.
4. Demonstrate the ability to deliver accurate patient education that encompasses verbal, non-verbal and written forms of information to the patient, their family, and their care team that considers disease prevention and health awareness.
5. Demonstrate excellent communication skills with patients, their care teams, and other members of the healthcare team that adapts to the needs of that person as necessary.

Clinical Reasoning and Problem-Solving Abilities

6. Demonstrate an ability to formulate a differential diagnosis relevant to the findings in the history and physical exam.
7. Demonstrate an ability to recommend appropriate diagnostic studies to assist in the evaluation and treatment of the patient.
8. Demonstrate the ability to develop and implement an appropriate therapeutic management plan, either pharmacological or non-pharmacological, based on the patient's medical history, physical exam, and diagnostic study findings.

Clinical and Technical Skills

9. Demonstrate the ability to perform a detailed physical exam relevant to the medical history.
10. Demonstrate the ability to perform clinical procedures common to general medicine practice including but not limited to: surgical wound management (e.g. staple, suture, drain placement/removal, basic skin biopsy, incision and drainage), administration of topical and local anesthesia, simple laceration repair with suturing, injections and aspirations (e.g. trigger point, cyst, bursa, and joint injections), peripheral intravenous access (e.g. intravenous access or venipuncture), nasopharyngeal swabs, bladder catheterization, and a Papanicolaou test.
11. Demonstrate the ability to perform clinical skills common to general medical practice including but not limited to: interpretation of diagnostic tests and interpretation of diagnostic imaging.

Professional Behaviors

12. Demonstrate professionalism with high ethical principles, sensitivity, and responsiveness to all patients, their care teams, and members of the healthcare team.

DEFINITION OF A PRECEPTOR ROLE

The preceptor is an integral part of the PA Program at CSU. Preceptors serve as role models for the student during their clinical year and guide student development of history taking, physical examination, development of treatment plans, effective communication and appropriate oral and written presentation skills.

PRECEPTOR RESPONSIBILITIES

The CSU PA Program will designate at least one preceptor as the instructional faculty member at each clinical site who will assess and supervise the student's progress in achieving the given course competencies. For each SCPE, students will be provided contact information for the designated preceptor responsible for oversight of the student's rotation. The following responsibilities are essential:

1. Provide student orientation which addresses the following: use of and access to local resources including facilities, computers, and internet; clinical site patient care practices including identifying which patients students are allowed to see; safety issues including exposure to hazardous materials, exposure control, and procedures to be followed in event of exposure; access to and use of patient health records and medical documentation policies and procedures, and the student's schedule.
2. Address appropriate safety and security measures for students in all areas where student will be participating in clinical education.
3. At the beginning of each student's clinical rotation, review the goals and learning objectives and outcomes for the SCPE with the student in an effort to devise a plan for attainment of these.
4. Provide students with opportunities to provide supervised direct patient care and clinical skills/procedural experiences.
5. Provide early and frequent feedback to students regarding their clinical performance and ways they might improve their performance.
6. Verify and document student achievement of technical skills competency if demonstrated during the rotation.
7. Complete the Preceptor Mid-Rotation Evaluation of Student to provide the student with feedback concerning their performance up to that point and review progress toward fulfilling their rotation goals.
8. Complete the Preceptor End-of-Rotation Evaluation of Student and return to the program.
9. Immediate notification to the program of the following: student behavior or performance is judged to create risk for the clinical site or its patients, or the preceptor determines it will be unable to provide a previously agreed upon student rotation/clinical experience.
10. Preceptors will be asked to complete the Preceptor Evaluation of Student Preparedness for Rotations, which is an assessment of how well students were prepared overall for the clinical year. The survey will be published at the end of the fourth rotation to those preceptors who've hosted students up to that point.

PRECEPTOR-STUDENT RELATIONSHIP

The preceptor should maintain a professional relationship with the PA student and at all times adhere to appropriate professional boundaries. Social activities and personal relationships outside of the professional learning environment should be appropriate and carefully selected so as not to put the student or the preceptor in a compromising situation. Contact through web-based social networking sites (e.g., Facebook, Instagram, Twitter) should be avoided until the student fully completes the PA Program. Please consult the Director of Clinical Education regarding specific university policies regarding this issue if you have any additional questions.

SUPERVISION OF THE PA STUDENT

During a student's time at the clinic or hospital, the preceptor must be available for supervision, consultation, and teaching, or designate an alternate preceptor. Although the supervising preceptor may not be with a student during

every shift, it is important to clearly assign students to another provider who will serve as the student's preceptor for any given time interval. Having more than one clinical preceptor has the potential to disrupt continuity for the student but also offers the advantage of sharing preceptorship duties and exposes students to valuable variations in practice style, which can help learners develop the professional personality that best fits them. In the case where supervision is not available, students may be given an assignment or may spend time with ancillary staff (x-ray, lab, physical therapy, etc.), as these experiences can be very valuable. The preceptor should be aware of the student's assigned activities at all times.

EXPECTED PROGRESSION OF PA STUDENTS

PA students are trained to take detailed histories, perform physical examinations, give oral presentations of findings, develop differential diagnoses, and develop management plans. As the clinical year progresses, they should be able to more effectively develop an assessment and plan, though this will involve discussion with the preceptor. If the preceptor deems it necessary, students initially may observe patient encounters. However, by the end of the first week, students should actively participate in evaluating patients. As the preceptor feels more comfortable with the student's skills and abilities, the student should be allowed progressively increasing supervised autonomy.

EVALUTION AND GRADING

Please see each SCPE-specific syllabus for details about the evaluation and grading of students on SCPEs.

PATIENT LOGGING

During clinical rotations, students must have exposure to preventive, emergent, acute, and chronic patient encounters (ARC-PA Standard B3.03a). They must also have exposure to patients across the lifespan to include infants, children, adolescents, adults, and the elderly (ARC-PA Standard B3.03b). Additionally, students must have exposure to women's health conditions to include prenatal and gynecologic care (ARC-PA Standard B3.03c), conditions requiring surgical management including pre-operative, operative, and post-operative care (ARC-PA Standard B3.03d) and behavioral and mental health conditions (ARC-PA Standard B3.03e). Lastly, students must have exposure to patient encounters that occur in the emergency department, inpatient, outpatient, and operating room settings (ARC-PA Standard B3.04).

Patient logging is highly beneficial to ensuring students are meeting the competencies expected of students throughout their clinical year. Therefore, it is required that all patients seen by the student are logged into Typhon; this includes every encounter regardless of setting or level of participation. All patient information must be logged with no patient identifying information and in accordance with HIPAA. Noncompliance with patient logging will result in a reduction of points for the patient logging component of the course grade.

Students are to ensure they are working to achieve the minimum patient exposure requirements for the clinical year as outlined in the Clinical Year Student Handbook:

SCPE Minimum Patient Exposure Requirements	
Exposure Category	Number of Encounters
Patient Encounters (B3.03a)	
Preventive Care	50
Emergent Care	20
Acute Care	150

Chronic Care	100
Lifespan (B3.03b)	
Infant (<2Y)	25
Children (2-10Y)	25
Adolescents (11-17Y)	25
Adults (18-64Y)	200
Elderly (65+Y)	100
Women's Health (B3.03c)	
Prenatal	20
Gynecologic	50
Surgical Management (B3.03d)	
Pre-operative	15
Intra-operative	15
Post-operative	15
Behavioral Health (B3.03e)	
Behavioral and Mental Health Conditions	50
Setting (B3.04)	
Emergency Department	50
Inpatient	50
Outpatient	200
Operating Room	15
Minimum Number of Encounters	1000

The clinical year team will monitor student entries on a regular basis for completion. All patient logging must be completed by 5pm on the last day of the rotation. Falsification of entries is considered a violation of the Academic Integrity Policy.

The clinical year team will monitor student progress to ensure exposure to key patient encounters and setting types for rotations is occurring early. Reassignment of an elective rotation by the Director of Clinical Education may be necessary for a student who is not meeting the minimum patient exposure requirements. If an elective rotation is not available, students may be required to complete additional clinical work to ensure exposure to these encounters, which may delay graduation.

CLINICAL SITE AND PRECEPTOR EVALUATIONS

All students are expected to complete course evaluations in the week preceding final exams. These evaluations are an important part of Charleston Southern University's assessment process, so student cooperation in completing them is greatly appreciated. Students will be provided with an electronic evaluation tool to collect feedback on the course faculty, facilitators, content, and delivery. Any data collected from this evaluation is kept confidential, and no disciplinary action is made to students for completing the evaluation. Students are encouraged to provide constructive feedback on these evaluations. Noncompliance with completion of these evaluations will result in a reduction of professionalism points for the course.

PROFESSIONALISM POLICY

Students are held to the same standard during their SCPEs as they are on campus and are expected to abide by all Charleston Southern University and PA Program policies regarding ethical conduct, integrity, honesty, and professionalism. Breaches in ethical conduct will be handled per the Academic and Professionalism Policy. Students are expected to conform to the highest standards of ethical and professional conduct which include, but are not limited to:

1. Adhere to standards of care in the role of the PA in the healthcare team.
2. Demonstrate compassion, integrity, and respect for others.
3. Demonstrate responsiveness to patient needs that supersedes self-interest.
4. Show accountability to patients, society, and the PA profession.
5. Demonstrate cultural humility and responsiveness to diverse patient populations, including diversity in sex, gender identity, sexual orientation, age, culture, race, ethnicity, socioeconomic status, religion, and abilities.
6. Show commitment to ethical principles pertaining to provision or withholding of care, confidentiality, patient autonomy, informed consent, business practices, and compliance with relevant laws, policies, and regulations.
7. Demonstrate commitment to lifelong learning and education of students and other healthcare professionals.
8. Demonstrate commitment to personal wellness and self-care that supports the provision of quality patient care.
9. Exercise good judgment and fiscal responsibility when utilizing resources.
10. Demonstrate flexibility and professional civility when adapting to change.
11. Implement leadership practices and principles.
12. Demonstrate effective advocacy for the PA profession in the workplace and in policymaking processes.

This was taken directly from the NCCPA's Competencies for the Physician Assistant (PA) Profession revised in 2021, and the PA Program at CSU uses these guidelines as a part of the student's professional behavior expectations

If preceptors observe any concerns about a student's professionalism, they should contact the Director of Clinical Education immediately.

ATTENDANCE POLICY

Students are expected to attend all supervised clinical rotations assigned by the program's Director of Clinical Education and to be at their rotation/experience when scheduled.

Each rotation is five weeks in length and the student is expected to be at the clinical site when the preceptor or designated preceptor is working. Students may be required by some clinical sites to engage in clinical or education activities during the evenings and/or weekends.

Any student missing a clinical day must notify the Clinical Preceptor or Clinical Site of the unexcused absence as soon as possible on the day of absence. The student must also notify the Director of Clinical Education by completing an Excused Absence Request Form within two business days following the unanticipated absence. Every effort should be made to make direct contact with the Clinical Preceptor or the Clinical Site to confirm the message is received.

It is the student's responsibility to notify the Director of Clinical Education of any known anticipated absence and receive prior approval by the Director of Clinical Education by filling out an Excused Absence Request Form. Once approved by the Director of Clinical Education, the student is to then take the form to their Clinical Preceptor for approval. Once approved by the preceptor, the student is to return the form to the Director of Clinical Education, where it will be placed in the student's file. Documentation (i.e. doctor's note, obituary) may be required to justify the absence(s), especially in the case of an illness or emergency. Approval of excused absences is at the discretion of the Director of Clinical Education.

Students are permitted to miss three clinical days over the course of the entire clinical year to use for purposes of an Excused Absence. The Excused Absence must not exceed two days in any given rotation. Excused Absences will not be approved for use during Call Back Days, the Summative Evaluation, or Board Review Week.

Students are not permitted any unexcused absence days during their clinical year. An unexcused absence will result in a professionalism warning.

SCHOOL HOLIDAYS AND INCLEMENT WEATHER

Official school holidays and school campus closures for inclement weather do not apply to students on SCPE. The attendance needs of the SCPE site supersede the traditional school holiday schedule. If the SCPE site is open and the preceptor is working during school holidays or days that the school is closed for inclement weather, the student is expected to be in attendance unless other arrangements have been made with the Director of Clinical Education.

Students in the clinical phase of the program should exercise reasonable judgement, especially in light of the fact that they may be a considerable geographic distance from campus with dramatically different circumstances. If the facility the student is assigned for the specific rotation is closed, the student will not report to that site for the day(s) closed and must notify the Director of Clinical Education of the business closing.

TRAVEL DAY

If the SCPE site is *greater* than 200 miles from the CSU campus, the student is excused from the clinical site at noon on the day prior to Call Back Days. This is to allow time to travel back to the Charleston area.

APPEARANCE AND ATTIRE POLICY

Attire for the PA Program is described as business casual. Clothing should allow for adequate movement and should not be tight, short, low cut, or expose the trunk with movement. This is expected in both the classroom and on clinical rotations. If the appearance standard for a clinical site is stricter than those outlined below, the student must adhere to

that clinical site's policy. Clothing should be clean, pressed and in good condition without tears or holes. In addition, students should follow these guidelines:

- **Hair** - Hair should be neat, clean, and of a style that stays out of the face when giving patient care. Hair color must be a natural tone. No brightly colored or elaborate ornaments may be worn in the hair. Males may have beards and/or mustaches; however, these must be kept well-groomed and clean.
- **Nails** - Fingernails should be short enough so that they will not injure patients. For clinical settings, clear or light colored nail polish may be worn, but must be kept neat in appearance. Artificial nails of any type are not allowed in clinical settings.
- **Jewelry** - Watches, wedding rings and earrings are permissible. Students are not to wear excessive bracelets or necklaces that are a distraction in lectures or in clinical settings.
- **Odors** - Perfumes, colognes, lotions, smoke, and deodorants with heavy scents are not permitted.
- **Piercings & Tattoos** - Ear piercings and nostril piercings are acceptable during the didactic year. However, it should be left to the discretion of clinical sites to set appearance standards for piercings during the clinical year. No earlobe expanders are allowed. Tattoos should be covered in the clinical setting when possible, with appropriate attire.
- **Shoes/Socks** - Acceptable shoe styles include oxfords, lace-ups, and loafers, clogs, boots, flats, sandals and moderate heels. Flashy athletic shoes, flip-flops, or slippers are not acceptable.
- **Shirts** - Unacceptable shirts include tee shirts, tank tops, spaghetti strap blouses, shirts exposing midriff, shirts with slogans, sweatshirts and hoodies.
- **Bottoms** - Unacceptable bottoms include denim jeans, cargo pants, pants with holes or rips, shorts of any type, sweatpants, exercise pants, leggings without skirts or dresses, mini-skirts, skorts and sun dresses. Skirts and dresses should be no more than three inches above the knee.

Clinical supervisors, preceptors, or physician assistant faculty reserve the right to dismiss from a clinical or educational site any student who is not appropriately attired. That action may result in requiring further professional, developmental training for the student, and may also interfere with graduation in a timely manner or even completion of the program.

STUDENT IDENTIFICATION IN CLINICAL SETTINGS

Students must be clearly identified as Physician Assistant students in clinical settings at all times. They are to be clearly distinguished from other health profession students and practitioners. Students will ALWAYS introduce themselves to patients, patient family members and clinical site staff by stating their full name and position title – “Physician Assistant Student.”

Students will wear a short white lab coat, embroidered with the Charleston Southern University PA Program logo, during all assigned rotation activities unless otherwise directed by the clinical preceptor. Students should wear either their CSU Student ID badge or a site issued badge for each rotation.

STUDENT HEALTH POLICY

Students are neither an employee of Charleston Southern University nor the clinical preceptor site; therefore, payment for medical evaluation, treatment and care is the responsibility of each student and their insurance carrier for any care needed while in the program. Each student is required to carry their own individual health insurance throughout their time in the program.

Students are expected to maintain up to date records of their vaccinations and TB screenings through the clinical phase of the program as outlined in the Student Health Policy. *Please reference the Student Health Policy for additional information.*

BACKGROUND CHECK AND URINE DRUG SCREEN POLICY

As outlined in the Background Check and Urine Drug Screen Policy, all CSU PA Program students will be required to undergo a background check and urine drug screening annually, or more frequently, at the discretion of the program. If a student declines to undergo the background check or urine drug screen or if findings of a serious nature are revealed, this may be grounds for dismissal from the program.

Background check and drug testing results that limit the program's ability to secure a student's clinical experiences may prevent them from progressing in their clinical phase of study, or potentially being recommended for graduation. *Please reference the Background Check and Urine Drug Screen Policy for additional information.*

STUDENT EXPOSURE TO INFECTIOUS AND ENVIRONMENTAL HAZARDS POLICY

The policy of the Charleston Southern University Physician Assistant Program is to follow guidelines made by the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) regarding exposure to infectious and environmental hazards. *Please reference the Student Exposure to Infectious and Environmental Hazards Policy for additional information.*

STUDENT EMPLOYMENT POLICY

During clinical rotations, students will not be used to substitute for regular clinical or administrative staff under any circumstances. If a student is asked to substitute for a staff person on a rotation, he or she must contact the Director of Clinical Education. Information collected will be presented to the Curriculum Committee to determine the suitability of continued use of the preceptor. This committee may consider the following actions if a concern arises: conduct a site visit prior to the next student experience at the site or with the preceptor, conduct a site visit in conjunction with the next student placement, communication with the preceptor and/or office manager, or removal of the clinical site or preceptor from program use. Assignment of preceptors will be modified as necessary to ensure the expected learning outcomes will be met by each student by program completion. *Please reference the Student Employment Policy for additional information.*

DOCUMENTATION

If allowed by the preceptor and/or facility, PA students may enter information in the medical record. Preceptors should clearly understand how different payors view student notes as related to documentation of services provided for reimbursement purposes. Any questions regarding this issue should be directed to the clinical coordinator. 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. Although student documentation may be limited for reimbursement purposes, students' notes are legal and are contributory to the medical record. Moreover, writing a succinct note that communicates effectively is a critical skill that PA students should develop. The introduction of EMRs (electronic medical records) presents obstacles for students if they lack a password or are not fully trained in the use of one particular institution's EMR system. In these cases, students are encouraged to hand-write notes, if simply for the student's own edification, which should be reviewed by preceptors whenever possible for feedback.

MEDICARE POLICY

Medicare reimbursement requires limited student participation in regard to documentation. Students are allowed 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. Following is a link to the Center for Medicare and Medicaid Services (CMS), which provides

direct access to CMS rules regarding student documentation.
<https://www.cms.gov/MLNProducts/downloads/gdelinesteachgresfctshst.pdf>

PRESCRIPTION WRITING

Students may transmit prescribing information for the preceptor, but the preceptor 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.

CALL BACK DAYS

Call Back Day activities may include, but are not limited to, the following:

- End of Rotation (EOR) Exams
- Small and Large Group Discussions
- Faculty and Guest Lecturer Presentations
- Clinical Skills Demonstrations
- Case Presentations
- Review of Medical Literature/Research
- OSCE Exercises
- Advising Time
- Master's Thesis Mentoring
- Program Announcements
- Board Review

Clinical Call Back Days usually occur during the last two days of every SCPE according to the schedule at the beginning of this handbook. Student attendance at Call Back Days is mandatory and students should expect to be on campus from 8:00AM to 5:00PM on these days.

SUMMATIVE EVALUATIONS

Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) accredited programs are obligated to conduct summative evaluations on all students prior to graduation. The summative evaluation is a multifaceted final evaluation of the program's student competencies, and it must be passed to graduate from the program. The summative evaluation typically includes written, oral, and practical examinations. The Summative Evaluation is conducted as a part of The Graduate Project II course between the final two rotations. Please refer to the Remediation Policy of the Academic and Professionalism Policy for information on remediating the summative evaluation.

SCHEDULING OF ROTATIONS

- All students will be scheduled to complete seven (7) mandatory "core" rotations and two (2) elective rotations in the following areas of discipline: family medicine, emergency medicine, internal medicine, surgery, pediatrics, women's health, and behavioral and mental health care. (B3.07)
- Students will be allowed to participate in two (2) elective rotations of their choice to pursue further training in key areas of interest or may be program-assigned to remediate area(s) of limited exposure to required experiences.
- Each rotation is five (5) weeks in length.

- The majority of clinical sites will be located within a 60-mile radius of the Charleston area. Students may be required to attend rotations at a site outside of this area and will be responsible for all expenses related to such assignments.
- The Director of Clinical Education and the Clinical Coordinator in consultation with the Program Director will determine the seven (7) CORE clinical rotation sites for each student.
- Students will be given the opportunity to rank their top choices for their two (2) ELECTIVE rotations. The Director of Clinical Education and the Clinical Coordinator in consultation with the Program Director will determine the ELECTIVE clinical rotation sites for each student but does not guarantee the students will be placed in their top-ranked elective rotation choices.
- Students will receive electronic notification of their clinical site placements through Typhon. Students will be offered individual meetings with the Director of Clinical Education and the Clinical Coordinator to discuss their rotation assignments on an as needed basis. Once a placement is confirmed, the program will only make changes based on the needs of the program or the needs of the preceptor.
- While it is the program's goal to be as accommodating as possible, students will not be permitted to change rotation assignments due to finances, housing, transportation or special personal events. A student request to change a rotation may result in a delay of graduation.
- The program reserves the right to make changes to students' rotation schedules on an as needed basis. The student will be notified of any changes to their clinical site schedule as far in advance as possible.
- Students SHOULD NOT contact preceptors or personnel at clinical sites without the explicit permission of the Director of Clinical Education. Attempting to arrange or solicit a rotation can lead to complications that may jeopardize the program's ability to send students to that clinical site.

PREPARING FOR SCPEs

Prior to arriving at each clinical site, students are expected to do the following:

1. **Credentialing:** Students should review all credentialing requirements 30-60 days prior to each scheduled SCPE start date. This information will be posted in the site profile on Typhon. It is the student's responsibility to complete all credentialing in accordance with the Clinical Site and SCPE requirements. If students have any questions or concerns about clinical site credentialing, they should contact the Clinical Coordinator.
2. **Calling Ahead:** Students are required to ***call the SCPE site two weeks prior*** to the scheduled start date to confirm the date and time of arrival and request directions if necessary. *If the student cannot confirm their expectation of arrival, the Director of Clinical Education must be notified immediately so an alternate site may be found, if necessary.*
3. **Badges:** Many of the facilities that require credentialing may provide an identification badge to wear while at the SCPE. Students are required to wear their CSU Student ID badge if they are not given a specific student access badge by the clinical site. All badges issued by Clinical Sites must be returned to the badging office at the conclusion of the SCPE.
4. **Syllabus and Evaluations:** On the first day of the SCPE, students should review the course syllabus with their preceptors to ensure the preceptor and the student are in agreeance about the course competencies, assessment methods and course objectives. Students should also give the preceptor a copy of the Preceptor Mid-Rotation Assessment of Student and Preceptor End of Rotation Assessment of Student. A copy of each course syllabus and these evaluations can be found in Typhon.

PROFESSIONAL LIABILITY INSURANCE

Students are covered by the professional liability policy of the Charleston Southern University only when serving on an approved SCPE and conforming to the policies and procedures set forth in this handbook, the accompanying course

syllabi, and the university policies. The coverage limits are \$2,000,000 (all each claim) and \$5,000,000 (aggregate), which has been agreed upon with each clinical site. Please contact the Director of Clinical Education with any specific questions about this policy.

****PA students are only covered in program assigned activities. Coverage does not apply to students who participate in unassigned activities on their own accord.**

SITE VISITS

Site visits during the clinical year are conducted to assess the site and/or the student's clinical proficiency. Site visits also provide a chance to thank preceptors and clinical site staff in person for their partnership with the program and allow clinical year faculty to answer any questions about the clinical education experience. Site visits are scheduled by the program in coordination with the preceptor or clinical site staff. Students are required to be available at the time of the site visit. While the program will attempt to notify students in advance of site visits whenever possible via email, a site visit can occur without advance notification.

STUDENT REMOVAL FROM A CLINICAL SITE

Affiliation agreements with hospitals and other medical facilities require student removal if it is determined that the student does not meet professional standards or other requirements consistent with the qualifications and standards of the practice of medicine and their particular facility. The facility will usually consult with the program prior to such removal, but this is not required. The removal of a student from a site for cause may result in failure of the clinical rotation.

ADDITIONAL STUDENT TRAINING

Students will have documentation of successful completion of the following prior to their clinical year:

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|---------------------------------------|--|
| 1. Abuse & Neglect | 9. Moving, Lifting and Repetitive Motion |
| 2. Bloodborne Pathogens | 10. HIPPA |
| 3. Disaster Preparedness | 11. AIDET |
| 4. Electrical Safety | 12. Lewis Blackman Safety Act |
| 5. Fire Safety | 13. Basic Life Support |
| 6. Hand Hygiene | 14. Advanced Cardiac Life Support |
| 7. Hazard Communication | 15. Pediatric Advanced Life Support |
| 8. Isolation and Standard Precautions | |