



PHYSICIAN ASSISTANT PROGRAM
Clinical Phase Handbook
2025-2026

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Introduction

This handbook contains policies and procedures that are unique to the clinical phase of the program and is a **supplement** to the general PA Program Student Handbook – which policies continue to apply during the clinical year. These policies will be reviewed with students during the clinical phase orientation in PHAS 5726 PA History and Professional issues course, and each student will be held responsible for knowing and adhering to these policies and procedures at all times.

Clinical Year Structure

The Clinical Phase of the Program is composed of ten 4-week clinical rotations. During this phase, students must complete seven required “core” rotations and three elective rotations. Elective rotations are generally assigned via lottery and are subject to availability of clinical sites. The program reserves the right to designate the elective rotation site if remediation becomes necessary. Unique elective requirements of preceptors/clinical sites will also be taken into consideration when placing students. Examples include, but are not limited to:

- *Example A: A pediatric sub-specialist may require a student to have completed their general pediatrics rotation first.*
- *Example B: A clinical site may not accept students who are currently on academic probation.*
- *Example C: A clinical site may only accept students with a genuine desire to work in the field after graduation.*

Students are expected to master the clinical skills necessary for entry-level PA practice during this phase. Clinical knowledge is evaluated by the clinical preceptors, assignments/enrichment exercises assigned by PA faculty, and end-of-rotation examinations. Clinical preceptors and PA faculty members also evaluate PA students’ professional behaviors.

A final summative exam as well as the final clinical competency evaluations (OSLER, OSCE and DOPS) are administered at the completion of clinical coursework as part of the PHAS 5925 PA Seminar Course. Students must also complete their PHAS 5910 Master’s Project upon completion of the clinical year.

Some clinical rotations may be supplemented with case-based and/or simulated learning. The Director of Clinical Education will assign supplemental case-based learning assignments to augment learning during short time frames (ex: preceptor out 1-2 days for illness/vacation). Such case-based activities cannot substitute for an entire clinical rotation experience. Students must demonstrate the course outcomes and competencies have been attained in this scenario. This is assessed via the End-of-rotation (EOR) exam, professionalism evaluation, final preceptor evaluation, and student self-reflection.

Clinical Rotation Scheduling

Development of clinical rotation sites and recruitment of preceptors is the responsibility of the Director of Clinical Education. Students are not required to recruit or secure clinical preceptors for their training. However, students may refer a prospective preceptor to the Director of Clinical Education for consideration to become a contracted University PA Program preceptor. **In doing so, students may not attempt to individually arrange a rotation with any current or prospective clinical preceptor.**

The Director of Clinical Education will create the clinical year schedule. The schedule is generally published quarterly during the clinical phase. Changes to the clinical schedule inevitably do occur from time to time. Students are not permitted to request a change in clinical schedule as a matter of preference, nor may they “swap” rotations with another student. **Any concerns regarding the clinical schedule should be discussed directly with the Director of Clinical Education (not the clinical preceptor or clinical year advisor).**

Students may not complete clinical rotations with friends or relatives. Rotations with former employers will be evaluated on a case-by-case basis to ensure an objective assessment of the student and avoid any potential conflict of interest. As such, students should notify the Director of Clinical Education of any possible conflict of interest prior to the beginning of the clinical year.

Students must not shadow guest lecturers, adjunct instructors, or any practicing clinicians while enrolled in the PA Program outside of assigned rotations. This includes shadowing during semester breaks/holidays or in the weeks prior to graduation.

Clinical Year Travel

The program makes every effort to schedule students at clinical sites within driving distance of their residence or near available housing. However, students may be required to travel within the state or to bordering states to complete required rotations. Travel may include distances up to 300 miles per rotation for up to five rotations.

Students may request to complete as many SCPEs as possible at a remote location for personal or academic reasons. Such requests will be considered based on clinical site availability.

For the purpose of clinical rotations, the PA program office uses the school's main address (5414 Brittany Drive) as the "home" address of each student. Travel to clinical sites for one or more rotations outside Baton Rouge may be required of **ANY** student. Each student is required to provide his/her transportation, food, and housing. The student (not the program) is responsible for child and/or pet care and all other personal arrangements while the student is on rotation. Airbnb or similar vacation rentals are not recommended due to stringent cancellation policies. The Program/University will not be financially responsible for any expenses related to changes in schedule that require a reservation cancellation.

Clinical Phase Calendar

The clinical year begins in May and ends in February. Specific shifts/dates are based on preceptor availability and are subject to change based on preceptor conflicts/absences, inclement weather or other unforeseen circumstances. Please note, clinical students will observe holidays that are recognized by each individual clinical rotation site, NOT university holidays. If a clinical preceptor is scheduled to work over a holiday, so too is the student.

Some weeks are designated as a "remediation week" on the program calendar. **These weeks are also designated for program business, including remediation of clinical time, make up for absences/personal days, clinical site orientations, etc.** The program recognizes the clinical year is very busy, and as such, students may schedule personal appointments/business during designated remediation weeks. However, students should not schedule travel/vacation during clinical remediation weeks. Any potential conflicts during remediation weeks must be discussed with the Director of Clinical Education. Every effort will be made to accommodate an essential personal appointment (ex: medical appointment).

Callback Dates

Callback/clinical rotation end of rotation (EOR) examination/meetings will generally be scheduled on the last Friday of each clinical rotation. **Attendance is required by ALL students for ALL callbacks, even those students on elective rotations.** A typical callback day includes an EOR exam, program business/updates and supplemental activities such as lectures, enrichment activities, IPE grand rounds, etc.

The callback days typically begin at 9:00 am in consideration of students who worked a later shift on the day prior, though may need to begin earlier on occasion. Students should block the entire day through 5:00 pm for program business.

Following an elective rotation, students who are not scheduled for an EOR will be required to take a board prep exam developed by the program provided platform. This assessment provides continued feedback on medical knowledge and will be based on the PANCE Blueprint content areas.

Students who are assigned to an in-state rotation >1 hour driving distance from the FranU campus are excused from their rotation starting at 3:00 pm on the prior Thursday. Students who are assigned to an out-of-state rotation must discuss travel logistics for callback day with the Director of Clinical Education (not the clinical year advisor or preceptor) in advance.

Callback activities will generally be conducted in person, but on occasion, all, or a portion of a callback day may be conducted virtually. If attending virtually, students are expected to present themselves just as they would in person (professionally dressed). They should be in a quiet, private location without disruption, with reliable Wi-Fi and their laptop camera turned on. Students may not attend virtual meetings from a car. If an EOR examination is to be administered remotely, the remote proctoring guidelines apply.

Clinical Year Advising

Clinical students will be assigned to a clinical year advisor, who will serve as their academic advisor and professional mentor throughout the clinical year. The advisors include the Director of Clinical Education, program faculty, and adjunct instructors who are also practicing clinical PAs. The purpose of the clinical advisors is to provide the students with a clinical mentor who can help foster their development as future PAs throughout the clinical year. Students should feel free to contact their advisor for clinical questions/tips. For example, if a student is struggling with making a concise patient presentation to his/her preceptor, the advisor can be contacted for assistance.

Clinical year advisors are responsible for:

- Reviewing and grading all rotation materials (preceptor evaluation, patient logs, H&Ps, enrichment assignments, EOR exams, etc.)
- Reviewing student remediation plans
- Advising students at the mid-point and end of every semester
- Coaching/mentoring students throughout the clinical year
- Assisting with final summative evaluations (OSLER, OSCE, DOPS, portfolios, etc.)

All questions related to rotation policies, procedures, schedules, and logistics must be directed to the Director of Clinical Education.

Professionalism in the Clinical Year

Students represent both the university and the PA profession while on clinical rotations. It is therefore expected that students will display maturity and professionalism, and fulfill their professional obligations to the program, university, clinical site and patients, at all times during the clinical phase of the program.

Clinical preceptors assess professional behaviors using the Final Rotation Evaluation. Any rating of < 3 (corresponds with below expected level of training) on the professional behavior items of the Final Rotation Evaluation will trigger solicitation of more information from the preceptor. The clinical year advisor will escalate to the Director of Clinical Education, who will contact the clinical preceptor to gather more information. The student will be asked to meet with the Director of Clinical Education/Program Director to discuss the issue and provide the student with an opportunity to

present their perspective. Typically, most issues can be resolved with discussion and coaching. However, significant issues may result in the need for remediation of part or all of the clinical rotation. This may result in a delay in progression, particularly if the preceptor is unwilling to continue to host the student at that clinical site. When such significant issues arise, the student will also be referred to the Core Faculty Committee for possible disciplinary action following the guidelines in the PA Student Handbook.

In addition to the preceptor's final evaluation of the student, the Director of Clinical Education assesses student professional behaviors using a rubric which includes responsiveness to emails, meeting deadlines for turning in assignments, and proactive communication with Director of Clinical Education or Clinical Advisor. The overall professionalism score is included in the final grade calculation for each rotation.

Compliance with Health Requirements

Students must maintain their compliance with the University's health requirements at all times. These requirements are outlined in the university handbook and the PA Program Handbook. Some clinical sites may have additional health or other credentialing requirements (example: additional or expanded drug screening, expanded background check).

If a student falls out of compliance with any health requirement, they will not be permitted to attend their clinical rotation until compliance is completed and verified by the Office of Health and Wellness (not the preceptor, Director of Clinical Education, or any other program faculty member). Any absence from a clinical rotation to establish compliance will need to be made up at a later date and could delay progression.

Clinical Student Responsibilities

Each clinical rotation experience is unique. Preceptors should review student responsibilities and expectations at the beginning of each rotation. Additionally, the course syllabus details the learning objectives and outcomes for each rotation, which is assessed in part by the final Preceptor Evaluation of Student Performance. Students may find additional rotation information/instructions in the clinical year tracking system.

Students should expect to participate in all aspects of patient care – obtaining a history, conducting an exam, formulating a differential diagnosis, and developing an assessment and plan, communicating with members of the healthcare team, etc.

Students may be expected to work nights, weekends, or holidays. Some clinical rotation sites require students to take after hours call. The program recognizes the same duty hour restrictions as the Accreditation Council for Graduate Medical Education (ACGME) which consists of a maximum of 80 clinical hours/week.

Below includes additional important information regarding day-to-day operations and general expectations during the clinical year:

- **Medical diagnostic equipment:** Students should take their own medical diagnostic instruments to all rotations.
- **Cell phones/tablets/electronic devices:** Students must ask their preceptors for permission to use a cell phone or an electronic device during their work hours. The device is to strictly be used only for accessing learning resources and official clinical operations. Receiving personal phone calls and e-mails, accessing Facebook, Snapchat, Instagram, or other social media sites is unprofessional, distracts from learning and **NOT allowed**.
- **Procedures:** Learning to perform procedures correctly and safely is part of PA training. Often students who show initiative are awarded by being given the opportunity to perform procedures. Students should take initiative and show interest. Students should always perform procedures under **continuous direct supervision** of your preceptor.

If you feel you have been asked to do something outside your scope of practice or that is questionable, please politely decline and explain to the preceptor that you do not feel comfortable with that procedure.

- Initiative: The more a student shows interest, the more preceptors will involve the student in patient care. By asking questions and asking for opportunities to participate, students demonstrate they are interested in learning.
- Self-Directed Learning: Ultimately, students are responsible for learning. Reading and studying should be guided by the syllabus, PANCE blueprint, PAEA topics, and preceptor assignments, but is self-directed and independent. Students should reflect upon strengths and weaknesses and study to fill in gaps.
- Mistakes: EVERY student makes mistakes. All students will be corrected at some point on a clinical rotation. Be prepared for negative/constructive feedback but know that this is not intended to hurt feelings or be insulting. Mistakes are part of any clinical training program and provide excellent learning opportunities. Recognizing one's professional limitations, being open to feedback, and demonstrating resilience are essential aspects of professional and responsible clinical practice. Any mistake/medical error that results in harm or potential harm to a patient must be reported immediately to the clinical preceptor, and Director of Clinical Education, who will guide the student in additional reporting requirements.
- Inter-professionalism: Students should always be courteous to and show respect to everyone on the healthcare team. This includes physicians, other learners, nurses, allied health professionals, ward/unit clerks, custodial staff – EVERYONE. Everyone involved in patient care plays an important role and can be a valuable resource for learning. Additionally, preceptors will often solicit feedback from other staff members to complete student evaluations, so it is important to be courteous.
- Graciousness: Clinical preceptors are volunteering their time and effort to educate clinical students. This is a sacrifice of both their professional and personal time. Students are expected to send a thank you note to their preceptor(s) after each rotation. Students will be provided with university stationery for this purpose. It is not expected or appropriate to provide a gift to a clinical preceptor.

Attire

Please refer to the PA General Student Handbook for appropriate PA Student attire during the clinical phase. PA students are expected to wear their short white coat and name badge identifying themselves as a student and appropriate personal protective equipment (PPE) at all times. Additionally, hoodies, sweatshirts, or athletic outerwear is not acceptable attire in the clinical setting at any time. Finally, students should always introduce themselves to patients, caregivers, and other members of the healthcare team as “PA student, Last Name”.

Attendance

While on clinical rotations, the student is representing the entire FranU PA student body/program to the medical community at large. High quality and safe patient care require the health care professional to report to his or her duties as scheduled and on time. As such, regular attendance is expected and required during the clinical phase of the program in order to maximize student learning and maintain relationships with clinical preceptors.

Students should never go to rotations with acute illness. If a student becomes ill, he/she should notify the Director of Clinical Education at the time of illness via email. If illness occurs in the night before a rotation, the student should notify the Director of Clinical Education the next morning by 7am via email, as well as, notify the clinical preceptor.

Students are required to participate in regular, on-call, weekend, and holiday schedules of each individual clinical site. Campus, religious, or personal holidays do not apply during the clinical phase of the program. Students are not permitted to arrive late to a rotation or leave early without prior permission of the Director of Clinical Education.

Tardiness

It is unprofessional to arrive late for a clinical shift. Tardiness reflects poorly on the student, the program, and the PA profession. Recurrent tardiness may result in dismissal from the rotation, disciplinary action, need for remediation, and thus delay graduation. If you have an unforeseen circumstance that will prevent you from arriving at your clinical site on time, you must notify the Director of Clinical Education immediately by email, as well as, notifying clinical preceptor.

Absences

If a student plans to be absent from a rotation site for ANY reason, the Director of Clinical Education must be notified immediately via email, **prior to notifying the clinical preceptor**. The Director of Clinical Education will then determine the best mechanism for alerting the clinical preceptor of the absence. **Students should not have any discussions with the clinical preceptor regarding potential absences without prior Director of Clinical Education approval.**

Time missed from a rotation for ANY reason MUST be made up, regardless of reason. This may occur during the current month if time/structure permits, during a designated remediation week, or at the END of the clinical phase, which may result in a delay in graduation.

Excessive absences in the clinical phase of the program are defined as more than 2 absences per rotation and more than 4 absences per semester. Any student with a potential need for prolonged absence in the clinical phase should consider requesting a short-term leave of absence as outlined in the PA Student Handbook.

Personal Days

Clinical students may take one personal day per semester during the clinical phase. Use of personal days must be submitted in writing via email to the Director of Clinical Education (NOT the clinical preceptor) at least two weeks in advance. Approval is at the discretion of the Director of Clinical Education and should not be presumed. The following personal day requests/scenarios are excluded from the policy and will not be approved:

- Personal days during May (or the first clinical rotation of the clinical phase)
- Personal days during PHAS 5780 Women's Health or Mental Health
- Personal days for a rotation during which the student has previously missed days due to personal or preceptor illness or other issue

Personal days apply only to clinical rotation months, and not PHAS 5910 Master's Project or PHAS 5925 PA Seminar.

Clinical Year Logging

During the clinical year, students will track their hours, patient encounters and procedures performed using the program's electronic logging application. Maintaining clinical year logs is considered a professional behavior/responsibility.

The data obtained from logging serves as evidence of the students' competency development and assists the program with accreditation compliance. Additionally, the data is used to assess the quality of clinical experiences provided by each clinical rotation site, and finally, serves as a self-assessment tool for the student. Therefore, it is imperative that the student log daily and accurately.

The following describes logging requirements during the clinical year:

- The student must provide the clinical coordinator with a clinical schedule after meeting with the clinical instructor. This schedule allows the program to verify the student's expected whereabouts while in the clinical setting.
- Duty hours: Students are expected to track their shift hours worked DAILY by the end of each evening.
- Patient Encounters: Students are expected to log their patient encounters and procedures DAILY by the end of the evening/shift. A 1-week grace period is set, however, after 1 week of not logging patient encounters for the prior week, an email will be generated to the student, Director of Clinical Education, and Program Director via Typhon. This will continue until logging is caught up. Encounters should include all relevant details including age of the patient, race/ethnicity, social determinants of health, prenatal care, mental health component, etc. All elements will be discussed during the clinical year orientation.
- Procedures: Students should be logging every procedure they perform on all rotations. This includes suturing, incision and drainage, etc., as well as special exams such as pelvic exams.
- A student may proactively request a logging extension from the Director of Clinical Education prior to the 1-week time frame lapsing. If approved, the Director of Clinical Education will extend the logging time frame by 24-48 hours. Otherwise, any student who fails to log shift hours/encounters within the 1-week time frame will receive a zero for professionalism that month.

Students who have not logged sufficient encounters or procedural skills may be required to complete virtual cases or return to a clinical rotation site during a designated remediation week to gain more exposure/experience.

A student who fails to log as outlined will receive a verbal reminder from the Director of Clinical Education. Subsequent offenses will be referred to the Core Faculty Committee for disciplinary action according to the policies described in the PA Student Handbook.

End of Rotation Examination/PANCE Preparation

Students will receive access to a commercial board review product prior to the clinical year. The review product contains primary care/PANCE content for review in both video and .pdf note format, as well as test question bank. Though there is no grade associated with review activities, students are expected to use this material to augment their studying/learning and to help prepare for EOR exams, in a self-directed fashion. Content/questions may be assigned as remediation assignments as needed. Additionally, this platform will serve as the question bank and platform for elective call back rotation exams.

Communication with Program Office

Students must check their university email TWICE DAILY (AM and PM), including weekends. Students should confirm receipt of any email that requires/requests a response or if the email requires a follow up action item. Many requests in the clinical year are time-sensitive, and therefore it is imperative that the student respond within the time frame requested. Students do not need to respond to emails that provide information only (ex: callback day agenda).

The Director of Clinical Education will contact students via phone/text if email is not expedient enough. Additionally, the Director of Clinical Education is available by cell phone 24 hours a day/7 day a week for urgent/emergent issues/questions. If the Director of Clinical Education is on leave/vacation, another program faculty member will be designated as the point of contact for students until their return.

Clinical Year Grading

The final grade for each rotation consists of the Preceptor Final Evaluation, Student Competency Attainment Reflection Assignment (Self-Evaluation), History and Physical Exam Write-Up, Patient Logs, Student Clinical Site Evaluation, and Professionalism. The End of Rotation Exam is Pass/Fail. While the EOR exam does not contribute to the grade calculation, if the passing score is not met, the student must re-take/remediate as described below.

End of Rotation (EOR) Examinations

Students will take an EOR exam on their callback days. Exams are each made up of 120 multiple choice questions. Exams are administered electronically via PAEA End of Rotation Exam portal (all core rotations). Students should refer to each course syllabus, as well as the NCCPA PANCE and PAEA EOR organ system and task area blueprints as a guide for study.

Students must meet the program-defined benchmark on all EOR examinations (please refer to individual syllabus for benchmark information) to pass each core rotation and progress in the clinical phase. There is no EOR exam for elective rotations.

PHAS 5780 combines women's health with mental health, and as such, students must take two EOR exams. Students will take Mental Health on the callback Friday and Women's health the following Monday evening.

End of Rotation (EOR) Failures (Retest/Remediation)

The following will occur in the event a student fails an EOR:

- First exam failure: Students will be required to second attempt within 7 consecutive days of taking the EOR exam. Students will not be excused from their subsequent clinical rotation to study in preparation for the second attempt EOR or testing. Testing will be scheduled by the Director of Clinical Education. The student will be required to meet with their clinical year advisor to develop a study plan for their subsequent clinical rotation. The study plan must be forwarded to the Director of Clinical Education.
- Second exam failure: Failure may be failure of an EOR second attempt or failure of a subsequent initial attempt EOR. The student is considered to be at academic risk, and accordingly will be placed on Academic Probation. The student will be required to meet with their clinical year advisor to discuss and identify strengths, weaknesses, and potential gaps in knowledge prior to re-testing. The study plan will be forwarded to the DCE and PD. The re-test must be taken within 7 consecutive days of taking the second EOR. The student will not be permitted to begin their subsequent clinical rotation until they have passed their EOR re-test. This time off will allow them to focus on their re-attempt, and not fall behind on their subsequent rotation. Time missed will have to be made up during a designated remediation week and may result in a delay in graduation.
- Any student failing a second attempt exam (unless the re-attempt is the student's third exam failure, as described below) will be required to remediate (repeat) the entire rotation, and re-test again. The student will be required to develop a comprehensive and detailed remediation/study plan for the remediation rotation. This plan must be approved by the clinical year advisor and Director of Clinical Education and forwarded to the Program Director. Failure to pass the EOR exam third attempt after rotation remediation will result in immediate dismissal from the program. Rotation remediation may only be exercised once in the clinical year and will result in delay of graduation.
- Third exam failure: will result in program dismissal. Three exam failures include:
 - Failure of three EOR exams on first attempt
 - Failure of two EOR exams and failure of one re-test
 - Failure of one EOR exam, failure of the re-test AND failure of the second re-test following remediation

In addition to End of Rotation Exam failure, students may be required to remediate a portion of, or all of a clinical rotation at the discretion of the Director of Clinical Education, Program Director, or Core Faculty Committee. Need for remediation may include (but not limited to) concerns for poor performance rating(s) by the clinical preceptor in a particular assessment area, lack of professional behaviors, and/or excessive tardiness/absences.

Preceptor Evaluations

Preceptors are required to complete two evaluations for the PA student: a mid-rotation evaluation and a final rotation evaluation. Both evaluations are an opportunity for the preceptor to accurately identify the students' level of performance. The preceptor should be candid during the evaluation review.

The Mid-Rotation Student Evaluation should be completed at the midpoint of each rotation. The purpose of mid-rotation evaluation is to identify any areas of concern that the preceptor may have about student performance and allow the student to improve on these areas throughout the remainder of the rotation. The preceptor should complete the Mid-Rotation Evaluation and review with the student. If a student receives a rating of "Unsatisfactory" on their mid-rotation evaluation, or if there are other areas of concern expressed, the student will be contacted by the clinical year advisor for the development of an action plan. Additionally, the clinical year advisor will notify the Director of Clinical Education of the concern.

The Final Preceptor Evaluation should be completed the final week of the rotation and should accurately reflect the student's knowledge, skills and competencies achieved during the rotation overall. These evaluations are unique for each rotation and are mapped directly to the program learning outcomes, associated competencies and instructional objectives for the rotation. The preceptor should complete the final evaluation and review it with the student. The final evaluation grade will be calculated based on the grading rubric (100 possible points), which was designed based on the "novice to expert" model. Any rating of level 1 or level 2 (below expected level of training) is cause for concern and will trigger a personal conversation between the Director of Clinical Education and the preceptor. If there are significant concerns related to that area, the student will be required to demonstrate competency to the Director of Clinical Education or other designated faculty member, as remediation for the portion or all of that clinical rotation prior to progression to the next rotation.

Though unusual, the student or faculty advisor may feel the grade on the final preceptor evaluation to be inconsistent or lacking in specific feedback. When this occurs, the Director of Clinical Education should be notified so the clinical preceptor can be contacted for more information/clarification.

It is the students' responsibility to ensure their clinical preceptors complete their mid and final rotation evaluations. The final grade for the rotation cannot be determined unless the evaluation has been received. Therefore, if the evaluation is not received within 7 days of rotation completion, an "I" grade will be entered.

Enrichment Assignments

There may be an enrichment assignment associated with each clinical rotation/callback day. The goal of the enrichment assignment is to further develop clinical and professional knowledge, skills, and competencies and to help prepare the student for the EOR examination, entry level practice and the PANCE.

History and Physical Write Up

Learning to document appropriately is an essential skill of the PA student and is one that begins in the first semester in PHAS 5727 Patient Assessment and continues to develop throughout the clinical year. Each student will submit a fully typed H&P from their specific rotation at the end of the second week. The H&P should be accurate and reflect the care

they provided for that specific patient. No patient identifiers may be included in the H&P, which includes name, date of birth, medical record number, etc. H&Ps are to be written using classic format taught during didactic phase, and not copied & pasted from the electronic medical record. The program H&P rubric will be utilized to grade the H&P.

Professionalism Assessment

Professional responsibilities were described in the previous section of the Clinical Year Handbook. It is the expectation that students will adhere to the professionalism policies described, and will perform their duties correctly, in a timely fashion and with attention to detail. Professionalism accounts for a percentage of the final grade for each rotation. If a problem or issue arises that prevents the student from completing any professionalism responsibility, the issue should be discussed promptly and proactively with the Director of Clinical Education. Failure to do so will result in a complete loss of professionalism points for the assigned rotation.

Grade Appeals

Any grade appeal in clinical year should first be discussed with the clinical instructor (either the Director of Clinical Education or the clinical year advisor who graded the assessment). If the issue is not resolved, the student will escalate the appeal to the Program Director following the procedures outlined in the University Handbook.

Preparedness for/Compliance During the Clinical Year

The program Core Faculty Committee regularly reviews student performance and eligibility to progress to the clinical phase in accordance with the Program Progression policies outlined in the PA Student Handbook. The evaluation ensures each student is in compliance with the program's academic, clinical, professional and technical standards. Additionally, students must maintain compliance with all health requirements throughout the clinical year. Students who do not meet the criteria to progress to the clinical year may be required to remediate an assessment (ex: < 70% on the Summative I exam or may be subject to dismissal from the program (ex: 3rd C in a didactic course)). Failure to successfully remediate prior to the clinical year will result in program dismissal.

Despite meeting the progression criteria for advancement to the clinical year, situations may arise during the clinical year that require removal of the student from a clinical rotation to assess knowledge and skills prior to returning to that rotation or progressing to the next. While these occurrences are rare, the Director of Clinical Education has the right and obligation to remove a learner from a clinical site and/or to arrange an extended clinical experience, if deemed appropriate for satisfactory completion of the clinical experience. These types of remediation may result in a delay in progression in the clinical year, and subsequently, delay graduation. Examples are provided for illustration purposes:

- *Example A - Clinical remediation: A student on a surgical rotation may be repeatedly struggling with maintaining a sterile field. Because this is a safety issue, the student may need to be pulled off the rotation for additional education/training in the simulation lab prior to return to the clinical rotation*
- *Example B – Professionalism remediation: A student on a given rotation has been repeatedly late and has been noted to display unprofessional communication (defensiveness, arrogance) toward multiple staff members at the clinical site. The student may be pulled off the rotation to review program policies, and complete additional training as it relates to communication.*

Prescription Writing

Prescription writing is only acceptable if:

- Preceptors must review and sign all prescriptions
- The student's name is not to appear on the prescription
- It is prohibited to provide the student with pre-signed prescription forms.
- For clinical sites that use electronic prescriptions, the preceptor MUST log into the EMR under his/her own name and password and personally sign and send the electronic prescription.

Preceptor Roles and Responsibilities

The preceptor is required to supervise, teach, and observe the student in clinical activities in order to aid in the development of their clinical skills and to ensure proper patient care. The preceptor should delegate increasing levels of responsibility to the PA student for clinical assessment and management as the students' skills develop throughout the rotation. Notification of the PA Program is required in any circumstance that might interfere with the accomplishment of the above goals or diminish the overall training experience. The Program strives to maintain open faculty-colleague relationships with its preceptors and believes that by notifying the Director of Clinical Education early, problem solving will result without unduly burdening the preceptor. In addition, open communication and early problem solving is intended to enhance student learning and performance.

Finally, clinical preceptors and clinical rotation sites are vetted very carefully by the program. Any student who has a significant concern regarding a clinical preceptor or a clinical rotation site should contact the Director of Clinical Education to discuss in a professional/constructive manner. If there is a concern for inappropriate behavior such as harassment or similar, or if there is a significant safety concern, the student should contact the Director of Clinical Education immediately. Students will evaluate each preceptor/rotation site at the end of each rotation.

Attestation of Clinical Year Policies

I certify that I have read the Clinical Phase Handbook in its entirety. I understand that I am accountable to follow the policies and procedures described herein.

Any violation or noncompliance with Franciscan Missionaries of Our Lady University policies or PA Program policies as set forth will result in a formal meeting with the Director of Clinical Education and Program Director. The student may be suspended and or referred to the Core Faculty Committee for disciplinary action which may include non-academic probation and possible program dismissal.

Student Signature/Printed Name

Date

Faculty and Preceptor Exchange of Information

I recognize program faculty may need to discuss my academic performance and progress with clinical preceptors in order to ensure clinical knowledge and competency objectives are being obtained during my education/training. As such, I acknowledge clinical preceptors are extensions of program faculty and approve of this practice.

Student Signature/Printed Name

Date