



MISSISSIPPI STATE UNIVERSITY™
MERIDIAN
Physician Assistant Studies

Mississippi State University-Meridian
Master of Physician Assistant Studies
Preceptor Handbook

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Introduction

We would like to take this opportunity to express sincere gratitude to our preceptors for their hard work and dedication to this program and our physician assistant (PA) students. The clinical experiences the student will obtain in your office or clinic are of critical importance to a successful learning experience in the program. The clinical setting synthesizes concepts and application of principles for quality healthcare delivery. You, as a clinical preceptor, are the key to successful learning experiences in the clinical setting. The PA student will work closely with you, learning from your advice and example. Through your supervision, the student will progressively develop the skills and clinical judgment necessary to become a practicing PA. Thank you for your commitment to PA education.

The second year of the Mississippi State University-Meridian Physician Assistant Program consists of an intense period of training in a variety of clinical settings that may include ambulatory care, hospitals, public clinics, government facilities and private practice settings. Clinical year rotations include: Internal Medicine Women's Health, Pediatrics, Surgery, Psychiatry, Family Medicine, Emergency Medicine and an elective of the student's choosing.

We look forward to working with you to produce Mississippi's finest trained physician assistants. Please feel free to contact us should you have any questions about your role as a preceptor or our expectations of the PA students.

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Contact Information

Program Information

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Role of the Physician Assistant (PA)

“The clinical role of PAs includes primary and specialty care in medical and surgical practice settings. Professional competencies for physician assistants include the effective and appropriate application of medical knowledge; interpersonal and communication skills; patient care; professionalism; practice-based learning and improvement; systems-based practice; as well as an unwavering commitment to continual learning, professional growth, and the physician-PA team for the benefit of patients and the larger community being served. These competencies are demonstrated within the scope of practice, whether medical or surgical, for each individual physician assistant as that scope is defined by the supervising physician and appropriate to the practice setting.” (NCCPA)

Mission

The Mississippi State University-Meridian Physician Assistant Studies Program will educate highly qualified, competent, healthcare providers who will increase access to care and provide primary care services to the diverse citizens of Mississippi.

Student Responsibilities

In addition to adhering to the standards of professional conduct, students are expected to perform the following during their clinical rotations:

- Obtain detailed histories and conduct physical exams, develop a differential diagnosis, formulate an assessment and plan through discussion with the preceptor, give oral presentations, and document findings
- Perform and/or interpret common diagnostics studies
- Educate and counsel patients across the lifespan regarding health-related issues
- Attend clinical rotations as scheduled in addition to grand rounds, lectures, and conferences, if available to them
- Demonstrate emotional resilience and stability, adaptability, and flexibility during the clinical year
- Complete assignments and documentation
- Exhibit self-confidence, knowing limitations PA students are expected to adhere to the same high ethical and professional standards required of certified PAs.

Standards of Professional Conduct

As healthcare practitioners, PAs are required to conform to the highest standards of ethical and professional conduct. The professional conduct of PA students is evaluated on an ongoing basis throughout training program. Violations of standards of conduct are subject to disciplinary actions administered by the university and by the physician assistant program. If preceptors observe any concerns about a student’s professionalism, please contact the PA Program immediately.

During the clinical year, PA student should:

- A. Ethical Responsibility to Self and Others [B1.05]**
 1. Acts with integrity in all situations
 2. Displays academic honesty

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- i. Avoids plagiarism
 - ii. Submits true and accurate reports
 - iii. Completes evaluations objectively and honestly
3. Follows rules and procedures of all associated organizations
4. Encourages other to behave honestly and ethically
5. Assumes responsibility for personal actions performance
6. Exercises prudent judgement in decision-making

B. Personal Improvement and Achievement

1. Demonstrates initiative to engage in and improve learning
2. Demonstrates initiative to improve competence
3. Participates in self-directed learning
4. Solicits feedback and guidance with poise
5. Performs self-reflection for personal improvement

C. Respect to Self and Others

1. Actively engages, listens, and participates in activities
2. Speaks respectfully to and about peers, faculty, staff, and patients
3. Avoids and disparages vulgar, abusive, or threatening comments or behavior
4. Present and punctual for all activities and events
5. Works cohesively in collaboration with others
6. Maintains strict confidentiality of patient records or patient encounters
7. Displays cultural sensitivity
8. Respects the privacy and property of others

Student Schedule & Attendance

Students should experience the typical exposure to each clinical practice. Students are expected to be available and in close association with preceptors during practice hours. Students should accompany preceptors to hospitals, operating rooms, nursing homes, and other practice settings. Evening, overnight, call and weekend learning experiences are beneficial to the student.

Students require time for independent study, assignments, and preparation for the end of rotation exam. If possible, limit student work time to less than 60 hours per week. If a site offers conferences for students, the PA student should also attend if space permits.

All absences must be approved by Clinical Coordinator or Program Director. The program will contact the preceptor via email prior to any approved absence. Please, kindly report any questionable absences to the clinical coordinator.

Documentation

Documentation is a critical part of patient care, and students should be provided opportunities to practice this skill and receive feedback. The student should invest time in the first week of the rotation to identify documentation preferences of each preceptor and/or group and take notes to adapt formatting documentation as needed. The student should note that documentation is part of the permanent patient record.

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In 2019, the Centers for Medicare and Medicaid Services (CMS) amended the agency's previous restrictions on the use of student medical record documentation during the provision of evaluation and management (E/M) services for billing purposes. Effective January 1, 2020, all preceptors of PA students, including PAs, physicians, and nurse practitioners will be allowed to verify, rather than reperform, documentation provided by students. The link to the final rule is below for reference if needed.

<https://s3.amazonaws.com/public-inspection.federalregister.gov/2019-24086.pdf>

REMINDERS

- The student must indicate authorship by the Physician Assistant Student.
 - First Last, PA-S
 - First Last, PA-Student
- All documentation completed by the student must be countersigned by the supervising preceptor.
- Handwriting documentation is an excellent learning tool.

Prescription Writing

Preceptors must review and sign all prescriptions. More specifically, the student's name is not to appear on the prescription, and it is prohibited to provide the student with pre-signed prescription forms. 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.

Expected Progression of PA student

PA students are trained to take detailed histories, perform physical examinations, give oral presentations of findings, and develop differential diagnoses. As the year continues, 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.

Student Evaluation

The preceptor's evaluation of the student is tremendously important. A passing evaluation from the preceptor is mandatory for the student to continue in the program. If the student fails the rotation, the student may be requested to repeat the rotation or undergo procedures specified by the program. The final grade for a clinical rotation and the decision to pass or fail a student are ultimately made by program faculty.

The program will designate how often evaluations need to be completed. Preceptors should consider performing brief end-of-rotation evaluations privately with colleagues and staff to get additional insight into the student's professionalism and effectiveness as a team player with all members of the healthcare team. These comments are helpful contributions to student evaluations. Additionally, staff feedback may enhance the student experience and can help to improve efficiency while also maximizing educational opportunities.

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Please refer to appendices for examples of evaluation forms.

1. Mid-rotation Evaluation:

These forms will be received to the email of the preceptor through Exxat software system to be completed electronically. This evaluation provides the student, preceptor and Program formative evaluation data. The student and preceptor may identify areas of strength and/or opportunities for improvement.

Mid Rotation Evaluation forms are required for all rotations and should be submitted during week #2 of rotations or week #5 of the family medicine rotation.

2. End of Rotation Evaluation:

These forms will be received to the email of the preceptor through Exxat software system to be completed electronically. Provides the preceptor and the student the opportunity to assess clinical progress, professionalism and achievement of stated learning outcomes over the rotation period. These should be completed during the final week of the rotation.

Feedback to Students

While students may have only two formal evaluations during the clinical rotation, it is imperative they receive constructive feedback on a daily basis from their preceptors to guide improvement in their clinical performance and development of clinical decision making.

Definition of the Preceptor Role

Preceptors will serve as role models for the student and, through guidance and teaching, will help students to develop skills in history taking, physical examination, effective communication, physical diagnosis, succinct recording and reporting, problem assessment, and plan development including a logical approach to further studies and therapy.

Preceptor Responsibilities

Preceptor responsibilities include, but are not limited to, the following:

- Orient students at the onset of the rotation with the practice/site policies and procedures and review the expectations and objectives for the rotation
- Provide ongoing and timely feedback regarding clinical performance, knowledge base, and critical thinking skills.
- Supervise, demonstrate, teach, and observe clinical activities
- Delegate increasing levels of responsibility for clinical assessment and management as appropriate to the student's experience and skill
- Evaluate clinical skills and medical knowledge through the following mechanisms:
 - o Direct supervision, observation, and teaching in the clinical setting
 - o Direct evaluation of oral presentations and documentation
 - o Assignment of outside readings and research to promote further learning
- Promptly complete the evaluation forms provided by the program reflecting on student knowledge and skills as well as their improvement throughout the rotation
- Promptly notify the PA program of any concerns
- Maintain an ethical approach to the care of patients by serving as a role model for the student

Preceptor–Student Relationship

The preceptor should maintain a professional relationship with the PA student and at all times adhere to appropriate professional boundaries. Contact through web-based social networking sites (e.g., Facebook, Instagram) should be avoided until the student completes the rotation.

Supervision of the PA Student

Preceptors must hold a current state license in the state for which they are providing care. A preceptor can be a physician, Physician Assistant, Nurse Practitioner, or other licensed healthcare professional. During a student's time at the clinic or hospital, the preceptor must be available for supervision, consultation, and teaching. The program should be immediately notified of any preceptor for the student for appropriate vetting.

In the case where supervision is not available, students may be given an assignment or may spend time with ancillary staff (radiology, laboratory, physical therapy, billing and coding, etc.), as these experiences can also be very valuable.

The preceptor should be aware of the student's assigned activities at all times. Students are not employees of the hospitals or clinics and, therefore, work entirely under the preceptor's supervision. Students are not to substitute for paid clinicians, clerical staff, or other workers at the clinical sites. On each rotation, it is the student's responsibility to ensure the supervising physician or preceptor also sees all of the student's patients. The preceptor can provide direct supervision of technical skills with gradually increased autonomy in accordance with the PA student's demonstrated level of competence. However, every patient must be seen by the preceptor and every procedure evaluated prior to patient discharge.

The PA student will not be allowed to order laboratory or diagnostic studies. The PA student will not be allowed to see, treat, or discharge a patient without evaluation by the preceptor.

Orientation and Communicating Student Expectations

Orientation of the student to the rotation site serves several purposes. Orientation facilitates a more expedient transition in allowing the student to become a member of the medical team and helps to develop the functional capability to work more efficiently.

Early in the clinical rotation, the preceptor and student should formulate mutual goals in regard to specific goals for the rotation. The preceptor should also communicate his or her expectations of the student during the rotation. Students are expected to communicate to preceptors any special scheduling needs they may have during the rotation, including program-approved absences or program-required educational activities. If students anticipate missing clinical time for personal reasons, they should alert the clinical coordinator well in advance of the clinic absence.

Many sites find it helpful to create their own written orientation manual, which is given to the student prior to the first day of the rotation. This helps the students quickly become more efficient.

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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, they help a student become functional and confident.

Preceptors should not assume that receptionists, schedulers, and nursing staff are knowledgeable of the role the student will have in a practice. The preceptor should inform the staff about how the student will interact with them and with patients. Consider having a meeting or creating a memo with/for staff in advance of the student's arrival to discuss:

- Student's name
- Student's schedule (when they will be in the office)
- Student's expected role in patient care
- Expected effect of the student on office operation: Will fewer patients be scheduled? Will the preceptor be busier?
- How patients will be scheduled for the student?

Informed Patient Consent Regarding Student Involvement in Patient Care

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. However, patients must be informed that a physician assistant student will participate in their care, and the patient's consent must be obtained.

The students should be clearly identified as PA student and must also verbally identify themselves as such. Students are also required to wear their school issued identification badge, which should be visible at all times. If the patient requests a physician and 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.

Liability Insurance

Each PA student is fully covered for malpractice insurance by the PA program. Students completing a formal elective rotation with a preceptor or site must maintain a "student" role in the clinic and should not assume responsibilities of an employee until after graduation from the program. This includes appropriate, routine supervision with the preceptor of record and within the scope of the agreed-upon clinical experience. This is vital in preserving the professional liability coverage provided by the university and is important to protect both the student and the employer in the case that legal action is sought by a patient.

In addition, if a PA student is working in a paid position in a different health-care related capacity any time during their PA education, that individual is not permitted to assume the role of a PA student while on duty as a paid employee. Even in a shadowing capacity, it is not appropriate for a student to represent themselves or participate in the care of any patient outside of the role for which they are receiving compensation. Liability insurance will not cover any student assuming the "PA student" role outside of an assigned clinical rotation.

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Specific Program Policies

Please contact the Mississippi State University-Meridian Physician Assistant Program for program-specific policies on the following:

- Needle stick procedure
- HIPAA training
- Blood-borne pathogens training
- Immunization requirements
- Background check
- Drug testing
- Sexual harassment and assault resources The following link to the U.S. Department of Education's Office of Civil Rights (OCR) provides information about federal laws that protect students against racial, sexual, or age discrimination:
<http://www2.ed.gov/about/offices/list/ocr/know.html>

The Preceptor–Program Relationship

The success of clinical training of PA students depends on maintaining good communication among the student, the PA program, preceptors, and the clinical coordinator. All members of the team should share contact information. If a preceptor has a question or concern about a student, they should contact the Clinical Coordinator. [Phone: 601-484-0196, Email address: dwashburn@meridian.msstate.edu]

The program strives to maintain open communication with its preceptors and believes that, should problems arise during a rotation, by notifying appropriate program personnel early, problems can be solved without unduly burdening the preceptor. In addition, open communication and early problem solving may help to avoid a diminution in the educational experience.

Site Visits

Mississippi State University- Meridian Physician Assistant Program conducts routine visits to monitor rotation sites and evaluate students during the clinical phase of their training.

Site visits serve as an opportunity to connect with our students and preceptors and discuss the learning experience. We value student and preceptor feedback and utilize this information to better prepare our students and offer guidance as necessary to our preceptors. Our goal is to foster a preceptorship that promotes success and professional growth.

Please do not hesitate to contact the Clinical Coordinators with any questions, comments or concerns.

Preceptor Feedback

We truly value the time and effort that preceptors place in teaching our PA students. We understand that preceptors, like our students, appreciate and learn from feedback. An example of the student's evaluation of the clinical site and preceptor are available in the appendix. Please feel free to contact the Clinical Coordinators at any time for additional student evaluation comments. The Mississippi State University-Meridian Physician Assistant Program is very appreciative of your time and willingness to train our students. Thank you!

“The One Minute Preceptor”

A Method for Efficient Evaluation & Feedback

The one-minute preceptor is a strategy for structuring an interaction with the student. It consists of the following sequential steps:

1. Getting the Student to Commitment
 - So, what do you think is going on with this patient?
 - How would you like to treat this patient?
 - Why do you think the patient came in today?
 - What would you like to accomplish on this visit?

2. Probe for Supportive Evidence – Evaluate Student’s thinking that leads to the Commitment
 - How did you reach that conclusion?
 - What made you ...?
 - What findings support your diagnosis?
 - What else did you consider?

3. Reinforce what was Correct – give Positive Feedback
 - I agree with your interpretation.
 - I am pleased that you included...that aspect of the physical exam.
 - I appreciate your consideration of the patient’s financial situation in prescribing....

4. Constructive Guidance about Error or Omission – give Negative Feedback
 - I disagree with... the scope of your differential diagnosis
 - What else might you have included?
 - Including the abdominal exam would have been important...
 - A more efficient way to

5. Teach a General Principle – Clarify the Take-Home Lesson
 - So in general, it’s important to remember ...
 - It is always important to think about ...
 - In general, taking a little more time ...
 - Why don’t you read up on this tonight and report back tomorrow!

Reference: Neher JO, Gordon KC, Meyer B, Stevens N. A Five-Step “Microskills” Model of Clinical Teaching. J Am Bd of Fam Pract July-Aug, 1992; Vol 5 No 4, 419-424