



COLLEGE OF HEALTH PROFESSIONS
Department of Physician Assistant Studies

CLINICAL PRECEPTOR MANUAL

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WELCOME
FROM THE DIRECTOR OF CLINICAL EDUCATION

Dear Preceptors,

First, let me offer my tremendous thanks. You are the backbone of our clinical educational program and we are sincerely grateful for the effort you put forth in providing successful learning environments for our students. Second, I would specifically like to welcome new clinical preceptors to the Mercer “family” of Physician Assistant (PA) student educators. I look forward to working with you.

As you know, Mercer’s PA Program consists of 13 months of didactic instruction followed by 15 months of clinical instruction. The clinical instruction is comprised of 11 different 5-week rotations, including nine core and two elective rotations. The core rotations are pediatrics, family medicine, internal medicine, hospital medicine, general surgery, women’s health, behavioral medicine, orthopedic surgery, and emergency medicine. Elective rotations may be in general or specialty medicine including the sub-specialties depending on the student’s interests.

I want you to know that the Clinical Team will stand behind you and will do our utmost to make your teaching experience as smooth, stress-free, and pleasurable as possible. We appreciate your volunteerism toward Mercer and understand your time is valuable. We hope to continue our relationship with you long- term.

Please do not hesitate to contact me directly if you have any questions, suggestions, compliments, or concerns about the Mercer PA Program or our students. I will always be happy to assist you.

Thank you for your service.

Henry Heard DHSc, PA-C

Director of Clinical Education

CLINICAL TEAM CONTACT INFORMATION

Department Email: paclinical@mercer.edu



Henry H. Heard, DHS, PA-C

Director of Clinical Education

Email: Heard_hh@mercer.edu

Telephone: (678) 547-6780



Shayla D. Davis, M.Ed

Clinical Coordinator

Email: davis_sd@mercer.edu

Telephone: (678) 547-6399



Cynthia E. Edwards-Wright

Credentialing Coordinator

Email: edwards-wright_ce@mercer.edu

Telephone: (678) 547-6318

GENERAL CLINICAL ROTATION GOALS & LOGISTICS

The clinical year takes students from the theoretical classroom setting to an active, hands-on learning environment preparing them for a lifetime of continued refinement of skills and expanded knowledge as a practicing PA-C. To this end, Mercer's goals for clinical rotations include the opportunity for our students to do the following:

- Apply their current didactic knowledge in clinically supervised medical practice
- Expand and develop their medical fund of knowledge
- Perfect the art of patient history taking and physical examination skills
- Develop and sharpen clinical problem-solving skills
- Sharpen and refine oral presentation and written documentation skills
- Develop a more complete understanding of the PA role in U.S. health care delivery
- Develop the interpersonal skills, demeanor, and behavior necessary to function as part of the medical professional team.
- Prepare for the Physician Assistant National Certifying Exam (PANCE):

The Clinical Team and our students want rotations to go as smoothly as possible. Timely communication is key to minimizing confusion and surprises. The typical time course of communication to the preceptor from the clinical team and the student is as follows:

- The clinical team sends out an email with all eleven (11) upcoming clinical rotation dates, and requests that preceptors indicate their availability/preferences for training our students.
- Between one to two months prior to each rotation start date, the Credentialing Coordinator will email each preceptor confirming the student(s) who have been assigned to rotate with them for the specified timeframe.
- One to two weeks prior to each rotation start date, the Credentialing Coordinator will email each student confirming their rotation assignment for the specified timeframe.

PRECEPTOR ROLE & RESPONSIBILITIES

Specific roles and responsibilities include but are not limited to the following:

1. The preceptor's clinical setting should allow for appropriate clinical direction and supervision of students for a 32-hour minimum and a 60-hour maximum per week. (Weekend hours, evening hours, and overnight shifts are all welcomed. The student will follow the preceptor's clinical schedule.) Students should be under direct supervision at all times until they have proven to the satisfaction of the Clinical Preceptor that they are competent at performing delegated tasks.

2. The clinical preceptor will maintain current state licensure and/or certification. Clinical preceptors are credentialed by the PA Program using state medical board informational databases. Preceptors must have medical licensure within the state where the rotation is located and have staff privileges within any public or private facilities where the students will see patients during their clinical rotation. Physician preceptors must be Board Certified in their field of practice. Clinical preceptors may be Medical Doctors (MD), Doctor of Osteopathic Medicine (DO), Physician Assistants (PA), Nurse Practitioners (NP), Nurse Midwives, Licensed Professional Counselors, Licensed Clinical Social Workers (LCSW), or Licensed Clinical Psychologists (LCP).
3. A student orientation should be given at the beginning of the rotation concerning practice/site policies, procedures, and expectations. The preceptor or designee should discuss any “on-call” schedules and the appropriate method of student documentation for patient encounters.
4. The preceptor should oversee the daily student schedule to insure maximum patient contact. Preceptors may assign willing colleagues in their practices to supervise students in the event of the primary preceptor’s unavailability (e.g. due to illness, vacation or practice schedule), or simply for the enhancement of the student’s learning opportunities.
5. The preceptor should provide ongoing and timely feedback regarding knowledge base, clinical performance, and critical thinking skills.
6. The preceptor should ensure that office staff are aware of the student and how the student fits into office flow. Students should not be used to substitute for other clinical or administrative staff, i.e., serve only in the capacity of a medical assistant or front office staff.
7. The preceptor should ensure that patients are aware of the student’s role and obtain consent for student participation in their medical treatment.
8. The preceptor should promptly correct any marginal or unacceptable student performance and/or behavior. The preceptor should contact the Director of Clinical Education immediately with any noted unacceptable student performance, repeated marginal performance, excessive absences, etc.
9. The preceptor must complete an End of Rotation Performance Evaluation on each supervised student. The student’s medical knowledge, practical performance, professionalism, and overall performance are among the items included in the evaluation. This evaluation will be completed online in E*Value. *(Please see additional information under E*Value section).* Your diligence in completing these evaluations is greatly appreciated.

10. The preceptor should notify the PA Program of any changes in contact information. It is especially important for the PA Program to have a current email address for each preceptor in order to expedite receipt of the electronic End of Rotation Performance Evaluations in a timely fashion.

THE PRECEPTOR-STUDENT RELATIONSHIP

The preceptor should maintain a professional relationship with the PA student at all times and adhere to appropriate professional boundaries. Social activities and personal relationships outside of the professional learning environment are discouraged. Social contact should be avoided until the student has completed their entire educational program. If the preceptor and PA student have a personal relationship prior to the start of the rotation, a professional relationship must be maintained at all times in the clinical setting.

STUDENT SUPERVISION

Students may be monitored via direct and indirect supervision. Some portions of directly supervised clinical activity may be via the Clinical Preceptor's designated agent.

Tasks that students are allowed to perform under indirect supervision are only those designated by the Clinical Preceptor and permitted by law and the facility in which the rotation is located.

Some of these activities may include:

- Obtaining medical histories from patients
- Performing physical examinations on patients (with chaperone if indicated)
- Recording the history and physical examination in the patient record if permitted by Clinical Preceptor. All documentation must be countersigned by the Clinical Preceptor as defined by Georgia rules and regulations
- Ordering and interpreting lab work and diagnostic tests
- Assisting in preoperative care, in the operating room, and in postoperative care

The PA student is permitted to perform procedures on patients with direct Preceptor/Preceptor designee supervision. Tasks a student may perform will vary from rotation to rotation, and among students depending on their prior experience, didactic training and, rotation objectives. Generally student tasks should be those needed to meet responsibilities and competencies for an entry-level PA. The student will furthermore limit their scope of activity to those of the Clinical Preceptor and specialty (i.e., example procedures include venipuncture, peripheral or central IV access placement, casting and splinting, and suturing).

E*VALUE and END OF ROTATION PERFORMANCE EVALUATIONS

Frequent informal feedback, accompanied by strategies for improving future performance, is critical for effective learning. We ask our students to solicit this feedback from their preceptors in efforts to continually improve their performances over the course of the rotation. We appreciate the informal evaluation and feedback provided by our preceptors. The EOR Performance Evaluation is the opportunity for the Clinical Preceptor to formally evaluate the student. The evaluation system is designed to measure the cognitive, psychomotor and professional abilities of the student.

This formal evaluation is completed electronically on E*Value and must be completed by the Preceptor during the last week of the rotation, prior to the student's departure. It is appropriate and encouraged for the Preceptor to incorporate input from other associated health care professionals who have taught and/or supervised the student during their clinical rotation.

E*Value is the electronic platform that the PA Program utilizes for clinical rotation data management including clinical rotation evaluation. Preceptors are provided a username and login from E*value. Preceptors will utilize the provided login information to access the student's evaluation.

The student is encouraged to remind the preceptor to complete the evaluation before his/her departure from the rotation. If the program does not receive the preceptor evaluation by the end of the rotation, the student will receive an incomplete grade, which may delay graduation. The preceptor's evaluation report, results of a nationally standardized tests corresponding to the rotation (e.g. pediatrics, behavioral medicine, general surgery, etc.), and a professionalism score are all used to calculate the student's final grade for the rotation.

Please note that professionalism on clinical rotations is mandatory and must be exemplary throughout the clinical year. If any feedback within the EOR Performance Evaluation indicates a unprofessional behavior, that deficiency will be addressed directly with the Director of Clinical Education and may result in disciplinary action as determined on a case-by-case basis. Examples of unprofessional behavior include: unkempt demeanor, tardiness and any form of disrespectful, dismissive or argumentative interactions with others.

CLINICAL SITE VISITS

It is the responsibility of the program to periodically visit our clinical students in their clinical sites. These visits allow assessment of proficiency of the student and an opportunity for the site assessor to answer questions and address concerns that the preceptor or student may have.

A site visit will usually consist of a meeting between the Director of Clinical Education, the Clinical Preceptor, the Practice Office Manager/Administrator, if desired, and the student. Most

site visits are arranged in advance with the student's knowledge and participation. If the faculty requests a visit while a student is at your clinical site, the student will inform you of the proposed date and time of the visit.

These site visits may be conducted by any of the PA Program faculty or staff, AHEC coordinators, or any outside persons affiliated with the PA program deemed appropriate by the PA Program. Note that more than one site visit may be warranted for some students and are at the discretion of the Director of Clinical Education. If possible and appropriate, the Director of Clinical Education will spend time observing the student's clinical performance during the site visit(s).

Tips on Handling Students with Significant Academic or Professional Deficiencies

If you are having difficulty working with your student, please be candid with the student about your concern and discuss the issue with him/her.

Reviewing and clarifying expectations and roles may resolve the problem, or at least point out its origins (disagreement about student responsibilities, etc.). If you have identified a repeating pattern of behavior, it would be helpful to document specific instances and give specific examples of behavior, such as "arrived 20 minutes late to clinical site three times during the week; made demeaning or insensitive comment to patient; was dismissive/disrespectful of office staff." In this case of academic deficiencies, the preceptor is encouraged to give specific homework assignments to students to read about a particular diagnosis, differential diagnosis or surgery.

If the problem continues, is egregious, or if the preceptor feels that the student's presence is disruptive to your practice, please contact the Director of Clinical Education to discuss resolution of the situation. If the nature of the problem is such that there is question as to the safety of a patient, the preceptor, other clinic personnel or the student, the Preceptor should dismiss / remove the student from the environment immediately, and then contact the Director of Clinical Education.

STUDENT ATTENDANCE POLICY

- Students are expected and required to be present and punctual for all clinical rotation duties
- Student are expected to report a minimum of 30 minutes early on day one, and always be present 10-15 minutes early thereafter.
- Students may be required to participate in any shift, including nights, weekends, and holidays that is normally staffed by the Clinical Preceptor in the assigned healthcare facility. Such shifts should be appropriately supervised and educationally beneficial. The student hours may include activities such as clinic hours, meetings, patient rounds, on-call duty and will generally mirror the schedule of the Clinical Preceptor or their designee.
- As a guideline, students should expect the clinical work schedule to be between 8-14 hours in any 24 hour period. A minimum of a 32-hour work week is required of the clinical site by the PA Program, and the student may be required to participate in up to a 60-hour clinical work week based on the clinical site's schedule. Because of the significant amount of study and reading required during clinical rotations, students should not be routinely asked to work beyond these time frames. If they do, an appropriate amount of time off should be designated later that week for rest and study.

Tardiness

Tardiness, in any form, is inexcusable and the program relies on preceptors to report all these incidences on the End of Performance Evaluation. Excessive tardiness may be reported to the Clinical Team at any point during the rotation and excessive tardiness will result in further disciplinary action at the discretion of the Clinical Team.

Absences

Students are aware that routine medical/ dental/ miscellaneous appointments should be made during their four (4) weeks of scheduled vacation time when possible. However, when necessary, medical visits that must be scheduled during clinical rotation work time must be coordinated with the Coordinator of Experiential Learning and Clinical Preceptor, who must be notified in advance. Accommodations will be made on a case-by-case basis by the Clinical Team.

Students who are absent due to personal illness must notify their preceptors / clinical sites by phone no less than 30 minutes before the first scheduled shift. Any absence due to illness that exceeds one (1) day duration, will necessitate the student providing the Clinical Coordinator with the original written documentation from a health care provider, as well as the submission of a Clinical Absence Form that reflects all of the time missed from the clinical rotation.

Clinical Preceptors and/or the designee will be required to sign off on Clinical Absence Forms provided by the student for all absences. Excessive hours missed from a clinical rotation may result in the need to repeat the clinical rotation and are closely monitored by the program.

Breaks and Holidays

Mercer University observes the following holidays for on-campus students & employees. However, PA clinical students are required to work the clinical rotation schedule outlined by their preceptor (i.e., work when the preceptor works irrespective of holidays)

- Martin Luther King Day
- Good Friday
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

STUDENT APPEARANCE AND ATTIRE POLICY

Similar to the didactic year, students are required to maintain professional appearance during their clinical year experiences. An odor-free, fragrance-free, clean, neat and modest appearance is required. In general the student should adhere to dress standards that one might consider “business casual.” Certain rotation sites will have a site specific dress code above and beyond the PA Program dress code. In this case, the site’s dress code will supersede that of the school.

- Students are required to wear their Mercer University white coat while at any clinical rotation site.
- Facial hair must be neatly trimmed.
- Students are also required to display a Mercer University College of Health Professions identification badge, a patch embossed with the school logo, and the Program-approved name tag at all times.
- Skirt or dress length will be no shorter than 2-inches above the knee.
- All shoes worn in the clinical setting must be closed-toe only.
- Scrubs and/or tennis shoes are not to be worn during routine clinic hours unless it is the dress expected by the Clinical Preceptor; wearing scrubs is generally restricted to areas in which the risk of exposure to blood and other bodily fluid exposure is relatively high (e.g. surgery, OB, ER).
- Hair should be neat, clean, and of naturally appearing color.
- Hair should be styled off the face and out of the eyes. Longer hair should be secured to avoid interference with patients or work duties. Males are encouraged to have hair above the collar.
- Nails must be clean and well-trimmed.
- Nail polish will not be worn during surgical rotations.

- Jewelry must be limited and understated and may not interfere with the delivery of patient care.
- Allowed piercings are two pairs of non-dangling earrings, including helical/cartilaginous ear piercings on a female student.
- Other visible body piercing is to be removed during clinic duties.
- Makeup, if used, should be unobtrusive and in good taste.

THE FOLLOWING ARE ABSOLUTELY PROHIBITED DURING THE CLINICAL YEAR:

- Perfume, cologne, or fragranced body lotions
- Gauge earrings, tragus piercings, eyebrow or nasal piercings and any additional visible piercings other than those previously described as acceptable
- Offensive tattoos (deemed so by the PA Program or clinical rotation staff)
- False fingernails or overlays

ACCIDENTAL EXPOSURE & INFECTIOUS DISEASE POLICY

Mercer Physician Assistant students exposed to blood or body fluids (i.e., from a needle stick or scalpel injury or from splashing of body fluids in the eye, the mucous membranes of the mouth and nose, or on non-intact skin) must follow the following Blood Exposure Protocol for proper work-up, counseling, and follow-up.

I: ACCIDENTAL EXPOSURE

In the event of an accidental exposure (needle stick, splash, TB exposure etc.), students should follow three basic principles: (Refer to Appendix VII)

- 1. Remove or dilute the infectious material and institute first aid measures as appropriate.**
- 2. Remove soiled clothing.**
- 3. Thoroughly wash skin and mucosa by washing with copious amounts of water and soap. Contamination of the eyes requires immediate flushing with water or ophthalmic saline irrigation solution for 15 minutes (remove contacts first if you are a contact wearer).**

II: INCIDENT REPORTING (Students should refer to Appendix VII of the Clinical Student Manual)

- Students should immediately notify the Coordinator of Experiential Learning and/or Director of Clinical Education via phone or email.
- Students should obtain the name and medical record number of the patient source. For accidents with microorganisms for which serological tests are available, a base-line serum sample should be obtained at the time of occurrence.
- Students should be evaluated by a medical provider for treatment and evaluation for prophylaxis. Utilize a local hospital Emergency Department for 24- hour accessibility or an Urgent Care with extended hours, depending on the time of the exposure and the geography of the clinical rotation assignment. If the facility in which the student is assigned has a protocol in place for testing, that protocol should be used.
- Students should submit an Accidental Exposure Incident Form within 24 hours

NOTE: ALL EXPENSES INCURRED SECONDARY TO AN EXPOSURE ARE THE SOLE RESPONSIBILITY OF THE PA STUDENT. THE CLINICAL SITE NOR THE MERCER PA PROGRAM ARE LIABLE FOR THE COST OF EXPOSURE TESTING.

CREDENTIALING DOCUMENTS

For each rotation, the clinical preceptor should receive the assigned PA student's brief biographical sketch. Upon request, the following documentation may also be provided to the clinical site:

- PA Student Biographical Information
- ACLS Certification Card
- BLS Certification Card
- HIPAA Training documentation
- Letter of Good Standing with the Mercer PA Program
- Current Immunization Record and any required proof of immunizations (influenza included) and infectious disease screening (e.g. PPD)
- Background Check and Drug Screens
- Advantage Student houses each student's background check and drug screen.
- Students allow each facility access to these records on the Advantage Student website.

MALPRACTICE COVERAGE: CERTIFICATE OF INSURANCE

Malpractice insurance is provided by Mercer University and a current Certificate of Insurance maybe provided by the PA Program to all clinical rotation sites/clinics/hospitals as requested to provide verification.

All actively enrolled students are covered under the institutional policy for medical liability associated with training activities during the Pre-Clinical and Clinical portions of the program; however, malpractice coverage during the clinical phase is applicable only to rotation assignments made and approved by the Mercer PA program. Any clinical opportunities that become available to a student on a clinical rotation that fall outside of the original assignment are subject to approval by the Director of Clinical Education and/or the Program Director.

PRESCRIPTION WRITING

Because students have no authority or medical license to prescribe medications, the following are strictly prohibited:

- Students may **NOT** individually prescribe any medications.
- Students will **NOT** sign their name on the prescription.
- Students may **NOT** sign the physician's name then write the student's initials after the physician name.
- Students may **NOT** carry or use a pre-signed prescription pad.

GA PRECEPTOR TAX INCENTIVE PROGRAM

The Preceptor Tax Incentive Program (PTIP) rewards licensed Georgia physicians taking Georgia medical, physician assistant, and nurse practitioner students into their practices for the students' required core clerkships (**family medicine, outpatient or inpatient internal medicine, general pediatrics, OB/GYN, psychiatry, emergency medicine and general surgery**).

Physicians who receive direct compensation for teaching from **ANY** source are not eligible to earn this deduction.

Preceptors Qualifications:

Licensed physician in GA

- Cannot receive direct compensation for teaching medical, osteopathic, NP, or PA students
- Deduction only available for rotations supporting Georgia medical, osteopathic, NP, or PA programs
- Must complete a minimum of three rotations to be eligible; deductions are provided retroactively once eligibility is established
- A maximum of 10 rotations may be claimed for deductions each calendar year

Tax deductions are only applicable for core clerkships (defined as: family medicine, general internal medicine, general pediatrics, obstetrics and gynecology, emergency medicine, psychiatry, and general surgery). The maximum tax deduction earned each year is \$10,000.

Programs will submit completed rotation dates and hours to the Statewide AHEC.

PRIVACY NOTICE FOR PHYSICIANS:

Physicians' service hours, non-identifying personal information (i.e., county, type of practice, etc.) will be retained on file for reporting purposes. Individual names or data will not be used for any purpose other than direct communication and execution of certification letter. Data will be retained for reporting purposes to the Legislature in regards to volume, location of preceptors (by county only) and the utilization of the deduction across the state and disciplines. Home/work addresses, names or any other non-aggregated data will not be released by the PA Program without written consent. Records will be retained indefinitely to track PTIP program utilization.

DEFINITION OF "PRECEPTOR":

A licensed Georgia Physician (MD or DO) providing uncompensated community-based training for MD, DO, nurse practitioner, or physician assistant students matriculating at a Georgia program (public or private) for selected rotations.

Please do not submit rotation data. Each academic program will submit completed rotation data to the Statewide AHEC Program Office. **All data is submitted quarterly**

For more information:

If you have further questions, please contact Ms. Shayla Davis, Clinical Coordinator, email: **davis_sd@mercer.edu** or via telephone 678-547-6399. You may also visit the GA PTIP Website at **<http://www.augusta.edu/ahec/ptip/>**.

If you have questions about submitting PTIP data, please contact Cindy Peloquin at cpeloqui@augusta.edu or (706) 721-8331.