



Master of Physician Assistant Studies  
Clinical Year Supplement to  
Student Guidebook

Clinical Year 2019

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## PROGRAM CONTACT INFORMATION

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## FOREWORD

The information contained in this Guidebook is intended to assist you by drawing attention to some of the policies and information you will need to know as a clinical year student in the Master of Physician Assistant Studies (MPAS) Program.

This Guidebook is a supplement to the Florida Gulf Coast University (FGCU) MPAS Program Policies and Student Guidebook and provides guidelines, policies and specific information for clinical year MPAS students. This Guidebook also serves as a supplement to the FGCU Student Handbook, University policies, procedures, rules, requirements, and publications. Students are responsible for all information presented in this Guidebook.

Students enrolled in the Marieb College of Health & Human Services academic programs, should also be knowledgeable of the College's policies, rules, regulations, and administrative procedures that affect the student.

It is the responsibility of the student to read this Guidebook, as well as the MPAS Program Policies and Student Guidebook, FGCU University Academic Catalog, FGCU Graduate Student Guidebook, FGCU Student Guidebook, and Student Code of Conduct, and to follow all guidelines, rules, and regulations as they relate to FGCU, Marieb College of Health & Human Services, and the MPAS Program.

While every effort has been made to verify the accuracy of this information, FGCU, the Marieb College of Health & Human Services, and the MPAS Program reserve the right and freedom to change, without notice, degree requirements, curriculum, courses, teaching personnel, rules, regulations, tuition, fees, and any other published documents herein. This publication is not to be regarded as a contract.

Welcome to the MPAS Program at FGCU. We look forward to guiding you through this clinical year, and toward your success as a MPAS student!

*Nelson Anthony Guzman, PA-C, DHSc*

**Nelson Anthony Guzman, PA-C, DHSc**  
Director of Clinical Education  
Master of Physician Assistant Studies Program

## CLINICAL YEAR SCHEDULE

ROTATION	ROTATION DATES*	CALLBACK DAY(S)**
1	Monday 1/7/19 through Thursday 1/31/19	Friday 2/1/19
2	Monday 2/4/19 through Thursday 2/28/19	Friday 3/1/19
3	Monday 3/4/19 through Thursday 3/28/19	Friday 3/29/19
4	Monday 4/1/19 through Thursday 4/25/19	Friday 4/26/19
5	Monday 4/29/19 through Thursday 5/23/19	Friday 5/24/19
6	Monday 5/27/19 through Wednesday 6/19/19	Thursday & Friday 6/20 & 6/21/19
7	Monday 6/24/19 through Wednesday 7/16/19	Thursday & Friday 7/18 & 7/19/19
Graduate Project	Monday 7/22/19 through Friday 7/26/19	N/A
8	Monday 7/29/19 through Wednesday 8/21/19	Thursday & Friday 8/22 & 8/23/19
9	Monday 8/26/19 through Wednesday 9/18/19	Thursday & Friday 9/19 & 9/20/19
10	Monday 9/23/19 through Wednesday 10/15/19	Thursday & Friday 10/17 & 10/18/19
11	Monday 10/21/19 through Wednesday 11/12/19	Thursday & Friday 11/14 & 11/15/19
12	Monday 11/18/19 through Wednesday 12/11/19	Thursday & Friday 12/12 & 12/13/19
Commencement Ceremony 12/15/19		
PANCE Review: TBD**		

\* Rotations end at 4PM on the last day of the rotation. The student will be notified of any changes.

\*\*End-of-rotation Callback Day on campus. Attendance is mandatory.

\*\*Attendance during Callback Day(s) and PANCE Review are mandatory.

FLORIDA GULF COAST UNIVERSITY  
MARIEB COLLEGE OF HEALTH & HUMAN SERVICES  
MASTER OF PHYSICIAN ASSISTANT STUDIES

OVERVIEW OF THE CLINICAL YEAR

## CURRICULUM AND CLINICAL ROTATIONS

- A. The clinical year provides opportunities for MPAS students to develop and refine their skills acquired during the academic phase of training. Students function as an integral part of the healthcare delivery team. As part of their education, they share patient care responsibilities under supervision of their preceptor, but they will not serve as a substitute for paid clinicians or staff.<sup>1</sup>
- B. What follows in this section is an overview of the clinical year. As Program policies must apply to all students, as well as all principal faculty, and PA Program Director, all participants in the Program are urged to read through this Guidebook and understand the policies contained therein.<sup>2</sup> Contact the Director of Clinical Education (DCE) if there are questions, if clarifications are needed, or for issues not covered by this Guidebook. Ignorance of the policies is not an excuse for transgressions and will be considered to be unprofessional behavior on the part of the student.

### GOALS OF THE CLINICAL YEAR

- A. 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 physician assistant (PA). To this end, the goals of the clinical year include:
  - 1) Achieve the FGCU MPAS Program Learning Outcomes and Competencies
  - 2) Apply didactic knowledge to supervised clinical practice
  - 3) Develop and sharpen clinical problem-solving skills
  - 4) Expand and develop the medical fund of knowledge
  - 5) Perfect the art of history taking and physical examination skills
  - 6) Sharpen and refine oral presentation and written documentation skills
  - 7) Develop interpersonal skills and professionalism necessary to function as part of a medical team
  - 8) Develop an understanding of the PA role in health care delivery
  - 9) Develop an indication of the kind of practice setting desired for employment after graduation
  - 10) Prepare for the Physician Assistant National Certifying Exam
- C. The rotations allow students to apply knowledge and refine skills learned in the academic year, within a supervised clinical practice in order to develop clinical problem-solving skills.
- D. At the end of the clinical year, students will be able to (1) efficiently evaluate a clinical database, (2) develop a differential diagnosis, and (3) formulate a rational treatment plan for specified

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ARC-PA Standards, Fourth Edition

<sup>1</sup> A3.05, A3.06

<sup>2</sup> A3.01, A3.02



clinical conditions frequently encountered in physician assistant practice.

- E. Each rotation, students will be assessed on specific learning outcomes developed for each required rotation (see Canvas web page for course syllabi for each of the clinical rotations)<sup>3</sup>. These outcomes are associated with learning objectives, which essentially are a reading list for self-guided study throughout the rotation. It is anticipated that this clinical year reading program will help prepare students for the Physician Assistant National Certifying Examination (PANCE).
- F. The MPAS Program utilizes the PAEA End of Rotation™ Exams for the core rotations. The PAEA End of Rotation™ (EOR) exams are nationally developed by the Physician Assistant Education Association (PAEA), and are based on the NCCPA blueprint, as well as the specific EOR exam blueprint and topic list. For selective rotations, a program-developed written examination is administered, based upon the objectives and topic list for the rotation discipline.
- G. The diseases and conditions listed in the topic lists in the clinical rotation syllabi are representative of areas students may be exposed, and common conditions PAs might be expected to evaluate and manage during the rotation. They represent the minimum that the PA Program expects students to accomplish in regard to medical knowledge and related clinical problem-solving skills. However, this is not meant to suggest that the student will be exposed to every situation and condition listed in the rotation general and instructional objectives. The student is responsible to actively seek out learning opportunities, and accomplish the learning outcomes through a combination of exposure during clinical time, as well as through self-study.

## REQUIRED AND SELECTIVE CLINICAL ROTATIONS

- A. All clinical rotations are 3 credit hours, and 4 weeks in length. Clinical Year Principal Training Areas are located within a 50-mile radius of the main FGCU campus and include the following counties: Charlotte, Collier, Desoto, Glades, Hendry, Lee, and Sarasota. Rotations will generally begin on a Monday and end on a Wednesday at 4PM.
- B. *The first priority in assigning rotations is to ensure the student has an experience that allows her/him to meet educational objectives.* To that end, the DCE will assign rotations *primarily* based on the student's educational needs.<sup>4</sup> While every effort will be made to accommodate reasonable requests, the quality of the student's clinical education will come first, and he/she might not be assigned to their primary choice of selective rotation.
- C. 9 Required Core Rotations<sup>5</sup>
  - PAS 6100 Internal Medicine I (Inpatient)
  - PAS 6101 Internal Medicine II (Outpatient)

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ARC-PA Standards, Fourth Edition

<sup>3</sup> B1.09

<sup>4</sup> B3.02

<sup>5</sup> B3.04, B3.07

- PAS 6125 Behavioral Health
- PAS 6200 General Surgery
- PAS 6300 Pediatrics
- PAS 6400 Primary Care I
- PAS 6401 Primary Care II
- PAS 6505 Women's Health
- PAS 6600 Emergency Medicine

D. 3 Selective Rotations (PAS 6940, PAS 6941, PAS 6942)

- 1) According to Merriam-Webster, "Selective" is defined as (1) of, relating to, or characterized by selection; (2) highly specific in activity or effect. The purpose of these rotations is to broaden the student's knowledge in an area of weakness as indicated by performance during the academic curriculum, or in an area he/she needs more exposure to or is passionate about.

The Selectives are restricted electives. Two of these should be completed in an adult or pediatric medicine specialty.

Subject to the approval of the DCE, and depending on a student's academic standing, clinical performance, and cooperation with the policies and procedures of the clinical year, students may request an elective rotation for the third Selective.

- 2) This elective rotation is a privilege earned throughout the clinical year, and is determined on the priorities of the student's (1) educational needs, (2) availability, and (3) preferences. While every reasonable effort will be made to place the student in the elective of his or her choice, these priorities must be observed.
- 3) The DCE must approve all Selective rotations prior to assignment. Approval for requests is based primarily on the academic needs of the student, and assignments are subject to availability. The DCE reserves the right to override a student's choice of Selective rotation in order to enhance a student's skills or knowledge as necessary.
- 4) Requests for Selective rotation specialty should be submitted to the DCE no later than 120 days in advance. Requests after this timeframe may not be approved. A specific preceptor may only be requested in the "elective" (third selective) rotation. Aside from this "elective" rotation, specific preceptors may not be requested.
- 5) If the student does not submit a Clinical Rotation Request for a Selective rotation to the DCE within 120 days of the scheduled rotation month, the DCE may assign the rotation(s) without the input of the student.

E. PAS 6935 Seminar

- 1) This is a one credit hour course in which the student is registered four times during the clinical year, for a total of four credit hours.

Seminar is conducted on the end-of-rotation Callback Days, and during other times when the student is on campus in between rotations. Attendance is mandatory.

- 2) Unexcused absences will result in a failing grade for this course. Requests to be excused from these activities may only be approved by the DCE for emergencies or other extraordinary circumstances.

- 3) Topics covered include advanced clinical lectures, problem-solving exercises, evidence-based medicine discussions, review of the literature, transition to professional practice, PANCE topics review, etc. Other topics covered may include job searching, certification, licensure, credentialing, preparation of CVs, personal safety, etc. Class participation will frequently be involved. Furthermore, the Graduate Project and Summative Examination fall under the purview of the Seminar courses.

## STUDENT RESPONSIBILITIES

The PA Student is committed to:

- A. Be responsible by working hours as required by the preceptor, and attending all rotations and Call Back Days as scheduled. If a student must miss a scheduled rotation day, the preceptor and the DCE must be notified in a timely manner.
- B. Inform the preceptor on a regular basis of the student's individual needs; this includes sharing with the preceptor where the student feels he/she "is" and where he/she "ought to be" in specific clinical requirements and clinical skills.
- C. Be sensitive to the pressures on the preceptor; the amount of time the preceptor can spend with the student may depend on the number of patients scheduled, the physician's concern about patients or other issues, or how tired he/she is. The preceptor may also feel pressured by the responsibility of having an expectant, inquiring student.
- D. Be sensitive to the wishes of the patient and their willingness to share confidences or to have the student be partially responsible for their care.
- E. Be sensitive of the way in which the preceptor deals with his/her patients. The student may not wish to adopt the same attitudes and behavior toward the patients; however, if there appears to be an issue, it should be discussed before a major problem develops.
- F. Be sensitive to the demands the student's presence places on the office staff; check regularly with staff about the increased workload expected of them. If the student is aware and/or informed that the workload has increased to an unbearable level, the student should cooperate in the planning and alleviation of the situation.
- G. Be appreciative (courteous to) of the office staff, the preceptor as well as the patient.
- H. Complete and submit all required paperwork (see Appendix A), assessments and evaluations for each rotation by the required deadline. Comply program and clinical site requests in a timely manner and contact the DCE as soon as possible if clarification is needed.
- I. Review rotation syllabi prior to the start of the rotation and periodically throughout the rotation. To meet learning outcomes of the rotation, the student must actively seek out opportunities to be involved in the care of a wide variety of patients across the lifespan (including infants, children, adolescents, adults, and the elderly) in the outpatient, inpatient, emergency department, and operating room, seeking care for acute, chronic, emergent, surgical, gynecological, prenatal, and preventive conditions.

- J. Schedule adequate time for reading, studying, preparing for the PANCE exam, preparing for and passing the end-of-rotation exams for each rotation, composing the capstone project, as well as the summative exam administered within four months of program completion.
- K. Keep open communication between the student, their family, their support groups, their preceptor, and the Program. Check their FGCU email account at least once per day for important communication. Notify the program of any problems in a timely fashion.
- L. Schedule occasional leisure opportunities.
- M. Monitor their own clinical progress and make their needs known to their preceptor and the program.

## PROGRAM RESPONSIBILITIES

The PA Program is committed to:

- A. The continuous development of clinical sites that provide clinical experiences requisite for Physician Assistant education, to afford the students the ability to meet program-defined expectations.
- B. Providing sufficient clinical sites for the PA Program's required clinical practice experiences.
- C. Monitoring and updating affiliation agreements, clinical preceptor licenses, board certifications, and any other documentation related to the clinical phase.
- D. Providing clinical preceptors and sites a thorough orientation on PA education, clearly delineating what are the PA Program's goals and expectations.<sup>6</sup>
- E. Providing students a thorough orientation to the clinical phase of the program, clearly delineating the PA Program's goals and expectations.
- F. Providing students and clinical preceptors with rotation specific syllabi with clear learning objectives and goals.
- G. Being available to students to answer any question regarding policy and procedure and to intervene should any problem arise. Students will be contacted by the MPAS program by the end of the first week of each rotation to ensure that the student has no questions or concerns regarding the rotation.
- H. Being available to clinical preceptors to answer any question regarding policy and procedure and to intervene should any problem arise.
- I. Monitoring and assessing the student's progress and achievement of the goals and objectives at the mid-point and the end of each rotation.
- J. Monitoring and assessing that each clinical preceptor provides a high quality clinical experience.
- K. Providing remediation and support for those students who are not achieving the goals and objectives of the clinical rotation.
- L. Abiding by the FGCU MPAS Program policies and procedures and the policies and procedures set forth in this manual.

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ARC-PA Standards, Fourth Edition

<sup>6</sup> B1.10

## SUPERVISED CLINICAL ACTIVITY

- A. MPAS students on clinical rotation work under the supervision of a licensed preceptor.<sup>7</sup>
  - 1) Preceptors for the MPAS Program are primarily practicing physicians who are board certified in their area of instruction, and PAs who work with these physicians.<sup>8</sup> In some cases, the preceptor may be a licensed physician or health care provider experienced in their area of instruction.<sup>9</sup> The MPAS Program does not rely primarily on resident physicians for clinical or didactic instruction.<sup>10</sup>
  - 2) As MPAS students work under the supervision of licensed clinician preceptors (e.g. physician, PA, nurse practitioner, midwife, etc.), students must not make a diagnosis or carry out any procedure or treatment plan without the explicit approval of a preceptor.
- B. When given an order by a preceptor, a student has three possible courses of action:
  - 1) Carry out the order as directed.
  - 2) If there is disagreement with the order, discuss it with the preceptor and mutually agree on a course of action.
  - 3) Inform the preceptor that the student does not feel qualified to safely carry out the order.
- C. At no time will a student change an order or carry out a course of action different from that directed by the preceptor.
- D. The performance of procedures by MPAS students will be based upon site/preceptor preferences and availability. If the student is permitted to perform procedures, the student must be under the direct supervision of the preceptor.
- E. **In the event of the temporary absence of his/her regular preceptor, students must notify the MPAS Program of their alternate preceptor.** At no time will students rotate without having a preceptor clearly identified.<sup>11</sup> Likewise, at no time may students replace or fill in for absent clinical site employees.
- F. **Students are not be allowed to work extra rotation sites outside of their specified clinical rotation requirements** (e.g. working extra hours in an ER when the student is scheduled for pediatrics that month). Such activity would place the student and the MPAS Program at great risk since malpractice coverage will not exist.
- G. Students must have all charts and written orders countersigned by the preceptor on the day of the patient encounter. This may be on paper charts or on equivalent electronic medical record (EMR) chart. Hospital policy also governs countersignatures. It may be policy in some clinical sites to not allow students to write in the charts. *This does not preclude the student from writing*

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ARC-PA Standards, Fourth Edition

<sup>7</sup> A2.16, A2.17

<sup>8</sup> B3.05, B3.06a, B3.06b

<sup>9</sup> B3.06c

<sup>10</sup> A2.15

<sup>11</sup> A2.17

*up the patient case for the preceptor to critique, but not include in the chart.* The student is encouraged to practice documentation and have such documentation reviewed by the preceptor, as the student will be assessed on proficiency at documentation at the end of the rotation.

- H. No patient should be discharged from a clinical site by an MPAS student without the preceptor's approval and signature on the chart.
- I. In all clinical activities, MPAS students should be guided by the principle of **knowing one's limitations**. This is a concept that must be taken with them throughout their training in the program as well as the rest of their careers.

## ASSIGNMENT OF CLINICAL ROTATIONS

- A. **The first priority when assigning rotations** is to ensure that every student meets the learning outcomes of the clinical year, and attains exposure to variety of patients in a variety of settings. A well-rounded clinical education requires that students be exposed to a variety of clinical practice settings (in-patient vs. outpatient practices, academic medical centers vs. community-based sites, urban vs. rural practices, operating room, ER, etc.).
  - 1) The DCE will assign rotations *primarily* based on the student's educational needs. The student's educational needs are determined through the monitoring of past assessments during the didactic year, as well as assessments during clinical year, and the student's clinical case logs.
  - 2) While every effort will be made to accommodate reasonable requests, the quality of the student's clinical education will come first, and he/she might not be assigned to their primary choice of selective rotation.
  - 3) Rotation assignments are always contingent upon the availability of a particular rotation site at any given point in time, and the DCE's prior approval of the rotation.
  - 4) **The PA Program will not consider requests for rotation changes once the clinical rotation has been confirmed**, except under extraordinary circumstances. This includes confirmed elective and selective rotations. However, the PA Program reserves the right to change student rotation schedules at any time in order insure that the academic requirements of the clinical year are met. Any rotation change requests made subsequent to a confirmed rotation must be approved by the DCE. If a student requests a change of rotation after the rotation has started, the DCE will perform a site visit and meet with the student and preceptor to discuss the rotation and whatever issues there may be. If the DCE determines that the student be placed in a different site, the change will occur as soon as possible, without penalty to the student.
- B. In each rotation that the student is assigned, the preceptor (who by definition is an instructional faculty member of the MPAS Program) is designated by the program to assess and supervise the student's progress in achieving the learning outcomes. The preceptor will complete evaluations as mentioned elsewhere in this document. These evaluations are part of the rotation grade. The contact information for the preceptor will be located in Typhon and may include the preceptor's

personal phone number and/or email address. If at any time the student is unable to reach the preceptor, the student must contact the DCE.

C. **Students will not be required to rotate at a site that is greater than 50 miles from the FGCU campus** unless the student agrees to placement at the site.

D. The order in which the student completes his or her rotations has no impact on the quality of the clinical education.

E. Students are not permitted to sign any forms or contracts on behalf of the MPAS Program.

F. **Development of Clinical Sites**

The complete SCPE Site and Preceptor and Development policy is located in the PA Program portal

- 1) The MPAS Program coordinates clinical sites and preceptors for rotations. As such, students are not required to solicit clinical sites or preceptors.<sup>12</sup>
- 2) Coordinating clinical practice experiences is the responsibility of the MPAS Program. This involves identifying, contacting and evaluating sites and preceptors for suitability as a required or elective rotation experience. The MPAS Program also ensures that all preceptors hold a valid license that allows them to practice at the clinical site, as well as the education and experience needed to provide instruction.<sup>13</sup> The requirements of preceptors are noted in the MPAS SCPE Site and Preceptor Development Policy.
- 3) Students may make suggestions to principal faculty for sites and preceptors, but are not required to do so. Student suggested sites and preceptors are to be reviewed, evaluated and approved for educational suitability by the program.
- 4) Students must not call established rotation sites unless asked to do so by the MPAS Program.

E. **Requests for rotations**

- 1) Requests for rotations are considered **only** for the following:
  - a. With preceptors who are new to the Program
  - b. Selective Rotation specialty
  - c. Elective Rotation specialty and/or preceptor
- 2) Requests are communicated to the DCE.
- 3) If a student knows of a potential clinical site:
  - a. The name, business address, email address, contact phone and fax numbers of the potential site, as well as the potential preceptor's name (and practice manager's name, if known) are to be forwarded to the DCE.
  - b. The DCE will then start the evaluation process to determine if the site is suitable.
  - c. All potential clinical sites should be willing to precept other PA Program students in the future.

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ARC-PA Standards, Fourth Edition

<sup>12</sup> A3.03

<sup>13</sup> A2.16, A2.01, A2.13

- 4) Requests should be submitted 120 days before the rotation is scheduled to begin. This lead time is necessary to ensure that any administrative matters such as inter-institutional affiliation contracts, rotation applications and student credentialing by health care facilities, and other prerequisites imposed by the rotation site are accomplished well in advance of the rotation start date.
- 5) Approval of rotation requests is contingent upon the educational value of the rotation, the student's demonstration of academic and clinical development, and the student's history of cooperating with the policies and procedures of the clinical year. The willingness of a preceptor to give the student access to his/her patients for clinical training, and to provide the student with an end-of-rotation evaluation, are other important factors that are taken into account when considering rotation requests.
- 6) With respect to Core and Selective Rotations, requests for specific preceptors will not be entertained, unless he or she is not currently a preceptor for the FGCU MPAS Program.
- 7) Out-of-state rotations are not entertained. All rotations should take place within the State of Florida, primarily within our area as described above. Rotations with United States Federal facilities may be considered on a case by case basis by the DCE and Program Director.
- 8) It is strongly recommended that the student discuss any planned rotation requests with the DCE before submitting a Clinical Rotation Request Form. The procedure for arranging a rotation with a preceptor who is new to FGCU will be outlined at that time.
- 9) Students requesting to do rotations with any healthcare provider (e.g. MD, DO, PA, ARNP, etc.) who are family members, friends of their family, their personal healthcare provider, or where students may be currently/recently employed may be considered on a case-by-case basis with consideration given to academic and professional standing.

## STUDENT HOUSING AND OTHER EXPENSES DURING THE CLINICAL YEAR

- A. MPAS students are responsible for their transportation, housing, and living expenses during the clinical year. The program is not obligated to provide students with housing while the student is on rotation. Students should plan their clinical year finances in advance to ensure adequate resources for their clinical education. In addition to expenses for tuition, fees, textbooks, and medical equipment, students should include funds for health and disability insurance, transportation, temporary housing and pet expenses (if applicable). Reliable transportation is also essential and required. Each student will be required to return to campus at the end of each rotation for mandatory exams and other administrative and educational activities.
- B. Any and all expenses associated with student housing and travel to and from rotation sites and the FGCU campus are the sole responsibility of the student.
- C. Estimated expenses can be found in the MPAS Program webpage.<sup>14</sup>



## ATTENDANCE DURING THE CLINICAL YEAR

- A. Students normally report to rotations on the first Monday of each rotation block and work until 4PM of the last Wednesday or Thursday of the rotation block unless directed to do otherwise by the PA Program or preceptor.
- B. **The rotation preceptor controls the student's schedule, night call, days off, and daily routine.** Students are expected to clarify all schedule issues with the preceptor on the first day of rotation.
  - 1) MPAS students are not to work more than 16 consecutive hours providing patient care unless the student has access to an "on-call" room, and opportunities to rest.
  - 2) Students should receive at least 1 day off per week during their rotation.
  - 3) Call schedules are to be followed as the preceptor/service specifies. On-call experience should fulfill an educational function and not a site staffing need. It should not be excessive. If a problem exists, the PA Program should be notified for clarification.
  - 4) Students should not be required to perform in-house overnight call more frequently than every three days.
- C. **Absences from clinical rotations will not be tolerated.** Any student who has an unexcused absence may be brought before the Student Advancement and Professionalism Committee (SAPC). Any absence that occurs must be explained in writing (via e-mail) to the DCE prior to the absence occurring, unless there is an emergency. In the case of an emergent absence the MPAS Program and the preceptor must be notified immediately. A written explanation (via e-mail) must be made to the PA Program office within 24 hours of the absence. Failure to comply with this may result in a substantial reduction in the professionalism grade for the rotation.
- D. All students at FGCU have a right to expect that the University will reasonably accommodate their religious observances, practices, and beliefs. Students, upon prior notification to their instructors, shall be excused from class or other scheduled academic activity to observe a religious holy day of their faith. Students shall be permitted a reasonable amount of time to make up the material or activities covered in their absence. Students shall not be penalized due to absence from class or other scheduled academic activity because of religious observances. Where practicable, major examinations, major assignments, and University ceremonies will not be scheduled on a major religious holy day. A student who is to be excused from class for a religious observance is not required to provide a second party certification of the reason for the absence.
- E. **Students who must have time off from a rotation** must obtain approval from their preceptor first, and then the DCE. Official approval is obtained by completing an Absence Request Form (available on the Clinical Year website in Canvas) after having discussed the absence with the preceptor. The DCE and the Program Director reserve the right to determine how many and what types of absences will be approved.
- F. **Absence from rotation because of acute illness** requires students to call in to their preceptor and the DCE. After returning to the clinical site, an Absence Request Form is completed and submitted as outlined above. Prolonged illnesses may result in repeating the rotation. Medical

documentation of the illness by the student's personal clinician may be required at the discretion of the DCE.

- G. **Excessive absence from a clinical rotation** may result in the student receiving an "incomplete" grade for the rotation, and thereafter being placed in additional clinical experiences, up to a repeat of the entire rotation. This is at the discretion of the DCE, and is considered on a case-by-case basis, as every circumstance is unique. Decisions may be based on several factors including, but not limited to: the previous clinical exposures documented by the student in Typhon, characteristics of the relevant as well as future clinical rotations, and the academic performance of the student. It is possible that excessive absence may result in delayed graduation and/or a referral to the SAPC.
- H. **Extended leaves of absence** are requested by writing a letter of request to the Program Director. The granting of a leave of absence is not guaranteed. See the MPAS Program Student Guidebook.
- I. **Friends or family members are prohibited from contacting preceptors or rotation sites on a student's behalf.** Only students or PA Program personnel are permitted to make phone calls or visit rotation sites. Any interference by friends or family members with regard to the student's scheduling, rotation requests, or rotations in general will be considered the responsibility of the student and may be subject to disciplinary action from the SAPC for unprofessionalism.
- J. **In emergency situations**, if family members are unable to reach students by personal phone calls, they should contact the PA Program first. Faculty or staff will either call the student at the rotation site or give instructions to expedite contact. If unable to contact anyone in the PA Program, then family members may call the site with minimal interruption of patient care.
- K. **If a student receives a request for jury duty service, the student must report the request to the MPAS Program Director as soon as possible. The Program will provide a letter of active student status if requested, to facilitate postponement of jury duty service until after the student completes the PA program. If required, any lost clinical time due to jury duty will be made up at a time convenient for the preceptor and coordinated with the DCE.**
- L. **Conference leaves of absence** - Clinical year students are encouraged to and thus may ask attend a FAPA and/or AAPA conference during their clinical training. The request should be submitted as far in advance as possible, at least 60 days prior to the conference. The DCE will consider each request on an individual basis, taking into consideration the distance to travel, the academic strength of the student, the rotation, and the amount of time the student would miss. **A student's request may be denied if he/she has excessive previous absences, if there are conflicts with scheduled PA Program activities, or if the clinical education outweighs the benefits of attending the conference.**
- M. **End-of-Rotation Callback Day Attendance** – Attendance at the monthly end-of-rotation assessments and educational activities is MANDATORY. Students should expect to be on campus from 7am-4pm on Callback Days. The student must plan his or her schedule accordingly. Requests to be excused from these activities will be reviewed on an individual basis by the DCE.

## ADDITIONAL ASSIGNMENTS

Rotation sites may require additional assignments (i.e. papers, presentations, exams, etc.) that may be factored into students' evaluation grade. It is the student's responsibility to complete all tasks required to the best of their ability. The PA Program supports the decision of any site to present students with additional educational opportunities.

## ADDITIONAL SITE REQUIREMENTS

Some sites may have additional requirements to be fulfilled prior to beginning rotations. There may be additional immunization requirements, insurance verifications, HIPAA verification, drug screening, and/or national criminal background check. Some sites that have additional requirements may pay for these services; however, **any costs involved are ultimately the responsibility of the student.**

## STUDENT SAFETY AT CLINICAL SITES<sup>15</sup>

- A. The complete Infection Control and Personal Safety policy is located in the PA Program portal.
- B. Students must be aware of their surroundings at all times.
- C. Students must familiarize themselves with the safety procedures at the clinical site.
  - 1) Clinical sites on hospital campuses, such as Lee Health and NCH Healthcare, have comprehensive security departments with security officers on duty 24/7.
  - 2) Students must familiarize themselves with the methods of contacting (i.e. phone numbers) security departments such as those at hospital campuses.
    - a. These security departments offer services such as escorting to vehicles, assistance with vehicle breakdown, and so on.
    - b. In the event of an emergency, the student must contact site security officers and/or call 911 immediately for further assistance.
- D. Students are never required to rotate at a site where they feel unsafe. In the event that a student feels that a site is unsafe, the student must address personal safety first (e.g. move to a safe location, call security/public safety/police, and contact the PA program as soon as it is practical to do so).
- E. The student must report any safety issues, events, or concerns to the program immediately after its occurrence (as soon as it is practical to do so).
- F. The following are safety tips with which the student should become familiar:
  - 1) Personal Safety:
    - a. Have your cell phone on you, and make sure your battery has an adequate charge, in case you need to call for help.

- b. Walk with a friend whenever possible.
  - c. When walking at night, stick to well-traveled, well-lit areas.
  - d. If you are being followed, walk to a populated area and call 911.
  - e. Walk with your head up being aware of your surroundings, making eye contact.
  - f. Have your car keys ready at all times.
  - g. Have your bags packed neatly before you leave the clinic, so that you do not appear disorganized and fumbling to get in your vehicle.
- 2) Keeping Your Property Safe:
- a. Always lock your vehicle no matter how long you will be gone.
  - b. Make sure all valuables inside the vehicle are either in the trunk or well hidden.
  - c. Do not leave personal property unattended in a public place, even for a short period of time.
  - d. Do not display large sums of money.
  - e. Report any suspicious behavior that you may observe.
- 3) Keeping Your Car Safe:
- a. Always lock your vehicle no matter how long you will be gone.
  - b. Do not play your radio loud before you park somewhere – it attracts attention from everyone (including thieves).
  - c. Keep iPods, iPads, bags, clothing, and other property out of sight, preferably in a glove compartment or the trunk.
- 4) If You Are Sexually Assaulted:
- a. Get to a safe place as soon as you can.
  - b. Call 911 or go to the closest ER.
  - c. Don't shower or go to the bathroom if possible – it can destroy evidence.
  - d. It's not your fault – don't think that it is.
  - e. Don't worry about prosecution or testifying in court – it is more important to make sure you're safe.

FLORIDA GULF COAST UNIVERSITY  
MARIEB COLLEGE OF HEALTH & HUMAN SERVICES  
MASTER OF PHYSICIAN ASSISTANT STUDIES

ADMINISTRATIVE POLICIES AND PROCEDURES OF THE CLINICAL YEAR

## INSTRUCTIONAL ROLES

While it is recognized that many students may already possess skills/expertise in a given area taught in the MPAS Program, students will not be permitted to substitute for regular clinical or administrative staff at a clinical site, or instructional faculty of the MPAS program.<sup>16</sup>

## PROFESSIONAL STANDARDS

- A. While students are on clinical rotation, patients and other health professionals will judge their professionalism by and not limited to:
- 1) Grooming and dress
  - 2) Communication style
  - 3) Conflict resolution skills
  - 4) Work ethic (e.g. showing up on time prepared and ready to work, being motivated and seeking out opportunities).

The community of PAs and PA employers in the Southwest Florida is small. Impressions that a student makes on clinical rotation may influence future employment opportunities and professional licensure, as well as the site's decision to accept FGCU MPAS students. Students should all strive to project a positive image of themselves, the PA profession and FGCU.

- B. **The MPAS Program takes professionalism very seriously.** PA students, like students in any other professional program (e.g. MD, DO, ARNP, CRNA, etc.) are expected to maintain high standards of honesty and personal integrity. *Academic achievement alone will not assure successful completion of the Program.* MPAS students must also demonstrate professionalism, maturity, integrity, and those attitudes and behaviors expected of all health professionals. Students are assessed on their professional behavior throughout the clinical year and the program.<sup>17</sup>
- C. **The MPAS Program expects all PA students to be professional** in their dealings with patients, colleagues, preceptors, faculty, and staff and to exhibit caring and compassionate attitudes. Professional behavior is defined as behavior appropriate to the circumstance. **Unprofessional behavior will not be tolerated by the PA Program.** Professional behavior reflects on a student's qualification and potential to become a competent clinician. The student is encouraged to review and refer back to the MPAS Professional Standards policy for more details regarding professionalism and transgressions thereof.
- D. **No alcoholic beverages are to be consumed during clinical rotation hours or while on call.** Furthermore, students must not be under the influence of alcohol while during clinical rotation hours or on call.

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<sup>16</sup> A3.06

<sup>17</sup> A3.02

- E. **Students are reminded that use of illicit drugs is incompatible with the professional role of the physician assistant.** Students who use illicit drugs during the clinical year risk dismissal from the PA Program as well as legal consequences.
- F. **Clinical year students are representatives of the FGCU MPAS Program** as well as the PA profession as a whole. This should be kept in mind during all interactions with patients, physicians, and other health care personnel during rotations.
- G. Students are expected to conduct all personal business and social activities outside of assigned hours of the rotation and end-of-rotation Callback Days.
- H. All students, irrespective of gender, will obtain a chaperone for all breast, GU, and pelvic examinations.
- I. **Employment during the clinical year is strongly discouraged**, as it almost universally results in a decrease in the academic performance of the PA student. If a student chooses to obtain outside employment, it cannot interfere with academic work or clinical rotation schedules. Outside employment obligations cannot be justification for a student absence.
- J. **Examples of unprofessional behavior which could be deemed egregious enough to be grounds for dismissal from the MPAS Program may include but are not limited to:**
  - 1) Attitudes or behaviors inconsistent with compassionate care
  - 2) Refusal by, or inability of, the student to participate constructively in learning or patient care
  - 3) Derogatory attitudes or inappropriate behaviors/conduct directed at patients, peers, faculty, preceptors, or staff
  - 4) Misuse of written or electronic patient records (i.e. accession of patient information without valid reason)
  - 5) Substance abuse
  - 6) Failure to disclose pertinent information on a criminal background check

Inadequate communication and/or failure to respond to communication initiated by the Program is also considered unprofessional, and may result in a substantial reduction in professionalism grade on any given rotation.

**Dismissal from the Master of Physician Assistant Studies Program for unprofessional behavior may jeopardize the student's eligibility for admission to any other College in the University, as well as the ability to be licensed in any health profession.**

Examples of standards for professional behavior include, but are not limited to the following:

- 1) Accepting personal responsibility for the care of one's patients
- 2) Demonstrating appropriate truthfulness and honesty with colleagues
- 3) Communicating an attitude of caring (empathy) in the course of health care delivery
- 4) Recognizing personal beliefs, prejudices, and limitations
- 5) Demonstrating respect for patients, families, members of the health care team, and colleagues
- 6) Demonstrating initiative in patient care and a consistently good work ethic

- 7) Respecting patient confidentiality at all times in verbal and written communication with others
- K. **Students who are not in adherence with the professional standards set forth by the Program may be referred to the Student Advancement and Professionalism Committee (SAPC).** If the Committee determines that unprofessional behavior was demonstrated by a student, the following steps may be taken:
- 1) Depending on the severity of the behavior, the student may be warned in writing that the behavior is unacceptable and that if the behavior is continued, it may lead to their dismissal from the program.
  - 2) This communication will provide examples about what is or what is not acceptable, and may encourage the student to seek professional help from an appropriate resource.
  - 3) The letter may state that counseling, therapy, and anger management sessions may be considered as options.
  - 4) If there is a second documented case of unprofessional behavior, the student must appear before the Student Advancement and Professionalism Committee and address why he or she should not be dismissed from the MPAS Program.
  - 5) **Some types of behavior may be so egregious as to justify immediate dismissal of a student. Such behavior might include**
    - a. **Acts of dishonesty**
    - b. **Acts in Section J above or in the appropriate Social Media section below.**
    - c. **Acts that violate the ethics of the PA profession (as described by the AAPA)**
    - d. **Criminal acts**
    - e. **Substance abuse**

## APPROPRIATE DRESS AND IDENTIFICATION FOR CLINICAL ROTATIONS

- A. The student must be clearly identified in the clinical setting as a PA student. As such, a nametag identifying the student as an FGCU PA student is required while on clinical rotation.
- B. If the student is in a setting where the student cannot wear his/her nametag and/or white coat with embroidered name and title of "PA student" (such as the operating room), the student must verbally identify him or herself as a PA student. Example: "Good morning, Mr. Doe, my name is Jane Smith. I am a student of the Physician Assistant program at Florida Gulf Coast University."
- C. The student must ensure that he or she is distinguished from physicians, medical students, and other health professions students and graduates.<sup>18</sup>
- D. While in the MPAS program, students may not use previously earned professional titles (e.g. RN, MD, DO, EMT, RT, Ph.D., Dr. etc.) for identification purposes.



- E. A program-approved short white coat with embroidered name and title of “PA student” must be worn at all times, with few exceptions (e.g. operating room, when procedures are going to be performed, etc.).
- F. All clothing must be clean and appropriate to a professional working environment. Men should wear ties unless directed otherwise by clinical preceptors or when ties would be inappropriate (e.g., in an operating room).
- G. Blue jeans, shorts, T-shirts, sandals, open-toed shoes, sneakers, and other casual dress are not appropriate to the clinical setting.
- H. Students not in compliance with the above dress code and nametag requirement will be removed from their rotation until they are able to comply. Lost nametags must be reported and replaced by the Program at the expense of the student.
- I. The student is required to adhere to the dress code of the clinical site, if applicable.

## SOCIAL MEDIA POLICY

Refer to the FGCU MPAS Social Media Policy in the PA Program portal for complete description.

## COURSE REGISTRATION IN THE CLINICAL YEAR

- A. Students are responsible for registering for courses as directed by the DCE, as well as ensuring that all fees are paid to the University by the appropriate deadlines. Failure to pay registration fees on time may result in the cancellation of registration by the University and assessment of a late fee. Cancellation of registration may result in cancellation of the rotation(s) for the semester and delayed graduation.
- B. All required immunizations and proof of current health insurance must be complete, up to date, and on file prior to attending clinical rotations. Without these requirements students will not be able to attend their clinical rotation. Students may be removed from a clinical rotation if these requirements are not maintained.
- C. If registration is cancelled due to non-payment of fees, or due to voluntary withdrawal<sup>19</sup> from a course, students are **IMMEDIATELY** terminated from their rotation; the malpractice insurance program covers only registered students. Students terminated from their rotation for any reason are immediately referred to the Student Advancement and Professionalism Committee (SAPC) for further disposition. See section regarding the Student Advancement and Professionalism Committee (SAPC) below.

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<sup>19</sup> A3.17e

## ACADEMIC STANDARDS

Any course grade below a “B” in the clinical year of the PA Program may be grounds for dismissal for academic reasons, subject to the decision of the MPAS Program faculty Student Advancement and Professionalism Committee (SAPC).<sup>20</sup> If a student who has earned a grade below a “B” is retained in the Program, he/she will be placed on probation and will be required to complete any remedial work prescribed by the faculty; this will result in the student’s delayed graduation and could affect the selection of the Selective rotations in the clinical year. Academic standards for the clinical year are outlined in the Academic Policies for the Clinical Year section of this guidebook.

## ACADEMIC HONESTY

- A. All students are expected to demonstrate honesty in their academic pursuits. The University policies regarding issues of honesty can be found in the FGCU Student Guidebook under the Student Code of Conduct and Policies and Procedures sections. All students are expected to study this document, which outlines their responsibilities and consequences for violations of the policy. The FGCU Student Guidebook is available online at <http://studentservices.fgcu.edu/judicialaffairs/new.html>
- B. Sanctions for academic dishonesty may include receiving an “F” in the relevant course – FGCU may impose additional penalties. Any incidents of academic dishonesty may be referred to the FGCU Office of Judicial Affairs.

## RELEASE OF INFORMATION / REFERENCE LETTERS

- A. Throughout the course of the clinical year, the PA Program may have to release information about any student’s academic status to third parties (e.g., information relating to student loan verification, scholarship applications, rotation credentialing, licensure, etc.).
  - 1) If release of information is required, the student MUST fill out a release of information form prior to the School’s releasing any information.
  - 2) The PA Program will not release any information without the student’s signed consent in compliance with the Buckley Amendment of FERPA. The form is available online at <http://www.fgcu.edu/registrar/forms.html>
- B. Reference letters and telephone employment recommendations by PA Program faculty also require prior release from students. Remember to ask the individual first if he/she will be a reference for you. Fill out the FGCU FERPA Release form located at <http://www.fgcu.edu/registrar/forms.html>

## CRIMINAL BACKGROUND CHECKS AND DRUG SCREENING

- A. The complete Criminal Background Check and Drug Screen Policy is located in the PA Program portal.
- B. In order to meet requirements of various clinical agencies where MPAS students have practice experiences, students are required to have background checks and drug screening as a condition of matriculation to the MPAS Program and prior to the start of the clinical year. The MPAS Program requires both a background check through CastleBranch and a national FBI Level 2 background check.
- C. **Once the initial background check is completed, additional background checks may be requested when the student self-reports a violation or when the clinical affiliated site requires a more recent or more extensive background check.** Further background checks are at the expense of the student. During the course of the clinical phase of the Program, students may be required to undergo one or more national criminal background checks, which may include fingerprinting. Certain clinical sites that are regularly used by the MPAS Program may require additional drug screening in order for students to have practice opportunities at those institutions. Students are required to comply with these requests. **Failure to comply may result in failure to be placed into clinical sites, which may result in the inability of the student to continue in the program.** In summary, the student should expect to undergo background checks and drug screens beyond the ones required prior to program admission.
- D. An MPAS student with background check results that prevent placement at clinical sites may not be able to continue in the program.
- E. Certain findings in a background check could preclude participation in clinical education at certain affiliated clinical sites, and may also preclude the acceptance of the individual as a candidate for licensure as a physician assistant in any state. If it is likely that a student may pose a threat to the welfare of program faculty, staff, students, or patients, the student may be denied continuance in the program.
- F. If there are adverse findings in the background checks, the student will be required to meet with the DCE and Program Director and/or Health Science Department Chair to discuss the findings and consequences.
- G. Adverse findings may limit the acceptance of the individual as a candidate for licensure as a physician assistant in any state. It is the responsibility of the student to contact the appropriate state licensing board.

### Requirement to Report Criminal Incident

- A. Students are required to report any interaction with the police resulting in an arrest or being brought before the criminal justice system within fifteen (15) days of the incident. This requirement is independent of whether or not there is a conviction involved. The student's academic standing will not be affected solely due to the reporting of an incident. Students should understand that criminal incidents and unprofessional behavior have the potential to

affect the graduate's ability to be licensed or credentialed to practice medicine in any State or setting.

- B. Failure to report any incident will result in action for unprofessional behavior. The incident itself or the failure to report the incident may result in disciplinary action up to and including dismissal from the PA Program.

## Drug Screening

- A. Required drug screening prior to matriculation, prior to starting clinical rotations, as well as periodic urine drug screens may be required for all students in the Physician Assistant Program. Admitted students will be required to work with CastleBranch for completing the drug screening for the program.
- B. The potential to sit for the Physician Assistant National Certifying Exam (PANCE) may be impacted by a criminal record and/or illegal drug use. Many state regulatory boards and government organizations may not grant a license or other document if an applicant has a criminal record. Completion of the MPAS program does not guarantee a student will meet the licensing requirements of any particular state or agency.

## MEDICAL RECORDS AND PATIENT CONFIDENTIALITY

- A. During training as a MPAS student, the student will have occasion to review patients' medical records and gather health information. All data gathered about a patient and his/her medical condition, including all items within a patient's medical records or verbal communication from a patient, is privileged information. Students are not to discuss a patient's medical record in any manner or situation that would reveal any information about that patient to any person not involved in the patient's health care. Students must refrain from discussing patients in public places, such as cafeterias and elevators, where conversations may be overheard. Remind those who may be inappropriately discussing patient information, about patient confidentiality.
- B. If asked to present information about a patient's condition while on rotation or as part of a Callback Day activity, all identifying information (name, address, date of birth, and ID numbers) should be deleted from the records that are copied or presented. A patient may be identified according to initials or a fictitious name. Never discuss patients in a dehumanizing or insensitive manner. Although students are required by the MPAS Program to complete HIPAA training, some practices and most hospitals will require the student to sign a confidentiality statement or complete additional training.
- C. All entries made by students in patients' records must be signed with the student's name followed by PA-S (PA student). The clinical preceptor must countersign all entries/orders before the end of each day during rotation. No student should ever leave the rotation for the day without orders or documentation signed off by his or her preceptor. Additionally, no patient should ever be discharged without a preceptor's knowledge, approval, and active participation. Non-compliance with these requirements could result in liability issues for the student, the site,

and the MPAS Program. All signatures should be legible. It is strongly recommended that in addition to the student's signature, the name and title be printed under it.

- D. Students will adhere to ethical principles and use practical reasoning when treating patients. Refer to the Guidelines for Ethical Conduct for the Physician Assistant Profession Policy of the American Academy of Physician Assistants.
- E. No student should medically treat other PA students, friends, family members, or faculty/staff of the program while enrolled in the FGCU MPAS Program. Likewise, MPAS faculty will not participate as health care providers for students, except in an emergency situation.<sup>21</sup>

## STUDENT HEALTH

The complete Student Health policy is located in the PA Program portal.

### HEALTH AND IMMUNIZATION REQUIREMENTS

- A. The complete Infection Control and Personal Safety and Student Health policies are located in the PA Program portal. All health and immunization requirements (based upon CDC recommendations for healthcare workers)<sup>22</sup> must be up to date throughout enrollment in the PA Program and documented in CastleBranch.
- B. The FGCU MPAS Program requires that all students comply with health and immunization requirements prior to starting and during the clinical year. Students failing to meet this requirement will NOT be permitted to register for and/or attend clinical rotations. Failure to meet these requirements may result in cancellation of rotations, delayed graduation, and/or program dismissal.

### HEALTH INSURANCE

- A. The MPAS Program requires all students to be covered by major medical insurance throughout the duration of their matriculation in the program.
- B. It is important for students to realize that medical expenses for care all provided, including laboratory procedures and emergency care, are the responsibility of the student and not the MPAS Program, University, or clinical rotation site. Any injury or accidental exposure is not considered workmen's compensation since the student is not an employee of the site.

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<sup>21</sup> A3.09

<sup>22</sup> A3.07

## STANDARD UNIVERSAL PRECAUTIONS

The complete Infection Control and Personal Safety policy is located in the PA Program portal.<sup>23</sup>

- A. Reference the OCCUPATIONAL EXPOSURE CHECKLIST IN THE APPENDIX OF THIS MANUAL.
- B. It is the responsibility of the student to report sharp injuries, needle sticks, or other potential exposure to blood-borne pathogens via blood or body fluids immediately to the supervisor at the facility where the accident occurs.
- C. The student must also notify the MPAS Program in the event of an exposure incident within 24 hours of the exposure by completing the Non-Employee Incident Report Form.
- D. Time is frequently of the essence in managing blood-borne pathogen exposures. For example, some treatment regimens must be started within two hours of exposure to be maximally effective. **In the event of a potential blood-borne pathogen exposure, students should immediately take the steps noted in the OCCUPATIONAL EXPOSURE CHECKLIST in the appendix of this manual.**
- E. The student must complete the Non-Employee Incident Report Form located at <http://www.fgcu.edu/EHS/Files/Nonemployeeincidentrpt2014.pdf> .

FLORIDA GULF COAST UNIVERSITY  
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MASTER OF PHYSICIAN ASSISTANT STUDIES

ACADEMIC POLICIES FOR THE CLINICAL YEAR

## CLINICAL YEAR TESTING AND EVALUATION

### STUDENT ASSESSMENTS AND MONITORING OF EDUCATION DURING CLINICAL YEAR<sup>24</sup>

- A. The purpose of the assessment of student performance is to evaluate and determine whether the learning outcomes have been met. Methods of assessment include those listed in Section C below.<sup>25</sup>
- B. The continuous monitoring of clinical sites, preceptors, and the training experiences during the clinical year is accomplished by a variety of methods, including but not limited to:
  - 1) Logging of patient encounters and procedures in Typhon
  - 2) The preceptor's assessment of student clinical performance and professionalism
  - 3) The MPAS program's assessment of students, outlined in section C below
  - 4) The students' assessment of preceptors, clinical sites, and rotations. See the Student Evaluation of Rotation section of this Guidebook.

This continuous monitoring is important, as clinical sites may vary with regard to patient types, number, diagnoses, socioeconomic status, and so on. Continuous monitoring of clinical sites by the DCE ensures that the sites provide sufficient patient exposure to allow each student to meet learning outcomes, and that differences in clinical settings are not impeding the overall accomplishment of learning outcomes.

- C. Student assessment during the clinical year will be based on:
  - 1) End-of-rotation multiple choice exam
  - 2) Preceptor evaluation of student clinical performance
  - 3) Preceptor evaluation of student professionalism
  - 4) Case Logging in Typhon
  - 5) Rotation-specific written assessment
  - 6) Written documentation (Patient Write-ups)
  - 7) Objective Structured Clinical Examinations (OSCEs)
  - 8) Summative Evaluations

### FGCU PA PROGRAM GRADE SCALE

The grading system for converting percentage grades into letter grades during the clinical year will remain unchanged from the didactic year. Note that grades below a "B" (< 80%) are considered to be failure in the MPAS program.

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<sup>24</sup> A3.17a, A3.17c, B3.03, C4.01, C4.02

<sup>25</sup> C3.01



## END-OF-ROTATION WRITTEN EXAMINATION

- A. At the end of all core rotations, the student will complete a two hour, 120-question, multiple-choice examination, developed by the Physician Assistant Education Association (PAEA) based on the Topic List for that rotation:

- 1) Behavioral Health
- 2) Emergency Medicine
- 3) General Surgery
- 4) Internal Medicine I & II
- 5) Pediatrics
- 6) Primary Care I & II
- 7) Women's Health

The examination will consist of 100 scored questions, with 20 un-scored experimental questions. As in the PANCE examination, the un-scored questions will not be specifically identified, and are used for evaluating and selecting future questions for these examinations.

- B. At the end of the Selective rotations, the student will complete a program-developed multiple-choice examination. The exam is based on the Topic List for that specific rotation specialty.
- C. The end-of-rotation multiple-choice examination will count as 30% of the overall rotation grade.
- D. The scaled scores attained by students on the PAEA EOR™ Examinations are statistically analyzed and converted (standardized) to z-scores. This is where the scaled score is compared to the national mean and standard deviation on the particular exam. This will account for the varying degrees of difficulty on different versions of the Exams.
- E. Consistent with the grading policy of the MPAS program, the minimum passing score for the PAEA EOR™ Examination is a "B". Z-scores are converted into numerical grades, with -1.74 being equivalent to an 80, 0 being equivalent to a numerical score of 90, and +1.74 and higher being equivalent to a score of 100.

## STUDENT CLINICAL PERFORMANCE EVALUATION

- A. Each rotation, clinical preceptors will evaluate a student's performance and ability to meet rotation learning outcomes, based on the preceptors' day-to-day observation of the student's clinical work on rotation. These assessments comprise 40% of the student's rotation grade.

Specific evaluation criteria to be considered include:

- 1) History Taking Skills
- 2) Medical Knowledge
- 3) Physical Exam
- 4) Laboratory & Diagnostic Studies
- 5) Differential Diagnosis
- 6) Pharmacology
- 7) Treatment Plan and Patient Counseling
- 8) Health Maintenance and Disease Prevention

- 9) Communication Skills
  - 10) Medical Documentation
  - 11) System Based Practice
  - 12) Rotation-Specific Learning Outcomes
- B. The assigned preceptor must complete the preceptor evaluations of student performance. While the student may rotate in part under the supervision of other clinicians in the preceptor's practice, the assigned preceptor is ultimately responsible to complete the evaluations of the student. The preceptor may elicit feedback from his or her colleagues in completing the evaluation.
  - C. At the end of each rotation, the student should ensure that the preceptor has received the Typhon Student Clinical Performance Evaluation and Student Professionalism online.
  - D. The evaluation is normally completed online in Typhon, but in exceptional cases, such as Internet access failures, the preceptor may personally submit in a sealed envelope, or scan and email a paper version of the evaluation forms directly to the FGCU PA Program to [nguzman@fgcu.edu](mailto:nguzman@fgcu.edu). Contact the DCE if a paper form is needed.
  - E. *Students are responsible for ensuring that the Student Clinical Performance Evaluation is submitted to the MPAS Program in a timely manner.* It is up to the student to communicate with the preceptor appropriately and effectively to get this accomplished. A grade of "incomplete" will be assigned to a rotation where the Student Clinical Performance Evaluation is missing.
  - F. The MPAS Program will not negotiate evaluation scores with students or clinical preceptors.
  - G. Clinical year students are expected to assume responsibility for their education while on rotation. Part of this responsibility includes frequently seeking performance feedback from clinical preceptors throughout the rotation to eliminate "surprises" at the end of the month. At a minimum, students **must** meet with their preceptor midway through each rotation, review their progress, and plan strategies for correcting any identified deficiencies. **At this time, the student completes the Mid-Rotation Self-Evaluation in Typhon with input from a preceptor.**<sup>26</sup>
  - H. Each student should review the Preceptor Evaluation of Student Clinical Performance and Professionalism found in the Canvas website to ensure they understand how they are to be evaluated.
  - I. The preceptor's evaluation of student clinical performance evaluation will count as 40% of the overall rotation grade.
  - J. The preceptor will evaluate the student for professionalism. Ethics and professional behavior are the foundations of medicine and form an essential component of all clinicians' interactions with their patients and colleagues. The student must pass this evaluation component in order to pass the rotation.<sup>27</sup> The preceptor evaluation of student professionalism is 10% of the overall rotation grade.

## OTHER CLINICAL YEAR ASSESSMENT INSTRUMENTS

### A. Written Documentation

- 1) Written documentation is worth 10% of the rotation grade. Students are required to submit this assessment on Callback Day after completion of each rotation. Throughout the course of the clinical year, the type of written documentation due will vary according to the rotation as follows:
  - a. Internal Medicine (Outpatient) – SOAP Note
  - b. Internal Medicine (Inpatient) – Admission History & Physical
  - c. Primary Care – SOAP Note
  - d. Women’s Health – Prenatal Note
  - e. Pediatrics – Well Child Exam Note
  - f. General Surgery – Post Op Note
  - g. Emergency Medicine – Procedure Note
  - h. Behavioral Health – Initial Evaluation
  - i. All Selective Rotations – Consult Note
- 2) The written documentation must be presented to the preceptor for feedback and must be signed by the preceptor. Credit will not be given for unsigned submissions. Patient identifiers must be removed in accordance with HIPAA regulations prior to submission to the MPAS Program.

### B. Case Logging into Typhon and Required Patient Experiences<sup>28</sup>

- 1) Logging of certain patient information and procedures into Typhon is used to ensure an adequate and robust clinical educational experience is obtained by each student.
- 2) The data logged includes but is not limited to the patient’s age, gender, ethnicity, diagnosis (using ICD-10 format). Students will also be required to log their participation in procedures, indicating whether the student observed, assisted, or performed the procedure. All procedures must be supervised by the preceptor, with the immediate in-person availability of the preceptor if needed.
- 3) Students will log patient data into Typhon, and will **submit logs to the Program** at the following intervals: end of the first week of the rotation, end of the second week of the rotation, and at the end of the rotation.
- 4) **The DCE monitors this data, and may adjust the student’s rotation schedule, including Selective and Elective Rotations, if a deficiency is identified.** Deficiencies may be identified based upon assessments during the clinical year or if the patient lacks experiences with:
  - a. Preventive care patient encounters – 5 patients
  - b. Emergent care patient encounters – 5 patients

- c. Acute care patient encounters – 5 patients
  - d. Chronic care patient encounters – 5 patients
  - e. Male Patients – 80 patients
  - f. Female Patients – 80 patients
  - g. Medical care across the life span to include:
    - i. Infants (birth to 1 year) – 5 patients
    - ii. Older infant (1 year to 2 years) – 5 patients
    - iii. Children (3 years to 11 years) – 5 patients
    - iv. Adolescents (12 years to 17 years) – 5 patients
    - v. Adults (18 to 64 years old) – 5 patients
    - vi. The elderly (65 years and older) – 5 patients
  - h. Women’s health (to include prenatal and gynecologic care)
  - i. Care for conditions requiring surgical management, including:
    - i. Pre-operative care – 5 patients
    - ii. Intra-operative care – 5 patients
    - iii. Post-operative care – 5 patients
  - j. Care for behavioral and mental health conditions – 5 patients
  - k. Outpatient clinical settings – 5 patients
  - l. The emergency department – 5 patients
    - i. This is defined by the program as a medical treatment facility specializing in emergency medicine, the acute care of patients who present without prior appointment.
    - ii. The emergency department may be located within a hospital or may be “free-standing”. This is not meant to include urgent care centers.
  - m. Inpatient clinical settings within acute care facilities – 5 patients
  - n. Operating room settings – 5 patients
- 5) All students must log the relevant and required clinical data for each and every patient seen. *Failure to perform logging of cases will result in a failing grade for the rotation.*

c. Site Visits by Faculty

- 1) Site visits will be performed by the DCE or other program faculty during the clinical year. These may be announced or unannounced and will entail a visit at the clinical site. These will occur at least annually for each active site and each student.
- 2) Site visits serve to ensure that the clinical site is safe, secure, and appropriate, in that the site provides the student access to physical facilities, patient populations and supervision necessary to fulfill program expectations of the clinical experience.
- 3) The student may request a site visit at any time, for any reason, by contacting the MPAS Program by phone or email.

d. Objective Structured Clinical Examination (OSCE)

The objective structured clinical examination (OSCE) is an assessment of clinical competence, and assesses one or more of the following: medical knowledge, interpersonal skills, clinical and technical skills, and professionalism.

- 1) These assessments will be performed at least once per semester as formative assessments. The scenarios assess clinical year learning outcomes and objectives. OSCEs will also be performed as a part of the Summative Examination.
- 2) OSCEs are carried out in a well-planned, structured and objective way and assess clinical knowledge and/or skills and critical thinking.
- 3) OSCEs may assess any of the following: history-taking; performance of physical exam; discussion of differential diagnosis; choosing appropriate diagnostic tests; interpretation of test results; formulation of assessment and plan; patient education; and communication with patients, clinicians, and other members of the healthcare team.

#### E. PACKRAT®

This is fundamentally a self-evaluation tool for both the student and the Program. This test is based on the PANCE Blueprint and may help the student prepare for the written summative exam, and the PANCE. While the PACKRAT® may be used to address identified weaknesses in the student's fund of knowledge, it is never used as an assessment instrument to determine if the student has passed or failed any course, or the Summative Evaluation.<sup>29</sup>

#### F. Rotation Specific Written Assessment

- 1) Students must complete a program-developed rotation-specific written assessment for each clinical rotation. These are worth 10% of the rotation grade.
- 2) The assessment may include multiple-choice, fill-in-the-blank, and/or essay questions, and is based on the topic list and objectives for the rotation.
- 3) To successfully complete this requirement, the student must attain a minimum 80% correct percentage score. Failure to attain a minimum score of 80% will result in the need for remediation<sup>30</sup>.
- 4) For all rotations, this examination must be completed during the final week of the rotation.

## SUMMATIVE EVALUATION

The PA Student will be required to satisfactorily complete a comprehensive summative evaluation, which will be new assessments, not a compilation or portfolio of previous assessments. The summative evaluation will be administered within the last four months of training.<sup>31</sup> The summative evaluation will

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ARC-PA Standards, Fourth Edition

<sup>29</sup> C3.01

<sup>30</sup> A3.17f

<sup>31</sup> C3.04

consist of multiple components. A minimum score of 80% or greater will be required to satisfactorily complete each component:

- A. **Written Summative Examination**, evaluating medical knowledge, consisting of at least 100 multiple choice type questions, reflecting the NCCPA blueprint.
- B. **OSCE**, consisting of standardized patient cases, evaluating interpersonal skills, patient care skills, and professionalism via the following: history taking, patient communication, physical examination techniques, and recognition and interpretation of diagnostic and laboratory studies.
- C. **Simulation Exercise**, using a high-fidelity simulator such as the CAE Apollo patient simulator, evaluating interpersonal skills, patient care skills, and professionalism via the following: history taking, patient communication, physical examination techniques, and recognition and interpretation of diagnostic and laboratory studies, and communication with the interprofessional health care team.
- D. **Skills Stations**, which may include but are not limited to EKG, radiology, laboratory medicine, suturing, and preventive medicine and patient counseling. This will evaluate medical knowledge and patient care skills, via the following: recognition and interpretation of diagnostic and laboratory studies.
- E. **Professionalism**, an evaluation of the student's professional behavior will be based on:
  - 1) Faculty interactions during classroom activities on the date(s) that the summative assessments take place.
  - 2) Demeanor during Summative testing.
- F. The PA Student will be required to successfully complete all components of the summative evaluation.
- G. If a student fails any component of the summative evaluation, he/she will be required to remediate that component as outlined in the MPAS Program Academic Performance, Progression, and Remediation Policy.
- H. If a student fails any component of the summative evaluation and is unable to successfully remediate per Program policy, he/she will be required to meet with the SAPC for further recommendations. The SAPC reserves the right to enforce any and all actions that the committee deems appropriate for a given case up to and including repeat of a clinical rotation, delayed graduation and/or dismissal from the PA Program.<sup>32</sup>

## TESTING PROCEDURES

- A. End-of-rotation (EOR) exams and other clinical year evaluation exercises are scheduled well in advance. Students must be present and on time for all scheduled EOR testing.
- 1) In the event of illness or personal emergency on the day of an examination, contact the DCE by phone. If the student has not communicated directly with the DCE or the Program Director, he/she have not been excused from the EOR exam. Other faculty and program staff cannot excuse the student from the EOR exams. Documentation of the reasons for an excused absence (as directed by the DCE) must be provided in all cases before exams will be rescheduled.
  - 2) Rescheduling of missed exams is at the discretion of the DCE.
  - 3) Unexcused absences from EOR exams may result in a failing grade for the rotation. As mentioned in previous sections, unexcused absences may result in a hearing before the Student Advancement and Professionalism Committee (SAPC).
- B. The allotted time for all PAEA EOR™ examinations is 120 minutes. Students shall adhere to the following policies while in the Testing Center:
- 1) Students must turn off cell phones and place all personal belongings in the appropriate location within the computer testing center.
  - 2) Once the exam has begun, the proctor will not answer any questions. Students should remain in their seats at all times until they have finished the examination. Students may be excused during the examination **during the break in between sections** in order to use the rest room.
  - 3) Keep in mind that all examinations conducted in the computer testing lab are subject to video monitoring. Do not communicate with other students during exams or do anything that could be construed as cheating.
- C. Upon completing and submitting the exam, the student must leave the testing area.

## CLINICAL YEAR EXAM REVIEW POLICY

The MPAS Program utilizes the PAEA End of Rotation™ Exams for core rotations. Upon completion of the examination, the student will be able to access a post-exam report from PAEA that outlines their performance by specific organ system and task area, as well as keywords of items missed. This is an excellent tool to guide your study. **As in the PACKRAT®, PANCE and PANRE exams, the PAEA does not allow review of specific examination questions or responses.** *It is very important that the student access these reports to identify deficiencies in his or her knowledge base, to facilitate improvement in these areas.* The MPAS Program policy for exam review during the clinical year is otherwise unchanged from the didactic year.

## STUDENT EVALUATION OF PRECEPTOR, CLINICAL SITES, AND ROTATION

The DCE continuously monitors clinical year education to ensure that the preceptors and sites provide sufficient patient exposure to allow each student to meet learning outcomes, and that differences in clinical settings are not impeding the overall accomplishment of learning outcomes. Student feedback is vital to this process, and is conducted as follows.

- A. By the end of the first week of each rotation, the student completes a **Rotation Check-In Form**.
  - 1) The purpose of the form is to verify that the student is getting hands-on opportunities with adequate patient contacts, that the site is safe and has adequate physical facilities, and that there is appropriate supervision by the preceptor.
  - 2) If the student has any concerns regarding the clinical rotation and/or the preceptor at any point in the rotation, the student must contact the MPAS program immediately.
    - a. Examples of concerns may include but are not limited to inadequate or a lack of supervision, lack of a hands-on experience where the student has opportunities to evaluate/examine patients, synthesize an assessment and treatment plan, and receive feedback of the same.
    - b. The DCE will conduct a site visit to determine the appropriateness of the site and reassign the student if needed.
- B. At the conclusion of each rotation, students are required to complete an **evaluation of each rotation**, one for the **clinical site** and one for the **preceptor**.
  - 1) Evaluation forms will be posted online on Typhon during the final week of each rotation and must be completed before the final grade for the rotation to be released.
  - 2) Results from the evaluations are used to determine the effectiveness and suitability of clinical sites and preceptors.

## PROGRESSION AND PROMOTION THROUGH CLINICAL YEAR

- A. Evaluation of the student during the clinical year will be based on the assessment methods in the previous sections.
- B. Each student must pass each component of their rotation with a grade of 80% to pass the rotation.
- C. If a student earns a grade below an 80% on any rotation component, regardless of the overall average, this will result in a grade of “incomplete” for the rotation and will remain as such until successful completion of a remediation plan<sup>33</sup> as outlined in the FGCU MPAS Program Academic Performance and Progression Policy.
- D. Course remediation is not allowed during the clinical phase. Failure to obtain a final course grade of  $\geq 80\%$  or failure to successfully remediate any rotation results in course failure and

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<sup>33</sup> A3.17f, C3.03



referral to the SAPC for further review and recommendation that includes at a minimum Academic Probation with repeat of the rotation and delayed graduation, or possible dismissal from the program.

### ADDITIONAL REQUIREMENTS

In order to take advantage of educational opportunities as they present themselves throughout the course of the clinical year curriculum, there may be additional experiences required of all students, such as extra classroom sessions, on-line course modules, remedial coursework, quizzes, etc. Students are required to participate in these in a timely manner as assigned.

FLORIDA GULF COAST UNIVERSITY  
MARIEB COLLEGE OF HEALTH & HUMAN SERVICES  
MASTER OF PHYSICIAN ASSISTANT STUDIES

APPENDICIES

## APPENDIX A

### CLINICAL ROTATION CHECKLIST

- At Least 1 Month Before your Next Rotation:** Complete administrative paperwork needed for hospital credentialing. Read the notations in the Clinical Site Directory for requirements.

#### **1 Week Before your Next Rotation:**

- The student must become familiar with the reporting instructions for their next rotation, and contact the preceptor or designee to introduce him/herself. Contact information for the preceptor can be found in Typhon. Read the notations in the Clinical Site Directory and Preceptor Directory, accessible from the Typhon home screen. Contact the DCE if you are having difficulty contacting the preceptor.
- Encouraged: Contact the current student rotating at the site, or previous student who has rotated at the site.
- Find a list of the top 50 diagnoses and ICD10 codes for the rotation you will be entering, so that you have them accessible and ready to go for case logging in Typhon.

#### **1<sup>st</sup> Day of the Rotation**

- Meet with clinical preceptor to obtain schedule and be oriented to practice. Review rotation learning outcomes and objectives with preceptor. **If you report to the rotation and feel like you have no idea what to do and where to go, then you have not received an orientation - contact the DCE ASAP for further direction.**
- Confirm preceptor's contact information, especially email address, and notify the program of any changes
- A student will often work with multiple different clinicians during a rotation, but only the primary preceptor can submit his/her evaluation. Remember to remind the clinicians with whom you interact of this fact.

#### **End of 1<sup>st</sup> Week of the Rotation:**

- Submit *Rotation Check-In Form* by the end of the 1<sup>st</sup> week of the rotation
- Submit *Typhon Case Log Totals (Graphical) Report* PDF at the end of the 1<sup>st</sup> week of the rotation, which reports the patients you saw in the first week of the rotation. Upload these to "My External Documents" located on the Typhon home page.

#### **End of 2<sup>nd</sup> Week of the Rotation**

- Meet with clinical preceptor to discuss performance. Obtain feedback on any areas that need improvement during the last two weeks of rotation.
- Submit *Mid-Rotation Evaluation of Self (Performance and Professionalism)* in Typhon. The student must initiate these reviews in Typhon.
- Submit *Typhon Case Log Totals (Graphical) Report* PDF at the end of the 2<sup>nd</sup> week of the rotation, which reports the patients you saw in the first week of the rotation. Upload these to "My External Documents" located on the Typhon home page.

### Last Week of the Rotation

- Remind preceptor to complete your *Student Clinical Performance and Professionalism Evaluations* on Typhon. The student must initiate these reviews in Typhon.
- Complete *Rotation, Site, and Preceptor Evaluations* in Typhon
- Submit *Typhon Case Log Totals (Graphical)* Report PDF at the end of the rotation, which reports the patients you saw in the first week of the rotation. Upload these to "My External Documents" located on the Typhon home page.
- Work on your **Self-Reflection** journal, in preparation to submit your **Self-Reflection paper** at the end of the semester. Remember that there is a rubric associated with this, and it is a graded assignment.

### Continuously

- Submit Clinical Rotation Requests for Selective/Elective rotations in Typhon. These are due **at Least 120 Days Prior to your Next Selective Rotation**, or a rotation will be selected for you. If you change your mind, send an email to the DCE. It is possible to change your assignment only before it is confirmed with the preceptor. Remember that two selectives should be in a specialty specifically named in the PANCE blueprint (mostly medical subspecialties, but not ER) AND it should be a subject you feel weak in. A repeat rotation in primary care or internal medicine may be considered. These 2 selections are made by the DCE with student input. Your third selective is an elective rotation unless there are academic concerns.
- Keep your immunizations up to date! Do not ignore CastleBranch reminders. A rotation can be suspended or cancelled if the student is not in compliance.
- Log your patients in Typhon!
- If absent, the absence must be reported in Typhon. See form in Typhon**
- Note that you can meet with your advisor or Dr. Guzman at any time during a rotation (preferably when you are off). Call Back Days are obviously a hectic time. Either way, it is preferred that you set up or request an appointment, so that we are fair to all students and so that the meeting is unrushed. For Dr. Guzman, Skype or FaceTime is an option as well.

### At the End of Every Semester

- As applicable, submit your **Capstone Project assignments**.
- Submit your **Evaluation of the Director of Clinical Education**.
- Submit your recorded **Oral Case Presentation**
- Submit your **Self-Reflection** narrative
- Complete your end of semester **Professionalism Self-Evaluations** and bring them to your end-of-semester advising meeting.
- Arrange a time to meet with your advisor for **end of semester academic advising**.  
\*\*Note that **mid-semester academic advising** is required as well. This occurs during/at the end of Rotations 2, 6, 9  
**Therefore, you are meeting with your Academic Advisor at the end of Rotations 2, 4, 6, 7, 9, 12.** The meetings can occur before the Call Back Days if desired/convenient.

## APPENDIX B

Florida Gulf Coast University  
Marieb College of Health & Human Services  
Department of Health Sciences  
Master of Physician Assistant Studies Program

### POST OCCUPATIONAL EXPOSURE CHECKLIST

- Immediately notify your preceptor.
- Using gloves remove and dispose of all contaminated personal protective equipment (PPE). Wash the exposed area thoroughly with soap and running water. Use non-abrasive, antibacterial soap, if possible. If blood is splashed in the eye or mucous membrane, flush the affected area with running water for at least 15 minutes.
- Obtain the name of the source patient, medical record number, room number, and diagnosis. This information is necessary to assist the medical provider in determining the potential severity of the exposure, and it must be protected in accordance with HIPAA and institutional rules.
- Notify the MPAS Program in the event of an exposure incident within 24 hours of the exposure.
- The student must complete the FGCU Non-Employee Incident Report Form <http://www.fgcu.edu/EHS/Files/Nonemployeeincidentrpt2014.pdf> within 24 hours of the exposure.
- If the exposure occurs during normal business hours, report to Student Health Services (SHS) (Hours 8:15 am to 4:45 pm Mon-Thur, 9:00 am to 4:45 pm Fri) for testing and for counseling. SHS will provide medical intervention at low cost and/or for insurance coverage. Student will be referred to his/her private physician if extended care is needed.
- If the exposure occurs outside of business hours, report to the nearest Emergency Department. The student should thereafter follow up with SHS.

**\*\*Note:** Many clinical facilities during the second year will begin the post exposure procedure(s) with you. There is no mandatory requirement for them to do so. Any costs incurred by the student in following such a plan are the responsibility of the student. It is up to the student to ascertain costs (if any) in advance of accepting such services. All MPAS students are required to obtain and maintain health insurance. The student has exclusive responsibility for his or her own medical bills.

## APPENDIX C

Florida Gulf Coast University  
Marieb College of Health & Human Services  
Department of Health Sciences  
Master of Physician Assistant Studies Program

### RECEIPT & ACKNOWLEDGMENT OF THE MPAS PROGRAM CLINICAL GUIDEBOOK

I, \_\_\_\_\_, with my signature below, acknowledge that I have received and read a copy of the MPAS Program Clinical Guidebook. As a professional and aspiring PA, I agree to abide by all of the policies contained therein. I further acknowledge that I have had the opportunity to ask questions and have received adequate explanations regarding the Guidebook contents.

I understand that the MPAS Program Polices, Procedures and Clinical Guidebook remain under review and any section or part may be revised without prior notice during my matriculation in the program. If the Clinical Guidebook is indeed revised, notification will be given via FGCU Email. I will be responsible for abiding to any such revisions.

I understand that failure to abide by the policies contained in the MPAS Program Clinical Guidebook is considered to be unprofessional behavior.

\_\_\_\_\_  
Student Name (printed)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

## APPENDIX D

### ARC-PA 4<sup>TH</sup> EDITION STANDARDS ADDRESSED IN THIS GUIDEBOOK

<b>Standard</b>	<b>Description Summary</b>
<b>A1.03g</b>	...addressing appropriate security and personal safety measures for PA students and faculty...
<b>A2.01</b>	...faculty must possess the educational and experiential qualifications...
<b>A2.13</b>	...faculty must be qualified through academic preparation and/or experience to teach...knowledgeable in course content and effective in teaching...
<b>A2.15</b>	...not rely primarily on resident physicians for didactic or clinical instruction
<b>A2.16</b>	...supervised clinical practice experience preceptors must hold a valid license that allows them to practice at the clinical site
<b>A2.17</b>	...instructional faculty member designated by the program to assess and supervise the student's progress in achieving learning outcomes...
<b>A3.01</b>	...policies must apply to all students, principal faculty, and program director...
<b>A3.02</b>	...must inform students of all program policies and procedures...
<b>A3.03</b>	Students must not be required to provide or solicit clinical sites or preceptors. The program must coordinate clinical sites and preceptors...
<b>A3.05</b>	Students must not substitute for or function as instructional faculty
<b>A3.06</b>	Students must not substitute for clinical or administrative staff...
<b>A3.07</b>	...policy on immunization of students and such policy must be based on current Centers for Disease Control recommendations...
<b>A3.08</b>	...written policies addressing student exposure to infectious and environmental hazards...
<b>A3.09</b>	...faculty...must not participate as health care providers for students in the program...
<b>A3.17a</b>	...required academic standards
<b>A3.17c</b>	...requirements for progression in and completion of the program
<b>A3.17e</b>	...policies and procedures for withdrawal and dismissal
<b>A3.17f</b>	...policies and procedures for remediation and deceleration
<b>B1.09</b>	...program must define and publish instructional objectives that guide student acquisition of required competencies.
<b>B1.10</b>	...orient instructional faculty to the specific learning outcomes it requires...
<b>B3.01</b>	...students must be clearly identified in the clinical setting...
<b>B3.02</b>	Supervised clinical practice experiences must enable all students to meet the program's learning outcomes...to include preventive, emergent, acute, and chronic patient encounters.

<b>B3.03</b>	Supervised clinical practice experiences must enable all students to meet the program's learning outcomes...across the lifespan, women's health, surgical management, and mental health...
<b>B3.04</b>	Supervised clinical practice experiences must occur in...outpatient, ED, inpatient, and operating room
<b>B3.05</b>	Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs
<b>B3.06a</b>	Supervised clinical practice experiences should occur with physicians who are specialty board certified in their area of instruction
<b>B3.06b</b>	Supervised clinical practice experiences should occur with PAs teamed with physicians who are specialty board certified in their area of instruction
<b>B3.06c</b>	Supervised clinical practice experiences should occur with other licensed health care providers experienced in their area of instruction
<b>B3.07</b>	Supervised clinical practice experiences should occur with preceptors practicing in family medicine, internal medicine, general surgery, and pediatrics
<b>C3.01</b>	...must conduct frequent, objective and documented evaluations of students related to learning outcomes...
<b>C3.02</b>	...must document student demonstration of defined professional behaviors
<b>C3.03</b>	...must monitor and document the progress of each student in a manner that promptly identifies deficiencies in knowledge or skills...
<b>C3.04</b>	...must conduct and document a summative evaluation of each student within the final four months of the program...
<b>C4.01</b>	...must define, maintain and document effective processes for the initial and ongoing evaluation of all sites and preceptors...
<b>C4.02</b>	...must document that each clinical site provides the student access to physical facilities, patient populations and supervision necessary...