Preceptor Orientation Handbook

Tips, Tools, and Guidance for

2022-23 Physician Assistant Preceptors

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Introduction

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

E*Value

E*Value is the software system Des Moines University uses to manage our clinical students. The preceptor and/or site contact, student, and DMU staff have access to E*Value accounts. We use E*Value to:

- Track pertinent site details including contact information, site-required documents, housing details, and more
- Schedule SCPEs (Supervised Clinical Practice Experiences)
- Manage student case logs and evaluations by both preceptors and students
- Generate evaluations from preceptors and students

General Goals of the Clinical Year

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

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

Physician Assistant Competencies

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

Preceptor Role and Responsibilities

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

Preceptor (or designee) responsibilities include, but are not limited to, the following:

- Awareness of the regulations regarding physician assistant students.
- At least 4 weeks prior to the Supervised Clinical Practice Experience (SCPE) start date:
  - Inform all pertinent facilities that a PA student will be rotating with the preceptor
  - Inform the DMU PA Program of documents that need to be sent to the associated facilities.
- Orient students at the onset of the SCPE with the practice/site policies and procedures and review the expectations, objectives and student’s personal goals for the SCPE.
- Complete site safety information with the student.
- Provide ongoing and timely feedback regarding clinical performance, knowledge base, and critical thinking skills including a student-initiated verbal mid-SCPE and final written evaluation. Please see the “Student Evaluation” section.
- Supervise, demonstrate, teach, and observe clinical activities to aid in the development of clinical skills and medical decision making.
- Delegate to the student increasing levels of responsibility for clinical assessment and management as appropriate to the student’s experience and expertise.
- Participate in the evaluation of clinical skills and medical knowledge base through the following mechanisms:
  - Direct supervision, observation, and teaching in the clinical setting
  - Direct evaluation of presentations (including both oral and written)
  - Assignment of outside readings and research to promote further learning, when applicable
- Conduct dialogue with PA Program representatives during site evaluations and as needed.
- Evaluate student documentation, either in written form or in electronic medical record.
- Complete and promptly return the final evaluation form via E*Value.
- Promptly notify the PA Program Director of Clinical Education of any circumstances that might interfere with the accomplishment of the course objectives or diminish the overall training experience.
- Maintain an ethical approach to patient care by serving as a role model for the student.
- Demonstrate cultural competency through interactions with patients.
- Comply with Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act Amendments Act, the Age Discrimination Act of 1975, and the related regulations to each. There shall be no discrimination based on race, color, national origin, ethnicity, creed, religion, age, disability, sex, gender identity, sexual orientation, pregnancy, veteran status, genetic information.
and other characteristics protected by law in either the selection of program participants for participation in the program, or as to any aspect of the clinical training. With respect to a handicap, the handicap must not be such as would, even with reasonable accommodation, in and of itself preclude the program participant’s effective participation in the program.

- Maintain in confidence student files, personal information, and evaluations; and limit access to only those employees that need to know and agree to comply with the Family Educational Rights and Privacy Act (FERPA), to the same extent as such laws and regulations apply to the University.

The Preceptor–Student Relationship

The preceptor should maintain a professional relationship with the PA student and always adhere to appropriate professional boundaries. Social activities and personal relationships outside of the professional learning environment should be appropriate and carefully selected so as not to put the student or preceptor in a compromising situation. Contact through web-based social networking sites should be avoided until the student fully matriculates through the educational program or completes the SCPE where the supervision is occurring. If the preceptor and student have an existing personal relationship prior to the start of the SCPE, a professional relationship must be maintained at all times in the clinical setting. Students are not allowed to complete SCPEs where the evaluating preceptor is a relative.

Orientation and Communicating Student Expectations

DMU PA Program students are to contact the preceptor or site contact at least four weeks and no less than two weeks prior to starting each SCPE. This communication serves to gain information about any required documentation needed prior to starting the SCPE. The student will also ask about meeting time and place for the first day, dress code, schedule, appropriate equipment to bring, orientation to be completed prior to starting, and preparatory study that should be done.

On the first day of the SCPE (or when possible, prior to the SCPE), the student should complete any administrative needs, including obtaining a name badge and computer password, and completing any necessary paperwork, EMR training, and additional site-specific HIPAA training, if needed.

Orientation of the student to the SCPE site serves several purposes. Orientation facilitates a quicker transition in allowing the student to become a member of the medical team. It also establishes a feeling of enthusiasm and belonging to the team as well as helping students develop the functional capability to work more efficiently.

Many sites prefer to create their own orientation manual, which is given to the student on or prior to the first day of the SCPE. TIP: Creating a site-specific orientation or policy manual can be delegated to the students you host, with each subsequent student adding to a document that you, as the preceptor, maintain and edit. If there is an online version of an orientation manual, please inform a DMU Clerkship Coordinator and it will be posted for students.

We recommend early in the rotation that the preceptor and student formulate mutual goals they hope to achieve during the SCPE. The preceptor should also communicate expectations of the student during the SCPE. Expectations may include:

- Interactions with office and professional staff
- General attendance/duty hours
- Overnight/weekend and on-call schedules
- Participation during rounds and conferences
• Expectations for clinical care, patient interaction, and procedures
• Oral presentations, Assignments and/or Write-ups (i.e. SOAP notes, progress notes)
• Any additional expectations deemed necessary by the preceptor

Preparing Staff
The office or clinic staff plays a key role in ensuring each student has a successful SCPE. Helping students learn the routines and location of critical resources builds student confidence and efficiency. Students, like their preceptors, depend on staff for patient scheduling and assistance during a patient’s visit. Students should communicate with the staff about appointment procedures, retrieving medical records, bringing patients into examination rooms, ordering tests, retrieving test results, and charting.

The preceptor should inform staff how the student will interact with them and with patients. Consider having a meeting or creating a memo with/for staff in advance of the student’s arrival to discuss:

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

Supervision of the PA Student
During a student’s time at the clinic or hospital, the preceptor must be available for supervision, consultation, and teaching, or designate an alternate preceptor. Although the supervising preceptor may not be with a student during every shift, it is important to clearly assign students to another MD, DO, PA or NP who will serve as the student’s preceptor for any given time interval. Having more than one clinical preceptor has the potential to disrupt continuity for the student but offers the advantage of sharing preceptorship duties and exposes students to valuable variations in practice style. The preceptor should be aware of the student’s assigned activities at all times to provide adequate supervision and assessment.

Students are not employees of the hospitals or clinics and, therefore, work entirely under the preceptor’s supervision. Students are not to substitute for paid clinicians, clerical staff, or other workers at the clinical sites. The preceptor should provide direct supervision of technical skills with gradually increased autonomy in accordance with the PA student’s demonstrated level of expertise. The preceptor must document the involvement of the PA student in the care of the patient in all aspects of the visit. The preceptor must also specifically document the student was supervised during the entirety of the patient visit. Medicare laws are slightly different in terms of what a student can document, which is explained further in the following “Documentation” section. The PA student will NOT be allowed to see, treat, or discharge a patient without evaluation by the preceptor.

Informed Patient Consent for Student Involvement in Patient Care
Patients are essential partners in this educational endeavor. All efforts must be made to observe strict confidentiality, respect patient privacy and dignity, and honor their preferences regarding treatment. All students complete HIPAA training prior to their clinical year. Patients must be informed that a physician assistant student will participate in their care, and the patient’s verbal consent must be obtained. Students should be clearly identified as a PA student and must also verbally identify themselves as such. If the patient requests a physician and refuses the PA student’s services, the request must be honored. Patients
must know they will see their regular provider, and they should have an explicit opportunity to decline student involvement.

**Documentation**
If allowed by the preceptor or the facility, PA students may enter information in the medical record. Preceptors should clearly understand how different payors view student notes as related to documentation of services provided for reimbursement purposes. Any questions regarding this issue should be directed to the preceptor’s employer. Students are reminded that the medical record is a legal document. All medical entries must be identified as “student” and must include the PA student’s signature with the designation “PA-S.” The preceptor cannot bill for the services of a student. Preceptors are required to document the services they provide as well as review and edit all student documentation. Although student documentation may be limited for reimbursement purposes, student’s notes are legal and are contributory to the medical record. Moreover, writing a succinct note that communicates effectively is a critical skill that PA students should develop. Students are encouraged to hand-write notes throughout the clinical experience, if simply for the student’s own edification, which should be reviewed by preceptors for feedback.

Medicare reimbursement requires limited student participation regarding documentation. Students are allowed to document only the past medical history, family history, social history, and review of systems. The preceptor must document the History of Present Illness (HPI), Physical Exam (PE), and all medical decision-making for proper billing. Please visit the [Center for Medicare and Medicaid Services (CMS)](https://www.cms.gov) which provides direct access to CMS rules regarding student documentation.

**Prescription Writing**
Students may transcribe prescribing information for the preceptor, but the preceptor must sign all prescriptions. More specifically, the student’s name is not to appear on the prescription. For sites using electronic prescriptions, the preceptor MUST log into the system using his/her own password and personally sign and send the electronic prescription. These guidelines must not be violated by the student or the preceptor.

**Expected Progression of PA student**
PA students are trained to take detailed histories, perform physical examinations, give oral presentations of findings, and develop differential diagnoses. As the year continues, they should be able to more effectively determine an assessment and plan to be discussed with the preceptor. If the preceptor deems it necessary, students initially may observe patient encounters. However, by the end of the first week, students should actively participate in evaluating patients. As the preceptor feels more comfortable with the student’s skills and abilities, the student should be allowed progressively increasing supervised autonomy.

**Student Evaluation**
The evaluation is designed to promote communication between preceptor and student. Preceptors are encouraged to discuss strengths and weaknesses regarding each evaluation component. The evaluation should also reflect on student knowledge and skills as well as their improvement throughout the SCPE and assess progress in comparison to other students at the same level of training. The preceptor’s evaluation of the student is tremendously important. Evaluation criteria can be found in the course syllabus.

Preceptors should consider performing brief weekly discussions privately with colleagues and staff to gain additional insight into the student’s performance, professionalism and effectiveness as a team player with
all members of the health care team. These comments are helpful contributions and should be discussed with the student and included in student evaluations. Additionally, staff feedback may enhance the student experience from one SCPE to another and help improve efficiency while maximizing educational opportunities.

The preceptor and PA student should discuss the student’s progress regularly throughout the SCPE. Midway through the SCPE, it is the student’s responsibility to initiate a verbal evaluation. It is strongly recommended the rubric provided in the syllabus be used to guide this discussion. The student will document this mid-SCPE evaluation and provide the summary to the program and preceptor.

Final student evaluation is done by the preceptor at the end of the SCPE. E*Value will send an automated e-mail (from MedHub, E*Value, or a DMU PA Program member) to the preceptor 2-3 days prior to the last day of the SCPE. The e-mail will provide a link to the evaluation to be completed and submitted online.

**Student course credit for the SCPE will not be given until the evaluations are received. Receipt of all evaluations is the responsibility of the student. Students will not be allowed to sit for final exams until all evaluations are completed and submitted.**

If a student receives a SCPE evaluation marked “unacceptable” on any objective or negative comments, the preceptor may be asked for additional information in any of these cases to help clarify student performance. If the DMU PA program clinical team determines to fail a student on a SCPE, the student will repeat the SCPE at a different site after the 25th month. If an “NA” (not assessed) rating is given, the student will be assessed by a PA faculty generated assignment.

One preceptor evaluation per student must be received from each SCPE. All required and elective preceptorships must be satisfactorily completed as determined by the DMU PA program clinical team and/or Program Director before the student can graduate from the Program.

Students complete separate evaluations on preceptors and sites at the end of each SCPE. Preceptors can view the evaluations that students complete by logging in to E*Value at [www.e-value.net](http://www.e-value.net). The preceptor and site evaluations must be completed by the student before the student can view the evaluation filled out by the preceptor. The evaluation of the student must also be completed before the preceptor and site evaluations can be viewed on E*Value.

**Student Responsibilities**

In addition to adhering to the standards of professional conduct outlined later in the handbook, students are expected to perform the following during their clinical SCPEs:

- Obtain detailed histories and conduct physical exams, develop a differential diagnosis list, formulate an assessment and plan through discussion with the preceptor
- Give oral presentations and document findings
- Perform and interpret common lab results and diagnostics
- Educate and counsel patients across the lifespan regarding health-related issues
- Attend clinical SCPEs as scheduled in addition to grand rounds, lectures, and conferences, if available to them. The student should be available when requested by the preceptor and should devote full time effort to the clinical SCPE. The student should expect to work 36-50+ hours/week including days, evenings, nights, weekends and holidays during the SCPE year.
- Demonstrate emotional resilience and stability, adaptability, and flexibility during the clinical year
- Log diagnoses and physical exam components experienced in E*Value
• Complete preceptor and site evaluations in E*Value
• Complete end of rotation exams

Student Absence
In the event of an unanticipated absence due to illness or another urgent personal matter, it is the student’s responsibility to immediately contact the Preceptor and DMU PA Program Clinical Team. As per the DMU Student Leave of Absence Policy, students needing to miss 1-3 days of SCPEs for an unanticipated reason must work directly with the DMU PA Program Clinical Team and preceptor so that arrangements can be made to make-up any missed time during the SCPE. Students must send the plan detailing makeup time arrangements (approved by the preceptor) to the Director of Clinical Education as soon as possible.

During the clinical year, there is one scheduled break in late December. The dates of this break are predetermined by the program in accordance with the DMU calendar. There are no other scheduled vacations during the second year.

Given the relatively short time period dedicated to clinical SCPEs, students are encouraged to schedule job interviews outside of the time they are scheduled to be on site for SCPEs. However, the program does allow students to request up to three (3) days away from clinical SCPEs during the entire clinical year. The three days need to be taken during different SCPEs, must not be completed during an on-campus assessment month, or during a 2-week SCPE. Students are not required to make up time for these three missed days, although faculty encourage students to seek opportunities to do so to avoid missing instructional time. These absences must be pre-approved by the preceptor and the DMU PA Program Clinical Team at least seven business days prior to the absence and will be tracked and monitored by DMU program personnel.

Absence for Student Assessment
The first on-campus assessment (FOCA) will occur September 28–30, 2022. The second on-campus assessment (SOCA) will occur January 25–27, 2023. Please expect students to conclude their SCPEs early or start a SCPE late during these specified assessment times.

The final Friday of each SCPE will be reserved for end of rotation examinations which must be completed either remotely or on campus in Des Moines. The student will inform the preceptor early in the SCPE if they will be absent, either for the second half of the day for an afternoon exam, or the entire day if two exams are scheduled on that final Friday.

Standards of Professional Conduct
As health care practitioners, PAs are expected to conform to the same high standards of ethical and professional conduct required of certified PA’s. These include, but are not limited to:

• Respect
• Flexibility
• Academic integrity
• Honesty and trustworthiness
• Accountability
• Cultural competency
The professional conduct of PA students is evaluated on an ongoing basis throughout the program. Violations of standards of conduct are subject to disciplinary actions administered by Des Moines University and by the DMU Physician Assistant Program.

If preceptors observe any concerns about a student’s professionalism, please immediately contact any member of the DMU PA Program Clinical Team.

Specific Program Policies

Safety, Security & Incident Reporting
By day three of each SCPE, the student will receive site-specific safety information from the preceptor or qualified representative. Topics for discussion may include, but are not limited to, policies and procedures addressing weather-related emergencies, fire, exposure to infectious pathogens, hostile patients, and student injuries. The student will complete an online survey verifying that the security and personal safety discussion took place. The student may also use this survey instrument, in addition to contacting faculty directly, to document any safety concerns the program must address. The Clerkship Coordinator will track receipt of information, ensure compliance with the requirement, and alert the DMU PA Program Clinical Team to any concerns expressed by the student.

While on SCPEs, student safety is of the utmost importance to the program. If there are concerns about safety or security while on SCPEs, students should communicate with the clinical site's primary contact listed on E*Value for that site as well as the Director of Clinical Education. All immediate safety and security concerns should be directed to local authorities by calling 911.

The PA Program has set up a phone number for students to call with any non-urgent safety concerns. This number is (515) 271-1502. The Director of Clinical Education, Program Director and College of Health Sciences Dean will answer or be notified immediately about a call to this line.

Any student involved in an accident or incident in which a patient or student has been adversely affected must notify the preceptor or precepting facility and the DMU PA Program Clinical Team by email ClinicalAffairsPA@dmu.edu or by calling (515) 271-1060. In addition, the student must submit within two days a written account of the incident and his/her involvement to the Director of Clinical Education. Following review, the DMU PA Program administration will assure that appropriate action is taken in the matter. Students are responsible for costs incurred due to injuries that happen at clinical sites.

Student Health Insurance
All students are required to maintain an active health insurance policy. If any out-of-state clinical experiences are scheduled, the student must have insurance coverage other than Medicaid since Medicaid does not cover services rendered outside of Iowa. Proof of health insurance is required to participate in supervised clinical practice experiences. Potential health hazards, such as needle punctures, etc. make it imperative the student has personal coverage, since neither the clinical site nor DMU is responsible for medical costs incurred for such injuries that occur while on SCPEs. It is highly recommended students review the blood-borne pathogen policy at each clinical site at the start of each SCPE. In the event of exposure to blood-borne pathogens while at a clinical site, the facility policy should be followed, a DMU incident report completed and submitted to DMU Student Health Services, and the Director of Clinical Education informed about the injury.
Blood Borne Pathogen Exposure and Immunizations
If a student is directly exposed to blood borne pathogens, the student should follow the procedures as outlined by the facility at which they are rotating. In addition, the student should contact the PA Program Director of Clinical Education within 24 hours of the incident and complete the Student Injury Report Form, which can be found on the DMU Pulse page → Students tab → Injury, Illness, and Injury Reporting. Students are responsible for any costs incurred due to injuries at a clinical site.

Each student is required to have updated immunizations throughout the program. Individual records are available from the student or PA Program upon request. TB skin tests, background checks, and urine drug screens will be performed prior to the beginning of the SCPE year.

Travel Time
If approved in advance by the Director of Clinical Education, travel time will be subtracted from the SCPE dates. In determining appropriate travel time, it is accepted that the student is capable of traveling 500 miles a day by car. Weekends (Saturday and Sunday) are considered travel days.

Background Check
A national criminal background check is completed on all students prior to matriculation and immediately prior to beginning their clinical year in June. The results of background checks enable students to be eligible for licensure as a professional Physician Assistant.

Student Dress Code
Clinical Attire:
- Students must dress in a professional, identifiable manner.
- Students shall wear clean dress trousers or slacks (no jeans) with a clean shirt/blouse, tie (for men), white clinic jacket with the Des Moines University Physician Assistant Program patch affixed on the left sleeve.
- The student will wear the DMU name tag that clearly identifies them as a PA student at all times, in addition to any required site-specific identification.
- Closed-toe shoes and socks (or hose) must be worn at all times. Shoes shall be sturdy, low-heeled and with a non-slip sole. Tennis shoes or boots of clean and conservative nature are permitted.
- Male students shall be clean shaven, except for a mustache or beard, which must be neatly trimmed.
- Students with hair below the shirt or jacket collar shall fix their hair in such a manner that it will not interfere with their clinical duties.
- Jewelry should not pose a risk or be distracting to the student intern, faculty, patient or caregiver.
  - Facial piercings must be removed.
  - Ear piercings shall be limited to two earrings per ear.
- Fingernails shall be clean and trimmed to a moderate length. No artificial nails are allowed.
- Tattoos must be covered.
- Students should avoid the use of perfume and cologne.
- OSHA regulations will always be followed.

Student manner, attitude, behavior and dress must reflect a professional status. Appearance makes a strong impact and is important to patient care. Variations of this dress code is allowed if in accordance with a hospital or clinic dress code.
Cell Phones
It is inappropriate for students to talk or text on cell phones while on duty at a site. Personal use of a cell phone either by talking or texting should only occur when away from the work area. Note: cell phones are used by students to document patient encounters in E*Value throughout the clinical day. Students may appear to be texting while they are documenting patient experiences.

The Preceptor–DMU PA Program Relationship
The success of clinical training of PA students depends on maintaining good communication between the student, the preceptors and the DMU PA program. The program strives to maintain open faculty–colleague relationships with its preceptors. If a preceptor has a question or concern about a student, they should contact the DMU PA Clinical Team (see contact information listed in beginning of the handbook). Should problems arise during a SCPE, notify the Director of Clinical Education immediately, so problems can be addressed. If a scheduling problem occurs that will necessitate rescheduling or canceling a student rotation, please contact a DMU PA Program Clinical Team member as soon as possible.

If a PA student is working in a paid position in a different health-care related capacity any time during their PA education, that individual is not permitted to assume the role of a PA student while on duty as a paid employee. Liability insurance will not cover any student assuming the “PA student” role outside of an assigned clinical SCPE.

Continuing Medical Education (CME) Credit for PA Preceptors
Des Moines University has been approved by the American Academy of Physician Assistants (AAPA) to award AAPA Category 1 CME credit to eligible Physician Assistant preceptors. Physician Assistants can earn a maximum of 20 hours of credit for clinical precepting during the calendar year. Preceptors may now earn a total of 2 AAPA Category 1 CME credits per week for each PA student they precept.

The DMU Continuing Medical Education office will contact the preceptor via email at the end of the clinical year (in May) requesting a short evaluation be completed. Certificates and AAPA credit will be awarded upon successful completion of the CME evaluation.

If you have any questions about the CME credit, call 515-271-1596, email cme@dmu.edu or visit www.dmu.edu/cme.

Liability Insurance
Liability insurance is provided by Des Moines University for the student while the student is on an approved clinical preceptorship. The policy has annual limits of $2 million per loss event, $4 million aggregate per year. Proof of liability/malpractice medical insurance coverage is sent to each clinical site and/or preceptor.

Objectives & Student Performance Evaluation Information
Please see the SCPE specific syllabi regarding objectives, student performance requirements, and other program requirements.
Tips for Preceptors

The Physician Assistant Education Association (PAEA) has developed a series of “One-Pagers for Preceptors”. These guides offer time-tested methods for making the precepting experience as efficient and rewarding as possible.

- PAEA Orientation Handbook
- Incorporating Students into Patient Care/Workflow
- The One-Minute Preceptor
- Ask-Tell-Ask Feedback Model
- SNAPPS: A Six-Step Learner-Centered Approach to Clinical Education
- Introducing/Orienting a PA Student to Your Practice
- Tailoring Clinical Teaching to an Individual Student

Thank you for your partnership and support in educating future Physician Assistants!