



**NAZARETH UNIVERSITY**

**PHYSICIAN ASSISTANT PROGRAM**

**Clinical Education Student Handbook  
2026**

The Physician Assistant (PA) program reserves the right to amend this handbook and change or delete any existing rule, policy, or procedure, or to add new rules, policies, and procedures at any time throughout the program and without prior notice. The student will be notified via email or Moodle announcement of any changes.

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## General Overview

### Introduction

The second year of the Nazareth University Physician Assistant Program consists of supervised clinical practice experiences (SCPE) also referred to as clinical rotations. The purpose of these experiences is to afford students opportunities to apply the knowledge and clinical skills gained in the didactic year. Students will enhance their clinical skills to be able to diagnose and treat patients while being supervised in the clinical setting. These experiences are designed to build competence in fundamental clinical skills through practice and feedback, as well as enhance confidence in preparation for graduation and practice.

### Philosophy

The program believes acquisition of the skills necessary to become a competent, empathetic health care practitioner is best accomplished through organized clinical experiences in a positive, nurturing environment through direct observation, hands-on practice, constructive feedback, mentoring, and supplemental reading/study. We view this process as an active partnership between the student, the preceptor, and the PA Program. ***Students must always remember that through their words and actions, they represent themselves, the PA Program, Nazareth, and the PA profession.***

### Program Accreditation Statement {A3.12a}

Nazareth University has applied for Accreditation - Provisional from the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). Nazareth University anticipates matriculating its first class in January 2026, pending achieving Accreditation - Provisional status at the September 2025 ARC-PA meeting. Accreditation - Provisional is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA Standards or when a program holding accreditation-provisional status appears to demonstrate continued progress in complying with the Standards as it prepares for the graduation of the first class (cohort) of students.

### Goal/Objective

This manual provides students with the policies, procedures, competencies, and expectations required during the clinical phase. It is a valuable resource for students to succeed while on clinical rotations as well as throughout the students' academic endeavors.

In addition to the Clinical Education Handbook, contained herein are policies pertaining to students within the Physician Assistant Program. Students enrolled in the Nazareth University Physician Assistant Program must adhere to all policies as noted below.

- a. Nazareth University Student Code of Conduct
- b. Nazareth University Physician Assistant Program Student Handbook of Policies & Procedures

All students, faculty, staff, and program director are responsible for adherence to Naz Physician Assistant (PA) Program policies and procedures, regardless of their location. Additionally, students are expected to follow all clinical rotation site(s) policies. {A3.01} {A3.02}

**Please note, in the event that this handbook conflicts with and/or is more restrictive or specific than the Nazareth University Student Code of Conduct, the provisions in this handbook shall apply.**

Should a student have questions that cannot be answered by these sources, the student must discuss first with the Director of Clinical Education, and if no resolution then the Program Director. Students are required to sign the attestation statement on the last page of this Clinical Education Handbook as a condition for participation in the clinical year.

The program requires all clinical year students to read these sources carefully and thoroughly. **Ignorance of the rules does not excuse noncompliance.**

## The Clinical Year Curriculum

The clinical year of the PA program consists of a total of nine (9) four-week and three-day clinical rotation blocks, plus a continuation of the Professional Practice course sequence which includes a Summative Evaluation in Professional Practice VI.

<b>Term: Spring 2</b>	
<b>Course Number &amp; Title</b>	<b>Credits</b>
PHA 601 Family Medicine Rotation	4
PHA 602 Internal Medicine Rotation	4
PHA 603 Emergency Medicine Rotation	4
PHA 514 Professional Practice IV	1
Term credit total:	13
<b>Term: Summer 2</b>	
<b>Course Number &amp; Title</b>	<b>Credits</b>
PHA 604 Surgery Rotation	4
PHA 605 Pediatrics Rotation	4
PHA 606 Obstetrics & Gynecology Rotation	4
PHA 515 Professional Practice V	1
Term credit total:	13
<b>Term: Fall 2</b>	
<b>Course Number &amp; Title</b>	<b>Credits</b>
PHA 607 Psychiatry Rotation	4
PHA 608 Elective Rotation I	4
PHA 609 Elective Rotation II	4
PHA 516 Professional Practice VI	1
Term credit total:	13

Students will not progress to the clinical phase of the program until they have successfully completed all didactic coursework and didactic programmatic assessments; submitted documentation of all required immunizations, titers, health clearance as listed in the Naz PA Program's Health Screening and Immunization Requirements (see PA Program Student Handbook of Policies & Procedures); health care insurance; and HIPAA, blood-borne pathogens, OSHA, BLS, and ACLS training and certification. Failure to complete any requirements by the designated due dates as outlined may result in a delayed start to the

clinical year. This could lead to the delay of the student's graduation or dismissal from the program. There are some rotations that have additional requirements which students must complete prior to starting the specific rotation, such as drug testing, repeat background check, site orientation or site-specific training. The clinical portion of the program involves in-depth exposure to patients in a variety of clinical settings. The settings, characteristics, assigned tasks, and student schedules vary depending on the site. The organization of the clinical experiences is outlined below, although the order of rotations will vary for each student based on preceptor availability.

### Required Clinical Rotations {B3.07}

- Family Medicine
- Emergency Medicine
- Internal Medicine
- Surgery
- Pediatrics
- Obstetrics & Gynecology
- Psychiatry
- Elective Rotation I
- Elective Rotation II

Each clinical rotation has a designated preceptor who is responsible for coordination of the student's overall learning experience. Preceptors are licensed clinical instructors (MD, DO, PA-C, or other licensed health care providers qualified in their area of instruction who have been assigned by the clinical site to supervise you. (See the *Clinical Preceptor Responsibilities* Section in the Clinical Education Handbook.) The preceptor may delegate some of the teaching or coordination functions to other qualified clinicians throughout the course of your rotation.

Clinical rotations average 40 hours, to no more than 80 hours, a week at the designated clinical site(s). Some rotations may involve shorter or longer hours, nights, evening or on-call responsibilities, and weekend hours. **Students are required to complete a minimum of 184 hours per clinical rotation.** The preceptor determines the student's on-site schedule and clinical responsibilities. Students **MUST** adhere to each rotation site schedule and to all assignments developed by the sites and preceptors; if your preceptor is working, you, as a student, should be working also.

### Additional Curriculum Requirements during the Clinical Year

Students will complete the Professional Practice course sequence during the clinical year in addition to the SCPE rotations.



## Professional Practice IV

### *Course description*

This course provides students with the skills needed to search, interpret and evaluate medical literature and is the foundation for their capstone project.

## Professional Practice V {B2.13}

### *Course description*

Building on the foundational skills acquired in the previous course, students will conduct a systematic literature review to answer a clinical question, fulfilling the requirements of their capstone project.

## Professional Practice VI {B4.03}

### *Course description*

This course equips students with the necessary information to obtain credentials, licensure and certification. This course includes a summative evaluation to ensure that each student meets the program competencies required for clinical practice.

## **Clinical Year Policies and Procedures {A3.03}; B3.01}; {B3.02}; {B3.03}; {B3.04}; {B3.05}; {B3.06}; {B3.07}**

### Clinical Site Placements

PA students are not required to provide or solicit clinical sites or preceptors. All clinical site placements will be done by the Clinical Team and overseen by the Director of Clinical Education.

### Match Process

The match process is an exciting rite of passage for PA students. It is a culmination of the year of hard work, dedication, and matriculation from the didactic to the clinical year. The program will do its best to match students to their preferred clinical rotation site.

- The program makes all decisions regarding rotation assignments, content and sequencing. The PA Program reserves the right to modify the above-referenced rotation assignments in accordance with accreditation standards, preceptor availability, clinical site resources and program needs.
- Students are permitted to identify a potential site and/or preceptor outside of the established PA Program network. Students must provide contact information for the potential site and/or preceptor. The clinical team will contact the site and/or preceptor to inquire about the interest and appropriateness. The clinical team determines if the site and/or preceptor meets expectations as an acceptable clinical experience.
- Family members are not allowed to serve as preceptors for a student enrolled within the PA Program. The provider (relative) may serve as a preceptor for other students enrolled in the PA Program.

## Clinical Rotation Assignments

Prior to the clinical year, students have the opportunity to submit their preferences for site placement. This survey provides the student the opportunity to indicate their most desired/least desired site placements and locations. The Naz PA Program utilizes clinical sites throughout the country to strive to meet student requests for preferred geographical area(s). **The program reserves the right to place students in SCPEs outside of the students' preferred geographical area(s)** as ultimately, the program creates SCPE assignments based on a number of factors:

- Survey results
- Hometown
- Rotation availability
- Needs of the PA Program (site maintenance)
- Special consideration requests

## Special Circumstances for Clinical Site Placement Consideration

Students may apply for special consideration in clinical site placement. All requests must be made to the Director of Clinical Education **prior** to the match process. Requests should be made in writing, sent by e-mail and include a description of the circumstances. For example, students may request to rotate at their prior pediatric office or a hospital system where they were previously employed. Students who are granted special considerations are still expected to complete the match process. Special consideration will not be granted after the match process is completed unless an extenuating issue with the clinical site develops.

## Rotation Reassignments

Should a student rotation reassignment be necessary due to detrimental findings from ongoing monitoring of the site or newly identified barriers to an optimal student learning experience (for example, recent staffing shortage, the preceptor leaves the practice, the clinic/practice can no longer commit to teaching students due to implementation of a new EHR system, etc.), the PA Program will reassign the student using the following guidelines:

1. Re-placement within the previously assigned geographic area, but possibly necessitating a longer distance to the clinical site.
2. Pulling the student from their defined area of clinical placement and placing the student elsewhere where there is a preceptor/clinical site available and willing to precept the student for the rotation.

## Housing and Transportation

**Students are responsible for securing and paying for their own housing during the clinical year.** This may include additional housing, food and transportation costs, in

addition to those of their primary or local residence. Students must plan ahead to ensure they have housing in time for the start of the rotation. Students should also assess the status of their vehicle. You will be required to drive to clinical sites and having a car that is running poorly, if at all, is not an acceptable excuse to miss a clinical day. There will not be special consideration due to lack of study time due to extensive travel time, the excess cost of gasoline or transportation issues, etc.

### Required SCPE Rotations {B3.07}

When a student commits to the 24-month program (including the 12 months of SCPEs) the program has a responsibility to ensure its students are provided and receive the required elements to graduate, meeting all program and ARC-PA standards. Students must successfully complete one rotation in each of the following areas of practice: Family Medicine, Internal Medicine, Pediatrics, Surgery, OB/GYN, Emergency Medicine, and Psychiatry. {B3.07}

### Elective Rotations {B3.02}

1. The Elective Rotation SCPEs are designed to provide the student with an opportunity to gain additional clinical knowledge and skills in a discipline outside of the core rotations and these are **mandatory rotations**.
2. Students are asked to submit four elective options via the wish list/survey.
3. Students may not change their request after the wish list/survey is submitted. The only exception will be when both the choices requested are not available.
4. Students are encouraged to choose electives based on clinical areas in which the student feels that they need improvement or desire increased exposure. Alternatively, students are encouraged to choose an elective in a field of medicine that is complementary to the students' desired area of practice after graduation or in an area which may lead to employment.
5. Students can choose from a list of existing clinical sites or initiate a request for a new clinical site. All students are encouraged to meet with their faculty advisor or Director of Clinical Education to discuss the elective rotation selection prior to their submission of requests. The list of potential elective rotations will be available to students prior to the issuance of the wish list/survey.
6. Once the program begins the process of site development for a student requested site, the student will not be able to opt out of that site. Submission of the request form does not guarantee that the site will be acceptable or that the student will be placed at the site.
7. Students who fail a SCPE and are allowed to progress in the program have to repeat the failed rotation at the end of the clinical year, which will delay their graduation. Students will be required to re-register for the course and are responsible for all associated costs. **Students cannot substitute an elective for a failed rotation. All students are required to complete ALL seven core rotations and two elective rotations.**

## In-person Callback Days

After the completion of each rotation, students are required to return to campus for scheduled events. This is a **mandatory** component of the PA Program's clinical year {B4.01}. These callback days include examinations as well as various educational and professional events, seminars, ongoing review and assessment of clinical and presentation skills, student-advisor meetings, Summative testing, and Capstone project presentations. Attendance is **REQUIRED** for callback days and all scheduled events on those days. If a student chooses not to attend a callback day or is tardy without advanced notice and approval from the Director of Clinical Education, a referral will be made to the Student Progress Committee for possible disciplinary action. **All travel and housing expenses for these on-campus days are the responsibility of the student.** Also, students will need to have a **current parking pass** to park on campus or you will be ticketed by campus safety. See Appendix A and B for rotation dates and program schedule for the clinical year.

## Student Preparation

In anticipation of the clinical year, students need to consider how to best prepare themselves and any significant others/family who will be affected by the student's long hours and time away from home. The amount of time will be affected by hours in the clinic, commuting to and from clinical sites, completing assignments and studying. It is important and recommended that each student schedule some time daily (even if it is only 10 minutes) to rest, relax and refresh by whatever means the student deems helpful.

All students enrolled in the Naz Physician Assistant Program obligate themselves to these rules and regulations of the University, the Naz PA Program and all clinical institutions in which they rotate. Each student is expected to be fully acquainted and comply with all published policies, rules and regulations of the University and the PA Program. Serious violations of these policies, rules and regulations may result in failed course grades and/or dismissal from the program.

## Student Health Screening and Immunization Requirements {A3.07}

Please refer to the PA Program Student Handbook of Policies & Procedures.

## Clinical Rotation Site-Specific Requirements

Placement at some clinical sites will require special paperwork to be completed by the student and/or require attendance at an orientation. There may also be additional costs for badges, or additional credentialing requirements. If the site does not cover the cost, the student is required to pay all associated costs for additional credentialing requirements or any retesting necessary. Additional requirements may include mandated vaccinations, additional background, drug, alcohol, or other screening such as fingerprinting.

### Site-Specific Immunization Requirements

Placement at some clinical sites may require mandated immunizations in addition to the Naz PA Program requirements. Students who choose not to receive site-required vaccinations may face limitations in clinical site placement, requiring alternative arrangements that could result in a delay in graduation and additional expenses such as travel, housing, and maintaining health compliance requirements.

### Site-Specific Screenings

A clinical site may request additional testing (e.g., fingerprinting, alcohol testing, respiratory fit testing) to which the student must agree to participate and for which the student will be held financially responsible. If a student refuses the testing, they will be unable to complete that clinical rotation and will be referred to the Student Progress Committee for review and possible disciplinary proceedings.

### Site-Specific Background Checks/Drug Testing {A3.07}

During the clinical year, some sites may require repeat or additional testing of students, such as additional background checks and drug testing. Please refer to the PA Program Student Handbook of Policies & Procedures for more information.

### Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS)

All students must become certified in Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS) via the American Heart Association during the end of the didactic phase of the Physician Assistant program. This training must be completed prior to starting clinical rotations; students must submit copies of BLS and ACLS certification cards to the program. Students who fail to submit these documents will not be permitted to participate in clinical training until the training and certification are successfully completed.

### Health Insurance Portability and Accountability Act (HIPAA)

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a Federal Regulation dealing with health records. The purpose of the Act is to ensure the privacy and security of Protected Health Information (PHI) with regard to patient records and research subject data.

- Students will complete HIPAA training, facilitated by Nazareth, prior to the clinical year.
- HIPAA training may be repeated at any time during the clinical year at the discretion of the clinical placement site administrators, in accordance with the established affiliation agreement.

### **Naz Physician Assistant students must adhere to all HIPAA guidelines, which include:**

- Patient information may not be discussed where the information may be overheard by unauthorized individuals (i.e., hallways, elevators, water coolers, at home or at social events).
- Dictation of patient information must occur in a private location where the information cannot be overheard by unauthorized individuals.
- Documents containing confidential information must be stored in a safe and secure location.
- Documents containing confidential information must be picked up as soon as possible from printers, copy machines, mailboxes, fax machines, etc.
- Confidential documents must be disposed of by shredding or otherwise destroying the documents. Tearing up and placing in a standard trash receptacle is not acceptable.
- Personal health information (PHI) should not be transmitted via unsecure sources including but not limited to email, text messaging, group me, WhatsApp, social media, discussion boards, etc.
- PHI may not be accessed for personal use including writing SOAP notes, oral case presentations, capstone research, etc. PHI may only be accessed as is necessary to fulfill your professional duties.
- It is the provider's duty and responsibility to keep health care information completely confidential.
- Computer "passwords" must not be written down or shared.

### **Standard Precautions/Prevention of Hazardous Exposures {A3.08a}**

Please refer to the PA Program Student Handbook of Policies & Procedures.

### **Accidental Exposure {A3.08b, c}**

The PA Program recognizes that as students begin to interact with patients as part of their clinical training, they will encounter the risk of exposure to infectious diseases. Recognizing that there is no way to totally eliminate this risk and continue to provide a meaningful and quality medical education, the Naz PA Program provides all students appropriate training in universal precautions and other risk reduction behaviors before entering the patient care environment.

Most hospitals and/or healthcare systems have set protocols and a contact person for accidental exposure cases. Students are responsible for making themselves aware of both the protocol and contact person **BEFORE** the rotation begins. Many students will receive this information during a hospital or rotation orientation. However, if a site does not provide such information to students in advance, students need to be proactive in asking ahead of time.

Following an exposure, once the student has followed the clinical site's protocol the affected student must contact the Director of Clinical Education as soon as possible. The student must also complete the Student Injury or Exposure Form (Appendix C) within 24 hours and follow the directions at the top of the form. Please complete the form as accurately and completely as possible.

Please refer to the PA Program Student Handbook of Policies & Procedures for more information.

#### Personal Security and Safety {A1.02g}

Student safety and security are of utmost importance while on clinical rotations. The program conducts routine site visits to evaluate the safety of students at clinical sites. If an incident occurs where the student feels themselves in immediate danger, the student must clearly communicate distress by any means possible, remove themselves from the situation, and call 911. If at any time while on clinical rotations a student feels that the rotation site is unsafe, the student must contact the Director of Clinical Education immediately. This includes any form of harassment or bullying behaviors. The program investigates all concerns or allegations promptly.

Students should exercise good judgement while on clinical rotations regarding their safety. Please practice the following common-sense measures while at all rotation sites:

- Leave laptops, iPads, and other valuables at home, unless required at a clinical site.
- Do not carry large amounts of money or credit cards.
- Be sure to lock your car when you park and exit the car. If you are in a large parking structure, take a picture of the section where you parked so you are not wandering to find your vehicle.
- Pay attention to the surroundings. Avoid shortcuts through isolated areas. Be alert to potential hazards. If necessary, call hospital security for an escort.
- If you see unusual activity or someone loitering, call hospital security immediately.
- Park in well-lit areas and do not walk alone to/from parking areas at night. Use the escorts/shuttles provided by the hospitals. If you are working an odd shift, always call security to walk you out or ask someone in the clinic. Don't take any unnecessary risks please!
- In the event of any problems or conflicts at a clinical site, students should attempt initially to work out any minor problems with their preceptor or supervisor. If students still perceive a problem in any area of the experience, including personality conflicts, communication issues, supervision, or inadequacy of the learning experience, they should contact the Director of Clinical Education immediately.

**Security and personal safety for instructional faculty across educational locations is supported.** Faculty are also encouraged to take the above precautions, as outlined for students. Labs, offices, and storage rooms are locked when not in use, with only designated personnel given keys to access these locations. Security patrols the campus and stationed

security according to academic and University schedules and according to use areas. Faculty are provided with contact numbers for the Naz program and for on-campus security. Additionally, they are encouraged to contact 911 should an emergency issue arise. Security and safety are ensured with clinical rotation sites. Faculty visiting or present on a clinical site are required to be informed of the site-specific security supports, hours of operation, who has access to rooms to be used, and onsite contacts for immediate concern. Faculty are also required to contact the DCE as first measure, if there is any security or personal safety concern. The DCE will review the concern and make reasonable decisions to ensure and maintain the person's security and safety.

Please refer to the PA Program Student Handbook of Policies & Procedures for more information.

### Site Visits

**Every student will receive a site visit twice during the clinical year.** The student will be notified prior to the start of the rotation if they are scheduled for a site visit within that upcoming rotation block and additional details regarding scheduling. The initial site visit will occur within the first semester of the clinical phase. The faculty member will determine how well the student has integrated into the clinical environment. The second visit will occur during the second or third semesters of the clinical year. The faculty member will assess the student's progression during the clinical phase.

If there is any concern regarding the student's transition or progression, additional site visits will be scheduled throughout the clinical year. Additional site visits will not be graded.

### Communication

In all electronic correspondence with Naz faculty and staff, preceptors, clinical sites, classmates, etc., students are expected to be professional and polite.

As part of the Professionalism Policy, students are required to check their Naz email accounts daily for correspondence from the PA Program, which may include program updates, class schedules, last minute class changes and other critical information. Students are responsible for keeping their email inboxes clean to prevent unsuccessful transmission of program correspondence due to insufficient space. **Please note, not checking emails for program updates and correspondence does not excuse student accountability or adherence to email content. Checking email and corresponding in a timely manner is part of the Program's Professionalism Policy.** The program may also use the Moodle course shell to communicate information to students.

### Contact Information

Since students will be away from campus and in different locations, all students must provide the program with current and accurate contact information to include a cell phone



number. Should a student be in a location where cell phone coverage or internet access is limited, the student must inform the program and provide an alternate reliable contact phone number.

It is the responsibility of the student to provide the program with an accurate and up-to-date mailing address and telephone number(s). Any changes should be reported immediately to the Physician Assistant Department Assistant as well as the Registration & Records office.

### Student Employment Policy {A3.04} {A3.05} {A3.15e}

Employment while matriculated in the PA Program is **strongly discouraged**. The PA curriculum has been designed to be a full-time activity for students. It consists of a very demanding course load with a great deal of time spent in class and in clinical experiences. There are also many special seminars, films and guest lecturers that may be available to students on relatively short notice. We encourage you to seek outside sources of financial support (scholarships, loans, etc.) so that you may devote as much time as possible to your professional education.

**While enrolled in the PA Program, Physician Assistant students may not perform service work for, or be employed by, the Naz Physician Assistant Program.** Clinical rotations are an educational experience for the physician assistant student. **At no time during the clinical experiences should the student be called upon or used to substitute for regular clinical or administrative staff.** If a situation arises where a student is asked to perform in a role other than that of the student or to substitute for a staff member, the student should contact the program immediately for guidance. {A3.04} {A3.05}

### Cell Phones and Social Media

Students will turn all electronic communication devices (cell phones, tablets, etc.) off, on vibrate or in silent mode while at clinical sites. Use of social media (Facebook, Instagram, etc.) is **not** permitted while at the clinical site. Students are prohibited from recording, discussing, uploading, sharing, or transferring any data, images, videos or any information related to their clinical experiences without the express written permission of the clinical site and patient if applicable. Students are required to comply with site policies regarding the use of cell/smartphones within the facility.

Preceptors must approve student use of cell phones, tablets, and/or use of the facility site computer for clinical site work or academic requirements. Students **are not** to document encounters into CORE during the clinic hours unless approved by the preceptor. Any reported violation of this rule will result in review by the DCE and may lead to an

Unprofessional Conduct Citation. If there are subsequent incidents, the student will be referred to the SPC for disciplinary measures.

### Clinical Setting {A3.01}

#### Identification in the Clinical Setting {A3.06}

**Proper identification must be clearly displayed identifying that the student is a Naz Physician Assistant Student. Naz PA Student ID badges must be worn at all times, as it distinguishes students in the clinical setting from other health profession students and practitioners.** The professional ID badge must be worn so that it is easily readable by patients and hospital/clinic personnel. ID badges must not be obscured or altered in any manner except as determined by clinical necessity, (e.g. special stickers for newborn nursery access). White coats must be worn as a part of each clinical rotation, unless otherwise instructed by the preceptor onsite.

#### Attire at the Clinical Site

Physician Assistant students are expected to adhere to a professional business attire dress code that reflects the standards of the healthcare environment. Please refer to the Dress Code Policy in the PA Program Student Handbook of Policies & Procedures for more information.

### Attendance Policy

PA student attendance and promptness is considered an aspect of professional responsibility and individual dependability.

#### Absence During the Clinical Year

Regular clinical rotation and callback attendance *is essential to student success*. As such, attendance is required for all callback days, scheduled rotation hours and when requested while on call. **The work schedule will be determined by the preceptor or their designee and may include evenings and/or weekends hours.** University holidays do not apply in the clinical year.

Students are not permitted to arrive late to a rotation or leave early without the permission of their preceptor and documenting the reason for shortening their day on the time log. Promptness is another professional trait the healthcare practitioner must display. Students are expected to arrive on site on time, preferably 5-10 minutes early. Repeated tardiness is considered unprofessional conduct and may be reflected in your professionalism score from your preceptor.

**For emergent absences, students must notify the DCE and clinical preceptor as soon as possible.**

### Excused Absences

Each student is allotted three (3) discretionary days for the clinical year. The program encourages students to use those days for necessary appointments or employment interviews. Discretionary days during the clinical year are limited to one per rotation and may not be used during callback days.

A Request for Time Off Form (Appendix D) must be submitted to the DCE two weeks in advance for a scheduled event or within 24 hours for an emergent event to be considered for approval. Absences exceeding the allotted discretionary days may be approved for specific circumstances (e.g. illness, jury duty, death of an immediate family member). Approval is at the discretion of the DCE. Unapproved absences are considered unexcused. Unexcused absences, repeated tardiness or leaving early are violations of our Professionalism Policy and may result in a lowered professionalism score by the preceptor, a review by the DCE, an Unprofessional Conduct Citation and/or referral to the SPC for disciplinary measures.

For absences exceeding three (3) days in the clinical year, students will be required to make up the missed time. If this cannot be achieved at the current clinical site, the program may require the student to complete an additional rotation. Students with prolonged illnesses or other personal issues that result in multiple absences should consult with the DCE regarding taking a leave of absence.

### Absence from Assessment, Reassessment, and Remediation Periods

A student who must miss an exam due to illness must contact the course instructor and DDE or DCE by email and/or phone (preferably before the exam or as soon as possible); seek treatment from a healthcare provider and provide documentation of illness from the healthcare provider. By starting an exam, a student affirms that they are well enough to take the exam, and the exam will count in the student's grading. Requests for make-up exams for reasons other than illness must be approved by the course instructor in writing, prior to the original exam date.

If an absence from a scheduled assessment or reassessment is documented with a healthcare provider's note, the make-up assessment will be arranged by the DDE or DCE. If the student is unable to participate in a team assessment, the student will not be entitled to receive team points on any makeup assessment.

Working with the student, the DDE or DCE will arrange for the student to take the assessment as soon as possible following the student's return. Efforts will be made to schedule the makeup assessment so that it does not jeopardize the student's performance on other scheduled assessments when possible. The date and time of the makeup assessment will be communicated to the Program Director and the student; and can be scheduled for outside of regular hours. Failure to adhere to the approved makeup date and time will result in a zero for the exam and no further make-up accommodation will be given

for any reason unless approved by the Program Director. Exam “No Shows” are violations of our Professional Policy and if repetitive can result in an Unprofessional Conduct Citation.

Refer to the PA Student Handbook of Policies & Procedures for the complete Attendance Policy.

### Inclement Weather

The Naz policy on inclement weather *does not apply* to rotation sites as they are off campus. The student must follow the policies of the clinical rotation site regarding attendance during inclement weather and is responsible for exercising their own judgment concerning whether road conditions are safe enough for travel to the clinical site. The student is advised to discuss the inclement weather policy for the assigned rotation site with the preceptor during onboarding at the start of the rotation. If the student decides against attending a clinical site because of inclement weather, the student must notify the preceptor and the Director of Clinical Education by email as soon as possible.

If weather conditions during Callback Days are uncertain, students should check for an email from the Director of Clinical Education on the status of the callback. There may be an occasion when an individual will have issues due to road conditions. As with anything, use your best judgment before you set out to travel. If you are on call and have a distance to travel, arrange for accommodation near the clinical site prior to your on-call shift.

Refer to the PA Student Handbook of Policies & Procedures for more details on the Inclement Weather Policy related to in-person activities.

### Counseling, Health and Wellness {A3.10}

The Clinical Year is an intensive and rigorous program of experiential learning. The program requirements can be highly demanding and stressful, alone or in combination with other events in a student’s personal life. We strongly encourage students to utilize the resources available to them such as Student Health Services. The link is: <https://www2.naz.edu/health-and-counseling/>.

In addition, the university offers counseling services, both on-campus and online. Services available include individual counseling, crisis assistance and support groups. All services are confidential. The link is <https://www2.naz.edu/health-and-counseling/counseling-services>.

Please refer to the PA Program Student Handbook of Policies & Procedures for more information.

## Drug and Alcohol Policy

Please refer to the PA Program Student Handbook of Policies & Procedures.

## Physician Assistant Program's Standards of Professional Conduct

Nazareth University and the Physician Assistant Program expect each student to exhibit integrity, honesty, professionalism and good moral character. The program expects all students to conduct themselves in a professional manner at all times, both inside and outside of the program. As representatives of Nazareth University and future health care providers, behavior unbecoming a professional student will not be tolerated. Physician Assistant students must always display respect for all individuals, including program faculty, staff and students, as well as clinical mentors, preceptors and patients. Students displaying unprofessional behaviors will be cited for unprofessional conduct. Students with subsequent unprofessional conduct will be referred to the SPC for disciplinary measures.

## Clinical Code of Conduct Policy

The Director of Clinical Education or designee will be charged with the responsibility of promptly investigating alleged infractions of this code.

The following code of conduct will guide the ethical behavior in hospitals, community clinics, research and production facilities, and various rotation sites. We feel that the magnitude of our responsibility as healthcare professionals necessitates the establishment of the highest standards of professional conduct.

### Respect and Concern for the Welfare of Patients

The student will:

- Treat patients and their families with respect and dignity both in their presence and in discussions with others.
- Recognize when one's ability to function effectively is compromised and ask for relief or help.
- Recognize the limits of student involvement in the medical care of a patient and seek supervision or advice before acting when necessary.
- Not use alcohol or other drugs in a manner that could compromise themselves or patient care.
- Respect for the rights of others.

The student will:

- Deal with professional, staff and peer members of the health care team in a considerate manner and with a spirit of cooperation.
- Act with an equal spirit toward all persons encountered in a professional capacity regardless of race, religion, gender, sexual preference, age, national origin, physical disability, marital status, political affiliation, or socioeconomic status.
- Respect the patient's modesty and privacy.

### Trustworthiness

The student will:

- Be truthful in communication to others.
- Maintain confidentiality of patient information.
- Admit errors and not knowingly mislead others to promote oneself at the expense of the patient.
- Not represent themselves as a Physician, Physician Assistant, or other health professional.
- Accurately acknowledge the sources for all information reported. Failure to do so will be considered plagiarism.

### Responsibility and Sense of Duty

The student will:

- Participate responsibly in patient care or research to the best of their ability and with the appropriate supervision.
- Undertake clinical duties and persevere until they are complete.
- Notify the responsible person if something interferes with their ability to perform clinical or academic tasks effectively.

### Professional Demeanor

The student will:

- Maintain a neat and clean appearance, and dress in attire according to the dress code policy.
- Be thoughtful and professional when interacting with patients and families.
- Strive to maintain composure during times of fatigue, professional stress, or personal problems.
- Avoid offensive language, gestures, or inappropriate remarks.

*NOTE: The standards of clinical conduct are based on the Code of Conduct for Duke University Medical Students and have been adapted to meet the individual needs of the Nazareth PA Program.*

Students who validly hold other professional licenses/titles such as a Ph.D., International Medical Graduates, Respiratory Therapist, Laboratory Technician, Licensed Practical Nurse or Registered Nurse may **neither** function in those capacities **nor** utilize these titles in spoken or written communications while enrolled in the Physician Assistant Program.

Students shall not misrepresent their status as students by identifying themselves as anything other than a Physician Assistant Student, nor shall they allow their patients to misrepresent them as a graduate Physician Assistant or Physician.

Students found in violation of these guidelines may be issued an Unprofessional Conduct Citation. When issued an Unprofessional Conduct Citation, each student will be given an opportunity to defend their position regarding the matter. The DCE may recommend counseling, referral and/or education to prevent subsequent episodes of unprofessional behavior; formal sanctions; or immediate dismissal from the Physician Assistant Program depending on the severity of the violation. An issued second violation is an automatic referral to the SPC, and, if upon further review, to the Office of Student Conduct.

## Professionalism Policy

All Naz PA students share the following responsibilities: to read, become acquainted with, and adhere to the Nazareth PA Program Student Handbook and the [University Student Handbook](#); to respect personal and property rights of others, and to act in a responsible manner at all times, on or off campus; to protect and foster the intellectual, academic, research, cultural, and social missions of the university; and, to observe the laws of local, state and federal government agencies.

Please refer to the PA Student Handbook of Policies & Procedures for more information about the Professionalism Policy.

## Student Mistreatment (A3.15f)

If a student encounters mistreatment while on clinical rotation or from a preceptor even while not physically at the clinical site (e.g., through written communications such as text messages or emails), the student must contact the Director of Clinical Education immediately. Student safety – emotional, mental, and physical – is a priority for the program and may warrant the student being directed to leave the site (see *Personal Security and Safety* Section in the Clinical Education Year Handbook, and policies in the PA Program Student Handbook of Policies & Procedures regarding *Safety and Security*). If the allegation is sexual in nature, the Title IX Coordinator for Nazareth University will be contacted by the program for investigation and advisement.

*Note: For policies and procedures related to allegations of student mistreatment, misconduct, harassment (A1.02j) (including sexual harassment), Title IX, and grievances, refer to the Naz PA Program Student Handbook of Policies & Procedures and University policies and procedures located on the Naz website.*

## Academic Integrity and Copyright Laws

Per Nazareth University's Policy on Academic Integrity, **students are not permitted to share information about an examination with other students who have not yet taken the examination.** Any student found in violation of this policy will be reported to the Student Progress Committee (SPC) initially, and then after further review, the violation may be presented to the Office of Student Conduct.

## PAEA Exams

All PACKRAT, End of Curriculum and End of Rotation examinations content is protected by the federal Copyright Act, 17 U.S.C. § 101, et seq. Access to all such materials, as further detailed below, is strictly conditioned upon agreement to abide by PA Program's rights under the Copyright Act and to maintain examination confidentiality.

These examinations are confidential, in addition to being protected by federal copyright and trade secret laws (PAEA). **Students who undertake examinations agree that they will not copy, reproduce, adapt, disclose, or transmit examinations, in whole or in part, before or after taking an examination, by any means now known or hereafter invented. They further agree that they will not reconstruct examination content from memory, by dictation, or by any other means or otherwise discuss examination content with others.** Students further acknowledge that disclosure or any other use of its content constitutes professional misconduct and may expose them to criminal as well as civil liability, and may also result in the PA Program's imposition of penalties against them, including but not limited to, invalidation of examination results, exclusion from future examinations, suspension and de-matriculation.

Please refer to the PA Student Handbook of Policies & Procedures for more information about the Academic Integrity Policy.

If an instructor believes that a student has violated any standard of the academic integrity policy, it is the instructor's responsibility to report this behavior to the Student Progress Committee (SPC) through the Academic Dishonesty Procedures as described in the PA Student Handbook of Policies & Procedures.

## Grievances and Appeals {A3.15g}

Refer to the PA Program Student Handbook of Policies & Procedures.

## Student Assessment, Evaluation, and Grading {A3.15} {B4.01}

### Academic Standards {A3.15a}

Please refer to the PA Program Student Handbook of Policies & Procedures for the academic standards across the didactic and clinical years.

## Clinical Rotation Assessments

### Prerotation Diagnostic Script Assignment

- Five (5) rotation specific diagnostic scripts are required to be completed and will account for 5% of the overall course grade. The completed scripts are due in Moodle by 11:59 pm the Sunday prior to the start of the rotation.



- Each student will be assigned five diagnoses or presenting concerns. A diagnostic script is an organized manner to gauge and assess holistic knowledge about a particular disease. It will include content areas of a specific disease that will enable a student to better gauge, organize, and compile the salient information about a disease that will be tested. Components include diagnosis, enabling conditions, pathology of diagnosis, clinical consequences and management. The assigned topics, instructions, criteria, expectations, and grading rubric are available in the course syllabus.
- If a student fails the assignment, they will present before their faculty instructor to address their performance.
- Late submissions will negatively impact the professionalism grade. Please refer to the professionalism rubric found on the course syllabus for additional details.

#### Written Clinical Note Assignment

- A written clinical note is required for each rotation course and will account for 10% of the overall course grade. This assignment will be due at 11:59 pm on Sunday of week 1 of the rotation.
- Please refer to the course syllabi for the rotation specific assignment requirement.
- This assignment will be due at 11:59 pm on Sunday of week 1 of the rotation. Late submissions will negatively impact the professionalism grade. For more details on specific graded components, please refer to the professionalism rubric found on the course syllabus. Only the first submission will be graded. It is expected that the note will be generated de novo (from scratch), involving an actual patient encounter experience and be free from any patient identifiers. Any evidence of copying and pasting or templating will result in a 0 for the assignment. Please refer to the rubric for specific grading criteria (found on the course syllabus).
- If a student is scheduled for a site visit during their rotation (refer to Site Visit below), the Written Clinical Note Assignment will account for 5% of the course grade, with the Site Visit accounting for the other 5%.

#### Site Visit

- The students will be visited by a member of the PA program faculty twice for a grade, during the clinical phase to assess the student's clinical acumen. This visit could occur remotely or in person and will be coordinated by the program. The student will be notified prior to the start of the rotation if they are scheduled for a site visit within that upcoming rotation block and additional details regarding scheduling.
- During the site visit, the PA student will orally present a patient case to the site visitor, demonstrating their ability to organize and communicate clinical information effectively. The student will engage in an evidence-based discussion related to the medical management of the case, integrating relevant current research and

guidelines. This will assess the student's clinical reasoning, medical knowledge, and ability to apply evidence-based medicine in patient care.

- The initial site visit will occur within the first semester of the clinical phase. The faculty member will determine how well the student has integrated into the clinical environment. Please refer to the site visit rubric for additional details and grading (found in the course syllabus).
- The second visit will occur during the second or third semesters of the clinical year. The faculty member will assess the student's progression during the clinical phase.
- If there is any concern regarding the student's transition or progression, additional site visits will be scheduled throughout the clinical year. Additional site visits will not be graded.
- If a student fails the graded site visit(s), receiving a 75% or less, the student may have additional site visits scheduled. The student may also be referred to the Student Progress Committee.
- The site visit will account for 5% of the course grade if scheduled, reducing the Required Written Clinical Note Assignment to 5% (if no site visit is scheduled, the Required Written Clinical Note Assignment will account for 10% of the overall course grade).

#### Review Questions

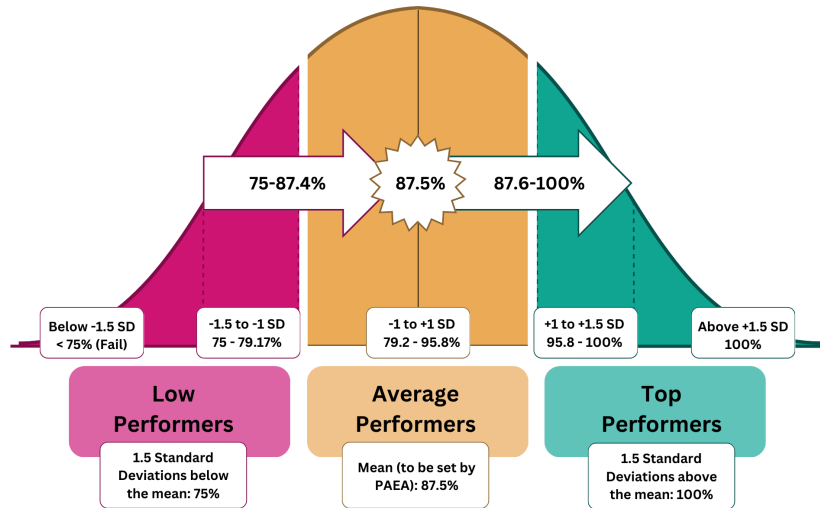
- Review Questions assigned via ©Blueprint, designed to practice for the End of Rotation exam for the designated discipline must be completed by 11:59 pm Sunday of week 4. This assignment will account for 10% of the rotation grade. This will be graded on a pass or fail basis. Students must complete this exam in order to obtain credit. Completion of the exam will result in a pass, failure to complete will result in a failure. Failure to complete these review questions may prompt a referral to the Student Progress Committee for possible disciplinary action.

#### End of Rotation Exam (Core Rotations only)

- The Physician Assistant Education Association (PAEA) End of Rotation™ (EOR) Examination is worth 30% of the overall grade. The examination blueprint and topic list is found on the [PAEA website](#) and in the Topic List of the syllabus.
- The exam consists of two separate 60-minute blocks, each with 60 multiple choice questions, for a total of 120 questions. There is an option to take up to a 15-minute break in between the two sections.
- The exam will be scheduled for 8:00 am on Thursday of week 5. The exam will be taken in-person and proctored by the PA Program. The student signs into SecureClient and enters the Keycode, supplied in their confirmation email, to start their exam.
- In order to successfully pass this exam, the student must score at or above 1.5 standard deviations (SD) below the raw score comparative national data mean. The scaled score that is received from PAEA after completion of the exam, will be

converted to a percentage which will be used in the rotation grade calculation as defined below:

**Physician Assistant Education Association (PAEA)  
End of Rotation (EOR) Examination™**



- Student grades will be determined by converting the scaled score into a percentage as above, with intermediate scores calculated proportionally.
- A student who scores between 1.0 and 1.5 SD below the raw score comparative to the national data mean is considered “at risk.” Students deemed “at risk” as defined above should consider evaluating their study methods to ensure future success and will be provided with supportive intervention.
- Students who receive a score of less than 1.5 SD below the national average have not successfully passed the exam. Those students will meet with the course instructor, and the Director of Clinical Education as necessary, for remediation. After remediation interventions are completed within a given timeframe, the student will complete a Make-Up EOR exam. Only the initial examination score will be calculated as 30% of the final rotation grade. If a student fails (score less than 1.5 SD below the national average) the Make-Up Examination, the remediation is not considered successful.

*Unsuccessful remediation outcomes result in failure of the course and prompt a written referral to the SPC for review and recommendation of appropriate actions, which may include, but are not limited to, repeating the course, deceleration, or dismissal from the program. Additionally, an academic improvement plan, a professionalism improvement plan, and/or referral to support services may be implemented.*

**Elective Case Presentation (Elective Rotations only)**

- The elective case presentation is worth 30% of the overall grade and will evaluate the student’s ability to present a comprehensive and detailed case presentation for

a patient encountered during their clinical elective rotation. The student will demonstrate their critical thinking, clinical reasoning and ability to communicate effectively with an audience, which includes faculty and invited student peers. The presentation is to last no longer than 15 minutes. The presentation slides will be due week 5 Wednesday at 11:59 PM. If the presentation slides are late, points on the professionalism grade will be deducted. The presentation will be scheduled by the program during the final week of the rotation. Refer to course syllabus for rubric.

#### Mid-Rotation Student Evaluation

- This formative evaluation assignment will be a self-reflection of a student's performance on the first half of their rotation. This assignment will be pass or fail. If a student submits the self evaluation by 11:59 pm on Sunday of week 2, they will receive full credit. Late submissions will negatively impact the professionalism grade. Please refer to the professionalism rubric (found on the course syllabus) for additional details.
- The assignment will allow the student to identify areas where they are performing well and areas where they need to improve. This assignment will be completed by the student and entered into CORE. The primary preceptor will sign off on the completed assignment, confirming acknowledgment and the opportunity to provide additional feedback to the student and program.
- If a preceptor identifies that a student is at risk for failure of any component of the evaluation, the program should be notified immediately. The student, instructor of record and the Director of Clinical Education will meet to develop an individualized support plan.

#### Preceptor Final Evaluation of Student's Clinical Performance

- The preceptor grade will constitute 25% of the rotation grade. This summative evaluation will be compiled and completed by the lead preceptor through CORE ELMS with the conclusion of the rotation. The preceptor will evaluate the student's performance on the expected student learning outcomes. This is a non-compensatory evaluation, meaning that the student must receive a satisfactory score for all evaluation sections to successfully pass the course and complete the rotation.
- The preceptor final evaluation will be graded using the Preceptor Final Evaluation of Student's Clinical Performance (found on the course syllabus). The preceptor will not issue the student final grade, but the program will convert the preceptor's completed evaluation of the student to a grade based on the below scoring criteria below:

Score	Description
N/O	Not Observed – The behavior or skill was not observed during this clinical rotation.
1	Novice– The student demonstrates limited skill or knowledge and requires significant improvement. (0%)
2	Developing– The student demonstrates some skill or knowledge, but there are consistent gaps or areas for improvement. (60%)
3	Competent– The student demonstrates an adequate skill or knowledge, meeting the basic requirements and expectations. (75%)
4	Proficient – The student demonstrates above-average skill or knowledge or proficiency, with few areas for improvement. (87.5%)
5	Exceptional – The student demonstrates outstanding skill or knowledge, consistently performing at a high level with little to no areas for improvement. (100%)

- A student must meet a minimum score of 3 (Competent) or a 75% or above on each component of the evaluation to pass. A student must also meet an overall score of 75% or above to pass the final evaluation.
- If a student does not meet a minimum score of 3 (Competent) or 75% on any component of the evaluation, they are required to meet with the faculty instructor of record and the Director of Clinical Education. See specifics below:
  - For any learning outcome assessed as "N/O" (Not Observed), the student will be required to demonstrate this competency/skill. This may include but is not limited to additional hours at a clinical site, practical exam, simulation. The student would then be assessed for competence in the learning outcome.
  - Any learning outcomes assessed as a 1 (Novice) or a 2 (Developing) will require remediation and subsequent reassessment. Remediation may include but is not limited to additional assignment(s), supplemental learning material, additional clinical hours. Reassessment may include but is not limited to practical exam, simulation experience, preceptor re-evaluation.
- Students are required to acknowledge the receipt of their final evaluation through CORE.

*Unsuccessful remediation outcomes result in failure of the course and prompt a written referral to the SPC for review and recommendation of appropriate actions, which may include, but are not limited to, repeating the course, deceleration, or dismissal from the program. Additionally, an academic improvement plan, a professionalism improvement plan, and/or referral to support services may be implemented.*

## Objective Structured Clinical Examinations (OSCE)/Objective Structured Assessment of Technical Skills (OSATS)

### OSCE

- This “hands-on” examination is specifically designed to test the PA student’s clinical competence, interpersonal skills and professionalism through a case-based patient-provider clinical encounter that will involve a combination of history and physical examination, interpretation of diagnostic data, clinical reasoning, documentation of care, and development of a management plan. Professional attire, including a white coat and name badge, is required. Please note that special effort is made to attempt the focus of each scenario and question based assessment on the rotation-specific perspective.
- The OSCE will be graded using the OSCE rubric (refer to the course syllabus). Each individual component must be passed including an overall score of 75%. If an individual component is not passed, less than 75% in that section or if the overall score of the evaluation is less than 75%, the student will meet with faculty and develop a remediation plan and the component of failure will be reassessed by another OSCE scenario.
- If the student fails the critical thinking and problem solving component of the OSCE, they may have to repeat another OSCE scenario in its entirety, but will only be evaluated on the portion in which they were unsuccessful at completing.

*Unsuccessful remediation outcomes result in failure of the course and prompt a written referral to the SPC for review and recommendation of appropriate actions, which may include, but are not limited to, repeating the course, deceleration, or dismissal from the program. Additionally, an academic improvement plan, a professionalism improvement plan, and/or referral to support services may be implemented.*

### OSATS

- This structured examination will assess the PA student’s competence in specific technical skills. The OSATS will be graded using the OSATS rubric (refer to course syllabi). If a student fails, receiving <75%, the student will meet with faculty and develop a remediation plan and will be reassessed by a repeat OSATS.

*Unsuccessful remediation outcomes result in failure of the course and prompt a written referral to the SPC for review and recommendation of appropriate actions, which may include, but are not limited to, repeating the course, deceleration, or dismissal from the program. Additionally, an academic improvement plan, a professionalism improvement plan, and/or referral to support services may be implemented.*

## Professionalism

- The professionalism portion of the course grade accounts for 5% of the overall grade. Professionalism will be a pass/fail grade. Students will be evaluated using the Professionalism Rubric (refer to the course syllabus).
- If the student fails the professionalism portion of the course grade, the student will present before the Student Progress Committee for an individualized remediation plan.
- Components of professionalism includes, but is not limited to:
  - Attendance and Punctuality : Arrival to site on time, preferably 5-10 minutes early. No unexcused absences. Attendance at In-person Callback Days.
  - Participation and Engagement
  - Professional Dress
  - Ethical Behavior
  - Attitude and Demeanor
  - Responsibility and Accountability : Timely and accurate logging (patient logging, attendance logging, Time Off Form(s) and Exposure Form (as applicable)). Completing minimum rotation hour requirement. Timely completion of student site and preceptor evaluations. Timely completion of all assignments, mid rotation evaluation, review questions and EOR.
  - Teamwork and Collaboration
  - Communication
  - Emotional Maturity and Stress Management

## Required Non-Assessed Student Responsibilities

The following components are non-graded, but required. Failure to complete these assignments prior to the end of the clinical rotation will result in a lowered professionalism grade, a course grade of "IP" (In Progress) and may prompt a referral to the Student Progress Committee for possible disciplinary action. Once the assignments have been satisfactorily completed, the earned course grade will be rendered.

- **Patient Logs:** Students are required to log all patient encounters into CORE ELMS on a daily basis. This is essential for the program to ensure that the SCPE experiences enable students to meet the defined learning outcomes.
- **Attendance Log:** Students are expected to have preceptors sign off on days they are present in the clinic to mitigate student absenteeism from clinical rotation duties and exposure. Students are expected to be at their clinical site at least 184 hours for the duration of the clinical rotation, and no more than 80 hours per week. The delivery of health care occurs 24 hours a day. Student availability and flexibility in scheduling are expected. Depending on the rotation and site, requirements may include work on Saturdays, Sundays, evenings and/or overnight shifts. Students are expected to be on-call if required by the site. Students are assigned to preceptors and sites that have been thoroughly vetted to support the achievement of student learning outcomes, including the completion of at least 184 hours of required rotation time.

- **Student Evaluation of Preceptor:** Students are required to complete a student evaluation on the preceptor after each clinical rotation. Questions encompass the teaching effectiveness, and overall impression of the rotation preceptor.
- **Student Evaluation of Site:** Students are required to complete a student evaluation on the clinical site after each clinical rotation. Questions encompass the facilities, resources, and overall impression of the rotation site.

#### Assessment Schedule and Due Dates

Week/Day	Assignment	Due Date
0	Prerotation Diagnostic Script Assignment	11:59 pm Sunday prior to the start of rotation
1	Written Clinical Note Assignment	11:59 pm Sunday week 1
2-4	Site Visit (if applicable)	Scheduled by Course Instructor
2	Mid-Rotation Student Evaluation	11:59 pm Sunday week 2
4	Review Questions	11:59 pm Sunday week 4
5	End of Rotation Exam  OR  Elective Case Presentation	Scheduled for 8:00 am Thursday week 5 during In-person Callback Days  OR  Presentation slides due 11:59 pm Wednesday week 5. Student presentations scheduled starting at 8:00 am Thursday week 5 during In-person Callback Days.
5	Preceptor Final Evaluation of Student's Clinical Performance	11:59 pm Thursday week 5
In-person Callback Days	Discipline Specific OSCE/OSATS	At the completion of the rotation based on the schedule outlined in Appendix B



Evaluation Components: The overall course grade is based on the following components:

Evaluation	Percentage of Final Grade
Prerotation Diagnostic Script Assignment	5%
Written Clinical Note Assignment	10% (if site visit scheduled, 5%)
Site Visit	5% (if site visit scheduled)
Review Questions (Pass/Fail)	10%
Mid-rotation Student Evaluation (Pass/Fail)	5%
End of Rotation Exam */ Elective Case Presentation	30%
Objective Structured Clinical Examinations (OSCE)/Objective Structured Assessment of Technical Skills (OSATS)*	10%
Preceptor Final Evaluation of Student's Clinical Performance*	25%
Professionalism (Pass/Fail)	5%

Pass / Fail Components: **full credit will be given if passed; no credit for will be given if failed or incomplete.**

#### Remediation and Early Intervention - Clinical Year {A3.15c}

If a student initially scores <75% on the EOR exam, any component of the OSCE/OSATS, or any component of the Final Rotation Evaluation, they will be required to remediate and demonstrate competency on reassessment. All remediation eligible assessments will be noted by an asterisk (\*) above. Remediation outcomes do not alter the grade of the original assessment. If the reassessment is unsuccessful then the student will be referred to the Student Progress Committee. Please refer to the Remediation Policy in the PA Program Student Handbook of Policies and Procedures for more information.

## Grading Policy

Successful completion of the course requires a final calculated grade of at least a C and demonstration of competency on any assessment identified by an asterisk (\*). Student assessments and grades are NOT rounded. This includes course assessments and final course grades. For example, a grade of 73.99% is not rounded up to 74% and will remain as its original score. This is to promote standardization and equity amongst graded performance across the curriculum.

Please refer to the Nazareth University PA Program Student Handbook of Policies & Procedures for further details.

### **Clinical Rotation Course (SCPE) Failure**

Failing a clinical rotation course occurs from the following:

- Final course grade is < C
- Does not successfully remediate (if applicable) any assessment with an asterisk as noted in the course syllabus including but not limited to:
  - Fails to meet the minimum EOR pass score on 1<sup>st</sup> attempt *and* does not pass on the 2<sup>nd</sup> attempt
  - Fails to meet the minimum competency on Preceptor Final Evaluation *and* is unsuccessfully remediated

### **PA Program Requirements for Progression and Completion {A3.15b}**

Please refer to the PA Program Student Handbook of Policies & Procedures.

### **Academic Probation, Dismissal, Deceleration and Withdrawal {A3.15c,d}**

Please refer to the PA Program Student Handbook of Policies & Procedures.

### **Program Summative Evaluation {B4.03}**

The purpose of the Program Summative Evaluation is to evaluate a student's ability to meet the program competencies required to enter clinical practice, including clinical and technical skills, clinical reasoning and problem-solving abilities, interpersonal skills, medical knowledge, and professional behaviors. All assessment components will be administered within the final four months of the program and are tied to the PHA 516 course. To receive a passing grade for this course and final signatures for graduation, the student must pass all Summative Evaluation components. Please refer to the PA Program Student Handbook of Policies & Procedures for more information.

### **Clinical Preceptor Responsibilities {B3.07}**

The clinical preceptor is central to the clinical experience of the student. Along with the program, the preceptor plays an integral role in the educational process. The preceptor

must be a licensed healthcare provider and is responsible for the on-site supervision, assessment, and evaluation of the physician assistant student. The preceptor serves as a role model for the student, and guides and teaches the student to improve skills in history-taking, physician examination, effective communication, physical diagnosis, accurate and succinct documentation, reporting, problem assessment and plan development, including coordination of care.

While on rotation, the physician assistant student must be supervised in all their activities commensurate with the complexity of care being given and the student's own abilities. Rotations are designed to expose the physician assistant student to patient care in a variety of settings. The student shall be directly involved in the evaluation and management of patients to the extent that the clinical preceptor or supervisor is comfortable, based on the level of knowledge and skills of the physician assistant student.

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

- Orient, assess each student at the onset of the rotation with the practice/site policies and procedures, including safety and emergency policies and procedures.
- Review the expectations and objectives for the rotation.
- Provide ongoing and timely feedback to the student regarding clinical performance, clinical knowledge, skills, attitudes, behaviors, and critical thinking skills.
- Supervise, demonstrate, teach, and observe clinical activities to aid in the development of clinical skills and professionalism and to ensure high-quality patient care.
- Delegate increasing levels of responsibility based on a 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
  - Immediate evaluation of presentations (including both oral and written)
  - Assignment of outside readings and research to promote further learning
  - Demonstrate cultural humility in all interactions with patients, families, health care teams, and systems.
- Dialogue with faculty during site visits to evaluate student progress and assist the learning process.
- Review and add supplementary documentation to student notes to evaluate the student's clinical reasoning and documentation skills.
- Demonstrate an ethical approach to the care of patients by serving as a role model for the student.
- Complete and return the student evaluation forms to assess performance and improvement throughout the supervised clinical experience.
- Promptly notify the PA program of any circumstances that might interfere with student safety or wellness or accomplishing the above goals or diminish the overall experience.

### The Preceptor–Student Relationship

The preceptor and student should maintain a professional relationship in the clinical setting at all times and adhere to appropriate professional boundaries. Social activities and personal relationships outside the professional learning environment should be appropriate and carefully selected to avoid putting the student or preceptor in a compromising situation. Contact through web-based social networking platforms (e.g., Facebook, Instagram) should be avoided until the student fully matriculates through the educational program or completes the rotation where the supervision is occurring. Please consult with the director of clinical education regarding specific school or university policies.

### Orientation and Communicating Student Expectations

On the first day of the rotation (or, when possible, before the rotation), the student should take care of 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. The preceptor should provide a tour and orientation to the practice, which includes staff introductions, operating practices, scheduling system, medical records, and documentation systems. Additionally, emergency/safety procedures and preparedness, including, but not limited to the facility emergency plan, emergency evacuation routes, location of emergency eyewashes and other emergency equipment, and contact details for emergency services should also be reviewed. It is recommended by the program that these orientations, tours and reviews occur by the second day of the scheduled clinical rotation.

It is also recommended that the preceptor and student formulate mutual goals regarding what they hope to achieve during the rotation. The preceptor should also communicate their expectations of the student during the rotation.

Expectations can include:

- Hours
- Interactions with office and professional staff
- General attendance
- Call schedules
- Overnight and weekend schedules
- Participation during rounds and conferences
- Expectations for clinical care, patient interaction, and procedures
- Oral presentations
- Written documentation
- Assignments
- Anything else that the preceptor thinks is necessary

## Student Schedule

The preceptor determines the student's schedule. Students are expected to adhere to the preceptor's work schedule or student schedule assignment. Students are expected to be at their clinical site at least 184 hours for the duration of the clinical rotation, and no more than 80 hours per week. The delivery of health care occurs 24 hours a day. Student availability and flexibility in scheduling are expected. Depending on the rotation and site, requirements may include work on Saturdays, Sundays, evenings and/or overnight shifts. Students are expected to be on-call if required by the site. When a preceptor is seeing patients, it is expected that the student will be working as well.

Students are expected to communicate with preceptors any special scheduling needs that they might have during the rotation, particularly when they might be out of the clinical setting for personal reasons or program-required educational activities. Please consult the director of clinical education or clinical education assistant regarding specific school or university attendance policies.

## 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. Educational continuity should be maintained when using multiple preceptors. Although the supervising preceptor might not be with a student during every shift, it is essential to assign students to another MD, DO, or PA who will serve as the student's preceptor for any given time interval. Sharing preceptorship duties exposes students to important variations in practice style and feedback, which can help learners develop the professional personality that best fits them. If supervision is not available, students may be given an assignment or spend time with ancillary staff (x-ray, lab, physical therapy, etc.), as these experiences can be valuable. The preceptor should be aware of the student's assigned activities at all times.

Students are not employees of the hospitals or clinics and, therefore, work entirely under the preceptor's supervision. Students are not to substitute for paid clinicians, clerical staff, or other workers at the clinical sites. On each rotation, it is the student's responsibility to ensure that the supervising physician or preceptor sees all of the student's patients. The preceptor can provide direct supervision of technical skills with gradually increased autonomy in accordance with the PA student's demonstrated level of expertise. However, every patient must be seen, and every procedure evaluated before patient discharge. 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 that the student was supervised during the entirety of the patient visit. Laws for Medicare patients are slightly different in terms of what a student is able to document, and this 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 Regarding Student Involvement in Patient Care

The patients are essential partners in the education of PA students. All efforts will be made to observe strict confidentiality, respect patient privacy and dignity, and honor their preferences regarding treatment. All students must complete HIPAA training before their clinical year. However, patients must be informed that a PA student will participate in their care, and their consent must be obtained. Consent is given through standardized forms at admission or on a person-by-person basis. The students should be clearly identified as PA students and must also verbally identify themselves as such. If the patient requests a physician, PA, or other licensed clinician and refuses the PA student's services, the request must be honored. Patients must know that they will see their regular provider, and they should have an explicit opportunity to decline student involvement.

### Clinical Experience

Students should spend as much time as possible involved in supervised hands-on patient care activities by seeing patients with as wide a variety of complaints, diagnoses, and diverse backgrounds as possible at the given site to enhance their learning experience.

### Learning Objectives and Outcomes

Rotation syllabi contain learning outcomes and instructional objectives to guide student learning and to focus study efforts for the end-of-rotation exam. The program acknowledges that it is not possible for the site to expose the student to every condition on the topic list or to provide experience in all the clinical skills; however, the program does ask that the preceptor review the learning outcomes for the rotation. In any case, the student is responsible for all learning outcomes and instructional objectives.

### Assignment of Activities

The preceptor should assign the students to appropriate clinically oriented activities to include but not limited to obtaining patient histories and performing physical examinations; recommending, ordering and interpreting diagnostic studies; developing a treatment plan; providing patient education and counseling; performing clinical procedures; searching and reviewing medical literature; and preparing and delivering presentations on medical topics and patient cases. If the practice uses an electronic medical record system and the student does not have access to the system or if the system uses checklists predominately, the program encourages the preceptor to assign (and subsequently evaluate) written notes and/or additional case presentations to the student. Students must not substitute for regular clinical or administrative staff.

### Oral Presentation

On a regular basis, preceptors should have the student give oral presentations on the patients they encounter. Students may also be assigned journal reading and be asked to present medical topics or cases.

### Documentation

Preceptors must review and co-sign all student documentation and charting. If a student is unable to directly document on the patient's chart or enter the data in the electronic medical record (EMR), preceptors should require the student to write up a note outside of the EMR and then review it for accuracy and appropriateness.

### Teaching

The preceptor should allow time for teaching activities. This can be accomplished in a variety of ways such as structured teaching rounds, chart review periods, reading assignments, informal consultations between patient encounters, and/or recommending specific conferences. It is expected that the preceptor will model, expose students to, and teach in accordance with current practice guidelines and the accepted standards of care.

### Evaluation

The preceptor, or their designee, must observe and assess the student performing clinical functions, including documentation, on a regular basis and provide constructive verbal feedback to the student periodically over the course of the rotation. The preceptor may also be asked to give feedback on student performance to faculty members during site visits. The preceptor is responsible for signing off on the completed Mid-Rotation Student Evaluation, confirming acknowledgment and having the opportunity to provide additional feedback to the student and program. At the end of the rotation, the preceptor is responsible for evaluating the student's clinical skills, medical knowledge and professionalism using the designated forms. Receiving honest critique and constructive feedback is critical to the academic and professional progression of a student. If a preceptor identifies that a student is at risk for failure of any component of the evaluation, the program should be notified immediately.

### Problems

Preceptors and students should initially attempt to handle minor problems directly with each other; however, the preceptor should notify the director of clinical education or faculty instructor of record promptly of any circumstances that might interfere with the accomplishment of the items stated above or diminish the overall training experience. Additionally, if the student still feels there is a problem in the rotation (inexperience, personality conflicts, communication issues, ethical issues or inadequacy of learning opportunities), they should contact the course instructor of record or director of clinical education urgently.

### Vacation

On-site supervision is a critical component of the clinical experience; therefore, it is imperative for the preceptor to inform the program if they will be taking time off of one week or greater while supervising a student. Student supervision may be delegated to another licensed healthcare provider during the period of absence with program approval.

## **Program Responsibilities {B3.01}; {B4.01}; {B4.03}**

The program maintains the following responsibilities to ensure the educational environment and activities during the clinical phase of the program.

### **Preparation**

The program prepares the students adequately for their clinical experiences.

### **Assignment**

The program is responsible for assigning students to clinical sites that will provide a quality learning experience.

### **Site Objectives and Rotation Syllabi**

The program provides instructional objectives and learning outcomes for each rotation to the student and preceptor as a guide of expected rotation experiences. Clinical experiences may vary depending on patient population and site variation. It is the student's responsibility to review the objectives and augment clinical experiences with independent study, research and discussion with the preceptor and clinical faculty.

### **Affiliation Agreements**

The program develops and maintains affiliation agreements with all clinical sites.

### **Clinical Sites and Preceptors**

The program maintains ongoing efforts for acquisition and retention of clinical sites and preceptors. Preceptors and sites are vetted and follow a maintenance schedule for meeting qualifications and required certifications/licensure for serving as instructional faculty. Sufficiency of clinical sites is evaluated based on the max approved class size and cohort overlap.

### **Insurance**

Students are covered under the University's malpractice insurance ONLY for those preceptors and rotations the program has assigned for them. The University's malpractice insurance WILL NOT cover students who shadow clinicians at sites or in departments that are not assigned to them and are in violation of program rules.

### **Grading**

The program is responsible for assigning a final grade to every student for all courses. The grading plans are detailed in the course syllabi.

### **Problems**

The program interacts with all preceptors, sites, and students and is available to respond to any problems or concerns. In addition, should problems arise at the clinical site, the program retains the right to remove a student from rotation.



### Health and Safety

The program will work with the preceptor and site to ensure a healthy and safe clinical learning environment. Preceptors must notify the program immediately of any student whose actions directly or indirectly jeopardize the health and safety of patients, faculty, clinical site staff, or fellow students. The program retains the right to immediately remove the student from a clinical rotation if such behavior occurs.

The program provides and ensures that each student has completed training in HIPAA and OSHA prior to beginning clinical rotations and that all students have received instruction regarding risk of exposure and reporting procedures should an exposure occur.

### Background Checks, Fingerprinting and Drug/Alcohol Screens

The program requires background checks on all PA students prior to their matriculation to the program. Students are informed that additional background checks or testing, including drug and alcohol screening or fingerprinting, may be required by a clinical site. Students are responsible for the cost of any additional screening. The administrative staff of the department will assist students in where to have fingerprinting done. Refer to the PA Program Student Handbook of Policies & Procedures for more information.

### Academic Advisors

All students will be assigned to a faculty academic advisor during the clinical year.

### Revision of Clinical Year Policies and Procedures

The program reviews these policies and procedures at least once a year and revises them as needed. The program reserves the right to make changes to all aspects of this Clinical Education Handbook at any time. The program notifies students and provides copies of any substantial changes. Students are expected to remain current on all policies and procedures.

## **Getting the Most Out of your Clinical Rotations**

The program has prepared your preceptors for their role. We have contacted each of your preceptors and discussed their responsibilities, the role of a PA student, the objectives of your rotations, and the evaluation guidelines.

How do you ensure, as much as possible, that you get the most out of your clinical experience? Preceptors inevitably test their students: How serious are you about your education? How much initiative are you willing to take? Do you expect to be spoon-fed? Do you demand constant direction to meet your educational goals? During a short four-week three-day rotation, in a busy clinical environment, the preceptor usually will not get to know you in depth, so first impressions concerning your assertiveness and responsibility for your own education are very important. Obviously, for some students this is more

difficult to learn and do than for others. However, it is an invaluable and necessary skill.

- *On day one, review your learning objectives with your preceptor:* State what educational background and experience you already have, your strengths and weaknesses, and areas on which you would like to focus.
- *Continue to review your learning objectives:* It may be useful to review your objectives with your preceptor two or three times during the rotations. If there are skills or conditions you are not familiar with, point out that you would like to focus on those areas where possible within the scope of the practice.
- *Organize your own seminar series with your preceptor:* For example: "Dr. /Mr. / Ms. \_\_\_\_ I'm still confused about the treatment for "X". Tonight, I plan to read up on "X". Tomorrow, can we take ten minutes to answer some questions I might have? Can you suggest some good articles for me to read?"
- *Ask questions:* Clinical instructors need to know that you are interested in learning. Asking questions is the primary way the preceptor measures your initiative and your involvement in your education. However, make sure you ask questions at appropriate times. Ask your preceptor to identify suitable times for you to ask your questions.
- *Do not be confrontational:* Your preceptors are providing their clinical expertise. You are in a clinical setting to learn. If you have an ethical concern, politely present it to your preceptor. If you do not feel comfortable with the outcome of the conversation, call the DCE.
- *Take advantage of resources within the facility:* Consider asking your preceptor if you can spend time with a specialist who seems particularly interested in teaching: radiologists, gastroenterologists, pulmonologists who have consulted your patient. Ask to spend an afternoon in the lab reading U/A's and CBC's or with a nurse putting in IVs, find out what conferences are available and attend them, etc.
- *Read daily:* You may be asked to attend and participate in conferences or present on assigned topics during your rotations. Also, remember that it is your responsibility to read and fill in the gaps between what you see at the site and the objectives on which you'll be tested. It is not possible for a clinical site to provide you with experiences for every objective.
- *Seek out the interns, residents, and medical students:* When you work in a teaching hospital you'll often be in contact with residents, interns, and 3<sup>rd</sup> and 4<sup>th</sup>-year medical students. Seek out the help and advice of some of these individuals. Often you'll find someone who's interested and good at teaching. Often there will be a classmate in the same facility. Share exciting cases with each other.
- *Do other "work":* Start IV's, get lab test results, find lost charts, and arrange for patient transportation. This will save time for your preceptor and help make their life easier in return for all the extra time they spend teaching you. It will also show them that you can work as a team player. Be especially nice and polite to nurses, secretaries, clerks, and housekeeping staff. Nurses can become vital allies. Secretaries and clerks know the paperwork system and can save you much time in

locating forms, charts, and lab work. As for housekeeping staff, you may not need their help often, but you will be eternally grateful to the person who can arrange a rapid clean-up when some sort of mess occurs because of an ill patient.

#### Knowing your Limitations

- Students must be aware of their limitations, and of the limitations and regulations pertaining to the Physician Assistant profession. **Students must seek advice when appropriate and must not always evaluate or treat patients without direct supervision from and access to a supervising preceptor. When in doubt, ask for help.** At no time is a student permitted to make any decisions on medical care on any patient. This means that you should not be admitting or discharging or changing treatment plans without permission from your preceptor. All such documentation must be documented in the chart. **Students must follow clinic institutional policies about co-signing orders/progress notes/H&P/discharge summaries.** If an entity does not have such a policy, the student needs to discuss the parameters with the preceptor of record regarding the timeliness of the co-signing of the records. EVERY MEDICAL DECISION SHOULD BE APPROVED BY THE PRECEPTOR OF RECORD OR THEIR DESIGNEE.
- Don't forget the standards we taught you: You will be exposed to many variations on the theme of physical examinations, including shortcuts, omissions, and legitimately different approaches. **Remember the way we instructed you and before you omit - think.** Reason through what information each part of the physical examination gives you before leaving out parts of the exam solely to speed up. If you omit an exam element, it should be because it is not necessary, not because you forgot it or don't know it. There are acceptable ways to speed up and streamline techniques. When in doubt, talk to your preceptor. Besides maintaining your technical proficiency, you must continue to master full and directed physical examinations. To do this effectively, you must have a good knowledge base in pathophysiology, and you must practice the thinking process for a wide variety of patient problems. We will continue to work with you on these skills on Callback Days (explained earlier in the Clinical Education Handbook) to strengthen your thinking process, but the burden to practice lies solely with you. It is up to you to develop, maintain, and broaden your knowledge base in medicine.

#### Student Resources

Please refer to the Naz PA Program Student Handbook of Policies & Procedures for available resources for students.



NAZARETH UNIVERSITY

**PHYSICIAN ASSISTANT PROGRAM**

**Statement of Receipt and Acknowledgement of the Policies and Procedures {A3.02}**

I attest that I have received, read, fully understand, and agree to comply with all policies and procedures set forth in the **Nazareth Physician Assistant Program Clinical Education Student Handbook (2026-2027)**.

**I understand the following:**

1. I acknowledge that I have received and read the 2026-2027 Nazareth PA Program Clinical Education Student Handbook. I have had an opportunity to have any questions answered regarding its content. I agree to abide by the policies and procedures contained therein.
2. I have been made aware that, as a student enrolled in the Nazareth Physician Assistant Program, I am required to comply with the Program's policies on Health and Immunization, Student Health Insurance, and Criminal Background Checks.
3. I acknowledge that I must abide by the Academic Integrity Policy of Nazareth University.
4. I attest that I meet the Nazareth University PA Program Technical Standards.
5. I have also been made aware that I am bound by policies and procedures contained in the Nazareth University Student Code of Conduct and the PA Program Student Handbook of Policies & Procedures.
6. Failure to read the PA Program Student Handbook, the PA Program Clinical Education Student Handbook, or the Nazareth University Student Code of Conduct; or my lack of knowledge of the policies and procedures does not excuse me, the Program, or the University from adhering to the policies and procedures outlined in the handbook.

PA Student's Name: \_\_\_\_\_

PA Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**This form must be returned to the PA Department Assistant**



NAZARETH UNIVERSITY

PHYSICIAN ASSISTANT PROGRAM

### Appendix A ~ Class of 2027 Clinical Rotation Schedule {B3.07}

Rotation 1	Monday, January 4, 2027 – Wednesday, February 3, 2027
<b>Callback</b>	<b>Thursday, February 4, 2027 - Friday, February 5, 2027</b>
Rotation 2	Monday, February 8, 2027 – Wednesday, March 10, 2027
<b>Callback</b>	<b>Thursday, March 11, 2027 - Friday, March 12, 2027</b>
Rotation 3	Monday, March 15, 2027 – Wednesday, April 14, 2027
<b>Callback</b>	<b>Thursday, April 15, 2027 - Friday, April 16, 2027</b>
Rotation 4	Monday, April 26, 2027 – Wednesday, May 26, 2027
<b>Callback</b>	<b>Thursday, May 27, 2027 - Friday, May 28, 2027</b>
Rotation 5	Monday, May 31, 2027 – Wednesday, June 30, 2027
<b>Callback</b>	<b>Thursday, July 1, 2027 - Friday, July 2, 2027</b>
Rotation 6	Monday, July 5, 2027 – Wednesday, August 4, 2027
<b>Callback</b>	<b>Thursday, August 5, 2027 - Friday, August 6, 2027</b>
Rotation 7	Monday, August 16, 2027 – Wednesday, September 15, 2027
<b>Callback</b>	<b>Thursday, September 16, 2027 - Friday, September 17, 2027</b>
Rotation 8	Monday, September 20, 2027 – Wednesday, October 20, 2027
<b>Callback</b>	<b>Thursday, October 21, 2027 - Thursday, October 22, 2027</b>
Rotation 9	Monday, October 25, 2027 – Wednesday, November 24, 2027
<b>Callback</b>	<b>Monday, November 29, 2027 - Friday, December 3, 2027</b>

All clinical rotations are four-weeks and three-days in length. The student is required to work the schedule set by the preceptor. **Preceptors consist primarily of practicing physicians and PAs (B3.05).** The preceptor does not have to be just one person and a student may work with several different providers within one clinical site and the preceptor may be an MD, DO, PA, or other licensed healthcare provider qualified in the area of instruction.

**\*\***The following is a list of the 7 core rotations and 2 elective rotations in which each Naz PA student must complete.

- Family Medicine
- Internal Medicine
- Psychiatry
- Pediatrics
- Obstetrics & Gynecology
- Surgery
- Emergency Medicine
- Elective Rotation I & II



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PHYSICIAN ASSISTANT PROGRAM

## Appendix B ~ Class of 2027 Timeline for Clinical Year

Semester	Dates	Program Calendar
Fall I	TBA	All Clinical Year Requirements Due
	Dec 18	Clinical Orientation Day 5 of Fall I Callback Days
Spring II	Jan 4-Feb 3	SCPE Rotation #1
	<b>Feb 4-5</b>	<b>In-person Callback Days</b>
	Feb 8-Mar 10	SCPE Rotation #2
	<b>Mar 11-12</b>	<b>In-person Callback Days</b>
	Mar 15-Apr 14	SCPE Rotation #3
	<b>Apr 15-16</b>	<b>In-person Callback Days</b>
Summer II	Apr 26-May 26	SCPE Rotation #4
	<b>May 27-18</b>	<b>In-person Callback Days</b>
	May 31-Jun 30	SCPE Rotation #5
	<b>Jul 1-2</b>	<b>In-person Callback Days</b>
	Jul 5-Aug 4	SCPE Rotation #6
	<b>Aug 5-6</b>	<b>In-person Callback Days</b>
	TBA	Capstone Presentations (PHA 515)
	<b>TBA</b>	<b>PACKRAT II</b>
Fall II	Aug 16-Sept 15	SCPE Rotation #7
	<b>Sept 16-17</b>	<b>In-person Callback Days</b>
	Sept 20-Oct 20	SCPE Rotation #8
	<b>Oct 21-22</b>	<b>In-person Callback Days</b>
	Oct 25-Nov 24	SCPE Rotation #9
	<b>Nov 29-Dec 3</b>	<b>In-person Callback Days</b>
	TBA	PANCE Prep Course (PHA 516)
	<b>TBA</b>	<b>Summative Eval: EOC/OSCE II/OSATS II/PDAT II (PHA 516)</b>
	TBA	White Coat Ceremony



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## Appendix C - Student Injury or Exposure Form

This form is to be completed when there has been a student injury or bodily fluid exposure (i.e. needlestick) at a clinical rotation site and submitted to the Director of Clinical Education within 24 hours.

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Date and Time of Exposure: \_\_\_\_\_

Rotation: ☐ #1 ☐ #2 ☐ #3 ☐ #4 ☐ #5 ☐ #6 ☐ #7 ☐ #8 ☐ #9 ☐ #\_\_\_\_\_

Rotation Type: ☐ Family Medicine ☐ Emergency Medicine ☐ Internal Medicine, Inpatient  
☐ Surgery ☐ Pediatrics ☐ OB/GYN ☐ Psychiatry ☐ Elective (list): \_\_\_\_\_

Name of Site: \_\_\_\_\_

Name of Preceptor/Person Notified: \_\_\_\_\_

Date and Time of Notification: \_\_\_\_\_

Please provide a brief description of the incident, including how the exposure occurred and location (body part).

\_\_\_\_\_  
\_\_\_\_\_

Did you receive medical evaluation and/or treatment? ☐ Yes ☐ No

Did you notify the PA Program (DCE)? ☐ Yes ☐ No

Name of Person Notified at the Program: \_\_\_\_\_

Date, Time and Method of Notification: \_\_\_\_\_

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

Date

Director of Clinical Education Signature: \_\_\_\_\_

Date



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## Appendix D - Student Request (Clinical) for Time Off Form

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Requested Date(s) for Time Off: \_\_\_\_\_

Scheduled Rotation and Location: \_\_\_\_\_

Steps for Requesting Time Off:

- Requests for time off must be submitted to the DCE by specific deadlines.
- DCE will approve or deny time off requests for all absences outside of illness or emergency.

☐ **Student Illness or Emergency:** Students should immediately notify their preceptor directly. Students should speak with their preceptor whenever possible and utilize email and text message as a last resort. DCE also needs to be notified of absence. Students should submit the Request Form for Time Off within 24 hours. This will count towards students' discretionary days. For absences exceeding three (3) days in the clinical year, students will be required to make up the missed time.

☐ **Request to Attend an Interview:** All requests should be submitted at least 2 weeks in advance or as soon as possible. Students are expected to schedule interviews around your clinical obligations whenever possible. Requests for time off for interviews exceeding the three (3) discretionary days are **NOT** guaranteed to be approved by the DCE. This will count towards students' discretionary days. Justification of time off requests exceeding three (3) discretionary days is required. For absences exceeding three (3) days in the clinical year, students will be required to make up the missed time. Students must notify the preceptor once the request has been approved.

☐ **Non-Urgent Personal Reasons:** All requests should be submitted at least 2 weeks in advance or as soon as possible. This will count towards students' discretionary days. Requests for time off for non-urgent personal reasons exceeding the three (3) discretionary days should be for *major life events only* and are **NOT** guaranteed to be approved by the DCE. Justification of time off requests exceeding three (3) discretionary days is required. For absences exceeding three (3) days in the clinical year, students will be required to make up the missed time. Students must notify the preceptor once the request has been approved.

☐ **Religious Observance:** Requests should be submitted at least 2 weeks in advance or as soon as possible if accommodation for coursework/testing is needed. Students must notify



the preceptor once the request has been approved. This will count towards student's discretionary days. For absences exceeding three (3) days in the clinical year, students will be required to make up the missed time.

Student Signature: \_\_\_\_\_  
Date

Director of Didactic Education Signature: \_\_\_\_\_  
Date

Number of Discretionary Days Requested: \_\_\_\_\_

Discretionary Days Remaining (total of 3 per clinical year): \_\_\_\_\_

Action Taken:      ☐ Reviewed      ☐ Approved      ☐ Denied

## Endorsement

Director of Clinical Education: Melanie L. Geiger

Date: 7/8/2025

*The name that appears here is deemed an electronic signature.*

Program Director: Heather Grotke, MS, PA-C

Date: 7/8/2025

*The name that appears here is deemed an electronic signature.*

CIHHS Dean: Cathy Rasmussen, PhD, CCC-SLP

Date: 7/8/2025

*The name that appears here is deemed an electronic signature.*