



# **MEDEX Northwest**

# **CARE Week**

# **2015**

**University of Washington  
School of Medicine  
Seattle, Washington**

**CARE** (Clinical Applications in Reality Experiences) **Week** provides MEDEX Northwest students with a one-week clinical experience under the supervision and mentorship of a PA in a primary care or specialty setting.

**PRECEPTOR'S RESPONSIBILITIES:**

- Provide a minimum of 32 hours for the student to observe, and when appropriate, participate in clinical activities at the practice site.
- Complete the Student Evaluation and return to MEDEX program within one week.

**PROGRAM'S RESPONSIBILITIES:**

- Maintain open dialogue with preceptor and student.
- Provide malpractice coverage for the student.
- Provide evaluation tools to the preceptor and student to facilitate assessment and future planning with the precepting site.

**STUDENT RESPONSIBILITIES, OBJECTIVES AND GUIDELINES:**

CLINIC EXPERIENCE: During the CARE Week the student will be exposed to the care of patients in a clinical setting. This experience may be either a shadow role or direct hands-on experience, depending on the site and clearances arranged by MEDEX for the student.

The objectives of this experience are as follows:

- Observing the physician assistants' roles including their interaction with other providers, staff and patients.
- Enhancing oral case presentation skills.
- Work on write-ups with Preceptor feedback. **NOTE: the student who is shadowing and does not have computer access should write shadow notes for review.**
- Continuing to evolve in the transition from a previous health care role to that of the physician assistant.

ATTENDANCE:

The student is required to contact the preceptor at least two weeks prior to the start of the rotation. The student is required to attend all days scheduled for the CARE Week unless sick or the preceptor arranges otherwise. If a student is sick or an emergency arises, he or

she is to contact the assigned clinic and their clinical advisor at least two hours in advance of scheduled arrival. **Arriving late or leaving early from clinical assignments or being absent without approval is not permitted.**

Students are required to maintain a clean, well-groomed, professional appearance. Dress during clinics should be neat, clean, and appropriate to the clinical setting, including nametag (required) and white coat (optional).

### INTERPERSONAL SKILLS

One of the crucial skills of the clinician lies in the capacity to deal with patients in productive, therapeutic relationships. To form such relationships requires an early awareness of effective communication. The student must develop techniques in communication which result in a continuing two-way relationship in which the student accumulates information and at the same time generates confidence and understanding.

The outcome of this interaction should be a relationship of mutual trust and confidence, which in turn leads to intelligent cooperation from the patient. Forming effective and trusting relationships is one of the most difficult of human skills and cannot be something learned “once and for all.” Rather, this is learned over a lifetime of interacting with patients. For this reason, the students arrive having spent time learning the basics of interviewing and some of the fundamental techniques involved in counseling.

The goal during these one-week clinical rotations is to synthesize earlier learning so that, when presented with an actual patient, the student can provide a setting wherein:

- The patient feels confident and trustful enough to relate the problem to the student.
- The student is sensitive, accepting, and knowledgeable enough to understand the patient and their problems.
- The student, patient and preceptor work toward a solution to the problem, which is mutually agreeable to all.

Developing good interpersonal skills with other health care professionals is necessary for the success of the team approach to medical care. Professional development requires a working knowledge of other health care team members’ roles, responsibilities, and particular areas of expertise. It requires sensitivity to the partial overlapping and possible sharing of responsibilities with other health care professionals, as well as an acceptance of the limits placed on one's own profession.

## STUDENT GUIDELINES

**Student to Clinic:** An important factor in determining the overall success of your clinical rotation experience will be the relationship established between you and your preceptor. This relationship should ideally be open, honest, and fair from both sides. You should keep a number of things in mind:

- You will be a "short term" part of an established medical practice in an established community. What for you is a one time learning experience is a way of life and livelihood for your preceptor. The patients you see are the preceptor's patients.
- There is a fine line between assertiveness and aggression.
- Confidence is great. Over-confidence can quite literally be fatal.
- Always remember these two important points: *No question is a dumb question if you do not know the answer and it is better to ask than to make a mistake.*

The staff of the clinic or hospital can be tremendous aids to your learning. Each person has a special field of expertise and a unique outlook on patient care. Staff members often make the difference between a pleasant or unhappy rotation. Cultivate their friendships. Seek out their help and expertise. Your efforts will be greatly rewarded.

- Smile.
- Give people the credit and respect due to them.
- Help out where and when you can. If a particular task is not beneath their dignity, then it should not be beneath yours.
- Each clinic or hospital has ways of doing things that fit the situation and personnel. Be careful about suggesting changes. That is not your role!

**Student to Patient:** just a few important items here:

- Remember the first law of medicine – *Primum non nocere*.
- Remember that the patient at the other end of the stethoscope is a person too.
- The patients did not come in to be dazzled with your scholarly dissertations and knowledge of medical terms. They came for help. Something in their world is not right. It may not be what they complain about. Your job is to find the problem and to help them solve it. If your intrinsic aptitude shines through to impress them, consider it a bonus.
- If you do not know what is wrong with a patient, then, "I don't know" is an acceptable diagnosis. Send for reinforcements.

**Student:** We know that you are intelligent and capable. The patients do not. We have all your test scores, evaluations, and letters of recommendation to go by. The patient has only your appearance and your manners on which to base a judgment. Their confidence in you is an essential part of the therapeutic relationship.

#### GRADING POLICY

**Successful completion of the CARE Week experience is required prior to receiving a grade for Professional Role Development.** The student must receive a passing grade from their preceptor on their *Student Evaluation by Supervising Clinician* form and they must provide a *Care Week Evaluation by Student* in order to receive quarter credit for Professional Role Development. Also, the student must participate in the debriefing session.

**Clinical Performance:** Students who receive a less than satisfactory grade on their clinical performance for the CARE Weeks will also receive a grade of incomplete for the quarter. Those students will be required to make up the clinical week at another site and must receive a passing grade for the experience prior to starting their clinical year.

## ASSIGNMENT SUMMARY

### STUDENTS ARE REQUIRED TO COMPLETE THE FOLLOWING ASSIGNMENTS AS PART OF THEIR CARE WEEK

**Due Dates:** All assignments are due during the CARE Week Debriefing Session. Students must turn in the filled out ***Student Cover Sheet*** with the requisite ***Student Evaluation by Supervising Clinician*** and ***Care Week Evaluation by Student*** (note page 6-8 for these forms).

Please turn in your assignment to your clinical coordinator or MEDEX clinical office representative. Do not submit it to the didactic faculty or staff.

- 1) Evaluation by Student** – The student completes an evaluation of the rotation site.
- 2) Evaluation by Preceptor** – The Preceptor completes an evaluation of the student. If possible, the preceptor should review the evaluation with the student. The student should submit the evaluation during the CARE Week Debriefing Session (as noted above). If necessary, the preceptor can mail or fax the evaluation to the MEDEX office. If faxing, please send the form to the Seattle office at (206) 221-5393.
- 3) Debriefing Session** - There will a debriefing session for CARE Week. It is normally scheduled sometime within the first week the didactic students return to campus. Check your site's Didactic Schedule for exact time and day. The MEDEX Faculty Member coordinating and supervising the debriefing session will decide on the best way to divide the class (by last name, by type of exposure, rural vs. urban, etc.).  
  
Note page 9 for a list of debriefing topics. It is important to note, being able to answer these questions should be considered the bare minimum. Be prepared to expand on each item and participate in further discussion.
- 4) Patient Log** – You are required to keep a patient log (page 10) in which you will list the age, gender, race of the patient as well as their complaint and your diagnosis. Do not list any identifying information about the patient that would violate HIPAA guidelines.

**You will not hand in this patient log,** but are required to bring it to Transition Week in September 2015.

## CARE Week Assignments Cover Page

Student Name \_\_\_\_\_

Preceptor Name \_\_\_\_\_

Clinic Name \_\_\_\_\_

Faculty Reviewer \_\_\_\_\_

*(Determined by MEDEX)*

### **SUBMITTED BY STUDENT:**

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Items included in this packet (in this order):

- ☐ Evaluation by Student
- ☐ Evaluation of Student by Supervising Clinician

Student Comments:

### **REVIEWED BY MEDEX FACULTY:**

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Evaluation by Student	Pass / Fail
Evaluation of Student by Supervising Clinician	Pass / Fail
Debriefing Session:	Pass / Fail

<b>ASSIGNMENTS COMPLETE:</b>	<b>YES / NO</b>
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<b>OVERALL GRADE:</b>	<b>PASS / FAIL</b>
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**MEDEX FACULTY COMMENTS:**

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## CARE WEEK EVALUATION BY STUDENT

MEDEX and the participating clinics would like to make your CARE Week experiences as valuable and useful as possible. Please complete this clinic evaluation for the clinic you visit and return it to the clinical office at the end of your CARE Week. This information will be used to provide feedback to the clinical instructors and to evaluate this site for future use.

STUDENT: \_\_\_\_\_ CLINIC: \_\_\_\_\_

PRECEPTOR: \_\_\_\_\_

	<u>Yes</u>	<u>No</u>	<u>Mixed Feelings</u>
Were you expected and made to feel welcome?	_____	_____	_____
Did you receive adequate supervision and teaching from the clinical supervisor?	_____	_____	_____
Were you allowed to write on charts?	_____	_____	_____
Would you recommend using this site/clinical instructor again?	_____	_____	_____

REQUIRED: Is there anything about this site that makes it either a good or a poor site for future use? Please be specific. Continue on reverse if needed.

REQUIRED: Please assess your strengths and weakness at this stage in your clinical and professional development. Continue on reverse if needed.

### STRENGTHS

### WEAKNESSES




## STUDENT EVALUATION BY SUPERVISING CLINICIAN

Student: \_\_\_\_\_ Clinic: \_\_\_\_\_

Preceptor: \_\_\_\_\_

Please rate the student in each of the following categories.

	Excellent	Good	Adequate	Definite Gaps
Basic Knowledge	5	4	3	2
History Taking Skills (if applicable)	5	4	3	2
Physical Exam Skills (if applicable)	5	4	3	2
Charting Skills (shadow or patient record)	5	4	3	2
Time Management Skills	5	4	3	2
Problem Solving Skills	5	4	3	2
Case Presentation	5	4	3	2
Rapport/Communication	5	4	3	2
Punctuality/Dependability	5	4	3	2
Knowledge of Personal Limits	5	4	3	2
Appearance/Professionalism	5	4	3	2
Interaction with Clinic Personnel	5	4	3	2
Acceptance by Patients	5	4	3	2

### **COMMENTS:**

### **Final Grade:**

\_\_\_\_\_ Exceptional      \_\_\_\_\_ Pass      \_\_\_\_\_ Borderline      \_\_\_\_\_ Fail

Assess this student's strengths and weaknesses at this stage in her/his clinical and professional development. Continue on reverse side if needed.

### **STRENGTHS**

### **WEAKNESSES**


Please return completed signed evaluation form with the student or fax to: (206) 221-5393. *One evaluation per student.*

\_\_\_\_\_  
Student signature / date

\_\_\_\_\_  
Evaluator signature / date

# CARE WEEK DEBRIEFING

In addition to the assignments outlined in your CARE Week materials, be prepared to give a 10 minute team "debriefing" to your classmates. You should include the following:

Describe the clinic to which you were assigned (location, population served, provider mix) plus any other issues you feel important.

1. Was it a Specialty experience or Family Medicine? If Specialty, what was it?
2. What was the most important thing you learned about the PA profession ***in action***?  
Briefly describe the setting and the utilization of PAs at your CARE Week site.
3. What was the most important thing you learned about patient care?
4. What was the most important thing that you learned about yourself?
5. What Health Promotion activities did you see? Population based?

## Patient Log Sheet

KEEP THIS SHEET- YOU ARE REQUIRED TO BRING IT TO TRANSITION WEEK  
FOR TYPHON TRAINING

Date	Age	Gender	Race	Complaint	Diagnosis

## MEDEX Northwest Division of Physician Assistant Studies University of Washington

- **National Background Check:** All students have complied with School of Medicine National Background Check requirement. Verification will be provided by the student at your request.
- **Blood Borne Pathogen Training:** All MEDEX students will have completed training in Universal Precautions prior to participation in Clinical Rotations.
- **Health Insurance Portability and Accountability Act (HIPAA):** All students will have completed HIPAA training prior to participation in Clinical Rotations.
- **Immunizations:** All students have complied with the School of Medicine required immunizations for Health Science Students. A list of the required immunizations is provided below. Verification will be provided by the student at your request.

### Required Immunizations for Health Sciences Students

**MEASLES (RUBEOLA):** ALL students entering the university must provide proof of immunity to measles *prior to registration*. **Health Sciences students are exempt from this mandate until after their in-person immunization review.** The requirement is for TWO vaccine doses or a positive antibody titer. The doses must have been received after 12 months of age and at least one month apart. They must have been given after 1/1/68 and not given with immune globulin. Persons born before 1/1/57 must have proof of one vaccine dose or a positive antibody titer.

**MUMPS:** TWO immunizations (regardless of birth year), a positive antibody titer, or *documented physician-diagnosed* history of the disease will meet the requirement.

**RUBELLA:** Proof of one immunization or a positive antibody titer is necessary. History of the disease is not acceptable.

**HEPATITIS B:** Immunization is *required* for all students who have contact with patients or with human blood, tissue and/or body fluids. In addition, an antibody titer is required after completion of the series to prove immunity. Please note that this is now a “universal vaccine”, *recommended for everyone*.

**TETANUS-DIPHTHERIA-PERTUSSIS:** A basic childhood series and a booster within the last ten years are required. The recommended booster is the new Tdap (tetanus-diphtheria-acellular pertussis) vaccine, but a booster of the traditional Td (tetanus-diphtheria) vaccine is also acceptable. If 2 or more years has elapsed since the last Td, then a Tdap booster is recommended.

**VARICELLA (CHICKEN POX):** In this case, a history of the disease, if verified by the health care provider, is acceptable. Otherwise, a positive antibody titer or proof of two doses of vaccine, at least one month apart, is necessary. **Students who have documentation of only one vaccine dose will need to receive a 2nd “catch-up” booster dose.**

**TUBERCULOSIS SCREENING:** *In addition* to a current PPD skin test *within 2 months* of the start of the program, *another* PPD is required within the last year; otherwise a 2-step PPD must be done. History of BCG is *not* a contraindication to PPD testing. If student has had a *documented* positive TB skin test in the past, they must bring records specifying the test, chest X-ray report, and details of any prescribed medication(s). **Annual PPD skin testing is required. An annual symptom review is required for students with a documented history of positive skin test.**

## **Universal Precautions**

All students enrolled in the University of Washington School of Medicine must complete the School's program on universal precautions. The purpose of this program is to ensure that you have been informed of the appropriate handling of blood, tissues, and body fluids during your training.

Opportunities for training in universal precautions will be included in the student orientation. As part of your professional development, you will be responsible for incorporating these into your routine practice while in-patient care situations and for being certain that you understand what is available at each clinical experience.

If you are in a situation where you have had an occupational exposure to blood or body fluids, you can contact the following resources for assistance:

- MEDCON  
1-800-326-5300
- UWMC Campus Health Services  
(206) 598-4848  
(7:30 AM to 4:00 PM; M-F)
- UWMC Emergency Department  
(206) 598-4000
- Dr. Amy Baernstein (206) 663-1909 (pager)
- Dr. Doug Paauw (206) 598-6190 (pager)

[http://www.hopkins-aids.edu/guidelines/pep/gl\\_pep.html](http://www.hopkins-aids.edu/guidelines/pep/gl_pep.html)

If you are away from Seattle hospitals and incur bills for testing and counseling or prophylactic treatment for an occupational exposure to blood or body fluids, you may send the bills in confidence to:

Bob Ennis  
Director of Budget and Administration  
Health Sciences Administration  
Room C-414, Health Sciences Building  
University of Washington  
Box 356355  
Seattle, WA 98185-6355  
(206) 543-7918 (206) 543-3473 (FAX)