

Creighton UNIVERSITY

School of Medicine
Physician Assistant Program

Clinical Phase Student Handbook

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*Italicized letters and numbers next to handbook sections reference Accreditation Review Commission on the Education for the Physician Assistant (ARC-PA) standards. These indications throughout the handbook identify information/policies that assist the program in being compliant with the respective standard(s).

Clinical Phase Policies and Procedures

All program procedures and policies apply to all students enrolled in the Creighton University PA Program. All PA program personnel, including the Program Director, Medical Director, faculty and staff are expected to abide by and apply the policies contained herein equally to all students, regardless of the location at which instruction occurs

The following clinical policies are to be adhered to in relation to the academic work required of the following courses with clinical experiences:

PAS 721 Family Medicine

PAS 723 Ambulatory Internal Medicine

PAS 725 Inpatient Internal Medicine

PAS 727 Pediatrics

PA S729 Women's Health

PAS 731 Behavioral Health

PAS 733 Emergency Medicine

PAS 735 General Surgery

PAS 741 Medically Underserved Selective

PAS 7XX Elective Rotation I

PAS 7XX Elective Rotation II

PAS 7XX Elective Rotation III

Policies specific to clinical practicums or rotations will be specified, as necessary. These policies may require modification at any time. Students will be made aware of any changes in policies as they are made. Students should also refer to the PA Program Student Handbook for additional Program policies.

CP 1: Clinical Immunization, Background, and Drug Screening Requirements

Students are required to comply with the Creighton University immunization, physical health, background check, and drug screen policies during their program of study. Some clinical facilities may have additional requirements for students rotating at their facility, including, but not limited to additional paperwork, drug/alcohol/background screenings, immunization requirements, etc. When applicable, these additional requirements, including the cost, are the responsibility of the student. Once clinical phase schedules have been finalized, students will be informed by the Clinical Phase faculty regarding additional screening, immunization requirements specific to the requirements of their planned clinical preceptor sites. Students are expected to complete all requirements at least two weeks prior to the beginning of the clinical rotation that requires additional actions. Please refer to PA Program Student Handbook policy 8.2.9, 8.2.10, and 11.1.2 for more specific information.

CP 2: HIPAA Compliance

Prior to clinical experiences, all students are required to be trained in the Health Insurance Portability and Accountability Act (HIPAA) medical privacy regulations. Students must demonstrate continuous compliance with these regulations throughout the program.

CP 3: OSHA Guidelines (A1.03d, A3.08)

Safety is an important objective for students and patients. Prior to starting clinical experiences, students receive training in accordance with the requirements of the Occupational Health & Safety Administration (OSHA) on Universal Precautions and are provided information regarding the appropriate methods of handling blood, tissues and bodily fluids, as well as dealing with the management of communicable diseases. Each student is responsible for incorporating these precautionary measures into the daily routine while taking care of patients. It is the student's responsibility to become familiar with the policies and procedures for employing these precautions at each of the clinical sites to which the student is assigned. All students will participate in clinical affiliation requirements for safety and quality assurance compliance at the direction of the clinical affiliation personnel.

Students should refer to the PA Program Student Handbook policy 11.1.1 for details on Infectious/Communicable Disease Policy and Procedures.

CP 4: Affiliation Agreements (A1.02, A3.01)

Affiliation agreements must be established between all clinical sites/preceptors and Creighton University before students can enter the clinical site as a student. Affiliation agreements are legal documents that address liability, malpractice and issues pertinent to the site location and practice type. The Creighton University PA Program has affiliation agreements in place with physicians, physician assistants, other health care providers and healthcare institutions allowing for a complete curriculum of clinical experiences for each student. Occasionally, Creighton PA program policies will be superseded by more stringent guidelines at the clinical site, as outlined in affiliation agreements. Students are expected to abide by all published policies and procedures set forth at clinical rotation sites, regardless of location.

CP 5: Student-Initiated Clinical Experiences (A3.03)

Students may not arrange their own clinical experiences, but may suggest potential opportunities to the clinical coordinating team. The Program is committed to developing new relationships with preceptors and clinical sites, but must approve any and all requests to do so. Students should be aware it may take months to arrange such an experience or that the request might not be completed/approved. To suggest a clinical experience, students must observe the following:

1. Students should allow at least four (4) months for the necessary paperwork to be completed.
2. The student is prohibited from contacting the clinical site.
3. Using information from the Clinical Site Request Form, the clinical coordinating team will evaluate the potential site/preceptor to determine if they meet program expectations and accreditation standards.

Students interested in an opportunity for a supervised clinical practice activity outside of the Creighton PA Program network should contact the Chief Clinical Director to obtain the [Clinical Site Request Application](#) and [Alternate Clerkship Site Profile Form](#).

CP 6: Elective Clinical Rotation Experiences

Elective clinical experiences are rotations beyond those core experiences specifically required by the program. These experiences may be selected by the student, but the Program reserves the right to assign the student a specific elective to meet expected program clinical expectations and learning competencies. The experience is chosen, either from a site in the program's database or with a new clinical partner, but must be approved by the Chief Clinical Director. Elective clinical experiences can be an opportunity for students to enhance an area of interest, develop a deficiency, and/or as a potential location for future clinical practice.

CP 7: Preceptors and Supervision (A2.15, A2.17)

The student will be assigned a primary preceptor for each clinical location. Students can access contact information for the primary preceptor through Creighton PA Program database in the program management platform (E*Value). The preceptor will provide opportunities within his/her medical practice for the student to gain knowledge, skill and experience in the evaluation and management of a wide range of medical problems. The preceptor, therefore, provides clinical instruction, insight, and experience. The preceptor:

- Determines the student's schedule, practice orientation, and work assignments
- Assigns patient workups and gives feedback on student's clinical knowledge, clinical skills, and abilities
- Supervises the student and determines when the student is prepared for greater responsibility and assesses student competency
- Assures that hospital privileges are adhered to, both by the hospital and the student
- Where appropriate, discusses student progress with Program faculty
- Evaluates the student's performance at the middle and end of the rotation

The primary preceptor is responsible for providing ongoing and timely feedback regarding clinical performance, knowledge base and critical thinking skills, based on the student's level of training and the respective course's learning objectives. During a student's time at the facility, the preceptor must be available for supervision, consultation, and teaching, or designate an alternate preceptor. The primary preceptor may not be with a student during every shift, but students will be assigned to another MD, DO, PA, or NP who will serve as the student's preceptor for any given time interval.

Although students may interact with and be supervised by resident physicians, the program does not rely primarily on resident physicians for didactic or clinical instruction. Having more than one clinical preceptor offers the advantage of sharing preceptorship duties and exposes students to valuable variations in practice style, which can help learners develop their own professional personality and identity. If an instance occurs where supervision is not available by a physician, PA, or NP, students may be given an assignment or may spend time with ancillary staff (x-ray, lab, physical therapy, etc.), as these experiences can be valuable as well so long as they align with course learning objectives and outcomes. The preceptor should be aware of the student's assigned activities at all times.

Students are not employees of the hospitals or clinics where supervised clinical practice experiences occur and, therefore, work entirely under the preceptor's supervision. On each rotation, it is the student and preceptor's shared responsibility to ensure the supervising preceptor sees all of the patients the student interacts with. The preceptor can provide direct supervision of technical skills with gradually increasing autonomy in accordance with the PA student's demonstrated level of expertise. However, every patient must be seen and every procedure supervised and reviewed by the supervisor prior to patient discharge or disposition. 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. The PA student will not be allowed to see, treat, or discharge a patient without evaluation of the patient personally by the preceptor. The PA student is also not allowed to be compensated for their services.

CP 7.1: Student Housing (A1.03g)

For clinical training sites away from the local campus, housing may be provided by the clinical training site. The student may refer to the site profile in E*Value for information regarding student housing, including contacts. If there are problems that arise with housing, the student should first contact the site's housing coordinator. If the site is unresponsive, the student should contact the Chief Clinical Director or other Program personnel.

The program requires that all housing provided by the site or the program must have intact and functional locking doors in any student residential areas. Students should contact the site housing coordinator and/or the program's clinical phase personnel immediately if housing is not compliant with this requirement.

CP 8: Program Responsibilities for Clinical Experiences

The overall goal of the clinical phase of education is to provide students with the appropriate clinical exposures to guide the student's development as a clinician. The Program-defined expectations and competencies to be acquired during rotations reinforce didactic information, provide direction in developing clinical competence, and foster maturity as a budding professional.

The clinical education team is responsible for administering and evaluating the Program-defined expectations and competencies associated with the clinical phase, coordinating clinical rotations, monitoring the overall progress of students on rotations, and assuring the quality of the clinical sites. Preceptors and students are provided with the guidelines that define program goals and objectives for each rotation through appropriate handbooks and syllabi. The Chief Clinical Director and Clinical Coordinator(s) are the Program's principle contact with the preceptor and the student on rotations. They will also act as intermediaries between student and preceptor if necessary to resolve conflicts. The clinical education team schedule all clinical rotations and communicate these schedules to the student, the preceptor, and program personnel.

The Program maintains responsibility for the following:

- The program is responsible for coordinating (identifying, contacting, and evaluating) and assigning all student clinical experiences. Student preferences for clinical assignments may be taken into consideration, but cannot be guaranteed. (A3.03)
- Clinical assignments are given at least 30 days in advance; however, ***the program reserves the right to alter assignments during the course of study using the student's schedule and available times as a reference.***
- The program will provide specific learning objectives to preceptors and students.
- The program will take action if it is deemed the student is in danger or if their educational experience is limited due to an environment not conducive to learning.
- The program will withdraw any student from a clinical experience at the request of the preceptor when it is deemed that the student's work, conduct, or health is considered unsafe or detrimental to patients or the practice site.
- The program will withdraw any student from a rotation if there is a significant conflict between the student and preceptor that would deter from the learning experience.
- The program will evaluate the suitability of the clinical site and preceptor, and will use these evaluations as an opportunity to assess student progress and address any preceptor and/or student issues.
- While the preceptor will evaluate the student, the program will determine final grades for students.

CP 9: Student Responsibilities for Clinical Experiences

The following activities are required of every clinical phase student in order to progress and graduate:

1. Successful completion of all required (core) rotations, one selective, and three elective rotations.
2. Satisfactory completion of all PAEA End of Rotation (EOR) exams at or above the Program passing point

3. Completion of all required immunizations, health testing/screening, background checks, computer/EHR trainings and any other tasks or requirements of the Program or of clinical training sites. These requirements will be presented to the student prior to the clinical experience. Timely completion of these student responsibilities is important. Failure to complete clinical site onboarding in a timely manner may interfere with the ability to complete training at specific sites.
4. Maintenance of professionalism throughout the entirety of the clinical phase of the Program.
5. Timely completion of patient logging and preceptor/site evaluation requirements.
6. Successful completion of assessment activities, including summative and graduation testing.

Additionally, for the student to be best positioned for success, the student must remain responsible for the following:

- The student will adhere to the regulations and policies of the Creighton University School of Medicine and the CU PA Program.
- The student will conduct him/herself in a courteous, respectful, and professional manner at all times.
- The student will identify themselves as a Creighton University Physician Assistant student and wear appropriate identification during all clinical experiences. *(B3.01)*
- The student will be conscientious, accountable, and will be responsible for taking an active role in his/her clinical education.
- The student will demonstrate awareness of professional limitations and will only perform activities assigned by, and under the supervision of, their preceptor. Students should communicate with the preceptor if they do not feel comfortable completing a clinical activity based on their level of training.
- The student must provide current address, phone number, and emergency contact information to the CU PA Program. Any changes to this information must be reported to the program immediately. The student will give their preceptors and/or site/office direct and current contact number and get a direct number for both the preceptor and site/office.
- The student is responsible for the timely completion of necessary paperwork and/or actions required for clinical rotations prior to, during, and after the rotation. **Failure to complete the necessary onboarding resulting in the delay of a rotation's start may result in the student not being allowed to complete the rotation as scheduled. This may result in scheduling the rotation at the end of the clinical year, leading to a possible delay in graduation.**
- The student should contact the site/preceptor 2-3 weeks prior to the start of their rotation to introduce themselves and make arrangements for the upcoming rotation. Contact information is listed on each site/preceptor profile in E*Value. *(A2.17)*
- On the first day at a new clinical site, the student will inform the preceptor of his/her educational goals; this includes sharing with the preceptor the level of competence and knowledge in specific clinical requirements and clinical skills, as well as the goals the student would like to achieve during the rotation. He/she will review course objectives and evaluation form with the preceptor.
- The student will request information and orientation on issues specific to safety at each assigned site.
- The student will follow the rules and regulations of the hospital or other institutions in which he/she works and agrees to complete any additional training and/or testing required by the facilities.
- The student will make all reasonable efforts to maintain good relationships at all times with patients, staff, and preceptors.
- The student will complete all assignments and assessments in accordance with course requirements.

- Students in clinical rotations are required to keep a clinical log, as specified by program instructions, of each patient encounter and the number of clinical training hours. These records are maintained by the student and monitored by the program.
- The student shall handle all confidential information in a professional and ethical manner and in accordance with all applicable federal and state, including HIPAA laws and regulations.
- Where not otherwise provided, students shall be responsible for all costs for transportation, housing and meals at all assigned clerkship sites.
- If a student is removed from a clinical experience, either by the Program or at the request of a preceptor, the student must appear in person to meet with the Chief Clinical Director, PA Program Director, and/or with appropriate CU SOM committee(s).

CP 9.1: Student Dress Code (B3.01)

Students will observe the following dress code when working in any clinical situation. This means that a professional appearance is mandatory for all students unless otherwise specified by the clinical preceptor. In all clinics a white coat with your name tag and the PA emblem will be worn with appropriate dress to reflect a "professional" or "business" appearance (i.e. no blue jeans, shorts, tennis shoes, etc.). Personal grooming and hygiene must be a priority. Tattoos and/or piercings should not be offensive or impede the ability of the student to effectively function in a clinical setting.

Dress should always be at or above the level of dress expected in the clinic/site. In certain clerkships, the requirement for the white coat may be waived by the preceptor; however, **the student MUST always be identified by their Creighton University Identification badge.**

CP 10: Clinical Role of the Student (A3.06, A3.05)

Clinical experiences are expected to be educational for the PA student. At no time during Program clinical experiences should the student be called upon or used to substitute for regular clinical or administrative staff. The student should also not substitute for or function as instructional faculty. If a situation arises where an individual is asked to perform in a role other than that of student or to substitute for a staff member, the student should contact the Program immediately for guidance.

The following are several "guidelines" regarding what a PA student may be permitted to do by the preceptor. The judgment of the preceptor regarding how much responsibility a student is ready to assume should be a determining factor of which tasks are assigned and how much supervision is needed. All students should exhibit a baseline of medical knowledge and clinical skills. A course syllabus will be provided to the preceptor outlining the rotation objectives the student must meet.

Typical tasks assigned to PA students include:

- Taking histories and performing physical examinations
- Assessing common medical problems and recommending appropriate management
- Performing and assisting in diagnostic and therapeutic procedures
- Assisting the preceptor in hospital/nursing home rounds, recording progress notes, transcribing specific orders of the preceptor as allowed by the facility
- Following protocols (verbal or standing orders) of the preceptor
- Presenting patient cases orally and in a written format

- Discussing the basic pathophysiologic mechanisms that have produced the signs, symptoms, and disease processes under investigation
- Completing assigned readings and preparing presentations as requested by clinical preceptor and/or program faculty
- Attending all teaching rounds and conferences, and other learning opportunities outside of the clinical setting
- Following the assigned on-call schedule
- Discussing/recommending treatment approach, medication, and follow-up care

CP 11: Resolving Clinical Issues

A student who has any clinical rotation concerns should address them in a professional manner. Problems during rotations can occur, be they academic, professional, or personal in nature. Students should use the following guidelines in dealing with problems:

- Attempt to resolve problems with the appropriate individual directly.
- If the preceding is not possible, discuss the situation with the clinical preceptor.
- If unable to resolve the problem, contact the Chief Clinical Director.

Do not allow small problems to turn into large problems. Address issues immediately so the issue can be resolved quickly.

As previously mentioned in this handbook, harassment and discrimination of any kind is not tolerated. Any student who feels they have been harassed or discriminated against should refer to the policies and procedures for reporting this type of behavior outlined in University, School of Medicine, and PA Program resources. Students should contact the Chief Clinical Director, Program Director, or another Program official, per the reporting policy, that they feel comfortable speaking with about the matter.

CP 12: Travel, Transportation, and Housing

Housing and transportation for all clinical experiences are the responsibility of the student. See the Clinical Attendance Policy below for information on travel time for campus return and other activities.

CP 13: Clinical Attendance Policy

Students are expected to be in attendance daily, and as requested, to fulfill the preceptor's schedule availability, which may include evenings, night, shift-type work and/or weekends. Time for arrival and departure will be determined by each site and preceptor. During clinical rotations students will follow the schedule of their specific clinical rotation site and/or preceptor and are expected to obtain a minimum of 36 contact hours per week. Completion of the minimum required time does not imply the student should stop seeking clinical experiences. The program may occasionally make unannounced phone calls or visits to clinical sites to verify student attendance.

- Students are allowed five (5) days of absence during the clinical phase of the program.
- The student must notify their preceptor and the Chief Clinical Director or Clinical Coordinator via email or phone **prior** to any absence, if possible. All daily absences must be approved by the clinical coordination team on a case-by-case basis.
- An absence of three or more consecutive days due to illness requires a written excuse from a health care provider on official letterhead.
- Students must meet the minimum hour requirement for each rotation. Should an absence deter the student from meeting this requirement, make-up time and/or assignments may be required and will be determined by the preceptor and/or the Program. Rotations may require work at times other than the regular workday. This may include taking call and work on the weekends.
- Christmas Day, Martin Luther King Day, Thanksgiving Day, Memorial Day, Independence Day, and Labor Day are the only student holidays officially observed while on rotations. Students shall not be required to be present on holidays designated by the approved University calendar.

CP 13.1: Travel Time for Clerkship Returns Days

Students will be given an extra travel day (the last day of the rotation) for travel if any clinical rotation site that is greater than 250 miles from the Creighton Omaha or Phoenix Regional campuses. Students in this situation should contact the Clinical Coordinator for approval of a travel day. It is the student's responsibility to notify the preceptor at their clinical site that they will be leaving a day early for travel. Students should strive to still meet the minimum required hours for the rotation. If this is not possible, the student should contact the Clinical Coordinator immediately to discuss.

CP 13.2 Interview Time

The program is aware that during the clinical phase students may need time to attend job interviews. Absences due to job interviews must be approved by the Chief Clinical Director at least one week prior to the interview, or the earliest possible date. It is also the responsibility of the student to inform the preceptor at the clinical site of the pending absence. The program does not individually contact each site to report absences. No more than two days per interview request will be granted and a maximum of 3 (2 day) interviews will be granted per student through the clinical phase of the program. If a student requires more than three interview sessions, students must take a daily absence. Interview days will not be granted after the student has formally accepted a job offer. Students should strive to still meet the minimum required hours for the rotation. If this is not possible, the student should contact the Chief Clinical Director immediately to discuss.

CP 13.2 Clerkship Completion

Students must complete all clerkships/rotations designated as required by the Program. Reasonable effort will be made to accommodate student preference on clerkship scheduling and sites. However, in all cases the final determination for all clerkships times, sites and activities will be at the discretion of the Chief Clinical Director.

If for any reason a student is unable to complete a clerkship or is not able to be present for the time typically required for completion of the clerkship, the clerkship will be designated an "interrupted clerkship." Absence from a clerkship of four (4) days or more in any clerkship month shall constitute an "interrupted clerkship." For "interrupted clerkships" students will be required to make up time, or they may be required to repeat the entire clerkship depending on the circumstances. In cases of "interrupted clerkships," the Student Advancement Committee will make the determination as to the amount of time as well as where and when the time will be made up.

If for any reason a student is absent for a total of ten (10) or more days during the entire 15-month clerkship period, a required make-up period will be assigned at the discretion of the Student Advancement Committee. In all cases when a student is absent from a clerkship for any period of time, excused or unexcused, the student shall be required to make up time missed from the clerkship unless other arrangements or agreements are made with the Chief Clinical Director.

The Program will have designated periods of excused time from clerkships to conduct required and/or approved activities (in addition to University approved holidays). These times will constitute officially approved absences from clerkships and will not count as absences from clerkships requiring make-up time.

Clinical Phase Textbook List

Title	Author	Edition	Required
<i>Current Medical Diagnosis & Treatment</i>	McPhee, SJ., et al. McGraw-Hill.	2019 Edition	X
<i>Procedures for Primary Care</i>	Pfenninger and Fowler.	Current Edition	X
<i>Nelson's Essentials of Pediatrics</i>	Marcdante, K, et al. Saunders.	Current Edition	X
<i>Mosby's or other Drug Reference for Health Professions</i>	Mosby, Epocrates, PocketRx, and others.	Current Edition	X
<i>Diagnostic and Statistical Manual of Mental Disorders (DSM-5)</i>	American Psychiatric Association. American Psychiatric Press.	Fifth edition - 2013	X
<i>Basic Radiology</i>	Chen M, Pope T, Orr D. McGraw-Hill.	Current Edition	
<i>Current Obstetric & Gynecologic Diagnosis & Treatment</i>	DeCherney, AH & Nathan, L. McGraw-Hill.	Current Edition	
<i>Current Emergency Diagnosis & Treatment</i>	Stone CK, Humphries RL. McGraw-Hill.	Current Edition	
<i>Current Diagnosis & Treatment in Orthopedics</i>	Skinner, HB. McGraw-Hill.	Current Edition	

<i>Current Surgical Diagnosis & Treatment</i>	Doherty, GM. McGraw-Hill.	Current Edition	
<i>Tintinalli's Emergency Medicine</i>	Judith E. Tintinalli, et. al.	Current Edition	
<i>Current Diagnosis & Treatment in Psychiatry</i>	Ebert, MH, et al. McGraw-Hill.	Current Edition	

CP 14: Student Safety

Student safety is of paramount importance to the program. During the orientation to the clinical phase, the program provides information to students on best practices around security and personal safety while on clinical rotations. This information will be available to students for review on BlueLine. Additional policies on student safety can be found in the PA Program Student Handbook, policy 11.7

If there are immediate safety concerns at any site, the student should first contact local police and, once the immediate threat of harm is passed, the student should contact the Program. Any real or perceived threat to a student's safety is taken seriously by the PA program and will be investigated immediately

Students are expected to abide by all local safety measures, rules and regulations in place at supervised clinical practice experiences.