

Preceptor Handbook

2024

Department of Health Sciences
Master of Physician Assistant Studies Program

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The preceptor handbook serves as a resource to preceptors and clinical sites hosting UNC Physician Assistant students. The UNC PA Program would like to acknowledge the PAEA Preceptor Orientation Handbook for serving as a guide to this document.

Dear Preceptor:

On behalf of the UNC Master of Physician Assistant Program, I would like to take this opportunity to thank you for sharing your time and experience with our students by serving as a clinical preceptor. Your dedication to our program and the education of our students is greatly appreciated.

The clinical experiences that our students will obtain while rotating with you and your team are imperative to their overall success in this program and their endeavors to become Physician Assistants. The Structured Clinical Practice Experience (SCPE) provides an opportunity for PA students to synthesize and apply concepts and skills they learned in the preclinical year while also learning more about the complexities of our healthcare system. You, as a clinical preceptor, are the key to providing successful learning experiences in real-life settings. The PA students will work closely with you, learning from your example, advice, and feedback.

Your ongoing evaluation of our PA students' performance is imperative to the success of the students. Providing this feedback in a timely and constructive manner allows both the student and the program to identify and address potential weaknesses and celebrate student strengths. Your evaluations also allow our program to continually monitor our own effectiveness.

If at any time you have questions, concerns, or want to share your experiences with us, please do not hesitate to reach out.

Thank you again for all that you do.

Sincerely,

Allison Phillips, MPAP, MHPE, PA-C
Director of Clinical Education
Clinical Assistant Professor
UNC School of Medicine Physician Assistant Program

UNC PA PROGRAM CLINICAL TEAM

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PROGRAM OVERVIEW

The UNC Physician Assistant Studies program is a 24-month cohort-based curriculum. The program consists of two twelve-month phases: the Preclinical Phase and the Clinical Phase. Each cohort begins in January. Graduates of the program will be conferred a Master of Health Sciences degree and will be eligible to apply for the certification examination after graduation sponsored by the National Commission of Certification of Physician Assistants (NCCPA).

MISSION AND GOALS

The UNC Physician Assistant Studies program is housed within the University of North Carolina at Chapel Hill School of Medicine and the Department of Health Sciences.

SCHOOL OF MEDICINE MISSION STATEMENT

Our mission is to improve the health and wellbeing of North Carolinians and others whom we serve. We accomplish this by providing leadership and excellence in the interrelated areas of patient care, education and research. We strive to promote faculty, staff and learner development in a diverse, respectful environment where our colleagues demonstrate professionalism, enhance learning and create personal and professional sustainability. We optimize our partnership with the UNC Health Care System through close collaboration and a commitment to service.

PHYSICIAN ASSISTANT PROGRAM MISSION STATEMENT

The UNC Physician Assistant Program is honored to serve the mission of the UNC School of Medicine. We are dedicated to promoting high-quality, accessible, patient-centered health care for the people of North Carolina and the nation through excellence in education, scholarship and clinical service. The UNC PA Program is committed to the healthcare and workforce needs of North Carolinians and will use an interprofessional approach to prepare skilled and compassionate health care practitioners across the continuum of life.

PHYSICIAN ASSISTANT PROGRAM GOALS AND OUTCOMES

The UNC Division of Physician Assistant Studies has identified programmatic goals which allow further support of the mission of the program, School of Medicine and University:

- 1) Recruit non-traditional students with special attention to veterans and North Carolina residents.
 - The UNC-CH PA Program classifies non-traditional status to applicants with two or more years of an alternative career trajectory prior to preparation for PA school and/or greater than 26 years of age.
 - UNC specifically recruits veterans who served in a medical capacity.
- 2) Prepare students to work collaboratively in interprofessional teams.

- 3) Graduate medical learners who possess the knowledge and skills required to practice as physician assistants.
- 4) Prepare students for practice in medically underserved populations.

GOALS OF THE CLINICAL YEAR

Physician assistant students enter the clinical phase of the curriculum following 12-months of didactic foundational preparation. This allows students to enter a hands-on learning environment which is designed to prepare them for entry into practice with medical knowledge and clinical skills. The goals of the clinical year include:

- Application of didactic medical knowledge and skills to supervised clinical practice.
- Advance clinical reasoning and problem-solving skills.
- Refine history-taking and physical examination skills.
- Develop the interpersonal skills and professionalism necessary for patient care and to function effectively on an interdisciplinary medical team.
- Apply principles of diversity and inclusion to patient care.
- Broaden understanding of the PA role in health systems and healthcare delivery.
- Experience a diverse patient population with varied patient encounters and clinical settings to represent the breadth and depth of the PA scope of practice.
- Prepare for the Physician Assistant National Certifying Examination

COMPETENCIES

PHYSICIAN ASSISTANT PROFESSION

Physician Assistants are state-licensed clinicians who practice medicine in every specialty and setting. PAs diagnose illnesses, develop and manage treatment plans, prescribe medications and often serve as a patient's principal healthcare providers in collaboration with physicians. With thousands of hours of medical training, PAs are versatile and collaborative.

AAPA.ORG

Competencies for the PA profession have been published by the American Academy of Physician Assistants and are designed to capture the breadth and complexity of modern PA practice. These domains are:

- Knowledge for practice
- Interpersonal and communication skills
- Person-centered care

- Interprofessional collaboration
- Professionalism and ethics
- Practice-based learning and quality improvement
- Society and population health

UNC PA PROGRAM-DEFINED COMPETENCIES

Given that PAs develop greater competency with time and experience, the UNC PA Program has utilized the profession's competencies, the new graduate competencies published by the Physician Assistant Educational Association (PAEA) and mission and goals of the University of North Carolina at Chapel Hill to develop program-specific competencies for the UNC PA graduate.

To successfully complete the course of study for the degree of Master of Health Sciences in Physician Assistant Studies at the UNC PA Program, candidates for graduation must possess the knowledge, skills, attitudes and judgement to function in a broad variety of clinical situations and render a wide spectrum of patient care. Candidates must also demonstrate the capacity to develop academic and emotional maturity, as well as leadership skills to function in a medical team. These competencies are:

MEDICAL KNOWLEDGE

Acquire and demonstrate medical knowledge.

Student learning experiences include basic science skills such as normal anatomy and physiology, pathophysiology and mechanisms of disease. Through a variety of learning modalities, including lectures, case-based learning and experiential activities, learners will utilize critical thinking and reasoning to evaluate patients, develop a sound differential diagnosis and provide competent patient management. Health promotion, maintenance and disease prevention are prioritized to improve health outcomes.

PATIENT CARE

Develop and demonstrate patient care skills.

Demonstrate proficient knowledge and skills of primary care practice.

Students will be exposed to patients representative of the cultures and diversity of North Carolina. Students will learn to care for patients of all ages and gain experience in age-appropriate patient assessment, evaluation and management, as well as acquire skills for caring for patients in a variety of settings. Patient and provider safety is emphasized through training.

PROFESSIONALISM AND CULTURAL SENSITIVITY AND HUMILITY

Demonstrate and model professionalism and ethical behavior.

Demonstrate respect and awareness of the impact of cultural considerations in the provision of healthcare delivery.

Professional and ethical behavior in the classroom and clinic is demonstrated through role modeling of the faculty and staff, in lectures and workshops and during clinical clerkships. Learners will acquire skills which support collaboration with patients, their families and other healthcare professionals, emphasizing the team approach to patient-centered care.

INTERPERSONAL AND COMMUNICATION SKILLS

Develop effective interpersonal and communication skills.
Communicate effectively through telehealth modalities.

Learners will be presented with opportunities to develop their communication skills, encompassing verbal, nonverbal and written exchanges of information in a culturally and ethnically sensitive manner and among diverse communities of patients.

SYSTEMS-BASED PRACTICE

Develop knowledge of healthcare delivery systems and health policy.

Students will be exposed to the current trends in healthcare delivery, including methods of coding and reimbursement, North Carolina healthcare systems, North Carolina laws and regulations surrounding the PA profession and both national and local PA organizations.

SELF-ASSESSMENT AND ONGOING PROFESSIONAL DEVELOPMENT

Acquire practice-based learning and life-long improvement skills.

Learners will be exposed to and demonstrate skills in the elements of using peer-reviewed evidence to evaluate the best practices of health care. Students will learn to search, interpret and evaluate medical literature and to apply this knowledge to individualized patient care.

TECHNICAL STANDARDS

Technical standards are defined as personal attributes and capabilities essential for admission, promotion and graduation of a UNC Physician Assistant student. All UNC PA students must have the knowledge, skills and competency required to master the didactic and clinical requirements of the curriculum.

The following technical standards describe the non-academic qualifications required which, in addition to the program-defined competencies, the UNC PA Program considers essential for successful completion of its curriculum.

ATTITUDINAL, BEHAVIORAL, INTERPERSONAL AND EMOTIONAL ATTRIBUTES

The student should have the capacity to learn and understand the ethical principles and state and federal laws that govern medical practice and to perform within these guidelines. The candidate should be able to relate to colleagues, staff and patients with honesty, integrity, non-discrimination, self-sacrifice and dedication.

The student should be able to understand and use the power, special privileges and trust inherent to the PA-patient relationship for the patient's benefit, and to know and avoid the behaviors that constitute misuse of this power. UNC PA students should possess the interpersonal skills necessary to interact respectfully and appropriately with all persons, regardless of race, ethnicity, belief systems and socioeconomic status.

The student must be of sufficient emotional health to fully utilize their intellectual ability, to exercise good judgment, complete patient care responsibilities promptly and to relate to patients, families and colleagues with courtesy, compassion, maturity and respect for their dignity.

The ability to participate collaboratively and with flexibility as a professional team member is essential. The student must display this emotional health in the face of stressful work, changing environments and clinical uncertainties. The student must be able to modify behavior in response to constructive criticism, as well as be open to examining personal attitudes, perceptions and biases, including those which may negatively affect patient care and professional relationships.

STAMINA

The study and ongoing practice of medicine often involves taxing workloads and stressful situations. A candidate must have the physical and emotional stamina to maintain a high level of function in the face of these working conditions.

INTELLECTUAL SKILLS

The student must possess a range of intellectual skills which allow them to master the broad and complex body of knowledge that comprises the PA curriculum. The student's learning style must be effective and efficient with the ultimate goal of solving difficult problems and making diagnostic and therapeutic decisions. The student must be able to memorize, perform scientific measurement and calculation and understand and cognitively manipulate three-dimensional models.

Reasoning abilities must be sophisticated enough to analyze and synthesize information from a wide variety of sources. It is expected that the candidate is able to learn effectively through a variety of modalities including, but not limited to, classroom instruction, small group discussion, individual study of materials, preparation and presentation of written and oral reports and use of computer-based technology.

The student must be of sufficient emotional health to fully utilize their intellectual ability, to exercise good judgment, complete patient care responsibilities promptly and to relate to patients, families and colleagues with courtesy, compassion, maturity and respect for their dignity.

COMMUNICATION SKILLS

The student must be able to ask questions, receive answers perceptively, record information about patients and educate patients. They must be able to communicate effectively and efficiently with patients, their families and other members of the healthcare team. This includes spoken and non-verbal communication. Mastery of both written and spoken English is required.

ESSENTIAL FUNCTIONS OF TECHNICAL STANDARDS

The University of North Carolina at Chapel Hill is committed to the education of all qualified individuals, including persons with disabilities who, with or without reasonable accommodations, can perform the essential functions of the educational program in which they are enrolled and the profession they pursue.

It is the policy of UNC to comply with the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, and state and local requirements regarding students and applicants with disabilities. Under these laws, no otherwise qualified and competent individual with a disability shall be denied access to or participation in services, programs and activities based solely on the disability.

In accordance with federal regulations established by the Americans with Disabilities Act, the above technical standards are described to assist each candidate and student in evaluating their prospect for academic and clinical success. General standards for the UNC PA Program are followed by standards which apply to the professional discipline. When a student's ability to perform is compromised, the student must demonstrate alternative means and/or abilities to perform the essential functions described.

It is important that prospective and current students read each technical standard carefully. Each applicant is provided the opportunity to read and acknowledge their understanding of the technical standards prior to matriculation, as addressed in their offer of admission and acceptance of admission to the program by indicating their intent to enroll and payment of the admissions deposit.

ACCOMMODATIONS FOR STUDENTS WITH DISABILITIES

The UNC PA Program is committed to equality of educational opportunity and does not discriminate on the basis of disability. We adhere to the University of North Carolina at Chapel Hill's policies and applicable federal and state law regarding disability accommodations ([Accessibility Resources & Service Policies & Procedures](#)). The UNC PA Program collaborates with the Accessibility Resources & Service (ARS) Office in order to provide reasonable accommodations for PA students with disabilities, chronic medical conditions, temporarily disability or pregnancy complications resulting in difficulties with accessing learning opportunities. Students who seek reasonable accommodations for a disability must contact ARS. ARS is the only body that approves requested accommodations.

ROLE OF THE PRECEPTOR

The preceptor is an integral part of the Physician Assistant program. Preceptors will serve as role models for the student and, through guidance and teaching, help students practice history taking, physical examination, effective communication & interprofessional teamwork, physical diagnosis, recording and reporting, technical skills and procedures, and plan development including a logical approach to further studies and therapy.

PRECEPTOR RESPONSIBILITIES

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

1. Orient students at the onset of the rotation with the practice/site policies and procedures and review the expectations and objectives for the rotation.
2. Provide ongoing and timely feedback regarding clinical performance, knowledge base, and critical thinking skills. This can be done with the student informally each week or at a designated time and can be formally reported to the clinical coordinator by submitting mid-rotation and end-of-rotation evaluations.
3. Supervise, demonstrate, teach, and observe clinical activities in order to aid in the development of clinical skills and ensure proper patient care.
4. Delegate to the student increasing levels of responsibility for clinical assessment and management as appropriate to the student's experience and expertise.
5. Participate in the evaluation of clinical skills and medical knowledge base through the following mechanisms:
 - Direct supervision, observation, and teaching in the clinical setting.
 - Direct evaluation of presentations (including both oral and written).
 - Assignment of outside readings and research to promote further learning.
6. Dialogue with faculty during site visits to evaluate student progress and assist the learning process
Audit and co-sign charts in order to evaluate the student's ability to write appropriate and complete progress notes, histories, physical examinations, assessments, and treatment plans.
7. Complete and promptly return the evaluation forms provided by the program reflecting on student knowledge and skills as well as their improvement throughout the rotation.
8. Promptly notify the PA program of any circumstances that might interfere with the accomplishment of the above goals or diminish the overall training experience.
9. Maintain an ethical approach to the care of patients by serving as a role model for the student.
10. Demonstrate cultural competency through interactions with patients.
11. Spend a few minutes each week in a candid summary discussion with the student as to whether each is meeting the other's needs and expectations, and what changes need to be made in the roles and relationship.
12. Provide timely feedback to the student and the program regarding student performance.

13. Maintain active licensure and board certification (as appropriate).

THE PRECEPTOR-STUDENT RELATIONSHIP

The preceptor should maintain a professional relationship with the PA student and at all times adhere to appropriate professional boundaries. Social activities and personal relationships outside of the professional learning environment should be appropriate and carefully selected so as not to put the student or preceptor in a compromising situation. Contact through web-based social networking sites (e.g., Facebook, Instagram, etc.) should be avoided until the student fully matriculates through the educational program or completes the rotation where the supervision is occurring. If the preceptor and student have an existing personal relationship prior to the start of the rotation, a professional relationship must be maintained at all times in the clinical setting. Please consult the clinical coordinator regarding specific school or university policies regarding this issue.

ORIENTATION & COMMUNICATING STUDENT EXPECTATIONS

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

On the first day of the rotation (or when possible, prior to 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.

Early on in the clinical rotation, it is recommended that the preceptor and student formulate mutual goals in regards to what they hope to achieve during the rotation. The preceptor should also communicate his or her expectations of the student during the rotation. Expectations can include:

- Hours/Call Schedules
- Interactions with office and professional staff
- Overnight/weekend schedules
- Participation during rounds and conferences
- Expectations for clinical care, patient interaction, and procedures, oral presentations, written documentation
- Anything additional that the preceptor feels is necessary

Students are expected to communicate with preceptors any special scheduling needs they may have during the rotation — in particular, when they may be out of the clinical setting for either personal reasons or program-required educational activities. If students anticipate missing clinical time for personal reasons, they should alert the clinical coordinator well in advance of the clinic absence.

Many sites find it helpful to create their own written orientation manual, which is given to the student prior to the first day of the rotation.

PREPARING STAFF

The staff of an office or clinic has a key role in ensuring that each student has a successful rotation. By helping the student learn about office, clinic, or ward routines and the location of critical resources, they help a student become functional and confident. Students, like their preceptors, depend on staff for patient scheduling and assistance during a patient's visit. Students should communicate with the staff about procedures for making appointments, retrieving medical records, bringing patients into examination rooms, ordering tests, retrieving test results, and charting.

Preceptors should not assume that receptionists, schedulers, and nursing staff automatically know what role the student will have in a practice. The preceptor should inform the staff about how the student will interact with them and with patients.

SUPERVISION OF THE PA STUDENT

During a student's time at the clinic or hospital, the preceptor must be available for supervision, consultation, and teaching, or designate an alternate preceptor. Although the supervising preceptor may not be with a student during every shift, it is important to clearly *assign* students to another MD, DO, PA, or NP who will serve as the student's preceptor for any given time interval. In the case where supervision is not available, students may be given an assignment or may spend time with ancillary staff (x-ray, lab, physical therapy, etc.), as these experiences can be very 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 also 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 prior to 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. The PA student will not be allowed to see, treat, or discharge a patient without evaluation by the preceptor.

PROVIDING FEEDBACK TO STUDENTS

While students may have only one formal evaluation during the clinical rotation, it is imperative that they receive regular positive and constructive feedback on a daily basis from their preceptors to help improve their clinical performance.

STUDENT EVALUATION

The evaluation is an important component of the PA student's final grade for their rotation. On required rotations (i.e., core rotations required by the specific institution for all students prior to graduation), a passing evaluation from the preceptor is mandatory. If deemed "not passing," the student may be requested to repeat the rotation or undergo procedures or activities specified by the program, as determined by the area(s) of the rotation the student did not successfully pass. The final grade for a clinical rotation and the decision to pass or fail a student are ultimately made by the program faculty.

Preceptors are encouraged to discuss strengths and weaknesses so as to encourage students about their strengths as well as provide opportunities to improve upon weaknesses. The evaluation should also reflect on student knowledge and skills as well as their improvement throughout the rotation and assess progress in comparison to other students at the same level.

Preceptors should consider performing brief end-of-rotation evaluations privately with colleagues and staff to get additional insight into the student's professionalism and effectiveness as a team player with all members of the health care team. These comments are helpful contributions to student evaluations. Additionally, staff feedback may enhance the student experience from one rotation to another and can help to improve efficiency and flow while also maximizing educational opportunities.

INFORMED PATIENT CONSENT REGARDING STUDENT INVOLVEMENT IN PATIENT CARE

All efforts must be made to ensure patients are entitled to strict confidentiality, privacy, dignity and their preferences regarding treatment are honored. All students must complete HIPAA training before they are allowed to begin the clinical phase of the curriculum. Patients must be informed that a PA student will be participating in their care and their consent must be obtained. Consent may be obtained through standardized forms or on a person-by person basis.

Student must clearly identify themselves as PA students, both with their program-issued ID badge and verbally with patients. Patients reserve the right to refuse the PA student's services in their care and may request to see a physician, PA or other licensed clinician. Patients must know they will see a licensed provider during their encounter, regardless of whether or not they are seen by a PA student. They should have an explicit opportunity to decline student involvement.

STUDENT DOCUMENTATION

Preceptors are encouraged to allow PA students to document information in the medical record, as this is an integral part of the clinical educational experience. Preceptors should clearly understand how different payers view student notes related to documentation of services provided for reimbursement purposes. Any questions regarding this should be directed to the program's Director of Clinical Education.

All entries by the student into the medical record are part of the legal document. Students must identify their entries as "student" and must include the student's signature with the designation of "PA-S." The preceptor cannot bill for the services of the student. Preceptors are required to document the services they provide, as well as review and edit all student documentation. Preceptors must also specifically document that the student was supervised during the entirety of the visit. The review and critique of the student's documentation should be included in feedback to the student and in their assessment of the student, as appropriate.

UNC PA students receive EPIC training for UNCMC prior to entering the clinical phase of the curriculum. Should a practice have a different electronic medical record, the student may not be trained in that specific platform. If students are unable to participate in documenting in the official medical record, students are encouraged to review, if possible, documentation (as appropriate with HIPAA) pertaining to the patients whose care they are involved with.

MEDICARE DOCUMENTATION

CMS no longer requires clinicians serving as preceptors re-perform student-provided documentation. As of January 1, 2020, preceptors may now verify (sign and date) student documentation). Preceptors must first review all documentation for accuracy prior to verification. All physician, PA and nurse practitioner preceptors are allowed to verify medical record documentation provided by PA students. The preceptor does not have to be a PA to verify.

PRESCRIPTION WRITING

PA students may write or input electronic prescribing information for the preceptor. However, the preceptor *must* sign/send all prescriptions and the student's name may not appear on the prescription. The preceptor must personally sign and send the prescriptions after reviewing for appropriateness and accuracy.

EXPECTED PROGRESSION OF THE PA STUDENT

Students are trained in the preclinical phase of the curriculum to take detailed histories, perform physical examinations, give oral presentations of findings, develop differential diagnoses and, with assistance from their preceptors, formulate management plans. As students progress through their clinical phase, it is expected that they become more effective with developing assessments and plans.

If deemed appropriate by the preceptor, students may initially observe patient encounters. However, by the end of their first week on the rotation, they should be actively participating in the evaluation of patients. Based on the student's performance and the preceptor's comfort with their skills and abilities, students should progressively increase supervised autonomy. If the preceptor does not think the student is performing clinically at the expected level (based on training), they are encouraged to address this with the program's clinical team in a timely fashion.

PRECEPTOR-PROGRAM RELATIONSHIP

The success of clinical training of PA students depends on the maintenance of good communication between the student, the PA program clinical team and preceptors. Should a question or concern arise, the preceptor should contact the clinical team. Early and open communication about any issues will allow for the program to problem-solve without unduly burdening the preceptor or clinical site.

Additionally, preceptors are offered adjunct academic appointments through the Division of Physician Assistant Studies at the recommendation of the PA Program Director.

EXPECTATIONS OF STUDENTS

UNC PA students are expected to:

- 1) Adhere to all policies and procedures of the UNC PA Program and clinical site.
- 2) Student attendance is mandatory. Students should adhere to the [attendance policy](#) of the program and communicate with the clinical phase team and the preceptor appropriately regarding any absences.
- 3) Completion of HIPAA training, LMS modules and any other requirements for compliance at each clinical site.
- 4) Maintain up to date [immunizations](#).
- 5) Follow the professionalism standards of the PA profession and UNC PA program.
- 6) Adhere to the attire policies of the institution or clinical site.
- 7) Students must not function in the place of an employee or assume primary responsibility for a patient's care.
- 8) Students are expected to identify themselves as physician assistant students and are not permitted to function in other roles, regardless of any prior certifications or licensures.
- 9) Maintain patient confidentiality, in accordance with federal law.

STUDENT RESPONSIBILITIES ON ROTATIONS

In addition to the above expectations, students must also perform the following during their clinical rotations:

- 1) Obtain detailed histories, conduct physical exams, develop a differential diagnosis, formulate an

assessment and plan through discussion with the preceptor, give oral presentations, and document findings.

- 2) Assist or perform and interpret common lab results, diagnostics tests, or procedures.
- 3) Complete any assignments, tasks, and presentations as assigned by their preceptor.
- 4) Educate and counsel patients across the lifespan regarding health-related issues.
- 5) Attend and engage in clinical rotations as scheduled in addition to grand rounds, lectures, and conferences, if available to them.
- 6) Demonstrate emotional resilience and stability, adaptability, and flexibility during the clinical year.

STANDARDS OF PROFESSIONAL CONDUCT

PA students are required to conform to the highest standards of ethical and professional conduct required of certified PAs, in addition to the UNC PA Program-defined technical standards outlined earlier in this document. The professional conduct is a part of the ongoing evaluation of the PA students during their time in the program. Violations of standards of conduct are subject to disciplinary actions administered by the university and the physician assistant program.

If preceptors are concerned about a student's professionalism or conduct while on the rotation, please notify the Director of Clinical Education immediately.

DIVERSITY & INCLUSION STRATEGIES

The UNC PA Program is committed to growing diversity and inclusion among its faculty, students and preceptors. In an effort to educate PA students to provide all patients with compassionate and empathetic care, students must be provided with opportunities to demonstrate their ability to understand and care for diverse patient populations. Clinical preceptors can contribute to these efforts using some of the following strategies:

- 1) Recognize that students come from a variety of backgrounds with differences that contribute to variations in habits, practices, beliefs, and/or values.ⁱ
- 2) Encourage the PA student and preceptor to discuss personal biases and/or fears at the beginning of the rotation and ongoing as needed.
- 3) At the beginning of the rotation, the preceptor should discuss any considerations unique to the student's practice setting and patient population. Additionally, the preceptor may provide the student with suggested resources for further research on the unique practice settings and patient population.
- 4) Intentionally seek opportunities for students to care for patients with diverse backgrounds, habits, practices, beliefs, and/or values.
- 5) Engage the student in dialogue about their encounters with diverse patients and team members and provide formative feedback regarding their interactions and perceptions.

- 6) Encourage the student and preceptor to challenge their own beliefs and understand their impact on their care of patients and development as a compassionate, inclusive learner.
- 7) Provide opportunities for the student to interact with community outreach activities as available at the clinical site and in the local community.
- 8) Become a mentor for prospective PA students who are from underrepresented minority groups.
- 9) Encourage students and preceptors to engage in conversations about health equity and social determinants of health.

LIABILITY INSURANCE

Each student is fully covered for liability insurance by the UNC PA Program for any clinical site with a fully executed and valid affiliation agreement. Students completing a rotation with a preceptor or clinical site must maintain a “student” role and may not assume an employee’s responsibilities. This includes appropriate supervision with the preceptor of record and within the scope of the agreed-upon clinical experience. This relationship is vital to preserve the professional liability coverage provided by the program and is critical to protect both the student and the clinical site/preceptor. Students must not participate in patient care activities outside of the formal rotation assignment prior to PA program completion, as the liability insurance would not provide coverage to the student in these circumstances.

PA students must also not assume the role of a PA student while on duty as a paid employee if they maintain one in a different healthcare-related capacity at any time during their PA education. Liability insurance will not cover any student assuming the “PA student” role outside of an assigned clinical rotation. Additionally, PA students must not represent themselves based on any credentials obtained prior to PA school while engaged in program-associated clinical experiences.

APPENDIX A. POLICIES

Program policies apply to all students, program faculty and the program director, regardless of location except in circumstances where discrepancies exist at SCPE locations. SCPE policies may supersede those of the program.

INSTITUTIONAL POLICIES

[University Policy on Non-Discrimination](#)

[University Policy on Prohibited Discrimination, Harassment and Related Misconduct](#)

[Procedure for Accommodations Observances](#)

[Family Education Rights and Privacy Act \(FERPA\)](#)

PHYSICIAN ASSISTANT STUDIES POLICIES

[Jurisdiction of Program Policies](#)

[Student Mistreatment and Learning Environment Concern Policy and Process](#)

[Faculty Provisions for Medical Care of Students](#)

[Health Insurance Portability and Accountability Act \(HIPAA\)](#)

ACADEMIC, ASSESSMENT & GRADING POLICIES

[End of Rotation Examination Policy](#)

[Personal Health, Academic Performance Monitoring and Support Policy](#)

[Accommodations for Students with Disabilities](#)

[UNC-Chapel Hill Care Team Referral](#)

PROFESSIONALISM

[Attendance Policy](#)

[UNC Honor System and Student Conduct](#)

[Classroom and Clinical Setting Dress Policy](#)

[Email Etiquette Policy](#)

CLINICAL PHASE POLICIES

[Student Duty Hour Guidelines](#)

[Student Identification in the Clinical Learning Environment](#)

[Student Role in Classroom and SCPEs](#)

[Clinical Site Recruitment Policy](#)

[Student Employment Policy](#)

HEALTH AND SAFETY

INCIDENTAL FINDINGS POLICY

It is possible that, during a student's course of study, incidental medical findings may be noted. These incidental findings may include previously known or previously unknown pathological findings or normal

variants. These discoveries may occur in physical examination, point of care ultrasound, laboratory sessions or other educational settings. When an incidental finding is noted, faculty will maintain confidentiality and instruct the student to follow up with their primary care provider, student health or emergency services, as indicated for diagnosis and consideration of management. Any students privy to the incidental finding due to their engagement in the curricular activity that led to its finding shall maintain confidentiality as well.

In accordance with the [UNC PA Program Policy on Faculty Provision of Medical Care for Students](#), program faculty, Program Director and Medical Director are not permitted to provide the student medical care or access the student's health records unless in the event of an emergency.

[Student Exposures](#)

[UNC Campus Health: Blood Borne Exposure & Needlestick](#)

[Student Incident Report](#)

[Controlled Substance Abuse Policy](#)

[Student Urine Drug Screen Policy](#)

[Student Criminal Background Check Policy](#)

[Personal Security Policy](#)

ADVERSE EVENTS

[Adverse Event Policy](#)

[Hostile Intruder Policy and Procedures for UNC Chapel Hill Campus and Clinical Sites](#)

APPENDIX B: CLINICAL TEACHING RESOURCES

Preceptors are offered adjunct academic appointments through the Division of Physician Assistant Studies. This appointment provides preceptors with access to UNC School of Medicine resources. The [UNC Academy of Educators](#) is available to adjunct faculty and is committed to promoting and supporting the educational mission of the UNC School of Medicine.

Additional resources:

- [Preceptor development modules](#)
- [Physician Assistant Education Association preceptor resources](#)
- [RIME Framework](#)
- [UNC Academy of Educators Teaching Toolbox](#)

APPENDIX C: CLINICAL PHASE COURSE DESCRIPTIONS

*APPROPRIATE COURSE SYLLABI WILL BE DISTRIBUTED TO EACH PRECEPTOR INDIVIDUALLY

PASC 800 – FAMILY MEDICINE

CREDIT: 4 HOURS

CORE ROTATION

Students are introduced to the principles of and practice of ambulatory care and family medicine with an emphasis on disease prevention and health maintenance across the lifespan. The learner will refine techniques in history taking, physical examination and health behavior counseling. Many of these sites provide care for disadvantaged and underserved populations, thus exposing students to the diversity of the community and family health needs, as well as the occupational and environmental issues which influence health and healthcare decision making.

PASC 801 – INTERNAL MEDICINE

CREDIT: 4 HOURS

CORE ROTATION

Students are introduced to the principles of general internal medicine. The learner will apply knowledge and skills developed in the pre-clinical year with regards to patient evaluation and begin to apply patient management strategies in an assigned clinical setting, either inpatient or outpatient. Under the direction of a preceptor, the learners analyze patients, monitor progress, perform history and physical examinations and plan therapeutic interventions. Learners will also participate in consultations, writing orders, discharge planning and disposition regarding home care and follow-up.

PASC 802 – SURGERY

CREDIT: 4 HOURS

CORE ROTATION

Learners are provided with an experience in the management of patients with surgical issues. Each student will participate with the pre-operative, intra-operative (including surgical assistance to the surgeons, as indicated) and post-operative care of surgical patients. Learners will work as part of a surgical team and respond to emergency situations in various settings (emergency department, medical wards and operating room) with the team, as well as assist in the management of the surgical patient and discharge planning.

PASC 803 – PEDIATRICS

CREDIT: 4 HOURS

CORE ROTATION

Learners are provided with exposure to the care of neonates, infants, children and adolescents. Students further refine the skills of history taking and physical examination specific to the pediatric population. Learners assist with well-visits, evaluation of typical development and become familiar with disorders of

growth and development, as well as the evaluation and management of common pediatric disorders. Emphasis is placed on preventative care and family dynamics.

PASC 804 – WOMEN’S HEALTH AND PRENATAL CARE

CREDIT: 4 HOURS

CORE ROTATION

Learners are provided the opportunity to gain exposure and experience with common obstetric and gynecologic conditions. Included in this is screening for breast and gynecologic malignancies, menstrual patterns, infectious disease and family planning. Additionally, the learner participates in providing routine prenatal and obstetric care.

PASC 805 – PSYCHIATRY AND BEHAVIORAL MEDICINE

CREDIT: 4 HOURS

CORE ROTATION

The learner is exposed to and participates in the care of patients with psychiatric and psychosocial disorders. The student develops skill in counseling patients, communicating with family members of patients living with these conditions and management of common outpatient illnesses, including utilization of psychotropic therapeutics. Students will learn to identify and refer “at-risk” patients.

PASC 807 – EMERGENCY MEDICINE

CREDIT: 4 HOURS

CORE ROTATION

Learners are provided with an in-depth exposure to illnesses and injuries which necessitate emergent evaluation and intervention across the continuum of life. Students participate in all aspects of emergency medical care, including interviewing, examining and evaluating patients presenting to the emergency department. Emergent procedures and treatment will be guided by the clinical preceptor.

PASC 808/809/810 – MEDICINE ELECTIVES I, II & III

CREDIT: 4 HOURS EACH

In addition to the required core SCPEs, each learner completes two elective rotations. Students must work through appropriate programmatic channels for the identification of these sites. Students must *NOT* set up their own elective rotations. The UNC PA Program’s Academic Excellence Committee reserves the right to reassign a student’s elective SCPE(s) to place the student in an area of needed improvement as determined by the student’s performance during core SCPEs as below published standards for course outcomes and/or competencies.

PASC 820 – CLINICAL SEMINAR I

CREDIT: 1 HOUR

Clinical Seminar I is designed to augment the learner's SCPEs by reinforcing acquisition of medical knowledge, supporting development of interpersonal communication skills, distinguishing traits to promote professional excellence, implementing improvements in practice performance by applying critically appraised medical literature and recognizing the impact of systems-based processes on individual care. Topics are presented in a sequence to prepare students to transition from the role of the learner to that of an autonomous member of a physician/physician assistant team. Spring term.

As a complement to the SCPEs, students must complete courses in Basic Life Sciences (BLS), Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS) prior to beginning the clinical phase of the curriculum.

PASC 821 – CLINICAL SEMINAR II

CREDIT: 1 HOUR

Clinical Seminar II is designed to augment the learner's SCPEs by reinforcing acquisition of medical knowledge, supporting development of interpersonal communication skills, distinguishing traits to promote professional excellence, implementing improvements in practice performance by applying critically appraised medical literature and recognizing the impact of systems-based processes on individual care. Topics are presented in a sequence to prepare students to transition from the role of the learner to that of an autonomous member of a physician/physician assistant team. Summer term.

PASC 822 – CLINICAL SEMINAR III

CREDIT: 1 HOUR

Clinical Seminar III is designed to augment the learner's SCPEs by reinforcing acquisition of medical knowledge, supporting development of interpersonal communication skills, distinguishing traits to promote professional excellence, implementing improvements in practice performance by applying critically appraised medical literature and recognizing the impact of systems-based processes on individual care. Topics are presented in a sequence to prepare students to transition from the role of the learner to that of an autonomous member of a physician/physician assistant team. Fall term.

Each core SCPE includes multiple assignments, including an End-of-Rotation Examination to allow for frequent, objective and ongoing evaluation of student performance in meeting the program's learning outcomes and instructional objectives.
