Surviving & Thriving in Clinical Rotations Cynthia Booth Lord, MHS, PA-C Associate Professor & PA Program Director Case Western Reserve University School of Medicine



Conflict of Interest Disclosure

• Cynthia Booth Lord, MHS, PA-C has no conflicts of interest to disclose.

Description

 Lifelong learning is the ongoing, voluntary, and self-motivated pursuit of knowledge. It not only enhances personal development but also employability. Clinical rotations have a significant impact on a student's lifelong learning process so it is important to thrive, not just survive. Get an overview of helpful tips and pearls of wisdom for student entering the clinical phase of their education. Learn how to study during clinicals, how to elicit and act on feedback, and ultimately maximize the clinical experience.

Objectives

- •Define student and preceptor expectations during clinical training
- •Discuss the impact of clinical rotations on the student's learning process and life
- •Provide a framework on how to prepare for clinicals
- •Describe ways to maximize the clinical experience
- •Outline a strategy for getting feedback on clinicals
- •Outline strategies for studying during clinical rotations
- •Review resources for clinicals

Student & Preceptor Expectations

- •See lots of patients
- •Do lots of procedures
- •Be autonomous and independent
- •Get lots of feedback
- •One-on-one time
- •Get a good grade
- •Get a job offer

•Be prepared

- Read reference materials and current literature
- •Think on your feet
- •Be enthusiastic/inquisitive
- •Hardworking
- •Be flexible
- •Be patient
- •You will not see every patient the preceptor sees
- •Learning is a progression
- •Respect your place in the HC system and in patient care

First Impressions



Make Lasting Impressions





Preparing for Clinical Rotations

- Familiarize yourself with the community
 - Community characteristics
 - U.S. Census Bureau State and County Quick Facts at:
 - https://www.census.gov/quickfacts/fact/table/US/PST045219
 - What are the major public health issues impacting the community?
 - Community resources

US Census Quick Facts

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	QuickFacts United States					What's New	& FAQs >	
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		Population						
		Population estimates, July 1, 2019, (V2019)		32	8,239,523			
		Population estimates base, April 1, 2010, (V2019)		30	8,758,105			
		Population, percent change - April 1, 2010 (estimates base) to July 1, 2019, (V2019)			6.3%			
		Population, Census, April 1, 2010		30	8,745,538			
		Age and Sex						
		Persons under 5 years, percent			▲ 6.0%			
		Persons under 18 years, percent			A 22.3%			
		Persons 65 years and over, percent			▲ 16.5%			
		Female persons, percent			▲ 50.8%			
		Race and Hispanic Origin						Is this page helpful? X
		White alone, percent			A 76.3%			Yes No
		Black or African American alone, percent (a)			▲ 13.4%			

US Census Quick Facts

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	Population estimates, July 1, 2019, (V2019)	16,964	381,009	11,073	328,239,523	
	Race and Hispanic Origin					
	White alone, percent	▲ 6.4%	▲ 39.8%	▲ 47.3%	▲ 76.3%	
	White alone, percent					
	Black or African American alone, percent (a)	△ 91.0%	▲ 49.6%	▲ 49.3%	▲ 13.4%	
				▲ 49.3%▲ 0.3%	▲ 13.4% ▲ 1.3%	
	Black or African American alone, percent (a)	▲ 91.0%	▲ 0.5%			
	 Black or African American alone, percent (a) American Indian and Alaska Native alone, percent (a) 	▲ 91.0%▲ 0.2%	▲ 0.5%▲ 2.4%	▲ 0.3%	▲ 1.3%	
	 Black or African American alone, percent (a) American Indian and Alaska Native alone, percent (a) Asian alone, percent (a) Native Hawaiian and Other Pacific Islander alone, 	 ▲ 91.0% ▲ 0.2% ▲ 0.4% 	 ▲ 0.5% ▲ 2.4% ▲ 0.0% 	▲ 0.3% ▲ 1.5%	▲ 1.3%▲ 5.9%	
	 Black or African American alone, percent (a) American Indian and Alaska Native alone, percent (a) Asian alone, percent (a) Native Hawaiian and Other Pacific Islander alone, percent (a) 	 ▲ 91.0% ▲ 0.2% ▲ 0.4% ▲ 0.0% 	 ▲ 0.5% ▲ 2.4% ▲ 0.0% ▲ 4.3% 	▲ 0.3%▲ 1.5%▲ 0.0%	 ▲ 1.3% ▲ 5.9% ▲ 0.2% 	

Preparing for Clinical Rotations

- Familiarize yourself with Office/Institutional protocol
 - Student work space, reference materials
 - Dress code
 - Hours of operation
- Familiarize yourself with Office/Hospital Policies
 - Directions for medical documentation, *e*-Rxs, making referrals
 - How patients are selected for student to see
 - Length of time to spend with each patient
 - Absentee policy-how to reach preceptor, how to notify office

Maximizing the Clinical Experience

- Clarify preceptor expectations up front
 - Daily routine
 - Work hours
 - How does this differ from arrival time?
 - Student level of responsibility and autonomy in providing patient care
 - Rounds and night and weekend call
 - Amount of reading expected
 - Ask about preceptor preferred text(s) and/or articles

- Clarify Preceptor/Student Interaction
 - Format of case presentations
 - Time and process for feedback
 - Student self-evaluation before discussing preceptor evaluation

Maximizing the Clinical Experience

- Try to work with your preceptor to develop 4-6 achievable rotation objectives
 - Specific knowledge, skills, and attitudes to develop
 - Focus on those objectives for the rotation
 - Familiarize yourself with criteria included in your clinical evaluation form
 - Use a checklist to remember key points
- Seek meaningful feedback from preceptor
- Have a formal mid-term evaluation with review of rotation criteria

Use Your Skills and Tools

- Motivational interviewing
 - Readiness Ruler
 - OARS-Open questions, affirmation, reflective listening, and summary reflections
- Health Literacy
 - REALM-R
 - REALM-SF
 - SAHL-E
 - One-Question
- Medication coaching
 - Beers Guide

- Depression screening
 - PHQ-9
 - Geriatric depression scale
- Mental Status Assessment
 - Mini-Cog, MoCA, MMSE
- Screening for falls
 - Timed Up and Go (TUGS)
- Oral screening and fluoride varnish
- ADLs/IADLs
- Patient Safety

Quick Tip-Preceptor Feedback - The Four T's

•Time

- Ask for feedback in a timely manner
- Define time needed for feedback
- Avoid "can we talk about how I am doing?"

•Topic

- Be specific with your ask
- 1 to 3 areas to review in 5 to 15 minutes

Thoughtfulness

- Avoid "how am I doing"
- Conduct a self-assessment prior
- Open to all feedback

Take Action

• Take action with the feedback you receive

Getting Preceptor Feedback - The 4 T's

•Be honest and **thoughtful** before you ask;

•Define the <u>time</u> and the <u>topic</u> with your ask and,

•<u>Take action</u> on the feedback you receive from your ask.

Strategies for Studying in Clinicals

•Be wise and study efficiently!

•Utilize PA program clinical goals & objectives as your guide!

•Use the definition of the Medical Knowledge competency

•Utilize the NEW NCCPA "Blueprint" to guide your studying

•Medical Content Categories

• Task Categories

https://www.nccpa.net/pance-content-blueprint

Strategies for Studying in Clinicals

- Utilize the PAEA EOR "Blueprint" and "Topic lists"
 - <u>https://paeaonline.org/assessment/end-of-rotation/content/</u>



Emergency Medicine End of Rotation™ Exam Blueprint

Emergency Medicine 100-Question Exam	History & Physical	Diagnostic Studies	Diagnosis	Health Maintenance	Clinical Intervention	Clinical Therapeutics	Scientific Concepts	Totals	
		(15%)	(10%)	(25%)	(10%)	(10%)	(20%)	(10%)	(100%
Cardiovascular	(20%)	3	2	5	2	1	5	2	20
Orthopedics/rheumatology	(15%)	2	2	4	1	2	3	1	15
Gastrointestinal/nutritional	(10%)	1	1	2	1	1	2	2	10
Pulmonology	(10%)	2	1	2	1	1	2	1	10
Neurology	(8%)	1	1	2	0	1	2	1	8
ENOT/ophthalmology	(7%)	1	0	2	1	1	1	1	7
Jrology/renal	(6%)	1	0	1	1	1	1	1	6
Dermatology	(5%)	1	0	2	1	0	1	0	5
Endocrinology	(5%)	1	1	1	0	0	2	0	5



Emergency Medicine End of Rotation™ EXAM TOPIC LIST

CARDIOVASCULAR

Acute/subacute bacterial endocarditis	Heart failure				
Angina	Hypertensive emergencies				
Arrhythmias	Hypotension (cardiogenic shock, orthostation				
Cardiac tamponade	hypotension)				
Chest pain	Orthopnea				
Conduction disorders (atrial	Palpitations				
fibrillation/flutter, supraventricular	Pericardial effusion				
tachycardia, bundle branch block, ventricular	Peripheral vascular disease Syncope				
tachycardia/fibrillation, premature beats)					
Coronary heart disease (non-ST acute myocardial infarction, ST segment elevation acute myocardial infarction, angina pectoris,	Valvular disease (aortic stenosis, aortic regurgitation, mitral stenosis, mitral regurgitation)				
unstable angina, Prinzmetal/variant angina)	Vascular disease (aortic aneurysm/dissection				

Integrate Studying into Clinicals-Daily

- Laboratory Values
 - •CBC, Lytes, Lipids, INR, Renal fxn, BS, HbA₁C
- •X-ray/Diagnostic Studies
- Immunization Schedules
 - •Adult & Pediatric
- •Pediatric Developmental Milestones

•Unique Learning Opportunities

- •Grand Rounds
- •AM conference
- •Morning Report
- •Noon Conference
- Community activities
- •Preceptor evaluation/review

Top Ten List

Primary Care/FP

- Everything!
- Preventive medicine
- Health Counseling
- Acute respiratory infection
- Chronic abdominal pain
- Hypertension
- Hyperlipidemia
- Diabetes
- Thyroid disease
- Degenerative joint disease
- Oral Health

Internal Medicine

- Coronary artery disease
- Congestive heart failure
- Asthma
- COPD
- Diabetes
- Pneumonia
- Stroke/CVD
- Renal insufficiency
- Dementia
- Diverticular disease
- Gall bladder disease
- Cancer; Oral Health

Top Ten List

Pediatrics

- Newborn exam
- Well child exam
- Developmental milestones
- Fever
- Asthma
- Otitis media
- Pharyngitis; URI
- Viral gastroenteritis
- Rashes
- Oral Health

Obstetrics/Gynecology

- Stages of labor
- Pelvic exam
- Cervical cytology/Pap exam
- Vaginitis
- Abdominal pain
- DUB
- Amenorrhea
- Chronic pelvic pain
- Oral health

Top Ten List-Emergency Medicine

- •Acute upper respiratory infections/pharyngitis
- •Asthma
- •Fever
- •The acute abdomen
- Abdominal pain
- •Headache
- •Acute chest pain/MI
- •Mouth Pain/Oral Health

- Congestive heart failure
- GI bleed
 - Upper & Lower
- UTI
- Syncope

Top Ten List-Behavioral/Mental Health

- •Mini mental or MoCA
- •Mini mental
- •Mini mental!!!
- •Depression
- •Bipolar disorder
- •Anxiety
- •Schizophrenia

- •Dementia/Delirium
- •Personality disorders
- •Eating disorders
- •Substance Abuse
- Oral Health-"Meth Mouth"
 - Dry mouth from psych meds→ dry mouth

Top Ten List-Surgery

- •Anatomy
- •Acute abdomen
- •Fluid & Electrolytes
 - •Acid-Base disturbances
- •Shock
- •Wound healing

Knot tying
Post-op care
Post-op fever-5 W's
Read
The Acute Abdomen-Cope

Checklist of Common Diseases

- •Top 15 causes of death in the U.S. NVSR (cdc.gov)
- •Coronary Artery Disease
- •Hypertension
- •Stroke
- •Valvular Heart Disease
- •COPD

•Asthma

- •Renal Failure
- •Acid-Base Disorders
- •Influenza & Pneumonia

- •Diabetes Mellitus
- •Thyroid Disease
- •Osteoarthritis
- •GERD
- •Ulcer
- •Cancer
- •Headache
- •Back pain
- •Alzheimer's disease

Procedural Skills Checklist

- •Oral exam & fluoride varnish
- •Skin lesion excision
- •Toenail Excision
- •I & D of abscess
- •Thorocentesis
- •Paracentesis
- •ABG
- •Intubation
- •Central Line Placement
- •Chest tube insertion

- •IV catheterization
- •GU catheterization
- •NG Tube Insertion
- •Lumbar puncture
- •Injections
- •Suturing
- •Casting
- •GYN/pelvic exams
- •Rectal exams

Resources!

Apps, Books, On-line Resources

There's An App for That!

- Gestational age calculator-"wheel"
- Immunization schedules
- Discount Prescription Card
 - GoodRx
 - Singlecare
- Epocrates-Free version
 - Searchable drug reference
- QxMD-point of care tools
 - <u>http://www.qxmd.com/</u>

PA Clinical Rotation Guides

- The PA Rotation Exam Review. 1st ed. 2018. Wolters-Kluwer. \$79.99
- The Physician Assistant Student's Guide to the Clinical Year: (7-book series). Springer 2019.

EOR Exam & Board Review Books

- •Comprehensive Review for the Cert and Recert Exam for PAs (O'Connell)
- •PA Review for PANCE (Auth)
- •Davis's PA Exam Review (Diamond)
- •Lange Q&A PA Examination (Simon/Carlson/McMullen)
- •Physician Assistant Board Review (Van Rhee)

PA Board Review On-line Products

- HIPPO PA
 - AAPA PA PANCE/PANRE Review
- Rosh Review
- ExamMaster Advantage
- myCME Online Review Rutgers PANCE/PANRE Review
- PA Exam Prep

- Kaplan
 - PANCE/PANRE Qbank
 - Live On-line PANCE/PANRE Review
- Board Vitals PANCE/PANRE
- Online MedEd

And For Some Fun-Medical Eponyms

- Whonamedit.com -a free biographical dictionary of medical eponyms.
 - www.whonamedit.com

Conclusion

- "Primum non nocere"
- Respect the privilege of practicing medicine
- Conduct routine self-assessment
- Demonstrate insight about your knowledge base
- Make opportunities for studying/learning
- Have fun studying and make the most of your clinical experience.
- Good luck!