



Palliative Care Rotation

Palliative Care Rotation Information (including Rotation Learning Outcomes, Instructional Objectives, Preceptor Evaluation of Student Form, and Rotation-Specific Curriculum Integration Table)

Instructor of Record for Palliative Care Rotation:

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Palliative Care Clinical Rotation Topics

Cardiovascular System

Cardiomyopathy: Dilated, Hypertrophic, Restrictive, Stress

Conduction disorders/dysrhythmias: Atrial fibrillation, Atrial flutter, Atrial tachycardia, Atrioventricular block, Bradycardia, Bundle branch block, Idioventricular rhythm, Junctional, Premature contractions, QT prolongation, Sick sinus syndrome, Sinus arrhythmia, Torsades de pointes, Ventricular fibrillation, Ventricular tachycardia

Congenital heart disease: Atrial septal defect, Coarctation of aorta, Patent ductus arteriosus, Tetralogy of Fallot, Transposition of the great vessels, Ventricular septal defect

Coronary artery disease: Acute myocardial infarction, Angina pectoris, non-ST-segment elevation myocardial infarction, ST-segment elevation myocardial infarction, Unstable angina, Atherosclerosis

Heart failure

Hypertension: Primary hypertension, Secondary hypertension, Hypertensive emergencies,

Hypotension: Orthostatic hypotension, Vasovagal hypotension

Shock: Cardiogenic, Distributive, Hypovolemic, Obstructive

Traumatic, infectious, and inflammatory heart conditions: Cardiac tamponade, Infective endocarditis, Myocarditis, Pericardial effusion, Pericarditis

Valvular disorders: Aortic, Mitral, Pulmonary, Tricuspid

Vascular disease: Aortic aneurysm/dissection, Arterial embolism/thrombosis, Arteriovenous malformation, Deep vein thrombosis, Peripheral artery disease, Phlebitis/thrombophlebitis,

Varicose veins, Venous insufficiency

Dermatologic System

Papulosquamous disorders: Contact dermatitis, Drug eruptions,
Skin integrity: Pressure ulcers
Vascular abnormalities: Stasis dermatitis,

Endocrine System

Neoplasms: Multiple endocrine neoplasia, Neoplastic syndrome, Primary endocrine malignancy

Eyes, Ears, Nose, and Throat

Neoplasms: Benign, Malignant

Gastrointestinal System/Nutrition

Colorectal disorders: Abscess/fistula, Anal fissure, Constipation, Diverticular disease, Fecal impaction/incontinence, Ischemic bowel disease, Obstruction, Polyp, Rectal prolapse, Toxic megacolon

Diarrhea

Esophageal disorders: Esophagitis, Gastroesophageal reflux disease, Mallory-Weiss tear,
Motility disorders, Strictures, Varices, Zenker diverticulum

Gastric disorders: Gastritis, Gastrointestinal bleeding

Hepatic disorders: Acute hepatitis, Chronic hepatitis, Cirrhosis, Portal hypertension

Hyperemesis

Neoplasms: Benign, Malignant

Nutritional and vitamin disorders: Food allergies and food sensitivities,

Hypervitaminosis/hypovitaminosis, Malabsorption, Refeeding syndrome

Pancreatic disorders: Acute pancreatitis, Chronic pancreatitis

Genitourinary System

Bladder disorders: Incontinence

Neoplasms: Bladder, Penile, Prostate, Testicular

Hematologic System

Neoplasms, premalignancies, and malignancies: Acute/chronic lymphocytic leukemia,
Acute/chronic myelogenous leukemia, Lymphoma, Multiple myeloma, Myelodysplasia
Transfusion Reaction

Musculoskeletal System

Neoplasms: Malignant, Paget disease of bone

Neurologic System

Cerebrovascular disorders: Arteriovenous malformation, Cerebral aneurysm, Coma,
Hydrocephalus, Intracranial hemorrhage, Stroke, Syncope, Transient ischemic attack

Neoplasms: Malignant

Nerve disorders: Complex regional pain syndrome, mononeuropathies, peripheral neuropathies

Neurocognitive disorders: Cognitive impairment, Delirium

Seizure disorders: Focal seizure, Generalized seizures, Status epilepticus

Psychiatry/Behavioral Science

Anxiety disorders: Generalized anxiety disorder, Panic disorder, Phobias

Depressive disorders: Major depressive disorder, Persistent depressive disorder (dysthymia),

Suicidal/homicidal behaviors

Feeding and eating disorders

Sleep-wake disorders

Trauma- and stressor-related disorders: Adjustment disorders, Bereavement, Post-traumatic stress disorder

Pulmonary System

Acute respiratory distress syndrome

Infectious disorders:

- Acute bronchiolitis

- Acute bronchitis

- Acute epiglottitis

- Croup

- Empyema

- Influenza

- Pertussis

- Pneumonias: Bacterial, Fungal, HIV-related, Viral

- Respiratory syncytial virus infection

- Tuberculosis

Neoplasms: Benign, Malignant, Carcinoid tumors

Obstructive pulmonary diseases: Asthma, Chronic obstructive pulmonary disease, Cystic fibrosis

Pleural diseases

Pulmonary circulation: Cor pulmonale, Pulmonary edema, Pulmonary embolism, Pulmonary hypertension

Restrictive pulmonary diseases: Idiopathic pulmonary fibrosis, Pneumoconiosis, Sarcoidosis

Sleep apnea

Renal System

Acid base disorders

Acute kidney injury and acute renal failure: Intrinsic, Prerenal, Postrenal

Chronic kidney disease/end-stage renal disease

Congenital or structural renal disorders: Horseshoe kidney, Hydronephrosis, Polycystic kidney disease

Electrolyte disorders

Fluid imbalances

Neoplasms: Renal cell carcinoma, Wilms tumor

Renal vascular disease

Reproductive System

Neoplasms of the breast and reproductive tract: Malignant

Palliative Care Clinical and Technical Skills

Palliative Care Skills	
Clinical Skills	
	Elicit a detailed and accurate patient history on palliative care patient (RLO2)
	Perform an appropriate physical examination on palliative care patient (RLO2)
	Interpret diagnostic tests common to palliative care patients (RLO3, Clinical and Technical Skills Checklist)
	Select appropriate medications (RLO3)
	Select appropriate dose for medications (RLO3)
Technical Skills	
	Perform a venipuncture

Palliative Care Rotation Learning Outcomes and Instructional Objectives

Rotation Learning Outcomes	Instructional Objectives
<p>Students will demonstrate medical knowledge of the pathophysiology, etiology, epidemiology, patient presentation, differential diagnosis, diagnostic work-up, patient management, health promotion, and disease prevention for common conditions (listed in Palliative Care Clinical Rotation Topics above) encountered in palliative care.</p>	
	<p>Palliative Care instructional objective: Explain the pathophysiology of the clinical presentations of conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO3)</p>
	<p>Palliative Care instructional objective: Describe the etiology and epidemiology of the clinical conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO3)</p>
	<p>Palliative Care instructional objective: Distinguish normal aging from pathologic process. (MK-PLO3)</p>
	<p>Palliative Care instructional objective: Identify the patient presentation of conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO3)</p>
	<p>Palliative Care instructional objective: Differentiate how disease processes of conditions listed in the Palliative Care Clinical Rotation Topics (above) may present. (MK-PLO3)</p>
	<p>Palliative Care instructional objective: Explain the appropriate diagnostic workup of the clinical conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO3)</p>
	<p>Palliative Care instructional objective: Formulate a differential diagnosis for patient presentations of conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO3)</p>

	Palliative Care instructional objective: Compare and contrast the risks and benefits of diagnostic studies and treatment plans for conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO3)
	Palliative Care instructional objective: Summarize the indications and contraindications of procedures commonly used in the treatment of conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK PLO-2)
	Palliative Care instructional objective: Compare and contrast the risks and benefits of procedures indicated for conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK PLO-3)
	Palliative Care instructional objective: Outline the appropriate management of the clinical conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO3)
	Palliative Care instructional objective: Identify the common medication problems specific to palliative care, including polypharmacy, potential toxic interactions of drugs, compliance issues, and the complexity of new medication prescribing. (MK-PLO3)
	Palliative Care instructional objective: Describe health promotion in relation to the management of the clinical conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO3)
	Palliative Care instructional objective: Describe disease prevention for clinical conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO3)
	Palliative Care instructional objective: Identify national screening guidelines for the applicable clinical conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK-PLO2)
	Palliative Care instructional objective: Recognize when it is appropriate to obtain informed consent.
	Palliative Care instructional objective: Discuss medications commonly used in the treatment of conditions listed in the Palliative Care Clinical Rotation Topics (above), including indications, contraindications, possible drug interactions, mechanism of action, most common side effects, need for laboratory monitoring, and appropriate dosages. (MK PLO-3)

	Palliative Care instructional objective: Interpret and apply healthcare guidelines for relevant conditions in the Palliative Care Clinical Rotation topics (above). (MK PLO-3)
	Palliative Care instructional objective: Select appropriate prescription medication(s) and dosing for the treatment of conditions listed in the Palliative Care Clinical Rotation Topics (above). (MK PLO-3)
	Palliative Care instructional objective: Actively participate in the management of patients. (MK- PLO3)
Students will elicit a detailed and accurate patient history, perform an appropriate physical examination, appropriately use and interpret diagnostic testing and laboratory studies, and formulate differential diagnoses and assessment plans for symptoms/conditions (listed in Palliative Care Clinical Rotation Topics above) commonly encountered in patients seeking care in an palliative care setting.	
	Palliative Care instructional objective: Demonstrate an age-appropriate problem-focused history and physical exam for patients in a palliative care setting. (PC PLO-1, PC-PLO-2)
	Palliative Care instructional objective: Select and interpret appropriate diagnostic and laboratory studies for conditions listed in the Palliative Care Clinical Rotation Topics (above) for patients in a palliative care setting. (PC-PLO3)
	Palliative Care instructional objective: Formulate an appropriate differential diagnosis based on history, physical examination, diagnostic data, and clinical reasoning for patients in a palliative care setting. (PC-PLO4)
	Palliative Care instructional objective: Develop an appropriate assessment, management care plan, and disposition of patients, given all pertinent medical data, including history, physical

	exam, laboratory, and diagnostic data in a palliative care setting. (PC-PLO4)
	Palliative Care instructional objective: Actively participate in the management of patients with conditions listed in the Palliative Care Clinical Rotation Topics (above) in a palliative care setting. (PC- PLO4)
Students will perform the following technical skill: perform a venipuncture.	
	Palliative care instructional objective: Explain the indications and contraindications for venipuncture and identify appropriate sites for blood collection based on patient factors. (PC-PLO5)
	Palliative care instructional objective: Prepare the patient and equipment, including verifying identity, explaining the procedure, selecting appropriate supplies, and using proper infection-control techniques. (PC-PLO5)
	Palliative care instructional objective: Demonstrate correct venipuncture technique, including vein palpation, tourniquet application, site cleansing, needle insertion, blood collection, and needle removal. (PC-PLO5)
	Palliative care instructional objective: Collect an adequate sample while maintaining specimen integrity, using appropriate tube order, mixing requirements, and preventing hemolysis or contamination. (PC-PLO5)
	Palliative care instructional objective: Ensure patient comfort and safety, including minimizing discomfort, applying post-procedure pressure or dressing, and monitoring for immediate complications. (PC-PLO5)
	Palliative care instructional objective: Recognize and manage complications, such as hematoma formation, vasovagal reactions, failed attempts, or accidental needle sticks, following institutional safety protocols. (PC-PLO5)
Students will document information clearly and appropriately in palliative care.	

	Palliative Care instructional objective: Document an acute problem-focused medical note for patients. (ICS-PLO2)
	Palliative Care instructional objective: Document a chronic problem-focused medical note. (ICS-PLO2)
	Palliative Care instructional objective: Document information clearly and accurately at an appropriate level for patients, colleagues, and teachers. (ICS-PLO2)
	Palliative Care instructional objective: Document care plans for patients with multiple conditions, ensuring integration of comorbidities and prioritization of care needs." (ICS-PLO2)
	Palliative Care instructional objective: Document medical information in a manner that synthesizes large volumes of data and summarizes complex care plans, tailored to a palliative care setting. (ICS-PLO2)
Students will listen empathetically and effectively, communicate clearly, utilize shared decision-making, and provide patient education and patient counseling for patients seeking care in palliative care.	
	Palliative Care instructional objective: Utilize open-ended questions, active listening, and empathetic communication to elicit patient preferences, values, goals, and concerns while providing space for patients to fully articulate their thoughts without interruption. (ICS-PLO1)
	Palliative Care instructional objective: Communicate complex medical information clearly and comprehensively, using plain language and avoiding medical jargon, while tailoring the content and delivery to the patient's level of understanding and health literacy. (ICS-PLO3)
	Palliative Care instructional objective: Deliver clear, concise, and well-organized oral case presentations using a structured format, ensuring the inclusion of pertinent patient information to effectively communicate with preceptors and the healthcare team, fostering collaboration and continuity of care. (ICS-PLO3)

	Palliative Care instructional objective: Identify and address communication barriers with diverse patient populations and adapt communication style and information context to ensure understanding, effective interaction, and culturally sensitive care. (ICS PLO-3)
	Palliative Care instructional objective: Collaborate with the patient and family to identify realistic goals, develop a shared understanding of diagnoses and treatment options, and explain the risks and benefits of diagnostic studies and treatments, while demonstrating empathetic listening to clarify misconceptions and address concerns or fears. (ICS PLO-5)
	Palliative Care instructional objective: Deliver age-appropriate patient-centered education and counseling, including health promotion, disease prevention, and evidence-based written materials tailored to the patient's needs and health literacy, to patients seeking care in palliative care. (ICS-PLO5)
	Palliative Care instructional objective: Provide patient-centered counseling that addresses emotional, psychological, and social concerns (ICS-PLO5)
	Palliative Care instructional objective: Assess patient understanding of medical information and treatment plans and address any gaps in comprehension (ICS-PLO3)
Students will facilitate difficult health care conversations in palliative care.	
	Palliative Care instructional objective: Establish rapport and trust with patients and their family members by demonstrating empathy, active listening, and respect for their emotions, perspectives, and concerns while maintaining professionalism and objectivity. (ICS PLO-4)
	Palliative Care instructional objective: Create a supportive environment conducive to open and honest dialogue, ensuring that the patient and their family feel comfortable expressing their thoughts, emotions, and preferences. (ICS PLO-4)
	Palliative Care instructional objective: Demonstrate sensitivity and cultural competence in addressing sensitive topics, such as end-of-life care, advance directives, or difficult treatment

	decisions, while respecting diverse perspectives and values. (ICS PLO-4)
	Palliative Care instructional objective: Provide emotional support and connect patients and their families with appropriate resources to help them cope with difficult emotions and navigate the healthcare system effectively. (ICS PLO-4)
Students will demonstrate compassion, integrity, respect, patient responsiveness, and accountability while providing care to patients in palliative care.	
	Palliative Care instructional objective: Demonstrate empathy, understanding, compassion, and sensitivity to the emotional, social, developmental, cultural, and diverse backgrounds of patients and their families, including age, gender, and disabilities. (P-PLO1)
	Palliative Care instructional objective: Respect patient confidentiality and privacy, ensuring that sensitive information is handled appropriately and securely. (P-PLO1)
	Palliative Care instructional objective: Use inclusive language and cultural sensitivity when interacting with patients and their families to foster trust and respect. (P-PLO1)
	Palliative Care instructional objective: Exhibit professionalism in interactions with patients, families, and healthcare team members, including maintaining appropriate dress, punctual attendance, and a professional attitude in all clinical settings. (P-PLO1)
	Palliative Care instructional objective: Prioritize patient care over personal comfort or preferences, demonstrating a willingness to adjust schedules or extend work hours to accommodate patient needs. (P-PLO2)
	Palliative Care instructional objective: Demonstrate flexibility, attentiveness, and responsiveness in addressing patient concerns and unexpected changes. (P-PLO2)

	Palliative Care instructional objective: Take accountability for actions, decisions, and the quality of care provided, ensuring continuous evaluation and improvement. (P-PLO3)
	Palliative Care instructional objective: Evaluate and integrate community resources to support patient care in palliative care. (P PLO-3)
	Palliative Care instructional objective: Demonstrate motivation and desire to learn. (P PLO-3)
	Palliative Care instructional objective: Demonstrate knowledge of the legal and regulatory requirements of the role of a physician assistant. (P-PLO4)
	Palliative Care instructional objective: Exhibit integrity by adhering to ethical standards, acting with honesty, and maintaining professional accountability in all interactions and decisions." (P-PLO1)
Students will (a) seek, implement, and accept feedback, (b) reflect on performance and develop plans for self-improvement, and (c) locate, appraise, and integrate evidence-based studies related to palliative care.	
	Palliative Care instructional objective: Proactively seek feedback from their preceptor on clinical performance, communication skills, and professional behavior, demonstrating openness to constructive criticism and willingness to apply it to improve. (PBL PI-PLO1)
	Palliative Care instructional objective: Develop action plans based on feedback including specific goals and timelines for implementation. (PBL PI-PLO1)
	Palliative Care instructional objective: Recognize personal and professional limitations, and locate assistance from preceptors, colleagues, and reference materials to address areas needing improvement. (PBL PI-PLO1)
	Palliative Care instructional objective: Monitor progress towards goals over time, adjusting action plans as necessary based on ongoing reflection and feedback. (PBL PI PLO-2)

	Palliative Care instructional objective: Develop the ability to learn from practice. (PBL PI PLO-2)
	Palliative Care instructional objective: Demonstrate lifelong learning by interpreting independent readings, assessing medical evidence, and applying decision-making tools to provide evidence-based patient care in palliative care. (PBL PI-PLO3)
	Palliative Care instructional objective: Recognize the importance of lifelong learning in the medical field. (PBL PI PLO-3)
	Palliative Care instructional objective: Assess and effectively communicate medical evidence to patients, colleagues, and healthcare teams to support shared decision-making and patient care. (PBL PI PLO-3)
	Palliative Care instructional objective: Utilize medical information technology to access and appraise online medical resources, enhance personal education, support clinical decision-making, and educate patients. (PBL PI PLO-3)
In a palliative care setting, students will (a) promote a safe environment, (b) demonstrate knowledge of quality improvement methodologies and metrics, (c) recognize the unique role of PAs and other health professions, (d) work effectively with other health professionals to provide collaborative, patient-centered care, (e) incorporate considerations of cost awareness and funding, and (g) describe basic health payment systems and practice models.	
	Palliative Care instructional objective: Operate under the rules of HIPAA to preserve patient confidentiality in a palliative care setting. (SBP PLO-1)

	Palliative Care instructional objective: Practice according to policy and procedures set forth by the health care facility. (SBP PLO-1)
	Palliative Care instructional objective: Identify barriers and challenges to implementing quality improvement initiatives in a palliative care setting and propose strategies to overcome them. (SBP PLO-2)
	Palliative Care instructional objective: Discuss the appropriate use of controlled substances and statewide tracking systems to ensure ethical and legal patient care in a palliative care setting. (SBP PLO-2)
	Palliative Care instructional objective: Encourage a culture of safety and collaboration within the healthcare team by promoting open communication, error reporting, mutual respect, and teamwork while providing patient-centered care in a palliative care setting. (SBP-PLO3)
	Palliative Care instructional objective: Identify the steps of the referral process for patients and the roles of other healthcare professionals in the participation of your patient's care in a palliative care setting. -(SBP-PLO3)
	Palliative Care instructional objective: Employ a professional relationship with the preceptors and other healthcare team members in a palliative care setting. (SBP-PLO4)
	Palliative Care instructional objective: Efficiently manage patient flow and clinic scheduling to optimize access to care and minimize wait times for patients seeking care in a palliative care setting. (SBP-PLO5)
	Palliative Care instructional objective: Communicate effectively with administrative staff, medical assistants, and other members of the healthcare team to coordinate patient care activities and ensure smooth health care operations in a palliative care setting. (SBP-PLO4, SBP-PLO5)
	Palliative Care instructional objective: Evaluate cost-effective healthcare resources that do not compromise the quality of care for patients in a palliative care setting. (SBP PLO-6)
	Palliative Care instructional objective: Discuss treatment options for patient care in an unbiased manner, considering both clinical effectiveness and cost implications and involving patients in shared decision-making in a palliative care setting. (SBP PLO-6)

	Palliative Care instructional objective: Describe common practice models in a palliative care setting. (SBP PLO-6)
	Palliative Care instructional objective: Demonstrate an understanding of the roles and responsibilities of PAs and other healthcare professionals in a palliative care setting. (SBP PLO-6)
	Palliative Care instructional objective: Choose appropriate billing codes for payment services under the direct supervision of the preceptor in a palliative care setting. (SBP-PLO7)
	Palliative Care instructional objective: Identify funding sources and payment systems, including eligible patient populations for Medicaid and Medicare, in a palliative care setting (SBP-PLO7)

Palliative Care Rotation Curriculum Integration Table

Rotation Learning Outcome	Assessment Method (Benchmark Requirements)	PAS Program Goal	PAS Program Learning Outcome (ARC-PA)/Student Learning Outcomes (GVSU)
Students will demonstrate medical knowledge of the pathophysiology, etiology, epidemiology, patient presentation, differential diagnosis, diagnostic work-up, patient management, health promotion, and disease prevention for common conditions (listed in Palliative Care Clinical Rotation Topics above) encountered in palliative care.	Preceptor Evaluation (80% average score on Medical Knowledge competency section)	Medical Knowledge and Competence in Patient Care	MK #2
			MK#3
Students will elicit a detailed and accurate patient history, perform an appropriate physical examination, appropriately use and interpret diagnostic testing and laboratory studies, and formulate differential diagnoses and assessment plans for symptoms/conditions (listed in Palliative Care Clinical Rotation Topics above) commonly encountered	Preceptor Evaluation (80% average score on Patient Care competency section)	Medical Knowledge and Competence in Patient Care	PC #1
			PC #2
			PC #3
			PC #4

in patients seeking care in an palliative care setting.			
Students will perform the following technical skill: perform a venipuncture.	Preceptor Evaluation (80% average score on Patient Care competency section)	Medical Knowledge and Competence in Patient Care	PC #5
Students will document information clearly and appropriately in palliative care.	Preceptor Evaluation (80% average score on Interpersonal and Communication Skills competency section)	Medical Knowledge and Patient Care	ICS#2
Students will listen empathetically and effectively, communicate clearly, utilize shared decision-making, and provide patient education and patient counseling for patients seeking care in palliative care.	Preceptor Evaluation (80% average score on Interpersonal and Communication Skills competency section)	Medical Knowledge and Patient Care	ICS #1
		Collaborative Practice	ICS #3
			ICS #5
Students will facilitate difficult health care conversations in palliative care.	Preceptor Evaluation (80% average score on Interpersonal and Communication Skills competency section)	Collaborative Practice	ICS #4
Students will demonstrate compassion, integrity, respect, patient responsiveness, and accountability while providing care to patients in palliative care.	Preceptor Evaluation (80% average score on Professionalism competency section)	Professionalism	P #1
			P #2
			P #3

Students will (a) seek, implement, and accept feedback, (b) reflect on performance and develop plans for self-improvement, and (c) locate, appraise, and integrate evidence-based studies related to palliative care.	Preceptor Evaluation (80% average score on Practice-Based Learning and Proficiency Improvement competency section)	Lifelong Learning	PBLPI #1
			PBLPI #2
			PBLPI #3
In a palliative care setting, students will (a) promote a safe environment, (b) demonstrate knowledge of quality improvement methodologies and metrics, (c) recognize the unique role of PAs and other health professions, (d) work effectively with other health professionals to provide collaborative, patient-centered care, (e) incorporate considerations of cost awareness and funding, and (g) describe basic health payment systems and practice models.	Preceptor Evaluation (80% average score on Systems-Based Practice competency section)	Medical Knowledge and Patient Care	SBP #1
			SBP #6
		Lifelong Learning	SBP #2
		Collaborative Practice	SBP #3
			SBP #4
			SBP #5
			SBP #7

Palliative Care Preceptor Evaluation of Student

Palliative Care Preceptor Evaluation of the Student						
What is your group and/or site name (i.e., Corewell Health Greenville Hospital Multispecialty Center - Oak St, Family Medicine)						
Medical Knowledge: This section evaluates the student's ability to demonstrate medical knowledge, clinical reasoning, and problem-solving ability of sufficient breadth and depth to practice medicine as an entry-level physician assistant						
	60%	70%	80%	90%	100%	N/A
	(Failing)	(D+/- C-)	(C+/- B)	(B+/- A-)	(A)	
Student demonstrated medical knowledge in pathophysiology, etiology, and epidemiology for patients seeking medical care for common conditions encountered in palliative care (MK#2, 3):						
Student demonstrated medical knowledge of patient presentations for common conditions encountered in palliative care (MK#2,3):						
Student demonstrated medical knowledge of differential diagnosis for patients seeking medical care for common conditions encountered in palliative care (MK#2,3)						
Student demonstrated medical knowledge of the diagnostic work-up for patients seeking medical care for common conditions encountered in palliative care (MK#2,3)						
Student demonstrated medical knowledge of patient management strategies for patients seeking medical care for common conditions encountered in palliative care (MK#2,3):						

Student demonstrated medical knowledge of health promotion and disease prevention for patients seeking medical care for common conditions encountered in palliative care (MK#2, 3)						
Additional Comments:						
Patient Care: This section evaluates the student’s ability to provide person-centered care that includes patient- and setting-specific assessment, evaluation, management, and health promotion.						
	60%	70%	80%	90%	100%	N/A
	(Failing)	(D+/ C-)	(C+/ B)	(B+/ A-)	(A)	
Student elicited a detailed and accurate history for populations encountered in palliative care (PC#1).						
Student elicited a detailed and accurate history for patients encountered in palliative care (PC#1).						
Student performed an appropriate physical examination for populations encountered in palliative care (PC#1).						
Student performed an appropriate physical examination for patients seeking care in palliative care (PC#1).						
Student demonstrated knowledge of the appropriate use and interpretation of diagnostic testing for populations encountered in palliative care (PC#3).						
Student demonstrated knowledge of the appropriate use and interpretation of diagnostic testing						

for patients seeking care in palliative care (PC#3).						
Student demonstrated knowledge of the appropriate use and interpretation of laboratory studies for populations encountered in palliative care (PC#3).						
Student demonstrated knowledge of the appropriate use and interpretation laboratory studies for patients seeking care in palliative care (PC#3).						
Student organized information from the interview, diagnostic testing, and physical examination to formulate differential diagnoses for populations encountered in palliative care (PC#4).						
Student organized information from the interview, diagnostic testing, and physical examination to formulate differential diagnoses for patients seeking care in palliative care (PC#4).						
Student organized information from the interview, diagnostic testing, and physical examination to formulate assessments for symptoms/conditions commonly encountered for populations encountered in palliative care (PC#4):						
Student organized information from the interview, diagnostic testing, and physical examination to formulate assessments for symptoms/conditions commonly						

encountered for patients seeking care in palliative care (PC#4).						
Student organized information from the interview, diagnostic testing, and physical examination to formulate management plans for symptoms/conditions commonly encountered for populations encountered in palliative care (PC#4).						
Student organized information from the interview, diagnostic testing, and physical examination to formulate management plans for symptoms/conditions commonly encountered for patients seeking care in palliative care (PC#4).						
Student demonstrated basic clinical and technical skills common to palliative care including (PC#5):						
Perform a venipuncture						
Selecting appropriate medications						
Selecting appropriate medication dosages						
Prescribe medications.						
Additional Comments:						
Interpersonal and Communication Skills: This section evaluates the student’s ability to demonstrate verbal and non-verbal communication skills needed to have respectful, compassionate, and effective conversations with patients, patients’ families, and health professionals to exchange information and make medical decisions.						
	60%	70%	80%	90%	100%	N/A
	(Failing)	(D+/ C-)	(C+/ B)	(B+/ A-)	(A)	

Student documented information clearly and appropriately for patient encounters (ICS#2).						
Student listened empathetically and effectively to patients seeking care in palliative care (ICS#1)						
Student communicated information clearly in palliative care (ICS#3)						
Student utilized shared decision making for patients seeking care in palliative care (ICS#5)						
Student provided patient education and counseling for patients seeking care in palliative care (ICS#5)						
Student facilitated difficult health care conversations in palliative care (ICS#4):						
Additional Comments:						
Professionalism: This section evaluates the student's ability to demonstrate commitment to carrying out professional responsibilities and adhering to ethical principles and practices in palliative care.						
	60%	70%	80%	90%	100%	N/A
	(Failing)	(D+/ C-)	(C+/ B)	(B+/ A-)	(A)	
Student demonstrated compassion, integrity, and respect to patients seeking care in palliative care (P#1)						
Student demonstrated patient responsiveness while providing care to patients in palliative care (P#2)						
Student showed accountability while providing care to patients in palliative care (P#3)						
Additional Comments:						
Practice-Based Learning and Proficiency Improvement: This section evaluates the student's ability to acquire, appraise, and apply evidence-based medicine to patient care and accurately assess and improve clinical performance based on constant self-evaluation and lifelong learning.						

	60%	70%	80%	90%	100%	N/A
	(Failing)	(D+/ C-)	(C+/ B)	(B+/ A-)	(A)	
Student sought, implemented, and accepted feedback related to undeserved medicine (PBLPI#1)						
Student reflected on their performance to identify strengths and deficiencies in their knowledge and expertise and develop a plan for self-improvement related to palliative care (PBLPI#2)						
Student located, appraised, and integrated evidence-based studies related to palliative care (PBLPI#3)						
Additional Comments:						
Systems-Based Practice: This section evaluates the student’s ability to engage with other healthcare professionals in a manner that optimizes care within the context of the larger healthcare system.						
	60%	70%	80%	90%	100%	N/A
	(Failing)	(D+/ C-)	(C+/ B)	(B+/ A-)	(A)	
Student promoted a safe environment for patients seeking care in an palliative care setting (SBP#1)						
Student demonstrated knowledge of quality improvement methodologies and metrics in an palliative care setting (SBP#2)						
Student recognized the unique roles of PAs and those of other healthcare professions in an palliative care setting (SBP#3)						

Student worked effectively with other health professionals to provide collaborative, patient-centered care in an palliative care setting (SBP#4)						
Student worked effectively in an palliative care setting (SBP#5)						
Student incorporated considerations of cost awareness and funding sources into patients seeking care in an palliative care setting (SBP#6)						
Student described basic health payment systems and practice models for an palliative care setting (SBP#7)						
Additional Comments:						
<p>Did the student have any absences during the rotation?</p> <p style="text-align: center;">Yes</p> <p style="text-align: center;">No</p> <p>If yes, please indicate dates and reason for absence:</p> <p>Please write a short note commenting on this student's particular strengths.</p> <p>Please write a short note commenting on this student's particular areas for improvement.</p> <p>Was this evaluation discussed with the student?</p> <p style="text-align: center;">Yes</p> <p style="text-align: center;">No</p> <p>Additional comments</p> <p>Preceptor Signature:</p>						