

## **Elective Pediatric Intensive Care Rotation Information and Instructional Objectives**

### **Instructor of Record for Elective Pediatric Intensive Care Rotation:**

Amanda Reddy, MS, PA-C

Phone: 616-438-1345

Office Location: CHS 222

Email: [redhya@gvsu.edu](mailto:redhya@gvsu.edu)

### **Elective Pediatric Intensive 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, Heart failure

Hypertension: Secondary hypertension, Hypertensive emergencies

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, , Venous insufficiency

#### **Endocrine System**

Adrenal disorders: Pheochromocytoma, Primary adrenal insufficiency

Diabetes mellitus: Type 1, Type 2

Hypogonadism

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

Parathyroid disorders: Hyperparathyroidism, Hypoparathyroidism

Pituitary disorders: Acromegaly/gigantism, Cushing disease, Diabetes insipidus, Pituitary adenoma, Prolactinoma, SIADH

Thyroid disorders: Hyperthyroidism, Thyroiditis

#### **Eyes, Ears, Nose, and Throat**

Ear disorders

Other abnormalities of the ear: Mastoiditis

Foreign bodies of the eyes, ears, nose, and throat

Blowout fracture, Globe rupture, Hyphema

Neoplasms: Benign, Malignant

Nose/sinus disorders: Epistaxis

Oropharyngeal disorders

Infectious/inflammatory disorders: Angioedema, Deep neck infection, Dental abscess, Dental caries, Epiglottitis, Laryngitis, Peritonsillar abscess, Pharyngitis

### **Gastrointestinal System/Nutrition**

Biliary disorders: Acute cholecystitis, Cholangitis,

Colorectal disorders: Abscess/fistula, Fecal impaction/incontinence, Hemorrhoids, Ileus, Inflammatory bowel disease, 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, Gastroparesis, Peptic ulcer disease, Pyloric stenosis

Gastrointestinal bleeding

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

Hernias

Hyperemesis

Ingestion of toxic substances and foreign bodies

Metabolic disorders: Phenylketonuria, Rickets

Neoplasms: Benign, Malignant

Nutritional and vitamin disorders: Food allergies and food sensitivities,

Hypervitaminosis/hypovitaminosis, Malabsorption, Refeeding syndrome

Obesity

Pancreatic disorders: Acute pancreatitis, Chronic pancreatitis

Small intestine disorders: Appendicitis, Celiac disease, Intussusception, Obstruction

### **Genitourinary System**

Congenital and acquired abnormalities: Cryptorchidism, Trauma, Vesicoureteral reflux

Infectious disorders: Cystitis, Epididymitis, Fournier gangrene, Orchitis, Pyelonephritis, Urethritis

Neoplasms: Bladder, Penile, Testicular

Nephrolithiasis/urolithiasis

Penile disorders: Hypospadias/epispadias, Paraphimosis/phimosis

Testicular disorders: Testicular torsion

Urethral disorders: Prolapse, Stricture

### **Hematologic System**

Autoimmune disorders

Coagulation disorder: Clotting factor disorders, Thrombocytopenias

Cytopenias: Anemia, Leukopenia

Cytoses: Polycythemia, Thrombocytosis

Hemoglobinopathies: G6PD deficiency, Hemochromatosis, Sickle cell disease, Thalassemia

Immunologic disorders: Transfusion reaction

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

### **Infectious Diseases**

Bacterial diseases: Bartonella, Botulism, Campylobacter jejuni infection, Chancroid, Chlamydia, Cholera, Clostridioides difficile infection, Diphtheria, Gonococcal infections, Methicillin-resistant Staphylococcus aureus infection, Rheumatic fever, Rocky Mountain spotted fever, Salmonellosis, Shigellosis, Tetanus

Fungal diseases: Blastomycosis, Candidiasis, Coccidiomycosis, Cryptococcosis, Histoplasmosis, Pneumocystis

Mycobacterial diseases: Atypical mycobacterial disease, Tuberculosis

Parasitic diseases: Amebiasis, Giardiasis, Helminth infestations, Malaria, Pinworms, Toxoplasmosis, Trichomoniasis

Perinatal transmission of disorders: Congenital varicella, Herpes simplex virus, Human papillomavirus, Zika virus, Group B streptococcus

Prion diseases

Sepsis/systemic inflammatory response syndrome

Spirochetal diseases: Lyme disease, Syphilis

Viral diseases: Coronavirus infections, Cytomegalovirus infections, Epstein-Barr virus infection, Erythema infectiosum, Herpes simplex virus infections, HIV/AIDS, Human papillomavirus infections, Influenza, Measles, Mumps, Polio, Rabies, Roseola, Rubella, Varicella-zoster virus infections

### **Musculoskeletal System**

Chest/rib disorders: Deformities, Fractures

Compartment syndrome

Infectious diseases: Osteomyelitis, Septic arthritis

Lower extremity disorders: Avascular necrosis, Extensor mechanism injuries,

Fractures/dislocations, Slipped capital femoral epiphysis, Soft-tissue injuries

Neoplasms: Benign, Malignant, Paget disease of bone

Rheumatologic disorders: Connective tissue diseases Juvenile rheumatoid arthritis, Osteoporosis,

Polyarteritis nodosa, Polymyositis, Reactive arthritis, Rheumatoid arthritis, Sjögren syndrome,

Systemic lupus erythematosus, Systemic sclerosis (Scleroderma)

Spinal disorders: Ankylosing spondylitis, Herniated nucleus pulposus, Kyphosis, Scoliosis,

Spinal stenosis, Spondylolistheses, Spondylolysis, Trauma

Thoracic outlet syndrome

Upper extremity disorders: Fractures/dislocations, Soft-tissue injuries

### **Neurologic System**

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

Closed head injuries: Concussion, Post-concussion syndrome, Traumatic brain injury

Cranial nerve palsies

Encephalopathic disorders

Headaches: Cluster headache, Migraine, Tension headache

Infectious disorders: Encephalitis, Meningitis

Neoplasms: Benign, Malignant

Nerve disorders: Complex regional pain syndrome, Guillain-Barre syndrome, mononeuropathies, peripheral neuropathies

Neurocognitive disorders: Delirium

Seizure disorders: Focal seizure, Generalized seizures, Status epilepticus

Spinal cord syndromes: Cauda equina syndrome, Epidural abscess, Spinal cord injuries

### **Psychiatry/Behavioral Science**

Abuse and neglect: Child abuse, Sexual abuse

Feeding and eating disorders

Substance-related and addictive disorders

### **Pulmonary System**

Acute respiratory distress syndrome

Foreign body aspiration

Hyaline membrane disease

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

Obesity hypoventilation syndrome

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

Rhabdomyolysis

### **Reproductive System**

Ovarian disorders: Cysts, Torsion

### **Pediatrics**

ENOT/Ophthalmology: Acute otitis media, Acute pharyngotonsillitis, Epiglottitis, Epistaxis, Hearing impairment, Mastoiditis, Orbital cellulitis, Otitis externa, Peritonsillar abscess, Tympanic membrane perforation

Infectious Disease: Atypical mycobacterial disease, Epstein-Barr disease, Erythema infectiosum, Hand-foot-and-mouth disease, Herpes simplex, Influenza, Measles, Mumps, Pertussis, Roseola, Rubella, Varicella infection

Pulmonology: Acute bronchiolitis, Asthma, Croup, Cystic fibrosis, Foreign body, Hyaline membrane disease, Pneumonia (bacterial, viral), Respiratory syncytial virus

Cardiovascular: Acute rheumatic fever, Atrial septal defect, Coarctation of the aorta, Hypertrophic cardiomyopathy, Kawasaki disease, Patent ductus arteriosus, Syncope, Tetralogy of Fallot, Ventricular septal defect

Gastrointestinal/Nutritional System: Appendicitis, Constipation, Dehydration, Duodenal atresia, Encopresis, Foreign body, Gastroenteritis, Gastroesophageal reflux disease, Hepatitis, Hirschsprung disease, Inguinal hernia, Intussusception, Jaundice, Lactose intolerance, Niacin deficiencies, Pyloric stenosis, Umbilical hernia, Vitamin A deficiency, Vitamin C deficiency, Vitamin D deficiency

Neurology/Developmental: Febrile seizure, Immunization guidelines, Meningitis, Seizure disorders, Teething, Turner syndrome

Psychiatry/Behavioral Medicine: Child abuse and neglect, Feeding or eating disorders

Orthopedics/Rheumatology: Avascular necrosis of the proximal femur, Juvenile rheumatoid arthritis, Neoplasia of the musculoskeletal system, Slipped capital femoral epiphysis

Endocrinology: Diabetes mellitus, Hypercalcemia, Hyperthyroidism

Hematology: Anemia, Bleeding disorders, Brain tumors, Hemophilia, Lead poisoning, Leukemia, Lymphoma, Neutropenia

Urology/Renal: Cystitis, Glomerulonephritis, Hypospadias, Paraphimosis, Phimosis, Testicular torsion, Vesicourethral reflux

### **Elective Pediatric Intensive Care Rotation Learning Outcomes**

Upon completion of the elective Pediatric Intensive Care clinical rotation,

1. 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 Pediatric Intensive Care Clinical Rotation Topics above) encountered in Pediatric Intensive Care for patients seeking medical care for the following age populations: infants, children, and/or adolescents.
2. 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 Pediatric Intensive Care Clinical Rotation Topics above) commonly encountered in patients seeking acute Pediatric Intensive Care.
3. Students will demonstrate technical skills common to Pediatric Intensive Care.
4. Students will obtain and document information clearly and appropriately for the following types of patient encounters: acute problem-focused encounters.
5. Students will listen empathetically and effectively, communicate clearly, and utilize shared decision-making for patients seeking care in Pediatric Intensive Care.
6. Students will facilitate difficult health care conversations in Pediatric Intensive Care.
7. Students will demonstrate compassion, integrity, respect, patient responsiveness, and accountability while providing care to patients in a Pediatric Intensive Care setting.
8. 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 Pediatric Intensive Care.
9. Students will (a) promote a safe environment for patients seeking care in a Pediatric Intensive Care setting, (b) demonstrate knowledge of quality improvement methodologies and metrics, (c) recognize the unique role of PAs and other health professions in Pediatric Intensive Care, (d) work effectively with other health professionals in Pediatric Intensive Care, (e) work effectively in an inpatient health delivery setting, (f) incorporate considerations of cost awareness and funding into patients seeking care in an Pediatric Intensive Care setting, and (g) describe basic health payment systems and practice models for Pediatric Intensive Care.

## **Elective Pediatric Intensive Care Instructional Objectives**

Upon completion of the elective Pediatric Intensive Care clinical rotation,

1. **Elective Pediatric Intensive Care Rotation Learning Outcome #1:** 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 Pediatric Intensive Care Clinical Rotation Topics above) encountered in Pediatric Intensive Care for patients seeking medical care for the following age populations: infants, children, and/or adolescents.
  - **Pediatric Intensive Care instructional objective:** Evaluate the common disease process found in Pediatric Intensive Care using suggested readings and course study guide. (MK-PLO2)
  - **Pediatric Intensive Care instructional objective:** Identify the etiology, pathophysiology, and clinical presentation of conditions listed in the clinical topics for this rotation. (MK-PLO3)
  - **Pediatric Intensive Care Rotation instructional objective:** Select appropriate treatment plans for patients using all pertinent medical data, including history, physical examination, and diagnostic data, under the preceptor's supervision. (MK-PLO3)
  - **Pediatric Intensive Care Rotation instructional objective:** Identify medications commonly used in Pediatric Intensive Care, including the indication, contraindication, mechanism of action, most common side effects, and appropriate dosage for age. (MK-PLO2)
  - **Pediatric Intensive Care instructional objective:** Contrast possible risks and benefits of diagnostic studies and treatment plans. (MK-PLO3)
  - **Pediatric Intensive Care instructional objective:** Recommend appropriate screening tests and immunizations based on current standards. (MK-PLO3)
  - **Pediatric Intensive Care instructional objective:** Contrast the risks and benefits of procedures that must be performed on your patient. (MK PLO-3)
  - **Pediatric Intensive Care instructional objective:** Interpret and apply setting appropriate healthcare guidelines. (MK PLO-3)
  
2. **Elective Pediatric Intensive Care Rotation Learning Outcome #2:** 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 Pediatric Intensive Care Clinical Rotation Topics above) commonly encountered in patients seeking acute Pediatric Intensive Care.
  - **Pediatric Intensive Care instructional objective:** Demonstrate an age and setting appropriate history and physical exam for a patient less than 1 year of age. (PC-PLO1, PC-PLO2)
  - **Pediatric Intensive Care instructional objective:** Demonstrate an age and setting appropriate history and physical exam for a patient 1-10 years of age. (PC-PLO1, PC-PLO2)
  - **Pediatric Intensive Care instructional objective:** Demonstrate an age and setting appropriate history and physical exam for a patient 11-17 years of age. (PC-PLO1, PC-PLO2)

- **Pediatric Intensive Care instructional objective:** Choose appropriate diagnostic tests to identify an abnormality. (PC-PLO3)
  - **Pediatric Intensive Care instructional objective:** Interpret diagnostic studies related to the patient's medical condition. (PC-PLO3)
  - **Pediatric Intensive Care instructional objective:** Formulate an appropriate differential diagnosis based on history, physical examination, and diagnostic study data. (PC-PLO4)
  - **Pediatric Intensive Care instructional objective:** Construct an appropriate treatment plan based on history, physical exam, and diagnostic data. (PC-PLO4)
  - **Pediatric Intensive Care instructional objective:** Actively participate in the management of acute and chronic patient conditions. (PC- PLO4)
3. **Elective Pediatric Intensive Care Rotation Learning Outcome #3:** Students will demonstrate technical skills **common to Pediatric Intensive Care.**
  4. **Elective Pediatric Intensive Care Rotation Learning Outcome #4:** Students will obtain and document information clearly and appropriately for the following types of patient encounters: acute problem-focused encounters.
  5. **Elective Pediatric Intensive Care Rotation Learning Outcome #5:** Students will listen empathetically and effectively, communicate clearly, and utilize shared decision-making for patients seeking care in Pediatric Intensive Care.
    - **Pediatric Intensive Care instructional objective:** Describe health promotion and disease prevention to your patients. (ICS-PLO3)
    - **Pediatric Intensive Care instructional objective:** Adapt communication style and information context to the individual patient interaction. (ICS-PLO3)
    - **Pediatric Intensive Care instructional objective:** Identify communication barriers with different patient populations. (ICS PLO-3)
    - **Pediatric Intensive Care instructional objective:** Compose an oral case presentation and present it to the preceptor. (ICS-PLO3)
    - **Pediatric Intensive Care instructional objective:** Explain possible risks and benefits of diagnostic studies and treatment plans to your patient as approved by the supervising provider. (ICS-PLO3)
    - **Pediatric Intensive Care instructional objective:** Select written patient education handouts to address a health promotion issue using the most up-to-date, evidence-based medical data. (ICS PLO-3)
  6. **Elective Pediatric Intensive Care Rotation Learning Outcome #6:** Students will facilitate difficult health care conversations in Pediatric Intensive Care.
  7. **Elective Pediatric Intensive Care Rotation Learning Outcome #7:** Students will demonstrate compassion, integrity, respect, patient responsiveness, and accountability while providing care to patients in a Pediatric Intensive Care setting.
    - **Pediatric Intensive Care instructional objective:** Practice professionally in a working situation with other healthcare team members, including appropriate dress, punctual attendance, and professional attitude. (P-PLO1)



- **Pediatric Intensive Care instructional objective:** Show sensitivity to the emotional, social, developmental, and ethnic background of patients and their families on their service. (P-PLO1)
- **Pediatric Intensive Care instructional objective:** Apply professional attitude in such areas as attendance, dress code, and performance in the medical setting. (P-PLO1)
- **Pediatric Intensive Care instructional objective:** Demonstrate sensitivity and responsiveness to patients' culture, gender, age, and disabilities. (P-PLO1)
- **Pediatric Intensive Care instructional objective:** Demonstrate motivation and desire to learn. (P-PLO3)
- **Pediatric Intensive Care instructional objective:** Demonstrate knowledge of the legal and regulatory requirements of the role of a physician assistant. (P-PLO4)

8. **Elective Pediatric Intensive Care Rotation Learning Outcome #8:** 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 Pediatric Intensive Care.

- **Pediatric Intensive Care instructional objective:** Demonstrate an openness to receive constructive criticism. (PBLPI-PLO1)
- **Pediatric Intensive Care instructional objective:** Recognize limitations and locate assistance from supervising preceptors and appropriate reference material. (PBLPI-PLO1)
- **Pediatric Intensive Care instructional objective:** Develop the ability to learn from practice. (PBLPI-PLO2)
- **Pediatric Intensive Care instructional objective:** Recognize personal limitations and where to access help personally and professionally. (PBLPI-PL2)
- **Pediatric Intensive Care instructional objective:** Interpret independent outside readings concerning medical problems encountered. (PBL PI-PLO3)
- **Pediatric Intensive Care instructional objective:** Show ability to understand and apply decision-making tools. (PBL PI PLO-3)
- **Pediatric Intensive Care instructional objective:** Recognize the importance of lifelong learning in the medical field. (PBLPI-PLO3)
- **Pediatric Intensive Care instructional objective:** Assess medical evidence and communicate it to patients and colleagues. (PBLPI-PL3)
- **Pediatric Intensive Care instructional objective:** Apply information technology to access online medical information and continue personal education. (PBLPI-PL3))
- **Pediatric Intensive Care instructional objective:** Use medical information technology in decision-making, patient care, and patient education. (PBLPI-PL3)

9. **Elective Pediatric Intensive Care Rotation Learning Outcome #9:** Students will (a) promote a safe environment for patients seeking care in a Pediatric Intensive Care setting, (b) demonstrate knowledge of quality improvement methodologies and metrics, (c) recognize the unique role of PAs and other health professions in Pediatric Intensive Care, (d) work effectively with other health professionals in Pediatric Intensive Care, (e) work effectively in

an inpatient health delivery setting, (f) incorporate considerations of cost awareness and funding into patients seeking care in an Pediatric Intensive Care setting, and (g) describe basic health payment systems and practice models for Pediatric Intensive Care.

- **Pediatric Intensive Care instructional objective:** Operate under the rules of HIPAA to preserve patient confidentiality. (SBP-PLO1)
- **Pediatric Intensive Care instructional objective:** Practice according to policy and procedures set forth by the health care facility. (SBP-PLO1)
- **Pediatric Intensive Care instructional objective:** Employ a professional relationship with the supervising providers and other health care team members. (SBP-PLO4)
- **Pediatric Intensive Care instructional objective:** Identify the obstacles to obtaining medical care for those with financial difficulties. (SBP-PLO6)
- **Pediatric Intensive Care instructional objective:** Evaluate cost-effective health care and resources that do not compromise the quality of patient care. (SBP-PLO6)
- **Pediatric Intensive Care instructional objective:** Identify the funding sources and payment systems that provide coverage for the patient. (SBP-PLO7)
- **Pediatric Intensive Care instructional objective:** Choose the appropriate code for billing the responsible payment service under the direct supervision of the preceptor. (SBP-PLO7)

**Elective Pediatric Intensive Care Rotation Curriculum Integration Table**

| <b>Elective Pediatric Intensive Care Rotation Learning Outcome</b>  | <b>Assessment Method (Benchmark Requirements)</b>                                       | <b>PAS Program Goal</b>                                 | <b>PAS Program Learning Outcome (ARC-PA)/Student Learning Outcomes (GVSU)</b> |
|---|---|---|---|
| <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 Pediatric Intensive Care Clinical Rotation Topics above) encountered in Pediatric Intensive Care for patients seeking medical care for the following age populations: infants, children, and/or adolescents.</p> | <p>Preceptor Evaluation (80% average score on Medical Knowledge competency section)</p> | <p>Medical Knowledge and Competence in Patient Care</p> | <p>MK #2<br/>MK #3</p>  |
| <p>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 Pediatric Intensive Care Clinical Rotation Topics above) commonly encountered in patients seeking acute Pediatric Intensive Care</p>  | <p>Preceptor Evaluation (80% average score on Patient competency section)</p>           | <p>Medical Knowledge and Competence in Patient Care</p> | <p>PC #1<br/>PC #2<br/>PC #3<br/>PC #4</p>                                    |

|  |  |  |                                |
|--|--|--|--------------------------------|
| Students will demonstrate technical skills common to Pediatric Intensive Care.   | Preceptor Evaluation (80% average score on Patient competency section)   | Medical Knowledge and Competence in Patient Care | PC #5                          |
|  | Clinical Skills Checklist (Pass/Fail)  |  |                                |
| Students will obtain and document information clearly and appropriately for the following types of patient encounters: acute problem-focused encounters.   | 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, and utilize shared decision-making for patients seeking care in Pediatric Intensive Care.  | Preceptor Evaluation (80% average score on Interpersonal and Communication Skills competency section)              | Medical Knowledge and Patient Care               | ICS #1                         |
|  |  | Collaborative Practice                           | ICS #3<br>ICS #5               |
| Students will facilitate difficult health care conversations in Pediatric Intensive 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 a Pediatric Intensive Care setting.   | Preceptor Evaluation (80% average score on Professionalism competency section)                                     | Professionalism                                  | P #1<br>P #2<br>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 Pediatric Intensive Care. | Preceptor Evaluation (80% average score on Practice-Based Learning and Proficiency Improvement competency section) | Lifelong Learning                                | PBLPI #1<br>PBLP #2<br>PBLP #3 |

|   |  |   |  |
|---|--|---|--|
| <p>Students will (a) promote a safe environment for patients seeking care in a Pediatric Intensive Care setting, (b) demonstrate knowledge of quality improvement methodologies and metrics, (c) recognize the unique role of PAs and other health professions in Pediatric Intensive Care, (d) work effectively with other health professionals in Pediatric Intensive Care, (e) work effectively in an inpatient health delivery setting, (f) incorporate considerations of cost awareness and funding into patients seeking care in an Pediatric Intensive Care setting, and (g) describe basic health payment systems and practice models for Pediatric Intensive Care.</p> | <p>Preceptor Evaluation (80% average score on Systems-Based Practice competency section)</p> | <p>Medical Knowledge and Patient Care</p> | <p>SBP #1<br/>SBP #6</p>                       |
|   |  | <p>Lifelong Learning</p>                  | <p>SBP #2</p>                                  |
|   |  | <p>Collaborative Practice</p>             | <p>SBP #3<br/>SBP #4<br/>SBP #5<br/>SBP #7</p> |

## Pediatric Intensive Care Preceptor Evaluation of the Student

1. What is your group and/or site name (i.e., Helen Devos Children’s Hospital Pediatric ICU)
2. 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%<br>(Failing) | 70%<br>(D+/<br>C-) | 80%<br>(C+/<br>B) | 90%<br>(B+/<br>A-) | 100%<br>(A) | N/A |
|---|------------------|--------------------|-------------------|--------------------|-------------|-----|
| Student demonstrates medical knowledge in pathophysiology, etiology, and epidemiology for patients seeking medical care for common conditions encountered in Pediatric Intensive Care in the following age populations (MK#2, 3): |                  |                    |                   |                    |             |     |
| Infants   |                  |                    |                   |                    |             |     |
| Children  |                  |                    |                   |                    |             |     |
| Adolescents   |                  |                    |                   |                    |             |     |
| Student demonstrates medical knowledge of patient presentations for common conditions encountered in Pediatric Intensive Care for the following age populations (MK#2,3):   |                  |                    |                   |                    |             |     |
| Infants   |                  |                    |                   |                    |             |     |
| Children  |                  |                    |                   |                    |             |     |
| Adolescents   |                  |                    |                   |                    |             |     |
| Student demonstrates medical knowledge of differential diagnosis and diagnostic work-up for patients seeking medical care for common conditions encountered in Pediatric Intensive Care in the following age populations (MK#2,3) |                  |                    |                   |                    |             |     |
| Infants   |                  |                    |                   |                    |             |     |
| Children  |                  |                    |                   |                    |             |     |
| Adolescents   |                  |                    |                   |                    |             |     |
| Student demonstrates medical knowledge of patient management strategies for patients seeking medical care for common conditions encountered in Pediatric Intensive Care in the following age populations (MK#2,3):                |                  |                    |                   |                    |             |     |
| Infants   |                  |                    |                   |                    |             |     |
| Children  |                  |                    |                   |                    |             |     |
| Adolescents   |                  |                    |                   |                    |             |     |
| Student demonstrates medical knowledge of health promotion and disease prevention for patients seeking medical care for common conditions encountered in Pediatric Intensive Care in the following age populations (MK#2, 3)      |                  |                    |                   |                    |             |     |
| Infants   |                  |                    |                   |                    |             |     |
| Children  |                  |                    |                   |                    |             |     |
| Adolescents   |                  |                    |                   |                    |             |     |
| Additional Comments:  |                  |                    |                   |                    |             |     |

3. 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%<br>(Failing) | 70%<br>(D+/<br>C-) | 80%<br>(C+/<br>B) | 90%<br>(B+/<br>A-) | 100%<br>(A) | N/A |
|---|------------------|--------------------|-------------------|--------------------|-------------|-----|
| Elicit a detailed and accurate history and perform an appropriate physical examination for the following populations encountered in Pediatric Intensive Care (PC#1):                                  |                  |                    |                   |                    |             |     |
| Infant  |                  |                    |                   |                    |             |     |
| Children  |                  |                    |                   |                    |             |     |
| Adolescents   |                  |                    |                   |                    |             |     |
| Elicit a detailed and accurate history and perform an appropriate physical examination for patients encountered in Pediatric Intensive Care seeking (PC#2):   |                  |                    |                   |                    |             |     |
| Acute care  |                  |                    |                   |                    |             |     |
| Preoperative care   |                  |                    |                   |                    |             |     |
| Intraoperative care   |                  |                    |                   |                    |             |     |
| Postoperative care  |                  |                    |                   |                    |             |     |
| Student demonstrates knowledge of the appropriate use and interpretation of diagnostic testing and laboratory studies commonly used for patients seeking (PC#3):                                      |                  |                    |                   |                    |             |     |
| Acute care  |                  |                    |                   |                    |             |     |
| Preoperative care   |                  |                    |                   |                    |             |     |
| Intraoperative care   |                  |                    |                   |                    |             |     |
| Postoperative care  |                  |                    |                   |                    |             |     |
| Student organizes information from the interview, diagnostic testing, and physical examination to formulate differential diagnoses for patients seeking (PC#4):                                       |                  |                    |                   |                    |             |     |
| Acute care  |                  |                    |                   |                    |             |     |
| Preoperative care   |                  |                    |                   |                    |             |     |
| Intraoperative care   |                  |                    |                   |                    |             |     |
| Postoperative care  |                  |                    |                   |                    |             |     |
| Student organizes information from the interview, diagnostic testing, and physical examination to formulate assessment plans for symptoms/conditions commonly encountered in patients seeking (PC#4): |                  |                    |                   |                    |             |     |
| Acute care  |                  |                    |                   |                    |             |     |
| Preoperative care   |                  |                    |                   |                    |             |     |
| Intraoperative care   |                  |                    |                   |                    |             |     |
| Postoperative care  |                  |                    |                   |                    |             |     |
| Demonstrate basic technical skills common to Pediatric Intensive Care. (PC#5):  |                  |                    |                   |                    |             |     |
| Additional Comments:  |                  |                    |                   |                    |             |     |

4. 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%<br>(Failing) | 70%<br>(D+/<br>C-) | 80%<br>(C+/<br>B) | 90%<br>(B+/<br>A-) | 100%<br>(A) | N/A |
|--|------------------|--------------------|-------------------|--------------------|-------------|-----|
|  |                  |                    |                   |                    |             |     |

|  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| Listen empathetically and effectively to patients seeking care in Pediatric Intensive Care (ICS#1)   |  |  |  |  |  |  |
| Obtain and document information clearly and accurately at an appropriate level the following types of patient encounters (ICS#2):                                  |  |  |  |  |  |  |
| Acute problem-focused encounters   |  |  |  |  |  |  |
| Preoperative encounters  |  |  |  |  |  |  |
| Intraoperative encounters  |  |  |  |  |  |  |
| Post-operative encounters  |  |  |  |  |  |  |
| Communicate information clearly to patients, families, colleagues, and teams as appropriate across a broad range of socioeconomic and cultural backgrounds (ICS#3) |  |  |  |  |  |  |
| Facilitate difficult health care conversations in Pediatric Intensive Care (ICS#4):  |  |  |  |  |  |  |
| Utilize shared-decision making to promote patient-centered communication by eliciting and incorporating patient preferences (ICS#5)                                |  |  |  |  |  |  |
| Additional Comments:   |  |  |  |  |  |  |

5. Professionalism: This section evaluates the student's ability to demonstrate commitment to carrying out professional responsibilities and adhering to ethical principles and practices.

|   | 60%<br>(Failing) | 70%<br>(D+/<br>C-) | 80%<br>(C+/<br>B) | 90%<br>(B+/<br>A-) | 100%<br>(A) |
|---|------------------|--------------------|-------------------|--------------------|-------------|
| Demonstrate compassion, integrity, and respect for patients seeking care in a Pediatric Intensive Care setting (P#1)                      |                  |                    |                   |                    |             |
| Demonstrate responsiveness to patient needs that supersede self-interest while providing care in a Pediatric Intensive Care setting (P#2) |                  |                    |                   |                    |             |
| Show accountability to patients, society, and the profession while providing care in a Pediatric Intensive Care setting (P#3)             |                  |                    |                   |                    |             |



|   |  |  |  |  |  |
|---|--|--|--|--|--|
| Demonstrate leadership and advocacy for the PA profession (P#4) |  |  |  |  |  |
| Additional Comments:  |  |  |  |  |  |

6. 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%<br>(Failing) | 70%<br>(D+/<br>C-) | 80%<br>(C+/<br>B) | 90%<br>(B+/<br>A-) | 100%<br>(A) |
|--|------------------|--------------------|-------------------|--------------------|-------------|
| Seek, implement, and accept feedback (PBLPI#1)   |                  |                    |                   |                    |             |
| Reflect on performance to identify strengths and deficiencies in one's knowledge and expertise and develop a plan for self-improvement (PBLPI#2) |                  |                    |                   |                    |             |
| Locate, appraise, and integrate evidence-based studies related to Pediatric Intensive Care (PBLPI#3)   |                  |                    |                   |                    |             |
| Additional Comments:   |                  |                    |                   |                    |             |

7. Systems-Based Practice: This section evaluates the student's ability to engage with other healthcare professionals in a manner that optimizes patient care within the context of the larger healthcare system.

|   | 60%<br>(Failing) | 70%<br>(D+/<br>C-) | 80%<br>(C+/<br>B) | 90%<br>(B+/<br>A-) | 100%<br>(A) |
|---|------------------|--------------------|-------------------|--------------------|-------------|
| Promote a safe environment for patients seeking care in a Pediatric Intensive Care setting (SBP#1)                              |                  |                    |                   |                    |             |
| Demonstrate knowledge of quality improvement methodologies and metrics in Pediatric Intensive Care (SBP#2)                      |                  |                    |                   |                    |             |
| Recognize the unique roles of PAs and those of other healthcare professions in Pediatric Intensive Care (SBP#3)                 |                  |                    |                   |                    |             |
| Work effectively with other health professionals to provide collaborative, patient-centered in Pediatric Intensive Care (SBP#4) |                  |                    |                   |                    |             |
| Work effectively in an inpatient health delivery setting (SBP#5)  |                  |                    |                   |                    |             |
| Incorporate considerations of cost awareness and funding sources into   |                  |                    |                   |                    |             |

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| patients seeking care in a Pediatric Intensive Care setting (SBP#6)                            |  |  |  |  |  |
| Describe basic health payment systems and practice models for Pediatric Intensive Care (SBP#7) |  |  |  |  |  |
| Additional Comments:   |  |  |  |  |  |

8. Did the student have any absences during the rotation?
  - a. Yes
  - b. No
  - c. If yes, please indicate dates and reason for absence:
9. Please write a short note commenting on this student's particular strengths.
10. Please write a short note commenting on this student's particular areas for improvement.
11. Was this evaluation discussed with the student?
  - a. Yes
  - b. No
  - c. Additional comments:
12. Preceptor Signature: