

**PHYSICIAN ASSISTANT STUDENT (PA-S2 & PA-S3)
LEARNER ROLE**

Department: Physician Assistant Studies Program, Grand Valley State University, Cook-DeVos Center for Health Sciences, 301 Michigan NE, Ste 247, Grand Rapids, MI 49503 Phone: (616) 331-5700 and Fax: (616) 331-5654

Level: PA-S2 and PA-S3 (Second & Third Year PA students)

Locations: Emergency Medicine, Obstetrics & Gynecology, General Surgery, Internal Medicine, Family Practice, Pediatrics, Psychiatry, or any outpatient or inpatient setting (i.e. Cardiology, Orthopedics, Urology, Dermatology, Etc...).

Supervisor: Program Director, Clinical Coordinator(s), & Assigned Preceptor(s)

General Responsibilities:

Develop a personal program of learning to foster continued professional growth with guidance from the teaching staff. Participate in safe, effective, and compassionate patient care under supervision, commensurate with physician assistant student's level of advancement and responsibility; and refuse fees in any form from patients cared for as a part of the Program. Participate fully in the educational and scholarly activities of the Program. Participate as appropriate in institutional programs and medical staff activities and adhere to established practices, procedures, and policies of the institutions. Submit to the program director or the clinical coordinator(s) a written evaluation of the preceptors and of the education experiences. Develop competency in patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice as defined by the Program.

Specific Responsibilities and Educational Objectives:

Data Gathering:

- Learn to perform focused H&P's concentrating on presenting complaint through observed H&P's with immediate faculty feedback and through observing faculty & preceptors perform H & P's.
- Learn when to expand the history to include pertinent review of systems, past medical history, etc.

Diagnostic Tests:

- Discuss cases with attending physicians or midlevel preceptors prior to ordering lab studies and x-rays so a directed and cost-containment approach may be appreciated.

- If authorized by the supervising attending physician or assigned mid-level provider, below is a list of some examples of procedures that physician assistant students may perform in regards to patient care activities. It is also within the scope of a PA-S2 to perform other items not listed here that are within the scope of practice based upon the medical setting with the appropriate oversight:
 - History and physical with assessment and plan
 - Progress notes
 - Daily Patient rounds
 - BCLS & ACLS resuscitation
 - Arterial puncture for Blood Gas Determination
 - Venipuncture for appropriate blood analysis
 - Central Line Placement
 - Endotracheal Intubation
 - Knee Arthrocentesis
 - Lumbar Puncture
 - Nasogastric Intubation
 - Pap Smear
 - Paracentesis
 - Pelvic Exam
 - Rectal Exam
 - Thoracentesis
 - Arterial Catheterization
 - Bladder Catheterization, both male and female
 - Bone Marrow Aspiration and Biopsy
 - Elective Cardioversion
 - Flexible Sigmoidoscopy
 - Mechanical Ventilator Management
 - Pharmacological Electrocardiographic Stress Test
 - Swan-Ganz Catheter Placement
 - Treadmill Exercise
 - Electrocardiographic Stress Test
 - Surgical Assisting

Presentation:

- Present an accurate and concise presentation to attending physicians or midlevel preceptors.
- Communicate via telephone with consultants following demonstrated ability to present patients in a concise and directed manner.

Differential Diagnosis:

- Discuss and develop the differential diagnosis for each presenting patient with the attending physician or midlevel preceptor with expanded differential diagnosis throughout the rotation experience.

Therapeutic Intervention:

- Learn to recognize presentations of life-threatening conditions so that prompt initial stabilization may be initiated even prior to completing H&P.
- Obtain attending physician or midlevel preceptor involvement immediately upon recognition of life-threatening circumstances.
- Physician assistant students must not start any emergency or non-emergency medical procedure on a patient until they have obtained permission and appropriate supervision from the responsible preceptor.
- Develop treatment plans with the assigned preceptor's approval.
- If prescriptions are needed, the physician assistant student may not sign the prescription, only the assigned preceptor physician or midlevel provider may sign.

Discharge/Follow-up:

- Formulate a discharge plan and discuss discharge instructions with the patient and family with approval of the preceptor.
- Develop working relationship with nursing staff to discharge patients to obtain a better understanding of the patient's medical knowledge and cultural biases.

Procedures/Technical Skills:

- Perform basic procedural skills under direct supervision including procedures such as extremity wound care and suturing, local anesthesia, arterial puncture, intubation, defibrillation, central and peripheral venous access, splinting, NG lavage tube placement, bladder catheterization, slit lamp examination, lumbar puncture and other appropriate procedures or surgery as indicated (if physician assistant student has no prior experience with procedure, procedure will be observed and discussed with attending physician or midlevel preceptor with second attempt at procedure performed under close supervision); critical portion of all procedures will be performed with direct supervision by an attending physician or midlevel preceptor.
- Complete documentation of all procedures/technical skills performed on the computer log system or within the patient chart.
- Review rotation's experience at midway with appropriate preceptor and highlight deficiencies so that these may be addressed.

Patient Management Skills:

- Demonstrate ability to manage more than one patient simultaneously in the department.
- Preoperative and postoperative management of patients as indicated by the surgical team or preceptor physician or midlevel provider.
- Participate with the treatment of critically ill patients although may not be the leader in the resuscitation of these patients.

Administrative:

- Learn basic functions of all personnel.
- Learn charting guidelines and utilize them in patient care.
- Develop proficiency at giving concise “phone” presentations.
- Complete communications with the lab.

Didactic Education:

- See the Grand Valley State University, Physician Assistant Studies Clerkship Handbook for additional requirements and guidelines.
- Physician assistant students are encouraged to take advantage of any additional educational opportunities that the attending physician or midlevel provider deems valuable.

Evaluation Procedure:

- Evaluation forms to be given to an attending at the midway point and at the end of the rotation who will provide written electronic feedback with respect to competency in patient care, medical knowledge, interpersonal and communication skills, professionalism and systems-based practice. (See the Grand Valley State University, Physician Assistant Studies Clerkship Handbook for additional requirements and guidelines.)