

# Preceptor Manual

2018-2019

## Philadelphia Campus Philadelphia College of Osteopathic Medicine

Updated March 13, 2019

Policies and procedures published in this Preceptor Manual supersede all other publications.

The College reserves the right to change policies as needed between annual revisions.

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The PCOM Preceptor Manual is produced as a guide for Clinical Faculty Preceptors of medical students enrolled in the Doctor of Osteopathic Medicine Program of Philadelphia College of Osteopathic Medicine (PCOM).

Changes or new policies will also be added to the electronic version of the Preceptor Manual, which is posted on the [www.pcom.edu/educate](http://www.pcom.edu/educate).

If you have any questions or concerns, please contact the Office of Undergraduate Clinical Education.

**PCOM**

**Philadelphia Campus**

**Third and Fourth Year  
Clerkship Preceptor  
Manual**

# General Preceptor Information

## Purpose of this Manual

This manual serves clinical preceptors, and prospective clinical preceptors, by providing a source of information help explain:

- The role and responsibilities of clinical preceptors at PCOM
- The process of evaluating medical students on clinical clerkship rotations
- Providing an understanding of how the preceptors' evaluations fit into the overall grading process
- Benefits of being a preceptor at PCOM
- How to become a preceptor
  - How to achieve clinical professorial academic rank
  - How to qualify for consideration for promotion to higher academic rank
- Provide an overview of the overall clinical education curriculum in the 3<sup>rd</sup> and 4<sup>th</sup> years of medical school at PCOM

## Role of the Preceptor

Preceptors are integral to the clinical education and training of medical students. They provide and supervise the experiential portion of the curriculum by supervising the student physicians as the students acquire their clinical medical knowledge by helping to care for real patients – in both the inpatient and outpatient settings. These preceptors are responsible for completing a clinical evaluation form on each student. These clinical evaluation forms document each student's clinical performance during the rotation and are a key element in the assessment of each student's clinical competency of the learning objectives for the clerkship rotation.

## Benefits of Being a Preceptor at PCOM Philadelphia campus

- Adjunct clinical faculty appointment.
- Online access to the PCOM library.
- Continuing Medical Education as specified by professional organization:
  - AMA PRA Category 2 – one hour can be claimed for each hour of direct supervision of a student.
  - AOA Category 1B – one hour can be claimed for each hour of direct supervision of a student.
- Research assistance and collaboration opportunities.

## **How to Become a Preceptor at PCOM - Philadelphia campus**

Application to become a preceptor in the DO program at PCOM is simple. Simply submit an email or letter of interest, along with a current c.v., to:

Michael A. Becker, DO, MS, FACOFP  
Assistant Dean of Clerkship Education  
Michaelbe@pcom.edu

In your email or letter, please indicate the number of students you are interested in teaching and approximately which months you can have students rotate with you.

### **Appointment as Clinical Faculty**

As per the faculty handbook, volunteer preceptors are appointed to the clinical faculty in the academic rank of Adjunct Lecturer.

### **Applying for Appointment as Clinical Professorial Faculty**

New volunteer preceptors who agree to regularly serve as preceptor of a 4-week clerkship rotation for at least 1 student per quarter (precept at least 4 students for year) may simultaneously apply to be considered for being recommended by the Dean initial appointment to the Clinical Faculty in an appropriate academic rank (Appendix A). This application is made by appropriate statement and agreement in their email or letter.

Currently serving volunteer preceptors who wish to be considered for being recommended by the Dean for re-appointment in an appropriate academic rank may do so by submitting an email or letter stating their agreement to regularly serve as preceptor of a 4-week clerkship rotation for at least 1 student per quarter (precept at least 4 students for year). Please also submit an updated, current c.v.

### **Applying for Promotion as Clinical Professorial Faculty**

PCOM volunteer preceptors holding academic appointments of Clinical Assistant Professor or Clinical Associate Professor, who meet the requirements for advancement to the next higher academic rank of Clinical Associate Professor or Clinical Professor (Appendix A), respectively, may apply by letter requesting consideration for promotion. This letter detailing how they meet each of the requirements of the next higher academic grade to which they seek to be promoted, should be addressed to the Dean and submitted to the Associate Dean for Clerkships and Core Site Development. No one will be considered for promotion until they have served at least two years at PCOM in their current academic rank.

## Overview of the Clinical Education Years (3<sup>rd</sup> and 4<sup>th</sup> Years)

There are a total of twenty-four clerkship periods over two years, including one 4-week “vacation” or “study” period. There are twelve (12) 4-week rotations in each of the 3<sup>rd</sup>-year and 4<sup>th</sup>-year of medical school.

During year 3, each student will be required to complete the following clerkships:

|                                |                           |                                  |
|--------------------------------|---------------------------|----------------------------------|
| Advanced Clinical Skills (ACS) | Pediatrics                | Psychiatry                       |
| Internal Medicine              | Obstetrics and Gynecology | Family Medicine                  |
| Cardiology                     | General Surgery           | FM/OMM                           |
| Internal Medicine- Selective   | Surgical-Selective        | Introduction to Clerkships (I2C) |

During year 4, each student will be required to complete the following clerkships:

Ambulatory Sub-Internship (2 rotations)  
Emergency Medicine  
Electives (9\* rotations) \*One rotation must be used as a "Vacation"

Electives may be in any medical specialty and are often used by 4<sup>th</sup>-year medical students to perform “Audition” rotations at locations where they may be interested in doing their residency training after receiving their D.O. degree.

### *Split and “Overlapping” Rotations*

At most, two electives may be split into two 2-week clerkships during the fourth year (for a maximum of four 2-week electives). Core and Selective rotations may not be “split”.

NOTE: There are NO 1-week or 3-week elective rotations.

Rotations cannot “overlap” in time.

## Core Clinical Campus

PCOM uses the concept of Core Clinical Campus (CCC) at various locations in surrounding Philadelphia area, as well as New Jersey and Delaware. To date there are 13 CCC's that are used for the Philadelphia students. The goal is for 3<sup>rd</sup>-year medical students to be able to go to an to perform most, if not all, of their clerkship rotations at that site. Each CCC is unique in their sequence and delivery of the third year core curriculum, as well as the fourth year at some locations. Some CCC's locate near PCOM have their students complete their ACS, and first week of their OMM/FM rotation at the Philadelphia campus.

## Permitted Preceptor Qualifications

Only licensed D.O. or M.D. physicians are qualified to serve as “preceptors-of-record” for PCOM medical students. In addition, physician preceptors are expected to be Board Certified in their specialty. On occasion, physicians who are “board eligible” or “board qualified” may also be acceptable as preceptors. Physicians in Residency or Fellowship training programs may teach

PCOM medical students; however, Residents or Fellows may not serve as preceptors-of-record for PCOM medical students – only attending physicians may be the formal preceptor.

In addition, although highly qualified health professionals, from whom PCOM medical students can learn a great deal, the following health professionals are NOT permitted to serve as the formal preceptor-of-record for any PCOM osteopathic medical student, regardless of their professional licensure or certifications:

|  |                         |
|--|-------------------------|
| Dentists, including Oral/Maxillofacial Surgeons (DDS or DMD) | Optometrists (OD)       |
| Physician Assistants or Nurse Practitioners (PA-C or NP)     | Chiropractors (DC)      |
| Clinical Psychologists (PhD, EdD, PsyD, or LCSW)             | Audiologists (AuD)      |
| Podiatrists or Podiatric Physicians (DPM)                    | Physical Therapists     |
| Nurse Anesthetists (CRNA)                                    | Occupational Therapists |
| Nurse Midwife  |                         |

The above professionals may supervise part of the student physician’s training and can contribute to the student physician’s “inter-professional education” (IPE).

## ***Grading of Clerkships***

Preceptors perform an important role in the assessment of medical students during their clinical clerkships. Preceptors will complete a Clinical Evaluation Form for each medical student. Clerkships are graded as Honors pass, High Pass, Pass, and Fail, and are determined by the Associate Dean for Clerkships and Core Site Development.

1. Some clerkships are graded based solely on the preceptor’s evaluation.
2. Other clerkships are graded based on a combination of the “exit exam” or “shelf exam” (COMAT) and the preceptor’s evaluation according to a grading rubric.
3. “Blended Learning” clerkships are graded by the grading rubric and adjusted for successfully completing ALL learning assignments and requirements as specified for that clerkship by the deadlines in the clerkship syllabus.

**Clinical Clerkship Evaluations** (completed by preceptor) – Clerkship Evaluation Forms for all clerkships are sent to the preceptor electronically at the email of the preceptor (and usually not the education coordinator or office manager). It is important that the Office of Clinical Education (OCE) has the correct email for the preceptor at the start of each clerkship rotation. Preceptors may only recommend the grades of **HONORS**, **PASS**, or **FAIL**.

The student's level of performance in the seven core clinical competencies is evaluated in **comparison with other students at the same level of training**. Grading is from 1 to 10, with 1 being substandard and 10 being outstanding.

Preceptors need to discuss the student’s performance with them at the halfway point (and again at the end) of the clerkship. This will allow the student the opportunity to review any perceived weaknesses he/she might have, as well as show the student whether they are meeting their preceptor’s expectations for them in the clerkship. This midpoint evaluation will permit



corrective action of perceived deficiencies prior to the final evaluation.

Students are encouraged to first discuss any problems they are having on a clerkship with their preceptor. If the problem is not resolved, they should discuss it with the Director of Medical Education of the institution where they are on clerkship. Finally, if the problem is not resolved, or is perceived by the student to be of a serious nature, the student should inform the Assistant Dean for Clerkship Education.

### ***Comments Section of the Evaluation Form: “Summative” vs. “Formative”***

**NOTE:** It is important that both students and preceptors fully understand that the evaluation form allows for both “formative” and “summative” comments. Further, it is important that both students and preceptors fully understand the difference and impact of these comments:

**“Formative” comments** are intended to identify areas of student weakness and areas needing improvement. These will **NOT** appear in the student’s MSPE (Medical Student Performance Evaluation).

**“Summative” comments** are intended to identify final performance and **WILL APPEAR** in the student’s MSPE.

**IMPORTANT:** Comments placed in the student’s MSPE come from the “Summative Comments” section of the evaluation form. These cannot be edited in any fashion. **NOTE:** Positive comments found in the “Formative comments” cannot be placed in the comments of the MSPE. Similarly, negative comments found in the “Summative comments” section (that should have been placed in the “formative comments”) cannot be omitted from the MSPE.

### **COMAT (“Shelf” or “Exit”) Exams**

All exit exams must be taken on the scheduled date given. If a student, for whatever reason, cannot take the exam on the assigned day, he/she must contact the Office of Clinical Education one week prior to the exam to obtain an excused absence. The student must provide a doctor’s note for the absence due to illness through the Office of Student Affairs. Failure to obtain an excused absence will result in an automatic failing grade for the exam.

COMAT (“shelf” or “exit”) Exams are required in the following rotations: Family Medicine, Internal Medicine, General Surgery, OB/Gyn, Pediatrics, Psychiatry FM/OMM, and Emergency Medicine. **Students should be free from call or other clerkship duties and responsibilities no later than after 4:00 PM the evening immediately before this exam.**

All end of rotation exit exams will be done online. They will be administered in a proctored manner; making assurances that there are no aids i.e. books, notes, internet sites, etc while taking the test.

**All students that are on rotations within a 1 hour commute from the Philadelphia campus - PCOM must report back to the school for testing or as directed in the Clinical Clerkship Manual based on their specific site.** Students testing will be excused on the last day of their rotation and must report to the school. Students shall receive an email from OCE informing them of their scheduled time and location of the test on the PCOM Philadelphia campus. Each month a student's scheduled COMAT exam can be held at a different time.

The exam is two hours and 45 minutes. **No extensions in time will be given unless given prior approval by the Office of Student Affairs.**

Should any student encounter any difficulties or issues with the exam, preceptors should have the student contact OCE at 215-871-6550 immediately. If unable to directly speak with the Clinical Education staff, please leave a voice mail message and send notification via e-mail immediately to document the issue.

## **HONORS Grades**

Preceptors need to consider the following administrative requirements when recommending a grade of HONORS:

- Within the seven domains of which the student is evaluated, a majority of 9's and 10's (outstanding) with no grade less than a 5 (adequate) must be given to substantiate an Honors.
- **Please grade students based on where the students are at their current level of training.** What is outstanding for a third year medical student may be regarded as only competent for a fourth year student.
- The **HONORS box must be checked** (on the bottom of last page).
- Summative Comments are required to support a recommended grade of HONORS.
  - Examples of Summative Comments support the recommended Honors grade:
    - Shows exceptional performance compared to peers
    - Outstanding student
    - Best student I have had all year
    - Student performing at intern level
  - Examples of Comments that **DO NOT** Support an Honors:
    - Works hard
    - Works well with staff
    - Always reliable

**Substandard Evaluations** - All clinical clerkships will be graded on a Fail/Pass/Honors basis. Regardless of the type of clerkship, any student receiving a substandard evaluation or one recommending a failure on their Clinical Competency Evaluation will be asked to meet with the Assistant Dean of Clerkship Education. The evaluation will be examined and a grade will be determined for the clerkship. All grades are provisional until approved by the Assistant Dean of Clerkship Education.

**Failures** - An "F" will be recorded on the student's official transcript and the clerkship must be repeated.

**Automatic Reminders** – Preceptors will automatically receive electronically generated reminders from E\*Value (the computer system) at PCOM that a Clerkship Evaluation Form will be due 1 week prior to the end of the rotation. If not received sooner, E\*Value will also generate electronic reminders that the Evaluation was due at 2-weeks and again at 6-8 weeks after the end of the rotation. If the Clinical Education Dept. does not receive the Clerkship Evaluation Form from the preceptor within 12 weeks, a “provisional” PASS (without comments) will be issued by the Assistant Dean of Clerkship Education.

**Nonattendance Evaluations** - Any student who does not report on time to a clerkship without prior consent of the Assistant Dean of Clerkship Education will receive an automatic "F" and be immediately placed on academic probation. (Please see "Failures" above).

## ***Student Responsibilities and Duties***

The student is directly responsible to the supervisory personnel at the training site. The student is expected to fulfill and perform all assigned duties in accordance with the rules and regulations of the training site. All problems or difficulties should be communicated first to the Preceptor, then, if unresolved, to the Director of Medical Education at the training site. If still unresolved, the student may contact the Assistant Dean of Clerkship Education.

## ***Guidelines for Clinical Clerkships*** \*(note that "clinical clerks" = "students" below)

1. Clinical clerks\* shall be under the supervision of a physician designated for this purpose.
2. Clinical clerks shall assume responsibility for and perform their assigned duties in conformance with the training site regulations.
3. Suitable housing accommodations may be provided if not within a reasonable commuting distance from core sites. (see Housing.)
4. Students are expected to be on duty in the training site or office five full days per week. Students may also be assigned to nights and weekend services as part of the teaching program. Schedules will be arranged in such a manner as to allow students time for assigned readings and attendance at didactic conferences and lectures.
5. When requested or required by the supervising physician, clinical clerks are permitted to take a history and physical examination of the patient. Histories and physicals can be dictated or recorded and may be signed by the clinical clerk according to the rules and regulations of the training site. The histories and physicals done by the clinical clerks should be reviewed by the attending and/or supervising physician and, as an

educational modality, be reviewed with the clinical clerk.

6. Progress notes may be written by the clinical clerks under the direction of the attending or supervising physician. Progress notes must be countersigned within the time required by the rules and regulations of the training site.
7. Clinical clerks shall not order any examinations, tests, medications, or procedures without consulting and obtaining the prior approval of the attending or supervising physician. Clinical clerks shall not write prescriptions.
8. Attendance by clinical clerks is required at all didactic conferences, discussions and study sessions, and any other programs of an educational nature designed specifically for clinical clerks, and should be documented with an attendance record. In addition, clinical clerks are encouraged to attend any or all lectures for staff, residents and interns, provided these do not interfere with the clinical clerks' own program.
9. Students are required to complete all assignments of the rotation site as well as the readings, lectures, tests, and rotation evaluation assigned by PCOM. (see especially "Blended Learning")
10. Clinical clerks shall not be excused for trips away from the training site except by the Director of Medical Education and/or Preceptor in conjunction with the Assistant Dean of Clerkship Education. Requests must be made in writing to the Assistant Dean of Clerkship Education.
11. If a student becomes ill or undergoes any surgical procedure, the illness or surgery must be reported to the attending physician/preceptor to whom the student is assigned and the Office of Clinical Education. The student must call-in every morning he/she will be absent. A doctor's note must be provided, and medical clearance to return to work must be secured, before the student will be allowed to return to clerkship rotations. A copy of this note must be sent to the Office of Clinical Education.
12. Clinical clerks shall be granted permission to be absent from their service and without call the night prior to taking the National Board of Osteopathic Medical Examiners COMLEX examination. The clinical clerks shall advise the training site well in advance of their intent to take these examinations. If necessary, clinical clerks should be allotted travel time to reach the destination of their next clerkship.
13. Clinical clerks shall be required and encouraged to participate in the utilization of osteopathic manipulative treatment (OMT) when ordered. OMT shall be applied under the direction and supervision of an attending physician.
14. Clinical clerks shall learn and perform procedures under appropriate and proper supervision in those areas where the training site regulations permit such instruction. In addition to the general regulations, clinical clerks shall abide by all specific

departmental regulations of the training site.

15. The training site shall provide each clinical clerk with an orientation program when he/she first reports for service.
16. Clinical clerks are to conduct themselves in a courteous and professional manner and shall follow the dress code of the training site and the College at all times.
17. Badges: Display at all times. Student use ONLY. Valid only during official rotation.
18. Parking: Staff/Doctor Parking ONLY if permitted. NOT an entitlement!
19. Doctors'/Residents' Lounge: ONLY if invited. NOT an entitlement!

### ***Holidays and Clerkship Hours***

- While on clerkships, PCOM students should be on-service a minimum of 40 hours and a maximum of 60 hours per week.
- At the discretion of the Preceptor or the Director of Medical Education, students may be required to be on-call during weekends or work nights.
- Total clerkship on-service and on-call time should not exceed 80 hours per week.
- The only official college holidays for third- and fourth-year students are Thanksgiving Day, the Friday immediately following Thanksgiving Day (this does NOT include the Saturday and Sunday of Thanksgiving weekend, which may be duty days at the discretion of the preceptor), Winter Break, and the 2-week period between 3<sup>rd</sup> and 4<sup>th</sup> years. For scheduled holidays and time off (e.g., COMLEX), the student must notify the clerkship director or the Director of Medical Education for approval. The student will not be required to be on service nor to make-up the time missed for COMLEX. Students are not to be on-call the night prior to taking COMLEX. If the student wishes to be on service during these times, however, of course s/he may do so.
- **Students are not allowed to take time off from clerkships for personal days, mental health days, birthdays, anniversaries, etc** In addition, the Office of Clinical Education does not authorize days off for other reasons such as conferences or religious holidays. All such days off must be negotiated and authorized in writing by the attending/preceptor and Director of Medical Education where the student is doing his/her clerkship and reported to the Office of Clinical Education. These days off may need to be made up by the student in order to receive a grade for the clerkship. Repeated days off from a clerkship or a pattern of multiple days off on subsequent clerkships may result in a grade of "F" for a clerkship at the discretion of the Associate Dean for Clerkships and Core Site Development. No student who misses more than four (4) days on any 4-week clerkship or two (2) days for any 2-week clerkship, will receive credit for the clerkship unless and until the missed days are made-up in a manner acceptable to the

hospital's Director of Medical Education and/or the preceptor and the Assistant Dean of Clerkship Education. NOTE: This does NOT mean that any student is entitled to miss four (4) days from rotations.

- **Religious Accommodations: (detailed in Student Handbook)**

## *Absences*

Any absence from a clerkship will be regarded as an unexcused absence. In the event of an unexcused absence, the student must provide a written explanation for the absence to the Office of Clinical Education. Time missed for absences will need to be made up. This will be at the discretion of the Assistant Dean of Clerkship Education in consultation with the student's preceptor and/or the Director of Medical Education of the institution where the student is serving his/her clerkship. Repeated absences during a single clerkship or a pattern of absences on subsequent clerkships will result in a grade of "F" for the clerkship. A meeting with the Assistant Dean of Clerkship education should be requested for matters of marginal evaluations. The student will be referred to the Student Performance Evaluation Committee (SPEC) for discussion in instances of repeated cases of the marginal performance evaluations or repeated absences.

## *3<sup>rd</sup>-Year Excused Absences*

Excused absences during the 3<sup>rd</sup>-year of the D.O. program are limited to COMLEX examinations and for illness/emergencies. All requests for an excused absence for illness or emergency must be requested in writing via official PCOM email and submitted to the Assistant Dean for Clerkship Education. A maximum of four (4) days of excused absence MAY be granted during any 4-week clerkship rotation.

\*\*\* Research electives **require** submission of a formal description of the expected outcomes and performance measures of the rotation that **must** be received directly from the preceptor at least 30 days in advance and approved by the Assistant Dean of Clerkship Education.

## *4<sup>th</sup>-Year Excused Absences*

Excused absences during the 4<sup>th</sup> year of the D.O. program will also include **approved** requests for residency interviews, as well as COMLEX examinations and for illness/emergencies. All requests for an excused absence for illness or emergency must be requested in writing via official PCOM email and submitted to the Assistant Dean of Clerkship Education. All requests for time off for a residency interview will be submitted to the Assistant Dean of Clerkship Education in writing via official PCOM email and will include the approval of the clerkship preceptor or attending physician. Approvals for residency interviews shall be limited to the minimum time to travel to the interview the evening before the interview, the interview, and to travel back to the rotation immediately following the interview. Ordinarily, a maximum of four (4) days of excused absence MAY be granted during

any 4-week clerkship rotation; a maximum of two (2) days of excused absence MAY be granted during any 2-week clerkship rotation.

In exceptional situations, requests for more than 4 days of excused absence during any 4-week clerkship rotation (or more than 2 days of excused absence during any 2-week clerkship rotation) may be considered under the following conditions:

All requests for more than 4 days (or 2 days in the case of 2-week clerkship rotations) of excused absences for residency interviews must specify precisely how the additional time above 4 (or 2) days will be made up and must also have the written approval of the clerkship preceptor or attending physician agreeing to the make-up plans.

## ***Disciplinary Issues, Confidentiality, Patient Care, and Unsupervised Medical Care***

### **Disciplinary Issues**

Students are expected to demonstrate a professional attitude in accordance with the American Osteopathic Association Code of Ethics, the professional standards set forth throughout the Student Handbook and in compliance with all hospital or clinic policies and regulations relating to patient care, behavior, and the moral, legal, and ethical standards expected of physicians.

A student accused of violating policies involving behavior or disregard of hospital or statutory laws may be subject to disciplinary action.

A student who begins to exhibit issues of Professionalism that affects their academic performance on their clerkship will be reviewed by the Assistant Dean of Clerkship Education in consult with the Office of Student Affairs to see if any additional professionalism issues were filed with the Ethics and Professionalism Committee.

This information will be referred to the SPEC Committee for determination of what appropriate action may be required.

### **Confidentiality- HIPAA (Health Insurance Portability and Accountability Act)**

All records and communications regarding a patient's care are protected by Federal and State courts as confidential and are only to be disclosed to other members of the health care team who have a need to know. Even with appropriate personnel, the student is to use discretion when discussing patient information. Such communication is not to take place in hallways, elevators, cafeterias, or other areas where other employees, students, patients or visitors may overhear information.

Information overheard or viewed by the student inadvertently is subject to the same respect for patients confidentially as firsthand knowledge. Unauthorized release of confidential

information, in any form, may subject the medical institution, health care providers, and staff to civil and criminal liability or professional disciplinary actions. Therefore, a breach of confidential information pertaining to the patient's medical, mental, personal, or financial conditions is considered adequate justification for dismissal of the student from the clinical clerkship specific to the breach of confidentiality and all subsequent clerkships scheduled with the involved institution. Such breaches of confidential information is also justification for PCOM disciplinary action(s), up to dismissal from the D.O. program and PCOM.

### **Patient Care**

Students are required to comply with all hospital/clinic requirements related to patient care.

### ***Expectations during Emergency Situations***

In an emergency situation (e.g., hurricane, tornado, flood, snow/ice, storm) students will comply with ALL instructions and orders given by official local, state, or federal emergency management agencies or law enforcement. For example, if ordered to evacuate an area, students will do so; if ordered to remain off the roads, students will do so. Not complying with such instructions is unprofessional behavior. Any student who receives a citation or summons for having failed to obey instructions during an emergency situation will be subject to PCOM disciplinary action(s) for unprofessional behavior – up to and including dismissal.

If ordered to evacuate an area, each student who needed to evacuate will immediately proceed to a “safe” area outside of the evacuation zone. Once they are in a “safe” location, each student needs to notify the Clinical Education Dept. that they are safe and provide their precise location.

### ***Letters of Recommendation from Preceptors***

Current and former DO students may request a letter of recommendation from you as their preceptor. The student's request must be by the student's own letter and must be accompanied by a C.V. or Resume, and a statement of career goals. The decision to provide any letter(s) of recommendation for any student are always the personal choice of each individual preceptor.

When students are applying for internship and residency programs, your letters of recommendation should be sent directly to the Philadelphia Campus Office of Student Affairs.

### ***Legal Limitations on Professional Practice***

It is a violation of the laws of the State of Pennsylvania and contrary to the policy of this College for any unlicensed person to engage in or attempt to engage in the professional practice of health care. Please remember that, as a student, the student is NOT a licensed-health care provider and until he/she have graduated and are licensed, a student cannot engage in the practice of health



care.

Professional practice in health care includes such activities as *unsupervised* diagnosis, the rendering of medical treatment or advice, the prescribing of drugs, and all other activities normally performed by physicians or other licensed professionals. Students are cautioned to confine their training activities involving the activities above to supervised teaching clinics, hospitals, and training sites. At no time should a student assume responsibility for the care of any patient. **Any student delivering unsupervised medical care is engaging in unauthorized treatment in violation of College policy, is not insured by the College malpractice carrier, and may be subject to disciplinary action including dismissal.**

NO STUDENT IS AUTHORIZED TO RECEIVE OR TO COLLECT FOR HIMSELF/HERSELF OR FOR ANY OTHER PERSON, ANY FEE OR GRATUITY FOR PROFESSIONAL SERVICES.

**NOTE:** While some DO students may be fully licensed in other health care professions (for example, RNs, PAs, dentists, etc.), they may NOT exercise the rights and responsibilities of their license while simultaneously performing their duties and responsibilities as a medical student on clinical clerkship rotations.

## ***Malpractice Insurance***

All students serving **approved** clinical clerkships are covered by the professional liability insurance of the Philadelphia College of Osteopathic Medicine.

## APPENDIX A

### **Academic Rank for volunteer Clinical Faculty Appointments of PCOM Preceptors**

**General:** As per the faculty handbook, volunteer preceptors are appointed to the clinical faculty in the academic rank of Adjunct Lecturer.

Those volunteer preceptors involved in the clinical education of 3<sup>rd</sup> and 4<sup>th</sup> year medical students in the PCOM DO program who regularly serve as preceptor of a 4-week clerkship rotation for at least 1 student per quarter (precept at least 4 students for year) will be recommended by the Dean for appointments to the Clinical Faculty in an appropriate academic rank. In general, new clinical faculty will be appointed at the Clinical Assistant Professor rank OR the highest academic rank they have ever held while serving on the clinical faculty teaching medical students (MD or DO) in a medical school accredited by the LCME (MD) or COCA (DO programs) that can be documented. Those preceptors with significant experience for whom this will be a first academic appointment to the clinical teaching faculty of any medical school may request special consideration for appointment at other than the above.

#### **Clinical Assistant Professor:**

1. Doctoral degree
2. Completed residency training and are “board eligible” (“board certified” preferred)

#### **Clinical Associate Professor:**

1. Satisfactorily served as Clinical Assistant Professor for a minimum of six (6) years
2. Board Certified
3. Excellent clinical teaching record
4. Evidence of “scholarly activity”
5. Record of “service to the profession”

#### **Clinical Professor:**

1. Satisfactorily served as Clinical Associate Professor for a minimum of seven (7) years
2. Board Certified
3. Excellent clinical teaching record
4. Evidence of “scholarly activity”
5. Record of “leadership service to the profession”

#### **Clinical Instructor:**

1. A current Resident in an AOA or ACGME Graduate Medical Education program who is formally and actively involved in teaching 3<sup>rd</sup> or 4<sup>th</sup> year medical students MAY be recommended for appointment as a Clinical Instructor.

## APPENDIX B

### Elective and Selective Clerkship Rotations

Electives and “Selective” Clerkship rotations include, but are not limited to, the following examples:

| <u>Internal Medicine “Selectives”*</u> | <u>Surgical “Selectives”</u> | <u>Electives</u>        |
|--|------------------------------|-------------------------|
| Adolescent Medicine                    | Burn Care                    | Aerospace Medicine      |
| Allergy/Immunology                     | Colon/Rectal Surgery         | Anesthesiology          |
| Cardiology/Cardiovascular              | General Surgery              | Dermatology             |
| Critical Care Medicine                 | Gynecological Oncology       | Emergency Medicine      |
| Endocrinology                          | Neurological Surgery         | Family Medicine         |
| Gastroenterology                       | Obstetrics/Gynecology        | Medical Spanish         |
| Genetics                               | Ophthalmology                | Nuclear Medicine        |
| Geriatric Medicine                     | Orthopedic Surgery           | Pathology               |
| Hospitalist Medicine                   | Otolaryngology (ENT)         | Pediatrics              |
| Infectious Disease                     | Plastic Surgery              | Preventive Medicine     |
| Internal Medicine                      | Thoracic Surgery             | Public Health           |
| Hematology and/or Oncology             | Trauma Surgery               | Occupational Medicine   |
| Nephrology                             | Urology                      | Radiation Oncology      |
| Neurology                              | Vascular Surgery             | Radiology**             |
| Osteopathic Manipulative Medicine      |                              | Research***             |
| Physical Medicine and Rehabilitation   |                              | Sports Medicine         |
| Pulmonology                            |                              | Vascular/Interventional |
| Rheumatology                           |                              | Radiology**             |

\* **NOTE:** For those medical students with a special interest in Pediatrics, a Pediatric-Selective may be substituted for the Internal Medicine-selective on a case-by-case basis, as available.

\*\* Radiology and Vascular/Interventional Radiology may be substituted for either IM or Surgical Selectives above in Year 3 (but NOT both) on a case-by-case basis, as available.

\*\*\* Research electives **require** submission of a formal description of the expected outcomes and performance measures of the rotation that **must** be received directly from the preceptor at least 30 days in advance and approved by the Assistant Dean of Clerkship Education.

## **APPENDIX C**

### **Rotation Learning Objectives**

(These will vary depending upon the specialty/subspecialty)