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### PNWU-COM Contact Information

<table>
<thead>
<tr>
<th>Category</th>
<th>Contact Person</th>
<th>Email</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
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<tr>
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</tr>
<tr>
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<td>509.876.6646</td>
</tr>
<tr>
<td></td>
<td>Nicki Flood, MBA, Director, Clinical Education</td>
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<td>509.895.9145</td>
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<tr>
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<td>Louisa Beckstrand – <a href="mailto:lbeckstrand@pnwu.edu">lbeckstrand@pnwu.edu</a></td>
<td></td>
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<tr>
<td></td>
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<tr>
<td></td>
<td>Marti Martinell – <a href="mailto:mmartinell@pnwu.edu">mmartinell@pnwu.edu</a></td>
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</tr>
<tr>
<td>Administrative Assistant</td>
<td>Celest Riojas – <a href="mailto:criojas@pnwu.edu">criojas@pnwu.edu</a></td>
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<tr>
<td>ACF Coordinator</td>
<td>Jordan Kramer – <a href="mailto:jkramer@pnwu.edu">jkramer@pnwu.edu</a></td>
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<tr>
<td>COM Program Manager</td>
<td>Janell Kiel Nelson, MA – <a href="mailto:jnelson@pnwu.edu">jnelson@pnwu.edu</a></td>
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<tr>
<td>Contact Clinical Education</td>
<td></td>
<td><a href="mailto:rotations@pnwu.edu">rotations@pnwu.edu</a></td>
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Region Locations/Contacts for Clinical Education Regional Site Teams

Please use the following link to access online directory:

<table>
<thead>
<tr>
<th>Site</th>
<th>Regional Assistant Dean/Liaison</th>
<th>Regional Site Administrator</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Washington Regional Sites</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spokane</td>
<td>Randy Poncher, MD C: 509.413.7154 <a href="mailto:rponcher@pnwu.edu">rponcher@pnwu.edu</a></td>
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</tr>
<tr>
<td>Mt Vernon</td>
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</tr>
<tr>
<td>TriCities/ Hermiston</td>
<td>Guy Jones, MD C: 509.308.8480 <a href="mailto:gjones@pnwu.edu">gjones@pnwu.edu</a></td>
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</tr>
<tr>
<td>Yakima (Moses Lake/ Wenatchee/ Sunnyside/ Toppenish )</td>
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<td>Name</td>
<td>Contact Information</td>
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</tr>
</tbody>
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Introduction

Overview
The core clerkship rotations will consist of four or six weeks of clinical experience. The rotation should expose the student to various aspects of clinical care and patient management in a hospital and/or ambulatory care setting. These experiences should include reading, lectures and seminars when available, and patient care management. Although the student is assigned to a primary preceptor, the responsibility may be shared between multiple physicians in the practice setting and based on physician availability. Additionally, students may spend time with other health professionals while on a rotation to learn the inter-professional interactions involved in patient care and the contributions of each. It should be noted that all preceptors must be appropriately licensed. The student is expected to be available to assist the preceptor in all duties including evening and weekend call up to 80 hours/week. Ultimately, it is the student’s responsibility to learn the material with the aid of the physician preceptor.

Introduction to 3rd & 4th Year Rotations
Medical students from Pacific Northwest University (PNWU) in the third and fourth years of training are equipped to aid in the care of patients and learn additional vital skills, simultaneously. Rotations are a balance of clinical encounters, feedback, and daily reading on pertinent topics. This blend will provide a strong foundation in learning the critical care of hospitalized and/or ambulatory patients. The ideal working relationship between the preceptor and the student is where the preceptor is easily approachable and readily available, and the student is willing and capable of assisting the physician in the delivery of health care. Students recognize that the more interest and motivation they demonstrate in learning, the more teaching and opportunity for clinical learning they will receive.

After the student’s successful completion of his/her second year at PNWU, student didactic education will be taken over by the regional assistant dean with assistance and support from PNWU campus. Primary focus of the preceptor is exposure to the clinical arena specific to his/her specialty and to aid in the student’s understanding of what it’s like to be a doctor within that specialty.

PNWU-COM Mission, Program Goals, and Objectives
Mission
Pacific Northwest University of Health Sciences College of Osteopathic Medicine educates and trains students to become health care professionals with osteopathic values, and conducts research to provide quality care to communities of the Pacific Northwest, particularly rural and medically underserved populations.

Program Goals and Objectives

Rotation Goals
- Provide opportunities for students to act as part of the healthcare team in delivery of care.
- Aid the student in clinical reasoning to develop a differential diagnosis and treatment plan for disease management.
- Facilitate an understanding of the approach to acute and chronic care management.
- Introduce students to procedures relevant to the rotation.
- Promote and provide opportunity for improvement of medical documentation and use of the electronic medical record system.*
- Encourage the development of formal case presentation skills.
- Facilitate student understanding of medical literature and research articles.
- Encourage the continued development of the student’s professional attitude and behavior.

*Students are trained in medical documentation and oriented to electronic record systems. According to CMS guidelines, medical students may provide complete documentation of a patient encounter including historical details, history of present illness, physical exam, and medical decision making with verification (and correction if necessary) by the attending physician. This rule change became effective as of January 1, 2018. More information is available at http://www.pnwu.edu/college-osteopathic-medicine/adjunct-clinical-faculty-development/.

Objectives
Syllabi objectives for each clinical and research rotation can be found on the PNWU website: http://www.pnwu.edu/college-osteopathic-medicine/curriculum/clinical-education/clinical-rotation-syllabi/.

Clinical Education
Osteopathic medical students in years three and four are assigned to regional sites established by PNWU. The clinical experiences occur primarily within hospital sites, ambulatory sites, long-term care facilities, and in rural and critical access hospitals for exposure to a rounded clinical experience. Didactic and online curriculum for the educational program is provided by PNWU and/or the regional site. Clinical rotations are assigned and program assessment is managed through the main PNWU campus in conjunction with the regional assistant dean and regional site administrator at each site. The associate dean for clinical education is responsible for supervising and directing the clinical education
of PNWU students. To fulfill this role, the associate dean for clinical education may delegate appropriate authority to members of the clinical education team and/or the regional assistant dean.

The student may be required to attend conferences and presentations, write papers, present cases, and participate in other appropriate activities. The associate dean for clinical education or designee has the authority and responsibility to enforce the academic policy of the college at each clinical site.

Clerkship Rotation Information

Clerkships
PNWU curriculum is structured with the goal of developing self-motivated life-long learners. As such, the student is ultimately responsible for the effort required to become an outstanding osteopathic physician. Preceptors motivate, engender enthusiasm, encourage, and foster continuous learning by providing an effective and creative learning environment. Preceptors who share past experiences and clinical knowledge help students achieve their professional goals.

Regional Site Placement
PNWU third- and fourth-year curriculum delivery occurs through the regional sites located in the five Pacific Northwest state target areas of: Alaska, Idaho, Montana, Oregon, and Washington. Student assignment to regional site occurs during year two anticipating departure to clinical regional site during advancement to the third year. Regional site placement procedures are designed to support the mission of PNWU-COM to recruit students to meet the health care workforce needs of the rural and medically underserved in the Pacific Northwest. The selection process takes into consideration regions where the student has significant ties and falls in line with our mission to recruit, educate and return to practice in the Pacific Northwest.

Orientation & Student Preparation
Students receive an orientation to the region when they advance from year two to year three. This orientation is presented in each region by the regional assistant dean and the regional site administrator. PNWU provides each region with a format to follow and the region adds site-specific information. The orientation lasts from 2-5 days depending on the region. Students are prepared on what to expect when they enter clinical rotations.

The preceptor sets the tone and expectations for the rotation during the first day of orientation to the practice or service. The first day should begin with a quick introduction to the office or the service. Introduce the student to the office staff or staff on the hospital service so there is an understanding of roles and expectations of all involved. Explain the process on how the clinic or service functions and orient the student to the workflow. Discuss access to the EMR and the expectations for student use. The orientation phase is a good time to talk about patient care expectations, boundaries, dress code,
parking, hours of operation, meals, lodging (if applicable), and interaction with ancillary staff. Phone numbers and contact information should be exchanged between the student, staff, and preceptor as deemed appropriate. Preceptors should discuss with the student the most appropriate method of contact: whether it be email, voicemail, texting, or contact through office administration directly.

**Immunizations & Certifications**
Prior to beginning clerkship rotations, all PNWU-COM students will have completed and submitted documentation to the COM for the following:

- Immunization record including annual PPD and flu vaccination
- HIPAA training
- Bloodborne Pathogen training
- N95 Mask Fit certification
- ACLS/BLS certification
- 10 panel drug test
- Criminal Background Check
- Sexual Harassment and Title IX training
- EMR training
- OSHA/Hazard Communication Training

These documents are stored within the PNWU electronic system and each regional administrator has access to all of the above information.

**Supervision**

**Supervision and Expectations of Students**
Students do not have a state license to practice medicine during clerkship rotations and must be supervised during all aspects of patient care, including oversight of physicals, ordering labs and any form of imaging, prescribing, or during the performance of diagnostic and/or therapeutic procedures.

**Performing Patient Care Activities**
Student involvement in patient care is permitted when authorized by the assigned adjunct clinical faculty/preceptor responsible for supervising that student. Students may not perform any medical treatments or procedures without appropriate supervision. The preceptor (or provider designated by the preceptor) must be present for any treatment, procedure, or invasive exam. Students are not allowed to take the place of qualified medical staff. Students may not write patient care orders independently and all such orders must be reviewed and approved by the preceptor. Students may not accept payment or remuneration for services.

**PNWU, Student, Preceptor, & Practice/Hospital Responsibilities**
PNWU Responsibilities

- Arrange and monitor clinical clerkship education for students in cooperation with the regional assistant dean and regional site administrator in each region.
- The regional site provides every preceptor an information packet that includes student information and syllabi for the appropriate clerkship experience.
- Provide liability insurance for students on rotations.

Student Responsibilities

- Work with PNWU-COM staff to assure all rotation requirements are confirmed in a timely manner prior to the beginning of every rotation.
- Be compliant with all required immunizations, training/certifications (including BLS/ACLS, HIPAA, Blood Borne Pathogens, etc.) and Mask Fit Testing. These are all provided by PNWU-COM.
- Students are to actively participate in every learning experience by being proactive, engaged, and participating in assigned patient care activities.
- Be familiar with each rotation syllabus - complete all learning objectives, participate in required OMM learning activities, and fulfill all required assessments, including discipline-specific COMAT or PNWU-COM generated examinations as assigned.
- Demonstrate professionalism through appropriate behavior, communication, and attire at all times.
- Collaborate with faculty and staff to maximize opportunities in the learning environment.
- Provide appropriate feedback by completing evaluation forms provided by PNWU-COM at the end of each rotation.
- Assure that individual medical insurance coverage is current in the event of an acute illness or injury while completing clerkships.
- Schedule and pass the PNWU OSCE examination, COMLEX Level 2PE and 2CE prior to graduation (ideally prior to submission of the resident Match Rank List).
- Purchase and maintain personal health insurance

Preceptor Responsibilities

- All PNWU-COM students and preceptors have access to the syllabi for core clerkship rotations and electives. All current syllabi are located on the PNWU website (http://www.pnwu.edu/college-osteopathic-medicine/curriculum/clinical-education/clinical-rotation-syllabi/). The preceptor should be aware of the educational responsibilities but also
understand that it is the responsibility of the student to assure all objectives on the syllabus are met for each rotation.

- Provide opportunity to assist in health care delivery to the preceptor’s patients.
- Assure student knows to whom they report and how to reach that individual.
- Provide detailed expectations of the student such as time commitment, service duties, and dress code.
- Provide clear communication expectations including preferred method of communication (i.e. email, text, etc.).
- Be physically located in the facility where patient treatment is rendered.
- Grant authorization of services provided by the student.
- Examine all patients seen by the student.
- Witness procedures when performed by the student.
- Assure that the documentation in the patient’s medical record is appropriate.
- Provide feedback and timely completion of end of service evaluations.*

*PNWU utilizes E*Value as the electronic evaluation tool for preceptors, and preceptors will receive an email approximately five days prior to the end of the rotation with instructions on how to complete the evaluation of the student. The evaluation must be completed in a timely fashion (within 90 days). Please email rotations@pnwu.edu to verify that an accurate email address is documented in E*Value.

Practice or Hospital Rotation Responsibilities

- Provide student orientation to the clinical facilities to help the student acclimate and understand policies and procedures, including but not limited to: electronic medical record access, dress code, badge access, cafeteria, etc.
- Maintain the confidentiality of student performance in compliance with FERPA.
- Provide the student feedback with learning and patient care expectations throughout the clinical clerkship rotation to enhance the student experience and assist the student in achieving successful completion of the rotation.
- Direct the student to emergency care for acute student illness or incident occurring at the site. The site will not be responsible for the cost of the care.

Faculty Development
Faculty development is the process where academic professionals engage in quality self-improvement and improving academic quality. Physicians are held to educational standards including assessment of professionalism, communication, teamwork, emotional and social functioning, ethical behavior and reasoning, and self-management skills that are part of the curriculum and evaluation process of trainees. The Faculty Development program at PNWU-COM was designed by the Clinical Education Department to be supportive of a new or seasoned preceptor. PNWU offers modules with CME credit through TeachingPhysician.org to preceptors. Instructions for access and additional training modules can be found on the PNW website (www.pnwu.edu).

**Library & Electronic Resources**

The following information is applicable to adjunct clinical faculty (ACF) members. Non-ACF Preceptors, who are not affiliated with a hospital/medical library, are offered a document delivery service upon request. There is a charge per article to cover PNWU expenses.

**eResources**


**Interlibrary Loan and Document Delivery**

If you are not affiliated with a hospital that offers library services, the PNWU Library can provide you with journal articles through document delivery or interlibrary loan. Submit your request using the Loansome Doc Ordering system (preferred). For items that are not indexed in PubMed, you can use our Document Delivery/Interlibrary Loan Request Form. Please see Interlibrary Loan and Document Delivery at [http://www.pnwu.edu/inside-pnwu/departments/library/interlibrary-loan-and-document-delivery/](http://www.pnwu.edu/inside-pnwu/departments/library/interlibrary-loan-and-document-delivery/) for more information. Literature searches are conducted free of charge for PNWU faculty, staff, students and ACF.

**Reference Services and Library Instruction**

Reference service is available by phone, email, or in person. Library staff are available to answer your reference questions, provide instruction in database searching, or provide literature searches. Literature searches will be delivered to your email account. Please use the Literature Search Request Form found at [http://www.pnwu.edu/inside-pnwu/departments/library/research-support/](http://www.pnwu.edu/inside-pnwu/departments/library/research-support/). The PNWU library can be reached at 509.249.7745 or library@pnwu.edu.

**Circulation**

Circulating books may be checked out for two weeks; reserve books for twenty-four hours. Journals and reference books may be used in the library only. Please show your photo ID and identify yourself as a PNWU ACF member when checking out materials.
Clerkship Rotations

Required 3rd Year CORE Rotations
The majority of CORE rotations for clinical clerkships at PNWU-COM will be completed in the 3rd year at the assigned regional site.

Core Rotations include:
FM701 – Family Medicine (6 weeks)
IM701 – Internal Medicine (6 weeks)
OBGYN701 – Women's health (6 weeks)
PEDS701 – Pediatrics (6 weeks)
BEHSC701 – Behavioral Health (4 weeks)
SURG701 – Surgery (6 weeks)
OMM701 – Osteopathic Manipulative Medicine (4 weeks)
PCC702 – Primary Care Core (6 weeks)
EM701 – Emergency Medicine (4 weeks) (may be completed in the 4th year)

Graduation Checklist - Class of 2020

<table>
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<th>Course #</th>
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<td>OPP 701</td>
<td>Osteopathic Principles &amp; Practice</td>
<td>4</td>
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<tr>
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<td>Total credits/weeks</td>
<td>48</td>
<td></td>
<td></td>
<td>36</td>
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</tbody>
</table>

Rotation requirements include:
- All Faculty Evaluations of Student received and passing
- Student Evaluation of ALL Rotations
- Case Logs submitted for each rotation

Other academic graduation requirements:
- ADV 701 (5 cr) – Professional Development & Certification III
- ADV 801 (5 cr) – Professional Development & Certification IV
- Completion of Regional Assistant Dean Reviews
- Formal clinical presentation (recommend evaluation by Regional Assistant Dean by end of third-year)
- Pass COMLEX-USA Level 1, 2CE, 2PE
NOTE: Additional weeks called Primary Care Core (PCC) are assigned by the regional assistant dean and a decision is made in conjunction with the student to provide additional rotation experience. PCC rotations are not eligible for honors.

- The PCC can be any combination of Family Medicine (FM 702), Internal Medicine (IM 702), Pediatrics (PED 702), Radiology (SURG 702) or Women's Health (OBGYN 702).
- Each PCC must be at least 2 weeks in duration and no more than 6 weeks total. Students are expected to log a minimum of ONE objective a day while on the PCC rotation.
  - Objectives are the same as the objectives for the core.
    - 2 weeks = 10 objectives
    - 4 weeks = 20 objectives
    - 6 weeks = 30 objectives

Required 4th year Elective Rotations

SURG – (10 weeks)
IM – (10 weeks)
Unrestricted Electives (16 weeks)

Graduation Checklist – Class of 2019
Rotation Grading Policy - End of Rotation Evaluation and COMAT Exams

Comprehensive Osteopathic Medical Achievement Tests (COMAT)
COMAT subject examinations must be taken at the end of the core rotation (except for PCCs). COMAT exams are provided online by the NBOME.

The following rotations require an end of rotation examination:
- Family Medicine
- Internal Medicine
- Pediatrics
- Surgery
- Obstetrics/Gynecology
- Osteopathic Principles & Practice
- Behavioral Medicine
- Emergency Medicine – this is not required, students may take the exam at their own expense.

Arrangements to take the exam are made through the regional site administrator.

PNWU-COM osteopathic medical students are expected to attend all patient centered care opportunities during the entire rotation and are not granted days away from rotation in order to prepare for their rotation examination (COMAT). Students are expected to prepare for these examinations each day of the rotation through the direct patient care experiences supervised by the preceptors. They should use any other assignments, including the online modules provided by PNWU, to reinforce this learning experience when direct patient care is not available (evenings, weekends or “downtime” during the day), but not as a substitute for patient encounters. Students shall not ask the preceptors for extra time away for study and preceptors are asked to continue to provide patient care opportunities for the students through the last day of the rotation.

NOTE: Exams are scheduled in conjunction with didactics and students are expected to be available as scheduled. Any excused absence must be preapproved by the regional assistant dean. It is the expectation that the student will take the COMAT exam in the region that they are assigned to at the time.

Evaluations

Preceptor Evaluation of Student on Clinical Rotations
Should a learner be supervised by one attending physician or other physicians or residents on a service, the preceptor of record to whom the student is assigned will be responsible to evaluate the student performance. The preceptor will provide an online evaluation consisting of Likert Scale ratings along with direct observation comments. Preceptor will be asked to add summative and formative comments.
to the evaluation. Summative comments will be included in the Medical Student Progress Evaluation (MSPE) that are included in residency applications (previously called Dean’s letter). The formative section is provided to the preceptor to provide the student with constructive comments to help the student grow professionally. See Appendix C.

**Student Evaluation of Preceptor & Rotation**
The student will evaluate both the preceptor and the clinical rotation using the evaluation forms in E*Value. These evaluations will reflect the student’s observations regarding the quality of training received on each rotation. It should be noted that student evaluations of the preceptor can be requested from the preceptor’s regional assistant dean, who can provide a composite evaluation format once three or more students rotate with a preceptor. (The minimum of three students maintains student confidentiality.) See Appendix D.

**Mid-rotation evaluation (optional - but encouraged)**
This informal mid-rotation evaluation provides an opportunity for students to learn what they are doing well and where they need improvement before their final graded evaluation. Mid-rotation evaluations do not need to be returned to PNWU. See Appendix E.

**Providing Effective Feedback**

**Giving Feedback**
Providing feedback is different from an evaluation. If done well, feedback is non-judgmental and is meant only to provide a frame of reference to the learner so they may better understand their level of performance based on observations from the preceptor.

There are three levels of feedback:
1. Direct observations of the learner.
2. Preceptor assessment to what they observe.
3. Preceptor professional judgment about the appropriateness or helpfulness of the observed behavior.

**Characteristics of Effective Feedback**
1. Provide descriptive rather than evaluative information
2. Focus on specific rather than general behavior
3. Address the expectations of the student and the preceptor
4. Direct feedback toward behavior the student controls
5. Provide feedback as soon after the behavior occurs as possible
6. Provide mid-rotation evaluation with the student
7. Balance good and bad items of behavior
8. Limit amount of information to what the student can use
9. Check for understanding
Policies and Student Information

Student Clerkship Work Hours

Minimum Attendance/Training Hours
The schedule for a clinical rotation will be determined by the preceptor and should not exceed 80 contact hours in a week. It is expected that students are in a period of training that parallels the schedule of their preceptor. Therefore, students may be required to be on shifts with their preceptor that may include evenings and weekends. Rotations officially begin on a Monday and end on the last Sunday of the rotation.

General Guidelines
1. A shift may vary in length.
2. A workweek must not exceed a maximum of 80 hours.
3. Some rotations may include weekday hours while others may involve evenings, weekends, and call.
4. The maximum duration of a workday is 36 hours and should be followed by a minimum of 12 hours off duty.
5. The workday does not end until the preceptor releases the student from clinical duties.

Night call is encouraged. Students may be required to be available evenings and weekends at the discretion of their preceptor. Students should not be required to take call more than every third night and should be given an average of one day off in seven (7) during a rotation.

Students shall not work unsupervised. If a preceptor is out of the office for more than two days, the student should be either assigned to a substitute preceptor or given an assignment. If this is not an option, the student is required to contact the regional assistant dean. The regional assistant dean will assign the student other clinical duties or assignments.

Report for Rotation
It is the responsibility of each student to be present on the commencement of each rotation. If an orientation is required at a clinical rotation site, the student shall participate and follow the protocols established by that rotation.

End of Service
The student is not allowed to leave the designated clinical rotation prior to the scheduled departure date without approval of the preceptor and the regional assistant dean. Departures prior to the scheduled departure date without prior consent will be considered an unexcused absence. The COMAT exam may be held before the end of service date; completion of COMAT does not signify completion of rotation.
NOTE: The student should be prepared to remain on their rotation through Sunday. If a preceptor requires the student to be available on the weekend, the student must comply. The student does not dictate weekends off or the need to have the last weekend off to move to the next rotation. The end of the day occurs when the preceptor releases the student from the rotation. A preceptor will often stay after business hours to catch up, teach the student, or do other duties that were not complete during the day. All of these activities are part of the rotation.

Concerns about Student Performance

Concerns Regarding Student Progress, Academic or Professional Performance
If there is a concern about a student’s progress, academic or professional performance, the regional assistant dean should be contacted by the concerned party. If the regional assistant dean is not available, the associate dean for clinical education at PNWU should be contacted. All reports will be thoroughly investigated and appropriate action taken. Examples of concerns may include, but are not limited to:

- Poor communication skills, inappropriate communication methods as defined by the preceptor
- Deficient clinical skills
- Poor academic performance
- Unexcused absenteeism
- Medical or psychological illness
- Suspected substance abuse
- Suspected illegal behavior
- Suspected physical, sexual, or emotional abuse
- Issues with ancillary support staff
- Failure to complete rotation requirements
- Poor professionalism

The regional assistant dean will review the reported concerns and if necessary contact PNWU-COM for instruction.

Attendance Policy

Attendance
1. Attendance is mandatory on all clinical rotations.
2. Student must notify the regional assistant dean/regional site administrator prior to any anticipated absence and immediately for an absence due to illness or for unforeseen circumstances
3. All absences require permission from the preceptor and the regional assistant dean.
   a. Students must provide clear reasons pertaining to the absence.
   b. Students are required to make up missed work with their preceptor.
4. Any absence greater than two (2) consecutive days requires a Time Away Request submitted through E*Value.
   a. If more than two (2) days are required for board examination the regional assistant dean has the authority to approve without a time away request.
5. Unexcused absences will result in failure of the clinical rotation.

**Time Away from Rotation**

Time away from rotation includes vacation, interviews, conferences, board exam study, personal time, and when fourth-year students are unofficially done with rotations. Students will be allowed up to four-weeks of time away in the third year. In the fourth year, the amount of time away is contingent upon meeting rotation graduation requirements. Time away is requested by the student through PNWUs electronic scheduling system, E*Value, and is done in consultation with the regional site administrator (third-year) or regional clerkship administrator (fourth-year). Travel arrangements should not be secured until approval is given by PNWU, including appropriate regional staff.

**Attendance Policy for Professional Conferences**

Attendance at AOA-sponsored national meetings, osteopathic divisional society meetings, and AOA/osteopathic specialty meetings is permitted with prior approval. If the conference is two days or less, no formal time away is required and should be arranged between the preceptor, regional assistant dean, and the student. If a student wishes to attend a conference greater than two days, the student must follow PNWU's process for requesting time away at least 30 days prior to the conference. Once the request has been processed, the student will be notified if it is approved or denied and is expected to notify the preceptor of PNWUs decision.

**Holiday/Leave of Absence/Inclement Weather**

**Leave of Absence (LOA)**

A student may need to request a leave of absence due to medical, emergency situations, or even military deployment. Students should provide 30 days advanced notice of a leave, unless there are extenuating circumstances.

**Holidays**

Holidays are at the discretion of the preceptor, hospital, or clinic facility where the student is rotating. There are NO designated holidays approved by PNWU during clinical rotations.

**Inclement Weather**

The PNWU-COM Inclement Weather policy does not apply to students participating in clerkship rotations. Students are to follow the instructions of their current preceptor and regional assistant dean.

**Didactics**
All third- and fourth-year students will attend didactics. Didactic sessions vary based on region and attendance is monitored. Each region will provide students with the didactic schedule and topics to be covered. If a student is on a rotation in another PNWU region, they are required to attend didactics in the region where the rotation is occurring. Didactics are an opportunity for fourth-year students to provide mentoring and offer valuable information to assist third-year students with planning for residency. The regional site administrator notifies preceptors of the didactics schedule.

Professionalism

Professionalism and trust are the basis of medicine’s contract with society. It demands placing the interests of patients above those of the physician, setting and maintaining standards of competence and integrity, and providing expert advice to society on matters of health. The principles and responsibilities of medical professionalism must be clearly understood by both the profession and society. A set of professional responsibilities includes, but is not limited to a commitment to:

- Clinical competence
- Honesty with patients
- Patient confidentiality
- Maintaining appropriate relations with patients
- Improving quality of and access to care
- A just distribution of finite resources
- Scientific knowledge
- Maintaining trust by managing conflicts of interest
- Logging information into E*Value/Portfolio, etc.
- Timely and courteous response to staff emails and phone calls
- Professional appearance
- Professional communication with staff and physicians

As members of a profession, physicians should be respectful of one another and participate in the processes of self-regulation, including remediation and discipline of members who have failed to meet professional standards. The profession should also define and organize the educational and standard-setting process for current and future members. Physicians have both individual and collective obligations to participate in these processes. These obligations include engaging in internal assessment and accepting external scrutiny of all aspects of professional performance.

Professionalism Emphasis for Clinical Education

Students must show professionalism in all actions during rotations and outside activities. Professionalism includes but is not limited to:
• Maintain professional appearance consistent with expectations of the rotation site, wear appropriate ID and lab coat displaying PNWU logo.
• Be punctual and arrive before the start of clinical responsibilities – responsive, prompt and available when called upon.
• Be motivated to learn – be self-initiated, flexible, and able to adapt.
• Demonstrate a cooperative attitude and be receptive to feedback.
• Respect and observe the organization’s policies and guidelines.
• Observe patient confidentiality policies – follow HIPAA policies.
• Communicate orally and in writing in a concise, clear, and organized manner.
• Maintain appropriate and ethical boundaries with patients and members of healthcare team.
• Treat all staff and patients with respect and courtesy.
• Engage in self-learning – set appropriate priorities and complete tasks.
• Demonstrate consistent effort and professional growth during the rotation.
• Be receptive to feedback from all members of the clinical team including nursing staff and administrators.

Examples of student conduct, which violate professional standards and may lead to disciplinary action by the University include but are not limited to:
• Intentionally interfering with classes, research, administration, patient care, movement of other people, or any school function.
• Showing a lack of respect towards other students, patients, faculty, staff, administration, or other school personnel. Lack of respect includes sending of disrespectful email, text messages or placing derogatory comments on a physician preceptor web page.
• Failure to complete assignments, attend required classes, shadowing or rotations.
• Failure to resolve conflicts in a reasonable manner or disrespecting diversity.
• Being mentally or constitutionally unable to follow the directions provided by faculty, staff, administration, or other school personnel.
• Academic dishonesty, including cheating, plagiarism, attempting to pass examinations by improper means, or assisting another student in such an act or simply tolerating it in others.
• Intentionally providing false information to the school or officers of the school, altering records, or refusing to comply with the directions of school officials.
• Intentional damage or theft of any school property or property of any school employee, fellow students, or visitor.
• Practicing or appearing to practice medicine without a license (such as engaging in clinical activity without the direct supervision of a licensed physician) or accepting any form of reimbursement, payment, or gift for performance of clinical duties.
• Sexual or physical harassment of any other student, employee, or visitor to the school.
• The use, distribution, sale, or possession of illicit drugs or non-prescribed substances.
Any action in violation of local, state, or federal law or being indicted by a local, state, or federal court system for a felony.

Any action in violation of PNWU policy, including the student honor code. The PNWU student honor code can be found at http://www.pnwu.edu/students/student-affairs/student-activities/student-ethics-board/.

Student/Patient/Faculty/Preceptor Relationships
The relationship between a student and faculty/preceptor or patients must always be kept on a professional basis. A student may not date or become intimately involved with faculty/preceptor or a patient. Concerns involving these issues should begin with contacting Student Affairs at studentaffairs@pnwu.edu or 509-249-7724 or Human Resources at HR@pnwu.edu or 509-452-5100.

Guides for Appropriate Dress on Rotations

General Dress
Students on clinical rotations are expected to use good judgment and if there is a question as to the appropriateness of dress, the student should ask the preceptor.

Short white lab coats with PNWU logo and any required badge are expected to be worn unless specifically instructed otherwise by the hospital or preceptor. Alterations in this dress code are subject to the discretion of individual physicians/institutions/facility.

PNWU-COM Resources for Student Health

Health and Wellness

Counseling
Confidential on-campus and off-campus counseling services are available through Student Affairs. PNWU has providers who are able to meet with students on- or off-campus. To contact the providers directly, please see our Counseling Services web page.

Needle Stick/Exposure Policy
BBP/HIV/AIDS EXPOSURE: All students with medical education-related BBP/HIV/AIDS exposure through another person’s blood or body fluids—by injury caused by a sharp object or exposure to mucous membranes/skin—will take the following steps immediately:

a. PERFORM BASIC FIRST AID: IMMEDIATELY clean the wound and skin with soap and running water. Flush any mucous membranes or eyes with copious amounts of water or normal saline for several minutes. Blood should be allowed to flow freely from the wound. Blood should not be squeezed or “milked” from the wound.
b. IMMEDIATELY NOTIFY the preceptor or instructor. Any PNWU students with medical education-related BBP/HIV/AIDS exposure will be immediately released from his/her preceptorship/rotation or course to go to the nearest hospital Emergency Room (ER).

c. If on rotations NOTIFY the regional assistant dean’s office of the incident.

d. The goals of the student reporting to the ER for BBP/HIV/AIDS exposure are:

   1) To help the student assess whether the exposure is low or high risk using the most current CDC&P guidelines.

   2) To start post-exposure prophylactic medication within two hours if the incident is a high risk. High-risk exposure is typically defined as significant blood or bodily fluid exposure of a source person with any of the following: known HIV/AIDS and/or symptoms of AIDS, multiple blood transfusions 1978-1985, IV drug user, multiple sexual partners, or homosexual activity.

   3) Counseling the student on medication side effects and clarifying the benefit/risk ratio of their use.

   4) Check baseline labs: HIV/AIDS antibody testing, complete blood count, renal and hepatic chemistry profile, and hepatitis evaluation.

e. The associate dean of clinical education shall be a point of contact for any problem that may arise during clinical rotations. During first and second year, students should contact Preclinical Education.

f. The student shall report for follow-up to the regional assistant dean. The regional assistant dean shall, at a minimum, be responsible for:

   1) Ensuring HIV/AIDS antibody testing is done at 6 weeks, 12 weeks, and 6 months and results checked.

   2) Writing prescriptions for the 4-week drug regimen if needed.

   3) Repeating complete blood count and renal and hepatic chemistry profiles at two weeks.

   4) Monitoring potential pancreatic toxicity by ordering weekly complete blood counts and chemistry profiles.

g. The student is responsible for any costs incurred by these procedures and should ensure that their medical insurance provides coverage for such situations.

Student Drug Testing Policy
PNWU reserves the right to require drug screens of students at any time it so chooses. In compliance
with this requirement, PNWU requires that all students agree to undergo a drug screen whenever it is requested of them. For further information about drug screen policy, contact the local regional assistant dean or site administrator.

**Family Educational Rights and Privacy Act of 1974**
The Family Educational Rights and Privacy Act (FERPA) The Family Educational Rights and Privacy Act (FERPA) of 1974 is a federal law governing access to student education records. FERPA stipulates conditions for release of information from education records and affords students the opportunity to review and seek revision of those records. Pacific Northwest University of Health Sciences (PNWU) accords all the rights provided by the law and reserves for itself the right to use and release student education records under the conditions specified by the law.

**Malpractice Insurance Coverage & Certificate**

**PNWU Provided Insurance**
PNWU students are covered with liability insurance only if the students are participating in an officially approved clinical experience or rotation. If a student is aware of a potential legal liability situation, the associate dean of student affairs or designee must be notified immediately. Progression of any legal liability action is to be detailed in writing by the student and regularly sent to the associate dean of student affairs or designee.
Precepting Students in a Busy Practice

- Preceptors are busy physicians with their own practices and many are on production models.
- Students can be utilized in health care delivery so the physician can keep on task.
- EMR training – Students can document a full patient encounter with the physician repeating but not re-documenting the physical exam and medical decision making components. Physicians will need to review student's note and write their own verification note.
- Students can supply and discuss patient education.
- Students may keep you engaged
- Being a professor raises your esteem in the eyes of your patients and colleagues.
- Teaching energizes and reminds you of why you went into medicine.
- Patients appreciate the extra time students give raising patient satisfaction scores
- Students sometimes remember the less likely diagnoses that are not often seen.
- PNWU preceptors have access to research assistance through the PNWU Office of scholarly Activity. Visit http://www.pnwu.edu/inside-pnwu/departments/osa/ for more information.
- By teaching you are preparing the next generation to care for the rural and underserved communities of the Pacific Northwest and assure that these communities will continue to have access to highly qualified physicians.
- Have students spend extended time with your patients who like to talk.
- Third year osteopathic students are skilled in osteopathic manipulation – many patients appreciate appropriate OMT.
- Students can help meet clinic metrics.
B. How to train students without getting behind

The secret is putting the student to work while you stay on task.

<table>
<thead>
<tr>
<th>Physician</th>
<th>3rd Year Student</th>
<th>Physician</th>
<th>4th Year Student</th>
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<td>9:45</td>
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</tr>
<tr>
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<tr>
<td>10:45</td>
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Preceptor stays on time  Preceptor gets ahead
C. Sample Preceptor Evaluation of Student

Pacific Northwest University  
College of Osteopathic Medicine

Subject:  
Evaluator:  
Site:  
Period:  
Dates of Course:  
Course: BEHSC 701: Behavioral Medicine  
Form: Faculty Evaluation of Student

Pacific Northwest University of Health Sciences  
College of Osteopathic Medicine  
Evaluation of Student Performance

Thank you for participating in the training of this future physician. We recognize and value the contributions that our Adjunct Clinical Faculty make in this process. Both D.O. and M.D. preceptors should evaluate the student’s performance based on their own training and expectations. Assessment of uniquely osteopathic principles and practices should similarly be based on each preceptor’s educational background and training. Students will be given access to their evaluations after they have been submitted, in order to allow them an opportunity to review your assessment.

Please comment for ratings of "Strongly Disagree" in "Formative Comments" section at end of evaluation.

**Osteopathic Principles and Practice (OPP) and Osteopathic Manipulative Treatment (OMT)**

Candidates must be able to demonstrate knowledge of osteopathic principles and practice, and to demonstrate and apply knowledge of somatic dysfunction diagnosis and Osteopathic Manipulative Treatment in the clinical setting.

(Question 1 of 15 - Mandatory)

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Moderately Agree</th>
<th>Slightly Agree</th>
<th>Slightly Disagree</th>
<th>Moderately Disagree</th>
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<tbody>
<tr>
<td>The student’s performance was appropriate for his/her level of training.</td>
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<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
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**Patient Care**

Provide patient-centered care that is culturally responsive, compassionate, and appropriate for the effective treatment of illness and promotion of health.

(Question 2 of 15 - Mandatory)

<table>
<thead>
<tr>
<th></th>
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<tr>
<td>The student’s performance was appropriate for his/her level of training.</td>
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<td>5.0</td>
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(Question 3 of 15 - Mandatory)

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<th>1-2</th>
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</table>
| How many times did you directly supervise the student's performance of a history and physical? |\

Page | 25
### Medical Knowledge

*Demonstrate an understanding and application of the evolving osteopathic, biomedical, clinical, epidemiological, biomechanical, and cognate (e.g., epidemiological and social-behavioral) sciences to optimize patient care.*

(Question 4 of 15 - Mandatory)

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<th>Moderately Disagree</th>
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<tbody>
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(Question 5 of 15 - Mandatory)

(Select all that apply)

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</table>

Please indicate the basis on which you arrived at your evaluation:

(Question 6 of 15)

Comments on Medical Knowledge

### Practice-Based Learning and Improvement

*Demonstrate the ability to continuously evaluate patient care practices, scientific evidence and personal beliefs and biases as they relate to improving the care of patients and optimizing patient outcomes.*

(Question 7 of 15 - Mandatory)

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<th>Moderately Disagree</th>
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</table>

(Question 8 of 15 - Mandatory)

### Interpersonal and Communication Skills

*Demonstrate the ability to consistently interact respectfully, empathetically, and professionally with patients, families, allied health care providers, staff, and colleagues, to optimize patient outcomes.*

The student's performance was appropriate for his/her level of training.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
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<th>Slightly Agree</th>
<th>Slightly Disagree</th>
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<tbody>
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<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
</tbody>
</table>
(Question 9 of 15 - Mandatory)

How many situations did you observe this student interacting with patient and family?

(Question 10 of 15 - Mandatory)

**Professionalism**
Demonstrate a commitment to the highest standards of professional responsibilities, adherence to ethical principles and cultural responsiveness to diverse beliefs and customs.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Moderately Agree</th>
<th>Slightly Agree</th>
<th>Slightly Disagree</th>
<th>Moderately Disagree</th>
<th>Strongly Disagree</th>
<th>Insufficiently Able to Judge</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
</tbody>
</table>

The student's performance was appropriate for his/her level of training.

(Question 11 of 15 - Mandatory)

**Systems-Based Practice**
Effectively utilize available health care system resources to provide optimal health care to the individual patient and local and global communities.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Moderately Agree</th>
<th>Slightly Agree</th>
<th>Slightly Disagree</th>
<th>Moderately Disagree</th>
<th>Strongly Disagree</th>
<th>Insufficiently Able to Judge</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
</tbody>
</table>

The student's performance was appropriate for his/her level of training.

(Question 12 of 15 - Mandatory)

**Summative Comments: Performance during rotation** - Comments for use in the Dean's MSPE/sent to residency programs

(Question 13 of 15 - Mandatory)

**Formative Comments: Areas for improvement and growth** - Not for use in the Dean's MSPE but will not include specific evaluator comments.
(Question 14 of 15 - Mandatory)

<table>
<thead>
<tr>
<th>In my opinion, the student successfully completed the expectations for this rotation as outlined in the syllabus:</th>
</tr>
</thead>
</table>

My typed signature is my symbol and intent of authentication where I willingly signed, understood, and adopted this document
(Question 15 of 15 - Mandatory)
D. Sample Student Evaluation of Preceptor

Pacific Northwest University
College of Osteopathic Medicine

Subject:  
Evaluator:  
Site:  
Period:  
Dates of Course:  
Course:  BEHSC 701: Behavioral Medicine  
Form:  Student Evaluation of Faculty

Pacific Northwest University of Health Sciences  
College of Osteopathic Medicine  
Student Evaluation of Faculty

Comments are required for ratings of “Strongly Disagree”

(Question 1 of 9 - Mandatory)

<table>
<thead>
<tr>
<th>Patient Care - This Attending...</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Somewhat Agree</th>
<th>Somewhat Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Insufficiently Able to Judge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balances teaching medical students and seeing patients in a timely manner</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Encourages me to form a differential diagnosis and treatment plan on my patients</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Is open to patient behavioral/psychosocial needs</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Treats patients with respect</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Demonstrates care and respect for patients’ families</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
</tbody>
</table>

(Question 2 of 9 - Mandatory)

<table>
<thead>
<tr>
<th>Medical Knowledge - This Attending...</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Somewhat Agree</th>
<th>Somewhat Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Insufficiently Able to Judge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is up-to-date on current literature</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Is a good role model as a teacher</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Is a good role model as a clinician</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
</tbody>
</table>

(Question 3 of 9 - Mandatory)

<table>
<thead>
<tr>
<th>Practice-Based Learning and Improvement - This Attending...</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Somewhat Agree</th>
<th>Somewhat Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Insufficiently Able to Judge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Uses bedside teaching to demonstrate medical and interviewing and exam skills</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Stimulates me to read, research and review pertinent topics</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Is active in his/her role and enjoys teaching</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
</tbody>
</table>
### Interpersonal and Communication Skills - This Attending...

<table>
<thead>
<tr>
<th>Skill</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Somewhat Agree</th>
<th>Somewhat Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Insufficiently Able to Judge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provides feedback in a constructive and timely manner</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Listens to and values my opinion</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Treats me with respect</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
</tbody>
</table>

### Systems-Based Practice - This Attending...

<table>
<thead>
<tr>
<th>Practice</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Somewhat Agree</th>
<th>Somewhat Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Insufficiently Able to Judge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Encourages a cost conscious approach to patient care</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Establishes rapport with students</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Shows respect for physicians in other specialties and for other health care professionals</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
</tbody>
</table>

### OPP/OMT - This Attending...

<table>
<thead>
<tr>
<th>Practice</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Somewhat Agree</th>
<th>Somewhat Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>Insufficiently Able to Judge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is open to the application of OPP/OMT</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
<tr>
<td>Promotes and encourages the practice of OPP/OMT</td>
<td>6.0</td>
<td>5.0</td>
<td>4.0</td>
<td>3.0</td>
<td>2.0</td>
<td>1.0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Please list any strengths of this preceptor**

**Please list any areas for improvement for this preceptor**
E. Mid-rotation evaluation

**MID-ROTATION REVIEW**

<table>
<thead>
<tr>
<th>Student:</th>
<th>Preceptor:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotation Name/Location:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>PRECEPTOR FEEDBACK ON PERFORMANCE</strong></th>
<th><strong>ASSESSMENT</strong> (please comment if below expectations)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Exceed Expectations</td>
</tr>
<tr>
<td><strong>Patient Care</strong></td>
<td></td>
</tr>
<tr>
<td>Takes an effective history</td>
<td></td>
</tr>
<tr>
<td>Performs appropriate physical exam</td>
<td></td>
</tr>
<tr>
<td>Generates differential diagnosis</td>
<td></td>
</tr>
<tr>
<td>Generates and manages treatment plans</td>
<td></td>
</tr>
<tr>
<td><strong>Medical Knowledge</strong></td>
<td></td>
</tr>
<tr>
<td>Exhibits knowledge of diseases and pathophysiology</td>
<td></td>
</tr>
<tr>
<td><strong>Practice Based Learning and Improvement</strong></td>
<td></td>
</tr>
<tr>
<td>Demonstrates skills in evidence-based medicine</td>
<td></td>
</tr>
<tr>
<td><strong>System-based Practice</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Teamwork</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Interpersonal &amp; Communication Skills</strong></td>
<td></td>
</tr>
<tr>
<td>Communicates with patients &amp; families</td>
<td></td>
</tr>
<tr>
<td><strong>Written Communication</strong></td>
<td></td>
</tr>
<tr>
<td>Oral presentation skills</td>
<td></td>
</tr>
<tr>
<td><strong>Professionaism</strong></td>
<td></td>
</tr>
<tr>
<td>Respectful &amp; Compassionate</td>
<td></td>
</tr>
<tr>
<td>Receives constructive criticism well</td>
<td></td>
</tr>
<tr>
<td>Accountable</td>
<td></td>
</tr>
<tr>
<td><strong>Osteopathic Medicine</strong></td>
<td></td>
</tr>
<tr>
<td>Applies osteopathic principles to the care of the patient</td>
<td></td>
</tr>
</tbody>
</table>

**What skills does the student need to improve?**

**What can the student do to advance their performance?**

Student Signature: ___________________________  Date: ___________________________

Preceptor Signature: ___________________________  Date: ___________________________
For additional information, feel free to view the PNWU Clinical Education website
http://www.pnwu.edu/college-osteopathic-medicine/clinical-education/