

**Tailoring Clinical Teaching to an Individual Student**

Authored by: PAEA’s Committee on Clinical Education

published february 2017

1-PAGERS

for PRECEPTORS

PA students from the same or different programs may come to the clinical setting for training with differences in clinical knowledge and skills based on a number of factors, including:

* Experience level in their clinical training — students on a first rotation may require more direction than those later in their training.
* Whether your practice is primary care or a specialty. Nearly all PA students are trained as generalists.
* Patient care experiences prior to PA school. An IMG or independent Duty Corpsman might be expected to have more advanced skills than a former phlebotomist or scribe.

# Suggestions for assessing student on first day of training



* + Determine the student’s status – early, mid, or late clinical training
  + Ask what clinical experiences they had prior to PA school
  + Ask how confident they feel in their ability to function clinically in your specialty
  + Determine what their general goals are for the rotation (knowledge and skills they wish to acquire)
  + Tailor the student’s early experiences based on the factors above
  + Provide observational experiences in the earliest days of the rotation for less comfortable students
  + Note that more accomplished and comfortable students may be able to begin seeing patients independently while you see another patient
  + Communicate with students that you expect them to evolve over your time together
  + Directly observe certain students to assess skills in Hx, PE, and procedures

# Behaviors that indicate the student is “getting it”

* + Presents thorough, focused history and physical
  + Consistently articulates sound decision-making in differential and in working toward a diagnosis
  + Develops and implements a reasonable plan of care
  + Connects with patients interpersonally in caring manner
  + Is organized, independent, and time-efficient
  + Is self-confident but knows their limits, asks for help
  + Has holistic view of care; includes health promotion and disease prevention
  + Provides concise and accurate charting and oral presentations

# “Red flag” behaviors

* + Is hesitant, anxious, defensive, or not collegial
  + Has uneasy rapport with patients and misses cues
  + Presents less-focused history and physical with excessive incomplete data
  + Performs physical examination poorly, or inconsistently
  + Is unable to explain reasoning for diagnosis
  + Is unable to prioritize patient problems
  + Is unable to create plans independently
  + Misses health education and disease prevention opportunities in plan
  + Is unsure of tests to order
  + Is unable to provide clear charting and presentations

\*For students who consistently display any of the “red flag” behaviors, please document this for the PA program’s clinical faculty as a part of the student evaluation. Students and the clinical staff must be aware of these issues to be able to provide appropriate remediation. Early contact with program faculty allows the development of a remediation plan during the time the student is rotating with you.

**reference**



Modified from: ht[tps://www.midwestern.edu/Documents/AZ%20PA/Mastering\_the\_preceptor\_role(0).pdf](http://www.midwestern.edu/Documents/AZ%20PA/Mastering_the_preceptor_role(0).pdf)