

STUDENT CLINICAL PRACTICE PASSPORT

High Point University Department of Physician Assistant Studies Graduates will possess the knowledge, skills, and attitudes necessary to demonstrate entry-level proficiency for clinical practice.

Demonstration of proficiency is monitored throughout the HPU MPAS program. The <u>Student Clinical Practice Passport</u> is designed to ensure that by the completion of the clinical year, students have acquired program-defined competencies for entrance into clinical practice. Successful completion of this form is a requirement for graduation from the High Point University Master of Physician Assistant Studies program.

Students will provide this form to their SCPE preceptor at the completion of each SCPE for signature when it has been determined that the student has met program expectations and competencies for entry into clinical practice. The Clinical Education Team will review submitted forms throughout the clinical curriculum to inform appropriate intervention and guidance. This may include, but is not limited to the Clinical Education Team having discussions with the student, clinical preceptor, and correlation to student performance in other areas within the program and then modification of the completed passport areas.

MEDICAL CARE ACROSS THE LIFE SPAN

A. Medical care for Infants: Student has demonstrated the following program expectation and competency required

1.	Performance of focus Name (Print): Signature:	ed histories and physicals.
	Date:	
2.	Formulation of differenthe proper diagnostic Name (Print): Signature: Date:	ential diagnosis based upon the patient history and physical exam and recommends studies
3.	Diagnose common mon Name (Print): Signature: Date:	edical and/or behavioral problems likely to be seen in a primary care setting
4.	Diagnose potentially primary care setting. Name (Print):	ife- or function-threatening medical and behavioral problems likely to be seen in a

- **Medical care for Children:** Student has demonstrated the following program expectation and competency required for clinical practice in the following areas:
 - 1. Performance of focused histories and physicals.

for clinical practice in the following areas:

Signature: Date:

		Name (Print): Signature: Date:		
	2.	Formulation of different the proper diagnostic Name (Print): Signature: Date:	ential diagnosis based upon the patient history and physistudies	sical exam and recommends
	3.	Diagnose common me Name (Print): Signature: Date:	edical and/or behavioral problems likely to be seen in a	primary care setting.
	4.	Diagnose potentially I primary care setting. Name (Print): Signature: Date:	ife- or function-threatening medical and behavioral pro	blems likely to be seen in a
c.		care for Adolescents: d for clinical practice in	Student has demonstrated the following program expe the following areas:	ctation and competency
	1.	Performance of focus Name (Print): Signature: Date:	ed histories and physicals.	
	2.	Formulation of differenthe proper diagnostic Name (Print): Signature: Date:	ential diagnosis based upon the patient history and physistudies	sical exam and recommends
	3.	Diagnose common me Name (Print): Signature: Date:	edical and/or behavioral problems likely to be seen in a	primary care setting.
	4.	Diagnose potentially I primary care setting. Name (Print): Signature: Date:	ife- or function-threatening medical and behavioral pro	blems likely to be seen in a
D.		care for Adults: Stude cal practice in the follo	nt has demonstrated the following program expectatio wing areas:	n and competency required
	1.	Performance of focus Name (Print): Signature: Date:	ed histories and physicals.	

	2.	the proper diagnostic s Name (Print): Signature:	ntial diagnosis based upon the patient history and phy ctudies. 	sical exam and recommends
		Date:		
	3.	Diagnose common me Name (Print): Signature:	dical and/or behavioral problems likely to be seen in a	primary care setting.
		Date:		
	4.	Diagnose potentially lift primary care setting. Name (Print): Signature: Date:	e- or function-threatening medical and behavioral pro	oblems likely to be seen in a
Ε.	Medica	I for the Fiderly: Studen	t has demonstrated the following program expectatio	n and competency required
۲.		cal practice in the follow	- · · · · · · · · · · · · · · · · · · ·	ir and competency required
	4	Df	d bisks sign and about all	
	1.	Name (Print):	d histories and physicals.	
		Signature:		
		Date:		
	2.	Formulation of differenthe proper diagnostic son Name (Print): Signature: Date:	ntial diagnosis based upon the patient history and phy studies.	sical exam and recommends
		-		
	3.	Name (Print): Signature:	dical and/or behavioral problems likely to be seen in a	primary care setting.
		Date: _		
	4.	Diagnose potentially lift primary care setting. Name (Print):	e- or function-threatening medical and behavioral pro	oblems likely to be seen in a
		Signature: Date:		
		_		
			WOMEN'S HEALTH	
A.			onstrated the following program expectation and con	npetency required for clinical
	practice	e in the following areas:		
	1.	Name (Print):	d histories and physicals.	
		Signature: Date:		

	2.	the proper diagnostic studi	diagnosis based upon the patient history and physica es	al exam and recommends
	3.	Name (Print): Signature:	I problems likely to be seen in a primary care setting	
		Date:		
	4.	setting. Name (Print):	r function-threatening prenatal problems likely to be	seen in a primary care
_	_			
В.		practice in the following are	onstrated the following program expectation and con as:	mpetency required for
	1.	Performance of focused his Name (Print): Signature:	stories and physicals.	
		Date:		
	2.	the proper diagnostic studi	diagnosis based upon the patient history and physicaes.	al exam and recommends
	3.	N (D: 1)	ogic problems likely to be seen in a primary care sett	ing.
	4.	Diagnose potentially life- o setting. Name (Print): Signature: Date:	r function-threatening gynecologic problems likely to	be seen in a primary care
		CADE EOD (ONDITIONS DECLUDING SUDGICAL MANAGEMENT	
		CARE FOR C	ONDITIONS REQUIRING SURGICAL MANAGEMENT	
A.		erative Care: Student has dependent practice in the following are	monstrated the following program expectation and case:	ompetency required for
	1.	Performance of focused his	stories and physicals.	
		Signature: Date:		

	2.	Formulation of differe the proper diagnostic Name (Print): Signature: Date:	ntial diagnosis based upon the patient history and physical exam and recommends studies
	3.	Diagnose common sur Name (Print): Signature: Date:	gical problems likely to be seen in a primary care setting.
	4.	Diagnose potentially I setting. Name (Print): Signature: Date:	fe- or function-threatening surgical problems likely to be seen in a primary care
В.		perative Care: Student I practice in the following	has demonstrated the following program expectation and competency required for gareas:
	1.	i. Demonstrate Name (Print): Signature: Date:	ve and surgical procedures common to surgery, including: surgical technique with gowning and gloving. sterile technique in the surgical setting.
		Name (Print): Signature: Date:	sterile technique in the surgical setting.
		iii. Assist surgeo Name (Print): Signature: Date:	n in major surgical procedure.
		iv. Close a surgion Name (Print): Signature: Date:	ral incision with staples or sutures
		i. Removal o Name (Print): Signature: Date:	staples or sutures
C.		erative Care: Student h practice in the following	as demonstrated the following program expectation and competency required for areas:
	1.	Performance of focus Name (Print): Signature:	ed post-operative histories and physicals and/or assessments.

		Date:	
	2.		ential diagnosis based upon the patient history and physical exam and/or assessment proper diagnostic studies
	3.		rated competency required for clinical practice to diagnose common post-surgical seen in a primary care setting
	4.	Diagnose potentially I primary care setting. Name (Print): Signature: Date:	ife- or function-threatening medical and behavioral problems likely to be seen in a
A.		Performance of focus Name (Print): Signature:	ed health conditions: Student has demonstrated the following program expectation clinical practice in the following areas: ed histories and physicals.
	2.	Formulation of differenthe proper diagnostic Name (Print): Signature: Date:	ential diagnosis based upon the patient history and physical exam and recommends studies
	3.	Diagnose common be Name (Print): Signature: Date:	havioral medicine problems likely to be seen in a primary care setting
	4.	Diagnose potentially I primary care setting. Name (Print): Signature: Date:	ife- or function-threatening behavioral medicine problems likely to be seen in a

PREVENTIVE, EMERGENT, ACUTE, CHRONIC CARE

A.		tive care: Student has practice in the following	demonstrated the following program expectation and competency required for ng areas:
	1.	all tiers of preventive Name (Print): Signature: Date:	nealth promotion and disease prevention and demonstrate a working knowledge of emedicine in patient interactions.
В.			d chronic conditions: Student has demonstrated the following program expectation clinical practice in the following areas:
	1.		and monitor management plans including pharmacological and non-pharmacological counseling, therapeutic procedures and/or rehabilitative therapies in the following care
		ii. Emergent co Name (Print): Signature: Date:	onditions
		iii. Acute condi Name (Print): Signature: Date:	tions
		iv. Chronic or on Name (Print): Signature: Date:	engoing conditions
		COMMUNICATION/I	PROFESSIONALISM/ADVOCACY/EVIDENCE BASED MEDICINE
A.		nication: Student has practice in the following	demonstrated the following program expectation and competency required for ng areas:
	1.	Accurately and concito all members of the Name (Print): Signature: Date:	sely communicate the findings of a given patient encounter in written and oral forms e health care team
	2.	•	patient-centered and culturally responsive manner to accurately obtain, interpret and primation and construct a patient-centered management plan.

A.		<mark>ionalism</mark> : Student has d practice in the followin _ຍ	emonstrated the following program expectation and competency required for g areas:
	1.		ty and empathy regarding the emotional, cultural and socioeconomic aspects of the condition and the patient's family.
	2.		onal behavior to the highest ethical and legal standards by recognizing professional ulting with other health care providers and/or directing patients to appropriate as needed.
В.		Advocacy: Student has practice in the following	demonstrated the following program expectation and competency required for greas:
	1.		support to assist patients in obtaining quality care and in dealing with the care delivery systems.
C.		ee Based Medicine: Stud d for clinical practice in	dent has demonstrated the following program expectation and competency the following areas:
	1.		medical literature in order to use current practice guidelines and apply the based medicine to patient care.
			DIAGNOSTIC TEST INTERPRETATION COMMON TO PRIMARY CARE
A.		Skills: Student has dem	onstrated the following program expectation and competency required for entry wing areas:
	1.	Perform intradermal in Name (Print): Signature: Date:	njections:
	2.	Perform subcutaneous Name (Print): Signature: Date:	s injections:
	3.	Perform intramuscula Name (Print):	r injections:

Date:

	Signature: Date:
4.	Perform simple laceration repair with sutures: Name (Print): Signature: Date:
5.	Perform incision and drainage of abscess including wound packing: Name (Print): Signature: Date:
6.	Perform pelvic examination with specimen collection: Name (Print): Signature: Date:
7.	Perform venipuncture: Name (Print): Signature: Date:
8.	Perform insertion of peripheral IV catheterization: Name (Print): Signature: Date:
9.	Interpret microscopic urinalysis interpretation (urinalysis laboratory results) Name (Print): Signature: Date:
10.	Interpret complete blood count (CBC) with differential: Name (Print): Signature: Date:
11.	Interpret basic metabolic profile (BMP): Name (Print): Signature: Date:
12.	Interpret electrocardiogram (ECG): Name (Print): Signature: Date:
13.	Interpret chest x-ray: Name (Print): Signature: Date:

14.	Interpret musculoskeletal x-ray:		
	Name (Print):		
	Signature:		
	Date:		