

## Didactic Year Clinical Teaching: The University of Utah Experience

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## Roadmap

- What we won't be talking about
- Didactic year clinical goals/objectives
- Overview of UPAP structure
- Today's focus & why
- Overview of UPAP didactic year clinical offerings (~30 minutes + video)
- Conclusions/questions/discussion (~10-15 minutes)

## We Won't Be Talking About:

Newborn exams	Casting
Male GU exams	Suturing
Pelvic exams	IUDs
Injections/IVs	BLS
Trauma Man	ACLS
Endometrial Bx	PALS

## Didactic Year Clinical Teaching: The University of Utah Experience

### Goal

Develop and enhance clinical skills during the didactic year in preparation for the clinical year.

Disclaimers:  
Only PA program in Utah  
In existence 37 years  
1st year clinical activities 20 years:  
*Professional Memory*

## Objectives

1. Blend students at the beginning of the 1st year with those finishing the 1st year in OSCEs
2. Create weekly small group clinical learning experiences during 1st year
3. Obtain histories from ER Observation Unit patients after basic skills developed (fall 2007)
4. Create weekly OP & IP clinical learning experiences during two semesters prior to the clinical year

## UPAP Structure

- 27 months, 7 Semesters
- 15 months didactic *(with lots of clinical experiences)*
  - Expanded from 24 months summer 2006
- 12 months 2nd year Clinical Rotations
  - 36 students in each cohort
  - Overlap of 3 classes during summer:
    - Class 36 ready to graduate
    - Class 37 heading to 2nd year
    - Class 38 starting 1st year

## Why?

- Younger students
- Less clinical experience
- Enhanced clinical skill set before 2nd year
- Students don't learn how to practice medicine in a classroom

## Today's Focus

- Summer 1/Summer 2 clinical practicum
- Tutorial groups/Clinical associates (CA's)
- ER Observation Unit histories
- Friday clinics

## Health Sciences Education Center (HSEB)

- 158,000 GSF
- 'State of the Art'
- Interdisciplinary
- Lecture capacity 15-150
- Clinical Skills Area
  - 18 rooms 24 exam tables
  - B-Line™ system
  - Small Groups, OSCEs & SPs
  - Real time/Off site viewing



## Summer Clinical Practicum 1 & 2

### Objective

- Combine the students of Class 37 *Summer 2* with the students of Class 38 *Summer 1* to enhance the clinical skills of both groups and encourage near-peer<sup>1</sup> teaching

### Structure

- Faculty guided near-peer teaching

<sup>1</sup>Goldshmid, B., Goldshmid, M. 1976. "Peer Teaching in Higher Education: A Review. *Higher Education* 5 (1): 9-33.

## Summer Clinical Practicum 1

- Schedule
  - 6 Alternating weeks
  - S1 Students are the "PA" one week, the "SP" the following week-OSCE
- Structure for Summer 1 student
  - S1 takes a different S2's history every other week--total 3
  - Write-ups are evaluated by faculty advisor
  - Formative

## Summer Clinical Practicum 1

- Structure for Summer 1 student
  - "Experienced" S2 gives verbal and written near-peer feedback
  - Final history is recorded for faculty advisor feedback and S1 self-evaluation.
- Evaluation
  - Near-peer
  - Faculty
  - Self
  - Course

## Summer Clinical Practicum 1

- S1 Student acceptance
  - Overwhelmingly positive (90+% positive, 3.76 on a 0-4.0 scale)
  - Professionalism
- Challenges
  - Some S2s are not as 'enthusiastic' about the near-peer role (10% rule\*)
  - Histories occasionally too complex
  - Faculty time

\* 10% of students cause 90% of your headaches

## Summer Clinical Practicum 2

- Schedule
  - 6 Alternating weeks
  - Students are the "PA" one week, the "SP" the following week-OSCE
- Structure for Summer 2 student
  - S2 performs a complete history and physical on an S1--1 total
  - S2 exposed to problem-focused OSCEs every other week--2 total
  - Formative and 1st year summative

## Summer Clinical Practicum 2

- Structure for Summer 2 student
  - Given a common chief complaint 1 week before to direct study/practice
    - Colicky abdominal pain (biliary colic)
    - Acute vertigo (vestibular neuronitis)
    - Cough and fever (CAP)
    - Acute LBP/leg pain (HNP with sciatica)
  - Summer 1 has to 'learn their disease' (stealth learning)

## Summer Clinical Practicum 2

- Evaluation
  - Faculty/preceptor
    - Views encounter real time-checklist/comments
    - Student presents the patient
      - Differential - Testing
      - Plan (the whole *enchilada*)
      - Immediate verbal feedback
      - All in the presence of the S1 "patient"
  - Student course evals
  - Faculty/preceptor reviews SOAP
  - Near-peer: S1 broad "patient" feedback

## Summer Clinical Practicum 2

- S2 Student acceptance
  - Overwhelmingly positive (90% positive remarks, 3.7; 2 classes)
  - S1s are impressed by the S2 skill level
  - Final check of S2 readiness for promotion
  - Professionalism
- Challenges
  - Some S1s are not as 'enthusiastic' about the near-peer role (<10% rule)
  - Faculty time investment
  - Remediation

## Summer Clinical Practicum 2



## Clinical Associates & Tutorial Groups 1987

- Structure
    - Practicing PAs from the community--CAs
    - 130 years combined clinical experience
    - 30 minute pre-meeting
    - 2 hour session/week--focus on clinical skills
    - 0.1 FTE, low turnover
    - Groups remain intact for 3 semesters
      - Fall 16
      - Spring 15
      - Summer 7
- 38 sessions: 76 hours

## Clinical Associates & Tutorial Groups 2nd Semester: Fall

- Objectives
  - Complete history (peer)
  - Integrated (adult screening) Exam (peer)
  - Focused (problem-based) physical exams (near-peer--2nd year students training locally)
  - Friday Clinic SOAP notes/presentations
  - Clinical problem solving cases (CPS)
  - Grade EBM papers

## Clinical Associates & Tutorial Groups OSCEs/Clinical Problem Solving (CPS)

- Evaluation
  - Observed complete history/Integrated PE
  - Problem focused OSCEs
    - Combined ENT/Neuro
    - Combined Cardio-pulmonary/Abd
    - Upper/lower MSK
  - SOAP note/presentations written feedback (20)
  - CPS participation (16 cases, 2 are ethics-based)
  - Group participation

## Clinical Associates & Tutorial Groups

- Positive attributes
  - Overwhelmingly positive evals  
(90% positive remarks: 3.78; 2 classes)
  - Hands on
  - Interactive
  - Outside preparation--PE/cases
  - Links other clinical offerings--Friday Clinics
  - Models professionalism

## Clinical Associates & Tutorial Groups

- Challenges

- Standardization
- Time
- Faculty development/training
- Personalities



## ER Observation Unit Histories 2007

- Goal
  - To gain an early clinical experience by obtaining a complete history in a hospital setting
- Objectives
  - "Real" patient contact time
  - Applying basic history taking skills to a patient
  - Write-up the patient history

## ER Observation Unit Histories

- Structure
  - Second semester didactic year
  - Groups of 4 students to observation unit at University ER with 1 faculty member
  - Each student assigned to one patient for a problem-focused history
  - Student to write-up the history and receive feedback from Clinical Associate
- Schedule
  - One experience per student Fall semester

## ER Observation Unit Histories

- Evaluation
  - History with faculty input as needed
  - Brief patient written evaluation post history
  - Write-up reviewed by Clinical Associate
- Student acceptance
  - To be determined

## ER Observation Unit Histories

- Positive attributes
  - "Real" patient experience
  - Reinforces history skills (5 total complete/focused histories)
  - Links to other clinical offerings - Friday Clinics/Tutorial Group
  - Direct faculty supervision if needed
- Challenges
  - Standardization
  - Time
  - New program: unintended consequences/pitfalls

## ER Observation Unit Histories



## Friday Clinics 1987

- Goal
  - Develop and enhance clinical skills during the didactic year in preparation for the clinical year
- Objectives
  - Understanding of PA role in primary care
  - Further development of Hx/PE skills
  - Development of differential diagnosis/problem solving skills
  - Development of SOAP skills
  - Development of presentation skills
  - Professionalism

## Friday Clinics

- Structure
  - Family practice setting primarily - with PA (occ. NP, MD, or DO)
  - Paired with one provider for 25-28 weeks
  - 2 "shadowing" experiences with in-patient PA's
  - "Back-up" sites in ER Fast track, Urgent Care
- Schedule
  - 28 Fridays - 3rd & 4th semesters didactic year
  - SOAP submitted & case presentation during following Wednesday Tutorial Group

## Friday Clinics

- Evaluation
  - Preceptor direct observation/evaluation (2x/year)
  - Faculty site-visit/evaluation
  - Tutorial group SOAP write-up and case presentation evaluation
  - Typhon® tracking-faculty feedback
- Student acceptance very high
- Post Didactic Training Evaluation of Friday Clinics: 3.81
- Post Clinical Training Evaluation of Friday Clinics: 3.61

## Friday Clinics

- Positive attributes
  - Primary care preceptor-not shadowing
  - In-patient PA exposure
  - Development of hands-on clinical skills
  - Average of 224 total clinical hours total
  - Average of 225 patient encounters total *before* entering clinical year
- Challenges
  - Preceptor availability/quality
  - Personalities
  - Standardization

## Friday Clinics

- Care and Feeding of preceptors
  - Self-perpetuating professional memory (20 years)
  - White Coat Ceremony recognition
  - Site visits and annual orientation
  - Student class products (vests, etc.)
  - Send-Off breakfast recognition
  - Friday preceptor of the year award
  - Return Visits
    - Sixteen free Cat. I CME hours per year

## Friday Clinics



Summer 1	Fall 1	Spring 1	Summer 2	Fall 2
-Clinical Practicum 1 S1 History Taking*	-Tutorial Groups -Complete history -Integrated exam -Focused exams: ENT, Neuro, CP, Abd -ER Obs Unit complete histories	-Tutorial Groups -Friday Clinics begin* -SOAPs reviewed in tutorial groups -Focused exams: MSK -Cases	-Tutorial Groups -Friday Clinics continue* -SOAPs reviewed in tutorial groups -Cases -Clinical Practicum 2 S2 H&P* Focused OSCEs*	Clinical year begins*          *No CA Involvement

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### Conclusion

Popular clinical offerings help to prepare UPAP students to enter their second year with a much broader clinical skill set.

- Summer 1/Summer 2 clinical practicum
  - Tutorial groups/Clinical associates
    - ER Observation Unit histories
      - Friday clinics

Discussion/Questions

## References

<sup>1</sup>Goldshmid, B.,Goldshmid, M. 1976. "Peer Teaching in Higher Education: A Review. *Higher Education* 5 (1): 9-33.

<sup>2</sup>Sloane PD., et al. *Essentials of Family Medicine*. 5th ed. Baltimore: Lippincott Williams & Wilkens, 2008.

"This is a fantastic idea that should be incorporated in as many learning areas as possible, I think it provides double learning twice, meaning that both the S1 and S2's learn at the same time and the S1's will learn it again when they are S2's. Double learning twice, I like that."

*Summer 2 student*

Glossary of 1st Year Clinical Terms  
University of Utah Physician Assistant Program

Clinical Practicum:

Summer 1 student: Incoming new first year student (Semester 1)

Summer 2 student: Outgoing first year student (Semester 4)

HSEB: Health Sciences Education Building

Tutorial Groups:

CA: Clinical Associate, 0.1 FTE practicing PA from the community

Tutorial Groups: Four 1st year students and 1 CA meet for 2 hours each Wednesday morning (Semester 2, 3, 4)

Observation Unit Histories:

Obs unit histories: 1st year student takes focused history of patient in ER Obs Unit (Semester 2)

Friday Clinics:

Friday Clinic: 1st year student spends 20 + Fridays with a PA preceptor seeing primary care patients (Semester 3, 4)

Inpatient Experience: 1st year students (tutorial groups) spend 2 Fridays with an inpatient PA (Semester 3, 4)

Summer 1	Fall 1	Spring 1	Summer 2	Fall 2
-Clinical Practicum 1 S1 History Taking*	-Tutorial Groups -Complete history -Integrated exam -Focused exams: ENT, Neuro, CP, Abd -ER Obs Unit complete histories	-Tutorial Groups -Friday Clinics begin* -SOAPs reviewed in tutorial groups -Focused exams: MSK -Cases	-Tutorial Groups -Friday Clinics continue* -SOAPs reviewed in tutorial groups -Cases -Clinical Practicum 2 S2 H&P* Focused OSCEs *	Clinical year begins*       *No CA Involvement