



Core (Third Year) Medical Student Preceptor FAQs in the Ambulatory Setting

1. What prior clinical experience does a student on their core clinical clerkships have?

Prior to entering core clerkships, students will have completed their 4-semester clinical skills course. They have learned how to obtain a patient centered history and can complete a physical exam. They have practiced documentation of a complete H and P as well as progress notes for ambulatory patient encounters. Depending on the time of year, they may or may not have completed prior clerkships in one of the six core areas.

Family Medicine
Medicine
Pediatrics

Psychiatry and Neurology
Surgery
Women's Health

Typical skills focused on during the ambulatory rotations include:

Taking a patient centered history

Performing a physical exam that is appropriate for the visit type and chief complaint

Developing a differential diagnosis

Documenting the patient encounter

Understanding the elements of preventive care – anticipatory guidance, motivational interviewing and routine screening

Later in the third year, students will be able to develop management plans for routine patient concerns

2. How long will a student be assigned to work with me as their ambulatory preceptor?

In the third year, students complete 3 weeks of ambulatory pediatrics, one week of ambulatory internal medicine, 2 weeks of neurology and 6 weeks of family and community medicine.

3. Who in my office can precept/staff the medical student?

Each office should designate a physician lead for the rotation, but MD/DO partners as well as advanced practice providers can assist in staffing medical students.

4. How many patients should a student see each day?

Students on their core clinical rotations are expected to see a minimum of 5 patients per day, and will be able to increase that number as they develop their skill set and competence. They, however, will never be expected to see your full clinic load with you.

Students have a specific set of required visit types and diagnoses that they are expected to see over the course of their clinical assignment. Preceptors are also instrumental in selecting appropriate patients for the student to see.

5. How does scheduling work when I have a student?

The first couple days, students may do more “shadowing” and “scribing” as they learn about your office procedures and workflows. Once the student is familiar, they are encouraged to independently see a subset of your patients, present their findings to you, and return to the patient room with you as you verify the history, repeat the physical exam and complete the medical decision making.

Students should be clinically engaged for a minimum of 8 half days per week. They may participate in night and weekend shifts as well as overnight call. Currently, students follow the rules set forth for interns which limits them to a maximum of 24 hours continuous service.

6. How is student documentation utilized in the ambulatory setting?

Both EPIC and Cerner have the capacity for students to create a billable note, as well as a medical student note type that requires an attestation but is not considered part of the official medical record and may not be used as a basis for billing. A CMS ruling that took effect in March, 2018 allows notes that were started by medical students to be taken over by the attending or resident, edited to reflect the work done by the attending or resident, and utilized for billing purposes. It is up to each preceptor, in consultation with the clerkship director, to determine which note type students should be using.

This change allows student work to be the basis for your patient encounter note and reduces the duplication that was required from CMS. Student documentation can be utilized as the basis for the attending patient note.

7. Is there any stipend for precepting a medical student in my office?

WMED currently provides a stipend of \$50 per half day session to precept a student in the ambulatory setting.

8. Do I have to be a faculty member to precept students?

Yes, you must apply for clinical faculty status in order to be the designated preceptor for your office. If you are on vacation, you may have a partner or advanced practice provider cover for you. Please know that your advanced practice providers may also apply for faculty status.

9. Assessing students

Students rotating with you will be to receive regular verbal feedback on how they are developing. Each student will also need to have a formal assessment submitted at the end of your assigned time with them. Assessments are completed on-line using the New Innovations web-based platform. Grading will be done by the clerkship who will incorporate your observations as part of the final assessment.

There are multiple techniques for staffing/teaching in the clinical setting. Two common techniques are The One Minute Preceptor and SNAPPS

The One Minute Preceptor (PDF) <http://www.im.org/p/cm/ld/fid=712>,
(Video) <https://www.youtube.com/watch?v=eRBdfXRj5N0>,

SNAPPS <https://paeonline.org/wp-content/uploads/2017/02/SNAPPS.pdf>

9. How to I apply to become a faculty member?

For more information regarding the benefits and responsibility of faculty, please proceed to the faculty affairs section of the WMED website.

<http://med.wmich.edu/sites/default/files/Clinical%20Faculty%20as%20of%20December%2013%202016.pdf>

You may apply for faculty status on-line through the WMED website. <http://med.wmich.edu/node/316>