



Department of Physician Assistant Education
Master of Science in Medicine
5 units

MSM 6600 K Elective Family Medicine

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PLNU Mission

To Teach ~ To Shape ~ To Send

Point Loma Nazarene University exists to provide higher education in a vital Christian community where minds are engaged and challenged, character is modeled and formed, and service is an expression of faith. Being of Wesleyan heritage, we strive to be a learning community where grace is foundational, truth is pursued, and holiness is a way of life.

COURSE DESCRIPTION

This is a 5-week full time elective outpatient-based clinical practicum that focuses on the clinical aspects of family practice/ primary care. Students will build on the fundamental skills of history taking, performing physical exams, developing differential diagnoses, formulating diagnoses, designing prevention and treatment plans, and documenting common medical conditions observed in the family practice setting. Students will participate in a variety of primary care procedures. Emphasis will be placed on caring for the entire family ranging from the newborn to the geriatric patient. Students will be expected to mirror the Preceptor's schedule and may be assigned to any shift on any day of the week, including holidays.

COURSE LEARNING OUTCOMES

Within this five-week rotation, the supervised students will:

1. Have the opportunity to expand upon their didactic knowledge of physical and psychological conditions that appear across the life span both acutely and chronically in a family medicine setting;
2. Learn to synthesize the didactic knowledge and skills gained into clinical applications in situations presented during the rotation;

3. Be provided ongoing opportunities to use the skills they have obtained in the evaluation of medical literature, and its use in evidence-based medicine and research;
4. Have the opportunity to increase their differential diagnoses;
5. Increase their ability to recommend, select and interpret appropriate diagnostic studies;
6. Gain proficiency in the diagnosis and management of conditions commonly encountered in family medicine.
7. Have the opportunity to interact with a diverse population of patients and a variety of disorders involving all organ systems commonly encountered in the out-patient family medicine environment.

PROGRAM LEARNING OUTCOMES

The content in this course will contribute to the student's proficiency in this/these area(s):

1. Gather a history and perform a physical examination. MK, IC, PC, PR, PB, SB
2. Prioritize a differential diagnosis following a clinical encounter. MK, IC, PC, PB
3. Recommend and interpret common diagnostic and screening tests. MK, IC, PC, PR, PB, SB
4. Enter and discuss orders and prescriptions. MK, IC, PC, PR, PB, SB
5. Document a clinical encounter in the patient record. MK, IC, PC, PR
6. Provide an oral presentation of a clinical encounter. MK, IC, PC, PR
7. Form clinical questions and retrieve evidence to advance patient care. MK, IC, PC, PR, PB, SB
8. Give or receive a patient handover to transition care responsibilities. MK, IC, PC, PR, PB, SB
9. Collaborate as a member of an inter-professional team. MK, IC, PC, PR, PB, SB
10. Recognize a patient requiring urgent or emergent care and initiate evaluation and management. MK, IC, PC, PR
11. Obtain informed consent for tests and/or procedures. MK, IC, PC, PR, PB
12. Perform the general procedures of a physician assistant. MK, IC, PC, PR, PB, SB
13. Identify system failures and contribute to a culture of safety and improvement. MK, IC, PR, PB, SB

Initials indicate PA core competency required to meet the PLO.

PA Core Competencies:

MK = Medical Knowledge

IC = Interpersonal Skills & Communication

PC = Patient Care

PR = Professionalism

PB = Practice-based Learning

SB = Systems-based Practice

INSTRUCTIONAL OBJECTIVES

The following are the required learning objectives for the Family Medicine rotation. Students are responsible for meeting these objectives whether or not clinical examples are seen during the rotation experience. At the conclusion of the rotation, it is expected that the student will be able to do the following:

Alignment to Core Competencies and Program Learning Outcomes

Core Competencies	Specific Learning Objectives	PLOs
Medical Knowledge	<ul style="list-style-type: none"> ● Accurately assess common medical conditions applying basic science concepts to the care of the patient. 	1,2,3,4,7,10,11,12

	<ul style="list-style-type: none"> ● Select and interpret appropriate diagnostics, lab tests, and imaging studies based on the patient history, physical exam findings, and clinical knowledge of common family medicine disorders as listed in the Family Medicine PAEA Topic List. ● Generate differential and final diagnoses based on the history of the patient, the physical examination, various diagnostic studies performed, and clinical knowledge of common family medicine disorders. ● Develop an appropriate treatment/management plan for patients of all ages requiring acute, chronic or preventative care ● Select appropriate pharmacologic agents based on potential common side effects, drug interactions, pregnancy/lactation safety, Black Box warnings, and monitoring parameters. 	
Patient Care	<ul style="list-style-type: none"> ● Obtain and record a complete and accurate history for patients of any age. ● Perform and record a complete and accurate physical examination for patients of all ages ● Recognizes the patient requiring urgent or emergent care and initiates appropriate actions ● Differentiate between acute, chronic and emerging disease states ● Evaluate and develop an appropriate treatment/management plan for patients of all ages requiring acute, chronic and preventative care ● Demonstrate procedural skills as appropriate for the clinical setting. 	1,2,3,7,8,9,11,12,13
Practice-Based Learning and Improvement	<ul style="list-style-type: none"> ● Obtain, analyze, and use the medical literature and other information resources to address medical questions and to sustain professional growth ● Identifies strengths and weaknesses in knowledge and skills based on self-evaluation; seeks opportunities to increase knowledge and skills ● Solicits, accepts, and acts on feedback to make effective improvements. 	1,2,3,4,10,12,13
Interpersonal Communication Skills	<ul style="list-style-type: none"> ● Communicates effectively and respectfully with patient and families demonstrating sensitivity to social and cultural traditions. ● Written documentation is a clear, accurate, organized, and thorough fashion ● Presents cases accurately reflecting chronology, details of physical findings, differential diagnoses, lab or imaging results and proposed treatment plan 	1,5,6,9,11,13

	<ul style="list-style-type: none"> Educate patients and families regarding common acute and chronic medical conditions. Check for patient’s understanding of follow-up plan, including treatments, testing, referrals, and continuity of care. 	
Systems Based Practice	<ul style="list-style-type: none"> Contribute to a culture of safety and improvement by identifying actual or potential system failures and notify the responsible person Identify proper referral strategies for patients to other services for clinical interventions as appropriate. 	13
Professionalism	<ul style="list-style-type: none"> Works well with team assuming responsibility when appropriate. Demonstrate respect, honesty, integrity and adherence to ethical behavior and legal standards Punctual for all scheduled events meeting all deadlines; dependable and communicates promptly when delayed 	9

Alignment of Organ System Based Conditions

For the following conditions the student must define the etiology, identify the signs and symptoms, generate appropriate differential diagnoses, recommend a diagnostic work up, recognize risk factors and recommend prevention strategies, treatment and provide patient education as appropriate. Students are responsible for this knowledge whether or not clinical examples are seen during the rotation experience.

Organ	Symptoms	Condition
Derm	rash vesicles pruritis erythema	Acanthosis nigricans Acne vulgaris, Actinic keratosis, Alopecia, Basal cell carcinoma, Bullous pemphigoid, Cellulitis, Condyloma acuminatum, Dermatitis (eczema, seborrhea), Drug eruptions, Dyshidrosis simplex chronicus Erysipelas, Erythema multiforme, Exanthems, Folliculitis Hidradenitis suppurativa, Impetigo, Kaposi sarcoma, Lice

		<p>Lichen planus, Lichen simplex chronicus Lipomas/epithelial inclusion cysts, Melanoma, Melasma, Molluscum contagiosum, Nummular eczema, Onychomycosis, Paronychia, Pilonidal disease, Pityriasis rosea, Pressure ulcers Psoriasis, Rosacea, Scabies Seborrheic keratosis, Spider bites, Stevens-Johnson syndrome, Tinea infections Tinea versicolor Toxic epidermal necrolysis, Urticaria, Verrucae Vitiligo</p>
Pulmonology	<p>SOB cough chest pain fever</p>	<p>Asthma, Bronchitis, Chronic obstructive pulmonary disease, Lung cancer, Pneumonia, Sleep disorders/apnea, Tobacco use/dependence Tuberculosis,</p>
Gastrointestinal	<p>abdominal pain diarrhea/ constipation fever N/V jaundice</p>	<p>Anal fissure, Appendicitis, Bowel obstruction, Cholecystitis/cholelithiasis, Cirrhosis Colorectal cancer/colonic polyps, Diarrhea/constipation Esophagitis Gastritis Gastroenteritis, GE reflux disease Gastrointestinal bleeding, Giardiasis and other parasitic infections, Hemorrhoids,</p>

		Hiatal hernia, Inflammatory bowel disease, Irritable bowel syndrome. Pancreatitis, Peptic ulcer disease, Viral hepatitis,
Cardiovascular	chest pain SOB fever DOE claudication	Angina, Arrhythmias, Chest pain, Congestive heart failure, Coronary artery disease, Endocarditis, Hyperlipidemia, Hypertension, Hypertriglyceridemia, Peripheral vascular disease, Valvular disease
Endocrinology	thirst fatigue urinary frequency weight change	Adrenal insufficiency, Cushing disease, Diabetes mellitus, Hyperthyroidism Hypothyroidism
Infectious	fever chills diarrhea lymphadenopathy weight loss	HIV, Influenza, Lyme Disease, Meningitis Mononucleosis Salmonellosis, Shigellosis,
EENT	ear pain ear discharge sore throat sneezing rhinorrhea eye pain decreases vision tinnitus	Acute/chronic sinusitis, Allergic rhinitis, Aphthous ulcers, Blepharitis, Cholesteatoma, Conjunctivitis, Corneal abrasion, Corneal ulcer, Dacryocystitis, Ectropion Entropion, Epistaxis, Glaucoma, Hordeolum, Hyphema Labyrinthitis Laryngitis, Macular degeneration,

		<p>Ménière disease, Nasal polyps, Otitis externa, Otitis media, Papilledema, Parotitis, Peritonsillar abscess, Pharyngitis/tonsillitis, Pterygium Retinal detachment, Retinal vascular occlusion, Retinopathy, Sialadenitis Tinnitus Tympanic membrane perforation,</p>
Hematology	<p>fatigue fever easily bruising bleeding</p>	<p>Anemia, Clotting disorders, Leukemia, Lymphoma, Polycythemia Thrombocytopenia,</p>
Ortho/Rheum	<p>pain deformity swelling arthralgias</p>	<p>Acute/chronic lower back pain, Bursitis/tendonitis, Costochondritis, Fibromyalgia, Ganglion cysts, Gout, Osteoarthritis Osteoporosis Overuse syndrome Plantar fasciitis, Reactive arthritis, Rheumatoid arthritis Sprains/strains, Systemic lupus erythematosus,</p>
Neurology	<p>AMS paresthesia headache fever loss of memory paralysis dizziness</p>	<p>Alzheimer disease, Bell palsy, Cerebral vascular accident Delirium. Dementia, Dizziness Essential tremor, Headaches (cluster, migraine, tension) Parkinson disease, Seizure disorders</p>

		Syncope, Transient ischemic attack, Vertigo,
Urology/Renal	flank pain hematuria abdominal pain dysuria	Balanitis Benign prostatic hyperplasia Chlamydia, Cystitis, Epididymitis, Glomerulonephritis, Gonorrhea Hernias, Nephrolithiasis, Orchitis Prostatitis Pyelonephritis, Testicular cancer Urethritis,
Psychiatry	variable	Anorexia nervosa, Anxiety Disorders, Bipolar Disorder, Bulimia nervosa Insomnia Disorder Major Depressive Disorder, Panic Disorder, Post-traumatic Stress Disorder, Social Phobia, Spouse or partner neglect/violence Substance Abuse Disorders, Suicide,
Urgent Care	variable	Acute abdomen, Allergic reaction/anaphylaxis, Bites/stings, bleeding Burns, Cardiac failure/arrest Deteriorating mental status/unconscious patient Foreign body aspiration Fractures/dislocations Hypertensive crisis Ingesting harmful substances (poisonings) Myocardial infarction Orbital cellulitis Pneumothorax Pulmonary embolus, Respiratory failure/arrest

		Sprains/strains Third trimester bleeding
Ob/Gyn	vaginal bleeding irregular menses pelvic pain vaginal discharge breast pain breast mass abnormal pap	Breast Cancer Breast Mass Cervical Cancer Contraception Cystocele Dysfunctional uterine bleeding Dysmenorrhea Intrauterine pregnancy Menopause Pelvic Inflammatory Disease Rectocele Spontaneous abortion Vaginitis
Health Promotion/Disease Prevention		Breast Cancer Cervical Cancer Colon Cancer Coronary Artery Disease Depression Fall risk Intimate Partner Violence Obesity Osteoporosis Prostate Cancer Sexually Transmitted Disease Substance Abuse

*PAEA End-of-rotation examination

RECOMMENDED STUDY RESOURCES

Note: Although there are no required textbooks for these rotations, students are encouraged to use textbooks and resources that are pertinent to the discipline of their study. The titles below are recommendations provided through Access Medicine.

**Title: Current Medical Diagnosis & Treatment 2020, Fifty-Ninth Edition
 Author: Maxine A. Papadakis, Stephen J. McPhee, Eds. & Michael Rabow, Associate Editor.
 Publisher: McGraw – Hill
 ISBN: 978--126455281

**Title: Clinician’s Pocket Reference
 Author: Leonard Gomella MD, FACS
 Publisher: McGraw-Hill
 ISBN: 978-00711602822

Recommended downloads for handheld devices:

- Epocrates
- Medscape

- PubSearch
- Medical Calc

NOTE: Individual preceptors may include other resources. You will be notified of these resources by each preceptor. *If your preceptor does not offer additional resources, ask them what resources they like to use.*

HEALTH PROMOTION & DISEASE PREVENTION OBJECTIVES

1. Identify patients at risk for the diseases listed above and discuss appropriate screening methods
2. Provide patient counseling including education on patient risk for the chronic conditions listed above to ameliorate disease progression.
3. Provide patient education of adults and elderly relative to the most common injuries and illness in a given age group.
4. Provide patient education regarding adult and pediatric immunizations
5. Identify health risks, including accidental and non-accidental injuries and abuse or neglect and provide patient and family education
6. Identify development stages and detect deviations from the anticipated growth and development levels.
7. Recognize normal and abnormal physical findings in the various age groups
8. Identify and perform recommended age-appropriate screenings.
9. Communicate effectively with children, teens and families.
10. Provide anticipatory guidance to families based on the child's age and developmental stage.

ASSESSMENT AND GRADING - ROTATION EVALUATION PROCESS

Students must maintain a grade of 70% or better throughout the clinical year. A final score below 70% is considered failing. Grades are calculated on a percentage basis. All final course grade percentages are rounded to the nearest number. Rotation assessment grades are based on the following standards:

Rotation Preparatory Exam	20%
Written Assignment	30%
End of Rotation Examination	35%
Preceptor Evaluation	15%
Total 100%	

- A. Rotation Preparatory Exam: An open source, written assessment used to evaluate the student's current level of knowledge prior to the end of rotation examination. Comprised of multiple-choice questions with content based on the rotation's instructional objectives appropriate, the student is expected to complete the questions with a grade of 85% and submit it at the completion of the rotation.

- B. **Written Assignment:** At the end of this clinical rotation, the student will be required to submit a complete written History and Physical. This written assignment is one of the tools used to assess how well the PA student gathers, synthesizes, and documents the important information necessary to care for the patient.

- C. **End of Rotation Examination:** A comprehensive written assessment to determine if the student has met the goals and objectives outlined for the clinical rotation.

- D. **The Preceptor Evaluation of the Student** is graded on a Pass/Fail basis and is worth 15% of the course grade. Overall rotation grade at “novice” in any of the main competency areas will result in a failing mark for the Preceptor Evaluation
 - a. Medical Knowledge
 - b. Patient Care
 - c. Interpersonal and Communication Skills

In addition, any student who receives a failing mark for the Preceptor Evaluation will be referred to the SPPC for review:

- E. In addition, any of the following may be criteria for failing the rotation:

- Failure of course components with a grade < 70%
- Failure to log and submit electronic entries and patient encounters
- Failure to submit student evaluation of preceptor and clinical site
- Unacceptable evaluation for professionalism (*refer to Clinical Manual*)
- Excessive or unexcused absences from the rotation site (*refer to Clinical Manual*)

Grading will be in keeping with Point Loma Nazarene University policy for graduate programs and grading will be as follows:

A = 93-100	C =73-76 C-=70-72
A-= 92-90	D+=67-69
B+= 87-89	D= 63-66
B = 83-86	D-=60-62
B-= 80-82	F= 0-59
C+=77-79	

INCOMPLETES AND LATE ASSIGNMENTS

All assignments are to be submitted/turned in by the beginning of the class session when they are due—including assignments posted in Canvas. No partial credit will be given for late assignments. Incompletes will only be assigned under extremely unusual circumstances. Late assignments receiving no credit must still be submitted.

REMEDIATION

If a student's final grade falls below the required 70% needed to pass the rotation or the student receives a failing rotation evaluation, the student's case will be referred to the MSM PA Program Student Progress and Promotion (SPPC) Committee. During the Clinical Phase, students have the opportunity to retake a maximum of one (1) failed EOR exam. Due to the unique nature of the clinical year, the dialed exam must be retaken within 7 days of notification of the failed exam. Students have the opportunity to repeat only one (1) failed rotation. The PA SPPC committee will consider requests for remediation plans and/or recycle options and make these recommendations to the full PA program faculty. For further details on this process, please refer to the *PLNU PA Program Student Handbook*.

END OF ROTATION STUDENT EVALUATIONS

All students are expected to complete the evaluations of their preceptor and clinical site the week preceding the completion of their rotations. Failure to submit the evaluation will result in a failing grade for the rotation. These evaluations, which are delivered online, are an important part of rotation assessment and improvement efforts, so your cooperation in completing them is greatly appreciated.

PLNU COPYRIGHT POLICY

Point Loma Nazarene University, as a non-profit educational institution, is entitled by law to use materials protected by the US Copyright Act for classroom education. Any use of those materials outside the class may violate the law.

PLNU ACADEMIC HONESTY POLICY

Students should demonstrate academic honesty by doing original work and by giving appropriate credit to the ideas of others. Academic dishonesty is the act of presenting information, ideas, and/or concepts as one's own when in reality they are the results of another person's creativity and effort. A faculty member who believes a situation involving academic dishonesty has been detected may assign a failing grade for that assignment or examination, depending on the seriousness of the offense, for the course. Faculty should follow and students may appeal using the procedure in the university Catalog. See Academic Policies in the Graduate and Professional Studies Catalog for definitions of kinds of academic dishonesty and for further policy information.

PLNU ACADEMIC ACCOMMODATIONS POLICY

While all students are expected to meet the minimum standards for completion of this course as established by the instructor, students with disabilities may require academic adjustments, modifications or auxiliary aids/services. At Point Loma Nazarene University (PLNU), these students are requested to register with the Disability Resource Center (DRC), located in the Bond Academic Center. (DRC@pointloma.edu or 619-849-2486). The DRC's policies and procedures for assisting such students in the development of an appropriate academic adjustment plan (AP) allows PLNU to comply with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. Section 504 (a) prohibits discrimination against students with special needs and guarantees all qualified students' equal access to and benefits of PLNU programs and activities. After the student files the required documentation, the DRC, in conjunction with the student, will develop an AP to meet that student's specific learning needs. The DRC will thereafter email the student's AP to all faculty who teach courses in which the student is enrolled each semester. The AP must be implemented in all such courses.

If students do not wish to avail themselves of some or all of the elements of their AP in a particular course, it is the responsibility of those students to notify their professor in that course. PLNU highly recommends that DRC students speak with their professors during the first two weeks of each semester about the applicability of their AP in that particular course and/or if they do not desire to take advantage of some or all of the elements of their AP in that course.

ARC-PA standards (4th edition) addressed in this course: B3.02(preventive, emergent, acute, chronic) B3.03a(lifespan),b(woman's health),d(mental health) B3.04a(outpatient), B3.07a (FM)

PLNU ATTENDANCE AND PARTICIPATION POLICY

Regular and punctual attendance at all rotations is considered essential to optimum academic achievement. Therefore, regular attendance and participation during each rotation are minimal requirements.

If the student is absent for more than 10 percent of their rotation, the faculty member will issue a written warning of de-enrollment. If the absences exceed 20 percent, the student may be de-enrolled without notice until the university withdrawal date or, after that date, receive an "F" grade.

Students who anticipate being absent for an entire week of a course should contact the instructor in advance for approval and make arrangements to complete the required coursework and/or alternative assignments assigned at the discretion of the instructor. Acceptance of late work is at the discretion of the instructor and does not waive attendance requirements.

Refer to [Academic Policies](#) for additional detail.

SPIRITUAL CARE AND CHAPLAIN SERVICES

PLNU strives to be a place where you grow as a whole person. To this end we provide resources for our Graduate students to encounter God and grow in their Christian faith. We have an onsite chaplain, Rev. Gordon Wong, at the Mission Valley (MV) campus to service Graduate students at

the Mission Valley and Balboa Campuses. Rev. Gordon Wong is available during class break times across the week. If you have questions for, desire to meet with, or want to share a prayer request with Rev. Wong you can contact him directly at mvchaplain@pointloma.edu or gordonwong@pointloma.edu. Rev. Wong's cell number is 808-429-1129 if you need a more immediate response.

This syllabus is subject to change. Students are encouraged to check course messages and emails in order to remain current.