Bethel University Physician Assistant Program
Course: PHAS 710, 720, 730 (Clinical Field Placements I, II, & III)

This clerkship module is a part of the Clinical Field Placement (CFP) series of courses over the clinical year of the Bethel PA program. The Student Clerkship Handbook and CFP syllabi expectations and requirements will be followed for grading requirements.

Women’s Health Clerkship

Rotation Purpose

In this rotation, students will be provided the opportunity to acquire skills to approach common issues of women’s health including obstetrical and gynecological services. Students will participate in providing basic health care for the female patient including family planning, cancer detection, pre-natal care and nutrition. The emphasis of the Women’s Health clinical experience is the provision of primary care and counseling to female patients including information on female anatomy and physiology, contraception, the menstrual cycle, sexually transmitted infections, infertility, PMS, conception, prenatal care, routine breast exam and other health concerns.

Preceptor Requirements

Board Certified OB/GYN physician or Certified PA/NP working with a Board Certified OB/GYN physician (B3.05 & B3.06)

Clinical Field Placement Courses Objectives/Learning Objectives

At the end of this course, the PA student will be able to:

1. Develop the competencies for clinical practice and knowledge acquisition in all clinical settings (B3.02, B3.03a-d, B3.04a-d, B3.07a-f & 2, 3, 8, 9)
2. Demonstrate skills necessary to function in the healthcare environment with preceptor supervision (B3.02, B3.03a-d, B3.04a-d, B3.07a-f & 2, 3, 8, 9)
3. Appreciate different clinical settings and business practices, especially in areas designated as “medically underserved” (B3.02, B3.03a-d, B3.04a-d, B3.07a-f & 2, 3, 8, 9)
4. Synthesize and apply medical knowledge and treatment in an evidence-based manner in the care of patients (B3.02, B3.03a-d, B3.04a-d, B3.07a-f & 2, 3, 8, 9)
5. Synthesize aspects of the Christian faith to apply medical knowledge and clinical skills to patient care (B3.02, B3.03a-d, B3.04a-d, B3.07a-f & 2, 3, 8, 9)

Instructional Objectives
By the end of the rotation, assessed by preceptor evaluation, student logging and end of rotation examinations, the PA student will be able to (B1.09, B3.03a, B3.04a &B3.04c, and B3.07b):

At the conclusion of this rotation, the student will:

1. Gather information, formulate differential diagnoses, and propose plans for the initial evaluation and management of patients with common presentations.
2. Demonstrate a sound approach to the evaluation and initial management of acute and chronic illnesses routinely encountered in Women’s Health.
3. Conduct a wellness visit for a patient of any age.
4. Conduct an encounter that includes patients and families in the development of screening and treatment plans.
5. Utilize evidence-based medicine to determine cost-effective diagnostic evaluation of common acute and chronic presentations.
6. Assess specific classes of pharmacologic agents along with their indications, contraindications and side effect profiles.
7. Judge the criteria utilized to determine whether hospitalization is required and the subsequent discharge criteria for a specific Women’s Health disease/diagnosis.
8. Develop evidence-based health promotion/disease prevention plans for patients of any age or gender.
9. Discuss the influence of psychosocial factors on a patient’s ability to provide a history and carry out a treatment plan.
10. Incorporate psychological issues into patient discussions and care planning.
11. Demonstrate interpersonal and communication skills that result in effective information exchange between patients of all ages and professionals from other disciplines and other specialties.
12. Integrate their understanding of the professional aspects of the Women’s Health PA by showing respect, compassion, and integrity to all patients and providers.
13. Demonstrate ethical principles for provision/withholding clinical care, confidentiality of patient information, informed consent, and providing cost-effective health care and resource allocation without compromising quality.
14. Characterize the legal and regulatory roles of the Women’s Health PA.
15. Document and record information in the medical record that shows an understanding for the legal, medical, ethical, and financial aspects of quality medical care as it relates to the Women’s Health patient.
16. Apply information technology to support patient care decisions and patient education when given a specific Women’s Health disease or diagnosis.
17. Integrate evidence from scientific studies, apply knowledge of study design and statistical methods, apply information technology and access/evaluate on-line information as it relates to a specific Women’s Health disease or diagnosis.

**Detailed Instructional Objectives**

Upon completion of the Women’s Health rotation, based on reading and supervised clinical practice, the student will demonstrate knowledge and competence pertaining to each of the instructional objectives below, as they relate to the symptoms and diagnoses in the problem list. The student will be evaluated by the following criteria: written examination, patient write-ups and preceptor evaluations. The student must seek appropriate preceptor supervision for all the tasks listed below, particularly those related to management. Pertaining to the problem list below, the student will

1. Demonstrate knowledge of the etiology, epidemiology, pathophysiology, anatomy, prognosis and complications pertinent to each diagnosis.
2. Elicit and record a complete and focused history, appropriate for the patient’s age, including chief complaint and HPI with pertinent review of systems, past medical history, family history and social history to include:
   A) Appropriate use of questions
   B) Listening to the patient
   C) An organized approach to eliciting the patient’s history
   D) Interpreting normal and abnormal historical data
3. Perform and record a complete and focused physical examination, appropriate for the patient’s age, to include the following:
   A) An organized head-to-toe approach
   B) Using proper technique
   C) Selecting the sections of the physical exam pertinent to the patient’s complaint
   D) Interpreting normal and abnormal findings in the context of the patient’s history
4. Develop and record a differential diagnosis, based on the patient’s complaint, to include a consideration of:
A) The most likely diagnoses, based on history and physical exam data
B) The most common entities
C) The most severe and/or life-threatening entities

5. Select and interpret diagnostic studies to evaluate the differential diagnosis, including the following for each study:
   A) Risks and benefits
   B) Sensitivity and specificity
   C) Cost effectiveness
   D) Obtaining informed consent

6. Develop, record and implement, as pertinent, a pharmacologic management plan to include
   A) Rationale for utilizing each drug, including mechanism of action
   B) Indications, contraindications and adverse reactions
   C) Potential drug-drug interactions
   D) Cost-effectiveness
   E) Documented patient education regarding side effects and adherence issues

7. Develop, record and implement, as pertinent, a non-pharmacologic management plan to include as appropriate:
   A) Behavioral and psychosocial interventions
   B) Referrals to other health care providers
   C) Referrals to community resources
   D) Utilization of family resources
   E) Plans for follow-up care

8. Provide and record pertinent patient education regarding disease prevention and health maintenance, which is clearly explained to the patient and checked for understanding, to include:
   A) Nutrition
   B) Accident and violence prevention (e.g. seat belts, helmets, screening for domestic violence)
   C) Physical activity/exercise
   D) Pertinent risk factors, including occupation, environment, tobacco, alcohol, other drugs and genetic factors
   E) Warning signs/symptoms of diseases
   F) Plan for age appropriate screening and periodic health assessment

9. Provide patient counseling to include:
   A) Adjustment to states of health and disease as related to ADLs, sexuality, relationships, death and dying
   B) Consideration of patient’s health beliefs and practices, religious/spiritual beliefs and lifestyle choices
   C) Family issues
   D) Occupational and leisure issues
   E) Anticipatory guidance appropriate to patient’s age

10. Monitor patients’ progress over time, to include:
    A) Reassessment of subjective and objective data
    B) Reconsideration of differential diagnosis, as needed
    C) Modification of management plan, based on patient’s health status and adherence issues

11. Chart progress notes following the SOAP format to include:
    A) Subjective data
    B) Objective data
    C) Assessment
    D) Plan

12. Make verbal case presentations to the clinical preceptor to include pertinent elements listed above, in an organized and time-efficient manner

**Problem List**
The following sections contain content that a student should understand; either by clinical exposure or by reviewing didactic material that will help to guide student preparation for testing:

**COGNITIVE**

Students will be able to discuss the etiology, pathophysiology, pathology, clinical presentation, differential diagnosis, management & procedures, clinical pharmacology, and patient education for the following list of medical conditions or procedures.

**Obstetrics**

1. The student will demonstrate the knowledge and skills described above pertaining to the following:
   - A) Emesis gravidarum
   - B) Hypertensive disorders of pregnancy
   - C) Gestational diabetes
   - D) Premature rupture of membranes
   - E) AIDS
   - F) Rh incompatibility
   - G) Low back pain
   - H) Anemia
   - I) Thrombophlebitis
   - J) Preeclampsia/eclampsia
   - K) Bleeding
   - L) Placenta previa
   - M) Incompetent cervix
   - N) Postpartum depression
   - O) Postpartum complications (including hemorrhage and endometritis)
   - P) Hyperemesis gravidarum
   - Q) Varicosities
   - R) Hemorrhoids
   - S) Illicit drug use in pregnancy
   - T) Heartburn
   - U) Polyhydramnios/oligohydraminos
   - V) Placenta abruption
   - W) Intrauterine retardation
   - X) UTI
   - Y) Braxton Hicks contraction
   - Z) Fatigue
   - AA) Mastitis
   - BB) Breast feeding
   - CC) Ectopic pregnancy
   - DD) Hydatidiform mole

2. The student will be able to make the presumptive diagnosis of pregnancy by:
   - A) Reviewing historical data
   - B) Recognizing physical findings
   - C) Laboratory confirmation noting test reliability and timing

3. The student will recognize the physiologic changes which occur during pregnancy in the:
   - A) 1st trimester
   - B) 2nd trimester
   - C) 3rd trimester
   - D) Cardiovascular
   - E) Hematologic
   - F) Gastrointestinal
   - G) Endocrine
   - H) Renal
4. The student will understand the meaning and significance of common obstetrical terms such as:
   A) Episiotomy
   B) Cesarean section
   C) Multiparity
   D) Nulliparous
   E) Retroverted/retroflexed
   F) Ectopic pregnancy
   G) Amniocentesis
   H) Ultrasonography of uterus/adnexa
   I) Chorionic villus sampling
5. The student will be able to explain:
   A) Fetal circulation
   B) The stages of labor and associated terms, i.e. effacement, station, engagement, descent, and rotation
   C) Patient education regarding signs of labor, childbirth, maternal nutrition and hygiene
   D) How to estimate date of confinement by examination
   E) Elements of routine prenatal care (nutrition, exercise, immunizations, and laboratory screening tests)
6. The student will recognize abnormalities of labor and pregnancy including:
   A) Premature labor
   B) Cephalopelvic disproportion
   C) Operative obstetrics
   D) Fetal distress/fetal monitor decelerations
   E) Ineffective labor
   F) Malpresentations
   G) Types of abortion
7. The student will be capable of providing genetic counseling concerning:
   A) Risk factors associated with birth defects
   B) Common genetic defects and rates of occurrence
   C) Indication and associated risk of amniocentesis

Gynecology
1. The student will demonstrate the knowledge and skills described above pertaining to the following:
   A) Common gynecological problems
      • Endometriosis
      • Incontinence (stress and urge)
      • Premenstrual syndrome
      • Uterine prolapse
      • Cystocele/rectocele
      • Vulvodynia
      • Estrogen deficiency
   B) Sexually transmitted infections
      • *Trichomonas vaginalis*
      • *Chlamydia trachomatis*
      • *Candida albicans*
      • Gonorrhea
      • HIV/AIDS
      • Bacterial vaginosis
      • Syphilis
      • HPV/condylomata acuminata
      • Pelvic inflammatory disease
      • HSV I and II
2. The student will be familiar with the menstrual cycle and be able to explain the physiology and hormonal patterns associated with:
   A) Menarche
   B) Normal menstrual cycle
   C) Oral contraception
   D) Menorrhagia
   E) Metrorrhagia
   F) Perimenopause
   G) Menopause
   H) Amenorrhea
   I) Oligomenorrhea

3. The student will be able to identify the appropriate treatment for:
   A) Gestational trophoblastic neoplasm
   B) Bartholin cyst
   C) Ectopic pregnancy
   D) Ovarian cyst/PCOS
   E) Cervical and ovarian polyps
   F) Nabothian cysts
   G) Uterine myomas
   H) Endometriosis

4. The student will be familiar with the diagnostic techniques, signs, symptoms, and epidemiology of carcinoma of the:
   A) Cervix
   B) Ovary
   C) Endometrium

5. The student will be competent at providing patient education regarding family planning, contraception, and safe sex practices. The student will understand the use of and contraindications for the following:
   A) Oral contraceptive pills
   B) Intrauterine device (IUD)
   C) Cervical cap
   D) Nuva-ring
   E) Depo-Provera
   F) Male and female condoms
   G) Rhythm method/natural family planning
   H) Diaphragm
   I) Ortho-Evra patch
   J) Plan B

6. The student will be able to provide patient education related to breast health to include:
   A) Breast cancer screening guidelines, risk factors, signs/symptoms, diagnosis and treatment
   B) Fibroadenoma/fibrocystic breast disease
   C) Galactorrhea
   D) Abscess
   E) Mastitis
**Rotation Expectations**

Clearly, subjects addressed in any clinical rotation are dependent on the number of patients and kinds of disease entities presenting to a particular service. Nevertheless, certain content must be addressed, either by clinical exposure or by didactic materials that students can review to be prepared for end-of-rotation examinations and future Board Certification. Therefore, the following table contains the minimum diagnosis or presenting complaints to which students must be exposed, regardless of setting (B3.02).

<table>
<thead>
<tr>
<th>Diagnosis</th>
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<tbody>
<tr>
<td>Contraception Management</td>
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<tr>
<td>Annual Exam</td>
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<tr>
<td>Abdominal Pain</td>
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<tr>
<td>First and Routine Prenatal Examination</td>
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<tr>
<td>Abnormal Uterine Bleeding</td>
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<tr>
<td>Postpartum Examination</td>
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<tr>
<td>Menopause</td>
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<tr>
<td>Vaginitis</td>
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<tr>
<td>Sexually Transmitted Diseases</td>
</tr>
<tr>
<td>Gestational Hypertension</td>
</tr>
<tr>
<td>Breast Mass</td>
</tr>
<tr>
<td>Gestational Diabetes</td>
</tr>
<tr>
<td>Pelvic Mass</td>
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<tr>
<td>Infertility Evaluation</td>
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</tbody>
</table>

**Technical Skills:** Students are expected to acquire certain technical and interpretation skills that are commonly employed in medical care. Students are required to participate in and perform certain basic procedures under adequate supervision. At the end of the rotation the student should be able to do the following:

<table>
<thead>
<tr>
<th>Procedure</th>
</tr>
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<tbody>
<tr>
<td>Gynecologic Ultrasound</td>
</tr>
<tr>
<td>Obstetric Ultrasound</td>
</tr>
<tr>
<td>Colposcopy</td>
</tr>
<tr>
<td>Endometrial Biopsy</td>
</tr>
<tr>
<td>Cryotherapy of Cervix</td>
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<tr>
<td>Intrauterine Device placement or removal</td>
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</tbody>
</table>
**Professional Development**

1. Relate and perform professionally in a working situation with other members of the health care team.
2. Demonstrate an openness to receive constructive criticism.
3. Demonstrate a willingness to recognize limitations and seek help from supervising preceptors and appropriate reference materials.
4. Perform duties with a professional attitude in such areas as attendance, and dress code.
5. Demonstrate sensitivity to the emotional, social and ethnic background of patients.
6. Recognize the important role of the team of providers in the care of the elderly.
7. Recognize the impact that distance from a referral center has on patient care.
8. Identify the obstacles to obtaining medical care for those who are uninsured.
9. Recognize the impact that poverty, setting or socioeconomic class of patient, may have on your treatment plan.
10. Demonstrate understanding of end-of-life planning.

**Grading**

**Assessed Activity Weighting**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Weight</th>
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<tbody>
<tr>
<td>Online Participation:</td>
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<tr>
<td>Patient Profiles:</td>
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<tr>
<td>Patient Encounter Logs:</td>
<td>4%</td>
</tr>
<tr>
<td>Final Preceptor Evaluations:</td>
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<tr>
<td>Student Self Evaluations:</td>
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<tr>
<td>End-of-Rotation Exams:</td>
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<tr>
<td>End-of-Rotation Meetings Participation:</td>
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<tr>
<td>Total:</td>
<td>100%</td>
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**Final Grade Breakdown**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Letter Grade</th>
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<tbody>
<tr>
<td>95.00%</td>
<td>A</td>
</tr>
<tr>
<td>90.00%</td>
<td>A-</td>
</tr>
<tr>
<td>85.00%</td>
<td>B+</td>
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<tr>
<td>80.00%</td>
<td>B</td>
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<tr>
<td>77.00%</td>
<td>B-</td>
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<tr>
<td>73.00%</td>
<td>C+</td>
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<td>63.00%</td>
<td>D+</td>
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<tr>
<td>60.00%</td>
<td>D</td>
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<tr>
<td>&lt;60.00%</td>
<td>F</td>
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</tbody>
</table>
**Clinical Tasks:**
1. Write problem oriented progress notes using the SOAP format.
2. Implement an appropriate treatment plan as approved and supervised by the preceptor.
3. Present oral cases presentation to the preceptor.
5. Demonstrate effective management of extended care facility patients.
6. Utilize appropriate community resources to implement patient care plans

**Text(s): RECOMMENDED RESOURCES**


Green, Steven M., *Pocket Pharmacopoeia*, Tarascon, 2013

*The Sanford Guide to Antimicrobial Therapy*, 2012