

# School of Communication Sciences and Disorders

Clinical Preceptor Handbook 2024-2025



School of Communication Sciences and Disorders

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#### Dear Clinical Educator,

On behalf of the faculty and students at the University of Memphis School of Communication Sciences and Disorders, we would like to extend our gratitude and sincere appreciation for your willingness to be involved in our students' clinical growth and education. We understand that involving students in your clinical practice can require additional efforts during your already busy clinic schedule, and we thank you for your time and support. We want you to have a positive experience collaborating with our program. Enclosed is information intended to facilitate the experience for you and the student.

Clinical practicum provides intensive experiential learning that gives the student an opportunity to refine their clinical practice. Emphasis should be placed on integrating the many roles of professional audiology and serve as a vehicle for the student to enhance their critical reasoning and judgement and communication skills. We look forward to working with you to ensure you and the student have an excellent experience.

We encourage you to contact Dr. Jennifer Taylor at <u>jptaylr2@memphis.edu</u> if there is any way that we can support you.

Sincerely.

Linda Jarmulowicz, PhD

Dean and Director

Jennifer P. Taylor, AuD

Director of Clinical Education, Audiology

Graduate Education program in Audiology & Speech-Language Pathology accredited by The Council of Academic Accreditation (CAA) of the American Speech-Language-Hearing Association

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#### I. Introduction

W elcome to the University of Memphis School of Communication Sciences and Disorders!

We are so pleased that you have joined our team of valued and esteemed Audiology Clinical Preceptors. We hope that you are ready for the stimulating, exciting, and fulfilling world of audiology clinical education. Your contributions have a direct impact on our students as well as the field of audiology. We know and appreciate the time and effort you will spend making a difference in student's lives and hope that we can provide as much guidance and support as possible to assist you in this service.

All audiology students are placed in on-campus and off-campus practicum experiences prior to their externship. During the first year, students complete on-site clinic placements, participate in screening hours in development centers and the statewide EHDI initiative. Beginning with the second year of study, students participate in both on-site and off-site practicum experiences until the start of their fourth-year externship. Our students typically receive over 600 clinical clock hours prior to beginning their fourth year. Our community partnerships with preceptors, like you, provide our students with valuable opportunities to work with varying populations and gain experience from providers with different styles and specialties of care. The success of our program and our students would not exist without the support and dedication of professionals and mentors like you, and we are deeply grateful for your service.

This guide is designed to help you navigate the world of clinical education and to provide easy access to information that will be useful to you now and in the future. To help prepare you for your role as a preceptor, we would like to orient you to the School of Communication Sciences and Disorders Doctor of Audiology Program. The clinical practicum experience is critical for the professional growth of our audiology students. It provides the student with learning opportunities to enhance their foundational skills and knowledge through professional interaction and mentorship. Throughout this experience, the student should have the opportunity to engage in professional dialogue as well as learn from clinicians with different approaches in the clinical setting. The externship experience is meant to be a combined effort between the extern, the clinical preceptor, and the university clinic director. This handbook has been prepared to outline the roles of each individual involved to allow for optimal benefit for all parties involved.

#### II. Program Mission

The School of Communication Sciences and Disorders is dedicated to growth, advancement and application of understanding communication and communication disorders through leadership and rigor in scientific research, innovative preparation of lifelong learners, and culturally competent service to diverse communities.

#### III. Audiology Program Directory

Clinical Faculty Research/Academic Faculty

Dr. Casandra "Sandy" Banks Dr. Jani Johnson

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Dr. Kelsey Mankel

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#### IV. Benefits of the Practicum Experience

#### **Student Benefits**

- ✓ Provides a broader clinical experience across the scope of practice in audiology
- ✓ Gaining confidence in clinical skills
- ✓ Exposure to various clinical settings

#### **Preceptor Benefits**

- ✓ Reinvigoration of practice in the preceptor role
- ✓ Professional development
- ✓ Service to the profession

#### **Program Benefits**

- ✓ Opportunity to interact with professionals in the field
- ✓ Helps meet accreditation standards

### V. The Practicum Student and/or Extern

#### Responsibilities (see Section VIII.C.):

- 1. The student is expected to show up on time and prepared every working day.
  - a. It is the responsibility of the student to contact their preceptor(s) to establish when and where they are expected to be,
  - b. the dress code,

- c. any relevant policies and procedures they should be aware of
- 2. The student is expected to acknowledge and adhere to the rules and protocols of the practicum site at all times.
- 3. The student is to demonstrate responsible, accountable, and ethical behaviors.
- 4. The student is to progress in their independence as they meet clinical competencies.
- 5. The student is to perform independently only those skills that the student is competent and prepared to perform at their level of skill.
- 6. The student is to develop collaborative relationships with clients, the preceptor, agency personnel and other members of the practice.
- 7. The student should be constantly reflecting upon their professional performance concerning clinical skill as well as personal qualities that influence their working environment. They may wish to keep a journal of their strengths and weaknesses in order to improve upon or strengthen areas that will benefit them in their professional development as well as their patients.
- 8. The student is expected to participate in relevant clinical coursework (AUSP 8104 or AUSP 8125) while completing their practicum placement (see syllabi).
- 9. The student is expected to share and discuss semester goals with the preceptor.
- 10. The student is to develop knowledge and skills across the scope or practice.
- 11. The student is to seek appropriate learning opportunities throughout their clinical experiences.
- 12. The student is expected to use problem solving and critical thinking skills utilizing evidence-based practice in their clinical decision-making.
- 13. The student is asked to complete an advising meeting at midterm and at the end of the semester with the clinic director regarding their performance and experience at the practicum site.
- 14. The student is to understand the roles of the student, faculty and preceptor throughout their clinical practice.
- 15. The student is to communicate with the preceptor and clinic director should they become ill or unable to participate in their scheduled practicum at any time.
- 16. The student is to contact the clinic director immediately when issues arise.
- 17. The student extern is required to submit clock hours via the Typhon system weekly.

#### VI. The Clinical Preceptor

#### Qualifications:

- 1. At least nine months of practice experience post-certification
- 2. Has completed 2 continuing education hours in supervision (program has free opportunities for preceptors to do so)
- 3. Hold a current Certificate of Clinical Competence (CFCC) or American Board of Audiology (ABA) certification
- 4. Hold the appropriate state license for the duration of the contractual term.

Responsibilities (see VIII for further clarification):

- 1. Serve as the primary supervisor to assist and monitor the student/extern in refining their clinical and professional skills within our scope of practice as they work towards becoming an independent practitioner.
- 2. Collaborate with the extern to determine a plan to establish goals and expectations for their practicum placement.
- 3. Provide the extern with a broad range of clinical experiences full-time, while maintaining appropriate supervision to allow for best-practice patient care.
- 4. Assist student with integrating theory into clinical practice.
- 5. Model professional conduct and evaluate the extern's conduct.
- 6. Register with the state that you will be serving this role with this particular extern within 30 days of the extern's start date, if required by your state.
- 7. Regularly provide constructive feedback to the extern.
- 8. Use other professionals to aid in clinical practicum in teaching, problem-solving, support and guidance, as needed.
- 9. Notify the Director of Clinical Services to resolve issues including, but not limited to, student's inability to practice at an acceptable skill level, professionalism concerns, etc.
- 10. Regularly meet with the extern to discuss progress.
- 11. Approve clock hours of the extern, complete midterm evaluation and final evaluation each semester during the course of the externship. Note we use the Typhon system for evaluations and clock hours. Please remember to check and approve clock hours on a regular basis. This can be cumbersome if you wait until the end of the semester. If you have any password issues, please let the University Clinic Director know. Midterm and final dates for 2022 are shared below.
- 12. If applicable, keep a record of leave requests.
- 13. Complete final paperwork for clock hours, licensure, and etc. if needed.

#### **Important Dates for Summer 2024:**

May 28, 2024	Clinic and Class Begin
July 4, 2024	July 4 <sup>th</sup> Holiday
July 19, 2024	Juneteenth Holiday
July 26, 2024	MSHC Clinic Ends
July 26, 2024	Final Case & Time Log and Evaluations due for Typhon
August 1, 2024	Class Ends
August 2, 2024	Finals

#### **Important Dates for Fall 2024:**

August 21-23, 2024	Fall Orientation
August 26, 2024	Clinic and Class Begin
September 2, 2024	Labor Day Holiday
October 14-15, 2024	Fall Break
October 11, 2024	Midterm Evaluations, Midterms, Check of Clock Hours
	via Typhon Due

November 27-29, 2024 Thanksgiving Break

December 4, 2024 Class Ends and MSHC Clinic Ends
December 4, 2024 Final Evaluations & Final Check of

Clock Hours via Typhon

December 5, 2024 Study Day December 6-12, 2024 Finals

#### **Important Dates for Spring 2025:**

January 15-17, 2025Spring OrientationJanuary 21, 2025Clinic and Class BeginsFebruary 27-28, 2025Midsouth Conference

March 7, 2025 Midterm Evaluations, Midterms, Check of Clock Hours

via Typhon Due

*March 10-14, 2025 Spring Break* 

April 30, 2025 Class Ends and MSHC Clinic Ends
April 30, 2025 Final Evaluations & Final Check of
Clock Hours via Typhon

Clock Hours via

*May 1, 2025* Study Day

May 2, 2025 Final Evaluations

*May 2-8, 2025 Finals* 

#### VII. The University Clinic Director

#### Responsibilities:

- 1. Verify certification and state licensure for the clinical supervisor.
- 2. Provide health records of the student and faculty upon request by the extern site.
- 3. Require evidence of professional liability insurance coverage for externs during the contractual term.
- 4. Maintain contact with the clinical supervisor to review extern progress, address any concerns, and assist in optimizing the extern experience for all involved.
- 5. Keep documentation of the extern's progress and clock hours.
- 6. Assign and evaluate the student' SMART goals pertinent to the extern experience.
- 7. Conduct monthly web-based classes via Zoom to discuss readings, presentations, experiences, and for student presentations of Grand Rounds cases.
- 8. Contact the student for midterm and final semester calls to review clinical experience and the extern's final evaluation.
- 9. Determine the extern's final grade and preparedness to enter the professional field.

#### VIII. Getting Started with a Student

We depend a great deal on off-campus practicum sites to help support our student population. Since 2012, our student class size has increased by 50% and supports approximately 16-18 students per year. The Clinic Director tracks each student's progress throughout his or her

program. The AuD Faculty continually assesses the academic and clinic program to ensure the students' sequenceof coursework matches their clinic work by building on foundational knowledge and skills. No student is assigned to a clinical practicum experience until they meet core competencies via knowledge and/or appropriate skill level.

The Clinic Director begins thinking about appropriate off-campus placements for the following semester during midterms. It is her goal to match each student, preceptor and placement based on the individual students' clinical needs and previous experiences. The Clinic Director or her designee will contact each preceptor to discuss the feasibility of a placement prior to the semester it will occur in. This communication typically occurs via email but may also be completed by phone or in a face-to-face meeting. The Clinic Director informs each student, prior to their placements, to contact the individual preceptors to discuss pertinent policies and procedures, receive special instructions or complete individual assessments or interviews as determined by the site. The student is instructed to discuss dress code, parking and other needed requirements that must be completed prior to their start date. The preceptor should orient the student to the expectations of the placement as well as to their expectations as the instructor. On the first day, each student will provide the preceptor with a SOSA form. This form details the student's previous placements, and identifies their strengths, opportunities they are hoping to gain and areas of improvement they are currently addressing. The student and preceptor should use the SOSA form to lay out goals for the semester. This form is to be turned in to the Clinic Director following the first week of placement. Feel free to provide the student with resources, recommended or required readings, assignments, trainings, etc. to facilitate their transition to your site.

For the most part, the Clinic Director is aware of any special requirements of your practicum site. However, this may not always be the case. Each supervisor has the opportunity to add requirements, readings, or additional information regarding their site directly into the Typhon system either under your site tab or individual preceptor tab.

#### A. Required Trainings, Immunizations and Vaccinations

Please note all Doctor of Audiology students are required to complete the following prior to clinical placement:

- ✓ Obtain a University of Memphis badge
- ✓ Tennessee Bureau of Investigations (TBI) background check provided through the College of Education
- ✓ HIPAA Training, yearly
- ✓ Basic Life Support and CPR Certification (American Heart Association or American RC)
- ✓ Blood borne Pathogen Training, yearly
- ✓ Hazardous Waste Training, yearly
- ✓ Minors on Campus Training
- ✓ Immunizations and Vaccinations: documentation of two MMR immunizations or proof of immunity for measles, mumps and rubella; documentation of two varicella immunizations or proof of immunity for chicken pox; TDAP every 10 years; Hepatitis B vaccination; flu shot, yearly; TB skin test or chest x-ray, yearly¹

#### **B.** Goal Setting

The SOSA form (appendix A) was developed to assist the preceptor in developing semester goals in consultation with the student. It is important for you and your staff to get a sense of the student's clinical strengths, areas for improvement and opportunities for growth. At times, students may be

inclined to set goals that are not appropriate (either too high or too low). The best goals are those that are high enough to be motivating and rewarding, yet not impossible to achieve. Consider the clinical setting, the student's present level and set a goal that is slightly higher than their current ability, a level that will be attainable. It may be beneficial to set short-term goals that will lead to the achievement of a much loftier long-term goal. Monitoring progress towards these goals will be important.

Example Goal: "At the conclusion of this clinical experience, the student will be able to: independently complete a complex audiologic evaluation, including masking, without assistance over three clinic sessions by midterm evaluation."

Specific: independently complete pure tone air conduction testing, with appropriate

Mnaskingeasurable: without assistance over three clinic sessions

Achievable: based on previous clinical experience and with preceptor support to start

Relevant: providing a foundation for more complex diagnostic testing skills

Time-based: by midterm evaluation

Goals can be updated and revised, if needed, at any time. It is recommended that the student use the SMART goal format when developing these goals to provide a structure for the process (appendix B).

# C. Suggest Expectations to Discuss with Students during Clinic Placements (see Section V. for further recommendations for placement)

The Doctor of Audiology students are expected to adhere to the following basic guidelines during their clinic placements both on-site and off-site:

Be Punctual	Arrive on time and prepared for the clinic day
	Begin and end appointments promptly

<sup>1</sup> At times students may have personal or religious reasons for not obtaining immunizations, please notify the clinic director and/or place in Typhon if you are unable to accept these students.

Notify clinic director and preceptor of any illnesses via contact method of

preceptor's choice

Do not come to clinic placement if ill

Discuss arrangements to make up any missed clinic days

Be Professional Dress appropriately for clinic setting (closed toe shoes at all times)

Do not wear clothing that can be construed as offensive or revealing Interact with colleagues and patients in a manner appropriate for a

professional setting Wear ID badge(s)

Maintain an effective and appropriate professional relationship with

preceptor(s), clinic support staff, peers, and patients

Be Dependable Prepare and conduct clinical services as assigned

Attend required meetings, classes, trainings or conferences as required

Notify clinic director and preceptor if they are unable to do so

#### **Maintain Confidentiality**

Ensure all documentation and paperwork is completed and in assigned  $% \left( x\right) =\left( x\right) +\left( x\right)$ 

secure location

Lock computer workstations if stepping away

Use discretion when discussing cases

#### **Practice Ethically**

Conduct clinical work in accordance to state and national certification bodies

Introduce yourself as a graduate student clinician, working under the supervision of an audiologist

Conduct diagnostic testing, rehabilitative care and counseling at their given skill level and notify preceptor if support needed

#### **Practice Patient-Centered Care**

Students are trained and encouraged to provide patient-centered and individualized care

Conduct themselves in a professional manner at all times to ensure the safety and welfare of all patients

# D. Suggested Expectations of Preceptors to Discuss with Students During Clinic Placements (see Section VI. for further information regarding expectations)

We appreciate and value the time, effort, and energy you spend guiding our students. Being a preceptor can be a very rewarding way to contribute to personal, professional, and student growth as well as help to advance your field and profession. As you know, your involvement will require commitment that will affect your daily responsibilities, schedule, and impact the life and future career of your student. It requires patience, understanding, compassion and time. Your clinical experience and skills are of great value to our students; please take the time to guide, direct, and facilitate the learning process by providing:

- ✓ A model for clinical service and professionalism in your clinical setting;
- ✓ instruction in audiologic procedures, techniques, and treatment planning, whenever possible:
- ✓ a safe environment for the student to practice these skills with patients in the clinical setting;
- ✓ regular and constructive feedback about the student's clinical skill development and professionalism in order to give students every opportunity to grow and achieve their goals;
- ✓ a midterm and final evaluation using the Typhon system (appendix C)
- ✓ be on-site and available to immediately respond to the needs of the patient whenever a student is performing diagnostic testing or providing intervention services
- ✓ Notify the Clinic Director if you have concerns relating to student performance that you are unable to address with the student when providing feedback and/or during their evaluation.

At times, it may be necessary to pull a student from a placement for a variety of reasons. Rarely does this occur; however, should this be needed, the clinic director will work with you directly. One such reason may be the student's inability to successfully complete their placement. If this occurs, please know the student will be provided an opportunity to address these concerns via an Areas of Study Requiring Attention form. The purpose of this is to allow the student to remediate and address areas of concern and to monitor their progress.

#### E. Instruction and Evaluation

Whether or not you have previously provided preceptorship, teaching a student clinician may feel overwhelming. Here are some tips and tricks that can help you get started.

#### Communication

- ✓ Communicate with the clinic director prior to the placement. Ask any questions you may have or concerns that can be addressed
- ✓ Communicate with the student prior to beginning the placement when the student makes initial contact or on their first day. If time permits, you may find it helpful to understand the preferred feedback style of the student in order to provide feedback in a way that is meaningful to the student.
  - o Ask for examples of previous experiences that were both positive and negative
  - o Ask the student what they expect from you when you are giving feedback
- ✓ Communicate with the student about your expectations, working style and approach to precepting. The student should know what to expect from the experience working with you.
- ✓ If time permits, you can schedule a time every week to discuss cases, patient needs, student needs and provide general feedback.
- ✓ We recommend holding a pre– and post-brief of the day with the student.
  - o Pre-Brief- If possible, tell them your plan for the day, answer any questions, or discuss particulars regarding the day. This time will help set expectations for their work.
  - o Post-Brief- If possible, review the day, address any concerns you have, answer any questions, provide additional discussion or learning opportunities and set goals for the following session.

#### **Preceptor Modeling**

All clinics have different expectations. All clinicians do things in their own way. The student may need additional support to acclimate to your clinic setting and adjust. One of the ways this can be achieved is through modeling. Ask the student to observe you their first day or when performing a new task or procedure they have not seen before. Share with them your procedures and model the behaviors you expect them to use during their time at your site.

#### Relationship

It is my sincere hope you can build a professional relationship with your student, allowing both of you to experience clinical and professional growth. Having this kind of relationship can help you provide feedback in a safe environment. In a poll of students, students ranked the following as being indicators of good clinical instructors (Sloan, 2005):

- ✓ strong interest in helping student develop clinical competencies, that is, students want to know that you are on their side, rooting for them to do well and supporting them through their clinical experience with you,
- ✓ willingness to share knowledge and expertise
- ✓ ability to create a warm supportive relationship
- ✓ collaborate in problem solving
- ✓ display good listening skills and
- ✓ provide clear feedback

If any conflicts or concerns arise, please attempt to discuss these with the student directly. Conflict resolution opportunities can be modeled and help the student grow. If you are unable to speak with the student, please contact the clinic director to identify opportunities for resolution.

Remember the School has the Areas of Study Requiring Attention plan should it become necessary to implement remediation procedures.

At times, it can be hard to maintain a professional relationship with students. It can be tempting to be friends; however, it can be difficult to evaluate a student if you are friends. Once a student graduates, you can establish a friendship with the student.

#### Grading

For grades in clinic class, clinical experiences account for 20% of the grade, on-site (Memphis Speech and Hearing Center) 60%, professionalism 10% and class meetings/assignments 10% (years 2 and 3). During their externship, 50% of their grade is based on preceptor grading. Throughout the semester, you have opportunity to provide the student with feedback and see their progress toward their SMART goals. You may find discussing progress towards goals with students each week or making notes will help you keep track. Use whatever system works for you. We use the Typhon system for the midterm and final evaluation for the student. The clinic director typically sends an email reminder one week prior to the due date and a second reminder the week of the due date. As part of the evaluation, you will have an opportunity to rate the student in four general areas: professionalism, diagnostics, counseling and report writing. You will rate the student on a scale of 1 to 5 (shown below). Additionally, you may offer individualized feedback to identify their strengths and areas for improvement. There is also an opportunity to mark the student as Excellent, Satisfactory or Unsatisfactory and assign a letter grade. Examples of these evaluations can be found in Appendix C.

#### **Clinical Performance Rating Scale**

The "Rating Scale" provides a quantitative measure of student performance, gives students information regarding their areas of strength and challenge, monitors improvement, and provides supporting information for the final grade. Ratings describe clinicians who have limited clinical competence and/or need extensive support, as well as clinicians who are relatively competent and independent in various clinical areas. Note: These ratings are a descriptive measure and are not based on a percentage of compliance in a section.

Rating Scale	Student Clinician Performance	Clinical Educator Support
1	<b>Skill Not Evident</b> : Skill not evident or is implemented with difficulty. Student does not implement feedback to effectively change their behavior. Demonstrates incomplete understanding of clinical disorder/process. Observes & assists instructor. Difficulty focusing on client's/patient's needs.	Maximum Instruction: Direct instruction, background information, and demonstration is necessary most of time. Patient service is provided by clinical educator.
2	Emerging Skill: Student occasionally implements feedback to effectively change their behavior. Needs instruction to modify skill. Implements skill if previously discussed or modeled. Focused primarily on own needs and performance and less so on patient needs. Limited self-evaluation skills.	Constant Direction: Helps student understand relevant client/patient needs majority of time. Clarifies priorities. Some assistance and/or demonstration is needed during appointment. Provides postappointment input to facilitate appropriate follow-up. Facilitates student self-evaluation.
3	Inconsistent Skill: Skill is in development. Implemented appropriately but inconsistently. Student does not independently	Ongoing Guidance: Oversees appointment plan. Occasional input needed during appointment to

	modify behavior during session. Post-appointment, student aware of need to modify behavior, and able to identify some solutions, but may not use optimal methods.	ensure accurate, appropriate, and optimal services. Focus on increasing student awareness of when and how to improve the skill. Instruction frequently required to facilitate understanding of patient needs.
4	Consistent with Occasional Prompts: Skill implemented appropriately most of the time. Working on refining skill (i.e., increased consistency, efficiency, or effectiveness). During appointment student is aware of need for change and modifies behavior some of time. Initiates new suggestions some of the time.	Intermittent Prompting: Monitors student performance and plans. Gives prompts regarding patient needs and possible alternatives to consider some of time. Seldomly intervenes during appointment.
5	Consistent & Capable: In most situations, implements skills consistently and proficiently. Student modifies behavior as needed. Demonstrates independent clinical problem solving. Generates accurate self-evaluation.	Collaborative Input: Clinical educator confirms student hypotheses and plans most of the time. Collaborates with student regarding patient needs and suggests alternative areas to consider some of the time. Promotes student independence. Does not need to intervene during an appointment.

#### IX. Adaptability and Critical Thinking Skills

It can be hard for a student to put themselves out there and attempt new things. Many times they are afraid of making a mistake or getting a bad grade; however, by creating an atmosphere of trust this can be overcome and allow the student to gain independence. Encourage them to try new skills in order to gain confidence in areas they may be lacking experience or competence.

One of the hardest parts of being a preceptor is teaching students how to think critically. We begin with trying to educate and demonstrate the crosscheck principle, fitting all the pieces together and utilizing evidence-based practice to support clinical decision-making. Students have a tendency to focus only on the current task and make sure they are doing that task correctly. This tendency makes it harder for them to grasp the context and implications of a clinical situation. As a preceptor, you may need to help guide the student in looking at the big picture. One of the things we implemented in the program is the use of case-based learning and the pods guy (appendix D). The Pods Guy is a pictorial representation of a case. The students think through all aspects of a case from the referral source, to tests being performed to results and recommendations for future care. This tool has helped our students become better at critical thinking. You may need to remind them to do this in your setting. You can support the development of their thinking by asking the student questions during their interactions, when appropriate, reviewing the case with them during post-briefing and asking them to reflect at the end of the day.

#### X. Appendices

Appendix A SOSA Form

Appendix B SMART Goal Format Sheet

Appendix C Sample Student Evaluations from Typhon

Appendix D Pods Guy

Appendix E Current Student Liability Insurance

Appendix F Typhon Instructions

Α	SC	SA	Fo	rm

## Instructions

Students are to complete this form prior to their first day at their offsite. They are then to discuss their areas of strength, the areas they wish to improve and the opportunities and goals they have for the semester. Following the meeting, the student should update the form and give a copy to their external preceptor and the clinic director.

Stu	dent Identifying Infor	mation			
Stud	dent Name:		Semeste	er/Year	;
Yea	r in Program:	□2 <sup>nd</sup>	☐ 3 <sup>rd</sup>		
Pre	vious Student Experi	iences			
	ENT Setting Headstart/Dev. Center Standard audiometry		Private Practice School VRA		Adult Hospital Children's Hospital CPA
	ABR Intraoperative monitoring Pediatric AR Hearing aid selection Other:		VNG APD Adult AR Hearing aid fitting Other:		EcochG Cochlear Implant Speech-language Hearing aid verification Other:
Oth	er Notes Regarding I	Evnerier	ncee'		
Oth	er Notes Regarding i	Experier	1062.		

# **Student Clinical and Professional Analysis**

Strengths	Opportunities
Semester Goals	Areas for Improvement
Cernoster Codis	Aleas for improvement

## B. SMART Goals Format Sheet

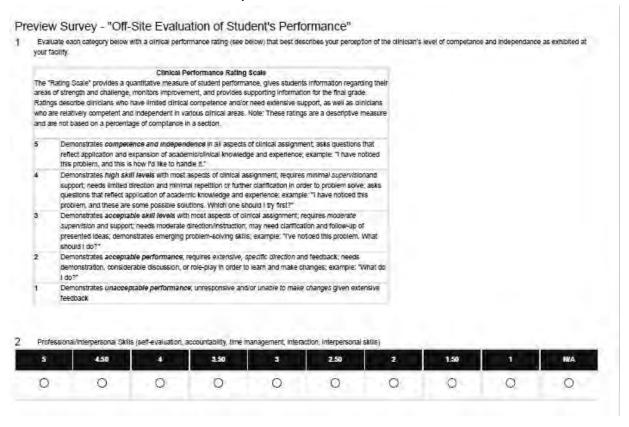
SMART Goals

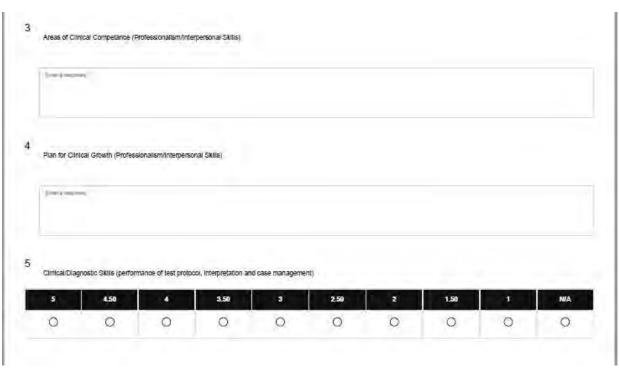
Instructions: Include commentary and timeline

Specific	Measurable	Achievable	Relevant	Time-Bound
Example:	Bring my personal water	Drink water at least once	Yes—I've had	Assess after first 7 days
Drink at least 3 bottles	bottle to work. Drink 1	an hour. Check on timing	significantly less water	to determine if drinking
of water daily.	bottle by lunchtime then	at lunch and try to drink	lately. This goal will help	appropriate amount and
	refill by afternoon.	bottle by end of lunch.	keep me hydrated.	update goal.

#### C. Sample Evaluations from Typhon

#### 1. Years 1-3 Offsite Preceptor Evaluation Form





I conse	B 1943								
Citati									
Plan f	for Clinical Growth (Clinic	al/Diagnostic Skills)							
Enter	g original								
Couns	iseling Skills/Case History	Taking (case history	taking, informational	i counseing, active	listening, ability to a	answer client que	stions)		
5	4.50	4	3.50	3	2.50	2	1.50	1	MA
0	-	0	0	0	0	O	0	0	0
	os of Clinical Competance								
	s of Cinical Competance								
Dec	s of Cinical Competance	(Counseling/Case Hi	story Taking)						
Plan	s of Cinical Competance	(Counseling/Case Hi	story Taking)						
Plan	s of Clinical Competance	(Counseling/Case Hi	story Taking) Taking)						
Plan	s of Clinical Competance  I To Clinical Growth (Cou	(Counseling/Case Hi	story Taking) Taking)	3	2.50	2	1.50		N/A

12		
	of Clinical Competance (Report Writing/Charting Skills)	
Entar a int	nk)osa	
13		
Plan for	or Clinical Growth (Report Writing/Charting Skills)	
Eron a ros	No.	
14		
Clinical	al Performance is Considered to be:	
Clinical  Response R	Required	
Clinical	Required	
Response R Select Option	Required	
Cirrical Response R Select Option	Required on letter grade would you give the student?	
Response R Select Option	Required on letter grade would you give the student?	
Cirrical Response R Select Option	Required on letter grade would you give the student?	
Clinical Response R Select Option  15 What le	Required on letter grade would you give the student?	
Ctinical Response R Select Option  15 What le	Required  In setter grade would you give the student?  In setter grade would you give the student?  It Comments Regarding Student's Performance	
Clinical Response R Select Option  15 What le	Required  In setter grade would you give the student?  In setter grade would you give the student?  It Comments Regarding Student's Performance	
Ctinical Response R Select Option  15 What le	Required  In setter grade would you give the student?  In setter grade would you give the student?  It Comments Regarding Student's Performance	
Clinical Response R Select Option  15 What le	Required  If the grade would you give the student?  If Comments Regarding Student's Performance  TRONIC SIGNATURE OF THE CLINICAL SUPERVISORS	
Ctinical Response R Select Option  15 What le	Required  In letter grade would you give the student?  If Comments Regarding Student's Performance  TRONIC SIGNATURE OF THE CLINICAL SUPERVISORS legulred	
Clinical Response R Select Option  15 What le	Required  If the grade would you give the student?  If Comments Regarding Student's Performance  TRONIC SIGNATURE OF THE CLINICAL SUPERVISORS	
Clinical Response R Select Option  15 What le	Required  I letter grade would you give the student?  If Comments Regarding Student's Performance  TRONIC SIGNATURE OF THE CLINICAL SUPERVISORS  Lequired	

# 2. Year 4 Semester 1 Evaluation

	Yes	No	N/A
xtern is punctual to work.	0	0	0
xtern is punctual to meetings with receptor(s).	0	O	0
extern is punctual when working with patients.	0	0	0
extern treats preceptor(s) with respect.	0	0	O
xtern treats staff with respect.	0	0	0
extern treats other student(s) with respect.	0	0	0
extern treats patients with respect.	0	0	0
extern meets deadlines with paperwork.	0	0	0
ixtern dresses professionally.	0	0	0
Extern demonstrates a willingness to learn and occept feedback.	O	0	0
	Yea	No	WA
extern has a positive attitude.	0	0	0
	Yes	No	MA
xtem recognizes own professional limitations and seeks feedback for improvement.	0	0	0
extern follows the Code of Ethics (AAA and/or ISHA).	Ó	0	0
extern follows universal precautions.	0	0	0
Extern follows HIPAA guidelines.	0	0	0
extern follows guidelines of the facility.	0	0	0
General comments regarding student's professional beha	wlor as noted above:		
(1000 to 10000000000000000000000000000000			

3 Evaluate each category below with a clinical performance rating (see below) that best describes your perception of the clinician's sevel of competence and independence as exhibited at your facility.

#### Clinical Performance Rating Scale

The Rating Scale provides a quantitative measure of student performance, gives students information regarding their areas of strength and challenge, monitors improvement, and provides supporting information for the final grade. Ratings describe clinicians who have limited clinical competence and/or need extensive support, as well as clinicians who are relatively competent and independent in various clinical areas. Note: The ratings are a descriptive measure and are not based on percentage of compilance in a section.

- (5) Demonstrates competence and independence in all aspects of clinical assignment; asks questions that reflect application and expansion of academic/clinical knowledge and experience; example: "I have noticed this problem, and this is how i'd like to handle it."
- (4) Demonstrates high skill levels with most aspects of clinical assignment; requires minimal supervision and support; needs limited direction and minimal repetition or further clarification in order to problem solve; asks questions that reflect application of academic knowledge and experience; example: "I have noticed this problem, and these are some possible solutions. Which one should I try first?"
- (3) Demonstrates acceptable skill levels with most aspects of clinical assignment; requires moderate supervision and support; needs moderate direction/instruction; may need clarification and follow-up of presented ideas; demonstrates emerging problem-solving skills; example; "I have noticed this problem. What should I do?"
- (2) Demonstrates acceptable performance; requires extensive, specific direction and feedback; needs demonstration, considerable discussion, or role-play in order to learn and make changes; example: "What do I do?"
- (1) Demonstrates unacceptable performance; unresponsive and/or unable to changes given extensive feedback.

	5	4	3	2	1	NA
Obtaining case history:	0	0	0	0	0	0
Choosing appropriate test protocol or procedure (tearing evaluation).	0	0	0	0	0	0
Choosing appropriate test protocol or procedure (electrophysiologic).	0	0	0	0	0	O

	S.		3	2	1	NIA
Choosing appropriate test protocol or procedure (vestibular testing).	0	0	0	0	0	0
Choosing appropriate test protocol or procedure (APD)	0	0	0	0	0	0
Choosing appropriate test protocol or procedure (cochlear implants).	0	0	0	0	0	0
instructing patient(s).	0	0	0	0	0	0
Managing appointment time effectively.	0	0	0	0	0	0
Modifying procedures as needed.	0	0	0	0	0	0
interpreting Andlings (bearing evaluation).	0	0	0	0	0	0
	5	4	3	2		N/A
interpreting findings (electrophysiologic).	0	0	0	0	0	0
interpreting findings (vestibular teeting).	0	0	0	0	0	0

	5		3	2	4	N/A
Interpreting findings (APD).	0	0	0	0	0	0
Interpreting findings (cochlear implants).	0	Ö	0	Ö	0	0
Troubleshooting hearing aids.	0	0	0	0	0	0
Performing electroacoustic measures appropriately as needed.	0	0	0	0	0	0
Working with a variety of hearing aid manufacturera and software.	0	0	0	0	0	0
Selecting appropriate devices to meet amplification needs of patients.	0	0	0	0	0	0
Using hearing aid verification and outcome measures as needed.	0	0	0	0	0	0
Recommending and selecting appropriate listening devices	0	O	0	0	O	0
feasuring and monitoring utcomes of the ppropriateness and efficacy if intervention.	0	0	0	0	0	N/A
conducting aural ejhabilitation sessions.	0	0	0	0	0	0
counseling patient and/or attent's family.	0	0	0	0	0	0
sporting findings	0	0	0	0	0	0
General comments regarding stud	ents clinicai pedorma	noe as noted above:				
Student's strengths noted at this til	me Include:					
Enter y response						

7	Student's weaknesses noted at this time include:
	Elm(A)summt
8	I would hire this student again.
	esponse Réquired
0	Yes
0	
9	What letter grade would you give this student?
0	A
0	
0	
0	
0	
40	
10	ELECTRONIC SIGNATURE OF THE CLINICAL SUPERVISORS.  Jesponse Required
-	complete of constant
	SIGNHERE
	se Type Name
	and Type Herre
	tional Comments:
A	155tral Correspond

#### 3. Year 4 Semester 2 Evaluation

Show next page (kight Arrow)

1 Evaluate each category below with a Yea/No or N/A answer that best describes your perception of the clinician's level of professionalism and independence as exhibited at your facility, with you, staff, colleagues, and in their work.

	Yes	No	WA
Extern is punctual to work.	0	0	0
Extern treats other's with respect.	0	0	0
Extern handles conflicts professionally.	0	0	0
Extern self-evaluates their performance appropriately.	0	0	0
Extern meets deadlines.	0	0	0
The supervisor feels goals selected by extern are appropriate.	0	0	0
Extern demonstrates a willingness to learn and accept feedback.	0	0	0
Extern has a positive attitude.	0	0	0
Extern shares goals with supervisor.	0	0	0
Extern follows the Code of Ethics (AAA and/or ASHA).	0	0	0
	Yea	No	MA
Extern follows universal precautions.	0	0	0

	Yea	No	NA
Extern follows HIPAA guidelines.	0	0	0
Extern follows guidelines of the facility:	0	0	0

2 General comments regarding student's professional behavior as noted above:

Cited a features.	

3 Student has had exposure to the following:

	Yos	No	NVA
Case history taking	0	0	0
Pediatric hearing evaluations	0	O.	0
Adult hearing evaluations	0	0	O
Veatibular evaluation	0	0	0
Veetibular management	0	0	0
Auditory Processing evaluation	0	Ō	0
Auditory Processing management	0	0	O
intraoperative monitoring	0	0	O
Supervision of others	0	0	0
Research opportunities	0	0	0
	Yee	No	NA
Cultural diversity	0	0	0
Cerumen management	0	0	0

	Yes	No	MA
Early Intervention	0	0	0
Pediatric hearing aids	0	0	0
Adult hearing alde	0	O	0
Electrophysiologic evaluation	0	0	0
Electrophysiologic management	O	O	0

4	Studen/ has had exposure to the following (not mentioned previously):	
	Estat & reshorter	

5 Evaluate each category below with a clinical performance rating (see below) that best describes your perception of the clinician's level of competence and independence as exhibited at your facility.

#### Clinical Performance Rating Scale

The Rating Scale provides a quantitative measure of student performance, gives students information regarding their areas of strength and challenge, monitors improvement, and provides supporting information for the final grade. Ratings describe clinicians who have limited clinical competence and/or need extensive support, as well as clinicians who have limited clinical competence and/or need extensive support, as well as clinicians are relatively competent and independent in various clinical areas. Note: The ratings are a descriptive measure and are not based on percentage of compliance in a section

- (5) Demonstrates competence and independence in all aspects of clinical assignment; asks questions that reflect application and expansion of academic/clinical knowledge and experience; example: "I have noticed this problem, and this is how I'd like to handle it."
- (4) Demonstrates high skill levels with most aspects of clinical assignment; requires minimal supervision and support; needs limited direction and minimal repetition or further clarification in order to problem solve; asks questions that reflect application of academic knowledge and experience; example. "I have noticed this problem, and these are some possible solutions. Which one should I by first?"
- (3) Demonstrates acceptable skill levels with most aspects of clinical assignment, requires moderate supervision and support; needs moderate direction/instruction; may need clarification and follow-up of presented ideas; demonstrates emerging problem-solving skills; example: "I have noticed this problem. What should I do?"
- (2) Demonstrates acceptable performance; requires extensive, specific direction and feedback; needs demonstration, considerable discussion, or role-play in order to learn and make changes; example: "What do I do?"

(1) Demonstrates unacceptable performance; unresponsive and/or unable to changes given extensive feedback.

	5	4	3	2	1	N/A
Obtaining case history.	0	0	0	Ö	0	0
Choosing appropriate test protocol or procedure and interpretation (insering evaluation).	0	O	0	0	0	0
Choosing appropriate test protocol or procedure and interpretation (electrophysiologic).	0	0	0	0	0	0

	5	4	3	2	1	NA
Choosing appropriate test protocol or procedure and interpretation (vestibular testing).	0	0	0	0	0	0
Choosing appropriate test protocol or procedure and interpretation (APD)	0	0	0	0	0	0
Choosing appropriate test protocol or procedure and interpretation (cochiese implants).	0	0	0	0	0	0
Hearing aids.	0	0	0	0	0	0
Reporting findings.	0	0	0	0	0	0
General comments regarding stu	udent's clinical performar	rce as noted above:				
8 I would hire this student again.  * Response Required	9					
⊙ Yes ⊙ No						
9 What letter grade would you git ○ A ○ B ○ C ○ D ○ F	ve this student?					
10 ELECTRONIC SIGNATURE OF Response Required	F THE CLINICAL SUPER	ivisors				
Please Type Name						
Additional Comments:						
Айдонна/ Соотчето						

# 4. Year 4 Semester 3 (Final) Evaluation

ctern has remained punctual throughout the demahlp.	0	0	0
tern has worked independently when propriate.	0	0	0
ctern was prepared for client appointments of associated meetings.	0	O	0
dem has always treated others with respect.	0	0	0
dern practiced a non-blased standard of care, nowing unconditional positive regard for each dividual, regardises of race, ethnicity, gender, exual orientation, religious affiliation, socio- conomic status and mental/physical ability.	0	0	0
xtern provided me with multiple ways to entact him/her and responded in a timely shion.	0	0	0
xfern utilized evidence-based practice.	0	O	0
		0	0
demonstrate/explain theories and/or	0		
extern used appropriate anecdotal information operators and or ractions.  Extern maintained an interest in current clinical assarch.	0	0	0
demionstrate/explain theories and/or ractices.  xtern maintained an interest in current clinical search.		No.	O MA
demonstrate/explain theories and/or actices.  Atem maintained an interest in current clinical esarch.	Yes	No	WA
demonstrate/explain theories and/or ractices.  Atem maintained an interest in current clinical search.  Extern demonstrated a willingness to learn and accept feedback.	Yes	No O	MA O
demonstrate/explain theories and/or ractices.  Atem maintained an interest in current clinical search.  Extern demonstrated a willingness to learn and accept feedback.	Yes	No O No	MA O
demonstrate/explain theories and/or actices.  In a search.  Extern demonstrated a willingness to learn and accept feedback.  Extern achieved goals for the semester.  Extern handled conflicts professionally.	Yes O	No No	MA O
certionstrate/explain theories and/or ractions.  Atem maintained an interest in current clinical search.  Extern demonstrated a willingness to learn and accept feedback.  Extern achieved goals for the semester.  Extern handled conflicts professionally.  Extern followed the Code of Ethics (AAA and/or ASHA).	Yes O	No O No O	MA O
demonstrate/explain theories and/or actions.  Atem maintained an interest in current clinical search.  Extern demonstrated a willingness to learn and accept feedback.  Extern achieved goals for the semester.  Extern handled conflicts professionally.  Extern followed the Code of Ethics (AAA and/or ASHA).	Yes O Yes O	No O	MA O MA O
o demonstrate/explain theories and/or ractices. xtern maintained an interest in current clinical	Yes O O O	NO O	MA O O O

 Evaluate each category below with a clinical performance rating (see below) that best describes your perception of the clinician's level of competence and independence as exhibited at your facility.

Clinical Performance Rating Scale

The Rating Scale provides a quantitative measure of student performance, gives students information regarding their areas of strength and challenge, monitors improvement, and provides supporting information for the final grade. Ratings describe clinicians who have limited clinical competence and/or need extensive support, as well as clinicians who are relatively competent and independent in various clinical areas. Note: The ratings are a descriptive measure and are not based on percentage of compilance in a section

(5) Demonstrates competence and independence in all aspects of clinical assignment; asks questions that reflect application and expansion of academic/clinical knowledge and experience; example: "I have noticed this problem, and this is how I'd like to handle it."

[4] Demonstrates high skill levels with most aspects of clinical assignment; requires minimal supervision and support; needs limited direction and minimal repetition or purther clarification in order to problem solve; asks questions that reflect application of academic knowledge and experience; example: "I have noticed this problem, and these are some possible solutions. Which one should if try first?"

(3) Demonstrates acceptable skill levels with most aspects of clinical assignment, requires moderate supervision and support; needs moderate direction/instruction, may need clarification and follow-up of presented ideas; demonstrates emerging problem-solving skills; example: "I have noticed this problem. What should I do?"

(2) Demonstrates acceptable performance; requires extensive, specific direction and feedback; needs demonstration, considerable discussion, or role-play in order to learn and make changes; example: "What do I do?"

(1) Demonstrates unacceptable performance; unresponsive and/or unable to changes given extensive feedback.

The second secon						
	5		3	2	1	N/A
Obtaining case history.	0	0	0	0	0	0
Choosing appropriate test protocol or procedure (hearing evaluation).	0	0	0	0	0	0
Choosing appropriate test protocol or procedure (electrophysiologic).	0	0	0	0	0	0

	5	4	3	2	1	NA
Choosing appropriate test protocol or procedure vestibular testing).	0	0	0	0	0	0
hoosing appropriate test rotocol or procedure (APD)	0	0	0	0	0	Ó
choosing appropriate test rotocol or procedure cochlear implants).	0	0	Ô	0	0	0
netructing patient(s).	0	0	0	0	0	0
fanaging appointment time flectively.	0	0	0	0	0	0
Modifying procedures as needed.	0	0	0	0	0	0
nterpreting findings (hearing evaluation).	0	0	0	0	0	0
	.5		3	2	1	NIA
nterpreting findings electrophysiologic).	0	0	0	0	0	0
nterpreting findings vestibular testing).	0	0	0	0	0	0

	5	4	3	2	1	NIA
interpreting findings (APD).	0	0	0	0	0	0
Interpreting findings (cochlear implants).	0	0	0	0	0	0
Troubleshooting hearing aids.	0	0	0	0	0	0
Performing electroacoustic measures appropriately as needed	0	0	O	0	Q	0
Working with a variety of nearing aid manufacturers and software.	0	0	0	0	0	0
Selecting appropriate devices to meet amplification needs of patients.	0	0	0	0	0	0
Using hearing aid verification and outcome measures as needed.	0	0	0	0	0	0
Recommending and selecting appropriate listening devices	0	0	0	0	0	0

	5		3	2	4	N/A
Determining whether instrumentation is in calibration according to accepted standards	0	0	0	0	0	0
Demonstrating knowledge of when to mask, why masking necessary, and uses appropriate technique	0	0	0	0	0	Ø
Measuring and monitoring outcomes of the appropriateness and efficacy of intervention.	0	0	0	0	0	0
Understanding of styles technologies, features, and potential benefits/fimitations of HA's	0	0	0	0	0	0
Conducting aural (re)habilitation sessions.	0	0	0	0	0	0
Counseling patient and/or patient's family.	0	0	0	O	0	0
Maintaining records in a manner consistent with legal and professional standards	0	0	0	0	0	0
Reporting findings	0	0	0	0	0	0

5	General comments regarding student's clinical performance as noted above:
	Ельц в индроме
6	Student's strengths noted at this time include;
	Streety & yearst-com.
7	Student's weaknesses noted at this time include:
	Egile) a reagenum
8	What letter grade would you give this student for the semester?
⊙ A ⊙ B	
00	
O F	
9	What letter grade would you give this student for the externship?
⊙ A ⊙ B	
0 c	
O F	
0:	
10	ELECTRONIC SIGNATURE OF THE CLINICAL SUPERVISORS
	sponse Required
Please	Type Name
	ii-Type Sintin
	inal Comments:
Addit	DELCONTRACE

# D. Pods Guy

Problems	THE PODS GUY Pre-appt	History
EBP		EBP
	$\prod$	
Questions	Solutions	Possible Problems/ Handouts
EBP	EBP	EBP

Problems Found	THE PODS GUY Post-appt	History
EBP		EBP
New Questions	Tests Conducted	Case Management
EBP	EBP	EBP
EBP	EBP	EBP
	EBP rning Opportunities / Things Done V	

#### E. Current Student Liability Insurance



#### **HEALTHCARE PROVIDERS SERVICE** ORGANIZATION PURCHASING GROUP



#### Certificate of Insurance OCCURRENCE PROFESSIONAL LIABILITY POLICY FORM

Print Date: 7/26/2022

The application for the Policy and any and all supplementary information, materials, and statements submitted therewith shall be maintained on file by us or our Program Administrator and will be deemed attached to and incorporated into the Policy as if physically attached.

PRODUCER	BRANCH	PREFIX	POLICY NUMBER	POLICY PERIOD		
018098	970	HPG	0619612816	From: 08/01/22 to 08/01/23 at 12:01 AM Standard Time		
Named Insure	ed and Addre	ess:		Program Administered by:		
University of Memphis- CSD / MSHC 4055 N Park Loop Memphis, TN 38152-4220			HC	Nurses Service Organization 1100 Virginia Drive, Suite 250 Fort Washington, PA 19034 1-800-986-4627 www.nso.com		
<b>Medical Spec</b>	ialty:		Code:	Insurance Provided by:		
School Blanket - Healthcare Provider Students 80998			ider Students 80998	American Casualty Company of Reading, Pennsylvania 151 N. Franklin Street Chicago, IL 60606		

Professional Liability	\$ 1,000,000	each claim \$ 5,000,000	aggregate	
Your professional liability limits shown above include the following:				_

<sup>\*</sup> Personal Injury Liability

Carragas	Extensions

crage Exteriorens					
Grievance Proceedings	\$ 1,000	per proceeding	\$ 10,000	aggregate	Т
Defendant Expense Benefit			\$ 10,000	aggregate	
Deposition Representation	\$ 1,000	per deposition	\$ 5,000	aggregate	
Assault	\$ 1,000	per incident	\$ 25,000	aggregate	
Medical Payments	\$ 2,000	per person	\$ 100,000	aggregate	
First Aid	\$ 500	per incident	\$ 25,000	aggregate	
Damage to Property of Others	\$ 250	per incident	\$ 10,000	aggregate	

_	
General	Liability

General Liability Fire & Water Legal Liability

\$1,000,000 each claim / \$3,000,000 aggregate Included in the GL limit shown above subject to \$250,000

aggregate sublimit

Total \$ 1,565.00

Base Premium \$1,565.00

Policy Forms and Endorsements (Please see attached list of policy forms and endorsements)

Chairman of the Board

373 Secretary

Keep this Certificate of Insurance in a safe place. It and proof of payment are your proof of coverage. There is no coverage in force unless the premium is paid in full. To activate your coverage, please remit premium in full by the effective date of this Certificate of Insurance.

Coverage Change Date:

**Endorsement Date:** 

Master Policy: 188711433

CNA93692 (11-2018)

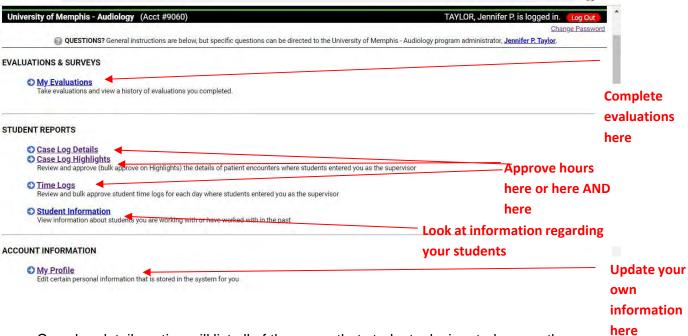
© Copyright CNA All Rights Reserved.

#### F. Typhon Instructors for Preceptors

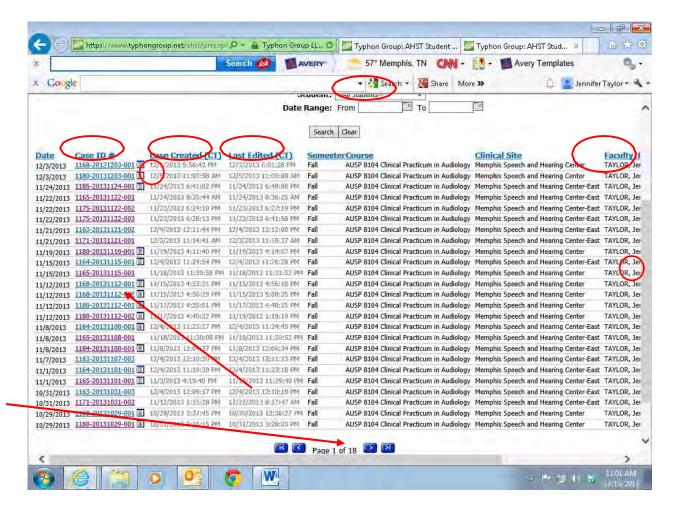
#### **Approval Process:**

#### Faculty/Preceptors:

- Log into the website with the link provided by the Typhon Group and enter the assigned passcode
- Three choices are available on the first screen:

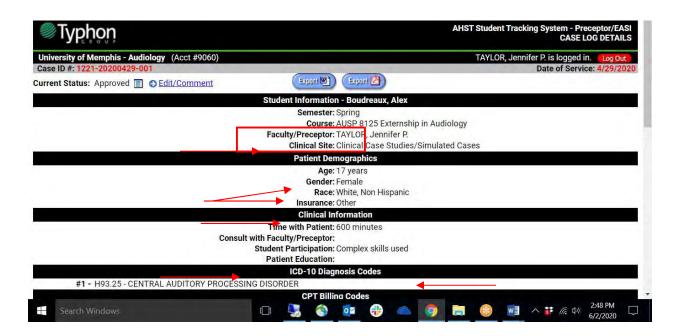


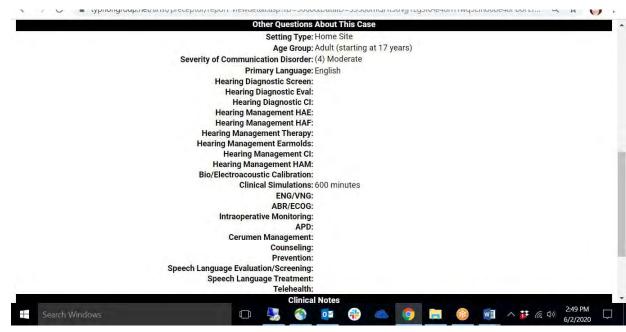
- Case log details option will list all of the cases that students designated you as the faculty/preceptor
- Case log highlights list will limit the selection based on the dates you choose
- Time logs will be where you can see the shift time for the student
- If cases are reviewed and approved regularly, the list of pending records will be shorter and more manageable.
- All students can be selected or a single student as well as the date range for cases listed.
- Information about the case is listed to include the date the record was created and last edited
- Cases with an infinity sign are linked.
- Cases with a note pad next to number have a clinic note from the student
- o The status can be:
  - Pending –means it is ready for faculty/preceptor review
  - Not Approved –means that it has been reviewed and there are items for the student to review and amend
  - Approved means it has been reviewed and approved.
- The note pad next to the status of a record indicates that a note has been left by the faculty/preceptor for the student



Scroll to Next page

- o To review a record, click on the Case ID# and the record will open.
- Review the items entered with close attention to the following:
  - Appropriate site
  - All demographics are included particularly Gender and Race information is not requested if the session is a group.
  - Time with patient
  - Consult with Faculty/Preceptor is blank time spent discussing cases either in pre-or post-briefing
  - Correct ICD code(s)
  - Correct CPT code(s)





- Setting Type a list is at the end of this document; ASSET and PLP are "Home Site" and Head Start is "Preschool"
- Age Group
- Hours break down by category and should add up to the total Time with Patient
- To comment on the case or edit the status of the case record, click on the link at the top left corner of the screen.
- Change the case status and enter comments.



- If information is missing, mark "not approved" and enter a note telling the student whatneeds to be changed.
- If entries are reviewed carefully at the beginning of the semester, the approval processwill go very quickly after a couple of weeks.
- o It is best to review/approve entries at least once a week.
- You can also quickly approve hours via the Case Log Highlights a month at a time

