



# SPAP STUDENTS

The Society for Physician Assistants in Pediatrics creates a space for PA students interested in pediatrics to collaborate, learn, and network. The SPAP Students Newsletter serves to inform, educate, and promote all-things-pediatrics among PA students.

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## GETTING READY FOR ROTATION

*Courtney Bishop, PA-C shares 8 tips for your pediatrics rotation. Courtney graduated from PA school in 2013 from Chatham University, since then she has worked in orthopedics at Nationwide Children's Hospital, where she currently serves as a preceptor.*

Clinical rotations can be both an exciting and nerve-wracking time for PA students. From the perspective of a preceptor, here are some recommendations that can help you succeed at your rotations.



### 8 TIPS FROM A PRECEPTOR:

- 1. Email in Advance:** Before the rotation starts (perhaps a few days to a week in advance) I would suggest sending an email to your preceptor. You can ask them the what the general weekly or daily schedule is, if there are any specific syndromes/disorders that the preceptor sees a lot of that you should familiarize yourself with prior to the rotation, and if there are any other things you should know. As a preceptor, I appreciate knowing in advance that the student is engaged and there is often information that I can share with them. I also recommend this because when I was a student there was one time I did this myself, and found out that the office was closed the first day of my rotation and that the weekly schedule was different than what my school told me, which luckily saved me frustration, confusion, and an hour round-trip drive.
- 2. Be Engaged:** Preceptors are aware that their field of practice may not be one that interests you as a future career, however you should still be engaged and learn what you can from the rotation. Regardless of your interest in the field, you will most likely have a question on boards that will be related to a patient you see during the rotation, or there will be general medical, physical examination, or procedural skills you can learn during the rotation. Additionally, you don't have to express extreme interest in a specialty you don't have, if you love working with children, that is okay to tell that to a preceptor who primarily works with a geriatric population, however you also cannot 'shut down' during the rotation and actively demonstrate disinterests.
- 3. Professionalism 24/7:** In addition to gaining medical knowledge, part of the goal of clinical rotations is for you to develop professionalism in the medical community. Initially, the simplest way to demonstrate this is to be on time, dress appropriately, and treat everyone you interact with kindly and cordially. Due to the relatively short time you spend on rotations, it can sometimes be hard to really get to know your preceptor and the other staff members that you will interact and work with, but be polite and try to engage with others when possible. Additionally, there are often important things you can learn from other professionals besides the preceptor, whether it is a medical assistant, physician, respiratory therapist, nurse, or radiology technician.

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## GETTING READY FOR ROTATION (CONTINUED)

- 4. Ask Questions:** Don't ever be afraid to ask questions to your preceptor, whether it is for information on a disorder, clarification on an examination finding, or further explanation of a treatment they've selected. Some preceptors may occasionally not be fully forthcoming with certain answers depending on their teaching styles, and they may ask you to do some research first, but afterwards if you still don't fully understand something they should work with you to make sure you appropriately comprehend everything you need to.
- 5. Know When You Don't Know:** If your preceptor asks you a question you don't know the answer to, it is okay to say you don't know. Recognizing your own limits is an important thing in the medical field and you should 'know what you don't know'. When you aren't sure of an answer, you should be willing to seek out the appropriate answer and report back to your preceptor. I work in a subspecialty and am fully aware that many of the disorders and presentations I treat daily are not generally covered in PA school. Some questions I ask students are things that I believe most students in the middle of their rotations should know and some questions I ask students are designed to help them learn more about my specialty as well as evaluate their thought process and ability to find answers to unknown questions.
- 6. Feedback is Gold:** Intermittently you should ask your preceptor for feedback (separately from any formal review) in regards to what they think you can work on or should improve. Being able to receive constructive criticism is something that will serve you well professionally in the long run. Also, most preceptors are interested in teaching and 'paying it forward' and want you to succeed, so if they have something they think you can improve, it will probably be something that can benefit you in the future, whether it is related to professionalism, medical knowledge, or interactions with patients.
- 7. Comfort Zone:** Your preceptor will not set you up for failure. If they ask you to do something that makes you nervous because it is putting you out of your comfort zone, it is most likely intentional with the aim to help you grow professionally. Our patients are our first priority so we won't ask you to do something that would endanger them, and teaching students is also important to us and we will not intentionally cause a setback in your learning. You can always request assistance or clarification from your preceptor. However, if you think what the preceptor is asking you to do is inappropriate or unsafe for the patient, that is obviously a different matter and should be discussed with the preceptor or your program.
- 8. Time is Money:** I still remember one of my preceptors happily explaining to me that the more hours I worked during clinical rotations, the cheaper each hour would be. While that sentiment honestly still frustrates me a little bit, it isn't a bad way to try to think about your clinical rotations. Everything you are doing during rotations should be able to be used to maximize your learning and educational experiences.

*Some of your rotations will be amazing, some will be less so, but get what you can out of every patient interaction and every opportunity to learn!*



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