

## Course Information

Date Submitted: 2/21/2013

Current Prefix and Number: PAS - Physician Assistant Studies , PAS 663 - SURGERY CLERKSHIP

Other Course:

Proposed Prefix and Number:

What type of change is being proposed?

Major – Add Distance Learning

Should this course be a UK Core Course? No

## 1. General Information

a. Submitted by the College of: College of Health Sciences

b. Department/Division: Physician Assistant Studies

c. Is there a change in 'ownership' of the course? No

If YES, what college/department will offer the course instead: Select...

e. Contact Person

Name: Suzanne Fiscella

Email: [suzanne.fiscella@uky.edu](mailto:suzanne.fiscella@uky.edu)

Phone: 218-0857

Responsible Faculty ID (if different from Contact)

Name: Samuel Powdrill

Email: [spowd2@uky.edu](mailto:spowd2@uky.edu)

Phone: 218-0522

f. Requested Effective Date

Semester Following Approval: Yes OR Effective Semester:

## 2. Designation and Description of Proposed Course

a. Current Distance Learning (DL) Status: Please Add

b. Full Title: SURGERY CLERKSHIP

Proposed Title: SURGERY CLERKSHIP

c. Current Transcript Title: SURGERY CLERKSHIP

Proposed Transcript Title: SURGERY CLERKSHIP

d. Current Cross-listing: none

Proposed – ADD Cross-listing :

Proposed – REMOVE Cross-listing:

e. Current Meeting Patterns

CLINICAL: 45

Proposed Meeting Patterns

CLINICAL: 45

f. Current Grading System: Graduate School Grade Scale

Proposed Grading System: PropGradingSys

g. Current number of credit hours: 3

Proposed number of credit hours: 3

h. Currently, is this course repeatable for additional credit? No

Proposed to be repeatable for additional credit? No

If Yes: Maximum number of credit hours:

If Yes: Will this course allow multiple registrations during the same semester? No

2i. Current Course Description for Bulletin: This is a four-week clinical course designed to provide physician assistant students with experience in evaluating and treating surgical problems. Experience is provided at the level of a primary care physician assistant, and emphasis is placed on performing a surgical history and physical exam, assisting in surgery, selecting and interpreting laboratory exams, establishing a logical differential diagnosis, conducting research on surgical problems, and performing selected surgical procedures.

Proposed Course Description for Bulletin: This is a four-week clinical course designed to provide physician assistant students with experience in evaluating and treating surgical problems. Experience is provided at the level of a primary care physician assistant, and emphasis is placed on performing a surgical history and physical exam, assisting in surgery, selecting and interpreting laboratory exams, establishing a logical differential diagnosis, conducting research on surgical problems, and performing selected surgical procedures.

2j. Current Prerequisites, if any: Prereq: Enrollment in the Physician Assistant program and successful completion of the didactic portion of the PA curriculum.

Proposed Prerequisites, if any: Prereq: Enrollment in the Physician Assistant program and successful completion of the didactic portion of the PA curriculum.

2k. Current Supplementary Teaching Component:

Proposed Supplementary Teaching Component:

3. Currently, is this course taught off campus? No

Proposed to be taught off campus? No

If YES, enter the off campus address:

4. Are significant changes in content/student learning outcomes of the course being proposed? No

If YES, explain and offer brief rational:

5a. Are there other depts. and/or pgms that could be affected by the proposed change? No

If YES, identify the depts. and/or pgms:

5b. Will modifying this course result in a new requirement of ANY program? No

If YES, list the program(s) here:

6. Check box if changed to 400G or 500: No

## Distance Learning Form

Instructor Name: Samuel Powdrill

Instructor Email: spowd2@uky.edu

Internet/Web-based: No

Interactive Video: No

Hybrid: Yes

1. How does this course provide for timely and appropriate interaction between students and faculty and among students? Does the course syllabus conform to University Senate Syllabus Guidelines, specifically the Distance Learning Considerations? Students will participate in this course, interacting with fellow students and faculty via Blackboard. The syllabus explains how to contact the instructor (via email and phone) and expected response times. The syllabus conforms to Senate guidelines.

2. How do you ensure that the experience for a DL student is comparable to that of a classroom-based student's experience? Aspects to explore: textbooks, course goals, assessment of student learning outcomes, etc. The course goals and content are the same as for a typical classroom-based experience. Quizzes, written assignments and performance are as challenging as for any comparable course. To ensure the highest production quality possible, student performance and testing are frequently monitored throughout the course via email, phone and site visits, as well as evaluation of clinical experiences.

3. How is the integrity of student work ensured? Please speak to aspects such as password-protected course portals, proctors for exams at interactive video sites; academic offense policy; etc. Students will access Blackboard with their user login and password. Students will also submit all written work through SafeAssign on Blackboard. Written work will be graded by the instructor. Final exams require proctoring by the instructor via Blackboard or other secure appropriate software. Grades for interactive discussion will be provided to the student only by the instructor. The student's placement will be supervised by a qualified clinical professional. This will ensure that the learning goals are appropriately met.

4. Will offering this course via DL result in at least 25% or at least 50% (based on total credit hours required for completion) of a degree program being offered via any form of DL, as defined above? No

If yes, which percentage, and which program(s)?

5. How are students taking the course via DL assured of equivalent access to student services, similar to that of a student taking the class in a traditional classroom setting? The students taking this course will have equivalent access to student services via the UK Library services and other UK student support websites. Students will be able to use their LinkBlue ID to access these resources.

6. How do course requirements ensure that students make appropriate use of learning resources? This course is Blackboard-based; the students have to access it for a copy of the syllabus, quizzes, written assignments. The students must use UK Library services to obtain the majority of the reading assignments and to search references for their writing materials and appropriate references.

7. Please explain specifically how access is provided to laboratories, facilities, and equipment appropriate to the course or program. Students will not require access to equipment outside of a personal computer and appropriate software. Students will primarily use the services of UK's Distance Learning, UK Distance Learning Library and electronic access to UK Libraries. Access is restricted to UK users via userID and password.

8. How are students informed of procedures for resolving technical complaints? Does the syllabus list the entities available to offer technical help with the delivery and/or receipt of the course, such as the Information Technology Customer Service Center (<http://www.uky.edu/UKIT/>)? Students are informed via the syllabus and given contact information for technical issues.

9. Will the course be delivered via services available through the Distance Learning Program (DLP) and the Academic Technology Group (ATL)? YES

If no, explain how student enrolled in DL courses are able to use the technology employed, as well as how students will be provided with assistance in using said technology.

10. Does the syllabus contain all the required components? YES

11. I, the instructor of record, have read and understood all of the university-level statements regarding DL.

Instructor Name: Samuel Powdrill

SIGNATURE|KOSKAF0|Karen O Skaff|Dept approval for ZCOURSE\_CHANGE PAS 663|20121130

SIGNATURE|PNASH|Phyllis J Nash|College approval for ZCOURSE\_CHANGE PAS 663|20121203

SIGNATURE|JDLIND2|Jim D Lindsay|HCCC approval for ZCOURSE\_CHANGE PAS 663|20130104

SIGNATURE|ZNNIKO0|Roshan N Nikou|Graduate Council approval for ZCOURSE\_CHANGE PAS 663|20130117

SIGNATURE|SRSTEW01|Sharon R Stewart|Approval resent to college for ZCOURSE\_CHANGE PAS 663|20130129

SIGNATURE|ZNNIKO0|Roshan N Nikou|Graduate Council approval for ZCOURSE\_CHANGE PAS 663|20130214

**PAS 663: GENERAL SURGERY CLERKSHIP**  
**DIVISION OF PHYSICIAN ASSISTANT STUDIES**  
**DEPARTMENT OF CLINICAL SCIENCES COLLEGE OF HEALTH SCIENCES**  
**UNIVERSITY OF KENTUCKY**

**Course Director**

Sam Powdrill, M.Phil., PA-C Assistant Professor  
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859-218-0522 [spowd2@uky.edu](mailto:spowd2@uky.edu)

**Course Description**

This 4-week clinical course is designed to provide the physician assistant student with experience in the evaluation and management of general surgery patients. Accomplishment of the objectives is expected at the level of a primary care physician assistant. This clerkship will give the student exposure to the general surgical and operating room environment to assist in surgery at the discretion of the surgery preceptor. Students are expected to participate in these opportunities as they are able under appropriate supervision. Further information and up to date revision and helpful material will be available on the surgery clerkship Blackboard site. Course communication will be by email using your UK account or by phone.

**Structure of Student Learning**

This course requires the use of distance technology for the following:

- All assignments to be submitted through Blackboard.
- Dictation assignments utilize Blackboard.
- Changes in the course or notifications will be found on Blackboard, email so please check these often.
- Exams and quizzes will be given online through Exam Master, a web based company.
- Preceptor evaluations will be turned in through fax and/or PA Manager, a web-based program.
- Patient Logs must be turned in through PA Manager, a web-based program.
- Grades will be posted on Blackboard before posted on your UK records.
- 90% of your course work will be completed in other locations than UK Campus.

**Office Hours**

My office hours are variable between the hours of 8am to 5pm Tue – Thur. It is usually best to either call or email me before coming. Mornings are generally the best.

**Orientation**

There will be an orientation for the surgery and women's health clerkships prior to these clerkships. This will be conducted by the surgery course director. It is usually held on each end of clerkship call back day and should be attended at the EOC prior to the beginning of the surgery clerkship. Attendance at this orientation is required, but only needs to be done once for women's health or surgery, whichever clerkship comes first.

In addition each hospital requires its own orientation at the beginning of a surgery clerkship and prior to entering the operating room. Please check with the hospital that you will be working with, before your

rotation as to their specific requirements and when they want you to do that. Procedures and protocols for surgery do vary between hospitals, so check on specifics with the unit that you will be working with. I strongly encourage you to plan on spending an afternoon or day learning to prepare the major and minor surgery sets for sterilizing. This can be arranged with the nurse in charge or the scrub techs. The purpose of this is to help you to learn the names of the instruments and what they are used for.

### **Technology for Distance Learning Course**

- The technological requirements for the course may be found at the following link: <http://www.uky.edu/DistanceLearning/faculty/technology/techReqs.html>
- Contact information for Distance Learning programs (<http://www.uky.edu/DistanceLearning>) and Information Technology Customer Service Center (<http://www.uky.edu/UKIT/Help/>; 859-218-HELP).
- Procedure for resolving technical complaints: Call 859-218-HELP, if not resolved, then contact instructor via email.
- Preferred method for reaching instructor, email at [spowd2@uky.edu](mailto:spowd2@uky.edu).
- Maximum timeframe for responding to student communications. 24 hours for the week and 48 hours for the weekend.
- If you have a documented disability that requires academic accommodations in this course, please make your request to the University Disability Resource Center. The Center will require current disability documentation. When accommodations are approved, the Center will provide me with a Letter of Accommodation which details the recommended accommodations. Contact the Disability Resource Center, Jake Karnes, Director at 859-257-2754 or [jkarnes@email.uky.edu](mailto:jkarnes@email.uky.edu).
- Students will have 2 days of class meetings on campus every month. Those will be listed in the student clerkship manual.
- Information on Distance Learning Library Services (<http://www.uky.edu/Libraries/DLLS>)
  - Carla Cantagallo, DL Librarian
  - Local phone number: 859 257-0500, ext. 2171; long-distance phone number: (800) 828-0439 (option #6)
  - Email: [dllservice@email.uky.edu](mailto:dllservice@email.uky.edu)
  - DL Interlibrary Loan Service:  
[http://www.uky.edu/Libraries/libpage.php?lweb\\_id=253&llib\\_id=16](http://www.uky.edu/Libraries/libpage.php?lweb_id=253&llib_id=16)

## **Text**

**Required:** Blackbourne; Surgical Recall, 4<sup>th</sup> edition; 2006; Lippincott, Williams & Wilkins, ISBN - 13 : 978-0-7817-7076-7

**Recommended:** Lawrence, P.E.; Essentials of General Surgery 5<sup>th</sup> edition; 2012; Lippincott Williams and Wilkins. ISBN # : 0781784956, 9780781784955

(This is much more in-depth than the required text and is an excellent reference)

## **Evaluation**

Preceptor evaluation 50%

Test 30% Patient Profile 10%

PA Manager Patient LogPass/Fail

## **Test**

The test will be made up of 50 to 60 multiple choice, matching, true/false or short answer questions. For the most part the questions will relate to the learning objectives in this syllabus, however, there may be a few questions that are not directly related to one objective. The type of questions asked on this test will be similar in complexity and content to the surgical questions asked on the national board exams and therefore a few questions may include components that are not specifically included in the learning objectives, but should be information readily encountered in a general surgery rotation. The test questions will generally come from Exam Master which has validated questions and rationales. However, if you think there is a problem with a test question please review it with the course director. Students will be permitted to review their tests online while in the test environment, where answers and feedback can be viewed. Please do not discuss the test content with others who have not yet taken the test. When taking the surgery test you will be asked to sign your name that you have not looked at previous surgery test questions or share them with other students or classes. Let me remind you that passing test questions from student to student is academic dishonesty (otherwise known as cheating). This is wrong and this and any other form of plagiarism will not be tolerated by the program and can carry a penalty of being dismissed from the program. Please don't expose yourself to the humiliation, embarrassment and financial loss that could result.

Grades will be assigned on a standard scale:

A = 90.0 – 100%

B = 80.0 – 89.9%

C = 70.0 – 79.9%

E = <70%

**Please remember that the object of this course is not to gain a grade, but to prepare you for the national board exams and a life of professional practice.**

## **Patient Profile**

The patient profile for the surgical clerkship is to be written up like other clerkships, including the pathophysiology section. The H&P should include a concise CC ( not a diagnosis), a well documented HPI, a pertinent PMH with an OB/Gyn section for female patients. The medication description can be brief, but should include the medications the patient is on, what the patient is taking them for, the class and action of the drugs and what potential risks or adverse effects are most likely for your patient to experience on this drug. The FH should include family risk factors for this patient's problem and the SH needs to be adequate enough to determine the patients social support, living situation for post operative care and daily ability to function while recovering. Substance use and abuse should also be included here. The ROS should have something on each system, but focus on the area of the patients problem , as well as, any system that is relevant to putting a patient under general anesthesia. The patient profile must include a surgery note which is a description of the surgery performed on the patient. This should include:

- Indications for surgery
- Pre and post-op diagnosis
- Type of anesthesia
- Description of the surgical procedure including:
  - Pertinent anatomical landmarks
  - Surgical technique
  - Method and type of wound closure
  - Complications
- Tissue specimens removed or sent to pathology
- The patient's condition on leaving surgery (e.g. waking up and stable)

### **Policy Regarding submission of course assignments**

All course work should be submitted by the EOC day at the end of the clerkship. Submission of late work is unprofessional behavior and therefore any course work submitted after the EOC day will not be accepted. See this section in the general section of the manual.

### **Clerkship Objectives**

**The following is not an all-inclusive list of medical conditions or procedures but an attempt has been made to include the more common conditions encountered in the primary care setting. The student may be tested over other conditions/procedures not listed here but that are encountered in the setting of General Surgery.**

#### 1.0 Skills and Procedures

- 1.1 Perform an appropriate history and physical exam
- 1.2 Monitoring and management of vital signs in surgery
- 1.3 Written documentation and oral presentation of surgical case
- 1.4 Demonstrate proper operating room technique which includes:
  - 1.4.1 Patient management and safety in the operating room
  - 1.4.2 Understanding of the sterile, clean and dirty areas of the operating room
  - 1.4.3 Aseptic technique, scrubbing, gowning, gloving and draping
  - 1.4.4 Cleaning and preparation of the operative site
  - 1.4.5 Knowledge of common instruments
  - 1.4.6 Retracting, sponging, suturing, hand tying and cutting sutures
  - 1.4.7 Wound dressing
  - 1.4.8 Assisting with laparoscopic surgery
  - 1.4.9 Correct handling of specimens
- 1.5 Routine preoperative and postoperative orders
- 1.6 Managing routine wound closure and wound dressing techniques
- 1.7 Administering uncomplicated local and regional anesthesia
- 1.8 Uncomplicated casts and splints
- 1.9 Nasogastric intubation
- 1.10 Endotracheal intubation
- 1.11 Colostomy/Ileostomy care
- 2.0 The physician assistant student shall apply the knowledge and skills identified above to plan a workup, compose a differential diagnosis list, and to develop a treatment plan at the level of a primary care physician assistant for the following clinical entities:
  - 2.1 Preoperative Care
    - 2.1.1 Preoperative Evaluation
    - 2.1.2 Preoperative Preparation
  - 2.2 Postoperative Care/Complications
    - 2.2.1 Wound Care/Complications



- 2.2.2 Management of Drains
- 2.2.3 Postoperative Pain Management
- 2.2.4 Respiratory Complications
- 2.2.5 Cardiac Complications
- 2.2.6 Urinary Complications
- 2.2.7 Psychiatric Complications
- 2.2.8 Postoperative Fever
- 2.3 Special Medical Problems in Surgical Patients
  - 2.3.1 Endocrine Disease
  - 2.3.2 Heart Disease
  - 2.3.3 Respiratory Disease
  - 2.3.4 Renal Disease
  - 2.3.5 Hematological Disease
  - 2.3.6 Pregnancy
  - 2.3.7 Geriatric Patients
- 2.4 Wound Healing
  - 2.4.1 Suture Selection
  - 2.4.2 Forms of Healing
  - 2.4.3 Response/Stages of Healing
  - 2.4.4 Factors that Affect Healing
- 2.5 Inflammation, Infection and Antimicrobial Therapy
  - 2.5.1 Surgical Infections
  - 2.5.2 Nosocomial Infections and Infection Control
  - 2.5.3 Surgical Site Infections
  - 2.5.4 Cellulitis
  - 2.5.5 Diffuse Necrotizing Infections
  - 2.5.6 Furuncle, Carbuncle, and Hidradenitis
  - 2.5.7 Antimicrobial Chemotherapy
- 2.6 Fluid and Electrolyte Management
  - 2.6.1 Distribution of Bodily Water
  - 2.6.2 Volume Disorders
  - 2.6.3 Disorders of Sodium Concentration
  - 2.6.4 Disorders of Potassium Concentration
  - 2.6.5 Disorders of Calcium Concentration
  - 2.6.6 Disorders of Magnesium Concentration
  - 2.6.7 Disorders of Phosphorus Concentration
  - 2.6.8 Acid-Base Balance/Abnormalities
- 2.7 Metabolism and Nutrition
  - 2.7.1 Nutritional Assessment
  - 2.7.2 Nutritional Requirements
  - 2.7.3 Nutritional Support/Therapy
  - 2.7.4 Complications of Nutritional Therapy
- 2.8 Shock and Pulmonary Failure
  - 2.8.1 Hypovolemic Shock
  - 2.8.2 Cardiogenic Shock
  - 2.8.3 Cardiac Compressive Shock
  - 2.8.4 Neurogenic Shock
  - 2.8.5 Acute Pulmonary Failure

- 2.8.6 Mechanical Ventilation
- 2.9 Burns, Thermal Injuries and Skin Infections
  - 2.9.1 Depth of Burns
  - 2.9.2 Determination of Severity of Burns – “Rule of Nines”
  - 2.9.3 Management of Burns and Their Complications
  - 2.9.4 Electrical Injuries
- 2.10 Head and Neck
  - 2.10.1 Cervical Lymph Node Mass
  - 2.10.2 Cancer of Oral Cavity, Oropharynx and Hypopharynx
  - 2.10.3 Laryngeal Cancer
- 2.11 Thyroid and Parathyroid
  - 2.11.1 Hyperthyroidism
  - 2.11.2 Thyroid Nodules and Goiters
  - 2.11.3 Inflammatory Thyroid Disease
  - 2.11.4 Thyroid Cancer
  - 2.11.5 Hyperparathyroidism
  - 2.11.6 Hypoparathyroidism
- 2.12 Breast
  - 2.12.1 Benign Breast Disorders
  - 2.12.2 Breast Nodules
  - 2.12.3 Carcinoma of the Female Breast
  - 2.12.4 Carcinoma of the Male Breast
- 2.13 Lung, Mediastinum, Pleura, and Thoracic Wall
  - 2.13.1 Tumors of the Chest Wall
  - 2.13.2 Pleural Effusion
  - 2.13.3 Pneumothorax
  - 2.13.4 Mediastinal Mass Lesions
  - 2.13.5 Suppurative Diseases of the Lung
  - 2.13.6 Lung Cancer
  - 2.13.7 Solitary Pulmonary Nodules
- 2.14 Esophagus
  - 2.14.1 Motility Disorders
  - 2.14.2 Esophageal Diverticula
  - 2.14.3 Gastroesophageal Reflux Disease
  - 2.14.4 Barrett’s Esophagus
  - 2.14.5 Hiatal Hernia
  - 2.14.6 Esophageal Perforation
  - 2.14.7 Ingested Foreign Bodies
  - 2.14.8 Corrosive Esophagitis
  - 2.14.9 Esophageal Cancer
- 2.15 Acute Abdomen
- 2.16 Peritoneal Cavity
  - 2.16.1 Peritonitis
  - 2.16.2 Intra-abdominal Abscesses
- 2.17 Stomach and Duodenum
  - 2.17.1 Duodenal Ulcers
  - 2.17.2 Gastrinoma
  - 2.17.3 Gastric Ulcers

- 2.17.4 Stomach Cancer
- 2.18 Liver and Portal Venous System
  - 2.18.1 Hepatic Trauma
  - 2.18.2 Liver Cancer
  - 2.18.3 Portal Hypertension
  - 2.18.4 Variceal Bleeding
  - 2.18.5 Ascites
- 2.19 Biliary Tract
  - 2.19.1 Gallstones
  - 2.19.2 Biliary Colic
  - 2.19.3 Acute Cholecystitis
  - 2.19.4 Cholangitis
  - 2.19.5 Choledocholithiasis
- 2.20 Pancreas
  - 2.20.1 Pancreatitis
  - 2.20.2 Pancreatic Pseudocyst/Abscess
  - 2.20.3 Pancreatic Cancer
- 2.21 Spleen
  - 2.21.1 Hypersplenism
  - 2.21.2 Erythrocyte Disorders
  - 2.21.3 Autoimmune Disorders
- 2.22 Appendix
  - 2.22.1 Acute Appendicitis
  - 2.22.2 Chronic Appendicitis
- 2.23 Small Intestine
  - 2.23.1 Short Bowel Syndrome
  - 2.23.2 Small Bowel Obstruction
  - 2.23.3 Crohn's Disease
  - 2.23.4 Lymphadenitis
  - 2.23.5 Intestinal Vaascular Occlusion
  - 2.23.6 Small Intestine Tumors
- 2.24 Large Intestine
  - 2.24.1 Large Bowel Obstruction
  - 2.24.2 Colon Cancer
  - 2.24.3 Colon Polyps
  - 2.24.4 Diverticular Disease
  - 2.24.5 Volvulus
  - 2.24.6 Ulcerative Colitis
  - 2.24.7 Crohn's Disease
  - 2.24.8 Antibiotic-Associated Colitis
  - 2.24.9 Ischemic Colitis
- 2.25 Anorectal
  - 2.25.1 Fecal incontinence

- 2.25.2 Obstructed Defecation
- 2.25.3 Hemorrhoids
- 2.25.4 Fissures
- 2.25.5 Fistulas/Abscesses
- 2.25.6 Pilonidal Disease
- 2.25.7 Tumors of the Anorectum
- 2.26 Gastrointestinal Bleeding
  - 2.26.1 Upper GI Bleeding
  - 2.26.2 Lower GI Bleeding
- 2.27 Hernias
  - 2.27.1 Inguinal Hernias
  - 2.27.2 Femoral Hernias
  - 2.27.3 Umbilical Hernias
  - 2.27.4 Ventral Hernias
- 2.28 Adrenals
  - 2.28.1 Hyperaldosteronism
  - 2.28.2 Pheochromocytoma
  - 2.28.3 Cushing's Disease/Syndrome
- 2.29 Blood Vessels and Lymphatics
  - 2.29.1 Peripheral Arterial Insufficiency
  - 2.29.2 Acute Arterial Occlusion
  - 2.29.3 Arterial Aneurysms
  - 2.29.4 Renal Artery Stenosis
  - 2.29.5 Gastrointestinal Ischemia Syndromes
  - 2.29.6 Varicose Veins
  - 2.29.7 Deep Vein Thrombosis
  - 2.29.8 Pulmonary Thromboembolism
  - 2.29.9 Superficial Thrombophlebitis
  - 2.29.10 Chronic Venous Insufficiency
  - 2.29.11 Lymphedema
  - 2.29.12 Lymphangitis
- 2.30 Skin/Soft Tissues
  - 2.30.1 Benign Skin Tumors
  - 2.30.2 Basal Cell Carcinoma
  - 2.30.3 Squamous Cell Carcinoma
  - 2.30.4 Melanoma
  - 2.30.5 Lymphoma
- 3.0 The physician assistant student shall demonstrate working knowledge of rapport with patients and health care professionals, including:
  - 3.1 Confidentiality
  - 3.2 Quality assurance
  - 3.3 Risk management
  - 3.4 Professional practice regulations
  - 3.5 Comprehensive/problem specific health record documentation
  - 3.6 Cultural differences in health behavior/utilization
  - 3.7 Interdisciplinary approaches to health care delivery
  - 3.8 Health professional role in multidisciplinary settings