Physician Assistant

MPA 5715 | Supervised Clinical Practice Experience in Pediatric Medicine

Course Information

Course Number and Title: MPA 5715 Supervised Clinical Practice Experience in Pediatric Medicine

Course Credits: 3 hours

Course Start and End Dates: 5 weeks during semesters 5-7, varies by student schedule.

Delivery Method: On-campus; Predominant Face to Face; Synchronous

Meeting Days and Times: Students follow the schedule provided by the preceptor. *Note: Students may not negotiate schedules or request schedule changes without the permission of the Course Director(s).*

Meeting Location: Based on specific site and preceptor schedule.

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Course Pre-requisites and/or Co-requisites
Successful completion of Semesters 1-4.

Course Description
This course is a 5-week supervised clinical practice experience in pediatric medicine that is designed to provide students with the opportunity to learn proper management of pediatric conditions. Students will apply knowledge and skills learned in the didactic portion of the program through hands-on learning in the outpatient setting. This course allows students the opportunity to refine clinical and technical skills through the care of pediatric patients (infants, children, and adolescents) in a variety of encounters (preventive, acute, and chronic) under the supervision of a preceptor.

Course Goal

The goal of this course is to provide students with supervised clinical experiences in the pediatric setting in preparation for clinical practice. Students will have the opportunity to enhance skills learned through evaluation, assessment, and management of patients. Through patient encounters, students will refine communication, clinical reasoning and problem-solving skills, and develop professional attributes emphasizing professional maturity and accountability.

Student Learning Outcomes (LO)

Following the program's competencies and ARC-PA Standards, the learning outcomes outline the expected knowledge, skills, and attitudes necessary to demonstrate entry-level proficiency for PA practice in pediatric medicine. Upon completion of this course, the student will be able to:

General Learning Outcomes

1. Apply evidence-based medical knowledge to aid in clinical decision-making.
2. Order laboratory and diagnostic testing appropriately.
3. Interpret laboratory and diagnostic testing accurately.
4. Apply clinical reasoning to develop a differential diagnosis based on history, physical examination, and review of diagnostic studies.
5. Establish appropriate referral strategies for specialty care.
6. Create thorough written documentation of patient encounters.
7. Demonstrate effective exchange of information when interacting with patients, families, preceptors and other health professionals.
8. Demonstrate the professional attributes of a physician assistant (PA).
9. Collaborate with other members of the healthcare team.

Infant Preventive Care Learning Outcomes (B3.03a, b)

10. Perform an appropriate physical examination (including pediatric growth charts) for an infant.
11. Recognize normal development of an infant based on milestones.
12. Identify vaccine requirements for an infant based on the immunization schedule.
13. Provide appropriate nutritional guidance for infants.
14. Provide anticipatory guidance to parents about expected behaviors and milestones for an infant.

Children Preventive Care Learning Outcomes (B3.03a, b)

15. Perform an appropriate physical examination (including pediatric growth charts) for a child.
16. Recognize normal development of a child based on milestones.
17. Identify vaccine requirements for a child based on the immunization schedule.
18. Provide age-appropriate nutritional guidance for children.
19. Provide anticipatory guidance to parents about expected behaviors, milestones, and safety for a child.

Adolescent Preventive Care Learning Outcomes (B3.03a, b)

20. Perform an appropriate physical examination (including pediatric growth charts) for an adolescent.
21. Determine normal puberty development in an adolescent patient using the Tanner stages.

22. Identify appropriate psychosocial screening for adolescents (e.g., school performance, mood disorders, tobacco and substance abuse, sexual risks, media use, other risk-taking behaviors).
23. Determine appropriate counseling for adolescents and families on health promotion according to recommended guidelines (e.g., AAP, Bright Futures and GAP).

Acute Care Learning Outcomes (B3.03a)

24. Demonstrate appropriate technique for foreign body removal.
25. Perform pharyngeal swab collection using proper technique.
26. Apply knowledge of pharmacology to appropriately calculate weight-based dosing of pediatric medications for acute conditions.

Required Textbooks and Materials

Stethoscope, white coat, and ODU PA student badge.

Supplemental Course Materials and Teaching Resources

Blueprint Prep, Osmosis and other resources as recommended by the program and/or preceptor(s).

The Johns Hopkins Hospital, Kleinmann K, McDaniel, L, Molloy M. *The Harriet Lane Handbook (23rd ed).* Philadelphia: Elsevier; 2020.

Marcdante, Kliegman, Schuh. *Nelson Essentials of Pediatrics 9th Edition*. Philadelphia: Elsevier; 2022.

Course Content

Instructional Methods

The instructional methods of this course consist primarily of patient encounters with preceptors at assigned clinical sites. Clinical preceptors provide supervised experiences to help achieve course outcomes and objectives through patient encounters. Students should also self-direct their learning through didactic textbooks, notes, and resources listed in this syllabus to guide additional study.

Participation Expectations

Students are expected to engage with the course content through self-directed learning and to attend the rotation following the schedule the preceptor and site provide. Students are expected to actively participate in patient care throughout the rotation schedule and engage with their preceptor to facilitate learning. The following outlines requirements of the course.

Patient Logs and Timesheets

PAs are expected to maintain up-to-date, thorough, and accurate documentation; therefore, students will gain this practice through Patient Logs and Timesheets. Students will log all patient encounters (Patient Logs) and work hours (Timesheets) through Exxat. Accuracy and thoroughness in completing Patient Logs and Timesheets is vital. The program utilizes this information to monitor progress of student learning outcomes and to ensure adequate clinical experiences. Incomplete and inaccurate logging may place students at risk for additional clinical experiences which may result in an extension of graduation. Patient logs and timesheets must be completed in Exxat by midnight the Sunday following the completion of the rotation. Refer to the table below regarding requirements.

SCPE	Life span (B3.03b)	Visit Encounter Type (B3.03a)
Pediatric Medicine	Infants, Children, Adolescents	Preventive, Acute, Chronic

End of Course Evaluations
Students are required to complete three end-of-course evaluations. The Student Evaluation of the Preceptor, Student Evaluation of the Site, and SCPE course evaluation. Evaluations of the preceptor and site are valuable for the program as we ensure students are receiving sufficient and effective education. The SCPE course evaluation assesses the management of the course, the course directors, and clinical coordinators. The program relies on the student's honest, thorough, and constructive feedback. The evaluations of the preceptor and site are to be completed through Exxat by midnight the Sunday following the completion of the rotation. The course evaluations will be completed during return to campus events.

Rotation Specific/Site Requirements
Students will be required to complete site- and rotation-specific compliance requirements as required by our affiliated sites and hospitals. In addition, annual institutional training and requirements must be completed. All large, affiliated institutions hosting students for clinical rotations require applications, orientation, and electronic health record (EHR) training. It is the student's responsibility to ensure the review and completion of each SCPE's requirements. Students are also expected to complete an attestation by way of the student review confirmation checkbox in Exxat for each rotation. This attestation is an acknowledgment that the student has read and understands all the information listed on the Placement Details page. This includes general and location requirements, reference documents, notes, and any other documents that may be provided to the program by the preceptor or site contact. It is the student's responsibility to read and understand the information. Preceptors may inquire about the information included on this page during the first day of the rotation. Failure to review and address these requirements could result in a delayed start of the rotation.

Evaluation and Grading
The course grade is calculated from the grading components listed below in the following table and description. Students receiving an NP score for the course should refer to the EVMS MPA Program Student Handbook.
- Rotation Discussion and Self-Reflection Form
- Blueprint Prep Mock Rotation Exam
- End of Rotation (EOR) exam
- Preceptor Evaluation of Student

Rotation Discussion and Self-Reflection Form
Students are required to complete a rotation discussion and self-reflection form as a tool to initiate a dialogue with the preceptor regarding progress and areas needing improvement during the SCPE. This form is to help facilitate formative feedback on specific areas needing improvement and strengths. This form can be accessed and submitted through Exxat and must be completed by the Sunday following the second week of the SCPE.

Blueprint Prep Exam
Students are provided access to the online Blueprint Prep question bank as a tool to prepare for the EOR exams. Students are required to complete a Mock Rotation Exam through Blueprint Prep. These are

formative assessments, and grades are awarded for completion. Students are encouraged to use this resource throughout the clinical year as a learning tool. The mock rotation exam will be released at the beginning of the SCPE. It must be completed by the Sunday following the completion of the second week, see schedule below. The exam will be made available for retake in the future, if desired once the deadlines have passed.

End-of-Rotation (EOR) Exam

EOR exams are administered through the Physician Assistant Education Association (PAEA) national testing platform. The Pediatric Medicine EOR exam consists of 120 multiple-choice questions based on the PAEA Pediatric Medicine EOR Exam Topic List which can be found here: https://paeaonline.org/assessment/end-of-rotation/content. The exam is divided into two sections of 60 questions with an optional 10-minute break. Scores are reported as a scaled score (300-500). The program converts the scaled score to a 100-point score for computing the Final SCPE Score. The passing score for each exam is one standard deviation below the national average. The exact score is subject to change per class based on national data provided by PAEA. The student must achieve a percentage score of 70% or higher to pass the course. Students receiving a non-pass (NP) on the EOR exam should refer to the EVMS MPA Program Student Handbook.

Preceptor Evaluation of Student

The Preceptor Evaluation of Student is completed by the preceptor and reflects the student's performance in medical knowledge, clinical and technical skills, clinical reasoning and problem-solving, interpersonal and communication skills, and professional behaviors during the course. Evaluations are completed by the primary preceptor. The student must achieve a score of 70% or higher on the Preceptor Evaluation of Student to pass. The course directors will discuss performance outcomes from the Preceptor Evaluation of Student via e-mail or in person if needed or as requested. Students receiving non-passing score (below 70%) on the evaluation should refer to EVMS MPA Program Student Handbook.

Special Assignments

The program may require additional assignments for absences from the SCPE. Furthermore, preceptors may require assigned reading, discussions, or presentations. These elements are not part of the graded elements but may be required for completion of the rotation.

Graded Element	Points	% of Final SCP Score
Rotation Discussion and Self-reflection	25	10%
Blueprint Prep Mock Rotation Exam-Pediatric Medicine	25	10%
Preceptor Evaluation of Student	100	40%
Pediatric Medicine EOR exam	100	40%
Total Points	250	100%

Formative Assignment Due Date by SCPE Timeframe	SCPE	Due Date
Rotation Discussion and Self-reflection	1	June 1, 2025
Blueprint Prep Mock Rotation Exam-Pediatric Medicine	1	June 1, 2025
Rotation Discussion and Self-reflection	2	July 6, 2025
Blueprint Prep Mock Rotation Exam-Pediatric Medicine	2	July 6, 2025

Rotation Discussion and Self-reflection	3	August 10, 2025
Blueprint Prep Mock Rotation Exam-Pediatric Medicine		
Rotation Discussion and Self-reflection	4	September 21, 2025
Blueprint Prep Mock Rotation Exam-Pediatric Medicine		
Rotation Discussion and Self-reflection	5	October 26, 2025
Blueprint Prep Mock Rotation Exam-Pediatric Medicine		
Rotation Discussion and Self-reflection	6	November 30, 2025
Blueprint Prep Mock Rotation Exam-Pediatric Medicine		
Rotation Discussion and Self-reflection	7	January 18, 2026
Blueprint Prep Mock Rotation Exam-Pediatric Medicine		
Rotation Discussion and Self-reflection	8	March 1, 2026
Blueprint Prep Mock Rotation Exam-Pediatric Medicine		
Rotation Discussion and Self-reflection	9	April 5, 2026
Blueprint Prep Mock Rotation Exam-Pediatric Medicine		

Grading Scale

All EVMS SHP programs for which the Macon & Joan Brock Virginia Health Sciences at Old Dominion University serves as the school of record will use the following grading scale for those courses in which grades affect the Grade Point Average (GPA). Mathematical rules for rounding to the nearest whole number based on two decimal places apply. For example, a final grade of 93.45 would round to a 94 (A). A final grade of 93.44 would round to a 93 (A-).

Table 1: Grades Not Affecting GPA

Code	Description
H	Honors
HP	High Pass
P	Pass
NP	Non-Pass

Table 2: Course Points Equating to Grade Specific to Course

Course Points	Letter Grade
90-100	H
80-89	HP
70-79	P
69 or less	NP

Policies

Attendance

Financial Services must verify participation of all students in all classes to initiate Financial Aid disbursements. In face-to-face courses, participation is verified by physical attendance. In online courses, completion of week one BioSig activities is verification of presence and participation in each course. Failure to participate (absences, failure to log in via the Learning Management System [LMS], missing important deadlines, additional BioSig verifications) may lead to withdrawal from this course in

accordance with the program/institution handbook. Refer to Section: Attendance Policies of the EVMS MPA Program Student Handbook for complete details of the Attendance Policies.

To facilitate and maximize learning opportunities, attendance as per the preceptor is mandatory. Negotiating and requesting schedule changes with preceptors or sites is prohibited. Students are expected to follow the schedule provided by the preceptor which may include nights, weekends, on call shifts, and extended hours. Students are expected to be on time for clinic. Students who are absent or late must follow the policies outlined in the Attendance Policies of the EVMS MPA Program Student Handbook. Additionally, it is the student's responsibility to notify the preceptor and site of lateness and absences.

Professionalism

Professionalism is an important attribute. Behavior in the clinic may be considered an indicator of future behavior as a practicing PA. Students are expected to adhere to the professional standards described in the EVMS MPA Program Student Handbook.

Examination Policy

All EOR examinations will be administered by the EVMS Student Testing Center or MonitorEDU, when necessary. MonitorEDU is an online, remote proctoring service. This option is available for students who are traveling outside the local area. Students must have a secure internet connection to utilize MonitorEDU. All students are expected to comply with the examination procedures distributed by the program. Program administration will provide details regarding use of MonitorEDU prior to scheduling EOR exams. Refer to the EVMS MPA Program Student Handbook for complete details on examination policies.

Late Work

Submission of work past the due date will result in the deduction of points from the above Evaluation and Grading section. However, all assignments are required to be completed to progress through the clinical year.

Academic Integrity

All students in the EVMS School of Health Professions must meet high expectations for academic integrity. In addition to being required to maintain the guidelines outlined for Monarch Citizenship through the Honor Code, Honor Pledge, and Monarch Creed, students enrolled in the EVMS School of Health Professions must adhere to the Expectations for Health Professions Student Behavior Policy.

Artificial Intelligence Use Policy

In this course, you may not use AI tools such as ChatGPT and DALL●E 2, to generate content (including text, images, digital art, sound, video, and programming code). Generative AI use is strictly prohibited. You must complete all course assignments on your own or with your classmates. Using AI tools to create content for your assignments is a form of academic dishonesty and a violation of the University Honor Code.

Course Schedule

The date and location of the first day of the rotation will be posted in Exxat. The remaining schedule details will be provided by the site on the first day. The start times and locations may have previous student details but will be updated with your specific information by the weekend before the first day of the rotation.

Instructional Objectives

Students may not encounter each of the instructional objectives during this course. Through patient encounters and self-directed learning at the end of this SCPE, the student should be able to demonstrate the following knowledge, skills, and attitudes. Students should refer to the PAEA exam topic list (link provided above under: End-of-Rotation Exam) for a comprehensive list of conditions referred to in the following objectives related to pediatric medicine.

General Learning Outcomes (Program Competencies)

LO1. Apply evidence-based medical knowledge to aid in clinical decision-making (MKb).
- Research current clinical practice guidelines for patient encounters.
- Utilize clinical decision support tools in conjunction with patient data to guide treatment decisions.
- Apply knowledge of basic sciences (anatomy, physiology, pathophysiology, microbiology, and genetics) to diagnose and manage conditions encountered in pediatrics.
- Identify underlying disease processes for chronic and acute presentations of conditions encountered in pediatrics.
- Recognize disease associations and complications through knowledge of scientific concepts.
- Recognize risk factors for preventable diseases.
- Utilize evidence-based medicine for evaluating best practices to increase knowledge and improve patient care in the pediatric setting.

LO2. Order laboratory and diagnostic testing appropriately (CTSc).
- Identify the most relevant diagnostic studies based on the patient's reason for visit and suspected diagnosis.
- Evaluate the clinical relevance of diagnostic studies considering the patient's age, gender, comorbidities, and other individual factors.
- Identify the risks and benefits of diagnostic studies.

LO3. Interpret laboratory and diagnostic testing accurately (CTSc).
- Identify abnormal findings for laboratory tests and diagnostic studies.
- Determine the clinical significance of the results.
- Synthesize results of diagnostic studies with clinical data to understand the patient's condition.

LO4. Apply clinical reasoning to develop a differential diagnosis based on history, physical examination, and review of diagnostic studies (MKa, CRPSa).
- Establish a differential diagnosis by prioritizing potential conditions based on clinical presentation.
- Integrate findings from the patient's history, physical examination, and diagnostic studies to refine the differential diagnosis.
- Utilize clinical reasoning to rule in or rule out potential diagnoses.
- Revise the differential diagnosis through ongoing patient evaluation and interpretation of diagnostic study results.

- o Identify the most likely diagnosis for conditions encountered in pediatrics (Refer to the PAEA Pediatrics End of Rotation Exam Topic List).

LO5. Establish appropriate referral strategies for specialty care (CRPSb).
- o Assess clinical scenarios to determine when specialty care is necessary, considering the severity of the condition and the patient's overall health status.
- o Identify specialty disciplines and care provided.
- o Identify conditions encountered in pediatric medicine that require referral or consultation with a specialist.
- o Determine coordinated care plans, ensuring continuity of care.

LO6. Create thorough written documentation of patient encounters (ICSa).
- o Document patient encounters in a clear, organized, and professional manner, adhering to legal, ethical, and institutional guidelines.
- o Demonstrate attention to detail when documenting patient history, physical findings, differential diagnoses, and treatment plans.
- o Use electronic health records (EHR) systems effectively, maintaining accuracy and confidentiality in patient documentation.

LO7. Demonstrate effective exchange of information when interacting with patients, families, preceptors and other health professionals (ICSa).
- o Participate in discussions with the preceptor ensuring clear communication of relevant clinical information.
- o Demonstrate effective communication when counseling patients on management plans for preventive wellness and acute or chronic presentation of diseases encountered in pediatric medicine.
- o Present patient encounters in a logical and concise manner.
- o Communicate patient information with healthcare team members to coordinate care.
- o Utilize sensitive and respectful communication when educating patients and families about difficult topics in pediatric medicine.

LO8. Demonstrate the professional attributes of a physician assistant (PA) (PBa).
- o Adhere to ethical guidelines and standards of practice in all patient interactions, demonstrating honesty, integrity, and confidentiality.
- o Show professional conduct by seeking feedback, reflecting on practices, and making improvements based on self-assessment.
- o Take initiative in learning and in patient care while respecting the contributions of all team members.
- o Establish the professional identity of a PA upholding the standards of the profession.
  - o Model integrity, responsibility, and ethical conduct.
  - o Show initiative to learn
  - o Respond well to constructive feedback
  - o Adapt to change

LO9. Collaborate with other members of the healthcare team (PBa).
- o Determine the roles and responsibilities of various members of the healthcare team.
- o Respect the expertise of other healthcare team members, working towards patient-centered care and mutual respect.

- o Engage in resolving conflict when team disagreements arise maintaining focus on patient care and well-being.

Infant Preventive Care Learning Outcomes (B3.03a, b)

LO10. Perform an appropriate physical examination (including pediatric growth charts) for an infant (CTSa).
- o Demonstrate proper technique for assessing vital signs in an infant (e.g., heart rate, respiratory rate, temperature).
- o Assess the general appearance of an infant accurately.
- o Demonstrate proper physical exam techniques for assessment of body systems in an infant (e.g., respiratory, cardiovascular, musculoskeletal, neurological).
- o Plot the infant's growth parameters (weight, length, head circumference) on the appropriate pediatric growth chart according to age and gender.

LO11. Recognize normal development of an infant based on milestones (MKa).
- o Identify key developmental milestones for infants in the domains of motor, cognitive, social, and language development, based on age-specific guidelines.
- o Assess an infant's developmental progress during the clinical examination, recognizing and documenting achievement of age-appropriate milestones, such as head control, social interaction, and language development.
- o Demonstrate an understanding of the importance of early detection of developmental delays.

LO12. Identify vaccine requirements for an infant based on the immunization schedule (MKa).
- o Recall the recommended vaccine schedule for infants, including the specific vaccines and their timing (e.g., hepatitis B, DTaP, Hib) according to the CDC.
- o Assess an infant's immunization history during the clinical encounter, identifying which vaccines have been administered and determining any missed or upcoming immunizations based on age and schedule.
- o Recognize contraindications and precautions to immunization for infants, including medical, developmental, or familial factors that may affect vaccine administration.

LO13. Provide appropriate nutritional guidance for infants (CRPSb).
- o Identify the key components of infant nutrition, including the differences between breast milk, formula, and the introduction of solid foods, based on current guidelines and the infant's developmental stage.
- o Assess an infant's nutritional intake during the clinical encounter, identifying any concerns such as feeding difficulties, inadequate growth, or signs of malnutrition.
- o Present parents or caregivers with evidence-based guidance on breastfeeding, formula feeding, and transitioning to solid foods, including recommended practices for frequency, portion sizes, and the introduction of allergenic foods.
- o Identify common feeding challenges in infants, such as colic, reflux, or food allergies.

LO14. Provide anticipatory guidance to parents about expected behaviors and milestones for an infant (MKb, CRPSb).
- o Present parents with information about age-appropriate developmental milestones for an infant (e.g., motor skills, social-emotional development, language, and cognitive milestones).
- o Discuss safety considerations with parents specific to the infant stage, including infant sleep safety (e.g., safe sleep practices), car seat safety, baby-proofing the home, and the prevention of accidental injuries.

- o Counsel parents on when to seek medical advice or intervention, outlining red flags for potential developmental concerns, such as delays in motor or language skills, and guiding parents on how to address these issues if they arise.

Children Preventive Care Learning Outcomes (B3.03a, b)

LO15. Perform an appropriate physical examination (including pediatric growth charts) for a child (CTSa).
- o Demonstrate proper technique for assessing vital signs in a child (e.g., heart rate, respiratory rate, temperature).
- o Assess the general appearance of a child accurately.
- o Demonstrate proper physical exam techniques for assessment of body systems in a child (e.g., respiratory, cardiovascular, musculoskeletal, neurological).
- o Plot the child's growth parameters (weight, length, head circumference) on the appropriate pediatric growth chart according to age and gender.

LO16. Recognize normal development of a child based on milestones (MKa).
- o Identify key developmental milestones for children in the domains of motor, cognitive, social, and language development, based on age-specific guidelines.
- o Assess a child's developmental progress during the clinical examination, recognizing and documenting achievement of age-appropriate milestones.
- o Demonstrate an understanding of the importance of early detection of developmental delays.

LO17. Identify vaccine requirements for a child based on the immunization schedule (MKa).
- o Recall the recommended vaccine schedule for children, including the specific vaccines and their timing, according to the CDC.
- o Assess a child's immunization history during the clinical encounter, identifying which vaccines have been administered and determining any missed or upcoming immunizations based on age and schedule.
- o Recognize contraindications and precautions to immunization for children, including medical, developmental, or familial factors that may affect vaccine administration.

LO18. Provide age-appropriate nutritional guidance for children (CRPSb).
- o Identify key nutritional requirements for children (e.g., caloric intake, macronutrients, micronutrients).
- o Assess a child's dietary habits during the clinical encounter, identifying any concerns such as portion sizes or food variety.
- o Discuss common nutritional challenges for children, such as picky eating, food allergies, or obesity.
- o Counsel parents and children on healthy lifestyle choices, including the importance of balanced nutrition.

LO19. Provide anticipatory guidance to parents about expected behaviors, milestones, and safety for a child (MKb, CRPSb).
- o Identify age-appropriate developmental milestones for children across different stages (e.g., toddlers, preschoolers, school-age), including motor, cognitive, language, and social-emotional development.
- o Communicate with parents about managing typical child behaviors, such as sleep patterns, discipline, emotional regulation, and socialization, offering strategies for positive reinforcement and behavior management.

- o Discuss age-specific safety recommendations with parents, including injury prevention (e.g., car seat safety, childproofing the home, bike helmets), as well as guidance on addressing potential hazards like choking, poisoning, and falls.
- o Communicate when to seek medical advice or intervention, helping parents recognize signs of developmental delays, behavioral concerns, or physical health issues that may require further evaluation or treatment.

Adolescent Preventive Care Learning Outcomes (B3.03a, b)

LO20. Perform an appropriate physical examination (including pediatric growth charts) for an adolescent (CTSa).
- o Demonstrate proper technique for assessing vital signs in an adolescent (e.g., heart rate, respiratory rate, temperature).
- o Assess the general appearance of an adolescent accurately.
- o Demonstrate proper physical exam techniques for assessment of body systems in an adolescent (e.g., respiratory, cardiovascular, musculoskeletal, neurological).
- o Plot the adolescent's growth parameters (weight, length, head circumference) on the appropriate pediatric growth chart according to age and gender.

LO21. Determine normal puberty development in an adolescent patient using the Tanner stages (MKa).
- o Recall the Tanner stages of pubertal development in both males and females, including the physical and hormonal changes associated with each stage, such as breast development, genital growth, and pubic hair development.
- o Assess the physical signs of puberty in an adolescent patient, using the Tanner staging system to classify the patient's development based on observable characteristics (e.g., breast and genital development, pubic hair, and axillary hair).
- o Identify normal variations in pubertal timing and progression, recognizing the differences between early, average, and delayed puberty.

LO22. Identify appropriate psychosocial screening for adolescents (e.g., school performance, mood disorders, tobacco and substance abuse, sexual risks, media use, other risk-taking behaviors) (MKa).
- o Demonstrate the ability to perform a thorough psychosocial assessment for adolescents, including screening for key areas such as school performance, mood disorders (e.g., depression, anxiety), tobacco and substance use, sexual health risks, and involvement in risk-taking behaviors.
- o Utilize age-appropriate screening tools and questionnaires (e.g., HEADSS, CRAFFT) to assess adolescent health, and interpret the results to identify potential psychosocial issues and areas of concern.
- o Identify common psychosocial issues in adolescents, such as stress related to academic performance, peer relationships, or family dynamics.
- o Communicate sensitive topics with adolescents in a confidential and nonjudgmental manner, including substance abuse, sexual health, and risk-taking behaviors.

LO23. Determine appropriate counseling for adolescents and families on health promotion according to recommended guidelines (e.g., AAP, Bright Futures and GAP) (MKb, CRPSb).
- o Demonstrate knowledge of health promotion guidelines for adolescents as outlined by organizations such as the AAP, Bright Futures, and GAP, including topics like nutrition, physical activity, mental health, substance abuse prevention, and sexual health.
- o Provide counseling to adolescents and their families on topics such as healthy eating, exercise, sleep hygiene, and preventing risky behaviors (e.g., substance use, unsafe sexual practices),

ensuring that advice aligns with current clinical guidelines and the adolescent's specific age and stage of development.

- o Discuss mental health promotion strategies with adolescents and families, including promoting emotional well-being, stress management, healthy coping mechanisms, and recognizing signs of mental health concerns (e.g., depression, anxiety), in accordance with recommended guidelines.

Acute Care Learning Outcomes (B3.03a)

LO24. Demonstrate appropriate technique for foreign body removal (CTSb).

- o Recall the indications and contraindications for foreign body removal in pediatric patients, including common types of foreign bodies (e.g., nasal, ear, ocular, oropharyngeal) and factors that guide the decision to remove versus observe.
- o Demonstrate the appropriate use of instruments and techniques for safe and effective removal of foreign bodies in pediatric patients, such as using forceps, suction, or irrigation, while ensuring the comfort and safety of the child.
- o Assess the potential risks and complications associated with foreign body removal, such as trauma to surrounding tissue, infection, or incomplete removal, and describe strategies for minimizing these risks.
- o Utilize age-appropriate approaches for managing pediatric patients during the procedure, including use of sedation or distraction techniques for younger children.
- o Communicate the post-removal care and follow-up needs, including monitoring for complications (e.g., infection or retained foreign body) and instructions on aftercare and when to seek further medical attention if needed.

LO25. Perform pharyngeal swab collection using proper technique (CTSb).

- o Demonstrate the proper technique for performing a pharyngeal swab collection, including the correct positioning of the patient, use of appropriate swab materials, and ensuring thorough contact with the tonsils or pharyngeal wall to obtain an adequate sample.
- o Utilize proper infection control protocols during the swab collection process, including proper hand hygiene, use of gloves, and safe disposal of materials.
- o Recognize potential complications during pharyngeal swab collection, such as gagging, bleeding, or injury to the mucosal surface.

LO26. Apply knowledge of pharmacology to appropriately calculate weight-based dosing of pediatric medications for acute conditions (MKb, CRPSb).

- o Demonstrate the ability to accurately calculate weight-based medication dosages for pediatric patients, utilizing the child's weight (in kg) and the appropriate dosing guidelines for common medications used in acute pediatric conditions (e.g., antibiotics, analgesics, antiemetics).
- o Assess for potential drug interactions, contraindications, and allergies when selecting and calculating appropriate medication dosages
- o Demonstrate the ability to verify and double-check medication doses to minimize errors.
- o Provide clear instructions to parents or caregivers on how to administer the prescribed medication.

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Students not following this rule will be subject to disciplinary action, which may result in but is not limited to an honor code violation and mandatory withdrawal from the course.

Disclaimer

Every attempt has been made to provide a complete, detailed syllabus that accurately provides both the overview and expectations of this course. However, unforeseen circumstances and events may make it necessary for the Course Director/faculty to modify the syllabus during the semester. Changes to this document will be assessed in light of the course purpose, program mission, and overall benefit to the student. Changes will be made public promptly and through various methods including but not limited to in-class announcements, emails, LMS announcements, and changes to the Program Calendar. It is the responsibility of the student to ensure compliance.

Students are encouraged to self-disclose disabilities that the Office of Educational Accessibility has verified by providing Accommodation Letters to their instructors early in the semester in order to start receiving accommodations. Accommodations will not be made until the Accommodation Letters are provided to instructors each semester.

Please consult the EVMS School of Health Professions Student Handbook and other applicable policies and handbooks, and the program-specific handbook for descriptions of additional policies to be applied uniformly across classes within this program. Old Dominion University academic and university policies may apply. Consult Library Services, and Offices of Financial Aid, or Student Affairs, for additional support.