Pocket Passport Increases Skills Logging for 3rd Year Physician Assistant Students

Authors: Tanya L. Fernandez, MS, PA-C, Tai M. Lockspeiser, MD, MHPE

Background: Patient logging is a mainstay in medical education, as it helps ensure students receive adequate exposure to select patients, procedures and presentations. However, the variability of student experiences[1] and underreporting of encounters[2] has required clerkships to trial various methods of logging. Clinical passports show promise as a means to increase students' skills acquisition and logging efforts.[3]

Objectives: Documenting experiences and skills is important for physician assistant (PA) program accreditation and for students' employment and credentialing needs, so the Child Health Associate/Physician Assistant (CHA/PA) Program sought to investigate whether a pocket-sized clinical passport would alter logging patterns.

Methods: After a literature review and NCCPA Blueprint analysis, the top skills for an entry-level PA were identified.[4,5] The early passport was piloted with 5 self-selected students in AY17-18 and expanded to 22 randomly-assigned students in AY18-19. Students in the passport arm were given a pre-printed booklet and instructed to log patient encounters and skills as they normally would in the online system. Aggregate AY18-19 logging data was reviewed in June 2019, comparing logging patterns of students in the passport arm with those in the control group.

Outcomes: The passport group logged 36,164 encounters and 33,298 clinical skills, with an average of 0.9 skills per encounter. The control group logged 31,437 encounters and 19,141 skills, averaging only 0.6 skills per encounter. The differences seen in logging was statistically significant ($p=0.05$) with 9 of the 60 skills measured having a statistically significant difference in logging pattern. Surgical skills, pediatric counseling and X-ray interpretation were among significant skills.

Discussion: Consistent with clerkship clinical passport studies, PA students using a clinical skills passport logged more skills throughout the year than those without a physical prompt.[6] It is possible that data collected continues to underrepresent a student's real clinical experience, but this data shows that a clinical passport can improve logging input from students.

Logging data is crucial on a professional, programmatic and student level, so creating methods to improve the logging habits of students will serve to enhance programs' abilities to evaluate clinical experiences and learners' abilities to build robust portfolios for post-graduation employment searches.

References:

1. Remmen RA, Derese A, Scherpbier A, et al. Can medical schools rely on clerkships to train students in basic clinical skills? *Med Educ*. 1999;33(8):600-605.
2. Gerald DD, DeMott C, Pangaro, LN, Hemmer PA. LITERATURE REVIEWS: Narrative Review: Use of Student-Generated Logbooks in Undergraduate Medical Education. *Teaching and Learning in Medicine*, 2006;18(2):153-164, DOI:10.1207/s15328015tlm1802_11.
3. Read TE. Clinical Skills Passport: A Method to Increase Participation in Clinical Skills by Medical Students During a Surgery Clerkship. *J of Surgical Educ*. 2017;74(6):975-979.
4. Mabee J, Tramel J, Lie D. Current Status of Procedural Skills Training in Physician Assistant Programs in the United States. *J of Phys Asst Educ*. 2014;25(4):4-11.
5. Asprey D. Clinical Skills Utilized by Physician Assistants in Rural Primary Care Settings. *J of Phys Asst Educ*. 2006;17(2):45-47.
6. Coates WC, Gendy MS, Gill AM. Emergency medicine subinternship: Can we provide a standard clinical experience? *Academic Emergency Medicine* 2003;10:1138–41.