## Pocket Passport Increases Skills Logging for 3<sup>rd</sup> Year Physician Assistant Students

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- Patient logging is a main stay in medical education, as it helps ensure students receive adequate exposures to select patients, procedures and presentations.
- Students' patient and skill logs are also a means of documenting equivalency for student experiences, maintaining some form of quality control for inherently variable clinical experiences.
- Patient logging often serves as an initial data point for entry-level PAs when undergoing the credentialing and privileging process.
- Students are known to underreport clinical encounters.<sup>2</sup>
- Clinical passports show promise as a means to increase students' skills acquisition and logging efforts.<sup>3</sup>



The study aims included:

- Investigate whether a pocket-sized clinical passport that listed the key clinical presentations and skills necessary for a graduate PA would alter online logging patterns
- Determine whether there were specific trends in logging habits by specialty



Clinical presentations and skills to be included in the passport were determined via a literature review<sup>4,5</sup> and analysis of NCCPA Blueprint

Clinical presentations and skills were grouped by specialty areas and a pocket-sized passport was designed for piloting with 5 self-selected students in AY17-18

Data, feedback and focus groups informed modifications to the passport

In AY18-19, 22 of 44 PA students were randomly assigned to the passport group. All students were instructed to log all patient encounters, skills and chief complaints in the online logging system. Students in the passport arm were given a pre-printed, pocket-sized booklet and were asked to have preceptors sign off on skills when competency was achieved.

Aggregate AY18-19 logging data was reviewed in June 2019, comparing logging patterns of those students in the passport arm to those in the control group.



• The number of encounters logged by the passport group was significantly more than the control group using the Student's t-test (p=0.03).

• The average passport student logged 1,643 encounters during the 3rd Year (range 1,229-2,134), while the control group averaged 1,429 encounters during the 3rd Year (range 820-2,029)



• Skills logged by students in the passport group were also statistically higher than the control group (p=0.05). • Nine of the 60 skills were found to be statistically increased in the passport group, with surgical skills (p=0.01), pediatric communication skills (p=0.003) and diagnostic interpretation (p=0.04) topping the list.



• Even for those skills that were not found to be statistically significant, the passport group routinely outperformed the control group as demonstrated in the graphics below.





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- Consistent with clerkship clinical passport studies, PA students using a pocket-sized, hand-held clinical passport logged more encounters and skills throughout the year than those without a physical prompt.<sup>6</sup>
- The varied ranges within each group suggest that the logging data recorded is likely still not completely accurate, but the use of a passport clearly is a way to improve the input of data, even if it is still not perfect.
- We have expanded on this work with students in AY 19-20, using an electronic passport, looking to see if there is a difference in logging between those using an electronic or a paper passport. Preliminary data has not yet been analyzed.
- Focus groups with students in both arms may provide insight into the influence the passport has on logging as well as how logging influences a student's awareness of their own gaps and ultimate generation of learning goals.
- Investigating the usefulness of external reminders and their efficacy compared to a pocket passport are also under consideration.



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