



Appendix I

FNP Site & Preceptor Guidance

FNP592 Focus:

Types of Patients: Across the lifespan in the primary care setting

Types of Services: Assessment and management of primary care.

Ideal Preceptor Choices: Primary care MD, DO, FNP, AGNP. Family practice MD, DO, FNP, AGNP. Internal medicine MD, DO, FNP. Pediatric primary care MD, DO, FNP or CPNP. **The preceptor's practice cannot have a specialty.**

Ideal Site Choices: Family practice, internal medicine (non specialty) practice, or primary care clinic. Primary care pediatrics. Additional sites that may be acceptable include health departments and retail clinics (e.g., CVS) that provide primary care. Home care that provides primary care across the life span. Sometimes acceptable: urgent care facilities **that provide primary care.**

Inappropriate Sites: Acute care facilities (hospitals, surgery centers, EDs, emergent or urgent care clinics), specialty clinics, long-term care facilities, university health services, hospice care centers, pain management centers, and cancer centers.

Notes: If the preceptor lists Internal Medicine on CV/Resume, and also has training listed in a specialty (fellowship, second residency, etc.) and the clinic's website also lists a specialty, it is not likely a primary care practice appropriate for a first rotation. A letter from the provider confirming currently practicing in primary care may be required.

Family/Primary Care:

Types of Patients: Care of patients across the life span.

Types of Services: Assessment and management of acute and chronic health conditions of patients across the life span.

Ideal Preceptor Choices: Primary care MD, DO, FNP. Family practice MD, DO, FNP. Internal medicine MD, DO, FNP. The preceptor's practice cannot have a specialty.

Ideal Site Choices: Family practice, internal medicine practice, primary care clinic. Additional sites that may be acceptable include health departments and urgent care facilities that provide primary care. Home care that provides primary care across the life span.

Inappropriate Sites: Acute care facilities (e.g., hospitals, surgery centers, EDs, emergent care clinics), specialty clinics, long-term care facilities, university health services, hospice care centers, pain management centers, and cancer centers

Pediatrics:

Types of Patients: Patients must be children or adolescents from newborn to 17 years of age.

Types of Services: Assessment and management of primary care of children and adolescents. Must see patients in a pediatrics practice and must see both well and sick infants/children/adolescents.

Ideal Preceptor Choices: Pediatrician MD or DO. FNP or PNP, in pediatrician's office.

Ideal Site Choices: Pediatrician office, family practice, primary care clinic, or health department clinic.

Inappropriate Sites: Acute care facilities (e.g., hospitals, surgery centers, EDs, emergent or urgent care clinics), specialty clinics, long-term care facilities, university health services, hospice care centers, pain management centers, and cancer centers.

Hours: Generally the student should schedule at least 80 to get around 85 cases, but additional hours may be completed as long as it is in primary care peds and all other required specialty hours are completed by the end of the



program. However, if the site is specialty-Peds (like Hem-onc peds, rheumatology peds, etc) this site would count as an optional specialty (up to 40 hours) and not toward your primary care peds requirement.

Notes: It is very important to check the age at which age the clinic or preceptor begins to see patients. Some family practice providers will only see ages 4 or 5 y.o. and up, and students are required to write SOAP notes on infants and young children during their program, and they need to gain experience at the younger ages. So if the site claims they are family practice but the site only sees 4 and up, the student should seek out another site for peds and should not count on doing their entire FNP program at the one site. Additionally, Peds urgent care should not be a student's only Peds rotation. Urgent care rarely administers vaccines other than flu vaccine, and rarely do the primary care or full wellness visits that are an essential part of the training. Urgent care centers also do not often accept infants (< 12 mo old). ER should also not be considered for the Peds rotation.

Women's Health / OBGYN:

Types of Patients: Focused on the care of women. Focuses on the primary care services to women of all ages.

Types of Services: Provide obstetrical* and gynecological care. Focuses on women's healthcare, family planning, and reproductive services.

*obstetrics is optional

Ideal Preceptor Choices: OB and/or GYN MD, DO, FNP, WHNP.

Ideal Site Choices: OB and or GYN practice, family practice, internal medicine practice, primary care clinic, or health department clinic that contains a minimum of 50% women's care, including prenatal and postnatal care, GYN, pap smears, birth control, menopause, and STDs.

Inappropriate Sites: Infertility clinics.

Note: Students are not to be involved in births or surgeries.

Geriatrics:

Types of Patients: Age 65 and older with primary care issues.

Types of Services: Assessment and management of primary care, recommendation of appropriate immunizations for elders, medication management with focus on unique needs of the geriatric patient, assessment and facilitation of functional abilities in consideration of chronic and aging limitations.

Ideal Preceptor Choices: AGPCNP, ANP, FNP, GNP, MD, or DO working in Primary Care, Family practice or Internal Medicine.

Ideal Site Choices:

- Family practice with high number of gero patients, Internal medicine if patients meet the age requirements, long-term care, home health primary care if patients meet the age requirements

Specialty Gero Sites:

Hospice, Alzheimers, SNF or other specialty geriatric sites will only be approved for 40 hours, but the students may count them as geriatric (in the vast majority of cases), but the student should not plan on a full rotation or the full 100 hours at these sites.

Inappropriate Sites: Surgery centers, EDs, emergent care clinics, and dialysis clinics.

Optional Specialty Rotations: (up to a total of 40 hours across specialties unless specified otherwise)

Appropriate:

- Emergency (Up to 60 hours)
 - (Idea: Clinical hours may be completed in the emergency room setting however should be in a "fast track" environment and the emergency severity index while doing clinical training as an FNP cannot be more than a 4



or 5 with an index of 1 being the most urgent.
(<https://www.ahrq.gov/professionals/systems/hospital/esi/index.html>)

- Urgent care (will be acceptable beyond the 40 hours requirement, however, all core/required specialty hours and journal entries must be met)
- Psychiatric / Mental Health
- Pain Management
- Diabetes
- Cancer Center
- Nephrology
- Rheumatology
- Endocrinology
- Neurology
- Cardiology (non-interventional cardiology)
- Pulmonology
- Neurology

- GI clinics – no procedures

Inappropriate:

- Acute Care Setting (never approve inpatient, hospital settings)
- Trauma Units
- Inpatient rehab and substance abuse centers
- Surgery Center
- Chiropractors, acupuncture, and naturopathic sites or preceptors
- MediSpa / Cosmetic / Aesthetic Clinics
- Infertility Clinics
- Dialysis Clinics / Kidney Centers
- Neurosurgery
- Sleep medicine
- Covid-19 testing centers
 - Several places are creating pop-ups utilizing NPs for Covid-19 screening and counseling and it's not a very good educational experience

Note: If the optional specialty is not listed here, it must be sent to PD/OFE Director for review and determination of approval.

Telehealth/Telemedicine/Teleprecepting Notes:

- Students may do up to 135 hours in telemedicine
 - They can split it up and do any combination of hours among the four clinical courses
 - There is no minimum, but we recommend at least 16 hours
- Telemedicine may be done in any of the areas listed (i.e. Peds, WH, family practice, etc.)
- Students need to have live video, or store-and-forward type telemedicine sites, not simple phone calls to patients
- Students should have access to the EMR system
- If students are participating in tele-precepting, the student should be able to see the same screen as the preceptor for the experience to be acceptable; students should not be listening only by phone