

**FCM 640/650 Preceptorship Rotations  
Collection of Frequently Asked Questions**

**2022-2023 REVISED FAQ**

**THIS DOCUMENT IS PROVIDED AS INFORMATION TO YOU  
AND A PLACE TO CHECK ON QUESTIONS YOU MIGHT HAVE.  
THIS IS A LIVING DOCUMENT AND IS CHANGED AND  
REVISED REGULARLY BASED ON COMMENTS AND  
QUESTIONS RECEIVED BY STUDENTS**

**DO NOT HESITATE TO CONTACT THE PRECEPTORSHIP  
COORDINATORS AT [COM.fcm.preceptorship@msu.edu](mailto:COM.fcm.preceptorship@msu.edu) AT ANY  
TIME WITH QUESTIONS**

**1. Who do I contact if I have questions or run into any issues during my preceptorship?**

Your first point of contact should be the program coordinator, Rebecca Reagan (fcm.preceptorship@msu.edu). She will either be able to assist you or refer your matter to a program director. Because Ms. Reagan is in and out of the office for meetings, etc., it is generally best to email.

**2. Why are students not allowed to select their own preceptors or preceptors not allowed to request students?**

This is not allowed to maintain fairness to all students and integrity of both the student and the preceptor. When students and preceptors know each other, whether it be as family members, friends of the family, neighbors, student's own physician, etc., it is considered a conflict of interest. Inappropriate grading, more lenient or harsher critiquing, and favoritism are some issues that may arise. In unique and rare circumstances, we may ask for assistance in securing preceptors or providing names of physicians you feel would be good additions.

**3. When can I complete my preceptorship?**

Rotations are completed during specific weeks in August, December, January, and March for the 2022-23 academic year.

**4. Do I have to attend the orientation session?**

Yes, orientation is a mandatory requirement for the course.

**5. Do I have to participate in the debriefing sessions?**

Yes. This is mandatory and is done completely in D2L

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### 6. How do we turn in our assignments?

It depends on the assignment. Specific directions on how to turn in each assignment will be available in D2L. Please make sure to submit individual assignments as directed as they will not be accepted in any other format than what is listed in D2L. For instance, if something indicates that it must be submitted in a drop box, we will not accept it via fax, email, hard copy, in the wrong drop box, etc.

### 7. When I complete the evaluation of my preceptor, will he/she be notified of the results?

Upon request, preceptors may be provided with a cumulative summary of evaluation rankings and comments over a period of years. Preceptors cannot choose the date range of the evaluation summary. We make every attempt to ensure that preceptors cannot link any information back to a student. Data is compiled into one document spanning several years so that there is no way to pinpoint a specific student. Specific comments provided by students are not included in the cumulative summary. At no point will we ever provide a preceptor with the name of an individual that completed an evaluation or allow them to see individual evaluations completed by students.

### 8. When do we receive our grades?

Grades are posted at the end of each semester regardless of when a rotations ends. Because debriefings often occur in the next semester, it is common for students to see temporary ET grades on their transcripts. This is also true for the grading of the Acute Visit Office Note. The notes are batched and sent to faculty for grading at the end of the block period so this will take time.

### 9. Are extenuating circumstances considered when making preceptor assignments?

Yes, extenuating circumstances are considered to the best of our ability.

### 10. What constitutes as an extenuating circumstance?

Medical care, childcare, family care, employment would be taken into consideration. Transportation issues, housing and campus locations are NOT extenuating circumstances.

### 11. Can I work with my preceptor on different days than I am scheduled?

Yes, but only if you receive prior permission from a program coordinator.

### 12. What if I get sick or my preceptor cancels one of my sessions for some reason?

If you become ill, you must contact your preceptor's office immediately. In both instances (you become ill or your preceptor cancels) you are responsible for making up missed time. Make sure to email the program coordinator ([fc.preceptorship@msu.edu](mailto:fc.preceptorship@msu.edu)) to let them know of the schedule change.

### 13. What if I am having trouble with D2L?

Email a program coordinator ([fc.preceptorship@msu.edu](mailto:fc.preceptorship@msu.edu)) and indicate the issue you are having. They can usually help you with troubleshooting.

### 14. Can we review student evaluations of preceptors from previous years?

Yes, contact a program coordinator and they can provide you with the information.

### 15. How do I find out which preceptor I have been assigned to?

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Preceptor assignments will be posted in D2L shortly following orientation and will also be emailed to you.

### 16. Are there preceptors available outside of Michigan?

We are working to make this possible. If you have been given permission to complete your on-line COM courses while remaining at home (potentially out of state), and you know of a particular physician who might be willing to accept you for this rotation, please notify the preceptorship coordinator who will reach out to the office and discuss the possibility. If we determine it would be acceptable, they will need to apply for clinical faculty status before being allowed to accept students.

### 17. Why does the College not have more control over what and how preceptors teach students?

The reason for this is that our preceptors volunteer their time and do not receive monetary compensation. We cannot tell them how to run their practices, what hours to have their offices open, require a specific method in their teaching, etc. We provide them with the goals and objectives for the course, but it is up to each individual preceptor as to how they will ensure the goals are met.

### 18. Why will my preceptor not allow me to go into rooms to be present during patient examinations?

When working in a physician's office, the student must remember that the patient has the option of whether or not he/she wants a student doctor present during his/her examination. The preceptor cannot force a patient to allow a student to observe. This is not something over which the College has any control.

### 19. Why is there a deadline for requesting student assignment trades and why is it so far in advance?

A deadline is needed so that we can get to a finalized point in the assignment process. Once rotations have been finalized, students have a *somewhat* concrete assignment they can count on and the office has to send out letters to the preceptors that contain information about the course, program, dates, and the specifics on the student(s) that will be working with the preceptor.\* If we did not have a deadline, there would be major confusion on the part of the student, preceptor and office staff. Another reason the deadline is so far in advance is because it keeps students from "session hopping" (changing the time period of his/her preceptorship from one semester to another), which causes major issues with course registration, student immunization verification, etc. Finally, many of the physician's offices are now affiliated with hospitals and are required to abide by hospital rules with regard to student teaching. This usually means that a student background check, fingerprinting, any facility required training, (all of which will be done by the agency even if they are things the College has completed for its own records), etc., must be completed before the student begins his/her preceptorship. Depending on the agency, this can happen in one day or take up to a month to complete.

\*Please note that sometimes things happen that are out of our control which require us to move students to different locations and/or time periods. Examples (based on past occurrences) include such things as a preceptor being deployed, physician death or illness, physician moving, practice being bought out by another entity that employs different student training requirements, etc.

### 20. What does the physician receive from the College with regard to student requirements?

The physician is sent a letter explaining the assignments the student is responsible for, a brief bio on the student and the course syllabus.

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### 21. What are the students responsible for prior to their preceptorships?

The student must contact the preceptor **at least one month prior** (preferably even earlier) to the scheduled rotation as a courtesy to the preceptor, and to ensure any required documentation/training is completed. During this call, the student should determine office hours and the address of the office, what time to arrive, if there are any dates that the preceptor will not be available and when to make that time up, what to wear, what to bring, how long of a lunch to expect, what time the office closes, if there are any restrictions (no perfume, etc.), and so on. You should also make sure you and your preceptor set a schedule of times you will work that equate to 40 hours. It is up to you if you work more than that.

In addition, even though students are required to physically attend orientation in July, they are also required to review the PowerPoint version of the orientation at least one week prior to the beginning of each rotation.

### 22. Why do I need to request to meet with the preceptor before I begin my rotation?

This is a time that is dedicated solely to establishing the expectations of both you and your preceptor. You will want to make sure to complete the Expectancy Agreement, go over course objectives, determine if there are any objectives that you may not be able to accomplish during your experience due to patient population, and get to know each other in regard to academic and personal backgrounds. It is extremely important that you exude confidence and an eager willingness to learn during this meeting as it will set the entire tone of your experience. The more a preceptor feels that you are willing to learn and ready to take on challenges, the more likely it is that you will be allowed to do a greater amount of hands-on tasks. If you do not appear to be confident in yourself, your preceptor is likely to treat your rotation more like a shadowing experience. As stated before, we cannot force a preceptor to teach in a specific manner. You are going to be dealing with his/her patients, so he/she needs to feel comfortable letting you work with them.

### 23. What if I do not agree with my preceptor's beliefs (political/cultural/religious, etc.)?

It is important to remember that as a physician, you will run into a diverse population of people, and you will likely not get along or agree with all of them. However, in most cases, you need to learn to deal with them. Use this as a learning experience...this is how you do not want to be with your patients, staff, etc. It is never a good idea to get into a political debate with a preceptor! As far as differing cultural or religious beliefs, each person is entitled to his or her own opinion. However, if you feel threatened, that is completely different. In that case, you should contact a preceptorship program coordinator immediately (517-353-4732).

([fcm.preceptorship@msu.edu](mailto:fcm.preceptorship@msu.edu)).

### 24. How many hours should I expect to be in the office?

You should plan on being in your preceptor's office for 36-40 hours. Although you are scheduled to work with your preceptor for five days, it is possible that you may finish in four or less days if your preceptor's office has longer hours on certain days, open on Saturdays, etc. As long as you get your hours in, that is the important part. However, you are limited to a specific time period within a beginning and end date. If something comes up that makes it necessary for you to deviate from that time frame, you must email a program coordinator ([fcm.preceptorship@msu.edu](mailto:fcm.preceptorship@msu.edu)) with the reason and date(s) you will be utilizing outside of the time period.

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### **25. Why would anyone want to complete their preceptorship in a rural community?**

Rural practices see a wide variety of cases often surpassing urban ones. In fact, since there are usually fewer specialists around, rural physicians tend to end up diagnosing and treating rather than referring. In addition, you typically do not have to compete with other learners for diagnostic and treatment opportunities.

### **26. Why does it take so long after we put our requests in to receive our placements?**

The process of placing students in their preceptorship assignments is lengthy. The main reason is that we attempt to meet as many of the student requests as possible. Once we have the student requests for locations/dates, we then work on finding preceptors within those requested parameters. Preceptors select when they are available and we use a computer program that tries to match preceptors to students. Most of the preceptors need to be contacted several times before they return their availability sheets. We cannot control how the physician's office handles the doctor's mail, if the form gets put in a stack of other "to do" items, if the form never makes it to the physician as someone in the office may screen their mail, if the physician's office has moved and we were not notified, etc. These are all reasons we have heard from doctors as to why it takes so long to get a response from them and why multiple attempts, on our part, need to be made. The only real option to increase the turn-around time is to not allow students to put in requests, and just simply do a lottery where the student must go whenever and wherever they are assigned, whether it be a mile or 100 miles away from them.

### **27. If I am assigned to a specific preceptor, shouldn't I work with only that preceptor during my rotation?**

Not necessarily. If there is more than one physician in the office, you may be asked to rotate with one other than your assigned preceptor on some days. That is completely fine. Other instances in which you may find yourself working with another physician could be that the preceptor has taken on a different role in the office, he/she changed working hours, etc. Sometimes things just come up. In those cases, it is common that the student will work with the assigned preceptor and another physician, resident, and on occasion a PA in the office. The student will never work solely with a PA and the time spent with the PA will be minimal (no more than 8 hours). Some preceptors see a few patients, but are primarily in charge of residents. In those cases, the preceptor many times will have the student work with a resident.

### **28. I completed the student request form but did not receive my 1<sup>st</sup> choice for time period. Why?**

Preceptors are not always available during the times that students would like. As such, sometimes it becomes necessary to bump the student into his/her other choices, in ascending order. Because we put focus on trying to place students as close as possible to their requested locations, sometimes it means only being able to place them during specific sessions, which may or may not coincide with a student's first choice. Also the match is done by a randomized optimization process based on student availability and location availability.

### **29. I completed the student request form, but was not assigned in a location I requested. Why?**

We make every attempt to place students within the locations requested. If there are more students requesting a specific area than there are preceptors available, not all student requests will be able to be met. As is stressed several times during orientation, and any documentation that is sent to the student regarding preceptorship assignments, location and time requests are not guaranteed. In some cases, students are

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placed in outlying areas somewhat near their requested locations. On rare occasions, it becomes necessary to place students further out, as far as 100 miles away from the requested location.

### **30. What do I do if there is a slow period in the physician's office?**

Learning how to deal with patients as a physician in a practice is only one part of what you should be learning. The overall workings of an office are another aspect. If there are slower times, talk to the staff about how the office is run, issues that are typical for a family practice office, how billing works, etc. You can also use this time to research issues the physician provides you with. Ask him/her to provide you with topics that are important to him/her, what rare cases he/she may see, etc., and see what you can find out on your own about the subject. Talk to the preceptor, ask questions, and share what you learned. Finally, this would be a good time to ask questions about things that you saw, heard, etc., but were not clear on.

### **31. What types of physicians are used as preceptors for family medicine?**

Preceptors in family medicine are typically those in a family practice or a general practice. However, we do have some that hold dual specialties that include family medicine. Some of the dually held specialties include geriatrics, internal medicine, sports medicine, urgent care, pediatrics and psychiatry. These types of preceptors act as a primary care physician to some patients, while they work with other patients based on their specialties. For instance, many of the family physicians that are in an urgent care setting also have their family practice patients see them there. In this case, the student sees not only the family medicine office side, but also issues brought into the urgent care unit.

### **32. What if there is a 3<sup>rd</sup> year student or resident in the physician's office at the same time I am there?**

On occasion a student will work in an office that has another student at the same time. Many times those students are from other universities. When there is a 3<sup>rd</sup> year student or a resident, in most cases he/she may be a great resource for the preceptorship student. Although they are not officially physicians, their knowledge base is at a more advanced level than the preceptee. If the physician decides to have you work strictly with a resident that is fine. However, the 3<sup>rd</sup> year student should not be appointed as your sole instructor.

### **33. It did not seem like my preceptor or staff members were expecting me there. Why? What should I do?**

The preceptors are initially contacted requesting their availability via US postal mail and, in some cases, also via fax or email. Following that, they are sent the letter with course information, student bios, and a copy of their availability form. Unfortunately, we do not have control as to whether they actually read the letters, if the staff circumvented the letters, they were put into a pile to be dealt with later, etc. If your preceptor indicates that he/she was not aware that you were coming, please direct them to call the preceptorship office and to speak with a program coordinator.

### **34. If I'm an out of state student and wish to do my preceptorship at home or if I am in-state may I secure my own preceptor?**

Please discuss possible options with the preceptorship coordinator.

### **35. My rotation seemed completely different than my friend who worked with a different preceptor. Why?**

Several reasons may be the issue:

- Different patient population
- Slow or busy week for one doctor versus another

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- Each preceptor has his/her own way of teaching and/or practicing
- One student did not exude confidence while the other did
- Preceptors are people just like students - they all have good/bad days

### 36. What does the initial attitude that I exude to the preceptor as a student have to do with how my rotation?

It can set the tone for your whole experience. This is a first impression...you need to make it a positive one. If you promote confidence in yourself, your preceptor will most likely feel more comfortable giving you more to do and possibly more challenging tasks. It may be the difference between whether you get to see patients on your own, whether you are allowed to perform procedures, or whether you end up just mostly shadowing. The quality of your experience is not only the preceptor's responsibility, but yours as well.

### 37. How do administrators know if I have completed a task within D2L, or how long it took me to complete it?

Daily reports are run that tell when students logon, what students did while in D2L and when they logged off.

### 38. My preceptor had an emergency and will not be in on one of my assigned days. What should I do?

You need to end up with 40 hours in your preceptor's office. If for some reason your preceptor has to cancel and you will be short on hours, you will need to make that time up. It is a requirement that the student email a program coordinator ([fcms.preceptorship@msu.edu](mailto:fcms.preceptorship@msu.edu)) to let the office know when the make-up time will occur.

### 39. Where do I find information related to the assignments I should complete during my preceptorship?

All course materials, including those from the orientation, can be found within the D2L course site. If you have trouble accessing the site, please contact a program coordinator ([fcms.preceptorship@msu.edu](mailto:fcms.preceptorship@msu.edu)).

### 40. Where do I find the course syllabus and due dates?

In the D2L course site Table of Contents in module "Begin here! Syllabus and General Course Information."

### 41. What if my preceptorship rotation runs longer than it was supposed to?

You will need to make sure to email a program coordinator ([fcms.preceptorship@msu.edu](mailto:fcms.preceptorship@msu.edu)) so that your due dates may be adjusted, if necessary.

### 42. What are my options for changing my preceptor assignment?

Students will be provided three business days following the assignment announcement in which they can trade with one another. Trades must be mutually agreed upon and both students will need to email a program coordinator ([fcms.preceptorship@msu.edu](mailto:fcms.preceptorship@msu.edu)) ***from their respective MSU email accounts*** indicating the trade is requested. Trades are not official until students receive approval notification from a program coordinator.

### 43. Why do I need to keep at least one week open for preceptorship each semester after I receive my assignments?

Sometimes things occur that require us to move a student to a different time period for one of his/her rotations. If a preceptor is no longer in practice, becomes ill, etc., and there is not another preceptor available during the originally assigned week, the student must be moved to another week, which could be during a different semester.

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### **44. What if my preceptor's office requires me to fill out forms or asks for immunization verification, etc.?**

Students need to complete requirements set forth by the individual preceptor offices. You are a guest rotating in their facility and must abide by their policies and procedures. Most information requested for verification (immunizations, HIPAA compliancy, blood borne pathogen training, background check, fingerprinting, etc.) can be obtained by the student by accessing their individual records via the MSU UPhys website. If a student needs more detailed information than what is provided on the website, or has any difficulty finding information on the website, they should contact COM Registrar (517-353-7741).