

## Adult Clinical Rotation

Performed: Fall 2013-180 hours of onsite clinical experience completed

Preceptor: Ayesha Ahmar MD and Carol Crews ARNP

Facility: Central Florida Family Practice located in Lake Mary Florida

I was at Central Florida Family Practice for 120 hours with Dr. Ayesha Ahmar and Carol Crews ARNP. I was also fortunate to provide care at Shepard's Hope for 32 hours with Dr. Angela Ritten. One of the goals I set were concerning bettering myself at differentials, which I believe has improved. I also was needing improvement with organization in my history taking and formulating a plan in a quicker fashion. I believe my history became much smoother and faster in flow coupled with my assessment. Formulating a plan became easier after my Shepards hope experience. I had hoped to become better at dermatological assessment and the ordering of labs. I did improve, however not to the point of where I want to be. Goals for next semester would be to gain knowledge and comfort in the ordering of specific labs, improvement of physical assessment of cardiac sounds and frugal ordering of specific tests. I hope to gain knowledge of visualized chronic long term conditions and the labs and testing associated with such.

1. Apply evidence-based guidelines in the provision of primary care to adults with common and acute health care problems and their families. Yes, there were several times I had to look up guidelines such as HTN and dyslipidemia.

2. Implement advanced practice nursing strategies to achieve desired health outcomes for adults with common and acute health care problems and their families. Yes, there were several times I

had to use national guidelines, follow four dollar drug lists that would work for the patient as well as provide education to the patient including their family member.

3.Perform comprehensive and targeted patient histories and physical examinations of a minimum of 2 adults per half clinical day. Yes, with several less comprehensive patients in between.

4.Differentiate between normal and abnormal history and physical examination findings.

5.Develop individualized treatment plans for the primary care of the adult client with common and acute health care problems according to their health risks, lifestyle, and socio-cultural characteristics. Yes, especially at Shepard's Hope I was given the opportunity to develop many treatment plans with the addition of them being financially sound for the patient.

6.Present a concise, organized summary of the adult client's health assessment findings, significant family data, diagnostic conclusions and plan of care to preceptor. Yes on the majority of my patients, I gave a concise and organized handoff of my pertinent findings.

7.Use Evidence-based guidelines to select and evaluate diagnostic tests. Yes, many times.

8.Modify assessments, diagnosis(es) and plans of care for the adult client with common and acute health care problems after consultation with the preceptor and other expert resources. Yes, I always want to do more, but have to scale it down after speaking with my preceptor.

9.Incorporate health promotion and health maintenance in primary health care practices. Yes, especially with diet and exercise, when and how to take medications.

10.Implement plan of care in collaboration with the client, family (as appropriate), and preceptor. Yes, many times especially if the client were older and needed the wife or husband in the educational circle for management of care.

11.Incorporate patient education and counseling, written prescriptions, referrals, and diagnostic testing requisitions in patient management plans. Every time I send a patient out of the office I

give specific instructions on fasting vs. non-fasting. When to get labs done and diet education for most all patients.

12. Demonstrate effective interdisciplinary approaches to the delivery of family-oriented primary health care in community settings. Yes, the PCP office being located in an upper-scale area, gave access to many different individual from many different walks of life.

13. Accurately document the provision of primary health care for adults. Yes, in two different formats, electronic and paper.

14. Perform advanced practice psychomotor skills under the supervision of a preceptor. Yes, whenever there was a headache or dizziness especially.

15. Seek additional learning opportunities that facilitate development of advanced practice clinical competency. Yes, at Shepard's Hope I reviewed labs and found several that were abnormal and then had to form a plan on an unseen individual, call them and have them come in for further evaluation.