

STUDENT GUIDE TO OUTPATIENT CARE



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Introduction

Welcome to Merced Medical Clinic, Merced County's Oldest Continuing Health Care practice! This handbook is intended as a general introduction for students and volunteers of various educational backgrounds, interests and personal experiences to outpatient clinical care and as a guide outlining the standards of behavior and practice expected while participating in clinic and patient care activities.

Since 1926, Merced Medical Clinic's core philosophy has been "patient-centered care." What this means to us is that from first contact with a patient to follow up visits and everything in between, the priority is addressing the immediate needs of the patient on a day to day basis and long-term goals over the duration of the patient's ongoing relationship with the clinic.

This day to day and long-term "ongoing relationship" is what distinguishes outpatient care from other health care settings, particularly acute care hospitals or skilled nursing homes where patient's needs are addressed only during the duration of their stay at these facilities. After patients are discharged from these other health care facilities, it is in an outpatient setting that they follow up for their ongoing treatment and establish continuity of care. Understanding this distinction between short-term inpatient settings and long-term outpatient settings is critical to being able to transition from a hospital to clinic setting during your training and knowing if outpatient care is a right fit for you and your interests.

The purpose of this handbook is to give a brief introduction to some of the differences that distinguish outpatient clinics from other health care settings. While this handbook is not exhaustive, it is intended to introduce students and volunteer trainees to important concepts that may be new to those who have trained or worked primarily in hospitals. In addition, it is important to become familiar with the clinic's policies and expectations ahead of your rotation. We hope that this information will help you prepare for your time at Merced Medical Clinic and also for your future training and experiences in health care.

The Transitioning Face of Medicine

We at Merced Medical Clinic recognize that times have changed dramatically over the past nearly 100 years. Not only has technology transformed treatment options and diagnostic tools available to providers, but it has also helped them to manage the significant increase in the administrative responsibilities of physicians. Technology has also made it possible for physicians to access medical records and reports from almost anywhere and even patient visits can be conducted over long distances on the internet.

These improvements in access, information and capabilities have also made it possible for physicians to supervise a larger number of nurse practitioners and physician assistants, increasing not only the number of supervised NPs and PAs stepping into the role of direct patient care as providers but the patient population size a single physician can provide services to. As a result of these developments, the health care profession is becoming more accessible both to non-physician providers and to patients.

From Nurse to Nurse Practitioner

For students who are entering into the health care profession as providers, building trust with patients takes both time and patience, even for those who have had years of experience in related fields like nursing. It is particularly important for those who have worked as nurses, nurse assistants or medical assistants to understand that there are significant differences between being a nurse and an independent nurse practitioner even if you have been working in health care for years or decades. The key difference is the responsibility to diagnose and treat patients. Even under the supervision of an MD or DO, the role of a nurse practitioner is a big shift from carrying out orders and plans to exercising independent decision-making over a patient's care. As one's personal responsibility for patients increases, so does the importance of the provider-patient relationship which becomes even more apparent and impactful on the outcomes.

As nurse practitioners enjoy greater autonomy with the power to prescribe, it is very important for them to establish strong provider-patient relationships. No longer are your interactions with patients fleeting, but they are recorded for posterity in the patient's medical history. This new role as a provider is even more important in the outpatient setting where patients and providers have continuity of care and often establish relationships that last throughout their lifetime which is typical of many patients at Merced Medical Clinic. The earlier these distinctions between nursing and practicing medicine are appreciated, the more prepared nurse practitioner students will be for their new roles in outpatient care and the greater independence they will be given by their supervising physicians. It is also important for students to understand early that while trust in your qualifications can initiate a relationship with a patient, what ensures it will endure are good outcomes.

With all of these changes to the face of medicine it is even more important that future providers, regardless of their educational backgrounds, understand what creates an effective provider-patient relationship. No matter how many changes we at Merced Medical Clinic have witnessed over nearly a century of service to Merced County, what sustains the provider-patient relationship has never changed and nor has its importance diminished to us and the community we serve. Regardless of what pathway to becoming a provider one has taken, a successful relationship between patients and providers is always based on two things: *trust and outcomes*.

Trust, Outcomes and Reputation

The trust between patients and providers is why patients make appointments and why providers keep them. Although a relationship of trust must be mutual between providers and their patients, the factors that contribute to each having trust in the other are, as expected, very different:

- Patients trust in a provider's expertise, knowledge and experience to provide quality health care services that promote health and protect patients from harm.

- Providers trust that a patient is honest and compliant with following instructions and does not have ulterior motives for seeking health care services.

As nurses advance in their training and education to become providers, the new credentials go a long ways to build trust and ensure patients that they are in qualified hands. It doesn't take much, however, for that trust to break down. Medical errors, adverse treatment, long waiting times, delayed treatments, poor communication and even hesitation can cause damage to the relationship that it is unlikely to recover from. This should be expected as with greater decision-making power comes greater responsibility for the outcomes. One way to understand the relationship between trust and outcomes is: trust will get your foot in the door, outcomes decide whether you will enter.

Outcomes test whether the treatment you have prescribed or the diagnosis you have made is correct or at least the best next step. Outcomes are the result of treatments and procedures provided to patients that impact their health. Outcomes are what determine whether a patient will become an established patient spanning their lifetime or one who will be lost to follow up. Outcomes are the building blocks of reputations for providers and no other means to attract patients from advertising or advanced credentials can make up for poor outcomes. Without good outcomes, it doesn't matter whether one is an MD, DO, PA or NP, the provider and their practice will not be successful.

It is therefore important for students to appreciate the reputation that Merced Medical Clinic has earned since 1926 and why we have compiled this handbook to ensure that students who would like to rotate at the clinic understand the quality, values and expected standards we uphold and enforce and why. Additionally, we hope that you utilize this opportunity to gain from the experience that Merced Medical Clinic has to offer aspiring providers. This includes the knowledge and wisdom of our physician providers and nurse practitioners as well as the experiences of our long established patients.

The majority of patients at Merced Medical Clinic have been with the clinic for decades including many families where several generations have received care by our providers throughout the years. As the oldest continuing health care clinic in Merced County, we take great pride in our reputation in the community. Not only do we hope to impart the values and best practices that we uphold to students rotating at the clinic, but in return we expect professionalism and adherence to our clinic policies as we introduce new faces to them that should reflect the quality of patient-centered care we are known for providing to the community.

Our Values

Merced Medical Clinic is embedded in traditions and values that have been passed down through each generation of clinicians and that define the quality of care and overall approach towards patient care. Three of our most important values include:

Empathy

Empathy is by far the most important value an individual involved in caring for others must have. Not only is it important to be able to understand the perspective of others, it is important to learn the skills that help one learn how others feel. Qualities of an empathic clinician include:

- Being a good listener without interruption
- Creating a safe space that encourages sharing
- Refraining from expressing judgmental conclusions or opinions
- Recognizing and addressing one's own biases

Integrity

Integrity is an essential quality in medicine. The trust patients have in their providers has everything to do with their belief that the provider is honest. Honesty is also of essential importance to communications with others whether in person, over the phone, through electronic communications and documentation in the medical records. The care of patients is a coordinated effort and without integrity, the communication links between the multiple actors

involved in the care of the patient as well as patient relationships break down, often irretrievably. Integrity is also tied to reputation, and instances of dishonesty only serve to isolate providers from the medical community.

Respect

Respect for others is of paramount importance in health care. In health care settings, patients are vulnerable and exposed. Whether its personal details of their lives, lifestyles and struggles or the examination of their bodies and bodily systems, intrusion into normally personal and private spaces is part and parcel of providing care to patients. It is therefore extremely important that patients are treated with respect not only during direct interactions with them, but when discussing patients with others. Rule of thumb: *treat everyone how you would like someone you care about to be treated!*

While there are many important values and ethical standards that all health care providers must abide by, at Merced Medical Clinic we hold empathy, integrity and respect to be absolutely not negotiable and something students should have already gained experience in developing prior to advancing further in their education and training as future health care providers including at Merced Medical Clinic.

Remember, it is always ok to make mistakes, especially if you are still a student. Every provider was once a student, and this understanding is an example of empathy. However, it is never ok to not be honest about it. Being honest with your supervisors and seniors is the most substantial way of demonstrating respect for and trust in them. Additionally, patient perception of a clinician is directly tied to these three values. Studies have shown that providers who are perceived as dishonest, disrespectful or lacking in empathy are more likely to face malpractice accusations even if they have not made any medical errors whereas those who patients view as honest, respectful and empathic often are not sued even when they have made liable mistakes.

Policies and Professionalism

Dress Code

Students are expected to dress professionally any time they see patients and should adhere to the dress code below. It is highly recommended that students and volunteers involved in clinical activities wear scrubs as this is much more comfortable, is easily identified by patients and prevents contamination of every day personal clothes. However, if you are a nurse practitioner or physician assistant student, donning a white coat over a business casual attire is also acceptable.

As you will be involved in close physical interaction with other people, it is important that all students and volunteers exercise good hygiene habits. The wearing of a mask at this time optional. However, the use of highly scented deodorants, perfumes or colognes is discouraged as this can be an irritant to some patients.

Upon beginning your rotation at Merced Medical Clinic, you will be provided with an ID tag that will identify you to the patients as a member of the clinic team. You must wear your name tag at all times in an easily viewable location.

The dress code in the outpatient setting generally requires the following:

- Your scrubs or white coat should always be clean and pressed at all times.
- Wear your name tag in an easily viewable location
- Avoid cologne, perfumes or strong scents
- Tattoos are recommended to be covered
- Jewelry should be minimal
- Long hair should be tied back and kept out of the way
- Avoid clothing with rips, tears, or frayed edges or clothes that do not fit (ie oversized)
- Clothing should allow for an appropriate range of movement and comfort
- Avoid low-cut necklines or exposed midriffs. It is recommended to wear a tight fitting long-sleeve shirt under your scrubs.

- Dress shoes with a low or flat heel are recommended with a white coat or alternatively, clogs or white sneakers with scrubs.
- Short, clean and unpainted fingernails

If there are any specific questions or concerns about our dress code for the clinic that are not addressed here, please bring these to the attention of the clinic manager.

Alcohol, Drugs and Tobacco

The use of alcohol, illicit drugs, marijuana and tobacco products, including vaping devices, is STRICTLY PROHIBITED at Merced Medical Clinic. Any suspicion of intoxication or use of these substances on clinic days or on the clinic grounds will result in immediate dismissal from the clinic and termination of the rotation.

Core Competencies

In addition to the specific requirements that allied health students are expected to meet established by their respective schools, the following is a list of competencies and objective goals for students and pre-health volunteers to aspire to while at Merced Medical Clinic:

1. Patient Care

Provide patient-centered care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health

2. Knowledge for Practice

Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care

3. Interpersonal and Communication Skills

Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals

4. Professionalism

Demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles and respect for codes of conduct

5. Discovery

Demonstrate the intellectual curiosity necessary for scientific discovery and self-discovery through active participation in research

6. Social Determinants of Health

Demonstrate acumen for how social determinants of health like education, socioeconomic status and mental health impact delivery and access of care within the greater healthcare systems for diverse patient populations

7. Practice-Based Learning and Improvement

Demonstrate the ability to investigate and evaluate one's care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and life-long learning

8. Systems-Based Practice

Demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care

9. Interprofessional Collaboration

Demonstrate the ability to engage in an inter-professional team in a manner that optimizes safe, effective patient and population-centered care

10. Personal and Professional Development

Demonstrate the qualities required to sustain lifelong personal and professional growth

Recommended Resources

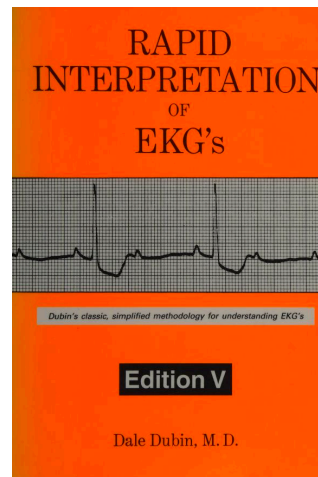
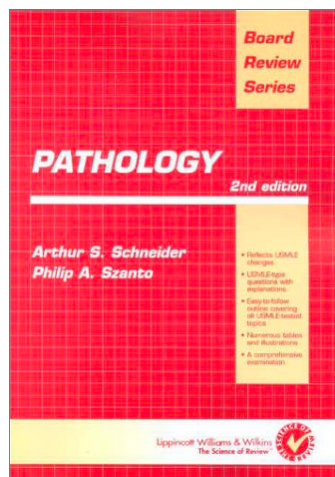
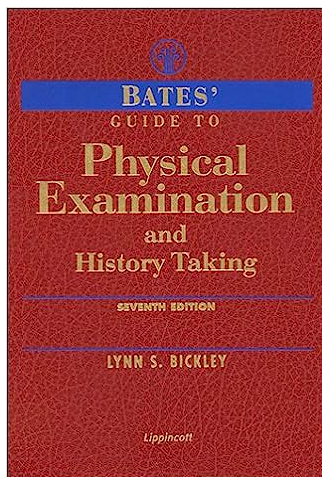
While there are many resources covering all aspects of health care today, it is highly recommended that every allied health student and pre-health student who is aspiring to becoming a provider either as an F/NP, PA or MD/DO, have the following resources while at the clinic and during other clinical experiences:

- Szantos' & Schneider's Board Review Series for Pathology
- Bates' Guide to Physical Examination and History Taking
- Dale Dubin's Rapid Interpretation of EKGs.

Copies of these books are available in our student room at the clinic for use during your rotation. Additionally, the MedScape App for mobile devices is extremely useful and used by all of our providers on a regularly basis particularly for looking up prescription drug information.



While there are many books that are useful and even needed by providers-in-training, we at Merced Medical Clinic feel that there is not enough emphasis on the need for nurse practitioner students to transition from nursing skills to diagnostic and treatment skills. For this reason, we highly recommend that students planning on becoming independent practitioners acquire their own personal copies of these three books prior to beginning their rotations if possible as they will be useful throughout your continuing education and careers.



Fundamentals of Outpatient Care

The biggest distinction between outpatient care and other health care facilities like hospitals where most students gain their experience and training, is that in the outpatient clinic the patient comes to the provider. This is why outpatient clinics are also known as ambulatory care. In a

hospital or nursing home, patients are not ambulating but are laying in bed assigned to a room.

There is no need for an appointment to be made, medication prescriptions to be sent to pharmacies or lab-work and imaging sent to other locations. Nearly all the diagnostic and treatment needs of a provider is readily available at the hospital itself, including 24 hours nursing and technologist support for the patient. Once the patient is discharged, outpatient care begins with much less control over when and how a patient is cared for or their environment and resources.

Gathering Information

In the outpatient setting, all the information that a provider needs to administer health care services needs to be gathered; including the patient. From making sure the patient can travel to the clinic to accessing third party sources of results and records, a great deal of outpatient clinic activity revolves around gathering information. No uncommonly, patients are bed-ridden and in these events providers make arrangements with home health services to visit the patients at home and gather the information needed for their case. As a student, gathering information will be one of your primary roles, whether looking up lab reports or recording vital signs and chief complaints. It is therefore important to understand what information needs to be gathered, how to access it, how to interview patients and practicing the skills of documenting information that you have gathered in a way that is clear, concise, thorough, accurate and easily understood by providers.

In an outpatient setting, most of the imaging and lab-work is completed by third parties.

Procedural and operative reports are also external to the clinic and need to be located.

Thus, preparation for an upcoming patient interaction during a scheduled clinic appointment begins before the patient arrives. The more thoroughly information is gathered on a patient, the more likely it is that one will arrive at the correct diagnosis and treatment plan. The importance of gathering information cannot be emphasized enough and is a skilled labor that will comprise most of a providers and their staff's time. A missed or delayed diagnosis is most often attributable to not reviewing lab-work or imaging studies timely or being unaware of a patient's

relevant past medical history. The following are the general stages involved in gathering information for a patient being seen at the clinic.

STAGE I: Pre-appointment Preparation

1. Reviewing the most recent progress notes or if the patient is a new referral, their referral notes.
2. Searching for recent lab-work, imaging studies or pathology.
3. Locating recent hospital records or discharge reports.

After the patient has arrived for their appointment, new information must be gathered from them directly.

Stage II: Patient Provided Information

1. Chief Complaint or Reason for Appointment
2. Vital Signs
3. Review of Systems
4. Medication Reconciliation
5. If the patient is new to the clinic, past medical and family medical history should be documented.

STAGE III: Physical Examination

1. Pertinent negatives
2. Pertinent positives
3. Changes from last visits

STAGE IV: Tests at Clinic

1. Urinalysis
2. Blood glucose
3. EKG

At this point, the gathering of information during a patient encounter concludes and the next steps are the assessment and orders. Often times, the orders represent a fifth stage of gathering information when further testing or imaging is needed or information requested from other sources to determine the cause of the patient's medical concerns.

STAGE V: Further Orders for Information

1. Lab-work
2. Imaging studies
3. Referrals for consultation with specialists
4. Medical Record requests

Coordination & Communication

While patient appointments are the primary focus of outpatient care, coordination of care with other providers and institutions is a major part of non-patient clinic activities.

Coordination of care revolves around communication. These provider communications in the outpatient setting take six major forms on a daily basis:

1. Consultation Notes send to providers who referred patients to the clinic
2. Referral notes sent to providers to whom the patient is being referred
3. Overseeing patient care activities outside of the clinic including home health services, physical and occupational therapy and skilled nursing home care.
4. Documentation and prior authorizations for insurance companies and third party payers.
5. Prescriptions and communications with pharmacies and durable medical equipment providers
6. Responding to medical records requests or sending them out

Safety and Health

As is expected, encounters with patients also involves exposure to disease and infections.

Protecting one's health as a student or volunteer is as important as making sure that patients

are not exposed to infections and diseases that can be prevented. It is also important that you do not take contaminated objects home with you where others can be exposed.

The very first rule to follow prior to and after interacting with a patient is HAND HYGIENE.

There is no single more effective means of preventing contamination and spread of contagious and/or infectious disease than ensuring that one's hands are cleaned either with soap and water or an alcohol-based hand sanitizer. Both options are available at stations throughout Merced Medical Clinic.

Secondly, whenever handling sharps, needles, syringes, used blood glucose strips, urine samples, culture swabs or any other materials that have been used to collect bodily specimens, WEAR GLOVES. Gloves of all sizes are also available at stations throughout the clinic. If you do not know how to properly remove used or soiled gloves, please ask the clinic manager who will give you a demonstration.

Thirdly, do not take unnecessary risks. If a patient is coughing up blood, they could have active tuberculosis. Understand what symptoms to look for and what contact precautions are needed to keep yourself and others safe. If you don't know, JUST ASK! When it comes to safety and health, there are no wrong questions, just not asking them!

Contact Precautions

In the event that a patient comes to the clinic who may have an infectious or contagious active disease, it is important to take steps to protect yourself and other patients and staff. If the concern is airborne or respiratory droplets, first don a face mask on yourself and then the patient. Even though it is uncommon in an ambulatory setting for a patient who is able to come to the clinic to be so sick as to pose a danger to others, on occasion there are patients who opt for a clinic visit even when they should go to nearest emergency department. In the event that this happens, review the following recommendations to protect the safety and health of yourself and others:

- In ambulatory settings, place patients requiring contact precautions in an exam room or cubicle as soon as possible.
- Use personal protective equipment (PPE) appropriately, including gloves and gown. Wear a gown and gloves for all interactions that may involve contact with the patient or the patient's environment. Donning PPE upon room entry and properly discarding before exiting the patient room is done to contain pathogens.
- Limit transport and movement of patients outside of the room to medically-necessary purposes. When transport or movement is necessary, remove and dispose of contaminated PPE and perform hand hygiene prior to transporting patients on Contact Precautions. Don clean PPE to handle the patient at the transport location.
- Use disposable or dedicated patient-care equipment (e.g., blood pressure cuffs). If common use of equipment for multiple patients is unavoidable, clean and disinfect such equipment before use on another patient.
- Prioritize cleaning and disinfection of the rooms of patients on contact precautions ensuring rooms are frequently cleaned and disinfected (e.g., at least daily or prior to use by another patient if outpatient setting) focusing on frequently-touched surfaces and equipment in the immediate vicinity of the patient.

At Merced Medical Clinic, our examining tables have disposable paper rolls that are changed between patient visits. There are also pre-packaged, single-use alcohol swabs available at the nurses stations and in every patient exam room for wiping down stethoscopes, pulse oximeters, temperature reader, otoscopes and ophthalmoscopes as well as any other reusable patient care equipment.

Finally, when it comes safety and health: USE COMMON SENSE. Always assume that any bodily substance whether sputum, rash exudate, urine, feces or blood is infectious and all used equipment and devices are contaminated; handle them as such. When you take steps to protect yourself, you are also protecting the patient and others.

Additional Considerations

Food Allergies and Preferences

Occasionally we will order food or have food brought in to the clinic from the outside to be shared, it is never required that anyone must participate in any of these social activities. If you would like to, please make sure that the clinic manager is aware of any food allergies or other restrictions that you may have. We are always happy to accommodate for them!

Personal Items

We do not recommend bringing personal items that you cannot keep on your person to your clinic rotation. If you do, Merced Medical Clinic has several rooms that are inaccessible to patients and non-staff. While rotating at the clinic, you can store your personal items in these rooms, but keep in mind these rooms are not always locked during clinic hours. There is also a refrigerator and microwave available for any food items or snacks that you might bring with you. Please remember that while at the clinic you will be busy and walking around most of the time, so limit your personal items to those you must have as you will not be able to keep them with you when engaging in patient care activities. While we will do our best to ensure that your personal items are safe, it is ultimately your own responsibility and a risk that you take to leave any personal items anywhere unattended including in rooms accessible only to staff.

Conclusion

While this handbook is not exhaustive, it offers a brief outline of aspects in outpatient clinical settings that are distinct from those found in the hospital or acute care facilities. In addition, Merced Medical Clinic's three core values are expected to be adhered to at all times during experiential training. Finally, while allied health students, pre-health students and volunteers all have varying levels of education and experience that they bring with them, the expected core competencies can be applied appropriately to everyone based on their level of training and experience.

We hope that you will enjoy your time with us at Merced Medical Clinic and we look forward to working with you as you continue your educational and training journeys in outpatient health care!