

PRECEPTOR ACCEPTANCE GUIDELINES

Program staff will make the final decision as to the preceptor's qualifications based on the following guidelines:

1. The preceptor must be willing to serve as such.
2. The primary preceptor should be a general or family practitioner with a patient load which includes all age ranges. There are some internists whose practice is actually general medicine, and these may be suitable (in combination with a pediatrician).
3. The patient load should be neither be so great as to leave no time for teaching nor so small as to provide too few patients for you. (We would like students to see 10 or more patients per day by their last quarter.)
4. The setting may be in any type of out-patient facility.
5. Some in-patient care experience as part of the primary preceptorship is desirable. (However, all students will, in addition, complete a 3 week inpatient rotation).
6. The preceptorship must be in California.
7. Co-preceptors are allowable as long as one serves as overall coordinator and responsible preceptor.
8. Preceptor should not view the preceptee as a productive worker, but as a student.
9. Willingness to hire student after graduation is nice, but not necessary.
10. Need for additional preceptorships to gain experiences with categories of patients lacking in primary preceptorship (i.e., pediatrics, obstetrics) to be determined by program staff.
11. The program communicates with the preceptor to verify that the student has malpractice and on-the-job-injury insurance coverage.
12. The preceptorship occupies approximately 12 months **but his length of time is not required of one preceptor.**
13. If a prospective preceptor has any questions which you can't answer, refer him/her or the questions to program staff.