

**Yo San University DAOM- Healthy Aging/Longevity
Preceptor Application Form**

GENERAL INFORMATION		Application Date:
Candidate Name (print or type):		Cohort #:
Education Start Date:	Expected Graduation Date:	
Preceptorship Information		
Name of Preceptorship Supervisor:		<input type="checkbox"/> Copy of CV on file at YSU office
Supervisor of Preceptorship Contact Phone Number(s):		Fax:
Supervisor of Preceptorship Contact E-Mail(s):		
Preceptorship Site Name:		
Preceptorship Site Address:		
Preceptorship Site Orientation Date:		
Preceptorship Start Date:	End Date:	# of Hours:
Preceptorship Core Competencies & Objectives		
(Check the areas that apply to your goals/objectives of participating within this preceptorship)		
<input type="checkbox"/> Advanced leadership (Teaching students within the Masters Degree program & colleagues) <input type="checkbox"/> Consultation and collaboration – (Actively participating in an integrative healthcare team) <input type="checkbox"/> Advanced patient teaching skills and practice management – (Improved practice safety) <input type="checkbox"/> Demonstrate skills needed for leadership and teaching in Acupuncture and Oriental Medicine.		
#	AREA	PRECEPTORSHIP: Overview · Goals · Objectives · Tasks · Deliverables
1.	Provide a brief overview of the intended Preceptorship	(brief summary):
2.	Establish your overall goal(s) of participation in this Preceptorship	<input type="checkbox"/> To acquire advanced knowledge in the area of _____ <input type="checkbox"/> To acquire advanced clinical skills in _____ <input type="checkbox"/> To develop my teaching skills in _____ <input type="checkbox"/> To increase my skills in integrative healthcare consultation and collaboration. <input type="checkbox"/> To acquire additional skills at conducting research in healthcare. <input type="checkbox"/> To acquire at program development in the areas of _____ <input type="checkbox"/> (other): _____
3.	Measurable objectives you want to accomplish	<input type="checkbox"/> The candidate will successfully fulfill clinic hours as planned and keep accurate records of all clinical hours and experience on the DAOM clinical logs for the preceptorship. <input type="checkbox"/> The candidate will enhance their ability to educate and inform peers in a conference or CEU setting through written/visual and oral communication. <input type="checkbox"/> The TCM candidate will improve their ability to communicate, within an integral team, the principles of TCM and acupuncture treatments using both written and oral communication. <input type="checkbox"/> The candidate will increase their knowledge of Western Medical terminology and diagnostics. <input type="checkbox"/> The candidate will become proficient at teaching master-level students through classes or tutorials. <input type="checkbox"/> The candidate will become proficient at patient education on TCM and acupuncture treatments recommended and performed on individual patients.
4.		<input checked="" type="checkbox"/> Complete clinic logs daily , and turn them in monthly when classes are in session

**Yo San University DAOM- Healthy Aging/Longevity
Preceptor Application Form**

	Tasks you will be performing which will lead you to meeting your objectives	<ul style="list-style-type: none"> • Record total hours, dates and patient case types per log. <input type="checkbox"/> Articulate a TCM and acupuncture treatment plan coordinated with overall patient care plan. <input type="checkbox"/> Document using "SOAP" format per protocol and review documentation with clinical supervisor. <input type="checkbox"/> Use medical dictionary to review words, diagnoses, disease processes, etc. in order to understand patient care, diagnostic signs & symptoms and "red flags" that indicate patient safety issues. <input type="checkbox"/> Creating a class outline for lectures and tutorials. <input type="checkbox"/> Creating a visual presentation using multi-media tool. <input type="checkbox"/> Using on-line resources for reference materials for teaching/lecturing.
5.	Check the deliverables that you will have at the end of this Preceptorship that demonstrate accomplished goals	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Program development items created: Forms, guidelines, etc. <input type="checkbox"/> Case reviews (One per _____) <input type="checkbox"/> Research protocols developed, orientation guidelines for research, IRB items used <input type="checkbox"/> Presentations: Copy of sign-in sheets and evaluations for presentations you conducted <input checked="" type="checkbox"/> Teaching, patient education, presentation materials created (handouts, templates, etc.) <input checked="" type="checkbox"/> Supervisor evaluation of DAOM candidate _____ <input type="checkbox"/> Educational certificates that you completed as part of your participation at the preceptorship site. (e.g. research training on human subjects, CEU's, educational meetings attended)

Indicates mandatory items that you **MUST** complete.

Approval Signatures

I agree to complete the goals, objective and tasks that I have outlined in this application.

Candidate (Print/Type): _____ Cohort: _____

Candidate Signature: _____ Date: _____

I have reviewed and approved the candidate's application for this Preceptorship.

Doctoral Dean's Signature: _____ Date: _____

I have reviewed the Preceptorship application and I agree to mentor the above listed candidate in order to facilitate their learning in the areas listed in the application.

Preceptorship Supervisor (Print/Type): _____

Preceptorship Supervisor Signature: _____ Date: _____

Copy given to DAOM Program Manager for Candidates files: ____/____/____