



Medical and advanced practice clinician student preceptor guide

Orientation and resources for the Oregon Network

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Contents

Welcome	3
About the center	3
The role of a clinical preceptor	4
Before the learner arrives	4
Teaching essentials	5
During the rotation	6
Evaluation responsibilities	7
Preceptor compensation	7
OHSU preceptor benefits	9
Educational support and resources	10
Thank you	11

Welcome

Thank you for serving as a clinical preceptor for the PeaceHealth Center for Medical Education & Research (CMER) in Oregon. By opening your practice, sharing your expertise, and mentoring learners, you play a critical role in developing the future health care workforce. The clinical experiences you provide help learners build professional confidence, develop clinical judgment, and deliver safe, compassionate patient care.

This guide is for physicians and advanced practice clinicians who precept medical, physician assistant/associate, or nurse practitioner students in the PeaceHealth Oregon Network. It applies to PeaceHealth-employed preceptors and community clinicians whose student rotations are coordinated through CMER.

This guide does not apply to undergraduate nursing, pharmacy, behavioral health, allied health, or other learner placements.

This guide covers:

- Your role as a preceptor
- Learner and program requirements
- Practical teaching essentials
- Evaluation responsibilities
- Available educational support
- Compensation information
- Academic faculty appointment opportunities

About the center

Since 2008, the Center for Medical Education & Research has coordinated eligible student clinical education experiences at PeaceHealth Oregon locations across specialties. In this guide, eligible learners are medical and advanced practice clinician students whose placements are coordinated through CMER.

The Center also coordinates clinical observation placements as a separate service that is not governed by this guide. These observations are initiated by the PeaceHealth caregiver after approval from their department manager.

Clinical observation requests: [PeaceHealth clinical observation request](#)

CMER serves as the primary point of contact for:

- Learner placements
- Academic affiliations
- Onboarding and compliance requirements
- Learner concerns
- Faculty support
- Evaluation processes
- Preceptor compensation administration

Our goal is to make teaching as seamless and rewarding as possible while supporting an exceptional experience for learners and preceptors.

The role of a clinical preceptor

Clinical preceptors serve as educators, mentors, supervisors, and professional role models.

Preceptors help learners:

- Apply classroom knowledge in clinical settings
- Develop clinical reasoning skills
- Strengthen communication abilities
- Build professional confidence
- Understand health care team dynamics
- Deliver patient-centered care

You do not need to create a formal curriculum.

Each academic partner establishes the learning objectives and requirements for its educational experiences. The program clinical coordinator and the learner will communicate these expectations to you.

Before the learner arrives

A brief pre-arrival check prevents delays and keeps the first day focused on learning. Before clinical participation, confirm:

- Rotation dates, daily schedule, and primary preceptor
- Academic program objectives and required experiences
- CMER clearance, identification badge, and required system access
- Workspace, clinic flow, and team introductions
- Who the learner should contact about an absence or schedule change

Do not begin clinical activities without clearance.

If a badge, access, or CMER clearance is missing or cannot be confirmed, keep the learner in a nonclinical area and contact CMER's Manager, Jim Cole at 541-743-3365 immediately.

The first day

A well-run first day settles most questions that would otherwise surface throughout the rotation. Fifteen minutes can cover the essentials:

- Introduce the learner to staff and the care team
- Show the learner the workspace and where to store personal items
- Confirm days, hours, and absence-notification expectations
- Discuss goals, patient-presentation expectations, and how feedback will be provided
- Orient the learner to clinic flow and the patient population

Teaching essentials

Effective clinical teaching does not require extra hours of formal instruction. Many of the most valuable learning moments happen during routine patient care. Learners consistently identify meaningful feedback and mentorship as the most valuable parts of clinical training.

Successful preceptors:

- Set expectations early and understand the learner's clinical objectives and development needs
- Include learners in clinical decision-making
- Ask questions that encourage critical thinking
- Provide timely coaching
- Offer constructive feedback and specific, objective evaluation
- Promote increasing independence as appropriate

Five questions that build clinical reasoning

The fastest way to move a learner from reporting findings to interpreting them is to ask for the reasoning behind the conclusion. These questions work in nearly any encounter and take seconds to ask:

1. **“Why do you reason that?”** Surfaces the thinking behind a diagnostic claim so it can be examined.
2. **“Walk me through the illness script.”** Tests whether the epidemiology, temporal pattern, and syndrome fit.
3. **“Do we have the story?”** Asks whether the data form a coherent clinical narrative, not merely a complete data set.
4. **“What are you most uncertain about, and why?”** Invites the learner to identify where the reasoning is weakest.
5. **“What must we not miss?”** Pairs the most likely diagnosis with a high-consequence alternative to guard against premature closure.

On the busiest days

- Identify whether the current question is diagnosis or treatment, and keep the two separate in discussion.
- Ask one question per encounter that requires the learner to state reasoning, not only a conclusion.
- End the day with “What did we learn today?” Focus on what you both understand differently now.

Feedback that changes behavior

Specific, behavior-based feedback is more useful than a global impression. “In your assessment, lead with your top diagnosis and explain why” gives the learner something to do tomorrow. “Your presentation was disorganized” does not. Brief, in-the-moment feedback outside the patient room is usually more useful than a written comment weeks later.

Going deeper

A fuller CMER Preceptor Teaching Guide is in development. It will address clinical reasoning instruction, developmental frameworks, feedback, and support for a struggling learner.

During the rotation

Preceptors are expected to:

- Provide appropriate supervision
- Create educational opportunities
- Guide clinical learning experiences
- Model professionalism
- Ensure patient safety
- Communicate concerns promptly

When concerns arise

Contact us for routine questions and concerns involving attendance, professionalism, patient safety, performance deficiencies, approved learning accommodations, or interpersonal conflict: 458-205-6771 or jcole3@peacehealth.org.

When an immediate risk is present, follow the clinical site's emergency and safety procedures first.

Reach out early.

Most learner concerns can be addressed successfully when identified promptly. Early communication creates options; late communication eliminates them.

A simple weekly rhythm

- At the start of the week: review goals, schedule, and needed experiences.
- During the week: provide brief, specific coaching tied to observed behaviors.
- At the midpoint: discuss progress, strengths, and one or two priorities for improvement.
- Before the final day: gather input from participating clinicians and complete required verification.

Evaluation responsibilities

Timely evaluation is one of the most important responsibilities of a clinical preceptor.

Most programs require:

- Mid-rotation feedback, when applicable
- End-of-rotation evaluation
- Attendance verification
- Clinical hour verification

When multiple clinicians precept a learner, the designated primary preceptor is responsible for the final evaluation. Input from other participating clinicians is encouraged and may be incorporated into the final assessment.

Clinical hour verification

Certain programs, particularly nurse practitioner programs, require verification of completed clinical hours. You may be asked to verify total clinical hours, dates of participation, supervising clinicians, and attendance. Prompt completion supports accurate academic records and timely compensation processing.

Preceptor compensation

Many preceptors are eligible for compensation in recognition of their teaching contributions. Compensation varies by learner type, specialty, and program requirements.

MD, DO, and PA learner rotations

Standard compensation by rotation length:

Rotation length	Compensation
1 week	\$125
2 weeks	\$250
3 weeks	\$375
4 weeks	\$500

Specialty-specific payment arrangements may apply in some departments.

NP learner rotations

Compensation for nurse practitioner rotations is based on documented clinical teaching hours. Preceptors eligible for this stipend include:

- Physicians: MD, DO, and DPM
- Physician assistants/associates and surgical first assistants: PA and SFA
- Nurse practitioners: NP, FNP, and PMHNP

Item	Amount
Compensation rate	\$3.00 per clinical hour
Minimum stipend	\$100
Maximum stipend	\$750 per rotation

When a learner rotates with multiple preceptors, compensation is generally divided according to verified teaching hours. CMER verifies clinical hours before payment processing.

How compensation is processed

To support timely payment, preceptors should complete required evaluations, verify attendance and clinical hours when requested, and respond to CMER documentation requests.

Payments are processed quarterly:

- **January through March rotations:** payment issued in April
- **April through June rotations:** payment issued in July
- **July through September rotations:** payment issued in October
- **October through December rotations:** payment issued in January

Near the end of the quarter in which a rotation concludes, CMER emails each preceptor to request verification of completed hours. After verification, CMER initiates payment according to the schedule above.

If you practice in a rural community

Oregon offers a Rural Practitioner Tax Credit for eligible clinicians practicing in qualifying rural areas. This is a benefit of rural practice rather than precepting, but some PeaceHealth Oregon Network preceptors may qualify. Review eligibility with the Oregon Office of Rural Health.

Details: [Oregon Office of Rural Health tax credits](#)

OHSU preceptor benefits

If you teach an Oregon Health & Science University (OHSU) medical student, benefits may be available depending on the student's program, your profession, and your OHSU appointment status.

Affiliate faculty appointment

OHSU preceptors may be eligible to apply for an affiliate faculty appointment. Confirm the appropriate process with the learner's program or the OHSU Office of Learner Placement. Potential benefits include:

- Formal recognition of educational contributions
- Academic affiliation with OHSU
- Enhanced engagement with medical education programs
- Recognition of your role in learner development

Application: [OHSU volunteer faculty application](#)

Have a current curriculum vitae available for upload.

Continuing medical education credit for learning from teaching

Through OHSU Continuing Professional Development, eligible physician preceptors may claim up to 15 AMA PRA Category 1 Credits™ per academic year, July through June, for qualifying learning from teaching. OHSU awards up to two credits per hour of qualifying interaction. Credit is for identifiable learning completed in preparation for teaching and then applied with the student, not for supervision time alone.

Details and request form: [OHSU information for preceptors](#)

Questions: cme@ohsu.edu

Library and faculty development access

OHSU preceptors may receive access to OHSU Library resources, including AccessMedicine, teaching resources, continuing education, and faculty development opportunities. Access varies by professional license, learner program, and appointment status. Confirm eligibility with the OHSU Office of Learner Placement or the learner's program.

Educational support and resources

CMER can assist with:

- **Learner support:** academic concerns, remediation needs, professionalism concerns, and schedule adjustments
- **Preceptor support:** teaching resources, evaluation guidance, school-specific requirements, and documentation questions
- **Program support:** rotation objectives, affiliation requirements, placement coordination, and compliance processes

Our team is committed to supporting preceptors and learners throughout the educational experience.

Western University of Health Sciences resources

Western University of Health Sciences provides official resources for preceptors of its osteopathic medical students. Resources include guidance on supervision, assessment, feedback, clinical education requirements, faculty development, and continuing medical education.

Teaching resources: [WesternU clinical education preceptor resources](#)

Oregon campus contact: nwsite@westernu.edu

National teaching resources

TeachingPhysician.org, Society of Teachers of Family Medicine: Point-of-need instruction, teaching tips, videos, and evidence-based guidance for clinical teaching. [TeachingPhysician.org](#)

American Association of Nurse Practitioners NP Preceptor Knowledge Center: Core resources for nurse practitioner preceptors, including a quick guide and interactive orientation. [NP Preceptor Knowledge Center](#)

Thank you

Thank you for investing your time, expertise, and mentorship in the next generation of health care professionals.

Your commitment to teaching strengthens our educational programs, supports workforce development, and helps ensure exceptional care for the communities we serve.

Interested in precepting, or know someone who is?

If a colleague would make a strong preceptor, or if you would like to take on a new learner type, adjust how often you host learners, or pause for a season, contact CMER. We will match learners to your availability, never the other way around.

Learn more: [Become a CMER preceptor](#)

Contact us

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