**LTC rotation in NYPQ**

The Geriatric rotation in NYPQ was an amazing experience for me because it was taking place on an internal medicine floor, where I got to see various types of patients with multiple levels of severity of diseases. I really liked the stroke team because it was something I did not get exposed to in my internal medicine rotation and I got to experience through Neuro exam, stroke scale and stroke patient management. However, I wish I was placed inthe stroke team more often as there was only one student at a time placed in the stroke team.

 This was a great place to practice my procedures as I got to do a few procedures: covid swab, venipuncture, IV line, straight catheter, foley placement, bladder scan, wound care, EKG, and ABG/VBG. Also, I got to see a lumbar puncture procedure, which was really cool because I did not see that in the past. Seeing a PA performing the lumbar puncture procedure gave me the confidence that I can also do it in the future. I really love the fact that NYPQ internal medicine floor is very PA friendly and almost the whole pace is run by the PA, which is a great opportunity for the PA student to learn and get confidence.

Collecting information from the geretric population can be challenging most of the time it requires to collect information from multiple sources such as: family members, nursing home, pharmacy, PCP and EHR/EMR. I found collecting story from demented patient challenging because smetime the patinent present the information with so much details and dedication that the listener are forced to consider that as the truth. For example, a moderate dementia patient was describing his social life, which sounded very convincing to me as there were a lot of names with details. However, when the information was verified with family members most of the content was fictional. This was a learning moment for me because it is important to listen to patients but verification of information should be done through multiple resources especially for medications and procedures. I will continue to apply what I learned in this rotation in the future rotation and in the future workplace.

Presenting patient information in a coherent and logical order is still a challenge for me so it was a great place to continue to practice as I saw multiple patients and presented to the preceptor. However, I never wrote a discharge paper in the past and that was something I really struggled on in the beginning because it requires looking through multiple documents to summarize the patient course of hospitalization. All the staff were very helpful and the PA taught me ways I would find the information easily and effectively to create a good discharge paper. By the end of the rotation, I wrote multiple discharge papers and I became very effective at collecting, summarizing and organizing the information. I really appreciate that experience because as a future PA, I would have to compile the discharge paper.

My experience was broadened by all the staff members in the LTC rotation as most of the PA and Nurses were willing to teach and give me an opportunity to learn. Most of the nurses in the department were really amazing as they allowed me to practice procedures and learn by watching which I really appreciated. This rotation just reinforced the idea for me that it is essential to work as a team and create a trustworthy relationship between the nurse and PA in order to care for the patient. In order to create a comfortable working environment it is important to respect and communicate effectively with the nurse. I believe everyone around me appreciated my enthusiasm to learn, participate and become a provider for the patient.