

# Pfeiffer University



MASTER OF SCIENCE IN PHYSICIAN ASSISTANT STUDIES

## **STUDENT HANDBOOK**

Academic Year 2020-2021

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## Welcome

Welcome to the Pfeiffer University Master of Science in Physician Assistant Studies (MS-PAS) program!

On behalf of the Pfeiffer University MS-PAS program faculty and staff, I extend you a warm and heartfelt welcome. The program is committed to providing you with a supportive environment as you begin your journey to becoming a Physician Assistant. With this in mind, we have developed this student handbook to serve as a guide over your tenure with the program. Please read each section ***carefully and thoroughly***.

This handbook is available to you at: <http://www.pfeiffer.edu/mspas>

Best;

*Brenda Diaz MS, PA-C*

Brenda Diaz MS, PA-C  
Founding Program Director/Assistant Professor  
Master of Science in Physician Assistant Studies

### **About this student handbook (A3.01)**

This student handbook has been developed to provide information regarding the policies and procedures applicable to students currently enrolled in the Pfeiffer University Master of Science in Physician Assistant Studies (MS-PAS) program, and acquaint students with resources available to them.

The Pfeiffer University MS-PAS program policies align with the Pfeiffer University's institutional policies; and apply to all enrolled students, principal faculty, and the program director throughout all phases of the program regardless of location.

The Pfeiffer University MS-PAS program reserves the right to change the curriculum, any provision, policy, procedure, requirement, regulation or fee at any time, and at its own discretion subsequent to the publication of this handbook. Changes are applicable to all students of the program without regard to date of admission application or date of enrollment. Nonetheless, every effort will be made to keep students informed of any and all changes promptly and in writing. This student handbook is neither a contract nor an offer to enter into a contract.

### **Accreditation Statement (A3.14a)**

The ARC-PA has granted **Accreditation-Provisional** status to the **Pfeiffer University Physician Assistant Program** sponsored by **Pfeiffer University**.

Accreditation-Provisional is an accreditation status granted when the plans and resource allocation, if fully implemented as planned, of a proposed program that has not yet enrolled students appear to demonstrate the program's ability to meet the ARC-PA *Standards* or when a program holding Accreditation-Provisional status appears to demonstrate continued progress in complying with the *Standards* as it prepares for the graduation of the first class (cohort) of students.

Accreditation-Provisional does not ensure any subsequent accreditation status. It is limited to no more than five years from matriculation of the first cohort.

### **Accreditation Standards for Physician Assistant Education**

The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) has established Accreditation Standards to maintain and promote appropriate benchmarks of quality in the education process of Physician Assistants. These Accreditation Standards are used as guidelines in the development, evaluation, and self-analysis of Physician Assistant programs. The ARC-PA provides recognition for educational programs that are in compliance with standards of quality for Physician Assistant education.

The standards are posted online at:

<http://www.arc-pa.org/documents/Standards4theditionwithclarifyingchanges9.2014%20FNL.pdf>

The policies and procedures stated in this Student Handbook align and are in compliance with these standards.

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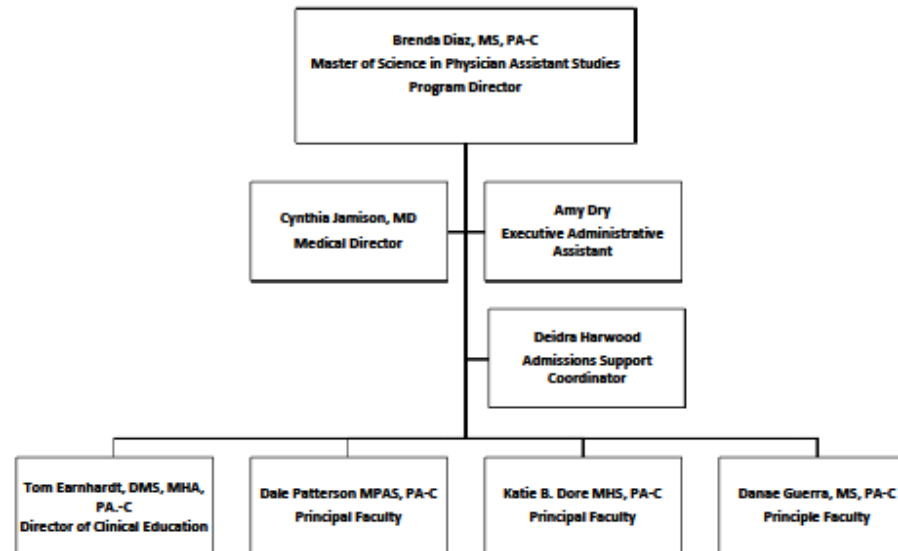
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MS-PAS Organizational Chart



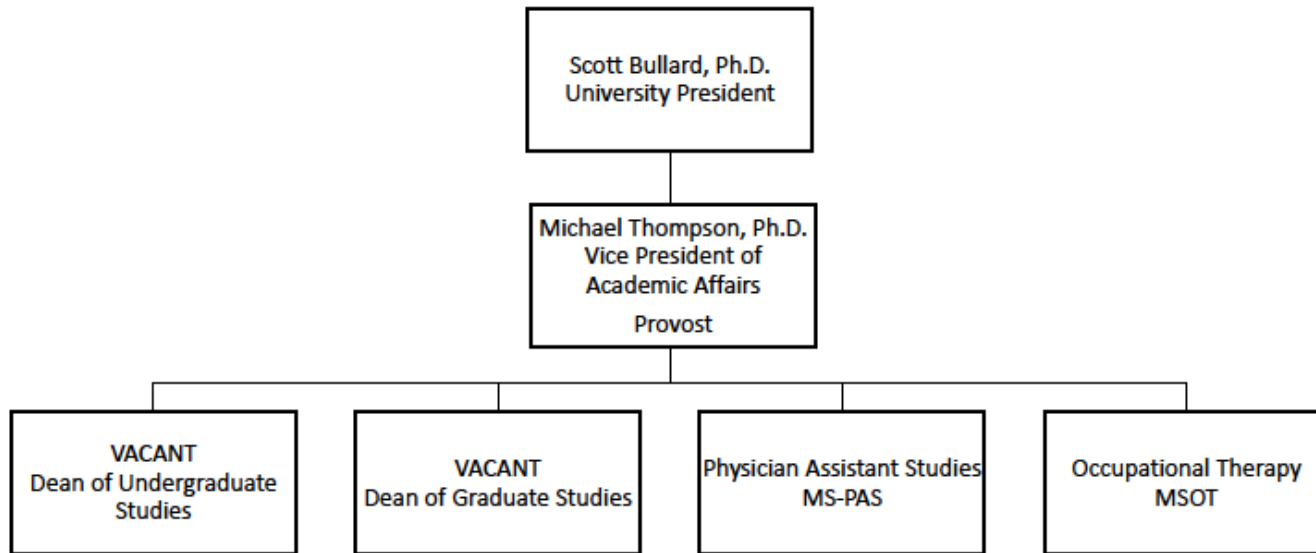
Physician Assistant Studies



Pfeiffer University Organization Chart



Physician Assistant Studies



## **Mission-Vision-Values**

### **Mission**

The mission of the Pfeiffer University Master of Science in Physician Assistant Studies is to educate servant leaders of diverse backgrounds as Physician Assistants who will provide exceptional healthcare in an inter-professional setting, serving rural medically underserved populations through community involvement, public health policy and advocacy.

### **Vision**

The vision of the Pfeiffer University Master of Science in Physician Assistant Studies is to be recognized for its commitment to excellence in Physician Assistant education, scholarly activity and servant leadership in the areas of health disparities and social equity.

### **Values**

In keeping with the Pfeiffer University Values the Master of Science in Physician Assistant Studies will abide by the following tenets:

- Educational excellence in a learner-centered community.
- Realization full potential
- Inclusion of diverse learners in a caring, accessible community - the Pfeiffer Family.
- Christian heritage and faith formation.
- Integrity and dignity

### **Program Goals (A3.14b)**

The goals of the Pfeiffer University Master of Science in Physician Assistant Studies with respective measurements of success are as follows:

- To recruit, retain and successfully graduate highly qualified candidates of diverse backgrounds.
  - Admissions Data
  - Graduation Data
- To deliver an intellectually challenging and creative curriculum through innovative teaching strategies that facilitates the successful achievement of established learning outcomes and expected competencies.
  - Annual Curriculum Analysis
- To adhere to the highest standards of student performance and achievement of the Competencies for the Physician Assistant Profession resulting in successful entrance into the profession with National Commission of Certification for Physician Assistants (NCCPA) Physician Assistant National Certification Examination (PANCE) first time pass rates at or above the national average.
  - NCCPA PANCE Pass Rate Data
- To provide opportunities for students to interact with patients of diverse cultural and economic backgrounds which prepares and inspires graduates to provide compassionate, culturally sensitive, patient-centered, evidence-based healthcare in medically underserved communities locally, nationally and globally.
  - Ongoing programmatic analysis
  - Graduate surveys
  - Employer surveys
- To foster a scholarly setting where students will appropriately conduct critical appraisal of research resulting in improved patient outcomes and effective communication of their findings through medical writing.
  - Graduate capstone project data
  - Graduate surveys
- To afford students opportunities to participate in state and national professional organizations as advocates for the Physician Assistant profession resulting in continued participation throughout their careers.
  - Graduate surveys

## Learning Outcomes & Expected Competencies

The Pfeiffer University of Master Science in Physician Assistant Studies is committed to providing students with a learner centered educational environment where they will receive the requisite knowledge to provide compassionate, culturally sensitive, patient-centered, evidence-based healthcare in an inter-professional healthcare team.

Student success in achieving the program learning outcomes and expectations will be evaluated through a variety of assessment tools such as: multiple choice examinations, inter-professional collaborative group projects, objective structured clinical examinations (OSCEs), reflection journals, clinical performance evaluations and a graduate research project.

The Pfeiffer University of Master Science in Physician Assistant Studies learning outcomes and expectations are based on the Competencies for the Physician Assistant Profession as developed jointly by the National Commission on Accreditation of Physician Assistant (NCCPA), the Accreditation Review Commission for Education of the Physician Assistant (ARC-PA), the Physician Assistant Education Association (PAEA), and the American Academy of Physician Assistant (AAPA)<sup>1</sup>.

Upon completion of the Pfeiffer University of Master Science in Physician Assistant Studies graduates will demonstrate entry-level proficiency as Physicians Assistants in the following domains:

### Medical Knowledge

The core competencies of Medical Knowledge seek to ensure that the Physician Assistant student continually investigates, questions, and pursues new knowledge.

Competency		Outcomes Domain
MK1	Demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care	KNWG
MK2	Demonstrate an investigative and analytic thinking approach to clinical situations	KNWG
MK3	Correlate, integrate and apply the following to common emergent and non-emergent medical, surgical, and behavioral scenarios across the lifespan: <ul style="list-style-type: none"><li>• History and physical findings and diagnostic studies to formulate differential diagnoses</li><li>• Management of general medical and surgical conditions to include pharmacologic and non-pharmacologic treatment modalities</li><li>• Interventions for surveillance geared to prevention of disease and health promotion/maintenance</li></ul>	KNWG CRPS

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<sup>1</sup> <https://www.nccpa.net/Uploads/docs/PACompetencies.pdf>

### Interpersonal and Communication Skills

The Interpersonal and Communication Skills core competencies enables the Physician Assistant student to successfully receive and share information; establishing and maintaining a foundation of trust with all parties so that the environment is open and encouraging for honest dialogue.

Competency		Outcomes Domain
ICS1	Demonstrate interpersonal and communication (verbal, nonverbal, written, and electronic) skills that result in effective information exchange with patients, patients' families, physicians, professional associates, and other individuals within the health care system	IS
ICS2	Accurately and adequately document information regarding care for medical, legal, quality, and financial purposes	IS

### Patient Care

The core competencies of Patient Care seek to ensure that the Physician Assistant Student develops the ability to actively listen and attain medical histories, diagnose, properly inform and educate, and prescribe and perform necessary procedures in a way that maximizes patient comfort.

Competency		Outcomes Domain
PC1	Obtain an accurate history and perform a comprehensive physical exam	CTS
PC2	Accurately diagnose and formulate appropriate pharmacologic and non-pharmacologic treatment plans	CRPS
PC3	Appropriately select and perform medical and surgical procedures common to primary care	CTS CRPS
PC4	Provide health care services and education aimed at disease prevention and health maintenance	CTS

### Professionalism

The Professionalism core competencies enables the Physician Assistant student to treat all people with respect, compassion, and dignity.

Competency		Outcomes Domain
PSM1	Demonstrate a high level of responsibility, ethical practice, and adherence to legal and regulatory requirements	PFSL
PSM2	Demonstrate sensitivity to a diverse patient population by identifying the socio-cultural, familial, psychological, economic, environmental, and spiritual factors impacting health care and health care delivery; and responding to these factors by planning and advocating the appropriate course of action at both the individual and the community level	PFSL

### Practice-based Learning & Improvement

The core competencies in Practice-Based Learning and Improvement seeks to ensure that the Physician Assistant student becomes a life-long learner, develops the skills necessary to evaluate medical research and its appropriate application to the practice of medicine.

Competency		Outcomes Domain
<b>PBL1</b>	Critically appraise the medical literature in order to use current practice guidelines and apply the principles of evidence-based medicine to patient care	<b>KNWG CRPS</b>

### Systems-based Practice

The Systems-based Practice core competencies focus on the Physician Assistant student's ability to effectively perform their role as clinicians in diverse healthcare systems.

Competency		Outcomes Domain
<b>SBP1</b>	Provide advocacy and support geared to assist patients in obtaining quality care as they navigate the complexities of health care delivery systems	<b>PFSL</b>
<b>SBP2</b>	Demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that balances quality and cost, while maintaining the primacy of the individual patient	<b>PFSL</b>

### Leadership in Health Advocacy and Social Justice

Social accountability is an integral aspect of Physician Assistant practice; it has been part of the genetic make-up of our profession from its very beginning. Leadership in health advocacy and social justice encompasses involvement in legislative and community advocacy aimed at reducing health disparities and social injustice.

Competency		Outcomes Domain
<b>LASJ1</b>	Develop an interdisciplinary plan of advocacy for effective health policy changes that will facilitate health and social equity.	<b>PFSL</b>
<b>LASJ2</b>	Participate in the design and implementation of longitudinal projects that will promote the health of underserved populations.	<b>PFSL</b>
<b>LASJ3</b>	Apply valid, reliable research in advocacy to their current practice	<b>PFSL</b>
<b>LASJ4</b>	Educate community and professional organization leaders regarding existing health disparities and effective strategies to eliminate health inequities.	<b>PFSL</b>

\*Key for Outcome Domains: Knowledge (KNWG), Clinical Reasoning Problem Solving (CRPS), Interpersonal Skills (IS), Clinical and Technical Skills (CTS), Professionalism (PFSL)



## Program Description (A3.14d, A3.14e)

- **Overview**

The Pfeiffer University Master of Science in Physician Assistant Studies (MS-PAS) is a 27-month continuous residential program; committed to creating an academic experience known for its excellence in PA education, scholarly activity and servant leadership in the areas of health disparities and social justice.

The Pfeiffer University MS-PAS program will have a strong emphasis on the unequal distribution of health, illness, disease, suffering and death by social status, where social status includes race/ethnicity, sex/gender, socioeconomic status, geographical region, and other factors locally, nationally and globally. Students will receive instruction in health policy, advocacy and community interventions best practices aimed at reducing health disparities.

The students will participate in collaborative service-learning experiences through community initiatives such as interdisciplinary community service initiatives where the students identify a specific healthcare disparity within the community, design and implement a self-sustaining program that addresses the disparity and empowers the community. Through these initiatives students will gain real life experience in culturally competent healthcare for the underserved.

Students will be evaluated and expected to meet the highest standards of competency in the six areas of Competencies for the Physician Assistant Profession: Medical Knowledge, Interpersonal and Communication Skills, Patient Care, Professionalism, Practice Based Learning and Implementation and System-Based Practice throughout both the didactic and clinical phases of the program. Students will be evaluated using a variety of assessment tools such as multiple-choice questions, verbal and written case presentations, simulation activities, objective structured clinical examinations (OSCEs), short essays, reflection journals, research projects and clinical preceptor evaluations.

Upon successful completion of all curricular elements of the program the student will be awarded a Master of Science in Physician Assistant Studies.

- **Didactic Phase**

The program begins with a 15 month rigorous didactic phase which includes robust instruction in anatomy, physiology, pathophysiology, pharmacology, pharmacotherapeutics, clinical laboratory and diagnostic studies, physical diagnosis, clinical medicine, behavioral medicine, community medicine, clinical research design, medical writing, evidence based medicine, legal and ethical issues in medicine, and cultural issues in medicine. Instruction in professionalism, patient safety and advocacy are interwoven throughout the curriculum. The program will provide instruction on the four core competencies for interprofessional collaborative practice: Values/Ethics for Interprofessional Practice, Roles/Responsibilities, Interprofessional Communication, Teams and Teamwork through creative and innovative active learning strategies such as interdisciplinary team based and simulation learning. The students will participate in interprofessional experiences alongside other Pfeiffer health professions students.

- **Clinical Phase**

The didactic phase is followed by a 12-month clinical phase where the students will engage in well over 2100 hours of supervised clinical practice experiences (SCPEs). Students will participate in seven core SCPEs Internal Medicine, Family Medicine, Pediatrics, Prenatal Care and Women's Health, Surgery, Emergency Medicine, Behavioral and Mental Health and two elective SCPEs (all SCPEs are five weeks long).

At the end of each SCPE the students return to the main campus and participate in a three-day Clinical Seminar. Clinical Seminar activities include an end of SCPE examination, OSCE, focused NCCPA board review with case discussions, an NCCPA-type practice exam, and round table discussions on topics regarding PA practice.

- **Scholarly Concentrations**

In response to the critical need of health care providers in the areas of Behavioral and Mental Health and Rural Medicine the Pfeiffer University MS-PAS program is offering Scholarly Concentrations in Behavioral and Mental Health and in Rural Medicine. The Scholarly Concentrations are offered during the clinical phase of the program; and will not extend the duration of the program.

- **Research**

A graduate research project is a requirement for graduation. The students may choose one of two options for the graduate research project. The first option is a three-part individual graduate research project which entails: a written case report, a literature review related to the case report, and an oral presentation of the case and key findings of the literature review. The second option is a collaborative graduate research project where a small group of students (three students maximum) identify a health disparity in a specific community; conduct a literature review on the subject matter, design, and implement a community health initiative. The report (written and oral presentation) includes a literature review, a description of the project and its outcomes.

**Curriculum Sequence (A3.14d)**

Didactic Phase		
<b>Semester 1 Spring</b>		
Course Number	Course Name	Credits
PAS 600	Clinical Anatomy and Radiology with lab	5
PAS 601	Medical Physiology	2
PAS 602	Medical Interviewing, Counseling and Documentation	3
PAS 603	Essentials of Medical Genetics	1
PAS 604	Medical Microbiology	2
PAS 605	The Physician Assistant: Delivering Healthcare in America and Beyond	1
PAS 606	Epidemiology and Biostatistics: An Introduction to Clinical Research	1
PAS 607	Interprofessional Seminar I: Roles and Responsibilities	NC
<b>TOTAL CREDITS</b>		<b>15</b>
<b>Semester 2 Summer</b>		
PAS 608	Pathophysiology of Disease I	2
PAS 610	Clinical Medicine I	6
PAS 613	Pharmacology I	2
PAS 615	Physical Diagnosis I	4
PAS 617	Clinical Laboratory and Diagnostics I	2
PAS 619	Evidence Based Medicine I	2
PAS 622	Public Health: Principles, Policy and Advocacy	1
PAS 623	Interprofessional Seminar II: Interprofessional Communication	NC
<b>TOTAL CREDITS</b>		<b>19</b>
<b>Semester 3 Fall</b>		
PAS 609	Pathophysiology of Disease II	2
PAS 611	Clinical Medicine II	6
PAS 614	Pharmacology II	2
PAS 616	Physical Diagnosis II	4
PAS 618	Clinical Laboratory and Diagnostics II	2
PAS 620	Evidence Based Medicine II	2
PAS 624	Cultural Issues in Healthcare	1
PAS 625	Interprofessional Seminar III: Teams and Teamwork	NC
<b>TOTAL CREDITS</b>		<b>19</b>
<b>Semester 4 Spring</b>		
PAS 612	Clinical Medicine III	6
PAS 626	Advanced Clinical Pharmacotherapeutics	2
PAS 627	Clinical Skills and Procedures	4
PAS 628	Behavioral Medicine	2
PAS 621	Evidence Based Medicine III	2
PAS 629	Ethics, Law and Social Justice in Medicine	1
PAS 630	Interprofessional Seminar IV: Ethics and Values	NC
<b>TOTAL CREDITS</b>		<b>17</b>
<b>TOTAL CREDITS DIDACTIC PHASE</b>		<b>70</b>

Clinical Phase		
Semester V Summer, Semester VI Fall, Semester VII Spring		
Course Number	Course Name	Credits
PAS 700	Graduate Research Project	NC
PAS 701	Behavioral and Mental Health	5
PAS 702	Emergency Medicine	5
PAS 703	Family Medicine	5
PAS 704	General Surgery	5
PAS 705	Internal Medicine	5
PAS 706	Pediatrics	5
PAS 707	Women's Health	5
PAS 708	Orthopedics	5
PAS 709	Elective	5
<b>TOTAL CREDITS</b>		<b>45</b>
<b>TOTAL CREDITS FOR THE PROGRAM</b>		<b>115</b>

## Didactic Phase

### Semester I

#### **PAS 600 Clinical Anatomy and Radiology with Lab**

##### **5 Credits**

This is a clinically oriented course developed to integrate knowledge and understanding of human anatomy and function in health and disease. Anatomical landmarks and findings are correlated with imaging and pathophysiology. The cadaver laboratory sessions will reinforce the student's knowledge of anatomy and provide the student with the opportunity to visualize the texture, color, location, and three-dimensional relationships of anatomical structures. In conjunction with the cadaver lab session, there will also be corresponding online 'Virtual Lab' modules. Embryology and developmental biology will be incorporated into course. This course will also introduce students to the fundamentals of anatomical structure as it correlates to radiologic imaging. Students will learn how to identify and locate key organs through a series of radiographic images. Integration of clinical concepts activities at the end of each body system re-enforces application of anatomical concepts to clinical practice.

#### **PAS 601 Medical Physiology**

##### **2 Credits**

Medical Physiology is an integrated study of normal physiologic function of the cell and organ systems from a clinical perspective. Using a systems-based approach and synchronized with concurrent topics in Clinical Anatomy this course emphasizes normal physiologic function in preparation for Pathophysiology of Disease I and II.

#### **PAS 602 Medical Interviewing, Counseling and Documentation**

##### **3 Credits**

This course will equip the student with the fundamentals of patient-centered communication skills, patient education and basic counseling techniques as well as the components of the medical interview. The student will develop competency in behavioral change counseling strategies such as motivational interviewing. These concepts will be reinforced through the introduction to medical documentation.

#### **PAS 603 Essentials of Medical Genetics**

##### **1 Credit**

This course is an introduction to medical genetics where students will review chromosomes, DNA, RNA, protein synthesis, and inheritance patterns and continues with a clinical focus based on understanding different disease processes. Diagnostic techniques and an overview of embryonic development and teratogens will also be discussed. A variety of genetic diseases are explored, including what is known about the genetics involved, the signs and symptoms of the disease, and prevention and treatment options available. The roles of genetic counseling and screening, as well as the ethical and legal issues related to genetic screening and genetic testing are also discussed.

#### **PAS 604 Medical Microbiology/Infectious Disease Part I**

##### **2 Credits**

This course provides the physician assistant student the principles of medical microbiology and infectious disease. It covers mechanisms of infectious disease transmission, principles of aseptic practice, and the role of the human body's normal microflora. The biology of bacterial, viral, fungal, and parasitic pathogens and the diseases they cause are also covered. Additionally, the course provides the conceptual basis for understanding pathogenic microorganisms and the mechanisms by which they

cause disease in the human body. Relevant clinical examples are provided to facilitate the application, evaluation and correlation of laboratory data used in the diagnosis and treatment of common infectious disease states. Problem solving and communication skills are refined through small and large group clinical case discussions.

### **PAS 605 The Physician Assistant: Delivering Healthcare in America and Beyond**

#### **1 Credit**

This course offers students a comprehensive overview of the fundamental structure and operations of the of U.S. health care system. The course presents the complex nature in the organization, financing, and delivery of health care services in the US in a systematic fashion. Healthcare systems of other countries and global health challenges and reform are also explored.

Additionally, the course will closely examine the history, current issues and future trends of the Physician Assistant profession and their role in the U.S. healthcare system. Students will review legal and regulatory issues in Physician Assistant practice; gaining an appreciation for the importance of active participation in healthcare policy and legislation. The course will also introduce students to the role of other health service professionals and the principles of inter-professional practice.

### **PAS 606 Epidemiology and Biostatistics: An Introduction to Clinical Research**

#### **1 Credit**

This course will explore fundamental concepts of biostatistics and epidemiology necessary to interpret clinical research articles and design clinical studies most commonly encountered in health research.

### **PAS 607 Interprofessional Seminar I: Roles and Responsibilities**

#### **NC**

Physician Assistants must successfully function in a health care environment that effectively utilizes the resources and knowledge offered by each member of the healthcare team in the delivery of patient centered care. Successful inter-professional practice results in improvement in quality, reduction in cost, optimization of efficiency; ultimately achieving the best possible patient outcomes. These seminars will provide the Physician Assistant student opportunities to apply the principles of inter-professional practice to clinical scenarios while interacting with students from other healthcare disciplines. The seminars will be conducted over two days and will focus on the four inter-professional collaborative practice competency domains: Roles and Responsibilities, Interprofessional Communication, Teams and Teamwork, and Ethics and Values.

## **Semester II**

### **PAS 608 Pathophysiology of Disease I**

#### **2 Credits**

Pathophysiological Basis of Disease I is the first of a two semester overview of medical physiology as well as an introduction to the underlying pathological basis for specific disease processes common to primary care. The clinical pathophysiology portion of the course serves as a transition from the basic medical sciences to clinical medicine. The student will be exposed to the study of disease, both congenital and acquired with an emphasis on providing understanding pathologic physiology in conjunction with information regarding medical history and laboratory data to solve case based clinical problems during small group discussions. Students are taught how pathophysiology translates into patient signs, symptoms and laboratory test results. Students are also encouraged to begin the thought processes leading to development of differential diagnoses. The course content is presented synchronized with

appropriate, correlative topics in Physical Diagnosis I, Clinical Medicine I, Clinical Laboratory and Diagnostics I, and Pharmacology I.

### **PAS 610 Clinical Medicine I**

#### **6 Credits**

This course integrates the epidemiology, risk factors (including genetics, as applicable), pathophysiology, signs and symptoms, history and physical findings, laboratory and diagnostic tests, differential diagnosis, therapeutic management, possible complications, prevention measures prognosis, patient education and follow-up of emergent and non-emergent disorders encountered in primary care across the lifespan. The course utilizes a systems approach and is delivered through a combination of traditional lectures and problem based learning (PBL) sessions. The topics are synchronized with and correlative to topics in Pathophysiology of Disease I, Pharmacology I, Physical Diagnosis I and Clinical Laboratory Medicine I. Organ systems covered in Clinical Medicine I include, Dermatology, Ophthalmology, Otolaryngology, Cardiology, Electrocardiography, and Pulmonary Medicine. At the end of each organ system students will engage in critical thinking and integration of clinical concepts exercises through problem based learning.

### **PAS 613 Pharmacology I**

#### **2 Credits**

This course is designed to prepare the student for the clinical study of therapeutics by providing knowledge of the manner in which drugs modify biological function. It includes a systematic study of the effects of drugs on different organ systems and disease processes, the mechanisms by which drugs produce their therapeutic and toxic effects, and the factors influencing their absorption, distribution and biological actions. The course consists of a combination of lectures and problem based learning (PBL) sessions. The topics are synchronized with and correlative to topics in Clinical Medicine I, Pathophysiology of Disease I and Clinical Laboratory and Diagnostics I.

### **PAS 615 Physical Diagnosis I**

#### **4 Credits**

This is a course where the student develops a systems based approach to performing a full physical examination and critical thinking skills enabling them to formulate differential diagnoses and treatment plans. The course content has been synchronized and integrated with correlative content in Pathophysiology of Disease I, Clinical Pharmacology I, Clinical Laboratory and Diagnostics I and Clinical Medicine I to maximize student learning.

Students will receive instruction through lectures and actively participate in labs where they interact with, interview and examine standardized patients. Students are primarily assessed by Objective Structured Clinical Examinations (OSCE); where they will interview and examine a standardized patient then document and present their findings to course instructors.

### **PAS 617 Clinical Laboratory and Diagnostics I**

#### **2 Credits**

This course is the first of a two part series where the student receives instruction in medical laboratory and radiographic studies used in the diagnosis and management of common disorders of the major body systems. It also provides the rationale for the selection, utilization and interpretation of clinical laboratory, imaging and other diagnostic tests used to evaluate each system's principal functions. The topics are synchronized with and correlative to topics in Clinical Medicine I, Pathophysiology of Disease I and Pharmacology I.

### **PAS 619 Evidence Based Medicine I**

#### **2 Credits**

This is the first course of a two part series where the basic principles of utilizing research evidence in clinical practice are expounded on. Course I will focus on developing efficient strategies for searching and using available databases to access evidence-based journals and medical literature. Students will also acquire the skill of formulating an answerable research question. Course II will provide students with the requisite knowledge and skill to appropriately interpret and critically appraise research studies of intervention, harm, diagnosis and prognosis in an efficient manner. After appraising the study students will be able to determine if the information is valid and how it will affect the care of the patient. Course III will offer instruction on medical writing as students start to develop the foundation of their graduate research project.

### **PAS 622 Public Health: Principles, Policy and Advocacy**

#### **1 Credit**

This course offers the student a population perspective on the determinants of health and disease. It will also explore best practices and the tools available to promote health and prevent disease. The student will examine public healthcare systems as well as society-wide systems (i.e. laws and taxation) and their role on health inequities in the United States and abroad. Additionally, the student will be introduced to public health policy: its purpose, how it is originated, and how it is implemented. Underlying theories and frameworks as well as practical analytical tools needed for effective advocacy and communication will be discussed. The course will also demonstrate how policymaking is a complex, multidisciplinary, and integrated top-down and bottoms-up process that embraces a myriad of public and private stakeholders.

### **PAS 623 Interprofessional Seminar II: Interprofessional Communication**

#### **NC**

Physician Assistants must successfully function in a health care environment that effectively utilizes the resources and knowledge offered by each member of the healthcare team in the delivery of patient centered care. Successful inter-professional practice results in improvement in quality, reduction in cost, optimization of efficiency; ultimately achieving the best possible patient outcomes. This seminar series will provide the Physician Assistant student opportunities to apply the principles of inter-professional practice to clinical scenarios while interacting with students from other healthcare disciplines. The seminars will be conducted over two days and will focus on the four inter-professional collaborative practice competency domains: Roles and Responsibilities, Interprofessional Communication, Teams and Teamwork, and Ethics and Values.

## **Semester III**

### **PAS 609 Pathophysiology of Disease II**

#### **2 Credits**

Pathophysiology of Disease II is the second of a two semester overview of medical physiology as well as an introduction to the underlying pathological basis for specific disease processes common to primary care. The clinical pathophysiology portion of the course serves as a transition from the basic medical sciences to clinical medicine. The student will be exposed to the study of disease, both congenital and acquired with an emphasis on providing understanding pathologic physiology in conjunction with information regarding medical history and laboratory data to solve case based clinical problems during small group discussions. Students are taught how pathophysiology translates into patient signs, symptoms and laboratory test results. Students are also encouraged to begin the thought processes



leading to development of differential diagnoses. The course content is presented synchronized with appropriate, correlative topics in Physical Diagnosis II, Clinical Medicine II and Pharmacology II.

### **PAS 611 Clinical Medicine II**

#### **6 Credits**

This course integrates the epidemiology, risk factors (including genetics, as applicable), pathophysiology, signs and symptoms, history and physical findings, laboratory and diagnostic tests, differential diagnosis, therapeutic management, possible complications, prevention measures prognosis, patient education and follow-up of emergent and non-emergent disorders encountered in primary care across the lifespan. The course utilizes a systems approach and is delivered through a combination of traditional lectures and problem based learning (PBL) sessions. The topics are synchronized with and correlative to topics in Pathophysiology of Disease II, Pharmacology II, Physical Diagnosis II and Clinical Laboratory and Diagnostics II. Organ systems covered in Clinical Medicine II include: Hematology/Oncology (Liquid Malignancies), Gastroenterology, Urology/Nephrology, Endocrinology, Rheumatology, Psychiatry, Neurology, and Oncology Medicine. At the end of each organ system students will engage in critical thinking and integration of clinical concepts exercises through problem based learning.

### **PAS 614 Pharmacology II**

#### **2 Credits**

This course is designed to prepare the student for the clinical study of therapeutics by providing knowledge of the manner in which drugs modify biological function. It includes a systematic study of the effects of drugs on different organ systems and disease processes, the mechanisms by which drugs produce their therapeutic and toxic effects, and the factors influencing their absorption, distribution and biological actions. The course consists of a combination of lectures and problem based learning (PBL) sessions. The topics are synchronized with and correlative to topics in Clinical Medicine II, Pathophysiology of Disease II and Clinical Laboratory and Diagnostics II.

### **PAS 616 Physical Diagnosis II**

#### **4 Credits**

This is a course where the student develops a systems based approach to performing a full physical examination and critical thinking skills enabling them to formulate differential diagnoses and treatment plans. The course content has been synchronized and integrated with correlative content in Pathophysiology of Disease II, Clinical Pharmacology II, Clinical Laboratory and Diagnostics II and Clinical Medicine I to maximize student learning.

Students will receive instruction through lectures and actively participate in labs where they interact with, interview and examine standardized patients. Students are primarily assessed by Objective Structured Clinical Examinations (OSCE); where they will interview and examine a standardized patient then document and present their findings to course instructors.

### **PAS 618 Clinical Laboratory and Diagnostics II**

#### **2 Credits**

This course is the second of a two part series where the student receives instruction in medical laboratory and radiographic studies used in the diagnosis and management of common disorders of the major body systems. It also provides the rationale for the selection, utilization and interpretation of clinical laboratory, imaging and other diagnostic tests used to evaluate each system's principal functions. The topics are synchronized with and correlative to topics in Clinical Medicine II, Pathophysiology of Disease II and Pharmacology II

**PAS 620 Evidence Based Medicine II****2 Credits**

This is the second course of a three part series that where the basic principles of utilizing research evidence in clinical practice are expounded on. Course I focused on developing efficient strategies for searching and using available databases to access evidence-based journals and medical literature. Students also acquired the skill of formulating an answerable research question. Course II will provide students with the requisite knowledge and skills to appropriately interpret and critically appraise research studies of intervention, harm, diagnosis and prognosis in an efficient manner. After appraising the study students will be able to determine if the information is valid and how it will affect the care of the patient. Course III will offer instruction on medical writing as students start to develop the foundation of their graduate research project.

**PAS 624 Cultural Issues in Healthcare****1 Credit**

This course enhances the understanding of culture and its relationship to health, health disparities, disease incidence and prevalence for specific communities and/or ethnic groups. It will also explore historical factors that might shape the health behaviors, beliefs, folk practices, ethnopharmacology, and communication practices of specific communities. Students will be challenged to discover the effect of bias and stereotyping on the delivery of healthcare. Upon completion of this course the student will develop an understanding and value the importance of providing culturally competent healthcare.

**PAS 625 Interprofessional Seminar III: Ethics and Values****NC**

Physician Assistants must successfully function in a health care environment that effectively utilizes the resources and knowledge offered by each member of the healthcare team in the delivery of patient centered care. Successful inter-professional collaborative practice results in improvement in quality, reduction in cost, optimization of efficiency; ultimately achieving the best possible patient outcomes. These seminars will provide the Physician Assistant student opportunities to apply the principles of inter-professional collaborative practice to clinical scenarios while interacting with students from other healthcare disciplines such as nursing, health and exercise science, occupational therapy, marriage and family therapy and health administration.

**Semester IV****PAS 612 Clinical Medicine III****6 Credits**

This course integrates the epidemiology, risk factors (including genetics, as applicable), pathophysiology, signs and symptoms, history and physical findings, laboratory and diagnostic tests, differential diagnosis, therapeutic management, possible complications, prevention measures, prognosis, patient education and follow-up of emergent and non-emergent disorders encountered across the lifespan in primary care. Students will apply knowledge obtained in Clinical Medicine I and II to specific populations and clinical situations. It is delivered through a combination of traditional lectures and problem based learning (PBL) sessions. Topics covered in Clinical Medicine III: Surgery, Geriatrics, Pediatrics, Infectious Disease Part II, and Emergency Medicine. Throughout each module students will engage in critical thinking and integration of clinical concepts exercises through problem based learning.

**PAS 626 Advanced Pharmacotherapeutics****2 Credits**

This course provides the opportunity to acquire advanced knowledge and skills in the therapeutic use of pharmacologic agents. The pharmacologic treatment of complex health problems will be explored. It is designed to facilitate the process of teambuilding by making basic knowledge in pharmacology “come alive” in structured case studies. Thus the didactic lecture material taught in Pharmacology I and Pharmacology II will be expanded, reinforced, and made practical through the team based/problem based learning method. Additionally, students will administer medications using patient simulators and will observe the clinical response

**PAS 627 Clinical Skills and Procedures****4 Credits**

This course is designed to introduce students to essential procedures and skills necessary for primary care practice such as phlebotomy; injection techniques; splinting; suturing and more. Students will participate in Advanced Cardiac Life Support and Pediatric Advanced Life Support Certification training during this course. Students will demonstrate competence through written and practical evaluations.

**PAS 628 Behavioral Medicine****2 Credits**

Behavioral Medicine is a course that aims to develop and integrate behavioral, psychosocial, and biomedical science knowledge and techniques relevant to the understanding of health and illness, and the application of this knowledge and these techniques to prevention, diagnosis, treatment and rehabilitation across the lifespan. It includes the following topics as they pertain to human behavior: children and adolescent health, aging, chronic pain, death, dying and loss, domestic violence, eating disorders, environmental health, human sexuality, HIV/AIDS, obesity, public health, quality of life, rehabilitation, sexually transmitted diseases, stress, substance abuse (alcohol, tobacco, and other drugs) and women's health.

**PAS 621 Evidence Based Medicine III****2 Credits**

This is the second course of a three part series that where the basic principles of utilizing research evidence in clinical practice are expounded on. Course I focused on developing efficient strategies for searching and using available databases to access evidence-based journals and medical literature. Students also acquired the skill of formulating an answerable research question. Course II will provide students with the requisite knowledge and skills to appropriately interpret and critically appraise research studies of intervention, harm, diagnosis and prognosis in an efficient manner. After appraising the study students will be able to determine if the information is valid and how it will affect the care of the patient. Course III will offer instruction on medical writing as students start to develop the foundation of their graduate research project.

**PAS 629 Ethics, Law and Social Justice in Medicine****1 Credit**

This is a highly interactive course where principles of ethics and the law are discussed followed by case simulations that illustrate where social determinants of health (i.e. access to justice), ethics and the law intersect. Students will explore their roles and responsibilities as healthcare providers and discover how interdisciplinary collaboration is key for effective advocacy and changes in health policy that address health disparities and social injustice.

### **PAS 630 Interprofessional Seminar IV: Teams and Teamwork**

**NC**

Physician Assistants must successfully function in a health care environment that effectively utilizes the resources and knowledge offered by each member of the healthcare team in the delivery of patient centered care. Successful inter-professional practice results in improvement in quality, reduction in cost, optimization of efficiency; ultimately achieving the best possible patient outcomes. This seminar series will provide the Physician Assistant student opportunities to apply the principles of inter-professional practice to clinical scenarios while interacting with students from other healthcare disciplines. The seminars will be conducted over two days and will focus on the four inter-professional collaborative practice competency domains: Roles and Responsibilities, Interprofessional Communication, Teams and Teamwork, and Ethics and Values.

### **Clinical Phase Semesters V, VI, and VII**

### **PAS 700 Graduate Research Project**

**NC**

The graduate research project is a requirement for graduation. Students may choose one of two options for the graduate research project. The first option is a three part individual graduate research project which entails: a written case report, a literature review related to the case report, and an oral presentation of the case and key findings of the literature review. The second option is a collaborative graduate research project where a small group of students (three students maximum) identify a health disparity in a specific community; conduct a literature review on the subject matter, design, and implement a community health initiative. The report (written and oral presentation) includes a literature review, a description of the project and its outcomes.

### **PAS 701-708 Supervised Clinical Practice Experiences (Rotations)**

**5 Credits**

Supervised Clinical Practice Experiences (Rotations) are five week clinical courses in seven core medical specialties and two elective subspecialties. During these rotations students will integrate, expand and refine clinical skills (i.e. performing history and physical exams, ordering and interpreting laboratory/diagnostic tests, synthesizing information in establishing diagnosis, formulating and implementing a treatment plan) as they manage urgent, emergent and non-emergent; acute and chronic disease, in out-patient and in-patient settings. Students will also develop an appreciation for the role of preventive medicine in the delivery of health care; become aware of the impact of families and culture on health problems, patient perception and reception of health care (bio-psycho-social model); and their own personal strengths, interests, and limitations.

### **PAS 701 Behavioral and Mental Health Rotation**

**5 Credits**

This five week clinical course introduces the student to Behavioral and Mental Health where the student is exposed to common psychiatric/behavioral conditions treated by health care providers specializing in Behavioral and Mental Health in conjunction with other members of the health care team. Emphasis is placed on further developing and refining the students' skills in taking a history and performing a physical exam, ordering and interpreting laboratory/diagnostic tests, synthesizing information in establishing a diagnosis, formulating and implementing a cost-effective treatment plan, and promoting patient education in both outpatient and inpatient behavioral and mental health settings.

**PAS 702 Emergency Medicine Rotation****5 Credits**

This clinical course introduces the student to Emergency Medicine where the student, with supervision, receives experience in triage, stabilization, in-depth exposure to traumatic illnesses, injuries and surgical scenarios that necessitate emergent care for patients across the life span. Emphasis is placed on the proper evaluation and management of life-threatening illness and injury by refining the students' skills in taking a history and performing a physical exam, ordering and interpreting laboratory/diagnostic tests, synthesizing information in establishing a diagnosis, learning proper disposition of patients and performing lifesaving techniques in an emergency department setting.

**PAS 703 Family Medicine Rotation****5 Credits**

This five week clinical course introduces students to the Family Medicine setting where they will experience the continuity, comprehensiveness, complexity, context, and coordination of care across the life span provided by Family Medicine clinicians in conjunction with other members of the health care team. Emphasis is placed on further developing and refining the students' skills in taking a history and performing a physical exam, ordering and interpreting laboratory/diagnostic tests, synthesizing information in establishing a diagnosis, formulating and implementing a cost-effective treatment plan and promoting patient education in an outpatient family medicine setting.

**PAS 704 General Surgery Rotation****5 Credits**

This is a five week clinical course where students are introduced to General Surgery. With supervision, the student is provided with practical experience in the evaluation and management of major and minor surgical problems. Emphasis is given on the longitudinal management and care of the surgical patient. Students will have the opportunity to follow patients in the preoperative confirmation of clinical impressions through history taking, appropriate physical examination, ordering and interpreting laboratory/diagnostic tests. Subsequently, students will further develop their surgical skills and experience basic operating room procedure during the intra-operative care of the patient. Finally, the student will participate in the post-operative management of the patient. The student will develop an increased understanding of how to effectively communicate and function as an integral member of the surgical team.

**PAS 705 Internal Medicine Rotation****5 Credits**

This is a five week clinical course where students will be assigned to the inpatient medical/hospitalist service. The purpose of the Internal Medicine rotation is to provide the student with practical clinical experience in working with the hospitalized patients with acute or chronic diseases that are routinely seen by internists. Under the supervision of a licensed provider, students will participate in a wide variety of inpatient care activities. Medical history review, physical examination, diagnostic testing, and management are emphasized, as is the importance of functioning on a multidisciplinary team.

**PAS 706 Pediatric Rotation****5 Credits**

This is a students a five week clinical course where students are assigned to private practice offices or to community health centers where they will participate in the care of pediatric/adolescent patients. Through supervised exposure to patients in a pediatric/adolescent practice setting, students are given the opportunity to become familiar with the parameters of normal growth and development, newborn

assessment, immunizations schedules, and the evaluation and management of common problems in the pediatric/adolescent population. Students will participate in well child/adolescent preventive care as well as in the evaluation of acute and chronic pediatric/adolescent illnesses. In addition, the students will advocate parental counseling regarding immunizations, preventive health care visits, growth and development, nutrition, and common psychosocial problems.

### **PAS 707 Women's Health Rotation**

#### **5 Credits**

This clinical course introduces the student to the Women's Health setting where the students, with supervision, will participate in routine well-woman screening and examinations, family planning and birth control, recognition and treatment of sexually transmitted disease, the evaluation of common gynecologic problems, cancer detection and prevention, and prenatal care. Exposure and participation in the surgical management of gynecological and obstetrical concerns may also be provided. Emphasis is placed on further developing and refining the students' skills in taking a history; performing a physical exam; ordering and interpreting laboratory/diagnostic tests; synthesizing information in establishing a diagnosis; and formulating and implementing a cost-effective treatment plan and promoting patient education in a Women's Health setting.

### **PAS 708 Orthopedics**

#### **5 Credits**

This clinical course introduces the student to the Orthopedic setting where the student is exposed to common injuries and disorders treated by Orthopedic practitioners (Physicians, board-certified and licensed, Physician Assistants (PA), and/or other health care providers) in conjunction with other members of the health care team and their application to community practice. Emphasis is placed on further developing and refining the students' skills in taking a history and performing a physical exam, ordering and interpreting laboratory/diagnostic tests, synthesizing information in establishing a diagnosis, formulating and implementing a cost-effective treatment plan and promoting patient education.

### **PAS 709 Elective**

#### **5 Credits**

These are 5 week clinical courses in any medical or surgical subspecialty where the Pfeiffer University Master of Science Physician Assistant Studies Program has fully executed affiliation agreements. Students are encouraged to select specialties that will augment clinical knowledge applicable to the primary medical care setting. Students who are participating in scholarly concentrations tracks will complete two electives in their field of study. These rotations must be approved by the student's Academic Advisor and the Program Director.

## **Technical Standards (A3.15e)**

The Pfeiffer University Master of Science in Physician Assistant Studies (MS-PAS) Program is committed to comply with Section 504 of the 1973 Vocational Rehabilitation Act and PL 101-336, the Americans with Disabilities Act (ADA), and also ascertains that the following minimum technical standards must be present in the prospective candidates.

The Pfeiffer University MS-PAS Program has determined technical standards that are essential for successful progression and completion of all aspects of the curriculum, as well as entry into the profession. These Technical Standards are required for admission and must be maintained throughout the student's enrollment in the Pfeiffer University MS-PAS Program. In the event a student is unable to fulfill these Technical Standards, with or without reasonable accommodation, the student will be subject to dismissal.

Candidates must have somatic sensation and the functional use of the senses of vision and hearing. Candidates' and students' diagnostic skills will also be lessened without the functional use of the senses of equilibrium, smell, and taste. Additionally, they must have sufficient exteroceptive sense (touch, pain and temperature), sufficient proprioceptive sense (position, pressure, movement, stereognosis, and vibratory) and sufficient motor function to permit them to carry out the activities described in the section above. They must be able to consistently, quickly, and accurately integrate all information received by whatever sense(s) employed, and they must have the intellectual ability to learn, integrate, analyze, and synthesize data.

Technological compensation can be made for some disabilities in these areas, but a candidate should be able to perform them in a reasonably independent manner. The use of a trained intermediary would mean that a student's judgment must be mediated by someone else's power of selection and observation. Therefore, third parties cannot be used to assist students in accomplishing curricular requirements in the five skill areas specified below. Reasonable accommodations can be made for documented disabilities.

- **Observation**
  - Candidates and students must be able to observe a patient accurately at a distance and close at hand.
  - Observation necessitates the functional use of the sense of vision, hearing, smell, and somatic sensation.
  
- **Communication**
  - Candidates and students must be able to speak, hear and observe patients in order to elicit information, describe changes in mood, activity and posture, and perceive nonverbal communications.
  - Candidates and students must be able to communicate effectively and sensitively with patients.
  - Candidates and students must be able to communicate (verbal, nonverbal, and written) effectively and efficiently in oral and written form with all members of the healthcare team.
  - Candidates and students must possess reading skills at a level to be able to independently accomplish curricular requirements and provide clinical care for patients.

- **Motor Coordination and Function**
  - Candidates and students should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers.
  - Candidates and students should be able to do basic laboratory tests, carry out diagnostic procedures and read EKGs and X-rays.
  - Candidates and students should be able to execute motor movements reasonably required to provide general care and emergency treatment to patients.
    - Examples of emergency treatment reasonably required of Physician Assistants are cardiopulmonary resuscitation, the administration of intravenous medication, application of pressure to stop bleeding, the opening of obstructed airways, the suturing of simple wounds and the performance of simple obstetrical maneuvers.
    - Such actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision.
  
- **Intellectual, Conceptual, Integrative, and Quantitative Abilities**
  - Candidates and students must exhibit the following intellectual abilities:
    - Measurement
    - Calculation
    - Reasoning
    - Analysis
    - Synthesis
    - Comprehend three-dimensional and spatial relationships
  - The above listed abilities are necessary skills in order to perform problem solving tasks quickly and efficiently.
  
- **Behavioral and Social Attributes**
  - Candidates and students must possess the behavioral emotional health required for full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive and effective relationships with patients.
  - Candidates and students must be able to tolerate physically taxing workloads and to function effectively when under stress.
  - Candidates and students must be able to adapt to changing environments, to display flexibility and to learn to function in the face of uncertainties inherent in the clinical problems of many patients.
  - Candidates and students must demonstrate empathy, integrity, concern for others, interpersonal skills, interest, motivation, and the ability to interact with people at all levels in a culturally diverse society.



## **Special Accommodations**

Section 504: Pfeiffer University does not discriminate against employees, students, or applicants who are handicapped. This policy is in keeping with Section 504, The Rehabilitation Act of 1973 as amended. Students requiring accommodations for the classroom or in the administration of examinations should contact Dr. Chip Palmer Director of Learning and Academic Success - Center of Health Sciences at (704) 463-3367 or [chip.palmer@pfeiffer.edu](mailto:chip.palmer@pfeiffer.edu) . Documentation of recommended accommodations provided must be submitted to the Graduate Center for Student Success, Director of Didactic Education, and/or the Director of Clinical Education prior to or on the first day of class. In cases where this does not occur the Pfeiffer University MS-PAS Program requires notification at least 5 days prior to an examination in order to review and institute appropriate accommodations. It is important to note that accommodations for disabilities are not retroactive and will only be granted after the appropriate steps have been taken.

## **Cost of Attendance (A3.14f)**

### **Tuition and Fees**

Tuition and fees for the Pfeiffer University MS PAS program is one comprehensive fee. The comprehensive fee is determined annually and may change somewhat from year to year. Therefore, the figures cited here should be used for estimation purposes only. The comprehensive fee does not include books or course specific fees. Changes to the tuition and fees listed here will be updated on this page in a timely manner.

Total estimated tuition and fees for the 27 month program for Academic Year 2019-2020 (class entering in January 2020) is \$99,094.

The chart below provides an outline for the estimated cost of attendance including books, housing, transportation etc. broken down by semester.

<b>COMPREHENSIVE FEE (TUITION AND FEES): Spring 2020 Cohort</b>							
	<b>Spring 2020</b>	<b>Summer 2020</b>	<b>Fall 2020</b>	<b>Spring 2021</b>	<b>Summer 2021</b>	<b>Fall 2021</b>	<b>Spring 2022</b>
Tuition	\$ 11,871	\$ 11,871	\$ 11,871	\$ 11,871	\$ 11,871	\$ 11,871	\$ 11,871
Fees	\$ 1,714	\$ 1,714	\$ 1,714	\$ 1,714	\$ 1,714	\$ 1,714	\$ 1,714
Clinical Support Fees	\$ -	\$ -	\$ -	\$ -	\$ 1,500	\$ 1,500	\$ 1,500
<b>Comprehensive Program Tuition and Fees</b>	<b>\$ 13,585</b>	<b>\$ 13,585</b>	<b>\$ 13,585</b>	<b>\$ 13,585</b>	<b>\$ 15,085</b>	<b>\$ 15,085</b>	<b>\$ 15,085</b>
<b>TOTAL</b>							<b>\$ 99,595</b>
<b>EXPENSES</b>							
Room & Board (depends on your living arrangements)	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00
Transportation	\$ 976.00	\$ 976.00	\$ 976.00	\$ 976.00	\$ 1,080.00	\$ 1,080.00	\$ 1,080.00
Books	\$ 888.80	\$ 838.93	\$ 706.99	\$ 613.00	\$ 42.07	\$ 42.07	\$ 42.08
Equipment	\$ 675.45						
Miscellaneous Expenses	\$ 1,000.00						
Health Insurance	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00
<b>TOTAL Expenses</b>	<b>\$ 10,065</b>	<b>\$ 8,340</b>	<b>\$ 8,208</b>	<b>\$ 8,114</b>	<b>\$ 7,647</b>	<b>\$ 7,647</b>	<b>\$ 7,647</b>

<b>COMPREHENSIVE FEE (TUITION AND FEES): Spring 2021 Cohort</b>							
	<b>Spring 2021</b>	<b>Summer 2021</b>	<b>Fall 2021</b>	<b>Spring 2022</b>	<b>Summer 2022</b>	<b>Fall 2022</b>	<b>Spring 2023</b>
Tuition	12,049	12,049	12,049	12,049	12,049	12,049	12,049
Orientation Fee	\$ 500						
Fees	1,714	1,714	1,714	1,714	1,714	1,714	1,714
Clinical Support Fees	-	-	-	-	1,500	1,500	1,500
<b>Comprehensive Program Tuition and Fees</b>	<b>14,263</b>	<b>13,763</b>	<b>13,763</b>	<b>13,763</b>	<b>15,263</b>	<b>15,263</b>	<b>15,263</b>
<b>TOTAL</b>							<b>\$ 101,341</b>
<b>EXPENSES</b>							
Room & Board (depends on your living arrangements)	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00	\$ 5,900.00

Transportation	\$ 976.00	\$ 976.00	\$ 976.00	\$ 976.00	\$ 1,080.00	\$ 1,080.00	\$ 1,080.00
Books	\$ 888.80	\$ 838.93	\$ 706.99	\$ 613.00	\$ 42.07	\$ 42.07	\$ 42.08
Equipment	\$ 675.45						
Miscellaneous Expenses	\$ 1,000.00						
Health Insurance	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00	\$ 625.00
<b>TOTAL Expenses</b>	<b>\$ 10,065</b>	<b>\$ 8,340</b>	<b>\$ 8,208</b>	<b>\$ 8,114</b>	<b>\$ 7,647</b>	<b>\$ 7,647</b>	<b>\$ 7,647</b>

### Refund Policy

If a student withdraws or is separated from the Pfeiffer University MS PAS program for any reason other than a disability once the semester has started, a credit for fees charged is given on the following basis:

Days Attended	Refund Rate
Day 0-Day5	90%
Day 6-Day 10	60%
After Day 10	0%

### Refunds and Financial Aid

Federal regulations governing Title IV financial aid programs require that the Office of Financial Aid determine the amount of the refund that must be paid back to the financial aid programs if the student received aid for educational expenses. Therefore, some or all of a student's credit may be allocated to financial aid programs and not refunded to the student. For more information please contact the Office of Financial Aid at [financial.aid@pfeiffer.edu](mailto:financial.aid@pfeiffer.edu)

- **Please note:** No considerations will be given after Day 10.

## Physician Assistant Professional Oath

I pledge to perform the following duties with honesty and dedication:

- I will hold as my primary responsibility the health, safety, welfare and dignity of all human beings.
- I will uphold the tenets of patient autonomy, beneficence, non-maleficence and justice.
- I will recognize and promote the value of diversity.
- I will treat equally all persons who seek my care.
- I will hold in confidence the information shared in the course of practicing medicine.
- I will assess my personal capabilities and limitations, striving always to improve my medical practice.
- I will actively seek to expand my knowledge and skills, keeping abreast of advances in medicine.
- I will work with other members of the health care team to provide compassionate and effective care of patients.
- I will use my knowledge and experience to contribute to an improved community.
- I will respect my professional relationship with the physician.
- I will share and expand knowledge within the profession.

These duties are pledged with sincerity and upon my honor.

## Professionalism (C3.02)

### **Definition**

Medical Professionalism is defined as the daily expression of the desire to serve people and society as a whole by providing quality health care to those in need; this definition aligns with the principle of servant leadership<sup>2</sup>. As stated by Robert Greenleaf, “The servant leader is servant first... It begins with the natural feeling that one wants to serve, to serve first.”<sup>3</sup> Servant leadership characterized by the highest ethical standards is a foundational principle for all faculty, staff and students of Pfeiffer University.

### **Expected Behaviors**

All currently enrolled students of the Pfeiffer University Master of Science in Physician Assistant Program are expected to demonstrate at all times behaviors consistent with the:

- *Guidelines for Ethical Conduct for the Physician Assistant*, published by the American Academy of Physician Assistants. <https://www.aapa.org/wp-content/uploads/2017/02/16-EthicalConduct.pdf>
- Established learning outcomes and expected competencies regarding Professionalism and Leadership in Health Advocacy and Social Justice. <http://www.pfeiffer.edu/academics/programs/physician-assistant-ms-pas/5474/learning-outcomes>

### **Unacceptable Behaviors**

Examples of unprofessional behaviors that **will** result in **prompt** referral to the Academic and Professional Performance Committee (APPRC) and **dismissal** from the program:

- Violation of principles related to academic integrity (i.e. evidence of cheating on an assignment or test) and plagiarism as outlined by the Pfeiffer University Honor Code
- Student intoxication or presumed intoxication from alcohol, prescription, or other drugs
- Student communication or interaction that is openly discriminatory, demeaning, or could reasonably be perceived as mentally or physically harmful to others, including but not limited to faculty, students, patients, patient’s family or caregivers, and healthcare providers.

Examples of unprofessional behaviors that will result in prompt referral to the APPRC and remediation, deceleration, or dismissal:

- Tardiness
- Unexcused absences
- Lack of engagement and/or participation in classroom or other academic activities (i.e. labs, simulation, team-based learning activities)
- Disruptive behavior in the classroom.
- Violation of dress code

\*The program reserves the right to determine the degree of egregiousness of the behavior.

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<sup>2</sup> <http://abimfoundation.org/what-we-do/medical-professionalism> (03\_02\_2018)

<sup>3</sup> <https://www.greenleaf.org/what-is-servant-leadership/> (03\_-2\_2018)

### ***Assessment of Professional Behaviors***

Employing a variety of strategies, assessment and monitoring of professional behaviors occurs on a continual basis during the student's tenure with the program. Assessments may be required more frequently, and at any given time if areas of concern have been identified.

- Self-Assessment

Self-assessment offers an opportunity for the student to evaluate his/her personal and professional qualities, identifying strengths and areas in need of improvement. Self-Assessment will take place at the end of semester 2 and 4 of the Didactic Phase and Clinical Rotation 6 of the Clinical Phase.

If there are areas of concern the student, with feedback from their academic advisor will formulate an individualized plan of action geared toward positive behavior modification. Plans of action may include but are not limited to referral to appropriate external resources. The student will meet with the academic advisor, the Director of Didactic and/or Clinical Education, and the Program Director to review the plan of action and monitoring strategies. The APPRC will be notified that the student has entered into an individualized plan of action regarding professional behavior.

If behavior (s) persist or worsen the student will be referred to the APPRC for a formal review which may result in the student's dismissal from the program.

- Academic Advisor Assessment

At the end of semester 2 and 4 of the Didactic Phase and Clinical Rotation 6 of the Clinical Phase of the program, each student's professional behavior will be evaluated by their assigned academic advisor. The advisor will take in consideration any concerns reported by instructors or course directors. The advisors will meet with each student and review the academic advisor professionalism review form. If there are areas of concern the student, with feedback from their academic advisor will formulate an individualized plan of action geared toward positive behavior modification. Plans of action may include but are not limited to referral to appropriate external resources. The student will meet with the academic advisor, the Director of Didactic and/or Clinical Education, and the Program Director to review the plan of action and monitoring strategies. The Academic and Professional Performance Committee (APPRC) will be notified that the student has entered into an individualized plan of action regarding professional behavior.

If behavior (s) persist or worsen the student will be referred to the APPRC for a formal review which may result in the student's dismissal from the program.

- Academic and Professional Performance Review Committee Assessment

The Academic and Professional Performance Review Committee (APPRC) will evaluate each student's professional behavior at the completion of the Didactic Phase of the program and Clinical Rotation 6. If there are areas of concern the student will be placed on Professionalism Probation. With feedback from their academic advisor, the student will formulate an individualized plan of action geared toward positive behavior modification. Plans of action may include but are not limited to referral to appropriate external resources. The student will meet

with the academic advisor, the Director of Didactic and/or Clinical Education, and the Program Director to review the plan of action and monitoring strategies. Professionalism Probation status will be removed once the student demonstrates the desired behavior modification.

If behavior (s) persist or worsen the APPRC will reconvene and review of all related documentation. This review may result in the student's dismissal from the program.

### ***Communication***

All students are assigned a Pfeiffer University email account at the time of admission to the program. It is mandatory that students check their Pfeiffer University e-mail account daily (including weekends). The Pfeiffer University e-mail is considered the official University email and the only account that the MS PAS Program uses to communicate with currently enrolled students. Likewise, students should only use their Pfeiffer University e-mail account for email correspondence with the program as this prevents identification problems related to outside email. Faculty and staff will not respond to students who utilize outside email addresses. The MS PAS program faculty and staff use e-mail as an important means for distributing information. The MS PAS program is not responsible if a student has inaccurate or missed information due to failure to routinely check, read and clear his/her e-mail account.

### ***Requirement to Report Criminal Incident***

Students are required to inform their Faculty Advisor and/or the Program Director of any interaction with the police resulting in an arrest or being brought before the criminal justice system within fifteen (15) days of the incident. This requirement is independent of whether or not there is a conviction involved. Failure to report any incident will result in a referral to the Academic and Professional Performance Review Committee (APPRC) for unprofessional behavior. Disciplinary actions may include dismissal from the MS PAS Program.

### ***Criminal Background Checks/ Drug Screening***

If a felony conviction occurs between the date of submission of the CASPA application and matriculation into the PA Program, the specific details including: (1) date of charge(s), (2) type of offense, and (3) disposition of the case, must be reported to the Program Director's office immediately.

Any felony convictions that occur subsequent to matriculation or at any time during your enrollment in the program must also be reported immediately providing the aforementioned information.

Failure to comply will be grounds for dismissal from the MS PAS Program.

During the clinical phase of the program, students will be required to undergo one or more national criminal background checks, which may include finger printing. Supervised clinical practice experience (SCPE) sites may require additional background checks, fingerprinting, and/or drug screening for students who are assigned at those institutions. Students are responsible for all expenses related to meeting additional drug screening, and background documentation required by the SCPE site. A criminal record or failure to pass a drug screen will result in a referral to the APPRC and may result in the student's dismissal from the program; if this occurs, tuition and fees will not be refunded.

By accepting admission to the program, a student agrees to submit to national criminal background checks, as well as drug screening; and pay any associated expenses.

### ***Medical Records and Patient Confidentiality***

Patient confidentiality is a cornerstone in Physician Assistant practice and essential for establishing and maintaining the patient-provider relationship built on trust.

MS PAS students are privileged to learn information that patients share only with healthcare professionals and be present in very personal moments of patients' lives. Patients, in turn, trust that MS PAS students will preserve their confidentiality; as a key component of medical professionalism, MS PAS students must honor this trust.

Students are not to discuss a patient in any manner or situation that would reveal any information about that patient to any person not directly involved in the patient's health care. Students must refrain from discussing patients in public places, (i.e. cafeterias, elevators, etc.) where conversations may be overheard. Students should remind those who may be inappropriately discussing patient information, about patient confidentiality.

Students will adhere to ethical principles and use practical reasoning when dealing with patients at all times. No student should medically treat other MS PAS students, friends, or family members while a student is in the MS PAS Program.

All students will receive formal instruction on and must follow the Health Insurance and Portability and Accountability Act (HIPAA) rules when participating in clinical activities at affiliated hospitals and clinics; HIPAA compliance includes maintaining confidentiality of paper and electronic health records. When violations of HIPAA by a student are identified by a hospital, clinic, physician's office, etc., the violation will be reviewed by the APPRC. Disciplinary actions may which include remediation and/or sanctions, including the possibility of dismissal from the program.

### ***Dress Code***

Student professional dress and conduct should, at all times, reflect the dignity and standards of the medical profession. It is important that physician assistant students dress in a manner that is respectful to their professors, classmates, patients, interprofessional and administrative colleagues. The MS-PAS program has the authority to determine dress code requirements for students admitted to the program.

The dress code at various clinical sites may be more or less rigorous than the guidelines outlined below. If the culture of a particular clinical setting supports a dress code that is inconsistent with the policy outlined below, the student should discuss this with the clinical preceptor and the Director of Clinical Education to determine proper dress behavior for the student.

- Classroom Setting (classroom attire can be most appropriately described as "business casual")
  - **Men**

All shirts must have collars. 3-buttoned polo shirts, partial zipper shirts with collars are acceptable. Shirts with other than designer logos (e.g. corporate, political, personal statement, etc.) are not permitted. T-shirts are not permitted. Shirts should be tucked in unless the style specifically prohibits this (e.g. sweater-style). All buttons except the top button should be fastened. Acceptable pant styles are khakis, dress pants, trousers and corduroy pants. Jeans regardless of style and shorts are not permitted. Acceptable shoe styles include oxfords, lace-ups, and loafers. Sneakers, tennis shoes, sandals, flip-flops or other open-toed shoes are not permitted. Socks should be worn at all times.



- **Women**

Skirts and dresses should have hemlines no more than two inches above the knees. Avoid low-cut dresses or those with high slits. Pants such as khakis, corduroy pants, linen pants or dress pants are all acceptable. Jeans regardless of style and shorts are not permitted. For the upper body, blouses, sweaters, turtlenecks, vests, and sleeveless shirts are all acceptable. No T-shirts, exposed midriffs, halter-tops or tank tops. Avoid any skin-tight clothing on both upper and lower body. Acceptable footwear choices include leather shoes, moderate heels and tasteful open-toed shoes (unless lab/patient care activities are scheduled for that day). Flip-flops and sneakers are not permitted. Specific modifications to this dress code (e.g. for labs, clinical skills courses) are at the discretion of the course director. Students should keep appropriate changes of clothes in their lockers.

In both clinical and non-clinical settings all students should use discretion with fragrances, as patients, classmates and instructors may have allergies or sensitivities (see “Fragrance” below).

Jewelry and other adornments such as body piercing should be in good taste and consistent with policies established in clinical settings.

No clothing should be unprofessionally revealing regardless of student gender. Please consult your Faculty Advisor if you are unsure about this.

Whether in class or on your personal time, your personal appearance will reflect on Pfeiffer University and your chosen profession as a Physician Assistant.

- **Clinical Setting**

- **Identification in the Clinical Setting**

Proper identification must be clearly displayed identifying that the student is a Pfeiffer University MS-PAS student. Pfeiffer University MS-PAS student ID badges must be worn at all times. The ID badge must be worn so that it is easily readable by patients and hospital/clinic personnel. ID badges must not be obscured or altered in any manner except as determined by clinical necessity, (e.g. special stickers for newborn nursery access).

- **White Coats**

Student-style white coats are required for clinical settings and during certain laboratory sessions, simulation exercises, competency evaluations and any other times as designated by the Course Director; they must be clean and neat. They will possess the Pfeiffer University MS-PAS patch. Exceptions to this rule are at the discretion of the clinical preceptor and must be approved by the Director of Clinical Education. If wearing scrubs outside the operating area, a clean white coat should be worn over scrubs.

- **Scrubs**

In general, scrubs should not be worn outside of the hospital or clinic. Scrubs are expected to be clean when worn in a public area and should be covered with a white

coat. The ID Badge must be worn outside the white coat. Scrubs may be worn only as delineated by individual departmental/clinical policy.

- **Shoes**  
Footwear must be clean, in good condition, and appropriate. For safety reasons, open-toed shoes and sandals are not allowed in patient care areas or designated laboratory components of didactic courses.
- **Style**  
No sweatshirts or shirts with messages, lettering or logos (except the Pfeiffer University Falcon). No shorts, cut-offs, etc. Jeans are not to be worn even if it is clinic policy to allow providers to wear jeans. A tie is recommended for men, unless described as optional in specific policy for that clinical setting.
- **Fragrance**  
No wearing of colognes, perfumes or scented lotions in clinical settings as patients may be sensitive to fragrances.
- **Hands**  
Fingernails must be clean and short to allow for proper hand hygiene, use of instruments, prevention of glove puncture and injury to the patient. Artificial nails and decorative nail designs are prohibited. Some clinics/hospital settings do not permit any colored polish.
- **Hygiene**  
Daily hygiene must include personal cleanliness, including use of deodorant. Clothing should be clean, pressed, and in good condition, including the white coat.
- **Hair**  
Mustaches, hair longer than chin length, and beards must be clean and well-trimmed. Students with long hair who participate in patient care should wear hair tied back to avoid interfering with performance of procedures or having hair come into contact with patients.
- **Jewelry**  
Jewelry should not be functionally restrictive or excessive. Students should avoid wearing long or dangling earrings for their own and for patient safety. There should be no visible jewelry in body piercings with the exception of earrings. In the case of religious requirement, certain piercings may be acceptable. Please consult the Program Director or the Program Director's designee if you have a religious requirement for piercings. No other facial jewelry (e.g., tongue, eyebrow piercings, etc.) is allowed.
- **Tattoos**  
Tattoos shall be appropriately covered when possible.

Students in violation of any of the above dress codes may be asked to change into appropriate attire. Repeated violations will result in referral of the student to the APPRC for disciplinary action.

## Social Media and the Medical Professional

The Pfeiffer University Master of Science in Physician Assistant Studies supports the American Medical Association's (AMA) opinion titled "Professionalism in the Use of Social Media". The opinion has been quoted below with modifications to align with physician assistant education and practice. The original opinion is available at: <http://www.ama-assn.org/resources/doc/code-medical-ethics/9124a.pdf>

The Internet has created the ability for physician assistant (PA) students and PAs to easily communicate and share information with millions of people. Participating in social networking and other similar Internet opportunities can support a PAs personal expression, enable individual PAs to have a professional presence online, foster collegiality and camaraderie within the profession, and provide opportunity to widely disseminate public health messages and other health communications. Social networks, blogs, and other forms of communication online also create new challenges to the patient-provider relationship. PAs should weigh a number of considerations when maintaining a presence online:

- PAs should be cognizant of standards of patient privacy and confidentiality that must be maintained in all environments, including online, and must refrain from posting identifiable patient information online.
- When using the Internet for social networking, PAs should use privacy settings to safeguard personal information and content to the extent possible but should realize that privacy settings are not absolute and that once on the Internet, content is likely there permanently. Thus, PAs should routinely monitor their own Internet presence to ensure that the personal and professional information on their own sites and, to the extent possible, content posted about them by others, is accurate and appropriate.
- If they interact with patients on the Internet, PAs must maintain appropriate boundaries of the patient-provider relationship in accordance with professional ethical guidelines just, as they would in any other context.
- To maintain appropriate professional boundaries PAs should separate personal and professional content online.
- When PAs see content posted by colleagues that appears unprofessional, they have a responsibility to bring that content to the attention of the individual, so that he or she can remove it and/or take other appropriate actions. If the behavior significantly violates professional norms and the individual does not take appropriate action to resolve the situation, the PA should report the matter to appropriate authorities.
- PAs must recognize that actions online and posted content may negatively affect their reputations among patients and colleagues, may have consequences for their medical careers (particularly for PA students), and can undermine public trust in the medical profession.

### ***Program-Specific Social Media Expectations***

Pfeiffer University PA students and faculty should understand and adhere to the following guidelines and professional considerations when engaging in social media networking:

- Pfeiffer University PA Faculty and Staff members are not permitted to extend or accept “friend requests” to/from students.
- Classroom and clinical site training commitments should be respected. Students should not engage in social networking during in-class and on-site clinical time.
- The integrity of the coursework of the Pfeiffer University PA program, student, and classroom should be protected. Students should not share questions or answers to assignments, exams, or quizzes via social media.
- Patient privacy must be protected. Students should not share any identifiable patient or clinical information via social media. HIPAA laws apply to all social networking sites.
- Students should ensure accuracy regarding statements made about the Pfeiffer University PA program and its community members. Students should not provide false, intentionally inaccurate, or inflammatory comments.
- All laws governing copyright and fair use of copyrighted material must be followed.
- Students should recognize that one’s professional reputation can be affected through social networking and therefore be judicious when posting content.

### **Student Employment (A3.04, A3.05, A3.14h)**

The Pfeiffer University MS-PAS program does not require enrolled students to be employed by the program and strongly discourages any form of employment during their tenure with the program.

There will be no exceptions or accommodations granted to didactic or clinical course work, scheduling of classes, labs, exams, special assignments, community service work, or supervised clinical practice experience (SCPE) assignments due to employment.

Employment of any kind (paid/volunteer) during the program will not be accepted to excuse absence from scheduled learning activities, justify poor performance, or be considered as extenuating circumstances when assessing the students’ academic and professional progress.

The Pfeiffer University MS-PAS program does not permit matriculated students to substitute for or function as instructional faculty; nor are they allowed to work (paid or voluntary) for the program in any capacity.

During SCPEs, students may not substitute for clinical or administrative staff and must ensure all services provided to patients are directly supervised. Students must not accept compensation for any services provided during supervised clinical experiences.

Any violations to any component of this policy will result in referral to the Academic and Professional Performance Review Committee.

## Academic Standards (A3.17a)

### Overview

One of the overarching goals of the Pfeiffer University Master of Science in Physician Assistant Studies (MS-PAS) is to educate servant leaders who will successfully demonstrate entry level mastery of the Competencies of Physician Assistant Practice. To ensure that students are successfully achieving the expected competencies; they will be formally and frequently evaluated using a variety of assessment tools.

The program has developed this policy to provide appropriate guidance and feedback to those students who struggle to meet established instructional objectives and expected competencies. This policy guides administrative decisions and procedures regarding student progress, remediation and deceleration. All academic plans concerning student progress, remediation and deceleration will be individualized and implemented when deficiencies are identified.

### Grading Scale

Letter Grade	Score	Pass/Fail	GPA
A	89.5-100	High Pass (HP)	4.0
B	79.5-89.45	Pass (P)	3.0
C	69.5-79.45	Low Pass (LP)	2.0
Fail	<69.45	Fail (F)	0

### Progression in the Program (A3.17c)

Progression and continuance in the Pfeiffer University MS-PAS is not only based on scholastic achievement, but also professional performance and the ability to meet all requirements of the program.

All students must:

- Successfully complete each required course/rotation with a grade of 70% or higher and maintain an overall GPA of 3.0
- Successfully complete all examinations (written, practical, oral, simulation, and OSCEs) with a 70% or higher
- Comply with program standards of conduct and guidelines for ethical conduct

### Progression from the Didactic Phase to the Clinical Phase (A3.17c)

#### Clinical Phase Readiness Evaluation

In order to progress to the clinical phase of the program, the student must pass each element of the Clinical Phase Readiness Evaluation (CPRE) with a 70%. The CPRE is a program designed assessment that will be administered two weeks before the end of the didactic phase of the program, and will consist of the following:

- 200 question multiple choice question examination which follows the PANCE topic and task blueprint
- Perform one complete history and physical examination with written submission

- Perform one focused OSLER with written SOAP note
  - Focused History
  - Focused Physical Examination
  - Order and interpret diagnostic studies
  - Differential Diagnosis
  - Treatment plan
  - Follow-up and or referral

**Remediation of the Clinical Phase Readiness Evaluation (A3.17f)**

If a student fails to score a 70% in any element of the CPRE:

- The student will meet with their faculty advisor to review areas of weakness and deficiency
- An individualized remediation plan will be formulated which may include
  - A re-evaluation within one week of the time the CPRE was originally administered
  - A five (5) week deceleration with a prescribed plan of study and re-evaluation at the end of the deceleration period

Failure to score a 70% in the second CPRE the student will be referred to the APPRC to determine the appropriate steps moving forward which may include further remediation, deceleration, or dismissal.

**Degree Completion (A3.17c)**

All students must:

- Successfully complete each required course/rotation with a grade of 70% or higher and maintain an overall GPA 3.0
- Successful completion of the Graduate Research Project
- Complete the Physician Assistant Clinical Knowledge Rating and Assessment Test (PACKRAT) for self-assessment only
- Comply with program standards of conduct and guidelines for ethical conduct
- Successfully complete each element of the Summative Evaluation with a grade of 70% or higher
- Complete the Pfeiffer University MS-PAS National Commission on Certification of Physician Assistants Board Review Course

**Time to Completion (A3.17b)**

Currently enrolled MS-PAS students are expected to complete all curricular components in twenty-seven consecutive months, and in the prescribed sequence.

Deceleration **MAY ONLY** be offered to a student:

- Due to poor academic and/or professional performance.
- Upon recommendation of the Academic and Professional Performance Review committee
- For a maximum of 12 months

Please see Deceleration Policy below.

### ***General Considerations***

All students in the Pfeiffer University MS-PAS program will, at all times, possess one of five states of academic standing:

- Good Academic Standing
- Academic Warning
- Academic Probation
- Academic Separation
- Academic Dismissal

### **Definitions**

#### **Good Academic Standing**

- The student has successfully passed all assessments with 80% or greater
- All students will meet with their assigned academic advisor at the midpoint of each semester.

#### **Academic Warning**

- **Low risk:** score in any assessment between 70 - 80%. Risk level will be determined after each assessment.
  - **Low risk** students will be placed on **Academic Warning**
  - The Course Director notifies the student's academic advisor, the Director of Didactic Education and the Academic and the Professional Performance Review Committee (APPRC).
  - Course Director will formulate, document and implement an individualized academic plan that facilitates student success in achieving the instructional objectives and expected course competencies.
  - The student will review and sign a commitment statement stating that the student is fully committed to completing all components of the individualized academic plan, to attending mandatory monthly meetings with the Course Director, and that all questions and concerns were addressed.
  - The student will be referred to the Graduate Student Success Center for additional guidance and advisement.
  - Upon successful completion of all the components of the individualized academic plan the student will revert to Good Academic Standing.

#### **Academic Probation**

- **High risk:** score on any assessment <70%. Risk level will be determined after each assessment.
  - **High risk** students will be placed on "**Academic Probation**".
  - The Course Director notifies the student's academic advisor, the Director of Didactic Education and the APPRC.
  - Course Director will formulate, document and implement an individualized academic plan that facilitates student success in achieving the instructional objectives and expected course competencies.

- The student will review and sign a commitment statement stating that the student is fully committed to completing all components of the individualized academic plan, to attending mandatory weekly or biweekly meetings with the Course Director, and that all questions and concerns were addressed.
- The student will be referred to the Graduate Student Success Center for additional guidance and advisement.
- Upon successful completion of all the components of the individualized academic plan the student will revert to Good Academic Standing.

### **Academic Separation**

- **Academic Separation** is defined as failure of one course.
  - The Course Director notifies the student’s academic advisor, the Director of Didactic Education, the Program Director and the APPRC.
  - The APPRC will review the student’s course documents confirming failure of the course.
  - The Program Director will then authorize Academic Separation and notify the Dean of the Division of Applied Health Sciences.
  - The student will then enter the Deceleration Process (Please see Deceleration Policy)

### **Academic Dismissal**

- **Academic Dismissal** is defined as failure of two courses.
  - Students who fail two courses in the didactic phase will be dismissed from the program
  - The APPRC will review the student’s course documents confirming failure of the courses.
  - The Program Director will then authorize Academic Dismissal and notify the Dean of the Division of Applied Health Sciences.
  - If there is continued interest in the program; the student must re-apply and go through the entire admissions process.

*Each student will start the didactic phase of the program in “Good Academic Standing”.*

### **Deceleration Policy (A3.17f)**

- **Deceleration** is defined as the loss of a student from the entering cohort, who remains matriculated in the physician assistant program.
  - Note: The number of students in the program and those considered decelerated cannot exceed the maximum limit designated by our accrediting agency, the ARC-PA.
- **Procedure**
  - All students that are placed on Academic Separation will be offered a one-time opportunity to reenter at the point of the failed course.
  - The student has 5 business days from the date the final course grade is posted to submit their written acceptance of the one-time offer for deceleration to the Program Director via e-mail.



- The student will receive a written response from the Program Director acknowledging the student's acceptance into deceleration.
- An individualized academic plan of remediation will be discussed with the student.
- In order to be re-instated in the program the student must demonstrate competency in the knowledge and skills of all courses that were completed successfully.
- Reentry Requirements:
  - Because interruption of the educational process does not promote nor ensure currency of the medical knowledge needed to prepare the student to reenter at the point of the failed course, competence (covering the semester of the failed course and all prior semesters) must be proven by two examinations: a written and a clinical skills examination given the semester prior to the point of the failed course.
  - Competence must be demonstrated with a minimum of a 70% on the written examination **and** a minimum of 70% on the clinical skills examination in order to be permitted to reenter and progress to the next semester.
  - The learning objectives for both examinations will be the same as those presented during the didactic year. The dates for both the written and clinical examinations will be arranged by the faculty.
  - Upon successful completion of **each** examination the student will reenter at the point of the failed course
  - The failed course must be successfully repeated (the next semester it is offered) with a minimum of a 70% in order to progress to the next semester.
  - The student **must** audit all the courses that are offered in the semester that the failed course is offered.
  - Failure to successfully complete all reentry requirements listed above will result in dismissal from the Program.
  - After a period of five years, students may reapply to the program.

### **Academic and Clinical Remediation (A3.17f)**

A score of <70% on any assessment is considered a failing grade for the assessment.

Academic plans concerning remediation will be tailored to each student and may include but is not limited to:

- Study skills: Topics including study tips, study skills, time management, note taking, stress management, lifestyle modifications and others, as identified
- Learning Interventions: Topics/activities include applied student learning, mastery based learning, and reflective learning integrated with course content
- Content: Reinforcement of course content and subject matter through tutoring and learning activities with the course instructor(s) designed to promote content mastery
- Re-evaluation:
  - In the **didactic** phase of the program
    - Academic Competencies:
      - Students will be given an opportunity to sit with their exam and review the material they failed to show competence.
      - An individualized remediation plan will be made by the Director of Student Success and the Director of Didactic Education that will consist

of select review content and assessment from Rosh Review to facilitate student success in achieving the instructional objectives and expected course competencies

- The student will be required to demonstrate competence (by achieving a score of 80% or higher) in the areas assessed with the Rosh Review
- The student will also have access to tutors and may be required to meet with them regarding delinquent content areas
- Remediation process is mandatory; however, this will not result in replacement of a grade.
- Clinical Skill Competencies:
  - Competence **MUST** be demonstrated on all clinical skills competencies.
  - ALL failed assessments will **REQUIRE** re-assessment and demonstration of competence
  - Scheduling remediation of the failed content with the instructor and subsequent re-evaluation is the responsibility of the student and must be done within two weeks of the original assessment
  - Failure to complete re-evaluation or failure to show competence will result in a failing grade for the course and academic deceleration

### **Clinical Medicine I, II, III (A3.17f)**

Clinical Medicine I, II, and III are divided into modules, each module functions as its own “course” with specific instructional objectives, learning outcomes and expected competencies. Students must pass each module with a minimum score of 70%. ***Failure of a module after remediation is failure of the course, regardless of the composite grade for the course.***

- ***If a student fails a module***
  - The Course Director notifies the Director of Student Success and the Director of Didactic Education
  - An individualized remediation plan will be made by the Director of Student Success and the Director of Didactic Education consisting of select review material and a content-specific assessment from Rosh Review to be completed within two weeks of the original assessment
  - The student will be required to demonstrate competence (by achieving a score of 80% or higher) in the area(s) assessed by the Rosh Review assessment
  - Students are only allowed to be re-evaluated for grade improvement one time per semester
  - If the student fails, the re-assessment the student has failed the module and therefore failed the course regardless of the composite grade for the course
  - ***Failure of Clinical Medicine I, II or III will result in automatic Academic Deceleration***

### Summary of the Remediation Policy for Didactic Courses (Except Clinical Medicine I, II and III)

<p><b>Good Academic Standing</b></p> <ul style="list-style-type: none"> <li>➤ No failing grades</li> <li>➤ Meets all the expected competencies in all the didactic and clinical courses</li> </ul>	<p><b>Strategy</b></p> <ul style="list-style-type: none"> <li>➤ No remediation needed</li> </ul>	<p><b>Duration of Academic Standing</b></p> <ul style="list-style-type: none"> <li>➤ N/A</li> </ul>
<p><b>Academic Warning</b></p> <ul style="list-style-type: none"> <li>➤ Scoring between 70-80% on any assessment</li> </ul>	<p><b>Strategy</b></p> <ul style="list-style-type: none"> <li>➤ Referral to Graduate Student Success Center</li> <li>➤ Formulation of individualized academic plan</li> <li>➤ Mandatory review of material using Rosh Review</li> <li>➤ Mandatory regular meetings with Academic Advisor and/or the Director of Student Success</li> </ul>	<p><b>Duration of Academic Standing</b></p> <ul style="list-style-type: none"> <li>➤ Upon successful completion of the course in question the MS-PAS Academic and Professional Performance Review Committee will review all remediation documents and make recommendations regarding the student's academic standing</li> </ul>
<p><b>Academic Probation Standing Level II</b></p> <ul style="list-style-type: none"> <li>➤ Scoring &lt;70% in any assessment</li> </ul>	<p><b>Strategy</b></p> <ul style="list-style-type: none"> <li>➤ Referral to Graduate Student Success Center</li> <li>➤ Formulation of individualized academic plan</li> <li>➤ Mandatory review of material and reassessment via Rosh Review</li> <li>➤ Referral to and required meeting with course tutor(s)</li> <li>➤ Mandatory regular meetings with Academic Advisor and/or the Director of Student Success</li> </ul>	<p><b>Duration of Academic Standing</b></p> <ul style="list-style-type: none"> <li>➤ Upon successful completion of the course in question the MS-PAS Academic and Professional Performance Review Committee will review all remediation documents and make recommendations regarding the student's academic standing</li> </ul>
<p><b>Academic Separation Standing</b></p> <ul style="list-style-type: none"> <li>➤ Student fails one course</li> </ul>	<p><b>Strategy</b></p> <ul style="list-style-type: none"> <li>➤ The student will be removed from the current cohort</li> <li>➤ An individualized academic plan of remediation will be discussed with the student</li> <li>➤ In order to be re-instated in the cohort the student must demonstrate competency in the knowledge and skills of the courses that were completed successfully through a variety of assessment tools</li> <li>➤ This assessment will be administered towards the end of the semester prior to the semester when the failed course is offered within the course sequence of the program</li> </ul>	<p><b>Duration of Academic Standing</b></p> <ul style="list-style-type: none"> <li>➤ The student must wait until the failed course is offered within the course sequence of the program.</li> </ul>
<p><b>Academic Dismissal</b></p> <ul style="list-style-type: none"> <li>➤ Fails two courses</li> </ul>	<p><b>Strategy</b></p> <ul style="list-style-type: none"> <li>➤ The student will be dismissed from the program.</li> </ul>	<p><b>Duration of Academic Standing</b></p> <ul style="list-style-type: none"> <li>➤ If there is continued interest in the program; the student must re-apply and go through the entire admissions process.</li> </ul>

## Clinical Phase Remediation (A3.17f)

### Written Case Presentation

- If a student fails to score a minimum of 70% on the Written Case Presentation, the student will meet with their academic advisor to review deficiencies. The student must re-submit the Written Case Presentation with the corrections by 11:59 PM on the Friday of Clinical Seminar. The highest grade the student will receive is a 70%.

### Critical Appraisal of an article related to the written case

- If a student fails to score a minimum of 70% on the Critical Appraisal of an article related to the written case, the student will meet with their academic advisor to review deficiencies. The student must re-submit the Critical Appraisal with the corrections by 11:59 PM on the Friday of Clinical Seminar. The highest grade the student will receive is a 70%.

### EOR Examination

- The program uses the PAEA EOR standardized exams to evaluate the medical knowledge gained in core clinical rotations.
  - The exams are PASS/FAIL
  - Scores one and a half (1 ½) standard deviations below the mean are considered as FAIL
- Failure of one EOR examination will result in the following:
  - Review areas of weakness
  - Individualized remediation plan of study
  - Student will be re-assessed on the following Monday after Clinical Seminar Days
  - If the student passes the repeat examination, then he/she may move onto the next rotation
  - If the student fails:
    - Repeat the failed rotation at the end of the clinical phase of the program.
    - Failure of the repeated SCPE will result in a referral to the MS-PAS Academic and Professional Performance Review Committee for consideration of Academic Dismissal Standing
- Failure of two SCPEs
  - Review areas of weakness
  - Individualized remediation plan of study
  - Student will be re-assessed on the following Monday after Clinical Seminar Days
  - If the student passes the repeat examination, then he/she may move onto the next rotation
  - If the student fails:
    - Will result in a referral to the MS-PAS Academic and Professional Performance Review Committee for consideration of Academic Dismissal Standing

### OSCE

- If a student fails to score a minimum of 70% on the OSCE, the student will meet with their academic advisor to review deficiencies. The student will be re-evaluated on Friday afternoon of Clinical Seminar. The highest grade the student will receive is a 70%.

### Preceptor Evaluation

- If a student fails to score a minimum of 70% on the Preceptor evaluation, the DCE or a designee will meet (in person or virtually) with the preceptor to discuss the reasons why the student received the failing grade, and gather any supporting documents from the preceptor and their staff.
- The DCE will then meet with the student to discuss the Preceptor Evaluation on Friday afternoon of the Clinical Seminar.
- If there are no evidence of extenuating circumstances, the student must repeat the clinical rotation at the end of clinical phase of the program. This may result in delay of completion of the program and graduation.
- The student may appeal to the APPRC by means of the appeals process. The student must request the appeal by 11:59 PM (EST) the Sunday after the Clinical Seminar. Please refer to Appeals Process in this handbook.

### **Summative Evaluation (C3.04)**

The Pfeiffer University MS PAS program conducts a summative evaluation of each student within the final four months of the program. The purpose of the summative evaluation is to verify and validate that each student has successfully achieved the **Learning Outcomes and Expected Competencies** established by the program; and are necessary to enter clinical practice. The assessments composing the summative evaluation correlate with all didactic and clinical curricular components of the program. The elements of the summative evaluation are as follows:

- 200 Multiple Choice Examination
- Performance of a Complete Physical Examination OSLER
- Documentation of a Complete History and Physical
- Successful completion of three (3) OSCEs
- Documentation of a SOAP note of one of the OSCE scenarios
- Formulation of a research question on the chosen scenario, using the PICO format; and Critical Appraisal of one article related to the research question
- Formulation of a performance improvement plan regarding a challenge identified on SCPE#5
- 500 word reflection essay on their role as a Physician Assistant regarding one of the following topics:
  - Health Disparities
  - Social Justice in Medicine
  - Community Health Advocacy

Students must score a minimum of 70% on each of the highlighted assessments. If a student fails to achieve this benchmark:

- The student will meet with their academic advisor to review areas of weakness and deficiency
- An individualized remediation plan will be formulated
- The student will be re-evaluated on Friday afternoon of the following Clinical Seminar

Failure to achieve the established benchmark on the re-assessment will result in a referral to the APPRC, which may recommend deceleration or dismissal from the program.

### **Academic and Professional Performance Review Committee (APPRC)**

### **Academic and Professional Performance Review Committee**

The Pfeiffer University Master of Science in Physician Assistant Studies has established a fair and formal process for taking any action that may affect the status of any physician assistant student who does not meet the established standards of academic and professionalism performance. The process is generally positive in approach and committed to supporting students in the successful completion of the course study required by the program. Elements essential to the effectiveness of the process include but are not limited to: timely notice of the impending action, disclosure of the evidence on which the action would be based, an opportunity for the physician assistant student to respond, and an opportunity to appeal any adverse decision related to advancement, graduation, or dismissal.

The Academic Performance and Professionalism Review Committee (APPRC) is charged with the responsibility of systematically reviewing the academic performance (didactic and clinical phases) and professional behaviors of each physician assistant student, in order to make appropriate recommendations to the Program Director regarding graduation, progression, deceleration, remediation, academic probation, dismissal and readmission. The committee, in consultation with course directors, will also participate directly in the placement of students on probation and in the design remediation for deficiencies.

Additionally, the APPRC serves to ensure that the policies outlined in all program policy manuals (including this document) are applied in a fair and equitable manner to all students. However, claims of discrimination, including retaliation, and sexual harassment should be submitted to the Pfeiffer University Office of Academic Affairs by the student.

### **Composition**

The APPRC will be comprised of the following:

#### ***Voting Members (by appointment)***

- Medical Director of the MS-PAS program
- Two Principal Faculty of the MS-PAS program
- One Instructional Faculty (didactic phase)
- One Clinical Preceptor (clinical phase)

#### ***Ex-officio (Non-voting) Members (by invitation)***

- Institutional representatives that may provide support and insight as to the student's performance and intentional or unintentional results of committee actions (i.e. course directors, registrar, financial aid, university legal counsel)

All members are appointed by the Program Director. The Medical Director will serve as chair of the committee at all times.

## **Continuity**

The MS-PAS program has an appointed APPRC for each cohort of students. The committee is identified by the anticipated graduation year of the entering cohort (i.e. APPRC Class of 2022). This provides the committee greater insight into the abilities of the students as they progress through the prescribed course of study.

## **Requirements for Quorum and Adoptive Action for the Committee**

- A quorum for any regular or called meeting of the committee shall be defined as more than half of the voting members.
- All actions of the committee require a simple majority vote of those voting members in attendance.
- In extenuating circumstances only, a voting member who is unable to attend an APPRC meeting or who must recuse themselves from voting may delegate a proxy from among the non-voting members. If the committee chair is unable to attend, he/she will designate an acting chair for that meeting only.

## **Confidentiality**

All deliberations and proceedings of the APPRC are confidential. Except as specified in this policy, the meetings are closed to persons other than individuals specifically authorized by the Program Director. Faculty must be apprised of the confidential nature of the information.

## **Evaluation Process**

### ***Ongoing Review***

- End of Semester
  - The APPRC will meet following the completion of each semester to review the academic progress of each student. The committee will verify and validate that students are achieving the learning outcomes and expected competencies and will move on to the next semester based on Student Progression Reports prepared by the Directors of Didactic and Clinical Education. The committee, in consultation with the Directors of Didactic and Clinical Education, will review recommended action plans for students whose academic or professionalism performance warrants intervention.
- Progression from Didactic to Clinical Phase
  - The APPRC will meet following the completion of the didactic phase to review the academic progress of each student and determine progression to the clinical phase. The committee will verify and validate that students have demonstrated the learning outcomes and expected competencies based on Student Progression Reports prepared

by the Directors of Didactic and Clinical Education. The committee, in consultation with the Directors of Didactic and Clinical Education, will review recommended action plans for students whose academic or professionalism performance warrants intervention.

- Graduation
  - The APPRC will meet following the completion of the clinical phase and the summative evaluation to verify and validate successful completion of all components of the program and recommend student for graduation. The committee will confirm that students have demonstrated the learning outcomes and expected competencies based on Student Progression Reports prepared by the Directors of Didactic and Clinical Education. The committee, in consultation with the Directors of Didactic and Clinical Education, will review recommended action plans for students whose academic or professionalism performance warrants intervention.

### ***Episodic Review***

- The program has developed a policy for progression, remediation and deceleration to provide appropriate guidance and feedback to those students who struggle to meet established instructional objectives and expected competencies. This policy guides administrative decisions and procedures regarding student progress, remediation and deceleration. All academic plans concerning student progress, remediation and deceleration will be individualized and implemented when deficiencies are identified.
- The APPRC will utilize the Student Academic Progress Report with recommendations submitted by the Directors of Didactic and Clinical Education. Students who may have a potential impending committee action are to be notified in writing (e-mail) by the APPRC. Students will be given the opportunity to provide additional information either prior to the meeting or meet with the APPRC at the scheduled meeting. APPRC meetings are scheduled 5 to 15 business days following the notification to students facing action, in order to provide adequate time for the student to prepare for the meeting, while also ensuring that recommendations are made in a timely manner.

### **Evaluation Process**

- The APPRC will use the following process for evaluation:
  - Each student is considered individually with emphasis upon quality of performance
  - The APPRC shall review the academic performance (didactic and clinical phases) and professionalism of each physician assistant student facing potential committee action, recommendations made by the Directors of Didactic or Clinical Education, and any additional information provided by other parties (i.e. course directors, administrative support staff or students).
  - The APPRC shall make recommendations regarding advancement, graduation, monitoring status, probation, dismissal, remediation, leaves of absence, and re-enrollment.



- The committee will review the performance of students in academic difficulty, those students demonstrating a potential for being in academic difficulty, and those students who have exhibited unprofessional behavior or non-compliance with other standards of performance, as identified by the program faculty.
- The APPRC may recommend an improvement plan, may develop more comprehensive longer-term remedial plans for those students having difficulty, or implement appropriate disciplinary action, possibly including dismissal from the educational program.
- Special meetings of the APPRC may be called when reports of unprofessional behavior or other serious concerns regarding a student's academic performance. After review, a student will receive written notification of the complaint/incident and that it has been referred to the APPRC. The APPRC may recommend an improvement plan, may develop more comprehensive longer-term remedial plans for those students having difficulty, or implement appropriate disciplinary action, possibly including dismissal from the educational program.
- The committee chair will notify the program director of the committee's recommendation regarding potential action plans for ratification.
- The committee chair will notify each student of the committee's recommendation regarding potential actions and provide the student with an opportunity to appeal that recommendation if they desire.
- The dean has final authority regarding an appropriate course of action for each student.

## **Hearings and Appeals**

### **Hearing Procedure**

#### ***Information Gathering***

In the event that a matter is referred to the APPRC for evaluation and recommendation, the APPRC has the authority to gather information concerning the matter to assist with its deliberation and evaluation of the matter in the context of the student's academic performance and overall professionalism. The APPRC may convene meetings for any purpose including assisting with preparation for the APPRC hearing.

#### ***Meeting with Student and Confidentiality***

All student meetings are conducted in private. During the meeting with the student, the student is advised of the information that forms the basis of the inquiry or allegation; the student then has an opportunity to respond to the information presented. The student may have an individual present to provide support and advice; however, that individual may only advise the student and may not address the APPRC member(s) directly or examine or cross-examine witnesses. The student does not have the right to be represented by an attorney, and no attorney shall be permitted to attend the meeting on the student's behalf or in any other capacity. The APPRC allows witnesses to the incident, if any, to present pertinent information at the meeting with the student. The chair has the authority to exclude witnesses who provide redundant or duplicative information. Character witnesses shall not be permitted to testify at hearings. If witnesses make presentations at any hearing, the student shall be entitled to pose relevant questions to such witnesses. The APPRC considers the information it has gathered and any additional information provided by the student and makes written findings of fact and recommendations based upon its assessment of the information presented. Such findings and

recommendations shall be provided to the program director within 10 business days of the conclusion of the hearing.

### ***Quorum and Voting***

A quorum consists of at least three voting members of the APPRC. A recommendation is adopted when approved by a simple majority of the members present. A recommendation to expel a student from the MS PAS program must be approved by three-fifths of the entire APPRC.

### ***Record of Hearing***

Written decisions serve as the official records of a hearing.

### ***MS PAS Student Evaluation and Promotion Committee Recommendations.***

The APPRC makes one or more of the following recommendations regarding the disposition of a matter of professional fitness considered by the Committee:

- Find that the matter does not warrant action;
- Issue a written reprimand or warning;
- Allow the student to repeat or otherwise remediate academic deficiencies;
- Allow the student to continue on a modified academic schedule;
- Refer the student for counseling or psychological evaluation;
- Place the student on probation with such conditions as deemed appropriate;
- Suspend the student or place the student on leave of absence for a specified time or until specific conditions are met;
- Suspend the student for a period of time;
- Expel the student.

The APPRC may recommend to the program director removal of a student's probation once the student has fulfilled the conditions of probation.

### ***Responsibilities of the Program Director***

The APPRC's recommended action steps are reviewed by the program director for, among other things, logistical viability (faculty workload, support services, etc.). The program director either accepts, amends, or rejects the plan. The APPRC findings and recommendations with modifications, if any, are sent to the affected student within 5 business days of the program director's receipt of the APPRC's written report notifying the student of the proposed findings and recommendations. A student may schedule an appointment with the program director to discuss the proposed findings and recommendations prior to the program director making them final. The appointment must be requested in writing and received by the program director no more than 3 business days after the student receives written notification of the proposed findings and recommendations by the APPRC. If a meeting is requested, it will take place promptly. Within 5 days of the meeting between the program director and the affected student or within 8 days of notice to the student if no meeting is requested, the program director finalizes the written findings and recommendations and provides notice to the student of the same and forwards the written findings and recommendations to the Dean of the Division of Applied Health Sciences for review. The Dean reviews the findings and recommendations and affirms or amends the findings and recommendations. Once the Dean has affirmed or amended the program director's findings and recommendations, the student is notified by the program director.

### ***Student Appeals***

A decision of the Dean of the Division of Applied Health Sciences may be appealed for the following reasons:

- There has been a violation of the student's due process rights as outlined in the hearing procedures above;
- The severity of the sanction is not justified by the nature of the misconduct;
- New, relevant information not available during the earlier proceedings is made available, and the new information could have substantially affected the outcome of the hearing.

The appeal must be in writing, specify in detail the alleged procedural impropriety, and must be filed in the Office of the Provost within 14 calendar days of the date of receipt of the Dean's decision. The provost, or a designee, shall review the appeal and the record of the formal hearing and issue a decision. The decision of the Office of the Provost is final agency action.

### **Referrals for Counseling (A3.10)**

The Pfeiffer University Master of Science in Physician Assistant Studies (MS-PAS) program considers the wellness of its students of utmost importance. Therefore, the program has developed the following policy in order to address students facing personal issues that may impact their progress in the program

An appropriate and timely referral to the Academic and Professional Review Committee (APPRC) as soon as the MS-PAS program director, medical director, principal and/or instructional faculty have knowledge of a student facing personal issues that may impact their progress in the program. The APPRC may recommend a student to receive professional care for a variety of problems (e.g. emotional, addictive or psychiatric disorders).

The program has partnered with Monarch Behavioral Health Services located at 350 Pee Dee Ave., Ste. A, Albemarle, NC 28001 who has agreed to provide behavioral health services regardless of the student's insurance status.

If a student is directed to seek these services, the student has a choice of choosing resources recommended by the university or other resources arranged by the student her/himself.

Verification that the student has received these services may be required. In addition, the APPRC may require that the student have his/her counselor/physician submit information and/or recommendation to the committee chair relating to the student's academic program.

If a student is directed to arrange for such services, but does not do so, the APPRC may evaluate the student's professional attitudes.

### **Grade Appeal (3.17d)**

If a student believes an error has been made regarding a course grade, he/she should contact the faculty course director immediately after the grade is posted to set up a meeting to discuss the grade. It is the student's responsibility to demonstrate that the appeal has merit therefore, the student should bring to the meeting any evidence that the grade was assigned in an erroneously.

At the meeting, the professor will:

1. Review the evidence the student has submitted
2. Present any of the student's work that remains in the Course Director's possession (e.g., papers, examinations, etc.)
3. Explain how the student's grade was determined based on the guidelines presented at the beginning of the course and in the course syllabus
4. Recalculate the numerical computation of the grade to determine if there has been a clerical error

If the student wishes to continue the appeal following this meeting, he or she must file a written appeal with the Program Director within one week of the meeting. If the Program Director is the professor involved, the written appeal will go to the Dean of Applied Health Sciences. The student will submit to the Program Director the Student Grade Appeal Statement Form together with copies of the course syllabus, tests, assignments, and papers in the student's possession. The Program Director will notify the Course Director, and the professor will file the Course Director Grade Appeal Statement Form with the Program Director within one week together with copies of the syllabus, assignments, and any of the student's work that remain in the Course Director's possession. The Program Director, following consultation with the Dean, will render a decision in writing regarding the grade appeal within one week.

All decisions regarding course grade appeals made by the Dean of Applied Health Sciences are considered final.

## Attendance

- ***Didactic Phase***

Due to the intense rigor and rapid pace of the program, attendance for all classes, labs and curriculum related activities is mandatory. Students are expected to be on time for class and should plan their schedules accordingly. Medical and personal appointments should be scheduled on evenings or weekends, as much as possible.

Requests for excused absences must be submitted to the Director of Didactic Education and Course Director using the program's "Didactic Phase Absence Request Form" prior to the absence. All absences due to illness, accident or other unexpected personal or family events must be reported via e-mail or office phone number; to the Director of Didactic Education, the Course Director and the Didactic Support Coordinator as soon as the student is aware that he/she may miss class time. All other absences that are not pre-approved by the Director of Didactic Education and Course Director will be considered unexcused. An obligation for a professional organization responsibility may be considered. Requests for social events (early start to vacation, family reunion, weddings etc.) will not be granted. Only urgent medical or emergent absences will be excused on exam days.

- Unexcused absences, repeated absences or repeated tardiness is considered unprofessional behavior and may be grounds for disciplinary action.
- One incident of tardiness or unexcused absence will result in meeting with the Director of Didactic Education for a verbal warning
- Two incidents of tardiness or unexcused absences will result in a referral to the APPRC for disciplinary action that may result in probation or dismissal

- ***Clinical Phase***

***ATTENDANCE IS MANDATORY.***

Attendance and Timeliness is a demonstration of professional behavior and conduct which impacts all members of the healthcare team, including fellow students and patients. Any absence from the clinical rotation may have a direct impact on student performance, the broad-spectrum clinical experience, evaluation of professionalism, overall grade, and the successful completion of the clinical rotation.

The PA student should be involved in all activities that the preceptor would engage in during the clinical day. Students are not exempt from on-call, evening, weekend, or holiday clinical responsibilities unless the preceptor has determined these activities are not contributory to the students' learning experience.

Students are expected to attend all scheduled clinical rotation didactic conferences, lectures, workshops, and daily patient rounds. Mandatory sessions and participation requirements in the clinical phase are determined by the individual clinical rotation. Recognizing that situations arise that require students to miss time from their lectures/clinical responsibilities, the procedures presented below will be followed when an unplanned absence is necessary.

- In the event of an illness or emergency necessitating absence from the clinical rotation, students must notify both the DCE and the clinical preceptor by 9:00am on the day of the absence. Students should make every effort to reach, by phone, the clinical preceptor and DCE rather than utilizing voicemail and email. Students are required to submit appropriate documentation supporting the reason for any unplanned absence(s).
- Failure to report an absence the student will be required to make up the time missed from the clinical rotation and a 5-point deduction on the Clinical Preceptor End of Rotation Clinical Performance Evaluation.
- Students are required to submit a written request for approval of any anticipated absence, to the DCE, prior to the absence. The DCE will communicate with the student regarding details of the anticipated absence, preceptor notification and preceptor approval. Students should not seek approval from the preceptor without prior approval by the DCE lest this be considered an unexcused absence.
- If a student misses up to five (5) days on any rotation, he/she must discuss with the preceptor ways to make-up the missed time. If there is no opportunity for the student to make up the missed days at that clinical site, the student must discuss make-up time at another clinical site with the DCE. If there are no available clinical rotation site contiguous with the current cycle, the student will receive a grade of Incomplete until the hours have been made up.
- In the event that a student misses more than five (5) days on any rotation for an excused absence, they will be required to repeat the rotation.
- Students may be required by some clinical sites to engage in clinical or educational activities during the evenings and/or weekends.
- If the preceptor or his/her designee is unavailable to work with the student for 2 or more scheduled clinical days (e.g. vacation, scheduled days off, etc.), the student is required to notify the DCE so that an alternate assignment may be made.
- Students are required to return to campus at the completion of each rotation for academic and professional activities such as case presentations, End-of-Rotation Exams, OSCEs, and other designated program endeavors.

#### **Timeliness**

- If a student arrives to the clinical site 30 minutes late or leaves the clinical site 30 minutes early, he/she is required to notify the Clinical Preceptor and the DCE immediately.
- If a student accumulates lateness hours totaling 5 hours this constitutes 1 unexcused absence. The procedure and policy for unexcused absences will then be applied.

#### **Professional Activities**

- Absence from a clinical site during a PA educational conference (e.g., AAPA, NCAPA) for the purpose of conference attendance may be permitted with the permission of the DCE in consultation with the Program Director. The student is still responsible for ensuring that any rotation benchmarks are not compromised by conference attendance.

Consideration will be given for activities such as elected student representation to various committees and/or organizations. The student must provide the documentation requested to DCE. The DCE will respond to the student's request in writing. Students who miss scheduled hours are expected to acquire the same level of competency as other students involved in the clinical rotation. Lectures, reading assignments and workload will not be re-created or offset to accommodate any absences.

### **Tardiness during an Examination (Didactic and Clinical Phase)**

If a student arrives late for an examination, the examination will commence upon his/her arrival. However, no allowances for extra time will be given. The student who is tardy will still be required to end the examination within the same timeframe time as the rest of the class. Tardiness is considered unprofessional behavior and will result in referral to the APPRC.

### **Missed Examinations or Assignments Due to an Absence (Didactic and Clinical Phase)**

Students are expected to be present for all scheduled examinations, written or practical, and any assignments. Assignments include but are not limited to hospital visits, group interactive case-based sessions, and critical thinking sessions.

- Documented Absence

Only urgent medical or emergent absences will be excused on exam days. Absences where students will miss a written test or practical examination, students **must** provide a reasonable form of evidence to the Course Director and the Director of Didactic Education (didactic phase students), or the Director of Clinical Education (clinical phase students). The Director of Didactic Education and the Director of Clinical Education will take the evidence presented in consideration and determine if a make-up exam will be granted.

- Unexcused Absence\*

Unexcused absences from an examination will result in a score of 0 (zero) for the examination.

Whether the student is permitted to complete a make-up examination or assignment, is at the discretion of the Course Director. The date and time of the make-up will be determined by the Course Director. The content and format of the make-up examination or assignment may differ from that of the original examination or assignment and will be determined by the Course Director. The maximum score a student can earn on an UNEXCUSED make-up examination is the minimum passing score for the examination (77%). If the student is not present for the scheduled make-up, he/she will receive a grade of zero for that examination or assignment. The Director of Didactic Education, Director of Clinical Education and the Program Director will be informed. The student will then be referred to the Academic and Professional Performance Review Committee for disciplinary action which may include dismissal from the program.

The first tardiness or absence from a scheduled examination will result in Academic Warning. If a student is absent from a scheduled examination or assignment more than twice during a semester in any course(s), the student will be referred to the Academic and Professional Performance Review Committee (even if a make-up exam was completed successfully). Excessive absences, even for documented illness, injury, or family emergency may interfere with the student's ability to successfully complete a course or remain enrolled in the program.

## **Religious Observances**

All students, faculty, and staff at Pfeiffer University have a right to expect that the University will reasonably accommodate their religious observances, practices and beliefs. The University, through its faculty, will make every attempt to schedule required classes and examinations in view of customarily observed religious holidays of those religious groups or communities comprising the University's constituency.

No student shall be compelled to attend class or sit for an examination at a day or time prohibited by his or her religious belief. Students are expected to attend all sessions at assigned times unless granted an excused absence by the Course Director.

Students are expected to notify the Course Directors if they intend to be absent for any lecture, PBL, and/or lab session, in accordance with this policy, prior to the scheduled religious holiday. Students absent for religious reasons will be given reasonable opportunities to make up any work missed. Any student who believes that he or she has been treated unfairly with regard to the above should contact the Pfeiffer University Office of Academic Affairs.

## **Leave of Absence**

### ***Definition***

A Leave of Absence is defined as a temporary break in a student's attendance of five (5) days or longer.

### ***Guidelines for Leave of Absence***

In the event of a serious medical condition (including psychiatric illness), familial or personal circumstances that significantly impact the student's progress in the MS PAS program; a leave of absence may be requested by the student. Students may request a leave of absence and deceleration for up to one year in length. All requests must be made in writing to the Program Director.

The MS PAS program reserves the right to determine the conditions for re-entry after any leave of absence. Coursework, exams, and clinical experiences missed during any leave must be made-up within a time-frame agreed upon by the Course Director and the Program Director before the student may continue in the program in good standing. Additional tuition may be required to complete the program after re-entry.

### ***Voluntary***

- Voluntary Leaves of Absence must be for a specified period of time with an expected date of re-enrollment.
- A student in good academic standing, without deficiencies, may request and be approved for a Leave of Absence for a fixed period of time as a result of a health problem or other personal circumstances that may impact the student's academic performance.
- The student must submit the request in writing to the Program Director.

### ***Involuntary***

- The APPRC may recommend that a student be placed on a Leave of Absence if the student is deemed capable of completing the MS PAS program within the allotted time limits of the MS PAS program, but has current non-academic problems that make ongoing enrollment detrimental to the student's best interest.



- If the student disagrees with the recommendation, the procedure for an appeal may be initiated by the student (see Appeals Process section in Remediation, Deceleration and Dismissal Policy).

All decisions regarding leave of absence (voluntary or involuntary) are made by the MS PAS principal faculty, Program Director, and in consultation with the Dean of the Division of Applied Health Sciences.

#### **Petition for Readmission Following Leave of Absence**

- Readmission into the program following a leave of absence is not guaranteed.
- The student must notify the Program Director and the Director of Didactic Education (for Year 1) or the Director of Clinical Education (for Year 2) of intent to resume enrollment in writing at least one month prior to return to the MS PAS Program.
- Requests for reinstatement must be made in writing. The student must present evidence that the problem leading to the leave of absence has been resolved such that success in this program will follow if the student is reinstated. Reinstatement is also dependent on the availability of clinical training sites.
- Students who are on a Leave of Absence specified by the APPRC must fulfill all requirements specified in their letter from the APPRC prior to return to the MS PAS Program.
- Students placed on Leave of Absence may maintain such status for a maximum of one (1) year. In order to return to enrollment, the student must petition the APPRC within the time period allowed. The APPRC will consider petitions for readmission regardless of the reason enrollment was discontinued. When petitioning to the APPRC, the student must submit information that will support that return to enrollment is justified. This is required regardless of the reason for leave.
- Petitions for readmission may be considered at any regular or called meeting of the APPRC. The time of readmission will be based upon that which is deemed most appropriate to the student's status and scheduled by the APPRC.
- Students may be required to repeat parts of the curriculum that have previously been successfully completed.
- Readmission may be denied if all available seats are filled, even if the student meets all other qualifications for admission.

## **Withdrawal (A3.17e)**

Withdrawal from the Pfeiffer University MS PAS program should only be considered after a judicious and thorough assessment of the academic, financial, and personal impacts from such action. Prior to requesting an official withdrawal from the program, students should discuss options with their faculty advisor and the program director.

Students may withdraw from the MS PAS program at their discretion, and at any time. Unless a leave of absence is requested and granted (see Leave of Absence Policy), withdrawal from any individual course will not allow a student to progress in the program and therefore constitutes withdrawal from the entire program. There is no “partial withdrawal” or “part-time” status in the MS PAS program.

### **Process:**

- **Official Withdrawal**
  - The student must submit a withdrawal letter in writing to their faculty advisor, the Program Director, the Dean of the Division of Applied Health Sciences, and the office of the Registrar.
  - The student must complete all required forms as per Withdrawal Policy stated in the Pfeiffer University Graduate Catalog
- **Unofficial Withdrawal**
  - Students will be considered as having withdrawn from the program and the university after two consecutive weeks of unexplained absence and/or academic inactivity.

## **Dismissal Policy (A3.17e)**

### **Academic Dismissal**

- **Academic Dismissal** is defined as failure of two courses.
  - **Didactic Phase**
    - Students who fail two courses, after completion of an individualized plan of remediation as per policy, in the didactic phase will be dismissed from the program.
    - The APPRC will review the student’s course documents confirming failure of the courses.
    - The Program Director will then authorize Academic Dismissal and notify the Dean of the Division of Applied Health Sciences.
    - If there is continued interest in the program; the student must re-apply and go through the entire admissions process.
  - **Clinical Phase**
    - Please refer to *Clinical Phase Remediation*

## Dismissal due to Unprofessional Behavior

- **Unprofessional Behaviors**

- Examples of unprofessional behaviors that **will** result in **prompt** referral to the Academic and Professional Performance Committee (APPRC) and **dismissal** from the program\*:
  - Violation of principles related to academic integrity (i.e. evidence of cheating on an assignment or test), and plagiarism as outlined by the Pfeiffer University Honor Code
  - Student intoxication or presumed intoxication from alcohol, prescription, or other drugs
  - Student communication or interaction that is openly discriminatory, demeaning, or could reasonably be perceived as mentally or physically harmful to others, including but limited to faculty, students, patients, patient's family or caregivers, and healthcare providers.

\*The program reserves the right to determine the degree of egregiousness of the behavior.

## **Student Grievances and Allegations of Harassment (A3.17g)**

In compliance with federal and state laws, it is the policy of Pfeiffer University to prohibit unlawful harassment and sexual misconduct by any person and in any form.

For more information regarding the Pfeiffer University's Student Grievance and Allegations of Harassment Policy

Title IX <http://www.pfeiffer.edu/pfeiffer-university-title-ix-policy>

### **Policy**

Policies and Procedures for Processing Student Grievances and Allegations of Harassment<sup>1</sup> Policy In compliance with federal and state laws, it is the policy of Pfeiffer University to prohibit unlawful harassment and sexual misconduct by any person and in any form. TITLE IX Pfeiffer University is committed to providing equal access to its educational programs, activities, and facilities to all otherwise qualified students without discrimination on the basis of race, national origin, color, creed, religion, sex, age, disability, veteran status, sexual orientation, gender identity, or any other category protected by applicable state or federal law. An equal opportunity employer, Pfeiffer affirms its commitment to nondiscrimination in its employment policies and practices. In compliance with Title IX (20 U.S.C Sec. 1681 et seq.) Pfeiffer University prohibits sex discrimination, including sexual harassment. For student-related disability discrimination concerns, contact the disability services coordinator, 704-463-3366. For all other concerns, including any arising under Title IX, contact the director of human resources, who is also Pfeiffer's Title IX Coordinator, 704-463-3067.

For more information regarding the Pfeiffer University's Student Grievance (Complaints) Policy, please see:

<http://www.pfeiffer.edu/pfeiffer-policies>

## **Health Requirements (A3.07, A3.19b, A3.21)**

The Pfeiffer University Master of Science in Physician Assistant Studies (MS-PAS) program considers the health, safety and welfare of its faculty, student body, staff and the community we serve of utmost importance. Therefore, based on the [Centers for Disease Control Recommended Vaccines for Healthcare Workers](#) most recent guidelines; the program has developed the following policy in order to safeguard the wellbeing of all.

### ***Required Drug Screen***

- All students who have been offered conditional acceptance must successfully pass an initial chain of custody drug screen.
- All matriculated students must complete and successfully pass a second chain of custody drug screen upon completion of the didactic phase prior to entering the clinical phase of the program.
- Additional chain of custody drug screens and "for cause" testing for any student suspected of being under the influence of unlawful drugs or alcohol during their course of study remains at the discretion of affiliated hospitals or clinics and/or the PU MS-PAS program.
- A student may be prevented from progressing in the program's didactic phase, being promoted to the clinical phase of the program, or being recommended for graduation if the student fails a chain of custody drug screen. Therefore, the PU MS-PAS program reserves the right to withdraw offers of conditional acceptance if the candidate fails the initial chain of custody drug screen.

### ***Required Physical Examination***

- A comprehensive physical examination by a licensed medical provider (DO, MD, PA or NP) must be completed indicating that the conditionally accepted applicant is appropriately screened for TB, current on all immunization requirements, and has been medically cleared for admission. The Student Health Packet includes instructions and the following forms:
  - Medical History
  - Physical Examination
  - Immunization Verification\*
  - Health Attestation Form
  - Chain of Custody Drug screen
  - All students must have a second physical examination conducted by licensed medical provider (DO, MD, PA, or NP) prior to starting the clinical phase of the program indicating that the conditionally accepted applicant is appropriately screened for TB, current on all immunization requirements, and has been medically cleared for admission.

### ***Immunizations***

Immunization requirements based on the most current standards set by the Center for Disease Control (CDC) for Health Professionals.

All students must complete the following requirements prior to matriculation:

- **Tuberculosis (TB) Screening:**
  - The student must submit documentation of ONE of the following:
    - Results of NEGATIVE "Two-Step" TB Skin Testing (TST/PPD)
      - This screening requires 2 separate TB skin tests administered at least one week apart but within 12 months of each other.

- The last TST must be within 6 months of your start date.
      - Lab Copy showing a “NEGATIVE” Interferon Gamma Release Assay (IGRA) blood test (QFT or T-Spot) within 6 months of start date (accepted in lieu of the “Two-Step” TST).
  - Individuals with a history of a POSITIVE TB skin test or IGRA blood test must submit both of the following:
    - Verification of a NEGATIVE Chest X-ray within 12 months of start date and
    - A current NEGATIVE Screening Questionnaire
- **Rubella (German Measles):**
  - Serologic documentation of a positive Rubella immune titer OR immunization with at least one dose of live Rubella or MMR vaccine after 12 months of age.
- **Measles (Rubeola):**
  - Serologic documentation of a positive Rubeola immune titer OR immunization with two doses of live Rubeola or MMR vaccine administered after 12 months of age and separated by 28 days or more
- **Mumps:**
  - Serologic documentation of a positive Mumps immune titer OR immunization with at least two doses of live Mumps or MMR vaccine after 12 month of age.
- **Varicella (Chicken Pox):**
  - Serologic documentation of a positive Varicella titer OR two Varicella immunizations (given 4 to 8 weeks apart).
  - This requirement is satisfied only by a positive titer or the vaccine series.
- **Hepatitis B “Positive” Quantitative Surface Antibody Titer (Blood Test):**
  - Serologic documentation of a Positive (QUANTITATIVE) Hepatitis B surface antibody titer that verifies IMMUNITY to the Hepatitis B Virus.
  - The TITER is required in addition to completion of the vaccination series.
  - The results should be reported as “POSITIVE” or as a number.
  - “REACTIVE” results will NOT be accepted.
- **Adacel™ Or Boostrix® Vaccine Booster:**
  - Documentation of an Adult TETANUS/diphtheria/acellular pertussis (Tdap) vaccine booster is required.
  - Tdap was licensed in June 2005 for use as a single dose booster vaccination (i.e. not for subsequent booster doses).
  - The current CDC recommendation states “Healthcare personnel, regardless of age, should receive a single dose of Tdap as soon as feasible if they have not previously received Tdap and regardless of the time since last Td dose”.
- **Meningococcal Vaccination:**
  - Documentation of immunization with one dose of Meningococcal vaccine after 16th birthday

All matriculated students MUST present evidence of the following on an annual basis during their tenure with the program:

- **TB screening**
- **Influenza vaccine**

Students are financially responsible for the cost of all health care services they may require while enrolled in the program, including any health care services required as a result of their participation in scheduled program activities (e.g. TB testing, immunizations, treatment of injuries, pathogen exposure evaluation and treatment). Students are also required to sign a Health Screening and Immunization Information Release Form.

Noncompliance with any component of this policy will result in withholding the student from progressing in the program, withdrawal from classes without credit and a referral to the Academic and Professionalism Performance Review Committee.

No one from the MS PAS program has access to the student's health record. These are maintained by the university in a secured electronic depository.

The MS PAS program will maintain the health attestation form confirming that the student has met institution and program health screening requirements, immunization records, and tuberculosis screening of all matriculated students through a HIPPA compliant, secure cloud based management system. These records will be reviewed by the Director Clinical Education and the Admissions Support Coordinator upon acceptance into the program and annually thereafter throughout the student's tenure with program. The Director of Clinical Education will also continuously review the Centers for Disease Control Recommended Vaccines for Healthcare Workers guidelines and recommendations for updates.

### **Guidelines for Exposure to Infectious and Environmental Hazards (A3.08)**

#### **Infectious/Communicable Disease Training and Post-Exposure**

In order to minimize the risk of contracting any infection in the course of their clinical practice activities students must follow the Universal Blood and Body Fluid Precautions developed by the Centers for Disease Control (CDC). Instruction regarding environmental hazards and infectious exposures is provided during the didactic phase of the program and reviewed prior to entering the clinical phase of the program. Upon completion of the module students are expected to consistently and appropriately implement Universal Precautions and other appropriate safety measures thereafter. It is the student's responsibility to become familiar with the policies and procedures for employing these precautions at each of the clinical sites to which the student is assigned. All students will participate in the clinical affiliation requirements for safety and quality assurance compliance at the direction of the clinical affiliation personnel.

#### **Guidelines for Student Exposure to Infectious and Environmental Hazards Blood and body fluid exposure (HIV, Hepatitis B, Hepatitis C)**

An "exposure incident" refers to a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of a student's clinical duties. Should a patient's blood or body fluid come into contact with a student or if a patient comes in contact with the blood or body fluid of a student, the student should seek medical treatment IMMEDIATELY and follow the procedure outlined below:

1. Decontamination of exposed site – vigorous flushing of mucous membranes, eyes, and/or thorough hand washing.
2. Immediately report incident to appropriate clinical site personnel, including your preceptor, and follow established protocol for the site.
3. If there is no established protocol, seek treatment at the nearest Emergency Department.
4. Seek medical attention to ensure appropriate medical care relating to the exposure is provided.
  - a. This should occur within 2 hours for a known HIV infected source and 4-6 hours for all other exposures.
  - b. The appropriate initial site to seek medical attention varies based on the clinical site where the incident occurred. It could be an Occupational Health or Emergency Department at the institution or you may need to find the nearest Emergency Department. Students should review site-specific exposure protocol.
  - c. Management may include confidential testing of the patient and the student for hepatitis B, hepatitis C, HIV and other infectious agents.
  - d. In the event that additional follow-up medical care is necessary, students will need to refer to site specific protocol to discover whether this will continue to be provided by the initial site or if the student should arrange follow-up with their own health care provider.
5. Report the event via e-mail to the Director of Clinical Education or the Program Director within 24 hours of the event.
6. Please refer to the *Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Postexposure Prophylaxis*  
<https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm>

### **Other Exposures, Illness, or Injury**

For student and patient safety, students who have been exposed to a contagious disease or are ill with symptoms of contagious diseases may need to avoid contact with patients. In such cases, or in the event of an injury, the student should be evaluated by a health care provider in order to determine need for therapy and clearance for patient care. Students must notify and work with the site preceptor to determine whether the situation requires the student to be evaluated by the site occupational health provider or their own health care provider. Students must report via email such instances to the Director of Clinical Education or the Program Director within 24 hours of the event.

### **Medical Follow-up and Clearance to Return to Clinical Activities**

Initial and subsequent care and follow-up activities including recommendations related to counseling, prophylactic/treatment regimens, and continued or restricted practice activities following a student's exposure incident/illness/injury will be determined by the student's health care provider (in collaboration with the student) and other appropriate health care professionals. The student must obtain a medical attestation form from their healthcare provider clearing the student for participation in patient care.

### **Financial Responsibility**

All students are required to carry medical insurance to cover the expense of such unlikely event and provide coverage for the laboratory testing and treatments that may be required. Costs not covered by insurance are the responsibility of the student.

### **Effects of Exposure/Illness/Injury on Student Learning Activities**

Students may not be able to return to a specific clinical affiliate and/or meet the required technical standards due to effects of clinical exposure to infectious and environmental agents. In such case the Academic and Professional Performance Review Committee will review the case and make recommendations regarding the student's academic standing.

Students should refer to the remediation, deceleration and progression policies regarding criteria for academic separation.

### **Pregnancy**

In the event of pregnancy:

- The student must provide early and written notification of the pregnancy to the Program Director in order to formulate an individualized academic plan that will lead to satisfactory completion of the program.
- Written documentation from the OB/GYN physician must either release the student as unrestricted or identify any limitations in the event that activities need to be restricted. This documentation must be submitted directly to the Program Director as soon as the pregnancy is confirmed.
- Upon the return to the program, OB/GYN physician must also submit written documentation directly to the Program Director, releasing the student to return as a full-time student with no restrictions.
- Time and assignments missed (either during the didactic or clinical phase) due to pregnancy must be made up and will delay graduation.
- All requirements must be completed successfully in order to graduate.

### **Provision of Health Services (A3.09)**

The Program Director, Medical Director and the Faculty of the program will not participate as health care providers for students in the program. Students in need of medical care may seek care at Carolinas Health System/Albemarle Urgent Care 703 Leonard Avenue Albemarle, NC 28001 (704) 550-0050, which is open Sunday through Saturday, 8 a.m.-8 p.m. Proof of insurance must be presented. In the event of an illness or injury requiring emergency treatment students may visit Stanly Regional Medical Center Emergency Department 301 Yadkin Street Albemarle, NC 28001 (704) 984-4000.

### **Closing of Campus (including Inclement Weather)**

The President shall determine whether the condition is such a nature as to require cancellation of classes and/or closure of the University.



Example of events which may prompt such a decision include severe weather, natural disasters, act of terrorism, workplace violence, or significant utility outages.

### **Didactic Phase and Clinical Phase Students Rotating within 60 miles of the Center for the Health Sciences.**

If the President determine that classes are to be cancelled and/or the University closed due to inclement weather, the following steps shall be implemented for courses and rotations by the program:

- If the Misenheimer campus has closed, there will be no course activities that day at the Center for the Health Sciences. This includes regularly scheduled lectures, laboratories and learning activities.
- Clinical activities will also be suspended in the following way:
  - If notification occurs by 5:30 a.m. using the LiveSafe System students are excused from clinical duties. Students must notify the preceptor at their clinical site that according to the University Inclement Weather policy they are not to attend clinicals.
  - If notification occurs during the day or before 3:00 p.m. for evening events and classes, the Center for the Health Sciences will communicate an announcement from the Dean's office to faculty and staff when this has occurred. Specific information regarding the weather status at the Center for the Health Sciences will be placed on the Pfeiffer University website.
  - Students should be excused immediately from clinical duties in order to return home safely.
  - The program will also make efforts to communicate to faculty and to students on their rotation by email when clinical duties are suspended.
  - Students must notify the preceptor at their clinical site that according to the University Inclement Weather policy they are not to attend clinicals.

### **Clinical Phase Students Rotating > 60 miles from the Center for the Health Sciences**

Students are not expected to put themselves in dangerous situations. If a student feels as though road conditions are too dangerous for driving, then he/she should report the absence to the Director of Clinical Education. If a clinical preceptor cancels a clinic day due to inclement weather, it is does not need to be made up, but should be reported to the Director of Clinical Education. Students should strive to still meet the minimum required hours for the rotation. If this is not possible, the student should contact the Director of Clinical Education immediately to discuss options.

### **Non-inclement weather closure of campus**

Should campus be closed for a reason other than inclement weather, clinical phase students are expected to attend clinicals for the day. Should the campus closure be of such a nature that students may be negatively affected in some way (emotionally, physically, etc.), the program will alert students to not attend clinicals.

## Academic Calendar

Academic Calendar 2021-2023	
January 4 <sup>th</sup> – 8 <sup>th</sup> , 2021	Orientation
January 11 <sup>th</sup> , 2021	First day of Class – Semester I
January 18 <sup>th</sup> , 2021	Martin Luther King, Jr Holiday (no classes)
February 25 <sup>th</sup> – 28 <sup>th</sup> , 2021	Spring Break
April 2 <sup>nd</sup> , 2021	Good Friday (no classes)
April 23 <sup>rd</sup> , 2021	Last Day of Class – Semester I
April 25 <sup>th</sup> – May 1 <sup>st</sup> , 2021	Break
May 3 <sup>rd</sup> , 2021	First Day of Class – Semester II
May 31 <sup>st</sup> , 2021	Memorial Day Holiday (no classes)
July 2 <sup>nd</sup> – 5 <sup>th</sup> , 2021	July 4 <sup>th</sup> Holiday (no classes)
August 27 <sup>th</sup> , 2021	Last Day of Class – Semester II
August 29 <sup>th</sup> – September 4 <sup>th</sup> , 2021	Break
September 6 <sup>th</sup> , 2021	Labor Day Holiday (no classes)
September 7 <sup>th</sup> , 2021	First Day of Class – Semester III
November 25 <sup>th</sup> – 26 <sup>th</sup> , 2021	Thanksgiving Holiday (no classes)
December 17 <sup>th</sup> , 2021	Last Day of Class – Semester III
December 19 <sup>th</sup> , 2021 – January 2, 2022	Christmas Holiday/Winter Break (no classes)
January 3 <sup>rd</sup> , 2022	First Day of Class – Semester IV
January 17 <sup>th</sup> , 2022	Martin Luther King, Jr Holiday (no classes)
February 24 <sup>th</sup> – February 8 <sup>th</sup> , 2022	Spring Break
April 15 <sup>th</sup> , 2022	Good Friday (no classes)
April 22 <sup>nd</sup> , 2022	Last Day of Class – Semester IV
April 24 <sup>th</sup> – May 1 <sup>nd</sup> , 2022	Break

SCPE	First Day	Last Day	EOR Days
1	May 2 <sup>nd</sup> , 2022	May 31 <sup>st</sup> , 2022	June 1 <sup>st</sup> , 2 <sup>nd</sup> , & 3 <sup>rd</sup>
2	June 6 <sup>th</sup> , 2022	July 5 <sup>th</sup> , 2022	July 6 <sup>th</sup> , 7 <sup>th</sup> , & 8 <sup>th</sup>
3	July 11 <sup>th</sup> , 2022	August 9 <sup>th</sup> , 2022	August 10 <sup>th</sup> , 11 <sup>th</sup> , & 12 <sup>th</sup>
4	August 15 <sup>th</sup> , 2022	September 13 <sup>th</sup> , 2022	September 14 <sup>th</sup> , 15 <sup>th</sup> , & 16 <sup>th</sup>
5	September 19 <sup>th</sup> , 2022	October 18 <sup>th</sup> , 2022	October 19 <sup>th</sup> , 20 <sup>th</sup> , & 21 <sup>st</sup>
6	October 24 <sup>th</sup> , 2022	November 29 <sup>th</sup> , 2022	November 30 <sup>th</sup> December 1 <sup>st</sup> , & 2 <sup>nd</sup>
IPE Clinical Simulation Seminar		December 5 <sup>th</sup> - 9 <sup>th</sup> , 2022	
Graduate Thesis Advisor/Committee Meetings		December 12 <sup>th</sup> -16 <sup>th</sup> , 2022	
Winter Break		December 18 <sup>th</sup> , 2022-January 1 <sup>st</sup> , 2023	
7	January 2 <sup>nd</sup> , 2023	January 31 <sup>st</sup> , 2023	February 1 <sup>st</sup> , 2 <sup>nd</sup> , & 3 <sup>rd</sup>
8	February 6 <sup>th</sup> , 2023	March 7 <sup>th</sup> , 2023	
Summative Evaluation		March 8 <sup>th</sup> , 9 <sup>th</sup> , & 10 <sup>th</sup>	
9	March 13 <sup>th</sup> , 2023	April 11 <sup>th</sup> , 2023	April 12 <sup>th</sup> , 13 <sup>th</sup> , & 14 <sup>th</sup>
Graduate Research Project Presentations and Board Review		April 17 <sup>th</sup> , 2023	May 5 <sup>th</sup> , 2023