

The University of Findlay



Physician Assistant Program Master of Physician Assistant

Student Handbook
2012

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I. INSTITUTION PURPOSE

A. The University of Findlay Mission Statement:

The mission of The University of Findlay is to equip our students for meaningful lives and productive careers.

B. PA Program Mission

The Physician Assistant Program at The University of Findlay is committed to providing its students with the medical knowledge necessary for them to become ethical, competent, and compassionate health care providers who deliver superior quality health care to the community in which they practice and to communities throughout the world.

C. PA Program Vision

The University of Findlay Physician Assistant Program will be well respected and known for its high quality education, research and leadership initiatives in Physician Assistant education. Our faculty will continue to be innovative educators and leaders within the physician assistant community at both the state and national levels. The program will generate compassionate and genuine healthcare providers who are committed to the profession and who will make significant contributions toward advancing our profession. We will do this by encouraging our students to reach above and beyond their own expectations and strive for excellence. Lastly, our program will become a significant constituent in relation to the surrounding communities and will continue to actively seek ways to further healthcare delivery through our program.

D. PA Program Goals

At the satisfactory completion of the requirements of the Master of Physician Assistant degree from The University of Findlay, the graduate will be able to:

1. Evaluate diverse clinical situations by applying knowledge of anatomy, pathophysiology, clinical medicine, patient presentation, differential diagnosis, patient management, surgical principles, and health promotion and disease prevention.
2. Demonstrate interpersonal and communication skills that facilitate the effective exchange of information and collaboration with patients, families, and other health professionals.
3. Provide care that is effective, patient-centered, timely, efficient and equitable for the treatment of health problems and the promotion of wellness as a member of the health care team.
4. Demonstrate professionalism by practicing in a competent, legal, and ethical manner as a physician assistant and as a member of the health care team, serving a population of patients of all ages in diverse environments.
5. Assess and improve delivery of patient care through appropriate use of learning resources, self-reflection, and commitment to lifelong learning.
6. Demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that is of optimal value, and demonstrate an understanding of needs and priorities for cost-effective health care, resource allocation, and uncompromised quality of care.

E. PA Program Outcomes

- 1. Evaluate diverse clinical situations by applying knowledge of anatomy, physiology, pathophysiology, clinical medicine, patient presentation, differential diagnosis, patient management, surgical principles, and health promotion and disease prevention.**
 - a. Apply medical knowledge and clinical reasoning to interpret information gathered from the history, physical examination and diagnostic procedures to formulate, develop, and implement appropriate diagnostic and therapeutic management plans for a diverse patient population across the age span.
 - b. Competently perform diagnostic and therapeutic procedures expected of the generalist physician assistant.
- 2. Demonstrate interpersonal and communication skills that facilitate the effective exchange of information and collaboration with patients, families, and other health professionals.**
 - a. Provide patient education and counseling through the effective use of appropriate communication techniques while demonstrating awareness of cultural diversity.
 - b. Accurately and adequately document and record information regarding the care process for medical, legal, quality, and financial purposes.
- 3. Provide care that is effective, patient-centered, timely, efficient and equitable for the treatment of health problems and the promotion of wellness as a member of the health care team.**
 - a. Demonstrate caring and respectful behaviors when interacting with patients and their families to establish a therapeutic patient-provider relationship.
 - b. Provide services and education aimed at preventing health problems and maintaining health.
 - c. Establish rapport with team members, maintain appropriate boundaries in work and learning situations, relate well to students, faculty, and health care professionals in a collaborative environment.
- 4. Demonstrate professionalism by practicing in a competent, legal, and ethical manner as a physician assistant and as a member of the health care team, serving a population of patients of all ages in diverse environments.**
 - a. Demonstrate sensitivity and compassion toward patients in need, take time and effort to explain information to patients and to listen empathetically to the sick patient and his/her concerns, show respect for patient's confidentiality and put the patient's best interest first.
 - b. Exhibit adherence to legal and regulatory requirements and ethical practices in relation to duty of care and inter-professional teamwork.
- 5. Assess and improve delivery of patient care through appropriate use of learning resources, self-reflection, and commitment to lifelong learning.**
 - a. Locate, appraise, and integrate evidence from scientific studies related to patient health problems.
 - b. Critically evaluate own performance to identify strengths and develop plans to resolve weaknesses.
 - c. Apply information technology to manage information, access on-line medical information, and facilitate lifelong learning.
 - d. Appropriately address gender, cultural, cognitive, emotional, and other biases; gaps in medical knowledge; and physical limitations in themselves and others.
- 6. Demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that is of optimal value, and demonstrate an understanding of needs and priorities for cost-effective health care, resource allocation, and uncompromised quality of care.**
 - a. Effectively function within different types of medical practices and delivery systems.
 - b. Demonstrate knowledge of different types of payment systems in health care.
 - c. Collaborate with supervising physician and other health care providers to promote a safe environment for the delivery of quality patient care.

F. PA Program Core Values

Competency Achievement
Academic Excellence
Student Advocacy
Ethical Conduct

G. Handbook Revision Policy

The information contained in the PA Student Handbook is an extension of current graduate policies and procedures of The University of Findlay and the College of Health Professions. Since the implementation of the curriculum remains dynamic and therefore subject to continuous review and improvement, the provisions listed are directive in nature and subject to change without prior notice.

The University of Findlay Physician Assistant Program reserves the right to modify/edit the student handbook including policy and procedure additions, deletions, and modifications at any time. Students will be notified of any such changes in writing in the form of an addendum and are then under the jurisdiction of the new/modified material. Students will sign an acknowledgement form when presented with the changes.

All revisions apply to all enrolled students at time of notification.



II. MESSAGE FROM THE PROGRAM CHAIR

Welcome to the Master of Physician Assistant Program at The University of Findlay! As an enrolled student you will participate in an innovative educational experience designed to foster learning, service, and leadership. I encourage you to take full advantage of the unique opportunity to be a student in an academic program dedicated to preparing competent and patient centered individuals for the rewarding career of a practicing physician assistant.

The PA program faculty and I are committed to delivering education of the highest quality in an atmosphere of mutual respect and concern for each other, the community, and society. Our goal is to create a learning environment where you can maximize your academic pursuits, develop lifelong learning skills, and gain competency in health care services provided by entry level physician assistants.

To participate fully in the physician assistant program please read this *Student Handbook* carefully and completely. Important information is provided in this handbook to ensure your awareness of and compliance with the academic policies and procedures adopted by the PA program and The University of Findlay. A statement confirming that you have received and read this handbook is required of every student and is maintained in your program record. (Refer to *Student Handbook Acknowledgement* Form) While this handbook is discussed fully at your program orientation, you are always welcome to contact the program if you have any questions.

On behalf of the PA program faculty, I extend our best wishes for your success in the Program and ultimately in your goal to become one of tomorrow's physician assistants.

Sincerely,

Paul T. Davis, M.D.
Program Director
Associate Professor
The University of Findlay
College of Health Professions

III. DEFINITION OF PHYSICIAN ASSISTANT

Physician assistants are certified by the National Commission on Certification of Physician Assistants (NCCPA) – a mark of professional accomplishment – and state-licensed. They are health professionals who practice medicine as members of a team with their supervising physicians. PAs deliver a broad range of medical and surgical services to diverse populations in rural and urban settings. As part of their comprehensive responsibilities, PAs conduct physical exams, diagnose and treat illnesses, order and interpret tests, counsel on preventive health care, assist in surgery, and prescribe medications.

The PA's responsibilities depend on the type of practice, his or her experience, the working relationship with physicians and other health care providers, and state laws.

There are approximately 83,466 practicing PAs in the United States as of April 2011 with a total of 84,066 individuals eligible to practice as PAs.
(AAPA Quick Facts, 2011)

IV. GENERAL PROGRAM INFORMATION

A. HISTORY AND DEVELOPMENT

The University of Findlay established a bachelor education program for the physician assistant in 1999 under the direction of Paul Davis, MD, who served both as Medical Director and Founding Program Director. The program obtained initial accreditation by the Accreditation Review Commission, Inc. (ARC-PA) on 27 April 2000 and obtained its most recent continuing accreditation status in 2012.

In 2008 students enrolled in the bachelor program were offered an option of completing the existing bachelor level program or transitioning to the state and national regulatory education agency approved, modified and extended program leading to a master degree. This program required students to earn additional credits in key content areas commensurate with graduate level education and absent in the bachelor degree program. Students who completed the transition program earned a MPAS degree (Master of Physician Assistant Studies). This particular degree awarded was approved for this transition cohort of students only. The University of Findlay did not admit students in 2009 to either the bachelor or MPAS programs.

A new graduate education program construct for the physician assistant leading to a MPA (Master of Physician Assistant) award was developed under the leadership of Diane Zywojko, MPM, PA-C, PA Program Director/Chair. This program was approved by the state of Ohio and welcomed the members of its charter class in January 2010 along with a new medical director and a full cadre of dedicated core and adjunct faculty.

Paul T. Davis, MD, resumed the role of Program Director/Chair in 2010. The program start date has been changed resulting in classes now matriculating in the fall semester.

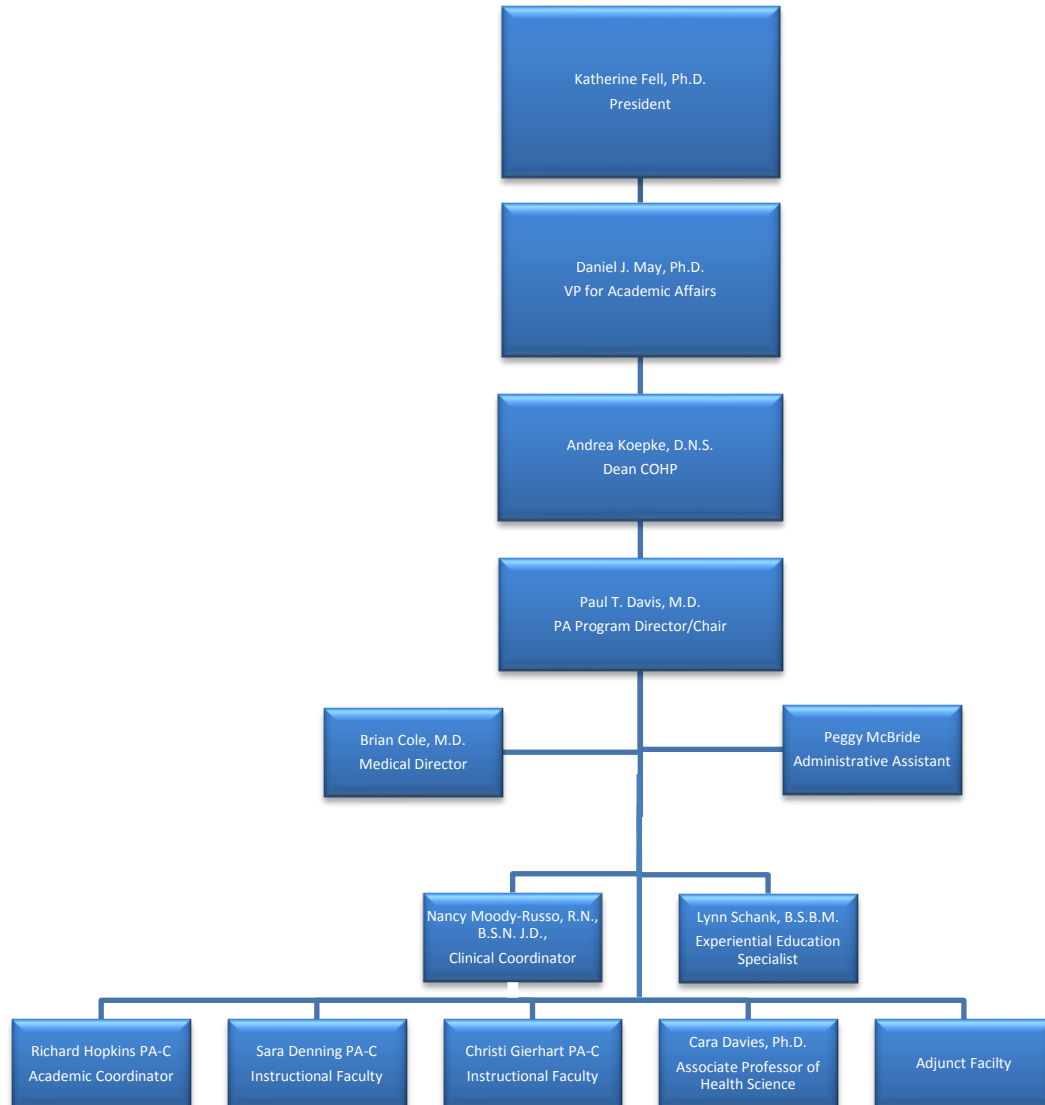
B. ACCREDITATION HISTORY

The Physician Assistant Program has been accredited since April 2000. The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) has granted Accreditation - Continued to The University of Findlay Physician Assistant Program sponsored by the University of Findlay. Continued accreditation is an accreditation status granted when a currently accredited program is in compliance with the ARC-PA Standards.

Continued Accreditation remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the Standards. The approximate date for the next comprehensive review of the program by the ARC-PA will be March 2015.

C. PA PROGRAM ORGANIZATIONAL CHART

The University of Findlay



D. Matriculation into and Progression Through the Didactic Phase of the Program

In order to successfully enter into and progress through the didactic phase of the PA program, each student must complete or meet the following requirements¹:

1. Successfully complete the admission requirements including submission of proof of a physical examination, profile information (phone number, address, emergency contact information), and required immunizations.
 - a. Failure to complete these requirements prior to matriculation could result in dismissal from the program or failure to progress.
 - b. A plan to demonstrate compliance with these requirements must be available during orientation.
2. Successfully complete each PHAS-designated course in the prescribed sequence.
 - a. Course sequences are published on the University website and are sequenced as deemed appropriate by the faculty on a year-to-year basis.
3. Successfully achieve a minimum of 3.0 out of 4.0 GPA each semester throughout the didactic phase of the PA program.
 - a. **Failure to achieve a GPA of 3.0 or better out of 4.0 during any didactic semester will result in dismissal from the program without the opportunity to reapply or re-enter.**
 - b. Requirements during the clinical year are discussed in Section XIV
4. Earn a grade in any PHAS-designated course of “C” or better in every course during the didactic phase of the program.
 - a. Grades of “C-” or below are not acceptable for progression in the program.
5. Attend all events noted as mandatory by the PA program which may include but is not limited to OAPA conferences, meetings, and dinners; guest lectures; seminars; UF and PA program events including accreditation responsibilities, PA week, MajorFest, PASS activities, Health Professions Day; and other activities unless officially excused. – Note: advanced notice may not be possible in some instances.

E. Matriculation into the Clinical Year

In order to matriculate into the clinical phase of the PA program, each student must complete the following unless the timing of activities is altered by the PA program:

1. Successful completion of all didactic PA program coursework.
2. Successful completion of a complete physical examination practical within one month of the beginning of the clinical phase of the program.
3. Obtain current ACLS and BLS training that will remain current throughout the duration of the clinical phase of the program.
4. Successfully complete a background check.
5. Complete HIPAA compliance paperwork.
6. Successfully complete OSHA training.
7. Update his/her physical examination, including immunizations.
8. Complete an emergency contact form.
9. Maintain proof of current health insurance coverage.
10. Pass a urine drug screen test.
11. Assure that they have the appropriate student ID badge.
12. Complete the Physician Assistant Clinical Knowledge Rating and Assessment Tool (PACKRAT) when so directed.
13. Attend all clinical orientation meetings as scheduled.
14. Demonstrate the development of professional and ethical maturity.
15. Complete all immunizations required by the PA program and clinical sites.

¹Unless the timing of activities is altered by the PA program

F. Progression Through the Clinical Phase of the Program

In order to successfully progress through the clinical phase of the PA program, each student must complete the following (unless the timing of activities is altered by the PA program):

1. Successful completion of all Supervised Clinical Practice (SCP) rotations
2. Maintenance of ACLS and BLS certification
- 3. Maintain a PA program overall GPA of a 3.0 or greater**
4. Successful completion of courses that take place in addition to the SCPs during semesters V, VI, and VII
5. Attendance at all events noted as mandatory by the PA program which may include but is not limited to OAPA conferences, meetings, and dinners; guest lectures; seminars; UF and PA program events including accreditation responsibilities, PA week, MajorFest, PASS activities, Health Professions Day; and other activities unless officially excused – Note: advanced notice may not be possible in some instances

G. Graduation Requirements

See section XVIII for requirements for completing the program

V. GENERAL OVERVIEW OF PROGRAM DESIGN

A. CURRICULUM CONSTRUCT

The Master of Physician Assistant (PA) Program at The University of Findlay (UF) is a professional degree program intended to prepare students academically and professionally for responsibilities, services, and leadership as a physician assistant. This graduate education program consists of two phases spanning 28 months over seven semesters and a total of 91 credits. Phase I represents the pre-clinical year and spans 4 semesters (16 months) and 61 program credits. Phase II represents 24 program credits through eight diverse supervised clinical field experiences (Supervised Clinical Practice or SCPs) over a period of 48 consecutive weeks. Additionally, Phase II includes 3 credits of research and 3 credits of facilitated learning. Categorical learning domains include basic medical sciences, clinical medical sciences, clinical diagnostics, clinical patient care skills and interventions, professional development, research, and multiple field practice experiences.

B. CLINICAL EDUCATION EXPERIENCES

Each SCP spans a 6-week period and begins and ends over the course of the second phase of the program (clinical field education) along with the on-campus classes PHAS601-606.

All PA students advance through the required SCPs (PHAS611-617) and one elective (PHAS618) during the second phase of the program.

Students may submit a request for a particular discipline for PHAS618 with the understanding that the sequence of clinical placements is determined by the Clinical Coordinator (CC).

Whenever possible, students are placed at clinical sites within a 150-mile radius of Findlay, Ohio. However, due to changes in availability of individual clinical sites, it is sometimes necessary for a student to travel further than this distance.

STUDENTS ARE RESPONSIBLE FOR COSTS INCURRED FOR TRANSPORTATION AND HOUSING DURING ALL SCPS.

It is the responsibility of the PA Program and not the students to identify and schedule sites used for the SCPs. It is possible for a student to suggest a clinical site for his or her use that is not part of the established clinical network of preceptors. Such sites must meet all of the established educational goals for the clinical experience and must agree to become legally affiliated with The University of Findlay PA Program during the time the student is attending the site.

It is the discretion of the PA Program to utilize student-identified sites and not all students may be placed at sites which they identify/request.

VI. PA PHYSICIAN ASSISTANT PROGRAM CURRICULUM

Didactic Phase	PA Curriculum	Semesters 01 - 04	Total Credits: 61 credits
Semester 01	Fall: August – December		<u>17 credits</u>
	PHAS 500	Mechanisms of Health and Disease	4 credits
	PHAS 501	Clinical Anatomy	4 credits
	PHAS 502	Physical Assessment I	3 credits
	PHAS 503	Information Literacy and Communication	1 credit
	PHAS 505	Clinical Inquiry and Communication	1 credit
	PHAS 506	PA Professional Issues	1 credit
	PHAS 534	Community and Individual Wellness	3 credits
Semester 02	Spring: January – May		<u>15 credits</u>
	PHAS 508	Medical Ethics	1 credit
	PHAS 510	Clinical Medicine I	4 credits
	PHAS 511	Clinical Pharmacology I	3 credits
	PHAS 512	Physical Assessment II	3 credits
	PHAS 514	Clinical Patient Care I	3 credits
	PHAS 513	Health Care Systems, Policy, and Practice	1 credit
Semester 03	Summer: June – August		<u>11 credits</u>
	PHAS 524	Designing a Research Project	2 credit
	PHAS 520	Clinical Medicine II	4 credits
	PHAS 523	Clinical Heuristics and Decision Making	2 credits
	PHAS 532	Fundamentals of Surgical Patient Care	3 credits
Semester 04	Fall: August – December		<u>18 credits</u>
	PHAS 521	Clinical Pharmacology II	4 credits
	PHAS 522	Clinical Patient Care II	3 credits
	PHAS 533	Behavioral Medicine	3 credits
	PHAS 530	Clinical Medicine III	4 credits
	PHAS 531	Fundamentals of Emergency Care	2 credits
	PHAS 535	Evidence –Based Case Management	2 credits
Clinical Phase	PA Curriculum	Semesters 05 - 07	Total Credits: 6+24 = 30credits
Semester 05	Spring: January – May		<u>11 credits</u>
	PHAS 601	Developing a Reflective Practitioner I	1 credit
	PHAS 602	Project Scholarship I	1 credit
		Three Supervised Clinical Practice Experiences	9 credits
Semester 06	Summer: June – August		<u>8 credits</u>
	PHAS 603	Developing a Reflective Practitioner II	1 credit
	PHAS 604	Project Scholarship II	1 credit
		Two Supervised Clinical Practice Experiences	6 credits
Semester 07	Fall: August – December		<u>11 credits</u>
	PHAS 605	Developing a Reflective Practitioner III	1 credit
	PHAS 606	Leadership Symposium	1 credit
		Three Supervised Clinical Practice Experiences	9 credits

Each SCP course (supervised clinical practice) spans a 6 week period and begins and ends over the course of the second phase of the program (clinical field education) with the on-campus classes PHAS601-606

PHAS 611	Supervised Clinical Practice in Family Practice	3 credits
PHAS 612	Supervised Clinical Practice in General Internal Medicine	3 credits
PHAS 613	Supervised Clinical Practice in General Pediatrics	3 credits
PHAS 614	Supervised Clinical Practice in Women's Health	3 credits
PHAS 615	Supervised Clinical Practice in General Surgery	3 credits
PHAS 616	Supervised Clinical Practice in Emergency Medicine	3 credits
PHAS 617	Supervised Clinical Practice in Psychiatry/Mental Health	3 credits
PHAS 618	Supervised Clinical Practice in Elective	3 credits

VII. University Policies Affecting PA Students

A. Refund Policy

A student who withdraws from the PA Program, takes an authorized leave of absence, or is requested to withdraw from the Program, is eligible for a refund in compliance with university and financial aid policies and practices and in conjunction with federal regulations. Copies of these policies and examples of refund calculations are available in the Office of Financial Services (419-434-4791) and available at the UF web site www.findlay.edu keyword “financial aid”.

B. Financial Aid

Responsibility for meeting educational expenses rests with the student. Questions may be directed to the Office of Financial Aid at 419-434-4791 or findaid@findlay.edu which is available to assist you with your financial aid questions and concerns. Students are encouraged to be familiar with the timelines followed by the financial aid office for the disbursement of loan funds for graduate students in the Master of Physician Assistant Program.

Students applying for financial assistance may be eligible for all standard sources from state and federal assistance, discipline-specific scholarships and grants. Information on the various financial aid opportunities available to PA students is available through the financial aid office located in Old Main. All students are strongly encouraged to explore their eligibility and options for financial aid through the university Financial Aid Office and other organizations. Financial aid counselors are available on both an appointment and walk-in-basis.

To assess each applicant’s financial need, UF requires the Free Application for Federal Student Aid (FAFSA) to be completed. All students seeking financial assistance are required to apply for the maximum subsidized federal Stafford Loan. Applications for these loans are available through the Office of Financial Aid as well as directly on-line www.fafsa.ed.gov; please note to subscribe and electronically sign the electronic FAFSA you will need a PIN number. A PIN number may be requested by using the link to the PIN website on the FAFSA home screen, or, directly by accessing the website, www.pin.ed.gov Financial aid is not automatically renewed. **Once enrolled in the program, a student needs to submit the FAFSA and reapply for financial aid each year if continued support is needed. Refunds to students who officially withdraw from the program are personal matters specific to the individual and ascertaining details on refund policies and practices remains solely the responsibility of the withdrawing student.**

C. Student Services

Students are encouraged to consult the current UF Graduate Catalog for more complete information concerning student services. The following information is supplied to cover areas that may be of specific interest to PA students.

1. Change of Name/Address

Students are **required** to notify the PA program of any change in name, address, email address, or telephone number. In addition, students must notify the Office of the Registrar.

2. Photocopying/Printing

Coin-operated photocopy machines are available for use in Shafer Library, in the student lobby on the second floor of the Brewer Center for Health Sciences (BCHS) as well as other locations on campus. Lamination materials are also available for purchase in the resource center in the Davis Street building. Students are not permitted to use the photocopier in the PA Program Office. Printing stations are available at multiple locations on campus, including but not limited to the library, computer labs, and the basement of BCHS. Students are permitted a set number of free copies/prints per semester and can purchase additional if needed.

3. Academic Support Services

The University of Findlay provides complete academic support through the Academic Support Services office. The office is located in room #45 in the basement of Old Main. Specific services offered through this office include help with test taking, study skills, and specific academic areas of study. For further information, contact the Academic Support Services office at 419-434-4697. The Oiler Success Center is located on the first floor of Old Main, room 122, and is available to assist students with progression through their academic programs and retention at UF.

4. Career Planning and Placement

The Career Planning office and Career Placement office are available to provide students assistance with resume writing, interviewing, and all aspects of potential employment upon graduation as alumni. To contact these offices, call 419-434-4665 (Career Placement) and/or 419-434-4615 (Career Planning).

5. Library Resources

Shafer Library currently houses volumes/texts, periodical subscriptions, microfiche, Audio Visual items, and government documents as well as E-books and E-journals. The building also contains the University Archives, one technology enhanced classroom (S117A), two meeting rooms (S104 and S221-Special Collections) and three group study rooms (S212, S213, and S214) in addition to a 24-hour student lounge.

Catalogue holdings for the Shafer Library are computerized and students have access to both the OhioLINK and Ohio Private Academic Libraries (OPAL) networks. These services provide access to the holdings of many Ohio colleges and university libraries.

OPAL is a consortium of libraries in independent institutions of higher education in the State of Ohio. OhioLINK offers six main electronic services: a library catalog, research databases, a multi-publisher electronic journal center, a digital media center, a growing collection of e-books, and an electronic thesis and dissertations center. The University of Findlay also participates in Online Computer Library Center (OCLC), a bibliographic utility, and OHIONET, a library services network.

Catalogue holdings may be accessed through the internet via the library's page through the UF website. Student's internet accounts also provide them access to library catalogues across the United States and research databases such as MEDLINE. Full-text journal articles from many medical journals are available from campus via services offered through the library. ProQuest® online information resources is available on the Shafer Library computers. ProQuest® contains a library of 400 medical journals, the majority of which have full-text articles available from 1998 to the present.

6. Security

The University of Findlay maintains an [Office of Safety and Security](#) that is staffed by UF employees who provide security services on campus. The campus is patrolled 24 hours a day. They will escort students or faculty who may need to walk through campus alone.

To contact a security officer, dial extension 4799.

The University of Findlay has installed security cameras in all parking lots and in most of the buildings and common areas on campus, and emergency blue light phones on the main campus.

The University of Findlay has established a Crisis Response Plan that provides important information to students, Faculty and Staff on what to do in the event of an emergency. This plan can be viewed on-line from the Office of Safety and Security web page. Additionally, the University has established a Campus Violence Addendum to the Crisis Response Plan that establishes a program to prevent violence on campus. This Addendum includes information on what types of behaviors to report as well as what to do when confronted with a threatening situation. This plan can also be viewed on-line from the [Office of Safety and Security](#) web page.

7. Parking

University parking permits are available through the University Security Office. The cost of these permits is included in the yearly student activity fee. The University of Findlay's parking rules and regulations will be given to you once you obtain your permit.

8. Computer Services

All UF students are eligible for an internet account which includes access to the World Wide Web from campus as well as an e-mail address. It is the student's responsibility to secure a UF email address. Since all official electronic communications from the PA Program to the students will be sent to their UF email address, having this address and frequently checking it is required. Apple Macintosh and Microsoft Windows PC computer labs are available in Old Main and Shafer Library in addition to other labs on campus. Hours for all computer labs are published by computer services.

VIII. Program Policies and Procedures

A. Computer Policy

- 1.0 All students enrolled in the UF PA program are required to have a laptop computer.
- 2.0 The computer must be compatible with Microsoft Office and have the ability to connect to the internet.
 - 2.01 Many notes, handouts, assignments, etc are only available electronically.
- 3.0 It is the student's responsibility to maintain access to their own computer and have the ability to print documents as required by the PA program.
- 4.0 Failure to have a working computer/printer or the inability to access the internet is not an acceptable excuse for missing or late assignments. Any credit awarded for missing/late assignments will be at the discretion of the instructor.

B. Student Work Policy (*Standard A3.14h, 4th Edition*)²

- 1.0 Students are **strongly discouraged** from working in any form of employment while enrolled in the UF PA program.
- 2.0 Outside activities and working are not considered to be valid excuses for poor academic performance or lack of attendance at required PA program activities.
- 3.0 It is especially important during the clinical phase of the program that students be available to their preceptors on short notice for special learning opportunities outside of regular office hours. This requirement precludes the ability to work outside jobs. Failure to fully participate in all SCP-related activities is considered abandonment of the SCP and will result in failure of the SCP unless it is an excused absence per program guidelines.
- 4.0 Students enrolled in the PA Program cannot substitute for practicing physician assistants or provide unsupervised services common to a certified PA while at any learning or employment site while enrolled in the program. (*Standard A3.06, 4th Edition*)³
- 5.0 Students credentialed as other non-PA professionals cannot substitute as staff in their credentialed discipline while in the role of a physician assistant student. (*Standard A3.06, 4th Edition*)⁴
- 6.0 Students are not staff and/or employees of the program while in the role of a learning student and as a result may not earn a stipend/salary for their services while a physician assistant student. (*Standard A3.04, 4th Edition*)⁵
- 7.0 Students are not permitted to substitute for or function as instructional faculty. (*Standard A3.05, 4th Edition*)⁶
- 8.0 Students failing to follow the above Student Work Policies will be subject to disciplinary action ranging from but not limited to professional probation to dismissal from the PA program.

² *Accreditation Standards for Physician Assistant Education, 4th Edition*, The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), page 11

³ *Ibid.*, page 10

⁴ *Ibid.*, page 10

⁵ *Ibid.*, page 9

⁶ *Ibid.*, page 9

C. General PA Program Attendance Policies and Procedures

See section XII.A-1.0 for course attendance policies.

- 1.0 Students must keep the hours between 8AM and 5PM available during the weekdays (Monday through Friday) to accommodate schedule changes and activities mandated by the PA program.
- 2.0 Students are expected to attend any guest lectures, events, seminars, etc as deemed mandatory by the PA program. The Program will make every attempt to notify students of these activities in a timely manner; however, educational/professional/informative opportunities may develop with short notice. These activities may occur outside of the standard 8am-5pm window (may occur in the early mornings/evenings/weekends) and students are expected to attend. Required activities may involve travel and lodging which will be at the student's expense.
- 3.0 Students who fail to attend required events, regardless of when they are informed of such events, may be placed on professional probation, be assigned additional work/activities, or may have the course grade (if applicable) lowered.
- 4.0 Excused absences may be permitted and students are required to follow the same procedures for being excused from courses and other PA program activities.

IX. REGISTRATION POLICIES AND TERMS

A. Initial Registration to the Program

Matriculating students will be advised of procedures for registration, payment of fees, and other pertinent information in writing in advance of classes starting.

B. Registration Eligibility

In order to register for course work, all new students must have satisfied all pre-program requirements and submitted a deposit and confirmation form to reserve their seat in the matriculating cohort class.

All continuing students must have fulfilled all financial obligations to the university for the previous semester and must be academically eligible for progression to the next semester.

Students must sign the Online Financial Agreement prior to being registered for **each** semester. Failure to do this in a timely fashion will result in a delay in the student being registered which may affect the timely delivery of financial aid. Go to the UF website (www.findlay.edu), click on MyFindlay, login to your UFNNet account, click on the link that appears on the left side of the screen (“Online Payment Agreement”) and complete the form.

C. Block Registration

The Academic Coordinator will conduct block registration for all eligible students in the pre-clinical phase of the program (semesters 1, 2, 3 and 4). The Clinical Coordinator will register all students enrolled in the clinical phase of the program, semester 5 through 7.

D. Registration Status Terms

Active Enrollment: Student who is currently enrolled in the program and is eligible to continue within the graduate program as defined by the graduate catalog enforced at the time of entry into the PA program.

Voluntary Withdrawal: Student in good academic standing who elects to withdraw from the PA Program during the period of a semester startup to and including one full week before final exams and formally informs the Program Chair/Director.

Directed Withdrawal: Student who is directed in writing by program or institutional leadership to withdraw from the PA Program for specified reasons while maintaining appeal process options.

Leave of Absence – A student in good academic standing who seeks a medical leave of absence or personal leave of absence by informing the Program Chair in writing.

E. Academic Probation⁷

1.0 If a student receives two grades of “C+” or below and/or unsatisfactory, he/she will be placed on probation by the Office of Graduate and Professional Studies until at least one of the deficient grades is replaced with a grade of “B” or higher.

2.0 In compliance with University graduate program policy, a student may be removed from probation after he/she has successfully completed two semesters of courses with a GPA of 3.0 or better for a minimum of 18 credit hours.

⁷ Refer to the governing UF Graduate Catalog

F. Professional Probation

- 1.0 Professional Probation: Students engaging in unprofessional behavior in the didactic or clinical phase of the PA program (deemed as such by the UF PA Program faculty or staff or individuals outside of the program (i.e., clinical preceptors, patients, etc)) will be placed on Professional Probation at a minimum and may be dismissed from the program. Professional Probation is an internal designation within the PA program.
 - 1.01 Students placed on Professional Probation must complete a remediation plan designed by the PA program faculty in consultation with the Program Chair or a committee appointed by the Dean of the College of Health Professions.
 - 1.02 Once the student successfully completes the plan, they will be removed from Professional Probation.
 - 1.03 A student will only be placed on Professional Probation once. A second incident that would place a student on Professional Probation will result in dismissal from the program without the option for readmission.
 - 1.04 Professional Probation applies to both didactic and clinical year students.

G. Suspension from The University of Findlay

- 1.0 Any PA student that is placed on suspension from the University for any reason will be dismissed from the PA program without an option for re-entry.

X. ACADEMIC AND ADMINISTRATIVE PROGRAM POLICIES

A. Program Orientation

The PA program sponsors a mandatory professional orientation program for matriculating students on or before the first day of class and at designated dates. As part of the orientation program for new students, activities will include reviewing the content of the PA Student Handbook, officially meeting the collective faculty and fellow students, reviewing the expectations for participation in the program, etc.

B. Program Participation Overview

Matriculated PA Students are expected to complete the designated professional curriculum in the sequence specified by the program's design. Each semester's coursework is to be considered pre-requisite to the next semester's coursework. Students are required to successfully complete, in sequence, all coursework as full-time-students progressing as a cohort. There is no opportunity to alter the didactic course work sequence.

No transfer or advance placement credit is accepted, including courses taken at a medical school or other PA school. (Standard A315d, 4th Edition)⁸

C. Student Conduct

Physician assistant students are required to abide by all academic, clinical, and professional comportment policies as described in the governing University Graduate Catalog, the PA Student Handbook, and the program's Technical Standards.

D. Code of Ethics of the Physician Assistant Profession

(Applies to PA students as well)

"Guidelines for Ethical Conduct for the Physician Assistant Profession", (Adopted 2000, amended 2004, 2006, 2007, and 2008) AAPA website, accessed 7/31/12

http://www.aapa.org/your_pa_career/becoming_a_pa/resources/item.aspx?id=1518

All UF PA students are held to the highest ethical and moral standards due to the nature of their work and responsibilities. Students who fail to adhere to these standards in terms of conduct, professional demeanor or professional attire will be subject to being placed on Professional Probation. If such actions are severe or could potentially endanger the public, the student will be dismissed from the PA program with no opportunity for readmission.

E. Honor Code

Every student is assumed trustworthy and committed to maintaining honor and professional ethics purported by the profession's national organization. Students will be found in violation of the Honor Code with acts of lying (including plagiarism), cheating, or stealing while enrolled as a student in the PA program or if engaging in an action that constitutes a violation of administrative rules, civil and or/ criminal laws of the United States. Each matriculant to the PA program is required to present a signed copy of their pledge to not engage in any dishonorable or dishonest act in all program/school matters. This signed Honor Code pledge (see below) will be filed in the individual's student record.

"I will not knowingly engage in any dishonorable behavior, cheat, steal, lie or commit any act of plagiarism during my academic work, course, or endeavor. If I observe an act which I believe violates the University's Honor Code, I may, in my discretion, report it to the appropriate personnel. I acknowledge that any assignments/papers I submit may be put through "Safe Assign", a software program which detects plagiarism."

⁸ Accreditation Standards for Physician Assistant Education, 4th Edition, The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), page 11

F. Student Substance Use Policy

As a professional program of health service, the PA Program promotes a healthy lifestyle with avoidance of the use of tobacco products, controlled substances, or the abuse of alcohol.

- 1.0 Participating in an SCP or any PA program-sponsored patient care activities while under the influence of intoxicating substances is strictly prohibited and will result in immediate dismissal from the program.

G. Sexual Harassment

The University and the PA Program considers harassment in any form as reprehensible and intolerable behavior and it is prohibited. Relationships involving sexual harassment have no place at the university or at any university sponsored event. Sexual harassment subverts the mission of the institution and threatens the careers, educational experience, and well-being of students, faculty, and staff. Policies and procedures regarding filing any complaint of harassment can be found in The University of Findlay Graduate Catalog. The University has established a Campus Violence Addendum to the Crisis Response Plan that establishes a program to prevent violence on campus. This Addendum includes information on what types of behaviors to report as well as what to do when confronted with a threatening situation. This plan can also be viewed on-line from the [Office of Safety and Security](#) web page.

These policies and practices include protection for and prohibit retaliation against individuals making a complaint or supplying information concerning a complaint. Protection for a person who considers himself or herself falsely accused has also been incorporated.

H. Background Check

- 1.0 All students are required to undergo a criminal background check upon admission to the PA program and again just prior to the clinical phase of the PA program.
- 2.0 Should a student have a prior felony conviction or be convicted of or plead guilty to a felony while a student in the PA program, he/she should be aware that criminal conduct may have implications for their ability to continue within the program and/or receive training at certain clinical education sites.
 - 2.01 This could also affect eligibility to enter practice.
- 3.0 A finding of a prior conviction of an assault-related felony will result in denial of admission and/or dismissal of the student from the PA program.
 - 3.01 If a matriculated student is convicted of any other felony, the decision about continuation in the program will be made on a case-by-case basis.
- 4.0 The costs associated with these background checks are the responsibility of the student, not the program.
- 5.0 The University of Findlay has partnered with Verified Credentials to manage your background check. To access QualifiedFirst go to: <http://scholar.verifiedcredentials.com/findlay>. Enter code for first year: HJPBK-47267; for second year: MPPHY-77497. Create an account. Enter all required information. Provide supporting documentation. Track your progress. Information will automatically be shared with UF. For questions call 800-938-6090 or email ClientServices@verifiedcredentials.com.
- 6.0 The PA program and The University of Findlay cannot guarantee that the student will be eligible to complete the program or attain employment as a PA-C if he/she has a criminal record.
 - 6.01 **Students with felony convictions** are encouraged to contact the medical board or other appropriate regulatory agency in the state where they anticipate locating their practice upon graduation prior to their matriculation into the PA program to determine if it will be possible for them to obtain licensure after graduation and passing the national certifying examination.

I. Professional Liability Insurance

Students are provided student liability insurance (\$1 million of professional liability each claim and \$5 million aggregate) by The University of Findlay which is effective only at assigned supervised clinical practices and assigned clinical experiences. This coverage terminates upon completion of the program. This insurance will not cover any activity not sanctioned by the PA program.

J. Student Leave of Absence Policy

- 1.0 A PA student in good academic standing, (above a “C” average in all course work), after presenting a written request to the Program Director, may be granted an official emergency leave for personal or medical reasons for a period not to exceed one calendar year.
- 2.0 In order to be eligible for an emergency leave, students must be in good academic standing in all courses.
- 3.0 If the emergency leave is approved, the Program Director will provide written notification, including applicable beginning and ending dates, to the student.
- 4.0 It is the responsibility of the student to notify the registrar, and the director of financial aid (if applicable).
- 5.0 The student must notify the Program Director in writing of his or her wish to return to the Physician Assistant Program at least 30 calendar days prior to the anticipated date of re-entry.
- 6.0 Eligibility to return from a leave of absence caused by a student’s medical illness or injury must be based upon the student being free of communicable disease and having the ability to meet the PA program’s defined technical standards.
 - 6.01 The student is responsible for providing documentation from the health care professional that provided the treatment or was the main coordinator for such treatment.
 - 6.02 The PA program **must not** be made aware of the exact diagnosis or treatment, only that the student has recovered sufficiently to resume their studies.
- 6.0 When an emergency leave is granted, the Program Director may require the student to repeat some or all of the courses completed prior to the emergency leave.
- 7.0 In all cases of emergency leave, the student is required to complete the full curriculum to be eligible to earn the PA degree.
- 8.0 The student who fails to re-enter the program prior to the anticipated date for return to the program will be required to reapply for admission to the program.
- 9.0 For purposes of deferring payment of student loans during a program-approved emergency leave, there may be federal regulations limiting the amount of leave a student can take without financial penalties.
 - 9.01 It is the student’s responsibility to address this concern.

K. Student Voluntary Withdrawal Policy

Should a student choose to withdraw from the program for personal reasons, they are recommended to first meet with their adviser and complete a Voluntary Withdrawal Form. A scheduled meeting with the Program Director must follow to review the proposed action and garner consultation for options and implications. Students withdrawing from The University of Findlay or taking a leave of absence must meet with a representative of The Oiler Success Center to be withdrawn from the courses in which they are currently registered.

L. Dismissal Policy

See section XVI

M. Readmission Protocol

- 1.0 Students who have not completed all PA program requirements and have withdrawn may or may not be eligible for readmission.
 - 1.01 Students should contact the program director to determine eligibility for readmission.
 - 1.02 These students must reapply to the program by completing a new CASPA application.

N. Disciplinary Action

The PA program complies with all University procedures regarding disciplinary action. Additional program-specific policies as outlined within the Student Handbook will also be enforced.

O. Student Grievance/Appeals Process

- 1.0 Students have the right to due process involving grievance and appeals process procedures for both academic and non-academic grievances.
- 2.0 Students experiencing difficulties within the academic program who obtain unfavorable evaluations or feel they are being unfairly graded are encouraged to first address these issues with the Course Director and then if not resolved, with the Program Director, as needed.
- 3.0 If the issues are not satisfactorily resolved at the Program Director level, or if the problem involves the Program Director, the student can appeal to the Dean of the College of Health Professions as described in The University of Findlay current Graduate Catalog.

P. Americans with Disabilities Act

- 1.0 The University of Findlay does not discriminate on the basis of disability in admission to, access to, or operations of its programs, services, or activities.
- 2.0 The University of Findlay does not discriminate in its hiring or employment practices.
- 3.0 Questions, concerns, complaints, or requests for additional information regarding Americans with Disabilities Act (ADA) may be forwarded to the ADA Compliance Office in the Academic Support Center, room #45 in the basement of Old Main (419)434-5532 from 8:30 AM to 5:00 PM, Monday through Friday.
- 4.0 Individuals who need auxiliary aids for effective communication in programs and services of The University of Findlay are invited to make their needs and preferences known to the ADA Compliance Coordinator.
- 5.0 This statement is provided as required by Title II of the Americans with Disabilities Act of 1990.
- 6.0 Any student admitted to The University of Findlay who has documentation identifying a disability has the right to request and receive modifications in accordance with Section 504 of the Rehabilitation Act of 1973.
- 7.0 *If you are a student admitted with a disability, it is your responsibility to register with The Office of Disability Services and notify your instructor at least two weeks prior to a needed service so reasonable accommodations can be made.*

Q. Student Rights and Responsibilities

All University students have certain rights and responsibilities. Refer to The University of Findlay webpage, keyword “[Student Rights and Responsibilities Statement](#)⁹”.

R. Inclement Weather Policy:

Students who are attending classes at The University of Findlay are not expected to travel to class when the University is officially closed.

- 1.0 All University closings are announced on local radio, television channels, and the UF website.
- 2.0 Students who do not have access to local radio, TV, or internet are advised to call 800-472-9502 for this information.
- 3.0 Students who are unable to travel to class due to treacherous travel conditions are to call and notify the PA program office.
 - 3.01 Students are expected to use their best judgment in deciding whether or not to travel.
- 4.0 Students at Supervised Clinical Practice (SCP) sites not affected by the adverse weather conditions are required to attend their SCP even if the University is closed.
- 5.0 Students at an SCP site that has significant adverse weather conditions must use their best judgment in consultation with their preceptors in determining their clinical site attendance regardless of the University’s status.
- 6.0 If a class/course is cancelled due to inclement weather, the course instructor(s) will determine the “make-up time” for the course.
 - 6.01 This may occur during pre-set testing/lab blocks or during other times the faculty member is available that do not conflict with other PA program courses/requirements.

S. Violation of Policies and Procedures

Failure to follow the policies and procedures set forth in section “**XI. Academic and Administrative Program Policies**” may result in, but is not limited to, the student being placed on Professional Probation, Academic Probation, or dismissal from the PA program depending upon the severity of the infraction and the decision of the PA program director.

⁹ <http://www.findlay.edu/offices/adminoffices/registrar/Student+Rights+and+Responsibilities/studentrightsandresponsibilitiesstatement.htm>

XI. STUDENT HEALTH AND WELLNESS

The PA Program in The College of Health Professions at The University of Findlay requires students to meet certain health and immunization requirements as a condition of enrollment. Physician assistant students are required to have a complete physical examination by a licensed health care provider and designated laboratory tests.

Failure to comply with these health requirements will result in dismissal from the program as a new matriculating student and/or rising clinical student.

Students should be aware that some series of immunizations require several weeks/months for completion.

Student physical examination and health screening data are confidential documents and are not kept in student or program files. All physical examinations results and immunization records are maintained at the Cosiano Health Center.

Under ARC-PA accreditation *Standards* the program is permitted to keep immunization records of students in the program office.

The only documentation the program maintains regarding student health is a summary verification statement from the Cosiano Health Center Office confirming that the appropriate screening and a list of immunizations that have been completed.

Students are advised to maintain a personal copy of all elements of the program health requirements and a copy of the report regarding the outcomes of their screenings.

Some clinical affiliation placement sites may require additional health information and immunizations/testing and if so, the student will be informed by the Clinical Coordinator before the supervised clinical practice experience begins.

Principle faculty, the program director, and the medical director must not participate as health care providers for students in the program, except in an emergency situation (*Standard A3.09*).

The student must comply with all clinical affiliation health requirements in order to gain entry to the clinical field setting. See sections “IV. E and XI. A”

A. Matriculation and Pre-Clinical Health Requirements

To assure the matriculating student meets Centers for Disease Control (CDC) recommendations for immunizations and health surveillance, the following are PA program health documentation requirements:

- Complete physical examination
- Immunity to measles, mumps, and rubella as indicated by documentation of 2 doses of live vaccine or positive titers, even if born before 1957
- Varicella (chicken pox) having had the disease, a positive titer or documentation of 2 doses of Varivax vaccine (one month apart) if the titer was negative
- Hepatitis B immunization series of three and an antibody titer
- Tetanus/diphtheria/pertussis (Tdap) booster in the last ten years
- Primary series of three doses of polio immunizations
- 2 Step Mantoux PPD skin test (within the last 2 months) or two yearly consecutive negative PPD tests.
 - QuantiFERON[®]-TB Gold In-Tube test (QFT-GIT) or T-SPOT[®] (T-Spot) are acceptable CDC-approved alternatives
 - If PPD conversion has been documented or a person has a positive QFT-GIT or T-spot, a chest x-ray or a statement from the treating physician regarding evaluation for INH therapy is required
- Seasonal influenza vaccine and additional vaccines for high-risk categories (i.e., H1N1 vaccine) are recommended and may be required by some sites

Students entering the clinical phase of the program are required to have a current PPD prior to beginning SCPs. Students who had a previous conversion must convey that through a medical provider's statement and forward it to the Cosiano Health Center Nurse.

Students who do not complete the above requirements will not be permitted to participate in direct patient care activities or enter the clinical phase of the program until all of the requirements have been met and confirmed by the PA program.

Students who fail to complete these requirements in a timely manner will be placed on Professional Probation and must meet with the PA Program Director to discuss further actions which could include not being allowed to enter into the clinical phase of the program or dismissal from the PA program.

B. Student Health Services

The Cosiano Health Center is a FREE, walk-in clinic for students, faculty and staff. Any student, regardless of insurance status may use our services. The Health Center can provide general health assessments, numerous diagnostic tests, wound care, first aid, physicals as well as referrals to specialists in our area.

The Health Center is staffed daily by three registered nurses and a physician. Physician hours are by appointment. The health center telephone number is 419-434-4550.

C. Health Insurance Policy

Full-time matriculated students of the PA Program must have medical/surgical and major medical (hospitalization) coverage. Students must provide the program evidence of current health insurance in the form of a photocopy of a current health insurance card (with provider name, identification numbers, expiration date of hospitalization and medical/surgical plan in which the student is enrolled. This information is to be submitted to the PA program. Students must show proof of health insurance coverage annually and absence of coverage will prohibit participation in supervised clinical activities. In the event of hardship leading to absence of health insurance, supplemental insurance is available through the University upon request; inquiries should be directed to The University of Findlay, Business Office, at 419-434-4690. Coverage for graduate students is available one day after the premium has been paid. You can visit the webpage for further information following this link: <http://www.findlay.edu/offices/adminoffices/businessoffice/stuaccts/studenthealthinsurance.htm>

D. Health Status

A significant change in health requiring medical or surgical interventions may render a student unable to undertake the program demands, and as a result a leave of absence or a medical leave may be necessary. (See section "XII. J")

Students must report any condition which might endanger the health and well-being of other students, patients, program staff, or program related personnel to the Cosiano Health Center or their personal health care provider immediately.

A student with a significant change in health will not be allowed to return without being cleared by either the Cosiano Health Center or their personal health care provider.

Students who have an immunodeficiency such as HIV/AIDS or other syndromes associated with immune-compromised states are encouraged to seek counseling from their private health care provider and/or the medical staff at the Cosiano Health Center regarding potential risks associated with exposure to or taking care of patients with transmissible infections and should continue to strictly follow infection control procedures to minimize their risk of exposure to infectious agents.

E. General Student Bloodborne and Airborne Exposure Policy

It is impossible to eliminate exposure risks and still provide students with a quality medical education. Students will receive proper training in universal precautions and other risk reduction behaviors before entering the patient care environment. If a student is exposed, such as by a needlestick, this policy outlines the procedures which should be followed by the student and the Program.

1.0 Training

1.01 The PA Program will present a training session on universal precautions, and the students will be given a written document for future reference. OSHA guidelines will be used as a basis for this information.

1.02 All students will sign a document acknowledging that they have received and understand this training before being allowed to interact with patients.

1.03 These documents will be kept on file in the PA Department for as long as the student remains in the program.

2.0 Prevention

2.01 Students will obtain physical examinations by a qualified medical practitioner (who is not a member of the Program Faculty) prior to beginning clinical rotations to ensure that the student is free of infectious diseases.

2.02 Students will provide the PA program with proof of standard immunizations, including immunization against Hepatitis B and tuberculosis (TB) screening prior to matriculation into the PA program and again prior to entering SCPs.

2.03 In the event that a student has not been properly immunized, that student will not be allowed to participate in his or her SCP until such immunizations have been initiated which will result in a delay in program completion. Students may contact their own physician/health care provider, the city or county health departments, or the Cosiano Health Center on campus for assistance with obtaining these immunizations.

2.04 Proof of immunization will be provided to the sites of the student's SCP prior to the student's arrival.

3.0 Post-Exposure Guidelines

3.01 Any student who is exposed to blood or other potentially infectious material (OPIM) should alert his/her preceptor immediately. Such exposures may include but are not limited to: needlesticks, splashing of fluid into the eyes, or contact of fluids with an open wound on the student's body.

3.02 Once the preceptor has been notified, the student should follow the guidelines of the medical center where the exposure occurs. This usually entails reporting to the emergency room where the wound or eyes can be irrigated, and the student can receive information and counseling regarding proper treatment. Depending on the type of exposure, the student may be advised to receive one or several pharmacologic agents that may reduce the risk of contracting a disease.

3.03 Should the medical center where the exposure occurred not have a policy for treatment of these exposures for students, the student should proceed to the nearest emergency room for proper evaluation and treatment.

3.04 Airborne exposure should be reported in the same fashion as above.

4.0 Financial Responsibility

4.01 When a physician assistant student is exposed to a potentially infectious agent during the course of regular educational activities for the PA program, the University will not be responsible for costs incurred by the student for treatment and follow-up of this exposure. Any financial obligations incurred by an exposure are the student's responsibility.

5.0 Follow-up Procedures

5.01 Continue medical treatment and counseling at the rotation site or with their primary care physician for the prescribed amount of time. Follow-up for evaluation of reported illnesses post-exposure.

5.02 The clinical coordinator will maintain contact with the student within 48 hours, at one week, 4-6 weeks, at 3 months and 6 months to document compliance with the follow-up procedure.

6.0 For more detail, refer to section F below and to the Blackboard page established to explain exposure policies and procedures in detail.

F. Student Bloodborne Pathogen Exposure Policy

Effective August 2012

Note: If you have just sustained an exposure incident, please refer to [Appendix A](#) immediately!

The Physician Assistant Program recognizes that as students begin to interact with patients as part of their medical education, they encounter the risk of exposure to infectious diseases.

There is no way to eliminate these risks and still provide students with a quality medical education.

The best way to avoid the risk of exposure to bloodborne pathogens or other potentially infectious materials is for the student to learn all they can about how to protect themselves and their patients and to use Universal Precautions in all situations in which exposure to blood and other potentially infectious materials may occur.

The Program provides mandatory training in universal precautions and other risk reduction behaviors including the OSHA Bloodborne Pathogen Standard training before entering the patient care environment.

Despite sufficient knowledge about the risks and methods of transmission of infection and the proper use of Universal Precautions 100% of the time, exposure is still a possibility.

It is the responsibility of the student to become knowledgeable about the methods to prevent exposure to bloodborne pathogens and other potentially infectious materials and most importantly, to thoroughly understand the steps needed to be taken in the event of a possible exposure before such an event occurs.

If a student is possibly exposed to a bloodborne pathogen by way of a needlestick injury, mucous membrane exposure, or some other exposer, this policy outlines the procedures which must be followed by the student and the Program.

The PA Program Responsibility:

- **Provide access to knowledge and training**

The Student's Responsibility:

- **Learn the knowledge and skills necessary to protect themselves and their patients**
- **Learn the steps necessary in the case of a potential exposure and follow them correctly**

This partnership between the student and the PA Program will work together to create as safe of an environment as possible for the students in the clinical arena while recognizing that it is impossible to prevent all exposures.

The methods used to achieve these goals will be training the students in what they need to know to protect themselves and their patients, prevention strategies provided to the students to include immunizations when available and the training and knowledge about how to prevent exposures, a clear set of instructions about what to do once a potential exposure occurs, an understanding of which individuals are responsible for what specific actions, and a clearly defined policy for follow-up once a potential exposure has occurred.

1) Training

- a) The PA Program will provide a mandatory training session on the OSHA Bloodborne Pathogen Standard which includes instruction on universal precautions
- b) A written handout will be provided for future reference
- c) All students will sign a document acknowledging that they have received and understand this training before being allowed to interact with patients.
- d) These documents will be kept on file in the PA Department for as long as the student remains in the program

2) **Prevention**

- a) Students will obtain physical examinations by a qualified medical practitioner (who is not a member of the Program Faculty) prior to beginning clinical rotations to ensure that the student is free of infectious diseases.
 - i) Students will provide the program with verification of proof of standard immunizations, including immunization against Hepatitis B and TB screening prior to beginning clinical rotations.
 - (1) Documentation of immunization status shall be provided to the Cosiano Health Center who will notify the PA Program of the student's compliance with this requirement.
 - ii) In the event that a student has not been properly immunized, that student will not be allowed to participate in his or her clinical rotation until such immunizations have been initiated.
 - (1) Students may contact their own physician/health care provider, the city or county health departments, or the Cosiano Health Center on campus for assistance with obtaining these immunizations.
 - iii) Proof of immunization will be provided to the sites of the student's clinical rotation prior to the student's arrival.
- b) Students must comply with the OSHA Standard concerning bloodborne pathogen exposure (including Universal Precautions and the use of personal protection gear) at all times while in a clinical environment in which an exposure to a bloodborne pathogen or other potentially infectious material could occur.

3) **Student Responsibilities and Actions in Case of Exposure**

- a) Any student who is exposed to blood or OPIM should immediately follow the procedures explained in Appendix A of this document.
- b) Any student who is exposed to blood or OPIM should immediately alert their supervising physician or preceptor.
- c) Such exposures may include:
 - i) Needlestick injuries
 - ii) Splashing of fluid into the eyes
 - iii) Contact of fluids with an open wound on the student's body
- d) Once the supervising physician has been notified, the student should follow the guidelines of the medical center where the exposure occurs.
 - i) This usually entails reporting to the emergency room where the wound or eyes can be irrigated, and the student will receive information and counseling regarding proper treatment.
- e) Depending on the type of exposure, the student may be advised to receive one or several pharmacologic agents that may reduce the risk of contracting a disease.
- f) **Should the medical center where the exposure occurred not have a policy for treatment of these exposures OR the preceptor, supervising physician supervising PA informs the student that the institutional policy does not cover the student, the student MUST IMMEDIATELY (within 1 hour) proceed to the nearest emergency room for proper evaluation and treatment.**

4) **Financial Responsibility**

- a) When a physician assistant student is exposed to a potentially infectious agent during the course of regular educational activities for the Program, the University will not be responsible for costs incurred by the student for treatment and follow-up of this exposure.
- b) Any financial obligation incurred by an exposure is the student's responsibility.

5) **Follow-up Procedures**

- a) After an exposure has occurred, the student is strongly advised to continue medical treatment and counseling at the rotation site or with their primary care physician for the prescribed amount of time.
- b) The student is also strongly advised to obtain follow-up for evaluation of any reported illnesses post-exposure.

- c) The clinical coordinator will maintain contact with the student after being informed of the possible exposure.
 - i) The clinical coordinator will contact the student at the following times:
 - (1) Within 48 hours of the student's notification of the incident
 - (2) One week after the report is made to the Program
 - (3) Four to six weeks after the report is made to the Program
 - (4) Three months after the report is made to the Program
 - (5) Six months after the report is made to the Program
 - ii) This contact is to document compliance with the procedures required or recommended by this policy.
 - ii) The clinical coordinator will keep a written record of the required follow-up.

APPENDIX A – Steps to Follow After Exposure

1) **Initial actions following exposure:**

- a) The initial response to any exposure of a PA student to blood or other potentially infectious material should be immediate cleansing of the exposed site
 - i) Skin exposures:
 - (1) The area should be washed with soap and water
 - ii) Small wounds and punctures may be cleansed with an antiseptic such as an alcohol-based hand hygiene agent
 - (1) Alcohol is virucidal to HIV, HBV, and HCV
 - (2) Other antiseptics also inactivate HIV:
 - (a) Iodophors
 - (b) Chloroxylenol (PCMX)
 - (c) Chlorhexidine (CHG)
 - iii) Mucosal surface exposure
 - (1) Exposed mucus membranes should be flushed with copious amounts of water
 - iv) Eyes should be irrigated with saline or water
 - v) There is no evidence that expressing fluid by squeezing the wound will further reduce the risk of bloodborne pathogen transmission
- b) Guidelines for hand washing and infection control can be accessed through the Centers for Disease Control and Prevention's website (<http://www.cdc.gov/handhygiene/Guidelines.html> valid 7/16/2012)

2) **Documentation of the exposure**

- a) Clinical information should be documented on the source patient for the exposure and the recipient healthcare worker including:
- b) Risk factors and serologic tests for HIV, and hepatitis B and C
- c) The nature and time of the exposure
 - i) Definition of exposure
 - (1) The US CDC has defined "exposure" to blood, tissue, or other body fluids that may place a health care worker at risk for HIV infection and therefore requires consideration of post exposure prophylaxis (PEP) as:
 - (a) A percutaneous injury (eg, a needlestick or cut with a sharp object)
 - (b) Contact of mucous membrane or nonintact skin
 - (i) eg, exposed skin that is chapped, abraded, or afflicted with dermatitis)
 - ii) Body fluids of concern include:
 - (1) Implicated in the transmission of HIV:
 - (a) Semen
 - (b) Vaginal secretions
 - (c) Other body fluids contaminated with visible blood
 - (2) Potentially infectious (undetermined risk for transmitting HIV) include cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, and amniotic fluids

(3) Fluids that are not considered infectious unless they contain blood include feces, nasal secretions, saliva, sputum, sweat, tears, urine, and vomitus

3) Determine the need for prophylaxis

- a) The need for post-exposure prophylaxis is determined by the type of injury and the status of the patient.
 - i) All students should be protected from hepatitis B from prior immunization
 - ii) There is no vaccine for hepatitis C
 - iii) Most students are concerned about the risk of HIV
- b) The CDC has recommendations for the need for post-exposure prophylaxis for HIV
 - i) The tables [*Recommendations for Postexposure Interventions to Prevent Infection with Hepatitis B Virus, Hepatitis C Virus, or Human Immunodeficiency Virus, and Tetanus in Persons Wounded During Bombings and Other Mass-Casualty Events—United States, 2008*](#) are reproduced below.
- c) The student should consult the appropriate table found in the Bloodborne Pathogen Exposure Policy located on Blackboard (percutaneous or mucous membrane exposure) to assist in deciding upon taking post-exposure prophylaxis for HIV.

See the “**Record of Exposure to Potentially Infectious Materials**” form in the forms section at the end of this handbook for reporting exposures or refer to the Blackboard website.

BOX 1. Recommended postexposure management by risk category and specific pathogen

Risk category	HBV*	HCV†	HIV§	Tetanus
Category 1. Penetrating injuries or nonintact skin exposures [‡]	Intervene	Consider testing	Generally no action	Intervene
Category 2. Mucous membrane exposures**	Intervene	Generally no action	Generally no action	No action
Category 3. Superficial exposure of intact skin ^{††}	No action	No action	No action	No action

* Hepatitis B virus.
 † Hepatitis C virus.
 § Human immunodeficiency virus.
 ‡ Penetration of skin by a sharp object that was in contact with blood, tissue, or other potential infectious body fluid (i.e., semen, vaginal fluid, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid or any other visibly bloody body fluid or tissue) before penetration. Nonintact skin exposure is defined as contact of nonintact skin with any of these potentially infectious tissues or fluids.
 ** Contact of mucous membranes (i.e., eyes, nose, mouth, or inner surfaces of the gut or genital areas) with blood, tissue, or other potential infectious body fluid (i.e., semen, vaginal fluid, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid or any other visibly bloody body fluid or tissue).
 †† Superficial exposure of intact skin (but not of mucous membranes) with blood, tissue, or other potential infectious body fluid (i.e., semen, vaginal fluid, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, pericardial fluid, amniotic fluid or any other visibly bloody body fluid or tissue).

G. Tuberculosis Screening

To prevent fellow students, faculty, staff, and patients from exposure to active TB (tuberculosis), screening must be conducted prior to matriculating in to the program.

- 1.0 In order to protect PA students, faculty, staff, and patients from being exposed to active TB, it is important to identify those students with TB infection without evidence of current (active) disease. All incoming and continuing PA students are required to provide annual proof that they are not infected with Mycobacterium tuberculosis (TB). Any CDC-approved screening methodology may be submitted as evidence. A two step Mantoux PPD skin test (within the last two months) or two yearly consecutive negative PPD tests. If PPD conversion has been documented, a chest x-ray and a statement from the treating physician regarding evaluation for INH therapy are required.
- 2.0 Those with a history of Bacille Calmette Guerin (BCG) vaccination also must have baseline screening performed.
- 3.0 Individuals who have a documented history of a positive PPD test, adequate treatment for disease, or adequate preventive therapy for infection, should be exempt from further PPD screening unless they develop signs and symptoms suggestive of TB. The decision to screen in this situation will be made by the student's primary care provider.
- 4.0 PPD test results should be read by designated, trained employees between 48 - 72 hours after injection. Student self-reading of PPD test results will not be accepted.
- 5.0 Although thousands of pregnant women have been PPD skin-tested since the test was devised, thus far no documented episodes of fetal harm have resulted from use of the tuberculin test. Pregnancy should not exclude female students from being skin-tested as part of a contact investigation or part of the regular skin-testing program.
- 6.0 Should a student have a positive TB screening test, he or she must undergo a complete medical evaluation to rule out the possibility of current (active) disease and obtain an initial chest x-ray.

H. Counseling/Mental Health Services

Counseling and mental health services are provided free of charge to students and employees of The University of Findlay by the Counseling Services Office (419-434-4526). UF Counseling Services Staff are trained, licensed professionals and services are confidential. Students may set up an appointment with no referral necessary. (*Standard A3.10*)

The PA program for physician assistant education complies with all the policies and practices of the governing sponsoring institution, The University of Findlay. Program-specific policies and procedures administrated by the PA Program are described in terms of a “standard” to which the program holds as the optimum measure of engagement and/or outcome and justly enforces. These standards, which apply to all enrolled PA students in the College of Health Professions at The University of Findlay, are clarified below:

XII. PROGRAM ACADEMIC AND BEHAVIORAL STANDARDS

A. Program Expectations

The University Graduate Catalog outlines Student Rights and Responsibilities in its Preamble and Premises statements

1.0 Attendance

- 1.01 To facilitate and maximize learning opportunities, attendance at all scheduled didactic sessions in the PA Program is mandatory. Students are expected to be on time for each class. Each course director has the option to establish his/her own attendance policies which shall be published in the course syllabus if they differ from program policies. When no instructor-specific policy has been published in the syllabus, then the PA program policies on attendance are in force.
- 1.02 Students who anticipate an absence from any class have the responsibility to notify the PA Program course instructor or administrative assistant on a daily basis and complete the absentee form.
- 1.03 Attendance at on-campus classes in the face of inclement weather should align with university inclement weather policies and closing announcements posted on the website/or media announcements. Students may also call 1-800-472-9502 for confirmation.
- 1.04 Attendance records including the absentee form will be utilized for consideration for evaluation of substandard performances and letters of recommendation upon graduation.
- 1.05 The PA program reserves the right to assess attendance records of those students who have a serious or prolonged illness and to determine their ability to successfully progress through the curriculum.
- 1.06 The individual instructor has the right to refuse admittance to any student who is chronically tardy although the student is still responsible for any material covered during that time and will need to complete an absentee form. “Tardy” is defined as not being at your assigned position ready to begin at the class start-time.
- 1.07 Students are required to attend any/all activities outside of a regular “class day” when informed by the program/an instructor that it is a mandatory event unless it is an excused absence. Family obligations/commitments, employment, travel/distance, and previous plans are not likely to be considered excused absences.
- 1.08 A student may be excused from a class on an individual basis upon the verbal or written permission of his or her course director or Program Director. In an emergency and when no faculty member is available, the student is expected to notify the Administrative Assistant, appropriate faculty member, or the Program Director.
- 1.09 An excused absence does not mandate that the student be allowed to make up any missed work as a result of the absence. The instructor may use his or her discretion. It is the student’s responsibility to obtain missed material such as lecture notes and handouts.
- 1.10 Penalties for missing classes shall be up to the individual course instructors and may include but are not limited to grade reduction and/or make-up requirements for classes missed.

- 1.11 Any absence in violation of the course instructor's attendance policy or not approved by the course instructor is considered an unexcused absence. Unexcused absences may result in a student having to repeat a course.
- 1.12 Chronic absenteeism may be used as a reason for dismissal from the program if the course instructors, Program Director, Academic Coordinator deem dismissal is warranted. The final decision will be made by the Program Director with advice from the PA faculty.
- 1.13 Excused/Emergency absences generally include but are not limited to the following:
 - 1.13.01 Death of an immediate family member
 - 1.13.02 Natural disaster
 - 1.13.03 Significant personal injury
 - 1.13.04 Childbirth

In cases such as those above, the student must make a reasonable effort to notify the program as soon as possible. If contact prior to the absence is not possible, it is the responsibility of the student to contact the program immediately following the absence. The student must make arrangements for making up any missed work that is permitted within one week of the absence.

2.0 Student Identification

- 2.01 All students are required to wear a name-tag that includes identification of program sponsorship, discipline, and student status while on supervised clinical rotations or when required by the PA program. In some instances, clinical affiliation sites will require additional identification and nametags to be worn. The University of Findlay name-tags will be provided by the PA program.

3.0 Professional Attire

- 3.01 Students while attending classes at The University of Findlay PA Program will be required to dress professionally as outlined below.
- 3.02 Students will be required to wear short white jackets and their UF ID Badges when attending any clinical experience or as directed by the program.
- 3.03 Each student must have a working watch with a second hand.
- 3.04 Students may choose to purchase a long white jacket to be worn only during their anatomy laboratory experience. (Refer to directives of course facilitator.)
- 3.05 Students are expected to wear business casual attire (women: slacks, dress, skirt/blouse/sweater; men: dress shirt or collared polo/golf shirt, slacks, and shoes). Low cut dresses/tops, any revealing clothes must be avoided. Tennis shoes, sandals, and open-toed shoes are not considered professional attire. Any jewelry (male or female) should be worn with professional discretion.
- 3.06 Professional appearance includes good hygiene, absence of visible body piercing/tattoos, and clean shaven appearance, kempt appearance. Artificial nails are not acceptable in the clinical setting and any painted and/or artificial nails are NOT permitted during a surgery rotation.
- 3.07 "Dress-down" is defined as wearing blue jeans and informal shirts or blouses.
- 3.08 Dress-down days occur when instructed by the PA program/faculty.
- 3.09 Final Exam week falls under "dress-down day" unless otherwise announced.
- 3.10 Students may find it necessary to bring a change of clothes and/or casual clothing when engaged in lab sections of courses such as Physical Assessment or Clinical Patient Care. Scrubs may be acceptable if authorized by the faculty.

- 3.11 Failure to comply with the above standards will result in disciplinary action which may range from a verbal or written warning, professional probation, or dismissal from the program.

B. Didactic Professional Comportment Standards

- 1.0 Students will engage in any and all classroom and clinical field environments in a professional manner with comportment that shows consideration and respect for others, patients, preceptors, faculty, administrators, and any and all staff members at a clinical site.
- 2.0 Every student is assumed trustworthy and committed to maintaining honor and professional ethics as purported by the profession's national organization. Students will pledge to support the Honor Code system which serves as the overarching mode for conducting program affairs.
- 2.01 Violations of the honor code are subject to disciplinary action by the PA Program/University.
- 2.02 Violations of the honor code include acts of lying (including plagiarism), cheating, or stealing while enrolled as a student in the PA program or engagement in an action that constitutes a violation of administrative rules, civil and or/ criminal laws of the United States.
- 3.0 Students will be required to demonstrate full compliance with the technical standards attested to on their admission statements.
- 4.0 Students will engage in any and all supervised clinical practice settings in a professional manner and compliance with rules, regulations, policies, and practices of the host institution/preceptor.
- 5.0 Students who fail to comply with the Didactic Professional Comportment Standards may be subject to Professional Probation.

C. Didactic Performance Evaluation

- 1.0 Individual Performance Records
- 1.01 Students can access their course grades each semester via their academic record through the University website.
- 1.02 Grades will not be released over the telephone or email, but by way of Blackboard or distribution in class.
- 1.03 If a student earns less than a 73%, they are required to undergo a remediation plan as outlined in section XIII, C. 5.
- 2.0 Examination Process
- 2.01 Students who meet ADA requirements must notify The Office of Disability Services as discussed in the current UF Graduate Catalog.
- 2.02 To support compliance with UF Honor code, students may not comment on any test question during the time of the examination/competency.
- 2.03 Students arriving late to an examination during the didactic or clinical year will not be given extra time to complete the examination. They will only have what is left in the established examination period.
- 2.04 Examinations will cover all content areas in the course including handouts, videos, readings, lecture material, and guest lectures.

- 2.05 Students will be permitted to leave the examination room for only two purposes: a) upon completion of the examination, and b) an emergency situation (the need to use the restroom is not considered an emergency situation unless it is necessitated by an acute medical condition)
 - 2.05.1 Once a student has completed the examination and left the examination room, no other students still taking the examination will be allowed to leave the examination room and return to complete their examination.
 - 2.05.2 If a student has to leave the examination room as the result of an illness or emergency, he or she may be allowed to finish the examination at the sole discretion of the course instructor. The time, place, and form of completion of the examination will be determined by the instructor.
- 2.06 Examinations must be returned in their entirety.
- 2.07 Students will remain in their seats during the examination. No student will be allowed to obtain or consume food or beverages during the examination unless cleared by the course instructor.
- 3.0 Examination Review
 - 3.01 Students may have the opportunity to review examinations with the correct answer key after all students have taken the exam – exam review is a privilege, not a right, and is at the discretion of the instructor.
 - 3.02 After the formal “in-class” scheduled review of an examination has taken place, students may additionally meet individually with the lead faculty to discuss reviewed exams during scheduled office hours or walk in when the instructor is available within two weeks of the examination. The course faculty responsible for each exam have the final authority on the subject matter, exam keys, and timeline.
- 4.0 Absence /Make-Up Exams
 - 4.01 Make-up exams will be evaluated on a case-by-case basis and scheduling will be at the discretion of the instructor.
 - 4.02 There will be no make-up exams provided for unexcused absences.
- 5.0 Remediation of Substandard Exam Outcomes
 - 5.01 Remediation is a limited process that enables students to attempt to correct a deficiency noted on a targeted competency/examination and may take the form of directed or self-directed learning.
 - 5.02 Remediation may be available to students who experience a student-perceived or faculty-perceived substandard outcome on any written or competency exam.
 - 5.03 Students receiving a failing grade (less than 73% or a non-pass) on an examination or competency will be required to undergo a remediation plan as designed by the Course Instructor.
 - 5.03.1 No retake examinations for grade replacement will be permitted.
 - 5.03.2 A student who does not successfully fulfill all requirements of a remediation plan designed by the Course Instructor after a student has received a failing grade on a written examination will fail the course.
 - 5.03.3 A student who fails a course because of an unsuccessful remediation attempt will be dismissed from the PA program without possibility of readmission to the program.
 - 5.04 Substandard performance (non-pass/NP) on skill competency exams (e.g., physical assessment, patient care skills) due to major technique errors or major omissions may be repeated one time to convert a “Non-Pass” to “Pass”.

- 5.04.1 If a student fails their attempt to convert a “Non-Pass” to a “Pass” grade for any competency, he/she will fail the course.
- 5.04.2 A student who fails a course because of an unsuccessful remediation attempt will be dismissed from the PA program without possibility of readmission to the program.

XIII: GRADING POLICIES AND STANDARDS

A. Academic Standards

- 1.0 To remain in good academic standing, all PA students must maintain a minimum semester GPA (grade point average) of 3.0 and a “P” (pass) in all performance-grade rated courses. This may mean that a student could receive a “C” or better in a letter-grade rated course which when added to higher letter grades still average out to 3.0 and/or may have engaged in a remediated skill and converted one NP to a P. Any student unable to convert a “NP” (non-pass) to a “P” (pass) after one attempt in a didactic a course will have a failing grade of “F” recorded for that course and be required to repeat it at its next offering.
- 2.0 A student must complete the program within a time period of three calendar years or less unless due to a medical leave or leave of absence and approved by the PA program. Therefore, a student will only be permitted to sit out and repeat a course (courses) one time.
- 3.0 Students may only receive one failing grade in the clinical year and may repeat that particular course only once with the stipulation that a passing grade must be earned to continue. Any failing clinical course must be sequenced immediately (or as soon as possible if unable to be scheduled as the next immediate rotation) in the student’s individual program.
- 4.0 Students should note the designated course sequencing required of the didactic curriculum and understand that courses may not be taken out of sequence.
- 5.0 See Sections XIV.I/J for specific standards during the clinical year.

B. Academic Grade Point Average

Student academic performance in the PA Program is measured by computation of the GPA. The GPA is calculated by dividing the accumulated number of grade points earned by the accumulated number of credit hours attempted.

C. Various Assessment Metrics

LETTER GRADE	GPA	% SCALE	PROGRESS ASSESSMENT	COMPETENCY PERFORMANCE
A	4.0	93-100	Proficient	Pass
A-	3.67	90-92	Competent	
B/B+	3.0/3.33	83-89		
C+/B-	2.33/2.67	77-82	Advanced Beginner	Fail; Non-Pass; Needs Remediation
C	2.0	73-76	Novice	
C-/D	1.0/1.67	60-72	At Risk/	
D-/F	0/0.67	Under 59	Non-Pass/Fail	

D. Academic Evaluation Performance Standard

- 1.0 Standards of acceptable performance (cognitive, psychomotor and professionalism) for courses are communicated to students in writing via the syllabus and reviewed at course introduction.
 - 1.01 Performance in didactic programs is commonly assessed by but not limited to written (cognitive) exams, oral presentations, research papers, final exams and in designated courses by targeted skill competency exams.
 - 1.02 Performance in the clinical phase of the program is assessed using a combination of evaluations conducted by the SCP preceptor, written critical-thinking assignments, patient logging, and online examinations.
- 2.0 At the end of the semester, each student will have the opportunity to provide anonymous feedback on the course instructor/s and guest speakers, the presentation, the content of the course, and the activities. The students' evaluations and comments are valuable for assessment of the success of the course as well as the improvement of the course. All materials needed to provide this feedback are supplied by the PA program and the university.

XIV. SUPERVISED CLINICAL PRACTICE PROGRAM STANDARDS

Following the successful completion of semesters I-IV of the didactic year, students will advance into the clinical education phase of the program. The UF PA students are required to complete eight “Supervised Clinical Practice” (SCP) courses. Supervised Clinical Practice represents clinical education opportunities (field placement) that enable students to actively participate in the evaluation and management of diverse patient populations with medical, surgical and traumatic problems in ambulatory and tertiary care centers. Each PA student will complete their SCPs in entirety which includes the required seven sequential six week assignments in each core discipline and one clinical discipline elective. Electives can include primary care settings as well as specialty disciplines.

A. Clinical Setting Behavioral Standard

1.0 Attendance

- 1.01 Students will abide by the Physician Assistant Program SCP calendar rather than the PA didactic calendar or university calendar while in the clinical education phase of the program unless otherwise designated by the program.
- 1.02 Students will be present a minimum of 40 hours per week (average) with a maximum of 80 hours per week (average) at each assigned clinical education site unless stipulated by the Clinical Coordinator to fully earn course credits (absences, both excused and unexcused, will be recorded and tallied). Students must accurately record their clinical hours in Typhon Time Logs for each day of each SCP. The PA program reserves the right to verify Typhon Time Log entries with the clinical preceptor. Students failing to be present for a minimum of 40 hours per week (average) will have that recorded as an unexcused absence unless approval is obtained from the PA program.
- 1.03 An unexcused absence is grounds for dismissal from the program (i.e., including abandonment of a supervised clinical rotation).
 - 1.03.1: Abandonment of a supervised clinical rotation is defined as a student leaving a rotation site or failure to attend a site without the prior notification to and approval from the preceptor to leave that site for any reason. Any absence from the clinical site must be approved by the Clinical Coordinator and an Absentee Form completed. Exceptions may be granted for an excused absence, a leave of absence, or permission of the Clinical Coordinator (CC). If unable to contact the CC, attempt must be made to contact either the Program Director or other program faculty. If not dismissed from the PA program, the student will be required to make up the SCP at the discretion of the program.
 - 1.03.2: Unexcused absences will result in a required meeting with the Program Director and the CC who will review the circumstances and determine the student’s status regarding continued participation in the PA program and remediation. The remediation plan may require repeating the SCP which will increase tuition costs and may result in a delay in graduation.
- 1.04 Students are required to be present day, evening, nights and/or weekends as required by the SCP affiliation site and assigned schedule by the preceptor. This includes taking call and making rounds as applicable. However, no student shall be required to be present for more than 80 hours/week (average) on any given SCP.
- 1.05 In the event of an illness or emergency necessitating absence from the clinical education site, students MUST personally (or an authorized representative) notify the clinical site first as soon as possible and then contact the PA Program Office immediately to report absence.
- 1.06 Students who are absent from an SCP for more than three consecutive days due to a reported illness will require a written medical note for the record (student file).

- 1.07 Students are permitted to have a total of five absences during the clinical education year. Any student who is absent greater than five days will be required to make up all absences (>5 days), unless specifically exempted by the PA Program Director. Any absences can jeopardize program progression and completion. The placement and timing for make-up days will be at the discretion of the CC.
 - 1.08 Students who have greater than five reported absences in any one SCP must meet with the Program Director/CC regarding continued participation in the program.
 - 1.08.1: If greater than 40 hours (five days) are missed during any one SCP, the SCP must be made up in its entirety.
 - 1.09 Students may be excused from an SCP to perform research or to meet with a Research Advisor at a scheduled appointment but only with prior approval from the CC and confirmed by the Research Advisor.
 - 1.10 Students will attend all assigned learning activities assigned by the Clinical Preceptor or PA program faculty in correlation with targeted learning objectives.
 - 1.11 Students who wish to attend professional conferences, seminars, etc. must submit a written request to the CC and send a copy to the Program Director and PA program SCP faculty mentor no later than 30 working days prior to the first day of the event. Timeliness of submission of the request and student academic status in the program will be factors considered in granting time away from the site. Also considered is the impact of time away from the site on the student's ability to successfully achieve the objectives of the SCP. If possible, the student will be notified no later than 20 working days prior to the first day of the event whether their request has been approved or denied. The program will evaluate the type of activity/ conference on a case-by-case basis and determine if it is relevant and applicable to the practice of a physician assistant at that point in the student's education.
 - 1.12 The program is not obligated to provide additional clinical experience assignments or times to those students who elect to attend approved extracurricular educational activities and remain responsible for any and all standard targeted PA learning and objectives of the SCP.
 - 1.13 Students will be required to attend any/all activities as required by the PA program/faculty during the clinical year. These will count as excused absences from the SCP and will not count towards the five permitted absences.
- 2.0 Student Identification
 - 2.01 Students will wear identification pins and/or badges bearing their name and UF PA student status on their short white lab coat (pocket or sleeve location).
 - 2.02 Students will verbally identify themselves as a Physician Assistant student from the UF PA Program during all patient and professional encounters at the preceptor site or when representing the profession or the program.
 - 3.0 Professional Attire
 - 3.01 Students will comply with established dress code policies of the PA Program and host institution during clinical education placements.

- 3.02 Clean and pressed short white lab coats with proper identification are mandatory (unless instructed not to wear it by the preceptor) for clinical education sites. They may be required to be worn at SCP activities including End of Rotation (EOR) Days. (Scrubs may be allowed, but **ONLY** when approved by the preceptor. **Do NOT wear or take scrubs from a facility without permission.**)
 - 3.03 While the specific form of proper identification may vary from site to site all students must maintain their UF student identity by displaying the photo ID badge which identifies one as a physician assistant student (PA-S) at The University of Findlay.
 - 3.04 Students are expected to wear professional attire (women: dress, skirt/blouse/sweater, dress slacks with stockings; men: dress shirt/slacks, tie, shoes, and socks.). Low cut dresses/top and revealing clothes must be avoided. Tennis shoes, sandals, and open-toed shoes are not considered professional attire. Any jewelry (male or female) should be worn with professional discretion and must be removed/modified as per the policy of the clinical site and/or preceptor.
 - 3.04 Professional appearance includes good hygiene, absence of visible body piercing/tattoos, and clean shaven appearance, kempt appearance. Artificial nails are not acceptable in the clinical setting and any painted and/or artificial nails are NOT permitted during a surgery rotation.
 - 3.05 Failure of student to comply with #1.0 through #3.04 will, at a minimum, result in the student being placed on Professional Probation. Refer to The Professional Probation Section of the Handbook.
- 4.0 Confidentiality
- 4.01 Students will respect patient confidentiality at all times. Patient information is to be discussed only in the context of professional discussion with health care providers at the clinical site. Great caution is advised in discussing patients by name, by case, by diagnosis, and/or by outcomes in any place or any medium other than point of service and authorized forms of documentation. Any violation of patient privacy under the federal regulation of HIPAA jeopardizes the preceptor's practice and positions the student for dismissal from the program.
 - 4.02 Students will delete/omit identifying personal patient information ("protected health information" as defined in your HIPAA training) during oral patient reviews and on any write-ups submitted for academic evaluation.
- 5.0 Documentation
- 5.01 Students will confer with the preceptor regarding general policies and practices of chart entries, electronic medical records use, and/or dictation procedures of the clinical site.
 - 5.02 Students must receive permission from the preceptor prior to making written entries into the patient records.
 - 5.021: If students are unable/not allowed to record entries into the patient's chart, they must keep a notebook of their own with these entries and should have the clinical preceptor review them. No entries should be removed from the facility with patient identifying data. Students must abide by HIPAA policies and procedures when creating their own notes/records.
 - 5.03 Student entries in records must include student status, e.g. Your Name, PA-S or Your Name, PA-Student.
 - 5.04 All student entries on patient records must be countersigned by the Clinical Preceptor.

5.05 Documents submitted as part of coursework must demonstrate respect for patient, provider and institution's confidentiality and be submitted in compliance with course requirements.

6.0 TYPHON Documentation for SCPs

6.01 Each student is responsible for his/her online documentation using the Typhon Group Database. This should be completed daily and as often as possible. Documentation must be complete and thorough. Each student will receive instructions on the use of the Typhon Group Database as part of their orientation to the clinical year.

6.02 Typhon logging or its equivalent (if the program should change the program used) is a **MANDATORY ACTIVITY** and must be completed within three days of each patient encounter for each SCP. Typhon is mandatory for the Elective SCP as well. Typhon Group Database provides each student and the program a record of the student's experiences throughout his/her clinical year and is critical to comply with ARC-PA accreditation standards. It also allows the student to generate tables, graphs, and reports of what they have done for potential employers.

6.03 **IMPORTANTIn order to receive the final grade for each SCP, Typhon entries MUST be completed by the end of each rotation. Failure to do so will result in an INCOMPLETE grade until entries have been completed.**

6.04 The Clinical Coordinator, the Experiential Educator, or the Program Director will be monitoring Typhon logging activities. Items being monitored include:

1. Number of patients seen per day
2. Ages of patients seen
3. Gender of patients seen
4. Ethnicity of patients seen
5. CPT codes for Evaluation and Management (E and M codes) as well as procedures performed and the level of student involvement in those procedures
6. Number and types of specific competencies as defined within the Typhon Database
7. ICD-9 diagnosis codes assigned to the patients seen
8. Number and types of drugs prescribed
9. Number and types of referrals made for patients
10. Participation in surgeries
11. Participation in deliveries

6.05 Academic Credit and Policies for Typhon Database Logging:

- 6.051 If a student is deemed to be entering fraudulent data it will result in a failing grade for the rotation and the student will be placed on academic probation by the program (see PA Student Handbook).
- a. Each student will be allowed the opportunity to appeal a failing grade. Refer to the Student Handbook for the appeals process.
 - b. Evidence of fraud includes, but is not limited to:
 - i. Entering identical data for multiple patients
 - ii. Fabricating data on patients
 - iii. Entering fictitious patients, diagnoses, competencies, or procedures

- 6.052 If a student fails to enter data on patients within the time specified (within three days of each patient encounter) the student will receive a warning when it is discovered.
- a. A repetition of the behavior after the first warning will result in the student being placed on professional probation by the program.
- 6.053 If the student receives another warning after being placed on professional probation for the two previous violations of this policy, the student will immediately be assigned a failing grade for the rotation, will withdraw from the site and will be required to repeat the rotation unless this infraction requires expulsion from the PA Program because of other professionalism or academic issues.

B. Supervised Clinical Practice Professional Comportment Standards

- 1.0 Technical Standards apply for didactic and clinical year students.
- 2.0 Students will engage in SCPs in a professional manner with comportment that is patient-centered and reflective of the Code of Ethics of the PA profession.
- 3.0 Students will confer with the preceptor regarding all clinical findings, written notes, interventions and patient management plans and participate as delegated.
- 4.0 Students will immediately report any potential medical liability incident regarding their activities to the preceptor and the CC.
- 5.0 Students will not release a patient from their care who has not been evaluated by the preceptor or their designee.
- 6.0 Students will complete the appropriate UF and site incident/reporting forms for encounters with all reportable diseases and exposures and submit them to the proper offices and/or personnel as designated.
- 7.0 Students are to discuss concerns that arise and difficulties encountered at the site only with their assigned preceptor, CC, PA program SCP mentor/faculty, and/or PA Program Director.
- 8.0 Failure of a student to comply with B1.0 – B 7.0 may result in the student being placed on Professional Probation or dismissed from the program dependent upon the severity of the infraction at the discretion of the program chair.

C. Communication with Program and Program Personnel

- 1.0 Students will provide the CC with a phone number and a “best time” to be reached/visited during the SCP within the first 48 hours of the SCP. Students should be able to be reached by the program at any time, day or night, in the event there is an emergency or the student needs to be contacted.
- 1.01: Students must update their personal and emergency contact information as needed at the start of each SCP and will be completed through the students’ Typhon student account. All changes must be recorded in Typhon immediately.

- 2.0 Students will receive information from the PA program via UF e-mail accounts and must maintain and regularly check their UF e-mail address. The program is not responsible for a student missing valuable information, assignments, scheduled/required events, or deadlines due to failure to check their UF e-mail accounts.
- 3.0 Students are encouraged to retain all written, hand-delivered or electronic correspondence sent to or received from the PA Program during each SCP which can, as necessary, be used to resolve any discrepancies which may arise.
- 4.0 Students may contact the core faculty or staff by telephone (419-434-4529) or e-mail at any time. Depending upon the time the email is sent or message left, faculty/staff will respond within 24 hours or by Monday if the message is sent/left during the weekend unless they are unavailable.
- 5.0 Students may make appointments with the CC, program director, faculty, and mentor/adviser as needed with approved absences from site if warranted.
- 6.0 Students with concerns regarding their ability to accomplish the objectives on the SCP must contact the faculty mentor for that SCP and the CC **as soon as they develop the concern.**
- 7.0 Failure of a student to comply with C1.0 – C7.0 may result in the student being placed on Professional Probation or dismissed from the program dependent upon the severity of the infraction at the discretion of the program chair.

D. SCP Site Placement

- 1.0 Students are not responsible for identifying clinical sites, but they may submit a recommendation for a one-time or on-going program affiliation. Students may participate in site development by completing a “Student Generated Preceptor Contact Form” (SGPC). This form serves as a prompt to the PA program that the student has a preceptor/site in mind where they would like to complete an SCP. Based on the information provided by the student, the PA program initiates the formal contact representing the PA program with the preceptor/site from the program.
 - 1.01 Such sites must meet all of the established educational goals for the clinical experience and must agree to become legally affiliated with The University of Findlay PA Program during the time the student is attending the site.
 - 1.02 It is up to the discretion of the PA Program as to which sites to utilize and students are not guaranteed to be placed at sites which they identify/request.
 - 1.03 Students may submit an unlimited number of SGPCs.
- 2.0 Students can be placed anywhere in the area and at distant affiliates including out of the state.
- 3.0 **Students are responsible for their own housing and transportation including all costs incurred at all SCPs.**
- 4.0 When possible, for sites greater than two hours away from the Findlay area, students will be notified at least eight weeks in advance of the planned assignment.
- 5.0 **Assignment to specific SCP sites is primarily dependent on availability and is at the discretion of the CC.**

- 6.0 Final decisions regarding assignment to individual sites are made by the CC with collective input from the PA program when necessary.
- 7.0 The decision for SCP placement is commonly based on but not limited to the following:
- Ability of the clinical site to fulfill the educational requirements
 - Availability of the site
 - Preceptor/site requests
 - Individual student characteristics
 - Sequencing of SCPs for each student
 - Academic challenge presented by site characteristics
 - Student past performance in areas critical to success at the site
 - SCPs completed by student to date

E. Sequencing of the Clinical Year

- 1.0 Sequencing of the clinical courses is subject to change without notice.
- 2.0 Untimely changes in site availability can create a “ripple effect” throughout the entire class and may result in a change in the sequence of SCP disciplines for some students.
- 3.0 All students will enroll in and complete eight supervised clinical practice opportunities, three sequential research related courses, and three seminar format courses during the clinical year of the PA Program.

F. SCP Performance Evaluation Standard

- 1.0 To evaluate the successful transfer of learning to clinical settings, individual student evaluations will be conducted in various ways during each SCP and recorded on student transcripts.
- 1.01 SCP Performance Outcome is based on a composite of attitudes, skills, and knowledge derived from the following elements:
- Post-SCP evaluation of the student by the preceptor
 - Achievement of targeted learning objectives
 - Cognitive assessments including general medicine and discipline specific rotation exams
- 1.02 PA program academic policies and all academic policies of The University of Findlay will remain in effect during the clinical education component of the curriculum.
- 2.0 The SCP Assessment Tool forms will be completed by the primary clinical preceptor to assess the learning that takes place at the clinical setting.
- 3.0 It is the responsibility of the student to review the learning objectives at the start of each SCP.
- 4.0 The student clinical education performance at the SCP site is continually assessed by the preceptor(s). The mid-SCP evaluation should be done at week 3 to identify strengths and weaknesses that can be further improved upon during the remainder of the SCP.

- 5.0 Students must achieve a “Novice” level or higher in all categories of the Clinical Competency Assessment and the Professionalism Assessment of the SCP Assessment Tool completed by the primary preceptor at the conclusion of the SCP. Failure to earn a “Novice” level or higher will result in a failing grade for the SCP regardless of the score earned from assignments and testing.
- 5.01 The student is to bring the completed “Supervised Clinical Practice Assessment Tool” form with them in a signed and sealed envelope to his/her faculty mentor/instructor for that rotation, or, the form may be mailed/faxed to the program within one week. These forms can also be completed electronically on Typhon, which is the preferred method.
- Failure to submit the forms as outlined above will result in a delay in grade submission for the course and may result in a delay in beginning subsequent SCPs.
- 5.0 Targeted learning competency assignments will be assessed by the SCP mentor/faculty.

G. Performance Evaluation Outcomes

- 1.0 Students who do not pass an SCP will have the opportunity to repeat that SCP during their clinical education which must be completed during the next SCP time period if possible. If the repeated SCP is failed the student will be dismissed from the PA Program.
- 2.0 Any student who receives a second failing grade for any SCP (either a repeated attempt or fails a second additional SCP) will be dismissed from the PA Program.
- 3.0 Any student who is unable to complete an SCP due to medical or personal reasons will receive a grade of incomplete (“X”) if appropriate. Written notification must be submitted to the PD and CC by the student. Contingencies for completing the SCP will be planned by the PD and CC. A student who withdraws from a course under these circumstances may be subject to conversion of “X” to an “F” if the mutually agreed upon contingency plan is not successfully completed. See Student Leave of Absence Policy
- 4.0 A student must meet the following criteria in order to receive a passing grade for each SCP:
- “Novice” level or higher is earned on all portions of the “SCP Assessment Tool”
- AND
- 73% or higher is earned as the numerical total composite score
- 5.0 The SCP faculty mentor will review the “SCP Assessment Tools” (if received by the program by the meeting date) and assignments and submit the grade/points earned to the CC. The CC will review and record post-SCP exam results. The CC will allow time for students to review the Post-SCP computer-based exams immediately following the exam.
- 6.0 The CC will notify students of their final grade earned on the SCP in a timely manner.

H. SCP Discipline-Specific and General Medicine Exams

- 1.0 The SCP discipline-specific exam focuses on (but is not limited to) questions related to the most common diagnoses/problems likely to be encountered during that particular SCP.
- 2.0 The SCP general medicine exam will cover ALL TOPICS relative to patient care in all disciplines.

I. Nonpass/Failing SCP Grades

- 1.0 A student will receive a failing grade for an SCP if they receive a:
 - “At Risk” (non-pass) on the SCP Assessment Tool
 - OR**
 - Total composite numerical score of SCP \leq 73%
- 2.0 The CC will notify the failed student no later than three days after the final date of the SCP grade is assessed OR within three days of receipt of a failed preceptor evaluation (whichever applies or comes first).
- 3.0 Students who fail any SCP must make an appointment to meet with the CC and PD within three days of notification of the SCP Outcome. Remediation plans, written by the program, will address the following areas:
 - 3.01 During this meeting, the PD, CC, and the SCP faculty mentor will assess eligibility for remediation and develop and review a plan for remediation. Students will be permitted to repeat only one SCP during the clinical portion of the PA Program.
 - 3.02 Clinical preceptor comments on areas of weakness in performance outcomes as documented on their SCP Assessment Tool by preceptor reflecting unprofessional and/or unethical behaviors, or decision making that puts patients at risk will be reviewed for grounds for dismissal from the program.
 - 3.03 A remediation plan will be generated regarding the general medicine post-SCP exam, discipline specific post-SCP exam and SCP course objectives (specific to course syllabus). This will consist of completion of learning objectives that are identified by the faculty mentor, CC, and/or Clinical Preceptor as areas of weakness. Students must complete this remediation plan by the assigned deadline.
- 4.0 Students who earn a failing grade on an SCP, either due to substandard performance on assignments and/or on the general medicine and SCP discipline specific exams and/or due to a poor evaluation by the SCP preceptor will be required to repeat the failed SCP in its entirety at his/her own expense.
 - 4.01 A student is permitted to repeat only one SCP during the clinical portion of the PA program; a second failed SCP will result in the student’s immediate dismissal from the PA program.

J. Appealing the Clinical Portion of a Grade

- 1.0 A student wishing to appeal the clinical portion of the clinical grade should:
 1. Discuss the course work and the earned grade with the clinical course instructor responsible for the clinical evaluation.
 2. If resolution is not achieved with the clinical instructor, the appeal goes to the course instructor and Program chair/Department Chair of the student’s major.
 3. If resolution is not achieved with the Program Chair/Department Chair and course instructor, then the appeal goes to the Dean of the College of Health Professions.
 4. If resolution is not achieved with the Dean, then the following appeal process may be initiated.

2.0 Appeal Process

1. After all other procedures have been completed, if the student still believes there is a reason to appeal, he/she should request to meet with the Clinical Education Committee.
 2. The student must submit a written request to the committee chair to have the appeal placed on the committee's agenda.
 3. The chair will call a special meeting, if a regular meeting is not scheduled within a month of the appeal request.
 4. At the meeting, the Program Chair/Department Chair will describe the student's present status within the major and the sequence of events leading to the appeal. The student will then have an opportunity to present his/her case to the committee.
 5. The committee will excuse the student, the Dean and the Program Chair/Department Chair and will deliberate privately regarding the case.
 6. The decision of the Clinical Education Committee will be announced to the student, Dean and Program Chair/Department Chair as soon as possible.
 7. The chair of the Clinical Education Committee will prepare a written report and submit copies to the student, the Dean, the Program Chair/Department Chair and the student's file.
 8. The student may request the Vice President of Academic Affairs to review the decision of the Clinical Education Committee.
- Members of the committee will include:
 - Dean of the College of Health Professions (ex-officio)
 - One representative from each program with a minimum of two faculty members and the remainder being clinical coordinators.
 - These individuals will serve a three year term with a staggered rotation off the committee.

XV. STUDENT RESEARCH STANDARDS

A. Clinical Education Research Conduct Standard

- 1.0 Physician assistant students engaged in research related endeavors will apply appropriate knowledge, skills and medical research ethics while conducting research.
- 2.0 Physician assistant students may engage in only pre-approved research activities.
- 3.0 Once a research timeline has been established, requests for extended time or modifications must be submitted in writing to the student's designated Research Advisor at least 4 weeks in advance.
- 4.0 Physician assistant students enrolled in semesters 5, 6, and 7 are responsible for scheduling meetings with their Research Advisor as set by the program and/or research advisor. These appointments are to be made through the Research Advisor with notification given to the CC if the appointments occur outside of the allotted times.
- 5.0 Students will notify their Research Advisor of any obstacles encountered with research efforts and any anticipated need for change in prior approved protocol. Documentation of the obstacle/change must be recorded in the student record.
- 6.0 Failure of a student to comply with A1.0 – A 5.0 may result in the student being placed on Professional Probation, deduction in appropriate course grade, and/or delay in completion of the program dependent upon the severity of the infraction at the discretion of the program chair.

B. Evaluation of Research

- 1.0 Course grades for Project Scholarship I, II, and Leadership Symposium will reflect the rubric designed for the course. All Research Advisors will utilize the same grade criteria (rubric) to evaluate student research thereby ensuring inter-rater reliability. These course syllabi contain the evaluation methods used for the research.
- 2.0 The culmination of research efforts will be presented during Semester VII as a component of the course 606 Leadership Symposium. The research portion of this course will include the presentation of research and the draft of submission for publication and/or poster presentation (Note: acceptance for publication or presentation is not required).
- 3.0 Unavoidable delays in research resulting from required changes in the research proposal or time-lines may result in a grade of "I" (incomplete) for the course. The Research Advisor will advise students on tasks to be completed and deadlines required in order to convert grades of "I" to a letter grade.

XVI. Dismissal from the PA Program

A. Poor Ethical Conduct

- 1.0 A student responsible for breaches of professional ethics or any behavior that might pose a threat to a patient or himself/herself will be dismissed from the PA program unless it is the result of a self-limiting or treatable mental or medical condition.
 - 1.01 Reinstatement into the PA program in this situation will only be possible after clearance from the treating licensed medical professional.

B. Failure to Meet Minimum Academic Standards

- 1.0 Failure of a course in the PA program is defined as earning a grade less than “C”.
- 2.0 Any student who fails one course (grade of “C-” or below) in the didactic phase of the will be dismissed from the PA program.

C. Failure to Comply with the Attendance Policy

- 1.0 Students who habitually disrupt the classroom with tardiness or who are chronically absent from class may be subject to dismissal from the PA program.

D. Cases of Academic or Professional Misconduct

E. Suspension

- 1.0 Any student placed on suspension from the University due to academic or any other reasons will be dismissed from the PA program with no option of re-entry.

XVII. Completion of the PA Program

To graduate from the UF PA program, all students must fulfill the following requirements:

A. Course Completion

- 1.0 Each student is required to successfully pass each course in the UF PA Program curriculum with no more than two grades of “C”. This includes the completion and presentation of the student’s research.

B. Summative Evaluations

- 1.0 Each student is required to take and pass a comprehensive summative written examination within the last four months of the program.
 - 1.01 Any student earning a grade of 73% or higher shall be considered to have successfully passed the comprehensive summative written examination.
 - 1.02 Any student who fails the comprehensive summative written examination will be required to undergo a remediation plan designed by the PA program and retake a comprehensive summative written examination once the remediation plan has been successfully completed.
 - 1.03 If a student fails the retake comprehensive summative written examination after completion of the remediation plan, they will meet with the Program Director, Academic Coordinator, and the Dean of the College of Health Professions to determine the next action. The purpose of the meeting shall be to determine whether the student should remain in the program undergoing further remedial work or be dismissed from the program.
- 2.0 Each student will be required to demonstrate competence with a head-to-toe physical examination on an adult patient within 60 minutes following the guidelines/checklists previously given during the Physical Assessment I and Physical Assessment II courses within the last four months of the program.
 - 2.01 The head-to-toe physical examination must also be performed at a competent level prior to entering the clinical year and again within the last four months of the program.
 - 2.02 Any student who fails the PE will be required to undergo a remediation plan designed by the PA program and re-perform the PE once the remediation plan has been successfully completed.
 - 2.03 If a student fails the repeat PE after completion of the remediation plan, they will meet with the Program Director, Academic Coordinator, and the Dean of the College of Health Professions to determine the next action. The purpose of the meeting shall be to determine whether the student should remain in the program undergoing further remedial work or be dismissed from the program.

C. Declaration of Graduation

- 1.0 To graduate, each student must declare his or her intention to graduate and show the approval of the faculty advisor by completing an application for graduation and turning it in to the Office of the Registrar and MUST have this completed six months prior to the expected graduation date.

D. Grade Point Average

- 1.0 To graduate, each student must have maintained a PA program curriculum GPA of 3.0 or greater.

E. Professional Probation

- 1.0 No student will be permitted to graduate from the UF PA program while he or she is on Professional Probation.

F. University Requirements

- 1.0 All students must satisfy all University requirements for graduation. Refer to The University of Findlay Graduate Catalog.

XVIII. STUDENT/PROFESSIONAL ORGANIZATIONS

A. AAPA

The American Academy of Physician Assistants is the national organization for physician assistants. The AAPA has an elected board and can be a source of information on a wide span of topics.

1.0 Students are required to obtain membership in the AAPA as a reflection of their commitment to developing an understanding of the universal issues and comportment of the profession to which they aspire. Student membership is available at a discounted fee.

The AAPA website is a valuable source of information: <http://www.aapa.org/>

B. SAAAPA

The Student Academy of the American Academy of Physician Assistants (SAAAPA) is the national organization for students in enrolled in physician assistant programs and is a “subset” of the AAPA. SAAAPA has an elected board and participates in many capacities including subcommittees within the AAPA. This organization can be a source of information on a wide span of topics. Students are encouraged to visit website: <https://aapa.org/saapa>

1.0 All students accepted into the PA program are required to become members of The University of Findlay Physician Assistant Student Society (PASS), the UF PA program’s chapter of SAAAPA, and participate in the activities within PASS.

C. OAPA

The state association representing practicing physician assistants in the state of Ohio is the Ohio Association of Physician Assistants (OAPA) and student membership is required.

- The OAPA website is located at <http://www.ohiopa.com/>

1.0 All students accepted into the PA program are required to become members of the OAPA. Student membership is available at a discounted fee.

D. NCCPA

The National Commission on Certification of Physician Assistants is dedicated to serving the interest of the public. They do so with a passionate belief that certified physician assistants are essential members of the health care delivery team who provide millions access to more affordable, high quality health care.

The mission of the NCCPA is to assure that those certified physician assistants meet professional standards of knowledge and skills.

- The NCCPA website is located at <http://www.nccpa.net/>

E. ARC-PA

The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) is the accrediting agency that protects the interests of the public and PA profession by defining the standards for PA education and evaluating PA educational programs within the territorial United States to ensure their compliance with those standards. The ARC-PA website is located at <http://www.arc-pa.org/>.

XIX. PROGRAM AND STUDENT RESOURCES

A. Program Personnel:

The Physician Assistant Program staff consists of a Department Chair/Program Director, three core fulltime faculty, adjunct faculty, a Program Medical Director, a Clinical Coordinator, an Experiential Education Specialist and the Administrative Assistant/Enrollment Coordinator.

B. Physical Resources:

The PA Program has both dedicated administrative and student learning areas on campus. Faculty and staff administrative offices are located at 304 College Street. Learning Labs (LL) for students are located at Brewer Center for Health Sciences (BCHS). Overview of the PA Program Resources available to students follows (please note, the physical resources are not limited to these areas):

USE	RESOURCE	LOCATION
Didactic small groups or lecture	Dedicated space \geq 18 seats	BCHS 212 LL C
Physical Assessment	Dedicated space with 10 tables and seating capacity for 20; formal and or informal OSCEs as scheduled	BCHS B007 LL A; Off-campus; specified locations
Patient and Laboratory Skills	Scrub sink, multiple mannequins for skills	BCHS 217 LL B
Cadaver Anatomy	Multiple Cadavers	BCHS B006
Technological Support	Polyvision boards and/or web-access, etc.	BCHS LL A, B and C
Classroom Library /Learning Support	Textbooks, reference books, CDs, simulators, etc.	BCHS LL A, B and C
Schafer Library	Institution and Program specific	Campus building
Computer Lab	Laptops required of students; BCHS Computer Lab	BCHS 107
PA Administration	Faculty and Staff Offices (7) and Conference Room	304 College
Copy Machines		Shafer library
Printing Station		BCHS basement, Shafer library, computer labs
Bookstores		North Mains St, Oiler Mart in AMU
Meals/Cafeteria	Full-service cafeteria; snack bar	Henderson; Cave

XX. QUICK LIST DIRECTORY

When dialing from a UF phone, just dial the last four numbers which is the extension number (i.e., if the phone number is 419-434-4529, just dial the extension which is 4529 and may be seen written as X4529).

A. University Administration

Daniel May, Ph.D.

Vice President for Academic Affairs
Office location: Old Main 103
Office phone number: 419-434-4633
Email: may@findlay.edu

Andrea Koepke, DNS

Dean, College of Health Professions
Office location: 330 College Street A
Office phone number: 419-434-4677
Email: Koepke@findlay.edu

Thomas Dillon, Ed.D.

Dean, Graduate and Professional Studies
Office location: Old Main 113A
Office phone number: 419-434-5777
Email: Dillon@findlay.edu

B. PA Program Personnel

Paul Davis, MD

Chair/ Program Director and Faculty
Office location: 304 College St. Office A
Office phone number: 419-434-6983
Email: davis@findlay.edu

Brian Cole, MD

Medical Director and Adjunct Faculty
Office location: 330 College St.
Office phone number: 419-434-4529
Email: cole@findlay.edu

Sara Denning, MPA, PA-C

Faculty
Office location: 304 College St. Office H
Office phone number: 419-434-5953
Email: lingvai@findlay.edu

Nancy Moody-Russo, RN, BSN, JD

Clinical Coordinator
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Christi Gierhart, MPAS, PA-C

Faculty
Office location: 304 College St. Office F
Office phone number: 419-434-6739
Email: gierhart@findlay.edu

Lynn Schank

Experiential Education Specialist
Office Location: 304 College St. Office C
Office phone number: 419-434-5626
Email: schankl@findlay.edu

Richard Hopkins, MPAS, PA-C

Faculty, Academic Coordinator
Office location: 304 College St. Office G
Office phone number: 419-434-6735
Email: hopkinsr@findlay.edu

Peggy McBride

Administrative Assistant
Office Location: 304 College St. Office E
Office phone number: 419-434-4529
Email: mcbride@findlay.edu

Cara Davies, Ph.D

Faculty
Office Location: 330 College St. Office D
Office phone number: 419-434-5640
Email: davies@findlay.edu

Bradley Shinn, Pharm.D.

Faculty
Office Location: 300 Davis Street Office #113
Office phone number: X5384
Email: shinn@findlay.edu

C. Adjunct PA Program Faculty

Other adjunct faculty may include practicing physician assistants, physicians, and university faculty among others in support of achieving targeted learning objectives.

D. Support Services

Financial Aid Services

Office Location: Old Main, First floor

Office phone number: 419-434-4792

Health Services

Office Location: Cosiano Health Center,

Office phone number: 419-434-4550

Human Resources

Office Location: Croy Physical Education Center #215

Office phone number: 419-434-6964

Library

Shafer Library

Phone number: 419-434-4627

Security Campus Office

Location: Lovett Hall, first floor

Phone number: 419-434-4799 for emergencies, otherwise 419-434-4601

XXI. STANDARD PA PROGRAM FORMS

The following pages contain forms commonly used for the PA program. Copies can be made of these forms and submitted when needed and the forms are also available in the PA Program Office.

Student Handbook Acknowledgement Form

The University of Findlay Physician Assistant Program



My signature below serves two purposes: First, it acknowledges my receipt of The University of Findlay Physician Assistant Student Handbook, and that I was given ample time to read as well as discuss any questions regarding its content with the program faculty and administration.

Second, it confirms my willingness to adhere to the policies and procedures outlined in the program's physician assistant student handbook.

Student name (printed)

Student Signature Date

Received by:



ABSENTEE FORM

Student Name: _____

Date _____

Reason for Absence:

- | | |
|--|---|
| <input type="checkbox"/> Student Illness | <input type="checkbox"/> Family Illness |
| <input type="checkbox"/> Family Funeral | <input type="checkbox"/> Weather |
| <input type="checkbox"/> Medical Appointment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Accident | <input type="checkbox"/> Other _____ |

Date(s) of Absence: _____

Notice Received From: Student Relative Other (Name: _____)

Please mark classes you were/will be absent from:

PHAS 500 Mechanisms of Health & Disease	PHAS522 Clinical Patient Care II
PHAS 501 Clinical Anatomy	PHAS523 Clinical Heuristics and Decision Making
PHAS 502 Physical Assessment I	PHAS524 Designing a Research Project
PHAS 503 Information Literacy & Communication	PHAS530 Clinical Medicine III
PHAS 506 PA Professional Issues	PHAS531 Fundamentals of Emergency Care
PHAS 505 Clinical Inquiry & Communication	PHAS532 Fundamentals of Surgical Patient Care
PHAS 510 Clinical Medicine I	PHAS533 Behavioral Medicine
PHAS 511 Clinical Pharmacology I	PHAS534 Community and Individual Wellness
PHAS 512 Physical Assessment II	PHAS535 Evidence Based Case Management
PHAS 513 Health Care Systems, Policy, & Practice	PHAS 611 SCP in Family Practice
PHAS 514 Clinical Patient Care I	PHAS 612 SCP in General Internal Medicine
PHAS520 Clinical Medicine II	PHAS 613 SCP in General Pediatrics
PHAS521 Clinical Pharmacology I	PHAS 614 SCP in Women's Health
PHAS508 Medical Ethics	PHAS 615 SCP in General Surgery
PHAS 602 Project Scholarship I	PHAS 616 SCP in Emergency Medicine
PHAS 604 Project Scholarship II	PHAS 617 SCP in Psychiatry/Mental Health
PHAS 606 Leadership Symposium	PHAS 618 SCP in Elective I
PHAS 601 Developing a Reflective Practitioner I	PHAS _____
PHAS 603 Developing a Reflective Practitioner II	PHAS _____
PHAS 605 Developing a Reflective Practitioner III	

Comments: _____

ALL CLASSES BEING MISSED MUST HAVE A FACULTY SIGNATURE BELOW:

Faculty Signature(s): _____

Date _____

Record of Accidental Exposure

The University of Findlay Master of Physician Assistant Program



Record of Exposure to Potentially Infectious Materials

Student Name: _____ PA-S

SCP Discipline:

Name of Site:

Date and time of exposure (as precise as possible):

Type of exposure (check): Needlestick Mucous membrane Eye
 Other (please specify: _____)

Review The University of Findlay Physician Assistant Program Exposure Policy in the Student Handbook

REQUIRED Notifications:			
	Date and Time	Person Contacted	When to contact
1.		Rotation preceptor/Health service (NAME: _____)	Immediately!
2.		PA Program Clinical Coordinator or Program Director	Immediately!
3.		Others as needed	

Details (provide the following details of the incident):

Work area/location of incident:

Circumstances of incident:

Details (provide the following details of the incident):

Personal protective equipment worn:

Describe any unsafe conditions:

Describe first-aid/medical treatment received:

List witnesses:

Exposure source individual known?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Source HIV known positive?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Source Hep B known positive?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Source Hep C known positive?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Did source CONSENT to blood draw and testing?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Please provide any additional information about this incident:

Please use additional pages if necessary.

The PA Program will use this information for tracking purposes only. This information will remain **confidential**.

Student Signature: _____ Date:

Received by Clinical Coordinator: _____ Date:

Clinical Coordinator Signature:

Record of Program Follow-up of Student Exposure to PIM³

This form is to document the follow-up required after a PA student has an exposure to potentially infectious materials such as bloodborne pathogens.

Student Name: _____ PA-S
SCP Discipline:

Name of Site:

Date and time of exposure (as precise as possible):

Type of exposure (check): Needlestick Mucous membrane Eye
 Other (please specify: _____)

FOLLOW-UPS:

	Event	Initial Date	Time	Faculty Signature Receiving Report
1.	Initial Exposure			
		Scheduled	Actual	
	Follow-Up:	Date:	Date/Time:	Faculty Signature Making Contact
2.	48 hour contact			
3.	1 week contact			
4.	4 – 6 wk contact			
5.	3 month contact			
6.	6 month contact			

Instructions: After an report is received from a student, calculate and enter the dates for the required follow-up contacts with the student and enter those dates in the “Scheduled Date” column for all 5 contacts (48 hr, 1 week, 4-6 week, 3 month, and 6 month). This form shall be kept in a separate binder/folder with all other active follow-up cases until all contacts have been made.

Six month outcome:

Signed:

Date:

3

PIM = Potentially Infectious Material, specifically bloodborne pathogens

Academic Dishonesty Form
The University of Findlay
Physician Assistant Program



Student Name: _____

Student I.D. Number: _____

Course Department and Number: _____

Course Title: _____

Course Session and Year: _____ Course Hours: _____

Instructor Name: _____

Date academic dishonesty discovered: _____

Brief description of dishonest action: _____

Course of Action: (Please select one.)

_____ Student will receive a zero on the associated assignment

_____ Student will receive a reduction in possible point for the course. **

_____ Student will receive a grade of "F" for the course.

_____ Other: _____

** Explanation of reduction in points _____

The student may appeal in writing the charge of academic dishonesty to the Student Academic Standards Committee within 5 working days of the receipt of the letter of notification from the Dean of Undergraduate Education or Graduate Studies.

Instructor Signature: _____ Date: _____

Cc: College Dean, Area Director, Registrar, Student

The University of Findlay
Physician Assistant Program
1000 North Main Street
Findlay, OH 45840
419-434-5607

Student Generated Preceptor Contact Form

If you have a potential preceptor, please contact his/her office to determine if that person is willing to serve as your preceptor. If he/she is willing to do so, then submit the following information to the clinical coordinator.

Please print all information.

Student Name: _____

Physician Name: _____ MD DO PA Other _____ -

(circle one)

Specialty: _____ E-mail address: _____

Preferred Date of Rotation: _____

Office Name: _____

Office Address: _____

Office Phone: _____

Office Contact Name: _____

Office Contact's Phone: _____

Office Contact's Email _____

Hospital Affiliations: 1. _____

2. _____

3. _____

4. _____

Use other side of paper to list additional affiliations.

Submit to:

The University of Findlay
Physician Assistant Program
Nancy Moody-Russo, RN, BSN, JD
Clinical Coordinator
1000 North Main Street
Findlay, OH 45840
419-434-5607

SCP 1	01/07 – 02/12/2013
SCP 2	02/18 – 03/26/2013
SCP 3	04/01 - 05/07/2013
SCP 4	05/13 – 06/25/2013
SCP 5	07/01 – 08/06/2013
SCP 6	08/12 – 09/17/2013
SCP 7	09/23 – 10/29/2013
SCP 8	11/04 – 12/10/2013
SCP 8 is not an option for core rotations. These dates are purposely reserved for your final rotation. SCP 8 discipline will be determined close to the end of your 2 nd year.	

XXII. Guidelines for Ethical Conduct For The Physician Assistant Profession Policy Of The American Academy Of Physician Assistants

Introduction

The physician assistant profession has revised its code of ethics several times since the profession began. Although the fundamental principles underlying the ethical care of patients have not changed, the societal framework in which those principles are applied has. Economic pressures of the health care system, social pressures of church and state, technological advances, and changing patient demographics continually transform the landscape in which PAs practice.

Previous codes of the profession were brief lists of tenets for PAs to live by in their professional lives. This document departs from that format by attempting to describe ways in which those tenets apply. Each situation is unique. Individual PAs must use their best judgment in a given situation while considering the preferences of the patient and the supervising physician, clinical information, ethical concepts, and legal obligations.

Four main bioethical principles broadly guided the development of these guidelines: autonomy, beneficence, nonmaleficence, and justice.

Autonomy, strictly speaking, means self-rule. Patients have the right to make autonomous decisions and choices, and physician assistants should respect these decisions and choices.

Beneficence means that PAs should act in the patient's best interest. In certain cases, respecting the patient's autonomy and acting in their best interests may be difficult to balance.

Nonmaleficence means to do no harm, to impose no unnecessary or unacceptable burden upon the patient.

Justice means that patients in similar circumstances should receive similar care. Justice also applies to norms for the fair distribution of resources, risks, and costs.

Physician assistants are expected to behave both legally and morally. They should know and understand the laws governing their practice. Likewise, they should understand the ethical responsibilities of being a health care professional. Legal requirements and ethical expectations will not always be in agreement. Generally speaking, the law describes minimum standards of acceptable behavior, and ethical principles delineate the highest moral standards of behavior.

When faced with an ethical dilemma, PAs may find the guidance they need in this document. If not, they may wish to seek guidance elsewhere – possibly from a supervising physician, a hospital ethics committee, an ethicist, trusted colleagues, or other AAPA policies. PAs should seek legal counsel when they are concerned about the potential legal consequences of their decisions.

The following sections discuss ethical conduct of PAs in their professional interactions with patients, physicians, colleagues, other health professionals, and the public. The "Statement of Values" within this document defines the fundamental values that the PA profession strives to uphold. These values provide the foundation upon which the guidelines rest. The guidelines were written with the understanding that no document can encompass all actual and potential ethical responsibilities, and PAs should not regard them as comprehensive.

Statement of Values of the Physician Assistant Profession

- Physician assistants hold as their primary responsibility the health, safety, welfare, and dignity of all human beings.
- Physician assistants uphold the tenets of patient autonomy, beneficence, nonmaleficence, and justice.
- Physician assistants recognize and promote the value of diversity.

- Physician assistants treat equally all persons who seek their care.
- Physician assistants hold in confidence the information shared in the course of practicing medicine.
- Physician assistants assess their personal capabilities and limitations, striving always to improve their medical practice.
- Physician assistants actively seek to expand their knowledge and skills, keeping abreast of advances in medicine.
- Physician assistants work with other members of the health care team to provide compassionate and effective care of patients.
- Physician assistants use their knowledge and experience to contribute to an improved community.
- Physician assistants respect their professional relationship with physicians.
- Physician assistants share and expand knowledge within the profession.

The PA and Patient

PA Role and Responsibilities

Physician assistant practice flows out of a unique relationship that involves the PA, the physician, and the patient. The individual patient–PA relationship is based on mutual respect and an agreement to work together regarding medical care. In addition, PAs practice medicine with physician supervision; therefore, the care that a PA provides is an extension of the care of the supervising physician. The patient–PA relationship is also a patient–PA–physician relationship.

The principal value of the physician assistant profession is to respect the health, safety, welfare, and dignity of all human beings. This concept is the foundation of the patient–PA relationship. Physician assistants have an ethical obligation to see that each of their patients receives appropriate care. PAs should be sensitive to the beliefs and expectations of the patient. PAs should recognize that each patient is unique and has an ethical right to self-determination.

While PAs are not expected to ignore their own personal values, scientific or ethical standards, or the law, they should not allow their personal beliefs to restrict patient access to care. A PA has an ethical duty to offer each patient the full range of information on relevant options for their health care. If personal moral, religious, or ethical beliefs prevent a PA from offering the full range of treatments available or care the patient desires, the PA has an ethical duty to refer a patient to another qualified provider. That referral should not restrict a patient’s access to care. PAs are obligated to care for patients in emergency situations and to responsibly transfer patients if they cannot care for them.

Cost Containment

Cost containment and resource allocation policies can present particular ethical challenges to clinicians. Physician assistants should always act in the best interests of their patients and as advocates when necessary. PAs should actively resist policies that restrict free exchange of medical information. For example, a PA should not withhold information about treatment options simply because the option is not covered by insurance. PAs should inform patients of financial incentives to limit care, use resources in a fair and efficient way, and avoid arrangements or financial incentives that conflict with the patient’s best interests.

The PA and Diversity

The physician assistant should respect the culture, values, beliefs, and expectations of the patient.

Non-discrimination

Physician assistants should not discriminate against classes or categories of patients in the delivery of needed health care. Such classes and categories include gender, color, creed, race, religion, age, ethnic or national origin, political beliefs, nature of illness, disability, socioeconomic status, physical stature, body size, gender identity, marital status, or sexual orientation.

Initiation and Discontinuation of Care

In the absence of a preexisting patient–PA relationship, the physician assistant is under no ethical obligation to care for a person unless no other provider is available. A PA is morally bound to provide care in emergency situations and to arrange proper follow-up. PAs should keep in mind that contracts with health insurance plans might define a legal obligation to provide care to certain patients.

A physician assistant and supervising physician may discontinue their professional relationship with an established patient as long as proper procedures are followed. The PA and physician should provide the patient with adequate notice, offer to transfer records, and arrange for continuity of care if the patient has an ongoing medical condition. Discontinuation of the professional relationship should be undertaken only after a serious attempt has been made to clarify and understand the expectations and concerns of all involved parties.

If the patient decides to terminate the relationship, they are entitled to access appropriate information contained within their medical record.

Informed Consent

Physician assistants have a duty to protect and foster an individual patient’s free and informed choices. The doctrine of informed consent means that a PA provides adequate information that is comprehensible to a competent patient or patient surrogate. At a minimum, this should include the nature of the medical condition, the objectives of the proposed treatment, treatment options, possible outcomes, and the risks involved. PAs should be committed to the concept of shared decision making, which involves assisting patients in making decisions that account for medical, situational, and personal factors.

In caring for adolescents, the PA should understand all of the laws and regulations in his or her jurisdiction that are related to the ability of minors to consent to or refuse health care. Adolescents should be encouraged to involve their families in health care decision making. The PA should also understand consent laws pertaining to emancipated or mature minors. (See the section on *Confidentiality*.)

When the person giving consent is a patient’s surrogate, a family member, or other legally authorized representative, the PA should take reasonable care to assure that the decisions made are consistent with the patient’s best interests and personal preferences, if known. If the PA believes the surrogate’s choices do not reflect the patient’s wishes or best interests, the PA should work to resolve the conflict. This may require the use of additional resources, such as an ethics committee.

Confidentiality

Physician assistants should maintain confidentiality. By maintaining confidentiality, PAs respect patient privacy and help to prevent discrimination based on medical conditions. If patients are confident that their privacy is protected, they are more likely to seek medical care and more likely to discuss their problems candidly.

In cases of adolescent patients, family support is important but should be balanced with the patient’s need for confidentiality and the PA’s obligation to respect their emerging autonomy. Adolescents may not be of age to make independent decisions about their health, but providers should respect that they soon will be. To the extent they can, PAs should allow these emerging adults to participate as fully as possible in decisions about their care. It is important that PAs be familiar with and understand the laws and regulations in their jurisdictions that relate to the confidentiality rights of adolescent patients. (See the section on *Informed Consent*.)

Any communication about a patient conducted in a manner that violates confidentiality is unethical. Because written, electronic, and verbal information may be intercepted or overheard, the PA should always be aware of anyone who might be monitoring communication about a patient.

PAs should choose methods of storage and transmission of patient information that minimize the likelihood of data becoming available to unauthorized persons or organizations. Computerized record keeping and electronic data

transmission present unique challenges that can make the maintenance of patient confidentiality difficult. PAs should advocate for policies and procedures that secure the confidentiality of patient information.

The Patient and the Medical Record

Physician assistants have an obligation to keep information in the patient's medical record confidential. Information should be released only with the written permission of the patient or the patient's legally authorized representative. Specific exceptions to this general rule may exist (e.g., workers compensation, communicable disease, HIV, knife/gunshot wounds, abuse, substance abuse). It is important that a PA be familiar with and understand the laws and regulations in his or her jurisdiction that relate to the release of information. For example, stringent legal restrictions on release of genetic test results and mental health records often exist.

Both ethically and legally, a patient has certain rights to know the information contained in his or her medical record. While the chart is legally the property of the practice or the institution, the information in the chart is the property of the patient. Most states have laws that provide patients access to their medical records. The PA should know the laws and facilitate patient access to the information.

Disclosure

A physician assistant should disclose to his or her supervising physician information about errors made in the course of caring for a patient. The supervising physician and PA should disclose the error to the patient if such information is significant to the patient's interests and well being. Errors do not always constitute improper, negligent, or unethical behavior, but failure to disclose them may.

Care of Family Members and Co-workers

Treating oneself, co-workers, close friends, family members, or students whom the physician assistant supervises or teaches may be unethical or create conflicts of interest. For example, it might be ethically acceptable to treat one's own child for a case of otitis media but it probably is not acceptable to treat one's spouse for depression. PAs should be aware that their judgment might be less than objective in cases involving friends, family members, students, and colleagues and that providing "curbside" care might sway the individual from establishing an ongoing relationship with a provider. If it becomes necessary to treat a family member or close associate, a formal patient-provider relationship should be established, and the PA should consider transferring the patient's care to another provider as soon as it is practical. If a close associate requests care, the PA may wish to assist by helping them find an appropriate provider.

There may be exceptions to this guideline, for example, when a PA runs an employee health center or works in occupational medicine. Even in those situations, the PA should be sure they do not provide informal treatment, but provide appropriate medical care in a formally established patient-provider relationship.

Genetic Testing

Evaluating the risk of disease and performing diagnostic genetic tests raise significant ethical concerns. Physician assistants should be informed about the benefits and risks of genetic tests. Testing should be undertaken only after proper informed consent is obtained. If PAs order or conduct the tests, they should assure that appropriate pre- and post-test counseling is provided.

PAs should be sure that patients understand the potential consequences of undergoing genetic tests – from impact on patients themselves, possible implications for other family members, and potential use of the information by insurance companies or others who might have access to the information. Because of the potential for discrimination by insurers, employers, or others, PAs should be particularly aware of the need for confidentiality concerning genetic test results.

Reproductive Decision Making

Patients have a right to access the full range of reproductive health care services, including fertility treatments, contraception, sterilization, and abortion. Physician assistants have an ethical obligation to provide balanced and unbiased clinical information about reproductive health care.

When the PA's personal values conflict with providing full disclosure or providing certain services such as sterilization or abortion, the PA need not become involved in that aspect of the patient's care. By referring the patient to a qualified provider who is willing to discuss and facilitate all treatment options, the PA fulfills their ethical obligation to ensure the patient's access to all legal options.

End of Life

Among the ethical principles that are fundamental to providing compassionate care at the end of life, the most essential is recognizing that dying is a personal experience and part of the life cycle.

Physician assistants should provide patients with the opportunity to plan for end of life care. Advance directives, living wills, durable power of attorney, and organ donation should be discussed during routine patient visits. PAs should assure terminally-ill patients that their dignity is a priority and that relief of physical and mental suffering is paramount. PAs should exhibit non-judgmental attitudes and should assure their terminally-ill patients that they will not be abandoned. To the extent possible, patient or surrogate preferences should be honored, using the most appropriate measures consistent with their choices, including alternative and non-traditional treatments.

PAs should explain palliative and hospice care and facilitate patient access to those services. End of life care should include assessment and management of psychological, social, and spiritual or religious needs.

While respecting patients' wishes for particular treatments when possible, PAs also must weigh their ethical responsibility, in consultation with supervising physicians, to withhold futile treatments and to help patients understand such medical decisions.

PAs should involve the physician in all near-death planning. The PA should only withdraw life support with the supervising physician's agreement and in accordance with the policies of the health care institution.

The PA and Individual Professionalism

Conflict of Interest

Physician assistants should place service to patients before personal material gain and should avoid undue influence on their clinical judgment. Trust can be undermined by even the appearance of improper influence. Examples of excessive or undue influence on clinical judgment can take several forms. These may include financial incentives, pharmaceutical or other industry gifts, and business arrangements involving referrals. PAs should disclose any actual or potential conflict of interest to their patients.

Acceptance of gifts, trips, hospitality, or other items is discouraged. Before accepting a gift or financial arrangement, PAs might consider the guidelines of the Royal College of Physicians, "Would I be willing to have this arrangement generally known?" or of the American College of Physicians, "What would the public or my patients think of this arrangement?"

Professional Identity

Physician assistants should not misrepresent directly or indirectly, their skills, training, professional credentials, or identity. Physician assistants should uphold the dignity of the PA profession and accept its ethical values.

Competency

Physician assistants should commit themselves to providing competent medical care and extend to each patient the full measure of their professional ability as dedicated, empathetic health care providers. PAs should also strive to maintain and increase the quality of their health care knowledge, cultural sensitivity, and cultural competence through individual study and continuing education.

Sexual Relationships

It is unethical for physician assistants to become sexually involved with patients. It also may be unethical for PAs to become sexually involved with former patients or key third parties. Key third parties are individuals who have influence over the patient. These might include spouses or partners, parents, guardians, or surrogates.

Such relationships generally are unethical because of the PA's position of authority and the inherent imbalance of knowledge, expertise, and status. Issues such as dependence, trust, transference, and inequalities of power may lead to increased vulnerability on the part of the current or former patients or key third parties.

Gender Discrimination and Sexual Harassment

It is unethical for physician assistants to engage in or condone any form of gender discrimination. Gender discrimination is defined as any behavior, action, or policy that adversely affects an individual or group of individuals due to disparate treatment, disparate impact, or the creation of a hostile or intimidating work or learning environment.

It is unethical for PAs to engage in or condone any form of sexual harassment. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature when:

- Such conduct has the purpose or effect of interfering with an individual's work or academic performance or creating an intimidating, hostile or offensive work or academic environment, or
- Accepting or rejecting such conduct affects or may be perceived to affect professional decisions concerning an individual, or
- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's training or professional position.

The PA and Other Professionals

Team Practice

Physician assistants should be committed to working collegially with other members of the health care team to assure integrated, well-managed, and effective care of patients. PAs should strive to maintain a spirit of cooperation with other health care professionals, their organizations, and the general public.

Illegal and Unethical Conduct

Physician assistants should not participate in or conceal any activity that will bring discredit or dishonor to the PA profession. They should report illegal or unethical conduct by health care professionals to the appropriate authorities.

Impairment

Physician assistants have an ethical responsibility to protect patients and the public by identifying and assisting impaired colleagues. "Impaired" means being unable to practice medicine with reasonable skill and safety because of physical or mental illness, loss of motor skills, or excessive use or abuse of drugs and alcohol. PAs should be able to recognize impairment in physician supervisors, PAs, and other health care providers and should seek assistance from appropriate resources to encourage these individuals to obtain treatment.

PA–Physician Relationship

Supervision should include ongoing communication between the physician and the physician assistant regarding patient care. The PA should consult the supervising physician whenever it will safeguard or advance the welfare of the patient. This includes seeking assistance in situations of conflict with a patient or another health care professional.

Complementary and Alternative Medicine

When a patient asks about an alternative therapy, the PA has an ethical obligation to gain a basic understanding of the alternative therapy being considered or being used and how the treatment will affect the patient. If the treatment would harm the patient, the PA should work diligently to dissuade the patient from using it, advise other treatment, and perhaps consider transferring the patient to another provider.

The PA and the Health Care System

Workplace Actions

Physician assistants may face difficult personal decisions to withhold medical services when workplace actions (e.g., strikes, sick-outs, slowdowns, etc.) occur. The potential harm to patients should be carefully weighed against the potential improvements to working conditions and, ultimately, patient care that could result. In general, PAs should individually and collectively work to find alternatives to such actions in addressing workplace concerns.

PAs as Educators

All physician assistants have a responsibility to share knowledge and information with patients, other health professionals, students, and the public. The ethical duty to teach includes effective communication with patients so that they will have the information necessary to participate in their health care and wellness.

PAs and Research

The most important ethical principle in research is honesty. This includes assuring subjects' informed consent, following treatment protocols, and accurately reporting findings. Fraud and dishonesty in research should be reported so that the appropriate authorities can take action.

Physician assistants involved in research must be aware of potential conflicts of interest. The patient's welfare takes precedence over the desired research outcome. Any conflict of interest should be disclosed.

In scientific writing, PAs should report information honestly and accurately. Sources of funding for the research must be included in the published reports.

Plagiarism is unethical. Incorporating the words of others, either verbatim or by paraphrasing, without appropriate attribution is unethical and may have legal consequences. When submitting a document for publication, any previous publication of any portion of the document must be fully disclosed.

PAs as Expert Witnesses

The physician assistant expert witness should testify to what he or she believes to be the truth. The PA's review of medical facts should be thorough, fair, and impartial.

The PA expert witness should be fairly compensated for time spent preparing, appearing, and testifying. The PA should not accept a contingency fee based on the outcome of a case in which testimony is given or derive personal, financial, or professional favor in addition to compensation.

The PA and Society

Lawfulness

Physician assistants have the dual duty to respect the law and to work for positive change to laws that will enhance the health and well being of the community.

Executions

Physician assistants, as health care professionals, should not participate in executions because to do so would violate the ethical principle of beneficence.

Access to Care / Resource Allocation

Physician assistants have a responsibility to use health care resources in an appropriate and efficient manner so that all patients have access to needed health care. Resource allocation should be based on societal needs and policies, not the circumstances of an individual patient–PA encounter. PAs participating in policy decisions about resource allocation should consider medical need, cost-effectiveness, efficacy, and equitable distribution of benefits and burdens in society.

Community Well Being

Physician assistants should work for the health, well being, and the best interest of both the patient and the community. Sometimes there is a dynamic moral tension between the well being of the community in general and the individual patient. Conflict between an individual patient's best interest and the common good is not always easily resolved. In general, PAs should be committed to upholding and enhancing community values, be aware of the needs of the community, and use the knowledge and experience acquired as professionals to contribute to an improved community.

Conclusion

The American Academy of Physician Assistants recognizes its responsibility to aid the PA profession as it strives to provide high quality, accessible health care. Physician assistants wrote these guidelines for themselves and other physician assistants. The ultimate goal is to honor patients and earn their trust while providing the best and most appropriate care possible. At the same time, PAs must understand their personal values and beliefs and recognize the ways in which those values and beliefs can impact the care they provide.