

2018-2019



PRESBYTERIAN COLLEGE

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PRESBYTERIAN COLLEGE PHYSICIAN ASSISTANT STUDIES BULLETIN



Table of Contents

Directory of Administration, Faculty, and Staff	5
General Overview	6
Mission (A2.05)	6
Vision	6
Values	6
Goals.....	6
Accreditation Statement (A3.14a)	6
Policies Disclaimer	7
Scope of Policies (A3.01)	7
Degrees Offered.....	7
General Program Requirements (A3.15d)	7
Health Care Experience Requirements (A3.15a).....	8
References	8
Disclosure of Admissions Practices (A3.15a)	8
Offers of Admission	9
Physician Assistant Technical Standards(A3.15e)	9
Annotations to the Technical Standards	11
Physician Assistant Studies Program Policies.....	13
Tuition, Fees, and Refund Policy (A3.14).....	13
Payment of Tuition and Fees	13
Tuition Refund Schedule	13
Health Insurance Policy	13
Faculty as Student Health Care Providers Policy (A3.09).....	13
Required Immunizations and Health Screening Policy (A3.07).....	14
Student Transportation	15
Housing.....	15
Student Technology.....	15
Certification	15
Physician Assistant Certification and Licensure.....	16
Professional Liability Insurance Policy	16
Universal Precautions Policy (A3.08)	16
Linens.....	16
Facial Equipment	16
Hand Washing	16
Gloves	17
Gown.....	17
Prevention of Needle Stick and Other Sharps	17
Respiratory Hygiene and Cough Etiquette.....	17
Waste Disposal.....	17
Patient Care Equipment.....	17
Universal Precautions Summary for Health Care Workers.....	18
Incident Reporting	18
Forbidden Activities for Physician Assistant Students	19
Criminal Background Check.....	19
Drugs and Alcohol	20
Accommodations for Students with Disabilities	24
Tobacco Use, Smoking, and Vaping	26
Students Working for the Program (A3.14h);(A3.04; A3.05)	26
Students As Clinical or Administrative Staff during SCPE Policy (A3.06)	26

Students Working While In the Program Policy (A3.14h)	27
Inclement Weather.....	27
Procedures for Reporting Student Concerns	27
Nondiscrimination Policy (A3.11)	28
Discrimination and Harassment Policy (A3.11)(A3.17g)	28
Sexual Misconduct Policy (A3.11)	29
Leave of Absence, Short-Term Leave, and Withdrawal Policy (A3.17).....	30
Counseling and Wellness Policy (A3.10)	32
Physical and Psychological Emergencies Policy (A3.10).....	32
Student Travel Reimbursement	33
Lecture Recording	33
Recording of Examinations.....	33
Selection of Clinical Sites (A3.03).....	33
Patient Charting	33
Patient Logging.....	33
Student Services	34
Student Advising(A1.05)	34
Student Tutoring Resources	34
Student Confidentiality of Records (A3.20;A3.21).....	34
Professional Standards, Requirements, & Expectations (C3.04).....	38
Professional Code of Responsibility	38
Professional Standards of Academic, Personal, and Social Conduct.....	38
Code of Professional Conduct within the Physician Assistant Studies Program	39
Professional Attire (C3.02)	40
Student Identification in Clinical Settings (B3.01).....	41
Professional use of Technology and Media	41
Professional Assessment	43
The Honor Code.....	45
Academic Standards, Requirements, & Expectations (A3.17a).....	47
Physician Assistant Competencies	47
Medical Knowledge	47
Interpersonal & Communications Skills (A1.06; B2.04)	47
Patient Care	47
Professionalism	48
Practice-based Learning & Improvement	48
Systems-based Practice.....	48
Grading Policy (Appendix 16)	49
Examinations and Assessments of Student Learning	50
Re-grading and Challenging Examination Questions Policy.....	50
Programmatic Evaluations.....	51
Clinical Evaluations (C4.01)	51
Clinical Learning & Benchmarks (B3.02)	51
Preceptor Evaluations	53
End of Rotation Examinations (EOR)	53
Patient Logging	53
Objective Structured Clinical Examination (OSCE)	54
SOAP Notes.....	54
Board Preparation Assessment (optional for student)	54
Remediation Policy (A3.17f)	54
Remediation Practices (A3.17f).....	55
Deceleration/Leave of Absence Policy (A3.17f)	56
Grievances (A3.17d).....	57
Vacation/Holiday Policy.....	57

Conference Attendance Policy	57
Appeal of Final Letter Grade.....	57
Program for Academic Commitment and Excellence	59
Academic Criteria for Progression (A3.17c).....	59
Probation	60
Dismissal	60
Didactic and Laboratory Courses and Examinations	61
Clinical Practice Experiences	61
Missed Examination and Assignments	63
Special Considerations for Learning	63
Classroom Etiquette	63
Transfer Credit Policy and Advanced Placement (A3.15).....	64
Graduation and Completion Deadline and Requirements Policy E1.09)(A3.17b).....	64
Student Organizations	64
Recognized Student Organizations.....	64
Physician Assistant Student Society	65
Physician Assistant Challenge Bowl Team.....	65
Organizing Professional Service Learning Activities.....	65
Health Fairs and Screenings	66
Sponsored Events.....	66
Alcohol Policy for Sponsored Events	66
Fundraising.....	67
Financial Policies and Procedures.....	67
Outreach and External Relations.....	68
Reports	68
APPENDICES.....	70
Appendix A: Guidelines for Ethical Conduct (C3.02)	71
Appendix B: Course Descriptions (D1.05; Appendix 16).....	79
Appendix C: PA Professional Oath Form	85
Appendix D: Receipt of Student Handbook Form (A3.02).....	86
Appendix E: Release of Health Information Form.....	87
Appendix F: Disclosure Form	88
Appendix G: Participation of Students as Human Subjects Form.....	89
Appendix H: Statement of Confidentiality Form.....	90
Appendix I: Technical Standards Attestation Form (Student Edition)	91
Appendix J: Professional Performance Evaluation (PPE)	92
Appendix K: Remediation Form	95
Appendix L: Incident Reporting Form.....	97
Appendix M: Student Advising Form	99
Index	100

Directory of Administration, Faculty, and Staff

Administration

Robert E. Staton, President (2015)

B.S., Presbyterian College, J.D., University of South Carolina, D.P.S., Presbyterian College

Donald R. Raber II, Provost (2002)

B.A., Furman University, A.M, Ph.D., Harvard University

Joseph G. Weber, Founding Physician Assistant Program Director and Associate Professor of Physician Assistant Studies (2016)

DHSc, MPAS, MBA, PA-C, Sr. Chaplain

Faculty

Trey Boyd, MPAS, PA-C

Clinical Director

Mikala Fowler, MMS, PA-C

Clinical Director

Greg Mappin, MD, MBA

Medical Director

Timothy Pysell, DrHA, MMSc., PA-C, DFAAPA

Admissions Director

Amanda Stevenson-Cali, MPH, PA-C

Academic Director

James Wetzel, PhD

Principal Faculty and Professor

Staff

Josh Tyson, BA

Program Assistant

General Overview

Mission (A2.05)

The compelling purpose of the Presbyterian College Physician Assistant Studies Program, as part of a church-related college, is to develop within the framework of Christian faith the medical, mental, physical, moral, and spiritual capacities of each student in preparation for a lifetime of service to our patients and those in need in our society.

Vision

Our vision is to be a national leader in physician assistant education, scholarship, and service. Our faculty and graduates will be recognized as servant leaders in their communities.

Values

- Quality education
- Culture of service
- Commitment to scholarship
- Integrity
- Teamwork

Goals

- Goal 1: The program will maintain a level of PANCE (Physician Assistant National Certifying Exam) pass rates above the national average.
- Goal 2: The program will maintain a 98% or better graduation rate for entering PA program students.
- Goal 3: The deceleration rates for PA program students will be 2% or less.
- Goal 4: The employment rate for graduates of the PA program will be 95% or greater at six months after graduation.
- Goal 5: At least 50% of graduates of the PA program will obtain their first job within South Carolina.

Accreditation Statement (A3.14a)

Presbyterian College has applied for Accreditation – Provisional from the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). Presbyterian College anticipates matriculating its first class in August 2018, pending achieving Accreditation - Provisional status at the March 2018 ARC-PA meeting. Accreditation – Provisional is an accreditation status for a new PA program that, at the time of its initial accreditation review, demonstrated its preparedness to initiate a program in accordance with the accreditation *Standards*.

The program is also pending approval by the Southern Association of Colleges and Schools Commission on Colleges.

The most up-to-date information regarding the accreditation status of the program is available via the link found at: <http://www.arc-pa.org/accreditation/accredited-programs/>

Additionally, students are periodically encouraged to visit the ARC-PA website and maintain familiarity with the accreditation standards and guidelines while matriculating in the professional program. The link to the website may be found at <http://www.arc-pa.org>.

Policies Disclaimer

The course offerings, regulations, and other materials appearing in this catalog are announcements. Nothing contained herein is to be construed as representing contractual obligations of the Presbyterian College Physician Assistant Studies Program (below as the Physician Assistant Studies program), which reserves the right to change its courses of instruction, fees, and general academic regulations without notice, should circumstances warrant in the judgment of the College. Courses listed in this catalog may not be offered every year. The Registrar will publish an official list of courses to be offered before the beginning of each term.

If a student has not maintained continuous enrollment and fails to graduate with their entering class, the graduation requirements in effect at the time of re-enrollment at the Physician Assistant Studies program will apply.

Scope of Policies (A3.01)

Program policies apply to all students, faculty, and the program director regardless of location.

Degrees Offered

The Physician Assistant Studies program offers the Master of Science in Physician Assistant Studies (MPAS) degree. Program requirements for the MPAS degree are below.

General Program Requirements (A3.15d)

- Students seeking to enroll in the program must possess a baccalaureate degree from a regionally accredited institution (college or university). Students seeking admission must also have completed their baccalaureate degrees with a 3.2 overall GPA, and a 3.2 GPA in science courses (on a 4.0 scale). Students should have earned a grade of "B" or better in all prerequisite coursework, with the exception of Organic Chemistry, which should be a grade of "C" or better. Advanced coursework will be considered as part of a holistic admissions process. Students are able to list classes that they intend to complete within CASPA (the Central Application Service for Physician Assistants), and these applications will be reviewed as well. Advanced Placement (AP) courses may satisfy prerequisite coursework after evaluation by the Admissions Director.
- Due to federal regulations, all international students entering the United States on an F-1 Visa are required to prepay their tuition before registering for classes. International students are not eligible for time-payment plans.
- The following academic courses should be completed within 7 years of enrollment in the program:
 - Anatomy and Physiology I and II with labs (minimum of 8 semester hours)
 - General Chemistry I and II with labs (minimum of 8 semester hours)
 - Organic Chemistry I with lab (minimum 4 semester hours)
 - Biology I and II with labs (Mammalian, Cell or Human; minimum of 8 semester hours)
 - Psychology (minimum 3 semester hours)
 - Microbiology with lab (minimum 3 semester hours)
 - Genetics (minimum 3 semester hours, lab optional)
- The following academic courses should be completed before enrollment in the program:
 - English (Minimum of 6 semester hours)

- Statistics, Algebra, Calculus, Finite Math, or other equivalent Advanced Mathematics (minimum of 6 semester hours or 8 quarter hours)
 - Humanities and/or Social Sciences (minimum of 6 semester hours)
 - Medical Terminology
- Students applying to the program must have completed the Graduate Record Examination (GRE) within 5 years of enrollment in the program.

Health Care Experience Requirements (A3.15a)

Applicants to the program are required to have completed a minimum of 250 hours observing or participating in the delivery of health care in a clinical environment before enrollment.

The Physician Assistant Studies program website has the most up-to-date requirements, which may be found via the link found at:

<https://www.presby.edu/academics/graduate-professional/physician-assistant-program/admissions-pa-program/requirements-pa-program/>

References

Applicants are required to submit three references from sources who are familiar with the qualifications of the candidate. Each reference must comment on his belief that the candidate can successfully complete a rigorous didactic and clinical program such as the Physician Assistant Studies program. The reference is also expected to comment on other attributes he or she feels will ensure the success of the candidate in the medical profession. References from relatives, even if they are health care professionals, are highly discouraged.

One reference is required from each of the following categories:

- A person holding the PA-C, MD or DO designation and who also holds a current license to practice.
- A college or university professor holding a doctoral degree in any discipline where the candidate has been a student in one or more of the classes taught by the faculty member.
- A reference of your choice of someone who has knowledge of your work ethic, academic record, volunteer work or other activities and can comment on your ability to succeed in the Physician Assistant Studies program.

Disclosure of Admissions Practices (A3.15a)

Admissions decisions are based on a holistic view of each candidate. Areas of consideration include but are not limited to the following:

- Overall GPA
- GPA in science classes
- Health care experience within the last 2 years
- GRE score
- CASPA essay
- Recommendations
- Advanced degrees such a prior master's or doctoral degree
- Community service within the last 2 years
- PA shadowing within the last year
- Interview process

All prospective students who are currently enrolled at or graduates from Presbyterian College and who meet the minimum requirements will be granted an interview. Current students and graduates from Presbyterian College will receive some preference in admissions decisions. The Physician Assistant Studies program encourages all applicants with diverse life experiences to apply. Attributes beyond the minimum requirements will be considered during the interview process.

A preference for interview will be given to applicants who meet all of the admissions requirements at the time their application is submitted. For applicants who are not former Presbyterian College students, meeting the minimum admissions requirements does not, however, guarantee an interview or admission to the program.

Criminal Record

All prospective students must portray honestly any criminal records. Background checks will be performed including Bureau of Criminal Identification and Investigation (BCII) report and Federal Bureau of Investigation (FBI) report. The Physician Assistant Studies program reserves the right to deny enrollment based on previous convictions or false information. Appeals to any information found during the background check or drug screen must be made directly through Certified Background according to their listed policies and procedures. All cases will be reviewed individually.

Offers of Admission

Admissions decisions are made by the Admissions Committee of the Physician Assistant Studies program. The Admissions Committee is led by the Admissions Director of the PA program and is comprised of faculty members and at-large community members.

Official admissions decisions are communicated in writing via letter or email by the Physician Assistant Studies program and must also be accepted in writing by the applicant. Once an applicant has accepted his/her offer of admission in writing and the Physician Assistant Studies program receives the students' deposit, he or she is considered a matriculating student. As such, the matriculating student is bound by the *Guidelines for Ethical Conduct for the Physician Assistant Profession*.

Offers of admission by the Physician Assistant Studies program are contingent upon the following:

- completion of all outstanding prerequisite coursework with meeting all minimum requirements noted in the Requirements section above
- maintenance of a GPA at or above the minimum GPA requirement at the end of each semester prior to matriculation
- successful criminal background check and drug screening
- completion of pre-matriculation immunization requirements

Matriculating students are allowed 10 days to review and dispute a criminal background check before the results are released to the School. Criminal background check results will be automatically released to the School after 10 days if applicants do not place a hold on the results. Students should contact the Admissions Director prior to the conclusion of the 10-day review period with additional information regarding any negative findings in the criminal background check. Ultimate decisions about the matriculation of an accepted applicant whose criminal background check reveals information of concern will be made by the Admissions Committee. Falsification of any application materials will be grounds for denial of application or expulsion from the School.

Physician Assistant Technical Standards(A3.15e)

A candidate for the Master of Science in Physician Assistant Studies (MPAS) degree must be able to demonstrate intellectual-conceptual, integrative, and quantitative abilities; skills in observation, communication, and motor functions; and mature behavioral and social attributes.

Technological compensation can be made for some disabilities in certain areas, but a candidate should be able to perform in a reasonably independent manner without a trained intermediary. The use of a trained intermediary means that a candidate's judgment must be mediated by someone else's power of selection and observation.

The Presbyterian College Master of Science in Physician Assistant Studies (MPAS) degree signifies that the graduate is prepared for entry into the practice of medicine. Therefore, the graduating student must possess the skills and knowledge to effectively function in a variety of clinical roles and have a wide range of responsibilities. Superior patient care is critical: therefore, physician assistants require standards to maintain the integrity of quality patient care.

As part of the admissions process, Presbyterian College will evaluate the total student to evaluate his or her ability to function effectively as a physician assistant. The College will evaluate the applicant's academic standing, current physical state, emotional status disability status, and any other obstacles that may impair the student's ability to safely and effectively interact and treat patients and to work effectively with co-workers.

In accordance with College policy and as delineated by Federal and state law, the College does not discriminate in admission, educational programs, or employment against any individual on the basis of that individual's handicap or disability and will make good faith efforts at providing reasonable accommodation as required.

Candidates for the Physician Assistant Studies program must possess ability, aptitude, and skills as outlined below:

Intellectual Attributes: Conceptual, Integrative, and Quantitative Abilities: These abilities include measurement, calculation, reasoning, analysis, and synthesis. Problem solving and the critical skills demanded of physician assistants require all these abilities. The candidate must also be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

Behavioral and Social Attributes: A candidate should possess the emotional health required for full utilization of his/her intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients.

Candidates should be able to tolerate physically taxing workloads and to function effectively under stress. They should be able to adapt to changing environments, to display flexibility, and to learn to function in the face of uncertainty inherent in the clinical problems of many patients.

Compassion, integrity, concern for others, interpersonal skills, interest, and motivation are all personal qualities that are assessed during the admission and education processes.

Communication Attributes: A candidate should be able to speak, hear, and observe patients in order to elicit information, perceive non-verbal communication, and describe changes in mood, activity, and posture. A candidate should be able to communicate effectively and sensitively with patients. Communication includes not only speech, but reading and writing. Communication in oral and written form with the health care team must be effective and efficient.

Observational Attributes: The candidate must be able to observe demonstrations and experiments in the basic sciences, visual presentations in lectures and laboratories, laboratory evidence and microbiologic cultures, microscopic studies of microorganisms, and tissues in normal and pathologic states. A candidate should be able to observe a patient accurately and completely from a distance and close at hand. Observation necessitates the functional use of the sense of vision and somatic sensation and is enhanced by a sense of smell.

Motor Skills: Candidates should have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers. A candidate should be able to carry out basic laboratory tests (urinalysis, CBC, wet mount, gram stain, etc.), carry out diagnostic and therapeutic procedures (phlebotomy, venipuncture, placement of catheters and tubes), and read ECGs and X-rays. Candidates should have motor function sufficient to execute motor movements reasonably required to provide general care and emergency treatment for patients. Examples of emergency treatment reasonably required of a physician assistant are cardiopulmonary resuscitation, the administration of intravenous medications, the application of pressure to arrest bleeding, the opening of obstructed airways, the suturing of simple wounds, and the performance of simple obstetrical maneuvers. Such skills require coordination of both gross and fine muscular movements, equilibrium, and functional use of the senses of touch and vision. Candidates must have sufficient motor function capabilities to meet the demands of the Physician Assistant Studies program and the demands of total patient care. They must be able to complete the didactic and clinical curriculum in its entirety.

Physical Demands: Students must possess the physical ability to learn and implement the various technical skills required by the program. Students must possess an adequate range of body motion and mobility, with or without accommodation, to perform the following essential functions: prolonged periods of sitting, occasional bending and stooping, and the ability to lift and carry books and other items such as medical instruments weighing up to ten (10) pounds, with or without accommodation. They must be able to exert up to ten (10) pounds of force occasionally, and/or a negligible amount of force frequently or constantly to lift, carry, push or pull or otherwise move objects, including the human body. Sedentary work involves sitting most of the time, but may involve walking or standing for brief periods of time.

Ability to Practice Medicine: Students must demonstrate the ability to practice medicine. The ability to practice medicine is to be construed to include all of the following:

- The cognitive capacity to make appropriate clinical diagnoses and exercise reasonable medical judgments and to learn and keep abreast of medical developments;
- The ability to communicate those judgments and medical information to patients and other healthcare providers, with or without the use of aids or devices, such as a voice amplifier; and
- The physical capability to perform medical tasks such as physical examination and surgical procedures, with or without the use of aids or devices, such as corrective lenses or hearing aids.

Confirmation that the student has read and is able to perform the technical standards should be submitted by the student to Certified Background. The student and their healthcare provider are both required to sign individual "Technical Standard Attestation" form that states the student is able to meet the technical standards of the program. These forms must then be uploaded to Certified Background annually where they will be reviewed by the Admissions Director.

Annotations to the Technical Standards

This addendum provides specific examples to enhance the interpretation of the Technical Standards, particularly within the "Motor" and "Behavioral and Social Attributes" categories.

During the pre-clinical year, students are required to master the skills of a complete physical examination. They must complete Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS) instruction and certification processes.

Students are required to attend a variety of clinical observational sessions that may involve some patient interaction. These include mandatory early clinical experiences, community service, lunch and learn sessions, and off site sessions. These sessions are scheduled at a variety of times and days not limited to 8:00 am to 4:00 pm, Monday through Friday. Students must be available to meet when sessions are available for the mastery of the curriculum objectives. This may include evening and weekend obligations.

During the clinical year, rotations may require extended hours with start times as early as 5:00 am. Evening, night, and weekend shifts are common and may extend into 12 to 14 hour days. For the safety of our students and residents, The Physician Assistant Studies program applies standards recommended by the Accreditation Council for Graduate Medical Education and limits students to an 80-hour weekly limit, averaged over four weeks.

The Women's Health and Emergency Medicine rotations may necessitate specifically daytime and overnight shifts (totaling 24 or more hours) to expose the student to the full spectrum of care for patients. As a result, students must be able to physically and psychologically perform capably and competently with moderate degrees of sleep deprivation.

Surgical rotations also necessitate specific physical requirements, particularly with respect to responsibilities in the operating room or suite. Many surgical procedures essential to training may last for 3 or more hours. Students may be required to stand in a relatively fixed position for the entirety of the procedure with minimal rest or breaks.

In emergency situations, patients may need to be moved, turned or resuscitated, and the student may be in situations that necessitate short periods of bending, lifting or partial lifting, reaching, squatting or straining.

On hospital rotations, students may be required to cover large areas of space (different patient-care floors, different wings or sections within institutional building structures). They must be able to transport themselves from one location to another in a timely fashion in order to facilitate patient care responsibilities and to receive educational training, such as during morning rounds.

Physician Assistant Studies Program Policies

Tuition, Fees, and Refund Policy (A3.14)

Payment of Tuition and Fees

Fees may be calculated by referring to the tuition and fee schedule listed on the website. All charges are due and payable on the schedule published by the Office of Student Accounts in the Business Office. Circumstances that prevent a student from adhering to these dates should be discussed with the Office of Student Accounts. Students attending school under grants and/or loans should confer with the Office of Student Accounts concerning payment of fees. Students attending school under the G.I. Bill may discuss payment of school fees with the Office of Student Accounts. These students must also submit all required paperwork to the College's VA Certifying Official. Failure to make proper payments, unless otherwise cleared with the Office of Student Accounts, will result in dismissal from the College. The College will not issue grades, grant degrees, or furnish academic transcripts until all financial obligations have been satisfied and all College property returned. Policies and procedures for Leaves of Absence, Short-Term Leave, and Withdrawal may be found in this bulletin.

Tuition Refund Schedule

Refunds for Withdrawal from All Classes: If withdrawal occurs during the first 60% of the semester, all aid that is not earned will be returned to the aid program involved. Refunds will be calculated on a per diem basis tied to the semester calendar. If a credit balance results from the adjustments to tuition, fees, room, board, and financial aid, a refund will be disbursed. Students who withdraw in the final 40% of the semester will receive no refund. An administrative fee of \$100 will be charged on all withdrawals.

If a student withdraws/drops a class, all books and equipment must be returned.

The \$1,500 non-refundable acceptance fee will not be considered for a tuition refund.

The student's account will be credited only after the proper withdrawal forms have been filed with the Registrar and the exit interview is completed. Students must contact the Registrar's Office to officially withdraw from the school. Students who discontinue class attendance without officially completing the withdrawal procedure will be responsible for the full amount of applicable tuition and fees and all active courses graded with a grade of "F".

Students enrolled in the Presbyterian College Physician Assistant Studies program have professional liability coverage provided by the College for those activities that are a direct result of student learning, such as participating in experiential learning. Please note that this coverage does not extend to outside employment, summer internships, or internships independent of coursework.

Health Insurance Policy

Students enrolled in the Physician Assistant Studies program are required to have health insurance in force at all times and must be able to demonstrate proof of such coverage upon request by the School or clinical site. Students are responsible for the costs of their own health insurance. Failure to maintain health insurance may jeopardize completion of clinical education and progression within the program. Noncompliance may result in professional and/or academic disciplinary actions.

Faculty as Student Health Care Providers Policy (A3.09)

Principal faculty, the Program Director, and the Medical Director must not act as health care providers for the program students except in an emergency situation such as a life-threatening condition. Students are to be directed to their primary care physician, emergency department, or other health care provider.

Required Immunizations and Health Screening Policy (A3.07)

Students admitted to Presbyterian College are required to have updated immunization records. Students will not be permitted to begin the Physician Assistant Studies program without providing documentation of completion of the immunization guidelines and submission to the program before enrollment. All information will be considered confidential. All vaccination records and test results must be certified by a health care provider, including the health care provider's signature, name, and clinic information (either on official letterhead or marked with the clinic seal). Unofficial or un-certified records will NOT be accepted. Students are required to show proof of immunity (titers) or vaccination records and incur all costs for the following immunizations prior to matriculation:

- **Measles, Mumps, Rubella (MMR):** 2 live vaccinations must have been administered after December 31, 1967 and after the age of 12 months. If MMR documentation is not available, students should have an antibody titer to ascertain immunity. If the titer is negative, then students must be vaccinated for measles, mumps, and rubella before enrollment. Please note that additional measles, mumps, and/or rubella titer(s) may be required by some hospitals before practice experiences can be completed at their site.
- **Polio:** 3 doses (oral or injection) must have been administered. If not received as a child, students must receive the 3-shot series with documentation of at least 1 shot required by July 15 prior to enrollment and all 3 doses completed by March 31 the following year.
- **Tuberculosis:** A 2-step intradermal Mantoux tuberculin skin test (TST) or documentation of 2 TST conducted in the 12 months preceding the July 15 immunization deadline before matriculation. Students with a history of a positive TST or BCG vaccination must have a clinical assessment by a healthcare practitioner that includes patient history, TB symptom check, and a TST or interferon gamma release assay (IGRA) blood test or chest X-ray, as appropriate.
- **Diphtheria, Pertussis, Tetanus:** Students must provide documentation of Tdap vaccination as an adult. If Tdap was administered more than 6 years prior to matriculation, students must also provide documentation of a tetanus-diphtheria booster within the last 6 years. Tetanus vaccinations are valid for a maximum of 10 years and students must demonstrate immunity through their anticipated graduation date prior to enrollment.
- **Varicella (chicken pox):** Proof of immunity must be demonstrated via a varicella titer. If the titer is negative, the student must receive the 2-shot series with documentation of at least 1 shot required by July 15 prior to enrollment and both doses and a repeat titer completed by October 31.
- **Hepatitis B:** Proof of immunity must be demonstrated via hepatitis B titer. If the titer is negative, then students must receive the 3-shot hepatitis B vaccination series followed by serologic testing 1 – 2 months after the last dose. Documentation of at least 1 shot is required by July 15 prior to matriculation and all 3 doses and titer must be completed by February 28 of the first professional year.

Clinical sites require annual updates of certain immunizations or tests. Updates of the following immunizations and tests should be provided to the program by the stated deadline:

- **Influenza:** Documentation of annual vaccine by November 1
- **Tuberculosis:** Documentation of annual TB screening through TST, IGRA (recommended for students with a history of BCG vaccination), and/or chest X-ray with clinical assessment (recommended for students with a history of a positive TST); annual screening must be completed within 12 months of the previous year's screening.

Future updates and additional immunizations may be required in order to place students on clinical rotations and will be disseminated to students by the Clinical Director. Below are additional provisions regarding immunizations, health insurance, and professional liability insurance:

- Students who were not vaccinated for varicella but contracted chicken pox as a child must demonstrate immunity via a positive antibody titer.
- Students with chronic diseases, such as cardiovascular disease or diabetes mellitus are strongly encouraged to consider obtaining pneumococcal vaccinations.
- Students should keep a copy of their immunization records, health insurance, professional liability insurance, and internship licenses as appropriate in their possession while enrolled in the Physician Assistant Studies program. Students and/or the Physician Assistant Studies program may be required to provide copies of these documents to preceptors or other designated clinical education site officials when they are assigned to off-campus clinical training locations.
- Female students are advised that pregnancy is a contraindication to administration of certain vaccinations and should consult their physician for specific and additional information regarding vaccine administration.

Although the program does not offer international rotations at this time, in the event of future international rotations, students may be required to attain additional immunizations. Information will be provided by the Clinical Director in the event of an international rotation to conform to CDC recommendations.

Student Transportation

Students enrolled in the Physician Assistant Studies program have a variety of curricular and extra-curricular obligations off campus including service learning activities, clinical educational assignments, community outreach, advocacy, or professional development activities. For this reason, students are responsible for securing access to personal transportation. Presbyterian College is not responsible for any aspect of this student-arranged transportation.

Housing

Students are responsible for arranging and paying for housing and costs during their didactic and clinical phases. Students must notify the program staff by the end of the first week of each clinical rotation as to the address and full contact information for the student.

Student Technology

Students enrolled in the Physician Assistant Studies program are required to have a properly working laptop and TurningPoint clicker device that is provided by the Physician Assistant Studies program. Students will be held financially responsible for any damage as a result of misuse or abuse of any school property. Loaned technology must be returned to the Physician Assistant Studies program upon withdrawal or leave of absence. All students are also required to purchase a mobile device of their choice. If assistance is needed in choosing a device, students may contact support@presby.edu.

Certification

Upon acceptance to the Physician Assistant Studies program, students are expected to participate in and maintain current certifications in basic life support, HIPAA, and OSHA requirements governing blood borne pathogens. Certification opportunities will be provided by the Physician Assistant Studies program and each student is required to achieve a passing grade for each certification. In the event a student is unable to attend an offered workshop, he/she must schedule his/her own certification and cover any required costs.

The student must complete the necessary training and certification within 30 days of the originally scheduled class training.

Physician Assistant Certification and Licensure

To become a certified PA (PA-C), you must pass the Physician Assistant National Certifying Exam (PANCE), a computer-based, multiple-choice test comprised of questions that assess basic medical and surgical knowledge. In addition, students must obtain state medical board registration/licensure. **A PA may not begin working as a Physician Assistant in any state until he/she has successfully passed the National Certifying Examination AND has been licensed/registered by the state in which they practice.** Failure to complete these steps is practicing without a medical license.

Students are responsible for ensuring they obtain all required licenses and certifications. Presbyterian College is not responsible for registration or licensing; the student is solely responsible for all such requirements and verifying they have the proper authorizations to practice medicine.

Professional Liability Insurance Policy

Students will be provided malpractice liability coverage during their time as a student within the Physician Assistant Studies program. Accepting payment or gifts can result in the loss of malpractice liability coverage for the student. Students are only permitted to operate within the confines of the defined clinical rotation and are not to accept any type of additional work (paid or unpaid), shadowing, or any other type of opportunity with the preceptor. The student must perform inside the scope of the clinical rotation to avoid potential conflicts with malpractice liability and to avoid disciplinary action within the program, including dismissal from the program. A student's malpractice liability coverage is only in effect on assigned clinical rotations provided by the college, and students must abide by the policies and practices of the College as well as the clinical site. Student coverage is immediately terminated upon graduation or dismissal from the program.

Universal Precautions Policy (A3.08)

Linens

- Handle, transport, and process used linens in a manner that:
 - Prevents skin and mucous membrane exposures and contamination of clothing.
 - Avoids transfer of pathogens to other patients and/or the environment.

Facial Equipment

- Wear either a surgical or procedure mask and eye protection (eye visor, goggles) or a face shield to protect mucous membranes of the eyes, nose, and mouth during activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.

Hand Washing

- Hand washing (40–60 seconds): wet hands and apply soap; rub all surfaces; rinse hands and dry thoroughly with a single use towel; use towel to turn off faucet.
- Hand rubbing (20–30 seconds): apply enough sanitizing product to cover all areas of the hands; rub hands until dry.
- Before and after any direct patient contact and between patients, whether or not gloves are worn.
- Immediately after gloves are removed.
- Before handling an invasive device.

- After touching blood, body fluids, secretions, excretions, non-intact skin, and contaminated items, even if gloves are worn.
- During patient care, when moving from a contaminated to a clean body site of the patient.
- After contact with inanimate objects in the immediate vicinity of the patient.

Gloves

- Wear when touching blood, body fluids, secretions, excretions, mucous membranes, non-intact skin.
- Change between tasks and procedures on the same patient after contact with potentially infectious material.
- Remove after use, before touching non-contaminated items and surfaces, and before going to another patient. Perform hand hygiene immediately after removal.

Gown

- Wear either a surgical or procedure mask and eye protection (eye visor, goggles) or a face shield to protect mucous membranes of the eyes, nose, and mouth during activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.

Prevention of Needle Stick and Other Sharps

- Use care when handling needles, scalpels, and other sharp instruments or devices.
- Use care when cleaning used instruments.
- Dispose of used needles and other sharp instruments in an appropriate manner.

Respiratory Hygiene and Cough Etiquette

- Cover nose and mouth when coughing/sneezing with tissue or mask, dispose of used tissues and masks, and perform hand hygiene after contact with respiratory secretions.
- Place acute febrile respiratory symptomatic patients at least 1 meter (3 feet) away from others in common waiting areas, if possible.
- Post visual alerts at the entrance to health-care facilities instructing persons with respiratory symptoms to practice respiratory hygiene/cough etiquette.
- Consider making hand hygiene resources, tissues and masks available in common areas and areas used for the evaluation of patients with respiratory illnesses.

Waste Disposal

- Ensure safe waste management.
- Treat waste contaminated with blood, body fluids, secretions and excretions as clinical waste, in accordance with local regulations.
- Human tissues and laboratory waste that is directly associated with specimen processing should also be treated as clinical waste.
- Discard single use items properly.

Patient Care Equipment

- Handle equipment soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of pathogens to other patients or the environment.

- Clean, disinfect, and reprocess reusable equipment appropriately before use with another patient.

Universal Precautions Summary for Health Care Workers

- Specimens, including blood, blood products, and body fluids, obtained from all patients should be considered hazardous and potentially infected with transmissible agents.
- Hand washing should be performed before and after patient contact, after removing gloves, and immediately if hands are grossly contaminated with blood.
- Gloves should be worn when hands are likely to come in contact with blood or body fluids.
- Gowns, protective eyewear, and masks should be worn when splashing, splattering, or aerosolization of blood or body fluids is likely to occur.
- Sharp objects ("sharps") should be handled with great care and disposed of in impervious receptacles.
- Needles should never be manipulated, bent, broken, or recapped.
- Blood spills should be handled via initial absorption of spill with disposable towels, cleaning area with soap and water, followed by disinfecting area with 1:10 solution of household bleach.
- Contaminated reusable equipment should be decontaminated using heat sterilization, or when heat is impractical, using a mycobactericidal cleanser.
- Pocket masks or mechanical ventilation devices should be available in areas where Cardiopulmonary resuscitation procedures are likely.
- Health care workers with open lesions or weeping dermatitis should avoid direct patient contact and should not handle contaminated equipment.
- Private rooms are not required for routine care; select circumstances, however, such as the presence of concomitant transmissible opportunistic disease, may warrant respiratory, enteric, or contact isolation.

Incident Reporting

- The student is required to immediately report any injury or incident to the preceptor and to the Physician Assistant Studies program. The student should follow the protocol established at the clinical site, which usually involves:
 - Decontaminate – vigorous flushing of mucous membranes, eyes and/or thorough hand washing.
 - Immediately seek medical attention for treatment of the injury. The student is responsible for seeking immediate treatment and the cost of all such treatments.
 - The student should immediately notify their preceptor (or designate).
 - The student should also immediately (within 24 hours) notify using the program Clinical Director via email using this form: [Incident Reporting Form](#)
- The form will cover topics such as:
 - Date/time of incident and procedure being performed when the incident occurred
 - Who assigned the duties
 - Nature of the accident – how it happened
 - Nature of the injury – punctures, scratch, bite, etc.
 - Extent of injury – depth, amount of blood or fluid potentially injected or on exposed surface
 - Name and medical record number/social security of patient whose blood or fluid you were exposed to and any pertinent information known about the patient; if the source is HIV+, the stage of disease, viral load, and antiretroviral resistance information, if known and if permitted to disclose.
 - Personal protective equipment worn at the time of the exposure
- The clinical director will contact the student to discuss the nature of the incident and any required follow-up
- Students wanting additional information may contact:
- Clinician’s Post Exposure Prophylaxis Hotline – [1-800-448-4911](tel:1-800-448-4911) or www.cdc.gov/NIDSH/topics/bbp

- Cost of testing and treatment following incident, if not covered by the facility or student's health insurance, will be the responsibility of the student

Forbidden Activities for Physician Assistant Students

Physician Assistant students are NOT permitted to perform the following activities, even with supervision of a preceptor. Institutions and preceptors may further limit student activities and the preceptor is responsible for upholding these guidelines in addition to any practice or institutional policies at the clinical site. **Any student performing such procedures is subject to dismissal from the program.**

- Acupuncture or acupuncture anesthesia
- Angiography/arteriography/venography
- Catheterization (other than urinary or venous)
- Pregnancy termination / abortion procedures
- Psychiatric shock therapy
- Radiation therapy or chemotherapy
- Any anesthesia except local anesthetics
- Elective sterilization procedures with no underlying medical condition

Criminal Background Check

The Physician Assistant Studies program requires criminal background checks on its students prior to matriculation and annually thereafter. The initial criminal background check must be completed prior to matriculation; annual background checks for returning students must be completed by the deadline specified by the Admissions Director. Failure to comply with required criminal background checks will delay progression or render a student unable to complete the professional degree program. The results of the criminal background check will be shared with clinical sites upon request and refusal by a selected site to admit a student may delay graduation. Students are responsible for the costs of the criminal background check conducted prior to matriculation; however the cost for annual investigations of returning students is included in the tuition and fees. The following procedures will be followed:

- Applications request disclosure of any convictions, including pending adjudications. Falsification of any application materials will be grounds for denial of application or expulsion from the program.
- The criminal background check will be initiated by the applicant at the time an applicant is accepted to the program and annually during enrollment.
- The criminal background check is a mandatory prerequisite for matriculation into the professional program. Acceptance letters sent by the program to accepted applicants disclose that matriculation is contingent upon a successful criminal background check. The criminal background check is not a component of the application or interview process and is not conducted or reviewed until after an applicant is accepted to the program.
- Presbyterian College will designate an approved vendor(s) to perform the criminal background checks. Results from any company or government entity other than those designated by Presbyterian College will not be accepted.
- Students/accepted applicants will be allowed 10 days to review and dispute a criminal background check before the results are released to the program. Criminal background check results will be automatically released to the program after 10 days if students/accepted applicants do not place a hold on the results.

- Presbyterian College has affiliation agreements with clinical facilities for delivery of the clinical curriculum. These affiliate clinical facilities have requirements related to criminal background checks that must be met prior to placement of students at that clinical facility. A student who cannot participate in clinical experiences at affiliate institutions due to information in his/her criminal background check will be unable to fulfill the requirements of the degree program and may be dismissed from the program.
- Ultimate decisions about the matriculation of an accepted applicant whose criminal background check reveals information of concern will be made by the Admissions Committee of the Physician Assistant Studies program. Ultimate decisions regarding the progression of an enrolled student whose criminal background check reveals information of concern will be made by the Ethics, Honor, and Professionalism Committee. The following factors will be considered when evaluating information:
 - The nature, circumstances, and frequency of any offense(s). Specifically, the Admissions and/or Ethics, Honor, and Professionalism Committee(s) will evaluate the potential for harm to patients, harm to members of the PC community, eligibility for licensure, and eligibility to participate in introductory and advanced clinical practice experiences at affiliate institutions.
 - The length of time since the offense(s).
 - Documented successful rehabilitation.
 - The accuracy of the information provided by the applicant in his/her application materials and upon initiation of the criminal background check.
- Items present prior to matriculation may result in rescission of a student's offer of admission. Information accessed during enrollment may result in sanction, suspension, or dismissal of a student.
- Criminal back ground check reports will be evaluated to determine terms and sanctions of the offense. Information obtained will be used in accordance with state and federal laws. Criminal Background Check reports and all records pertaining to the results are considered confidential with restricted access. The results and records are subject to the Family Educational Rights and Privacy Act [FERPA] regulations.

Drugs and Alcohol

The Presbyterian College Physician Assistant Studies program seeks to provide a professional environment that is safe and drug-free for our students, residents, faculty, and staff. As members of the health care community, we have a responsibility to provide high quality care. The understanding of and compliance with the following policy on drugs and alcohol is important for every member of the Physician Assistant Studies program to ensure that individuals who may require assistance for the inappropriate or dangerous use of substances which may obstruct the ability to provide high quality health care are identified and able to receive appropriate and professional assistance.

The Physician Assistant Studies Program explicitly prohibits:

- The use, possession, solicitation, or sale of narcotics or other illegal drugs or prescription medication without a prescription.
- The use, possession, solicitation, or sale of alcohol on college premises and/or while performing or representing the Physician Assistant Studies Program in an official capacity. *Please note that the responsible consumption of alcohol by persons of legal age at college-sponsored activities/events where alcohol is served is acceptable.*

- Being impaired¹ or under the influence of legal or illegal drugs or alcohol while on college premises and/or while representing the Physician Assistant Studies program in an official capacity, particularly if such impairment or influence of drugs or alcohol affects work performance, the safety of others, or puts at risk the program's reputation.
- Possession, use, solicitation for, or sale of legal drugs or alcohol away from the College premises, if such activity or involvement adversely affects the academic or work performance, the safety of the College members or others, or puts at risk the program's reputation.
- The presence of any detectable amount of prohibited substances in a student's system while at work, while on College premises, or while performing or representing the Physician Assistant Studies program in an official capacity. "Prohibited substances" include illegal drugs, alcohol, or prescription drugs not taken in accordance with a prescription's written and official instructions.

Required Drug Screenings

The Physician Assistant Studies program requires drug screens on its students prior to matriculation and annually thereafter. Drug screening may also be performed on a random basis or with cause. The initial drug screen must be completed by matriculation; annual drug screens for returning students must be completed by the deadline specified by the Admissions Director. Failure to comply with required drug screen will delay progression or render a student unable to complete the professional degree program, or be cause for dismissal from the program. The results of the drug screen will be shared with clinical sites upon request and refusal by a selected site to admit a student may delay graduation. Students are responsible for all costs associated with drug screening.

- A drug screening is a mandatory prerequisite for matriculation into the program. Acceptance letters sent by the School to accepted applicants disclose that matriculation is contingent upon a successful drug screening. The drug screening is not a component of the application or interview process and is not conducted or reviewed until after an applicant is accepted to the program.
- Presbyterian College will designate an approved vendor(s) to perform the drug screenings. Results from any company or government entity other than those designated by PC will not be accepted.
- For accepted applicants, the vendor will provide the accepted applicant and Physician Assistant Studies Program designee(s) with the results of the drug screening or access to electronically maintained results. For returning students, the vendor will provide the Admissions Director with the results; students may request copies for their own use.
- Should the vendor report that the screening specimen was diluted, thereby precluding an accurate drug screen test, the student/accepted applicant will be required to complete and successfully pass a new drug screen test.
- Students with a positive drug screening will have an opportunity to consult with a medical review office (MRO), provided by the vendor, to verify whether there is a valid medical explanation for the screening results. If, after review by the vendor's MRO, there is a valid

¹ Impairment is the inability to perform job skills or to function safely due to the effects of chemical, alcohol, or psychiatric disease or impairment is defined as the inability to consistently think rationally, perform activities, or communicate effectively without error while performing daily activities or job related activities.

medical explanation for the screening results, the vendor will notify the Physician Assistant Studies Program of a clear test (i.e. negative result). If, after review by the MRO, there is not a valid medical explanation for the positive screen then the test results will stand.²

- For accepted applicants, the vendor will hold the drug screening results for 10 days so that the applicant may review and dispute positive drug screening results before they are released to the School. During this 10-day period, the applicant may place a hold on the results. If a hold is placed and the drug screen results are never received, the student could have their offer rescinded. If no hold is placed, the drug screen results will be released to the School.
- If the MRO is unable to reach a returning student for consultation within a reasonable amount of time as determined by the lab company's policy, a non-contact positive test result will be released to the Clinical Director. The Clinical Director will notify the student who will then have 10 business days to contact the lab to provide further information that will validate the findings and allow issuance of a negative result. If the student does not contact the lab or if the positive results stand despite the MRO's consultation with the student, the Academic Director will forward the results to the Academic Committee for review and action.
- Falsification of drug screening information will be grounds for rescission of a student's offer of admission or dismissal from the program.
- Presbyterian College has affiliation agreements with clinical facilities for delivery of the clinical curriculum of the program. These affiliate clinical facilities have requirements related to drug screens that must be met prior to placement of students at that clinical facility. A student who cannot participate in Introductory or advanced clinical practice experiences at affiliate institutions due to his/her drug screen will be unable to fulfill the requirements of the degree program.
- A positive drug screening prior to matriculation may result in rescission of a student's offer of admission or may cause a delay in allowing the accepted applicant to begin classes until the vendor provides clearance documentation to the Academic Director, as described under bullet five above.
- Any enrolled student with a positive drug screening may be suspended for the remainder of the semester and be administratively withdrawn from all courses and/or may be suspended for the following semester. The Academic Committee may place students on Professional Warning or Professional Probation and impose additional sanctions in the student's Plan for Professional Improvement such as restitution, loss of privileges, community service, education programs, random drug screenings, and withholding the degree. If suspended due to a positive drug screen, students may re-enroll at the discretion of the Academic Committee dependent upon the stage of the curriculum and contingent upon PC's receipt of clearance documentation from the vendor, as described above.
- Any student with a positive drug screen, who is determined by the South Carolina Recovering Professionals Program (SCRPP) to have a chemical or alcohol dependency, will be allowed to continue in the program as long as he/she meets professional and academic criteria for progression and fully complies with the South Carolina Recovering Professionals Program. Noncompliance with SCRPP will result in dismissal from the program.

² This policy is adapted from the University of Oklahoma Health Sciences Center Drug Screening Policy.

- Any student who has a second positive drug screening while enrolled in the program will be dismissed from the program.
- Information obtained will be used in accordance with state and federal laws. Drug screening reports and all records pertaining to the results are considered confidential with restricted access. The results and records are subject to the Family Educational Rights and Privacy Act [FERPA] regulations.

The program has the authority to conduct drug testing for the following circumstances:

- **REQUIRED TESTING:** The Physician Assistant Studies program must certify to clinical sites that our students are negative for certain drugs prior to being placed in those rotations; therefore, drug screening will be conducted before matriculation and annually thereafter. Certain clinical sites may also require random drug tests of students while they are assigned to a particular location. Students must comply with the request for the completion of the drug test prior to placement or during placement at a clinical site. In the event that a clinical site's requirements for a drug test are different than the program's policies, the more stringent requirements are to be followed.
- **FOR-CAUSE TESTING:** The program may ask a student of the program to submit to a drug/alcohol test at any time there is reasonable cause to suspect that the student appears to be impaired for unknown reasons, under the influence of drugs or alcohol, including, but not limited to, the following circumstances: evidence of drugs or alcohol on or about the member's person or in the general vicinity, unusual conduct on the member's part that suggests impairment or influence of drugs or alcohol, negative performance patterns, eyewitness testimony of use or possession, or excessive and unexplained absenteeism or tardiness.
- **POST-ACCIDENT TESTING:** Any student involved in an on-the-premise accident or injury under circumstances that suggest possible use or influence of drugs or alcohol in the accident or injury event may be asked to submit to a drug/alcohol test. "Involved in an on-the-job accident or injury" means not only the one who was injured, but also any person who potentially contributed to the accident or injury event in any way.

Implications of Screening Results for Clinical Education

- Many facilities that Presbyterian College uses for clinical experiences require students to pass a criminal background check and/or a drug screen test. Each clinical facility may have specific requirements related to background checks or drug screening of students and employees unique to that facility. Such background checks and drug screens are rotation practice site requirements, not requirements of Presbyterian College.
- The Physician Assistant Studies program is responsible for providing acceptable training sites for its students, preparing students appropriately for required board or licensure exams, and providing students with the appropriate knowledge to practice their profession. It is the student's responsibility to comply with the criminal background check and drug screen requirements of the facilities in which the student rotates. Lack of timeliness in supplying the required documentation and testing to the facility may delay the student's participation in the scheduled clinical experience.
- The Physician Assistant Studies program is not responsible for finding rotation practice sites for students who are unable to meet the requirements for rotation practice sites, including passing background checks or drug screens; nor does it assure that a graduate will be allowed to register for required exams or obtain required licenses to practice. Students should be aware

that failure to pass a background check or drug test, as determined by each facility, will prevent the student from participating in that clinical experience and may delay the student's completion of the degree program requirements or prevent the student from completing the degree program.³

Accommodations for Students with Disabilities

Candidates for the Physician Assistant Studies program are selected on the basis of their academic, personal, and extracurricular dimensions. In addition, candidates must have the intellectual, physical, and emotional capacities to meet the requirements of the program's curriculum and of a successful medical career.

The Master of Science in Physician Assistant Studies (MPAS) degree is a broad, undifferentiated degree attesting to general knowledge in medicine and the basic skills required for the practice of medicine. Essential abilities and characteristics required for the completion of the degree require certain minimum physical and cognitive abilities, as well as sufficient mental and emotional stability to assure that candidates for admission, promotion, and graduation are able to complete the program and participate fully in all aspects of medical training. The Physician Assistant Studies program intends for its graduates to become competent and compassionate physician assistants who are capable of entering clinical training and qualifying for medical licensure. The stated intention of a candidate to practice only specific areas of clinical medicine, or to pursue a non-clinical career, does not alter the School's requirement that all physician assistant students achieve competence in the full curriculum required by the faculty.

The Physician Assistant Studies program has a responsibility to train competent medical professionals and scientists who demonstrate critical judgement, extensive knowledge, and technical skills. Although students learn under the supervision of faculty, students interact with patients throughout their medical school education. Patient safety and well-being are therefore critical factors in establishing requirements involving the physical, cognitive, and emotional abilities of candidates for admission, promotion, and graduation. The necessary abilities and characteristics are referred to as technical standards. They are defined in several broad categories including: observation, communication, motor-function, intellectual-conceptual, integrative, and quantitative abilities; and social and behavioral skills. All candidates must adhere to universal precaution measures and meet safety standards applicable to medical settings and other professional activities. For the purpose of this document, impairment refers to any condition that interferes with an individual's ability to function in the capacity of a physician assistant student meeting all requirements of the program. Impairment may exist in one or multiple domains including: psychomotor activity and skills, conceptual or factual recall, integrative or synthetic thoughts, processes, judgment, attentiveness, demeanor, and attitudes as presented in speech or actions, as well as any addiction to and/or physical dependence upon any chemical substance(s).

Presbyterian College will consider for admission any applicant who meets its academic and nonacademic criteria and who demonstrates the ability to perform the skills listed in this document, with or without reasonable accommodations, consistent with the Americans with Disabilities Act and the Rehabilitation Act. Candidates and current students who have questions regarding the technical standards, or who believe they may need to request reasonable accommodation(s) in order to meet the standards, are encouraged to contact The Office of the Provost.

Definition of technical standards is required for the accreditation of U.S. physician assistant schools by The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). The following abilities and characteristics are defined as technical standards, and are requirements for admission, retention, promotion, and graduation.

³ This policy is adapted from the University of Oklahoma Health Sciences Center Drug Screening Policy.

Technical Standards

Technical standards establish the skills necessary for satisfactory completion of physician assistant training. A candidate for the Master of Science in Physician Assistant Studies (MPAS) must meet these standards without exception. In the event an applicant is unable to fulfill these technical standards prior to or any time after admission, with or without reasonable accommodation, the student will not be allowed to enter or progress within the program.

Candidates for the program must possess ability, aptitude, and skills as outlined in [Technical Standards](#).

Equal Access to the Educational Program

The Physician Assistant Studies program is committed to providing all students with opportunities to take full advantage of the educational and academic programs. The Physician Assistant Studies program recognizes that students with documented disabilities may require reasonable accommodations in order to achieve this objective and/or to meet the technical standards.

Should, despite reasonable accommodation (whether the candidate chooses to use the accommodation or not), a candidate or student's existing or acquired disability interfere with patient or peer safety, or otherwise impede the ability to complete Presbyterian College's School of Physician Assistant's undifferentiated program and advance to graduation, the candidate may be denied admission or may be separated, discontinued, or dismissed from the program.

It is the responsibility of a candidate or student with a disability, or a candidate who develops a disability that requires accommodations in order to meet these technical standards, to self-disclose that disability to the Office of the Provost and request accommodations. Candidates or students must provide documentation of the disability and the specific functional limitations to the Office of the Provost.

Candidates or students who fail to register with the Office of the Provost or who fail to provide the necessary documentation to the Office of the Provost shall not be considered to be claiming the need for, or receiving, accommodations under the federal or state disability laws. Students are held to their performance, with or without accommodation. No candidate will be assumed to have a disability based on inadequate performance alone. Accommodations are not applied retroactively, and a disability-related explanation will not negate an unsatisfactory performance.

Requesting Disability Accommodations

Candidates or students are not obligated to self-disclose their disability to the Office of the Provost, other staff members, or faculty. Students with disabilities who wish to obtain accommodations, auxiliary aids and/or services, must, however, self-disclose that disability and direct their request(s) for accommodation(s) to the office of The Provost.

<http://www.presby.edu/about/offices-services/office-of-the-provost/accommodations-for-disabilities/>

Shannon Lattimore
Senior Administrative Assistant, Office of the Provost
slattimor@presby.edu
(800) 476-7272 ext 8297

While students can disclose a disability, and request an accommodation at any time during their enrollment, students are encouraged to disclose the need for accommodation(s) as soon as possible. Time for documentation review and arrangement of accommodation(s) is necessary, and may take several weeks. Accommodations are not retroactive.

While the Physician Assistant Studies program works in conjunction with the Office of the Provost to determine and coordinate reasonable accommodations, disability documentation and student's individual diagnoses remain confidential.

Temporary Disabilities (Illness & Injury)

Students should be aware that the College is not obligated to provide accommodations for students with temporary disabilities, illnesses, or injuries, but the College will attempt to do so when feasible. For example, if a student misses a week of classes due to the flu, students are responsible to all materials during this time of missed classes.

As a courtesy, the Office of the Provost will attempt to provide services to students who experience acute illness or injury that will allow them to access the physical campus as well as the academic curriculum.

If the injury or illness necessitates handicapped parking accessibility, and/or campus transportation services, the student should contact the Office of the Provost for assistance.

Ability to Meet Technical Standards

All candidates for the Physician Assistant Studies Program will be required to complete a Technical Standards Attestation form on a yearly basis. If at any point an enrolled candidate ceases to meet the technical standards of the Physician Assistant Studies Program, they must notify the Office of the Provost, which will determine what accommodations are reasonable.

If, after all reasonable accommodations are made, there is concern that the student remains unable to meet the technical standards, the student will be referred to the Provost and the PA Program Director, who will assemble a committee to review the student's performance. It is the responsibility of that committee to determine whether a student can or cannot meet the described standards after reasonable accommodations have been made. That committee will determine any necessary actions on a case-by-case basis.

Tobacco Use, Smoking, and Vaping

Presbyterian College is a tobacco-free and other smoking and vaping products-free college. All use of tobacco and all smoking and vaping is prohibited in college buildings, in enclosed areas owned by the college, and on college property. Note that many hospitals are testing for nicotine products prior to extending job offers. Students requiring assistance to stop using nicotine products should talk with their primary care physician.

Students Working for the Program (A3.14h);(A3.04; A3.05)

Teamwork and collaboration are an important part of the learning experience. **Students are neither required nor permitted to work for the program. In addition, students are not to substitute for instructional faculty (e.g. providing formal classroom lectures or providing clinical experiences). Additionally, students are not to provide administrative support to the program.** Students will have varying degrees of prior medical experience. However, lectures, structured clinical experience, and overall instruction are the responsibility of the faculty and not students. Students should report any potential conflicts to the Program Director or the Provost.

Students As Clinical or Administrative Staff during SCPE Policy (A3.06)

Students must not substitute for clinical or administrative staff during supervised clinical practical experiences. Students should report any potential conflicts to the Clinical Director, Program Director, or Provost.

Students Working While In the Program Policy (A3.14h)

Students are strongly cautioned against working while in the program. This is a very rigorous program requiring a full-time commitment to academic achievement. Therefore, students attempting to work while in the program are at an increased risk of failure.

Inclement Weather

When Presbyterian College or the Physician Assistant Studies program has canceled or delayed classes due to weather, announcements are made over local television and radio stations. These announcements inform students and employees when the College or program will open. Students may also check the College web site or call the switchboard for this information. The College attempts to have a recording on the switchboard and information on the web site by 7 a.m. on mornings when there are widespread public school closings. Students may also elect to receive text messages on a mobile phone or email messages of emergencies and weather closings. To register your mobile phone and/or email, please go to <https://www.getrave.com/login/presby>.

When the College is "closed," it means that "classes are cancelled" for the day. If the message indicates a "delay" instead of a "closure," there will be no class meetings prior to the delayed class time. If the College opens *during* a scheduled class, you should report to class for the remainder of the class period (e.g. you would report to a 9 – 11 am class at 10 am if the College delays opening until 10 am).

If inclement weather occurs when a student is to report to a clinical practice site. If the site is closed, the student is excused from clinical activities for that day only, however the student must immediately inform the Clinical Director via email notification about the closure.

Mandatory make up class time or additional work will be determined by the Academic Director. Typically, class will be made up during normal gaps between classes. This may include earlier, later, or weekend hours. Students are expected to be present for make-up classes and responsible for any make-up work.

Procedures for Reporting Student Concerns

In order to maintain a positive atmosphere that facilitates teamwork, community, learning, faculty, staff, and students should not mindlessly complain to their coworkers or classmates. If anyone has a problem or complaint, he/she is encouraged to bring the issue to someone who is in a position to address the complaint. However, he/she should share one or two possible solutions to his/her complaint as well.⁴ All members of the Presbyterian College Physician Assistant Studies program community are asked to maintain a positive atmosphere in the Physician Assistant Studies program by proposing constructive suggestions rather than simply complaining to one another. Students are encouraged to follow the procedures for reporting student concerns as described in this Bulletin for reporting complaints or problems along with possible solutions.

Students who have individual concerns involving a teacher or course that are not of general interest to the class, should speak directly to the course instructor. If the concern might involve more than one individual in the course/class, the concern should be taken to the relevant student class officer(s) so that they might sample class opinion to determine whether the issue is a concern of the majority of the class. If in the opinion of the class officer the concern is valid, the class representative should bring the matter to the attention of the course instructor with the objective of resolving the issue at that level.

If the matter is unable to be resolved at this level, the concern should be taken to the Academic Director. If the matter cannot be resolved at this level, or if the student feel that it was not handled satisfactorily,

⁴ Adapted from Gordon J (2008) *The No Complaining Rule: Positive Ways to Deal with Negativity at Work* John Wiley and Sons: Hoboken, NJ

the matter should be taken to the Program Director. The matter will be reviewed by the Program Director for final determination.

In addition to the direct mechanism listed above, class officers may also bring matters to the attention of the Program Director.

If an issue cannot be satisfactorily resolved by either this direct mechanism or through the Program Director, a formal written complaint may be filed with the Provost.

Nondiscrimination Policy (A3.11)

Presbyterian College is an Equal Opportunity Employer and is an educational institution affiliated with the Presbyterian Church (USA). Consistent with this adherence to its Christian affiliation, the College reaffirms its commitment to equality of opportunity and pledges that it will not practice or permit discrimination in employment on the basis of race, color, religion, sex, national origin, or disability as provided by the college's policy or in any other fashion prohibited by law.

The Physician Assistant Studies program has a policy on student services, including admissions and progression, that ensures nondiscrimination as defined by state and federal laws and regulations, such as on the basis of race, religion, gender, national origin, or disability.

Discrimination and Harassment Policy (A3.11)(A3.17g)

Any faculty, staff, student, student group or student organization found to have committed, to have attempted to commit, to have encouraged others to commit, or to have aided others in committing, any of the following acts is subject to the disciplinary sanctions set forth by Presbyterian College.

Violation of the harassment policy by students is also a violation of the Physician Assistant Studies Program Professional Code of Conduct and students may also be subject to disciplinary actions.

- Discriminating or engaging in harassment with respect to any member of the College community on the basis of legally protected characteristics, including race, national origin, religion, creed, ancestry, citizenship, age, gender, sexual orientation, physical or mental disability, genetic information, or past or present service in the military.
- Engaging in harassment with respect to any member of the College community. "Harassment" means unwelcome conduct that is severe and/or pervasive enough to interfere with the ability of the target to work, learn, live in the community, perform assigned functions, or otherwise participate normally in the College's programs and life.

Presbyterian College is committed to maintaining an atmosphere that is free from invidious discrimination on the basis of protected characteristics, and of harassment of members of the College community. Any faculty, staff, student (or other member of the community) who believes that he/she is the victim of discrimination or harassment, or has witnessed discrimination or harassment, is encouraged to report the conduct to the Vice President for Human Resources and Title IX, the Assistant Dean for Professional and Student Affairs, the Vice President for Campus Life, or the Associate Dean of Students and Director of Residence Life. This includes harassment and/or discrimination by any member of the community, including staff and faculty, and is not limited to conduct by students. Retaliation against any person making such a report in good faith is prohibited.

A single incident or even a few incidents may not necessarily rise to the level of pervasiveness required to constitute harassment, but even a single severe incident can constitute harassment.

If sufficiently severe or pervasive, the following types of conduct can constitute harassment: lascivious or insulting jokes, degrading comments or gestures, inappropriate touching, display or transmission of offensive images. This list is illustrative only; other conduct may also constitute harassment.

The prohibition on harassment is designed to protect faculty, staff, and students from discrimination, not to regulate the content of speech. The offensiveness of a particular expression as perceived by some members of the College community, standing alone, is not sufficient to constitute harassment.

The foregoing definitions and comments apply to sexual discrimination, sexual harassment, and sexual violence – collectively, “Sexual Misconduct.” However, because of its concern for the issue and in compliance with federal law, Presbyterian College has additional policies and procedures concerning Sexual Misconduct, which are set forth under the heading “Sexual Misconduct” below. Any incidents that may constitute Sexual Misconduct can and should be reported to the Vice President for Human Resources and Title IX; they may also be reported to the Assistant Dean for Professional and Student Affairs, the Vice President for Campus Life or the Associate Dean of Students and Director of Residence Life pursuant to this Code, who will inform the Vice President for Human Resources and Title IX of the report.

Sexual Misconduct Policy (A3.11)

Any student, student group, or student organization found to have committed, to have attempted to commit, to have encouraged others to commit, or to have aided others in committing, any of the following acts is subject to the disciplinary sanctions set forth in the Presbyterian College Code of Responsibility.

- Engaging in any form of discrimination, harassment, or violence of a sexual nature, or on the basis of sex or gender.
- Conditioning any form of College-related benefit, including any academic or workplace decision, on submission to or rejection of sexual advances or requests of a sexual nature (“Quid pro quo harassment”).

The general prohibitions in the Presbyterian College Code of Responsibility, including those prohibiting (and defining) discrimination, harassment, stalking, and harm to persons, apply to conduct of a sexual nature or that is motivated by sex or gender. However, because of the College’s concern for sexual misconduct in all forms, and because of the application of federal law, specifically Title IX of the Education Amendments of 1972, the College has a separate express prohibition of such sexual misconduct, and separate procedures for the handling of any disciplinary proceeding that involves an allegation of sexual misconduct.

The College’s prohibition on Sexual Misconduct extends beyond students to cover misconduct by all members of the College community, including faculty and staff. Anyone who believes they have been a victim of or a witness to Sexual Misconduct – including improper conduct by visitors to College premises or vendors – should report this to the Title IX Coordinator, who is the College’s Vice President of Human Resources. Sexual Misconduct may also be reported to the Assistant Dean for Professional and Student Affairs, the Vice President for Campus Life or the Dean of Community Life. Any person who receives a report of Sexual Misconduct should relay this report to the Title IX Coordinator.

“Quid pro quo harassment” should also be reported to the Title IX coordinator. An example of quid pro quo harassment would be a promise to a student of a good grade in exchange for sexual favors.

If the Title IX Coordinator determines that an allegation of a violation of the Code of Responsibility involves alleged Sexual Misconduct, that allegation will be subject to the special procedures for Sexual Misconduct set forth in the Presbyterian College Code of Responsibility.

Leave of Absence, Short-Term Leave, and Withdrawal Policy (A3.17)

In the event that a student is unable to complete a course, rotation, semester, or the program, there are two options available:

Leave of Absence

A leave of absence is a serious condition that should be avoided. Students who are in good academic standing are eligible to request a leave of absence in advance of a semester or clinical rotation. Guidelines for a Leave of Absence include:

- A student may not decelerate for academic reasons.
- A student may only decelerate once.
- A student may only take a leave of absence once.
- If a student needs to decelerate more than once or take a leave of absence more than once, then they will be dismissed from the program.
- If, due to deceleration or leave of absence the student misses the deadlines for graduation, the student will graduate upon completion of all requirements.
- All requirements must be met within a 12-month window following the start of the deceleration or leave of absence. If the student does not meet the requirements within the 12-month window the student will be dismissed from the program.
- Students must meet all conditions and deadlines of deceleration or leave of absence.
- Leave of absence without approval will result in program dismissal.
- There may be a financial consequence for remediation, probation, deceleration, repeating courses, or withdrawal.

Situations in which a leave of absence is appropriate include physical or mental medical emergencies, death of an immediate family member, pregnancy/childbirth, adoptions, or other situations on a case-by-case basis that preclude the student from meeting the requirements of the program within the semester, clinical rotation, and/or academic year the student is enrolled. A leave of absence does not release students from their educational and/or financial obligations to the curricular and co-curricular responsibilities for the program in accord with the granting of the Master's degree. In the event that a student requires a deceleration or leave of absence, they are to make the request in writing to the Program Director. The Provost, Program Director, Academic Director and/or Clinical Director, and Medical Director will meet with the student. After evaluation by this group, the request will either be approved or denied. If approved, conditions and deadlines will be created by this group.

Withdrawal from the Program

Withdrawal from the program or from a clinical rotation has significant consequences. A student may request withdrawal from the program at any time. In addition, the program reserves the right to require withdrawal of a student at any time it is deemed necessary to safeguard the standards of orderly operation, scholarship, and conduct. Students may not withdraw from individual courses or clinical experiences in the program curriculum but instead must withdraw from the entire program. A grade of "W" will be posted to the student's transcript for all courses within the withdrawal semester.

Students wishing to withdraw from the program or from a clinical rotation must submit a written request to the Program Director providing detailed information of the reason for the request. The student will then meet with the Provost, Program Director, Academic Director and/or Clinical Director, and Medical Director. The case will be reviewed and a decision whether to approve the withdrawal. There may be a financial consequence for remediation, probation, deceleration, repeating courses, or withdrawal.

Procedures for Requesting Student Leave or Withdrawal

Students who are petitioning for leave of absence, or withdrawal must adhere to the following steps:

- The student should make an appointment with the Academic Director immediately upon recognizing the need for student leave or withdrawal to discuss the student's individual situation and to determine the appropriate type of leave.
- The student must file a petition for the appropriate type of leave in writing to the Academic Director
- Upon receipt of the form, the Academic Director will consult with the faculty, preceptor, and/or responsible agent for each course and/or co-curricular requirement for which the student is requesting leave.
- The student will receive a communication from the Academic Director regarding the status of their petition within 1 week of receipt of their petition.
- Before leaving campus, students with approved leave of absence or students intending to withdraw from the program should meet with the Office of Financial Aid to discuss how the leave of absence affects financial aid eligibility. Additionally, at this time, a meeting with any other Physician Assistant Studies program and/or College representatives necessary to facilitate the leave of absence will occur (if applicable).
- During the approved duration of the leave of absence, the student is responsible for checking his/her College issued e-mail account and communicating with the program periodically during the leave to keep the program informed of any changes to contact information and/or any situations that may impact the student's ability and/or readiness to continue with the program at the expiration of the approved Leave.
- Prior to returning to any curricular or co-curricular requirements, a student returning from a leave of absence must provide any paperwork and/or documentation required to support the student's ability to return to normal curricular/co-curricular responsibilities to the Academic Director.

Readmission

Readmission of a student who has ceased enrollment in the Physician Assistant Studies Program is subject to the following guidelines:

For students in good academic standing:

- If the period of absence is one calendar year (12 months or less):
 - The student should meet with the Academic Director to discuss the circumstances and determine the appropriate academic term for returning to the program.
- If the period of absence is longer than one calendar year but less than two calendar years (24 months), the student desiring readmission must:
 - Reapply to Presbyterian College Physician Assistant Studies Program
 - Submit a signed letter to the Admissions Director for presentation to the Admissions Committee for permission to be readmitted. The letter should include the circumstances of the prolonged absence as well as the specific term and year for which he/she wishes to be readmitted.

- The Admissions Committee will determine whether approval will be given based upon the circumstances of the case. If approval is granted, the Admissions Director and Academic Director will set the conditions for readmission based on the Admissions Committee's decision.
 - If the Admissions Committee denies readmission, the student may appeal the decision to the Program Director. The Program Director's decision is final in the matter with no higher level of appeal.
- Any student who has been absent or on leave from the Physician Assistant Studies Program for two years (24 months) or more and who wishes to be readmitted will be treated as a new applicant. The student must apply to the Physician Assistant Studies Program as a first-year student and must fulfill all admission requirements. If the student is accepted for admission, he/she must start over in the curriculum.

For students who are NOT in good academic standing (defined for purposes of this policy as students who have been dismissed, currently carry an academic deficiency, or who are on probation in the Physician Assistant Studies Program for scholastic reasons):⁵

- will be treated as a new applicant. The student must apply to the Physician Assistant Studies Program as a first-year student and must fulfill all admission requirements. If the student is accepted for admission, he/she must start over in the curriculum.

A student may only be considered for readmission to the Physician Assistant Studies Program once.

Any student on leave of absence due to medical reasons must provide clearance to return to curricular, co-curricular, and clinical requirements from a healthcare provider to the Admissions Director prior to readmission. In addition, all readmission decisions are contingent upon the following:

- Completion of a criminal background check
- Provision of documentation of required immunizations and health screenings; and
- Completion of required drug screening

Counseling and Wellness Policy (A3.10)

Some students are affected by personal crises, while other students suffer from stress or face other issues such as alcohol and chemical dependency. For more information on this as well as other counseling services, please schedule an appointment with the Presbyterian College Director of Counseling Services in the Presbyterian College Health Center at <https://www.presby.edu/campus-life/counseling-wellness/>. The phone number is: (864)833-8100.

For information for chemical abuse or dependency a student may also contact the Gateway Counseling Center. The phone number is: (864)833-6500. This Center provides round-the-clock care for students 24 hours a day, seven days a week.

Physical and Psychological Emergencies Policy (A3.10)

A student who is reasonably believed to pose a danger to him/herself or others, for any reason including but not limited to physical or psychological difficulties, may be required to obtain professional evaluation and treatment. Failure to comply with this requirement can result in contact by the program with the student's emergency contact (spouse, parent, etc.), disciplinary action, suspension or enforced leave,

⁵ Readmission for students whose absence has resulted from sanctions due to, honor code violations, professional probation including felony or misdemeanor conviction will be overseen by the Admissions Committee.

and/or mandatory withdrawal from the College. If the dangerous behavior is not corrected in a timely and sufficient manner, medical leave may be imposed.

Student Travel Reimbursement

The Physician Assistant Studies program encourages students to actively participate in local, state, regional, and national professional organizations. The College will enroll each student in the American Academy of Physician Assistants (AAPA) as well as the South Carolina Academy of Physicians (SCAPA) at no additional cost to the student. Students are also encouraged to attend the national AAPA conference (with prior approval from the Academic Director). Students are responsible, however, for their own expenses for the conferences and extremal activities.

Lecture Recording

Classroom lectures are the intellectual property of the instructor and as such are subject to copyright laws. Duplication, alteration, or redistribution of lecture materials by students is prohibited. Students may not copy or redistribute lecture materials without the express written permission of the course instructor. Unauthorized duplication, alteration, or redistribution of lecture materials may violate federal or state law as well as the Honor Code and *Guidelines for Ethical Conduct for the Physician Assistant Profession*. Violation of these policies may result in disciplinary action.

Student recording of lectures is at the discretion of the course instructor. You may request, in writing, to record lectures to the course instructor who may or may not grant this privilege.

Recording of Examinations

The College reserves the right to photograph, audio and/or video record all examinations during the course of the curriculum. The student understands this information may be reviewed and used in the case of suspected violation of the Honor Code.

Selection of Clinical Sites (A3.03)

Students are permitted to request clinical sites; however, the Clinical Director will make the final decision regarding student placement. **Students are not to solicit nor are they required to arrange their own clinical sites.** They may, however, contact new sites with the permission of the clinical director. The program cannot guarantee that students will be placed at a requested site. The academic needs of the student represent the highest priority in making decisions for clinical placement.

Patient Charting

During the course of rotations, students may be expected to document in patient charts. These are legal documents and students must indicate that they are a physician assistant student when making entries in a patient chart or other documents within the institution that the student is instructed to complete. Students should seek guidance from their clinical preceptor on proper formatting. Student may use the format of "Student Name, P.A. – Student." In addition, students share responsibility with the preceptor to ensure the preceptor sees the patient and countersigns all documents.

Patient Logging

Students are required to complete detailed patient logs as outlined by the program. These logs will be utilized to ensure the student is gaining the proper educational experience as outlined by ARC-PA.

Student Services

Student Advising(A1.05)

Students will be assigned a faculty advisor upon matriculation and will typically remain with that advisor until graduation. Since the curriculum is a lock-step curriculum, individual academic advising is not necessary for selecting core courses. Advisors will meet with their advisees near or at the end of every semester. Students may also choose to meet with their faculty advisors if they would like to discuss an issue at any time.

The purpose of the student advising program is to:

- Assist the student in effectively progressing through the professional curriculum;
- Provide the student with a resource to reinforce the requirements, expectations, and standards of the professional program;
- Guide the student in meeting the curricular and co-curricular requirements necessary for student progression and graduation; and
- Provide the student with a resource regarding the profession.

Student advisees are expected to:

- Be proactive in communicating with his/her advisor.
- Schedule a meeting with his/her advisor within 1 week if placed on academic or professional alert or warning.
- Seek immediate assistance from his/her advisor if experiencing academic difficulties or any other issues.
- Make and keep appointments to meet with his/her faculty advisor regarding academic ability and progress.
- Actively participate in all advising meetings.

Faculty advisors are expected to:

- Meet with advisees near or at the end of every semester.
- Meet more often with students who are experiencing academic or professional difficulties or are on academic alert/warning or professional alert/warning.
- Communicate necessary information and updates to advisees on a periodic basis.
- Guide advisees to help each student succeed in the program.
- Complete the [Student Advising Form](#)

Student Tutoring Resources

Students struggling academically in any course are encouraged to form peer study groups, seek peer tutoring, and approach the course instructor(s), faculty advisor, and/or the Academic Director or Program Director for assistance. In addition to assistance in specific courses, resources on goal setting, time management, study skills, note taking, writing instruction, etc. are available and students can talk with their faculty advisor.

Student Confidentiality of Records (A3.20;A3.21)

It is the policy of Presbyterian College to provide for the protection of confidential information contained within student records against improper or illegal disclosure in accordance with the "Family Educational Rights and Privacy Act" (FERPA) of 1974.

Directory Information

It is the policy of the College to compile non-confidential information that is classified by law as "directory information." At its discretion, the College may or may not release this information. Directory information includes the student's full name, address, telephone numbers, major field of study, participation in official

activities and sports, dates of attendance, degree(s) awarded, awards and honors received, and in the case of athletic team members, weight and height.

A student who desires that directory information not be released without his/her prior permission or consent may preclude such release by notifying the Office of the Registrar. Information released on alumni may include the above, plus the date of graduation. The release of additional information contained in a graduate's record will require a written authorization from the individual. A permanent authorization may be placed in the record at the discretion of the graduate.

Confidential Student Records

The following records are confidential student records:

- **Admissions Records:** Those records assembled by the Admissions Committee in the Physician Assistant Studies Program to provide for the screening and selection of students.
- **Active Academic Records:** Those academic records retained by the Office of the Registrar to account for the enrolled student's academic performance and status, to include official course records maintained by instructors.
- **Inactive Academic Records:** Those records retained by the Office of the Registrar that pertain to the academic performance of persons no longer enrolled at Presbyterian College.
- **Financial Aid Records:** Those records maintained by the Office of Financial Aid that relate to a student's eligibility for a receipt of financial assistance, except that information considered confidential to a parent.
- **Disciplinary Records:** Those records maintained by the Academic Committee in the Physician Assistant Studies Program that relate to a student's conduct.
- **Public Safety Records:** Those records maintained in the Office of Public Safety that relate to a student's contact with security and law enforcement officials.
- **Financial Records:** Those records maintained by the Business Office that relate to a student's financial account.
- **Educational Partners:** Personal information concerning students will be shared with educational partners of Presbyterian College Physician Assistant Studies Program (e.g. practice sites, clinical affiliates) on a need-to-know basis. All applicants for admission agree to the sharing of this information as part of their application for admission to the Physician Assistant Studies Program. This information may include but is not limited to: email addresses, telephone numbers, results of criminal background checks and drug screenings, immunization records, and the last four digits of social security numbers.

Access to Confidential Information

It is the policy of the College that the release of confidential information from an official student record requires the prior written consent of the student except as provided for by law. It is the policy of the College that information contained in official student records will not be released to the parent(s) or guardian(s) without the consent of the student unless the student is a dependent of the parent(s) or guardian(s) as defined under section 152 of the Internal Revenue Code of 1986 or the student authorizes that release to the parent(s) or guardian(s).

Student Access to Records

It is the policy of Presbyterian College that students are allowed access to their official college records to ensure that information contained in official records is not inaccurate, misleading or otherwise in violation of their rights or privacy.

A student who wishes to review his/her student record will make a request directly to the person in charge of the office in which the record is maintained. A time for the review which is satisfactory to both parties will be announced by the person in charge of the file. If, during the review of the record, the student finds

information or data that he/she believes is inaccurate, misleading, or otherwise inappropriate, he/she should bring it to the attention of the person in charge of the office and request the desired correction. If the matter cannot be resolved between the student and the person responsible for the maintenance of the record, the student will submit a written request to the Program Director or Provost for a hearing on the disputed information. The request will contain sufficient justification to support a charge that erroneous or improper information is contained in the file.

It is the policy of the College that students may obtain non-notarized, machine duplicated copies of college documents contained in the official student records at no cost. Students who have outstanding financial obligations to the college cannot receive documents until all accounts are paid in full.

College-Wide Services

Information about the following services and other services provided by Presbyterian College to all students are included in the undergraduate student handbook and on the College website at <http://www.presby.edu/garnetbook>. Students are encouraged to utilize these services as needed and may request more information and/or referrals from their Faculty Advisor. All of the following resources are subject to change and/or to limits on availability:

- **PC Cares Comprehensive Cross Functional Student Crisis Team**
 - <http://www.presby.edu/campus-life/counseling-wellness/helping-students/pc-cares/>
- **Counseling and Wellness Services**
 - <http://www.presby.edu/campus-life/counseling-wellness>
- **Student Health Services**
 - <http://www.presby.edu/campus-life/counseling-wellness/student-health-services>
- **Career Development and Student Success**
 - <http://www.presby.edu/campus-life/career-development-student-success/>
- **Religious Life and Service**
 - <http://www.presby.edu/campus-life/religious-life-service/>
- **Campus Police**
 - <http://www.presby.edu/campus-life/campus-police/> /
ON CAMPUS EMERGENCY: Dial 864.833.3949
- **Financial Aid Office**
 - <http://www.presby.edu/admissions/tuition-aid/>
- **Dining Hall Services**
 - <http://pcdining.campusdish.com/>
- **Library Services**
 - <http://lib.presby.edu/rooms-at-the-library>
 - <http://lib.presby.edu/home>
- **The Writing Center**
 - <http://www.presby.edu/academics/academic-resources-support/writing-center>

Student Identification Cards

Each student is provided a Presbyterian College Physician Assistant Studies program identification card. Identification cards are issued during orientation for new students and are valid through the graduation date. Identification cards validate authorization for access to athletic events, dining hall, College facilities, etc. and must be presented when requested by appropriate College personnel.

Automotive Vehicle Regulations

Students are extended the privilege to operate automotive vehicles on the campus of Presbyterian College providing such vehicles meet with the registration and safety standards established by the state in which the vehicle is licensed. Rules, restrictions and limitations pertaining to automotive vehicles are disseminated by the Campus Police Department. State and city violations are heard in city or magistrate courts. Vehicle

registration is included in the tuition and fees for students; all vehicles parked on Physician Assistant Studies Program or Presbyterian College premises must be registered with the Campus Police Department.

Failure to present a valid card is sufficient reason to deny access to a facility or service, including dining services. Allowing others to use an identification card is a violation of college policy and will result in appropriate disciplinary action.

Students who require a new card because of loss, mutilation, or a change of status should immediately contact the Campus Police Department at 833-8301. A charge will be made for replacement of an identification card. Duplicate cards are issued weekdays between 9:00 – 11:00 a.m. and 1:00 – 4:30 p.m.

Professional Standards, Requirements, & Expectations (C3.04)

Professional Code of Responsibility

Presbyterian College is proud of its strong community of students, faculty, staff, administration, alumni, and friends of the College. As vital members of Presbyterian College's community, students are expected to balance their autonomy with regard for other members of the community with responsibility and respect for the policies and procedures of the College. These policies and procedures are intended to preserve community and foster civility in an environment that is conducive to the educational mission of the College.

As responsible members of this community, students must familiarize themselves with and abide by the tenets of the Honor Code, the Code of Responsibility⁶, and the policies and procedures of the College. Honor, integrity and professionalism, which are the foundations of Presbyterian College culture, should guide student conduct at all times.

Presbyterian College's mission, as a church-related college, is to develop within the framework of Christian faith the mental physical, moral, and spiritual capacities of each student in preparation for a lifetime of personal and vocational fulfillment and responsible contribution to our democratic society and the world community. To support this mission, each student must adhere to the policies and procedures governing conduct, or he/she may be subject to sanctions, including separation from the College and its community. Even where sanctions are appropriate to help maintain community and civility, it remains part of the College's goal to educate individual students and to help them grow concerning their responsibilities as members of a community.

Professional Standards of Academic, Personal, and Social Conduct

Students are expected to conduct all aspects of their lives with great intention, honor, respect, and integrity. This includes responsible actions towards themselves, others (fellow and future colleagues, faculty, staff, patients, and the College community), and the profession. Professionalism is a term that encompasses interpersonal, behavioral, and academic/scholastic expectations. Students are expected to conduct themselves in a professional manner at all times, whether on or off campus.

The Physician Assistant Studies community is dedicated to the promotion of attitudes, behaviors, and actions consistent with the embodiment of personal and professional growth, responsibility and accountability. The code of conduct and expectations of members of the Physician Assistant Studies program are designed to provide all students an environment that embraces the professional value system and is conducive to the students' personal and professional growth and development. Enrollment in the Physician Assistant Studies program obligates the student to performance, behavior, attitude, and demeanor, both on and off campus, which is reflective of a professional.

Each student is expected to be knowledgeable of and to comply with the following sources of rules and standards, some of which are discussed in more detail below:

- The Presbyterian College Honor Code <http://www.presby.edu/academics/honor-code/>
- The Physician Assistant *Studies Guidelines for Ethical Conduct for the Physician Assistant Profession*.

⁶ The Code of Responsibility applies to all Presbyterian College students and is available online at <http://www.presby.edu/campus-life/honor/>

- All other published policies, rules, and regulations of Presbyterian College
- All federal, state, and local laws

Any student who violates any of the aforementioned standards is subject to disciplinary action, which may include expulsion, regardless of any action taken by federal and/or civil authorities.

Professional conduct within the Physician Assistant Studies program and/or on College property, at assigned clinical assignments, at program and/or College sponsored events/activities, and at curricular and co-curricular activities is expected to maintain the expectations, attitude, behavior, performance, and demeanor of a health-care professional. If a student fails to do so, they are subject to disciplinary action. Additionally, disciplinary action may result if personal and professional conduct is deemed unbecoming and incompatible with the mission, value system, or expectations of the Physician Assistant Studies program and of a future physician assistant at other off-campus locations.

Code of Professional Conduct within the Physician Assistant Studies Program

The Physician Assistant Studies program subscribes to the professional value system as described in the governing documents of the Physician Assistant Profession titled, ***Guidelines for Ethical Conduct for the Physician Assistant Profession***.⁷ These documents are the foundation of the professional value system of physician assistants and serve as a guide for students with respect to the expectations of the profession. The Code of Conduct applies to behavior in the classroom, on campus, clinical education, other patient care settings, and whenever representing the Physician Assistant Studies program, whether that be as a community volunteer, at a professional meeting, or with a student organization. All students sign a pledge of professionalism embodied within the Physician Assistant Oath⁸ during new student orientation and agree to abide by the Physician Assistant Studies program *Studies Guidelines for Ethical Conduct for the Physician Assistant Profession* indicating that they will:

Demonstrate Concern for the Welfare of Patients

- Recognize when one's ability to function effectively is compromised and continuing without assistance could potentially cause patient harm. In such cases, one should get relief or help.
- Recognize the limits of student involvement in the medical care of a patient.
 - Act within the legal scope of practice for a physician assistant student and his/her training in provision of information or care.
 - Act under supervision of a licensed practitioner and seek supervision whenever necessary.
- Do not use alcohol or other drugs in a manner that could compromise himself/herself or patient care.
- Do not promote one's self at the expense of the patient.

Show Respect for the Rights of Others

- Comply with all aspects of HIPAA privacy regulations including, but not limited to:
 - Treat patients and their families with respect and dignity both in their presence and in discussion with others.
 - Maintain confidentiality of patient information.
 - Respect the patient's dignity and privacy.
- Deal with faculty, preceptors, staff, peers, and any members of a health care team in a respectful manner.
- Treat all persons encountered in a professional capacity equally and with respect regardless of ability, age, race, ethnicity, religion, gender, sexual preference or socioeconomic status.

⁷ The guidelines are located at: <https://www.aapa.org/workarea/downloadasset.aspx?id=815>

⁸ The Physician Assistant Oath is included in the Appendix.

Exhibit Trustworthiness

- Be truthful in all communication. Failure to comply shall be considered lying as defined in the Honor Code.
- Admit errors in a timely manner and do not knowingly mislead others.
- Do not misrepresent him/herself as a physician, physician assistant, or other health professional.
- Accurately acknowledge the source of all information reported. Failure to comply shall be considered plagiarism as defined in the Honor Code.

Act Responsibly with a Sense of Duty

- Participate responsibly in the care of the patient to the best of his/her ability and with appropriate supervision.
- Undertake clinical duties as requested, complete such duties to the best of one's ability, and seek help when needed.
- Follow through on commitments. This includes being present, prepared, and prompt for classroom, clinical, service, and professional duties or meetings.
- Notify the responsible person if something interferes with his/her ability to perform clinical or academic tasks effectively.

Maintain a Professional Demeanor

- Maintain a neat and clean appearance, and dress in attire that is accepted as professional by following the Professional Attire Policy.
- Be thoughtful and respectful when interacting with patients and families.
- Strive to maintain composure during times of fatigue, professional stress, or personal problems.
- Avoid offensive language, gestures, or inappropriate remarks.

Professional Attire (C3.02)

The appropriate development of a professional requires the creation and maintenance of a professional environment within the Physician Assistant Studies program and is the responsibility of all members of the community. The Physician Assistant Studies program subscribes to a model where all students are required to wear college provided scrubs during all aspects of the didactic curriculum unless otherwise directed by a faculty member or Program Director (e.g. social events, approved Physician Assistant Studies Program "Dress Down Days", etc.).

For the physical examination course, students are required to wear appropriate undergarments. Females must be in a sports bra or similar undergarment. Students must be prepared to remove t-shirts for thoracic, cardiac, and abdominal examinations.

The following attire is considered **unacceptable**:

- Hats or caps (except headgear considered a part of religious or cultural dress and pre-approved by the Admissions Director).
- Denim pants of any color
- Shorts, culottes, or other pants above the knee
- Skirts shorter than 1" above the knee when standing
- Sweatpants, sweatshirts, spandex, or leggings
- Revealing clothing (e.g., tank tops, halter tops, midriffs, tube tops, swim tops, etc.)
- Canvas sneakers, casual sandals/clogs (e.g. "Flip-Flops," "Birkenstocks," beach shoes, etc.), shoes with extremely high heels (> 3 inches)
- Buttons, large jewelry or accessories that could interfere with patient care or safety
- Exposed underwear or lack of appropriate undergarments

- Sunglasses worn indoors (except for medical reasons and pre-approved by the Admissions Director)

Adequate precautions should be taken to maintain good personal hygiene. These precautions include regular bathing, use of deodorants and regular dental hygiene. Personal care considerations include:

- Hair should be clean, neat, and styled out of the eyes. Hair may not be dyed any unnatural hair colors. If close contact with patients occurs (e.g. physical assessment procedures), hair longer than shoulder length should be secured. Beards and mustaches should be clean and well groomed.
- Cologne, perfume or aftershave is not recommended in the patient care setting due to patient allergies and sensitivities.
- Cosmetics should be used in moderation.
- Nails should be well groomed, manicured and of short to medium length to facilitate patient care activities. Artificial finger nails are prohibited on rotations where direct patient care is involved as they have been linked to infectious disease transmission.
- Jewelry and accessories should be non-distracting. Body piercing is permitted in ears only (no more than two earrings per ear); no other visible body piercing is permitted. (e.g., tongue, nose, eyebrows, chin, lips).
- No tattoos should be visible.

Students are expected to wear appropriate professional dress for all rotation and professional activities. This includes wearing a clean, neatly pressed, long-sleeved waist-length white lab coat with the Physician Assistant Studies program badge, student name tag, closed-toed professional shoes and clean, professionally styled clothing (i.e. dresses or skirts of medium length, non-denim tailored slacks, and appropriate tops for females and collared dress shirts with an appropriately knotted/secured necktie for males).

Student Identification in Clinical Settings (B3.01)

PA students must be clearly identified in the clinical setting to distinguish them from physicians, medical students and other health profession students and graduates.

All students are required to wear a short white lab coat with the Presbyterian College Physician Assistant Studies program logo embroidered on the right chest. They are also required to wear their Presbyterian College student ID and any ID provided by the clinical site in a clearly visible fashion. Students must also clearly identify themselves as a physician assistant student at all times. Students must never misrepresent themselves and may not use previously earned titles such as RN, MD, PhD, DC or any other credential except as "physician assistant student."

Professional use of Technology and Media

Accessible postings on social media, websites, or other electronic communication by students are subject to the same professional standards as any other personal interaction. The following E-Professionalism Policy is designed to protect students from potentially adverse and long-term effects due to unprofessional behavior in electronic and social media and to guide professional student behavior in these outlets. The Physician Assistant Studies program does not and will not monitor students' electronic communication or posting on social media sites. If a student violates the *Studies Guidelines for Ethical Conduct for the Physician Assistant Profession* in his/her electronic communication or social media, however, and it is brought to the attention of the program, appropriate disciplinary action may be taken.

By identifying themselves publically using social media, students in the Physician Assistant Studies program are creating perceptions about themselves, the program, the College, and the profession of physician assistants. Professional associations have developed guidelines for acceptable e-professionalism practices

in healthcare providers.⁹ Students are encouraged to read and follow the e-professionalism guidelines accepted by the medical professions as a proxy for physician assistants. Guidelines of particular relevance to physician assistant students include the following:

- Complaining about or disparaging patients, even in general terms, does not advance the dignity of patients or the profession. Professionals should keep in mind that simply avoiding the name of a patient may not be sufficient to avoid patient identification.*
- Physician Assistant professionals must be conscious that content posted to social media may have consequences on reputations or careers for years to come, reflect poorly upon the Physician Assistant profession, or undermine patient confidence in the care provided. Postings on social media should be subject to the same professional standards and ethical considerations as other personal or public interactions.*
- Physician Assistant professionals should select privacy settings in social media accounts that provide the greatest degree of protection for personal information, keeping in mind that privacy settings are not perfect and that information posted online is likely permanent. Continuous self-monitoring of privacy settings is necessary, as social media sites change privacy policies.*

**These specific guidelines are from the American Society for Health Systems Pharmacists' Statement on the Use of Social Media by Pharmacy Professionals and relevant to Physician Assistant students.*

Public postings on social media may have legal ramifications. Comments made by students concerning patients or unprofessional comments about themselves, other colleagues, professors, or preceptors can be used by the courts or professional licensing boards. Students must be diligent to ensure that their electronic communication or postings on social media sites do not violate laws pertaining to patient or student privacy, including the Health Insurance Portability and Affordability Act (HIPAA) and the Family Education Rights and Privacy Act (FERPA). HIPAA and FERPA regulations apply to all comments made on social media sites and violators are subject to the same prosecution as with other HIPAA or FERPA violations. HIPAA or FERPA violations are also violations of the *Studies Guidelines for Ethical Conduct for the Physician Assistant Profession*, and as such, are subject to disciplinary action within the School as well. To avoid legal ramifications, students should adhere to the following guidelines:

- Students must take all precautions they would normally use in public forums to maintain patient privacy when using social media.
- Online discussions of specific patients should be avoided, even if all identifying information is excluded. It may be possible for someone to identify the patient from the context of the discussion.
- Under no circumstances is it appropriate or legal to post photos of patients or patient body parts on social media without the specific written permission of the patient.
- Medical advice and professional interactions with patients through social media should be avoided.
- Students should not report protected academic information of another student. Such information includes, but is not limited to: course grades, evaluations, examination scores, honor council findings, judicial outcomes, or adverse academic actions.

In addition to the general standards of all healthcare professionals and the legal requirements that apply to electronic communication and posting on social media sites, the Physician Assistant Studies program holds all students responsible for adherence to the *Studies Guidelines for Ethical Conduct for the Physician Assistant Profession*. Accessible postings on social media, websites, or other electronic means are subject to the same professional standards as any other personal interaction. Violation of any of the following will constitute a violation of the *Guidelines for Ethical Conduct for the Physician Assistant Profession*; if it is brought to the attention of the program, appropriate disciplinary action may be taken.

⁹ American Medical Association [AMA]. AMA Policy: Professionalism in the Use of Social Media. [Online] www.ama-assn.org/ama/pub/meeting/professionalism-social-media.shtml [Accessed 17 October 2012]

- Presbyterian College faculty, staff and administrators will often use e-mail to communicate with students. This information may be important and/or time-sensitive. Thus, it is expected that all students are connected to e-mail and check it frequently.
- Students must not utilize websites and/or applications in a manner that interferes with work or academic commitments. Use of email, text, social media sites, or other websites should not be used in class unless it is directly related to the subject material presented and use is expressly permitted by the instructor.
- Students should not use social media to communicate with faculty and staff.
- Students must not represent themselves as another person.
- No external websites may be created by student organizations. Social media may be used (e.g. Facebook, Twitter, blogs) but it should have disclaimer that it is not an official site of Presbyterian College.
- Students may not present themselves as an official representative or spokesperson for Presbyterian College or the Physician Assistant Studies program. When speaking to news sources, always indicate that your views are your own. Do not speak for the College, program, or any national organization.
- Students must show proper respect for the laws governing copyright and fair use or fair dealing of copyrighted material owned by others, including Presbyterian College's own copyrights and brands. Students should never quote more than short excerpts of someone else's work, and should always attribute such work to the original author or source.
- When students see content posted by colleagues that appears unprofessional they have a responsibility to bring that content to the attention of the individual, so that he/she can remove it and/or take other appropriate actions. If the behavior significantly violates professional norms and the individual does not take appropriate action to resolve the situation, the student should report the matter to the Academic Director.

The following actions are strongly discouraged as these are considered unprofessional and reflect poorly on the individual, the profession, the Physician Assistant Studies program, and Presbyterian College:

- Lack of concern for others' right to privacy. Students should maintain the privacy of colleagues, faculty, and staff unless they have been given permission to use the person's likeness or name on their site.
- Display of vulgar language.
- Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity, or sexual orientation.
- Presentations or photographs that may reasonably be interpreted as condoning irresponsible use of alcohol, substance abuse, or sexual promiscuity.

Professional Assessment

To assure growth as a professional and compliance with the *Studies Guidelines for Ethical Conduct for the Physician Assistant Profession*, student professionalism will be assessed in a variety of ways including:

- Peer evaluation of professional behavior related to group activities
- Preceptor evaluation of professional behavior on clinical practice experiences
- Self-reflection via standardized instruments and maintenance of a professionalism portfolio

Students, faculty, staff, and preceptors are encouraged to report incidences of misconduct to the Academic Director. A system of early alerts and warnings will be used to (1) identify students not developing satisfactorily as a professional and (2) provide opportunities and instruction for professional improvement with the development of a Plan for Professional Improvement. The student's faculty advisor will be involved with this intervention process and will work in concert with the Academic Director. Although the Physician Assistant Studies program desires to foster student success as much as possible, students will face

disciplinary action if they behave in an unprofessional manner. The **Professional Performance Evaluation (PPE) form is used to track professional behaviors.**

A student may be placed on professional alert or professional warning by the Academic Director without consultation or appeal to allow for professional development. In matters that may lead to professional probation or dismissal, the matter shall be referred to the Academic Committee for handling in accordance with the procedures as set forth in this Bulletin.

The stages of the Professional Alert System are detailed below:

Professional Alert

- A student may be placed on professional alert by the Academic Director when ANY of the following occur:
 - Instructor(s) report attendance or timeliness problems;
 - Failure to meet with his/her advisor as scheduled;
 - Failure to prepare a Plan for Personal and Professional Growth by the deadline;
 - Participation in professional activities is below expected standards;
 - Violation of the Professional Attire Policy for a second time;
 - Notification of unprofessionalism in a clinical or professional setting; or
 - Violation of the E-Professionalism Policy;
- When a student is placed on professional alert, he/she will receive a formal letter from the Academic Director informing the student of the alert and requesting that he/she meet with his/her faculty advisor within one week. The letter is copied to the student's faculty advisor and is included in the student's file. There is no appeal for professional alert, as this gives the advisor and/or the Academic Director the opportunity to aid in the student's professional development.

At the meeting with his/her faculty advisor, the student and advisor will develop a Plan for Professional Improvement using [Remediation Form](#).

- Students on professional alert will not be allowed to hold office in student organizations, receive School travel funding, or represent students on any College or Physician Assistant Studies program committees or any professional organization.
- Once the terms and sanctions of the student's alert status have been set by the Academic Committee they will work together with the student's faculty advisor to monitor the student's progress and ensure they are following through with the set terms and sanctions.
- The professional alert decisions are made by the Academic Committee. Any appeal must be submitted in writing to the Program Director of the Physician Assistant Studies program within one week. The Program Director's decision in the appeals process is final.

Professional Dismissal

- A student may be dismissed from the program when ANY of the following occur:
 - Excessive absences or tardiness to classes, clinical practice experiences, or professional activities after being placed on professional probation;
 - Disruptive behavior in class, during clinical practice experiences, during a professional activity, or in the Physician Assistant Studies program building after being placed on professional alert;
 - Unsatisfactory peer (average), faculty advisor, or preceptor (average) professionalism evaluation for a third time;

- Failure to meet conditions of Plan for Professional Improvement or other conditions stipulated by professional probation by the stipulated deadline; or
 - Violation of the *Studies Guidelines for Ethical Conduct for the Physician Assistant Profession*;
 - Positive drug screen and/or criminal background check (including violation of federal, state or local laws) after being placed on professional probation; or
 - Significant and repeated violations of the Professional Attire Policy either within the Physician Assistant Studies Program or on clinical sites after being placed on professional alert.
- Upon occurrence of any of the situation(s) listed above, the Academic Committee will investigate the situation and present its findings to the Program Director and Provost. The committee will then decide on a final action.
 - A dismissed student will receive written notification from the Program Director of the Physician Assistant Studies Program. The notice will include procedures for appeal, and notice of loss of registration and financial aid.

The Honor Code

Each student enrolled in the Physician Assistant Studies program at the Presbyterian College is expected to be academically honest in his/her learning and presentation of information to Physician Assistant Studies program faculty members and his/her peers. The expectation of being honest includes all aspects of academic work including but not limited to the completion of written and/or oral examinations, assignments, and presentations. Appropriate references and citations should be supplied for all information that is not the student's original work – including evaluation, interpretation, or summary of prior work done by another.

Presbyterian College students pledge to abstain from all deceit and dishonorable conduct. Though many acts may at times be considered deceitful or dishonorable, students at Presbyterian College agree that lying, cheating, plagiarism, stealing, and failure to enforce the Honor Code are by definition dishonorable and are, therefore, always in violation of the Honor Code.

Honor Code Violations

- Lying is defined as any attempt to deceive, falsify, or misrepresent the truth. Lying includes but is not limited to:
 - Falsifying or altering academic records.
 - Falsifying or altering clinical reports and/or other patient related notations.
 - Submission of modified or changed tests, answer sheets, or assignments
- Cheating is defined as the employment or rendering of any unacknowledged or unallowed aid in any assigned work. Cheating includes but is not limited to:
 - Unapproved or unauthorized sharing/collaboration or use of external information during graded assessments (e.g. test, quizzes, etc.).
 - Obtaining or gaining access to items which provides an unfair advantage in a graded experience and/or requirement.
 - Falsely distributing, obtaining, using or receiving previously graded academic materials (e.g. tests, cases, etc.).
 - Unauthorized or improper use of an electronic device(s) during an examination. Electronic devices include but are not limited to programmable calculators, PDA's, computers, computer programs, mobile phones, iPods, etc.
 - Misusing, defacing, or tampering with academic resources or materials.
 - Assisting a fellow student in committing an act of cheating or dishonesty.

- Plagiarism is defined as the presentation of the words or ideas of another person as one's own without proper citation. Plagiarism includes but is not limited to:
 - The use of any commercial term paper preparation service.
 - Copying internet or electronic database sources for term papers, journal clubs, or case presentations.
 - Submission of another student's work or group work as one's individual effort.
 - Plagiarism also includes course lectures, PowerPoint, class notes, or examination questions. This information is copyrighted materials belonging to the College and the Faculty member(s).
- Stealing is defined as the appropriation of money or property belonging to another person, organization, or the College or the borrowing of such property without the knowledge and permission of the owner.
- Failure to enforce the Honor Code is defined as any act of omission that permits violations of the Honor Code to occur or to go unreported and is of itself, a violation of the Honor Code.

All students enrolling at Presbyterian College are bound not only to abstain from the above, but also to report such acts committed by fellow students. When events of a questionable nature occur, it is the responsibility of each student to promptly communicate that information to the Academic Director. Determining whether or not a violation of the Honor Code has occurred is the responsibility of the Academic Committee. Failing to report such events amounts to the toleration of dishonor in the community and shall itself be considered a violation of the Honor Code.

Pledged Work

All academic work at Presbyterian College falls under the Honor Code. Quizzes, tests, examinations, projects, and papers to be graded are governed by and should be accompanied by the pledge:

"On my honor, I pledge that I have neither given nor received any unacknowledged aid on this assignment."

This pledge is followed by an act of student acknowledgement, usually a signature. Unacknowledged aid includes aid that is not allowed by the instructor.

Academic Standards, Requirements, & Expectations (A3.17a)

Physician Assistant Competencies

Medical Knowledge

Medical knowledge includes the synthesis of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention. Physician assistants must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition, physician assistants are expected to demonstrate an investigative and analytic thinking approach to clinical situations.

Physician assistants are expected to understand, evaluate, and apply the following to clinical scenarios:

- evidence-based medicine
- scientific principles related to patient care
- etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions
- signs and symptoms of medical and surgical conditions
- appropriate diagnostic studies
- management of general medical and surgical conditions to include pharmacologic and other treatment modalities
- interventions for prevention of disease and health promotion/maintenance
- screening methods to detect conditions in an asymptomatic individual
- history and physical findings and diagnostic studies to formulate differential diagnoses

Interpersonal & Communications Skills (A1.06; B2.04)

Interpersonal and communication skills encompass the verbal, nonverbal, written, and electronic exchange of information. Physician assistants must demonstrate interpersonal and communication skills that result in effective information exchange with patients, patients' families, physicians, professional associates, and other individuals within the health care system. Physician assistants are expected to:

- create and sustain a therapeutic and ethically sound relationship with patients
- use effective communication skills to elicit and provide information
- adapt communication style and messages to the context of the interaction
- work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group
- demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety
- accurately and adequately document information regarding care for medical, legal, quality, and financial purposes

Patient Care

Patient care includes patient- and setting-specific assessment, evaluation, and management. Physician assistants must demonstrate care that is effective, safe, high quality, and equitable. Physician assistants are expected to:

- work effectively with physicians and other health care professionals to provide patient- centered care
- demonstrate compassionate and respectful behaviors when interacting with patients and their families

- obtain essential and accurate information about their patients
- make decisions about diagnostic and therapeutic interventions based on patient information and preferences, current scientific evidence, and informed clinical judgment
- develop and implement patient management plans
- counsel and educate patients and their families
- perform medical and surgical procedures essential to their area of practice
- provide health care services and education aimed at disease prevention and health maintenance
- use information technology to support patient care decisions and patient education

Professionalism

Professionalism is the expression of positive values and ideals as care is delivered. Foremost, it involves prioritizing the interests of those being served above one's own. Physician assistants must acknowledge their professional and personal limitations. Professionalism also requires that PAs practice without impairment from substance abuse, cognitive deficiency, or mental illness. Physician assistants must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population, and adherence to legal and regulatory requirements. Physician assistants are expected to demonstrate:

- understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant
- professional relationships with physician supervisors and other health care providers
- respect, compassion, and integrity
- accountability to patients, society, and the profession
- commitment to excellence and on-going professional development
- commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
- sensitivity and responsiveness to patients' culture, age, gender, and abilities
- self-reflection, critical curiosity, and initiative
- healthy behaviors and life balance
- commitment to the education of students and other health care professionals

Practice-based Learning & Improvement

Practice-based learning and improvement includes the processes through which physician assistants engage in critical analysis of their own practice experience, the medical literature, and other information resources for the purposes of self- and practice-improvement. Physician assistants must be able to assess, evaluate, and improve their patient care practices. Physician assistants are expected to:

- analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team
- locate, appraise, and integrate evidence from scientific studies related to their patients' health
- apply knowledge of study designs and statistical methods to the appraisal of clinical literature and other information on diagnostic and therapeutic effectiveness
- utilize information technology to manage information, access medical information, and support their own education
- recognize and appropriately address personal biases, gaps in medical knowledge, and physical limitations in themselves and others

Systems-based Practice

Systems-based practice encompasses the societal, organizational, and economic environments in which health care is delivered. Physician assistants must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that balances quality and cost, while maintaining the

primacy of the individual patient. Physician assistants should work to improve the health care system of which their practices are a part. Physician assistants are expected to:

- effectively interact with different types of medical practice and delivery systems
- understand the funding sources and payment systems that provide coverage for patient care and use the systems effectively
- practice cost-effective health care and resource allocation that does not compromise quality of care
- advocate for quality patient care and assist patients in dealing with system complexities
- partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery and effectiveness of health care and patient outcomes
- accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care
- apply medical information and clinical data systems to provide effective, efficient patient care
- recognize and appropriately address system biases that contribute to health care disparities
- apply the concepts of population health to patient care

Grading Policy (Appendix 16)

The grading policy for didactic courses, laboratory courses, and clinical courses is shown below. Some sources are graded pass-fail using a scale of "satisfactory / unsatisfactory."

A	93 and above
A-	90 – 92.99
B+	87 – 89.99
B	83 – 86.99
B-	80 – 82.99
C+	77 – 79.99
C	70 – 76.99
F	Below 70
I	Incomplete (becomes F if not removed during first 4 weeks of the following semester)
S	Satisfactory
U	Unsatisfactory

Note: there will be **NO** rounding applied to grades for any assignment, quiz, examination, or final grade.

Didactic and Laboratory Courses: Each course team (instructor of record and other faculty participating in the course) will develop a set of course objectives that include relevant knowledge, skills, values and habits within the discipline(s) associated with the course.

Each course team is expected to assess general class response and understanding at least once during the course, although frequent, short assessments are preferred.

To pass the course, students must earn a "B-" or better, or "S," depending on the grading scale used in the course. Assessments will provide feedback to students regarding strengths and weaknesses in the curricular competencies and suggestions for improvement and additional learning. Assessments shall be returned to the students in a timely fashion in order to maximize learning.

Examinations and Assessments of Student Learning

In an effort to aid the upholding of the Honor Code and to ensure that examination results for all students represent fair and accurate measurement of their individual knowledge and skills, it is necessary to maintain a standardized and secure testing environment. Therefore, unless otherwise directed by the examination/assessment proctor, students will refrain from the use of reference, study, or other materials or devices during examinations and other assessments. Students who engage in any of the following behaviors during examinations or other assessments without the express permission of the proctor will be considered to have committed an honor code violation:

- Accessing a cell phone or any other electronic communications devices;
- Using notes, books, reference material, or other aids;
- Attempting to aid an individual or receive aid to complete the examination/assessment;
- Offering, disclosing, reproducing, transmitting, receiving, utilizing, or making available information regarding the examination/assessment to others by any means or for any purpose.

During scheduled examination/assessment periods, all students will be asked to place all personal belongings that they may have with them (including, but not limited to, books, bags, purses, computers, tablets, cell phones, programmable calculators, other programmable devices, outerwear (hats, coats), and photographic devices) at the front of the classroom (or location as directed by the instructor) where they can be retrieved when the student turns in their examination/assessment materials to the proctor. Students who receive accommodations to test in a separate location will be asked to leave their personal belongings in the main examination room with the test proctor or in another secure location where they can be retrieved when the student turns in their examination/assessment materials.

Examinations will typically be posted on Examsoft one day before the examination using the SofTest application. It is expected that all students download the encrypted examination for each course before class. The examination will be password protected. The software shuts down all programs and internet access, and is only to be conducted on site (unless otherwise specified). It is the student's responsibility to make sure that his or her laptop is compatible with the software. Privacy screens must be on all laptops. A mock examination will be available at all times.

Late Arrival for Examinations

It is unacceptable to arrive late for examinations. It is the instructor's discretion whether a student may be allowed to take the examination should the student arrive late. If the instructor allows the student to take the examination, the student must comply with all accommodations the instructor places for testing. This may include sitting in a certain location with no additional testing time allotted.

Pre-clinical Summative Exam

In order to move on to clinical rotations all students must pass the pre-clinical summative exam. Students must receive above 75.00% on the exam. The exam content will be roughly distributed by a proportion of credit hours from all material covered before the exam.

If a student fails to achieve a score of 75.00%, he or she may have **ONE** opportunity to have a pre-clinical summative exam retake after remediation. The examination will cover the same material equitably. If the student fails to achieve a score of 75.00% or higher, he or she will be dismissed from the program. Student will be subject to the dismissal policy outlined in this handbook.

Re-grading and Challenging Examination Questions Policy

All efforts will be made by faculty to create high quality examinations. Each examination will be peer-reviewed by a primary faculty member. In some circumstances, a question may have been coded incorrectly or a student may disagree with the answer.

Difficulties with assessment items on examinations should be communicated in writing to the examiner after the examination has been graded and within 24 hours upon receiving the grade for the examination. Students may request in writing to have an assessment re-graded at the instructor's discretion. Requests for re-grading of a question should be supported by appropriate justification (classroom text book, course materials, primary literature, etc.) and not based upon opinion or supposition. Re-grading requests submitted inappropriately will not be reviewed and re-grading may result in the lowering, increasing, or no change of the score. The decision of the instructor is final.

Programmatic Evaluations

During the course of program, students will be expected to complete various programmatic evaluations including, but not limited to:

- Course Evaluation
- Instructor Evaluation
- Program Evaluation
- Student Evaluation of Clinical Sites

It is the expectation of the program that students will complete these forms as requested by program faculty and staff. These evaluations are an important part of improving the quality of the program. The program values student feedback. Failure to complete programmatic evaluations may result in a professionalism violation, and students will be required to work with their faculty advisor to complete the Professional Performance Evaluation (PPE) form.

Clinical Evaluations (C4.01)

To ensure students are prepared for clinical practice, a key element is the quality of the learning environment during clinical rotations. The program evaluates each clinical site's ability to provide required experiences and meet clinical competency requirements. To evaluate a new site, a Preceptor Information Form is required to be completed, and the Clinical Director performs an initial onsite visit to determine if the site will provide the learning experience required for the students to meet clinical competency requirements.

During the clinical phase of the program, each student will be required to complete a Mid Rotation Evaluation form during the first 3 weeks of each rotation. The evaluation must be submitted to the Clinical Director for review. This evaluation will ensure that all students will have the necessary opportunities to achieve clinical learning benchmarks and competencies during each rotation assignment. If a student indicates that the site may not be able to provide the necessary learning environment the Clinical Director will be responsible for addressing these concerns with the site and if necessary reassigning the student to another site.

Additionally, each clinical preceptor will be required to complete a Preceptor Evaluation form at the conclusion of each clinical rotation. This evaluation will be part of the student's final grade for that rotation according to the course syllabus. It is the responsibility of the student to ensure that his/her preceptor completes the Preceptor Evaluation prior to the student returning for call back days.

As part of the ongoing evaluation process, the Clinical Director will ensure that each student receive at least one on-site faculty visit during the clinical phase of the program. During this visit, the faculty member will interview both the student and the preceptor and complete the Faculty Evaluation/Site Visit form. If the faculty member feels there is a concern with the site at this time he/she will inform the Clinical Director.

Clinical Learning & Benchmarks (B3.02)

During the entire program, each physician assistant student is required to master clinical competencies in each area to prepare them for entry in to clinical practice.

It is important to note that clinical competency is **not** simply determined by number of procedures performed. Competency is determined through exposure and a rigorous, multi-modal (multiple choice examination, direct observation, portfolio analysis, oral presentation), continuous, evaluation processes to comprehensively evaluate competency for each student.

Based on the Association of American Medical College (AAMC) Clinical Skills Curricula¹⁰, the program has adopted the following guiding principles of clinical competency:

1. The primary purpose of clinical skill performance is to improve patient outcomes in all aspects of care
2. Clinical skills education will reflect a patient-centered care-strategy
3. Clinical skills education will be interactive, experienced based, and learner-centered
4. Clinical skill development is a self-directed habit and students will be instructed on how these skills are to be developed
5. PA faculty have the responsibility of ensuring students receive comprehensive didactic and clinical education and comprehensively access these skills
6. Continuous quality improvement is part of all aspects of the clinical education process

Clinical skills learning will occur utilizing the following formats to achieve clinical competency:

1. Large Group Learning
 - a. This is primarily the "traditional" form of learning in a lecture format utilizing tools such as PowerPoint
2. Directed Independent Learning
 - a. Assignments, research, homework, and similar assignments
3. Seminars/Workshops
 - a. Students will attend a number of Grand Rounds sessions with topics synchronized with learning modules. For example, during the Psych/Behavioral Health Module, students will attend several grand rounds topics presented by external and internal subject matter experts. In addition, students will attend Journal Club with articles corresponding to each module.
4. Small Group Sessions
 - a. Students will participate in Problem Based Learning exercises utilizing tools such as DXRClinician
5. Simulation
 - a. Students will participate in various simulation experiences at the PC Pharmacy School Simulation Center as well as the Greenville Hospital Medical School Simulation Center.
6. Patient Care Experience with the following learning opportunities (at a minimum):
 - a. Early Clinical Experiences
 - i. Exposure to the clinical setting
 - ii. Observation of medical facilities and staff
 - iii. Patient interaction
 - iv. Clinician interaction
 - b. Preventative / Primary Care
 - i. Take problem-focused patient histories
 - ii. Practice establishing rapport with new patients
 - iii. Build longitudinal patient-student relationships
 - iv. Observe and learn wellness and preventative health care skills
 - v. Observe referred care management

¹⁰ Recommendations for Pre-clerkship Clinical Skills for Education for Undergraduate Medical Education. Task Force on the Clinical Skills of Medical Education Students. 2008.

- c. Emergent Care
 - i. Take problem focused histories
 - ii. Practice focused physical examination skills
 - iii. Practice diagnostic reasoning and test interpretation
 - iv. Learn basic procedural skills
- d. Acute Care
 - i. Practice establishing rapport with new patients
 - ii. Take problem-focused patient histories and examinations
 - iii. Observe and learn time-dependent encounter skills
- e. Chronic Care
 - i. Build relationships with patients
 - ii. Learn about barriers to adherence to medications, attitudes, etc
 - iii. Practice taking a functional assessment
 - iv. Observe changes over time
- f. Palliative and end of life care
 - i. Learn and practice basic communication skills
 - ii. Build patient-student relationships
- g. Population / Community-based health care
 - i. Exposure to barriers to care
 - ii. Learn about healthcare resources
 - iii. Learn about limitations of the health care system.

To assess that students are meeting the program expectations and acquire the competencies needed for clinical practice, the following objective measurements are in place:

Preceptor Evaluations

- Mechanism of Assessment: Direct Observation
- Students can achieve a maximum score of 100 points for each clinical rotation (1-5 Likert Scale x2 weighting factor) for each of 10 categories. Student must achieve a passing score of $\geq 80\%$ to successfully meet this requirement.

End of Rotation Examinations (EOR)

- Mechanism of Assessment: Multiple Choice Examinations and/or Oral Presentation
- Students are required to successfully complete the PAEA End of Rotation (EOR) written examinations at the end of each core rotation. Students are required to score of $\geq 70\%$ on the EOR examination (with z-score adjustment) to successfully meet this requirement. For the elective rotations, in lieu of the PAEA EOR Exam, students must provide an oral presentation on a topic pertinent to the rotation and achieve a passing score of $\geq 80\%$ to successfully meet this requirement.

Patient Logging

- Mechanism of Assessment: Portfolio Analysis of Student-Patient Logs
- Students must log their patient activity within the e*Value system and can achieve a maximum score of 50 points for each rotation. Students must achieve a passing score of $\geq 80\%$ to successfully meet this requirement. A checklist of skills is provided at the end of each Clinical Syllabi to help guide students to gain key skills. In addition, students are required to log their clinical skills in to the e*value system. The Clinical Director will provide training to students prior to their clinical rotations on patient and procedure logging.

Objective Structured Clinical Examination (OSCE)

- Mechanism of Assessment: Direct Observation / Simulation / Oral Examination
- Students can achieve a maximum score of 100 points for each End of Rotation OSCE. Students must achieve an ≥ 80% on each OSCE four times during the clinical phase, at least one of which will be during the final four months of the program to successfully meet this requirement.

SOAP Notes

- Mechanism of Assessment: Evaluation of Documentation
- Students can achieve a maximum score of 50 points for SOAP notes. Students must achieve a passing score of ≥ 80% to successfully meet this requirement.

Board Preparation Assessment (optional for student)

- Mechanism of Assessment: Multiple Choice Examinations
- Students can self-assess their knowledge using Rosh Review.

Through these many measures, the program documents students are well prepared for clinical practice.

Remediation Policy (A3.17f)

In order to progress to the next professional year, a student must earn a grade of "B-" or higher (or "S" when pass/fail is applied) in all courses taken.

Every effort will be made to give each student ample opportunity to demonstrate competency in each area of the program and demonstration of competency is required in order for the student to progress in the program. (See Remediation Practices – ARC-PA A.317f below.)

Due to lack of effort, if the student does not show sufficient progress in remediation they will also achieve an unsatisfactory mark for professionalism. This will be placed in the student's advising file and could result in probation. This may escalate to program dismissal and the case referred to the Program Director.

Repeated failures, multiple remediations, or failure to complete remediation plans according to the remediation policy by a specified time will result in the student being taken before the Academic Committee where the case will be discussed further. At that time, a decision will be made for the student to be placed on probation or dismissed from the program and there may be a financial consequence for remediation, probation, deceleration, repeating courses, or withdrawal.

Remediation During the Didactic Phase

The following categories are considerations for remediation:

- Below 80.00% on any examination
- Any professional issues identified
- Any other issue identified by instructors

Students falling into any of these categories will be identified by the course instructor. The course instructor will immediately notify the Academic Director.

- The course instructor will discuss the student's situation with the Academic Director and the student's advisor.
- Student will need to complete the remediation within two weeks of the assignment date or they will receive a zero for the examination.

The course instructor, with prior approval from the Academic Director will remediate students on exam scores as follows:

Students scoring 72-79.99% - Student will complete a written remediation of questions missed. A one-page summary will be written based on the keyword (main element) for each question missed. This document is to be submitted to the course instructor. The original exam score stands and will not be changed.

Students scoring below 72 - Student will complete a written remediation of questions missed. A one-page summary will be written based on the keyword (main element) for each question missed. Then the student will also retake the examination and must pass the examination with a score of at least 80%. The original score stands and will not be changed.

Remediation During the Clinical Phase

Students are required to pass every component of each clinical rotation (see syllabi). Students failing any single component of a clinical rotation will fail that rotation, and are required to repeat the rotation.

- Scoring below 70% on the PAEA End of Rotation Examination, after the Z-score calculation (or other mechanism to grade evaluation), results in a failure. The Clinical Director, with approval from the Academic Director, will remediate students on exams as follows:
 - The student will take an alternate version of the End of Rotation Examination provided by PAEA.
 - The student must pass the alternate version of the examination. If the student fails to pass this examination, the student fails the rotation and is required to repeat the rotation. Note this will extend the student's date of graduation.
- If a student fails an OSCE, he/she must repeat that OSCE and pass another OSCE. Failure to do so will result in failure of the rotation.
- If a student fails to complete logging on EValue, he/she will fail the rotation.
- If the preceptor final evaluation is below 70%, the student will fail the rotation.

Students falling into any of these categories will be identified by the Clinical Director. The Clinical Director will immediately notify the Academic Director.

Students must complete the exam or OSCE remediation within two weeks of the assignment date or they will receive a **zero** and will fail the rotation.

Remediation Practices (A3.17f)

As stated in the above policy, students will typically complete a written remediation of questions missed for an examination. However, students may require more intensive remediation based on the underlying issues. The goal of the program is for each student to gain a comprehensive understanding of the material.

Some students will require remediation beyond a what is outlined above and they will work with their advisor to complete the form: [Remediation Form](#)

Using this document, the advisor will work with the student to develop a detailed and individualized plan to accomplish remediation. Students need to be aware that **remediation is not simply reexamination** of materials and requires **significant effort** to gain valuable skills required for clinical practice.

There are several key types of remediation including, but not limited to:

- Pre-existing academic issue (i.e. previous learning disability)
- Specific testing issue (i.e. severe test anxiety)
- Insufficient working knowledge base
- Insufficient communication skills
- Insufficient physical examination skills
- Insufficient clinical reasoning
- Poor organization / time management skills
- Extenuating psychological or medical condition
- Non-verbal learning issue (i.e. social awkwardness)
- Attitudinal / behavioral issues

Methods of remediation utilized by the program including, but not limited to:

- 1x1 Faculty (internal or external) tutoring
- Peer tutoring
- Numerous types of assignments including:
 - Video reviews for test taking, note taking, and many other skills building activities
 - Video reviews of various clinical skills
 - Reading assignments supported with written remediation questions and summaries
 - Clinical case studies to help build clinical inductive and deductive reasoning
 - Board preparation materials
 - Time assigned to the Medical Director, or other practicing physician to build skills

Many issues can contribute to needing remediation. Students should feel comfortable asking for help from their faculty advisor, other faculty, the Presbyterian College Director of Counseling Services in the Presbyterian College Health Center, peers, and medical professionals. Students should also feel free to talk with the Program Director about any concerns or assistance with remediation activities. See the Appendix of this document for the [Remediation Form](#).

Deceleration/Leave of Absence Policy (A3.17f)

Deceleration or leave of absence is a serious condition that should be avoided. In the event that a student requires a deceleration or leave of absence they are to make the request in writing to the Program Director. The Academic Director, Program Director, and Medical Director will meet with the student. After evaluation by this group, the request will either be approved or denied. If approved, conditions and deadlines will be created by this group. Guidelines include:

- A student may not decelerate for academic reasons.
- A student may only decelerate once.
- A student may only take a leave of absence once.
- If a student needs to decelerate more than once or take a leave of absence more than once, then they will be dismissed from the program.
- If, due to deceleration or leave of absence the student misses the deadlines for graduation, the student will graduate upon completion of all requirements.
- All requirements must be met within a 12-month window following the start of the deceleration or leave of absence. If the student does not meet the requirements within the 12-month window the student will be dismissed from the program.
- Students must meet all conditions and deadlines of deceleration or leave of absence.
- Leave of absence without approval will result in program dismissal.

- There may be a financial consequence for remediation, probation, deceleration, repeating courses, or withdrawal.

Grievances (A3.17d)

Any student filing a complaint or grievance (excluding complaints concerning sexual misconduct) must first attempt to resolve the issue by consulting with the involved faculty or staff member.

Students who have individual concerns involving a teacher or course that are not of general interest to the class, should speak directly to the course instructor. If the concern might involve more than one individual in the course/class, the concern should be taken to the relevant student class officer(s) so that they might sample class opinion to determine whether the issue is a concern of the majority of the class.

If in the opinion of the class officer, the concern is valid, the class representative should bring the matter to the attention of the course instructor with the objective of resolving the issue at that level. If the matter is unable to be resolved at this level, the concern should be taken to the Academic Director or in the case of clinical learning, to the Clinical Director. If the solution proves unsatisfactory, the appropriate Program Director should be contacted concerning the matter. The matter will be reviewed and a recommendation and final determination will be made.

If there is still a concern, the student or class officer can directly contact the Provost.

Complaints concerning sexual misconduct should be reported immediately in accordance with the Sexual Misconduct Policy. (Bulletin, p. 29)

Vacation/Holiday Policy

Please refer to the College academic calendar for observed holidays during the didactic phase. The college holidays are not observed during the clinical phase. Students must be at their clinical site during all appropriate preceptor hours. The Academic Director and Clinical Director, working with the Program Director, may implement additional vacation/holidays depending on the PA program curriculum and the college holidays.

Conference Attendance Policy

Students may be excused from clinical rotations to attend the national AAPA (American Academy of Physician Assistants) conference. It is expected that the class president attend as a student delegate during clinicals. All costs for conference attendance are up to the individual student. Students need proof of conference attendance for approval. Any change to the policy remains at the discretion of the Program Director. The student must request to attend the conference in writing to the Clinical Director at least 4 weeks prior to the event. The Clinical Director must provide written approval to the student for attendance.

Appeal of Final Letter Grade

Overview

It is the right and responsibility of the faculty to establish student grades. As outlined below, this right shall be abrogated only if clear and convincing evidence is presented by the student as specified herein. The appeal process for students who question a final grade in a course is as follows:

Didactic Courses*

Initial Appeal	Subsequent Appeal (in order)
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Course Director	1. Academic Director 2. Program Director
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*Exceptions: If the Course Director is the Academic Director, the appeal goes directly to the Program Director for final decision.

Clinical Residency Courses

Initial Appeal	Subsequent Appeal
Clinical Director	1. Academic Director 2. Program Director

Permitted Actions

- Only the final course grade may be appealed. Individual assignment grades (exams, quizzes, etc.) should be discussed with the instructor or course director throughout the semester.
- All recognized appeals by students should be written and delivered to the appropriate individual. The individual appealing is responsible for assuring the receipt of the appeal.
- The appeal process does not allow for grading or re-grading of individual assignments by anyone other than the course director.
- Decisions at the Academic Director or higher can include:
 - denial of the appeal
 - upholding the appeal, at which point the final course grade will be changed

Evaluation Criteria

Grade appeals will be granted only if the student presents clear and convincing evidence of one or more of the following:

1. Procedural or clerical error by the instructor or preceptor that had a negative impact on the student's grade;
2. The grading being arbitrary, capricious or outside accepted norms with resultant negative impact on the student's grade.

Procedures and Timeline

1. Students must first attempt to resolve the issue with the course director (or preceptor in the case of clinical residency).
2. If the student decides to formally appeal the final grade, he/she should provide a written appeal, including rationale/justification for the appeal, to the course director within 3 business days from the final grade submission and posted for student access.
3. The course director should notify the student upon receipt of the appeal, but the student is responsible for assuring the receipt of the appeal. If the course director cannot be contacted, the student should notify the next person in the appeal process (see table under "Overview" above) and ask for assistance in contacting the course director.
4. Course directors will e-mail or mail a written decision to the student within 3 business days of receiving the appeal. If the course director fails to provide a decision within 3 days, the student should notify the next person in the appeal process to intervene in obtaining the decision or furthering the appeal.
5. After receiving the course director's decision, the student has 3 business days to appeal the final grade, in writing, to the next person in the appeal process. It is the student's responsibility to provide evidence to support the appeal. The Academic Director or Program Director will investigate the appeal. The investigation will include discussing the matter with the course director and may include requesting the course director to support the accuracy and fairness of his/her grading. The student's

written appeal constitutes authorization for the Academic Director or Program Director to access the student's educational files and grades pertaining to the appeal.

6. The Academic Director or Program Director has 3 business days from the date of receiving the appeal to render a decision and provide the decision to all parties.
7. In all cases the Program Director's decision is final.

*NOTE: Timelines may be extended if necessary evidence or individuals are not available.*¹¹

Program for Academic Commitment and Excellence

A system of early alerts and warnings will be used to (1) identify students having difficulty with the academic rigors of the Physician Assistant Studies program and (2) provide opportunities for assistance with the development of an academic advising plan. The student's faculty advisor will be intimately involved with this intervention process and will work in concert with the Academic Director. Although the Physician Assistant Studies program desires to foster student success as much as possible, students must meet competency or progression standards to continue in the program. For this reason, provision has been made for students to be placed on academic probation and/or be dismissed from the program if sufficient academic progress is not demonstrated.

Academic Alert

- A student may be placed on academic alert when ANY of the following occur:
 - Mid-semester grade of "U" in any course;
 - A student's performance or attendance is below expected standards;
 - A student indicates that he/she is having trouble with the rigors of the program; or
 - Formative assessment grades are earned below the "B-" level on a consistent basis.
- When a student is placed on academic alert, he/she will receive a formal letter from the Academic Director informing the student of the alert and requesting that he/she meet with his/her faculty advisor within one week. The letter is copied to the student's faculty advisor and is included in the student's file. There is no appeal for academic alert.
 - Students placed on academic alert are required to meet with their faculty advisor within one week of receiving notification from the Academic Director. At the meeting with his/her faculty advisor, the student and advisor will develop a [Remediation Plan](#) which must be approved by the Academic Director. Actions in a [Remediation Plan](#) could include peer tutoring, additional tutoring or review sessions with professor, formation of peer study groups, mandatory class attendance, study skills counseling, time management counseling, or other steps deemed appropriate under the circumstances.

Academic Criteria for Progression (A3.17c)

To progress to the next professional year, students must satisfactorily complete all courses in a professional year with a "B-" or "S" or above before progressing to the next year. In addition, students must maintain a cumulative professional GPA of ≥ 3.0 and may repeat a course in the program only once. In order to commence to the clinical phase of the program, students must have completed all didactic courses with at least a grade of "B-" or "S" and must have successfully completed the didactic summative components of the curriculum.

¹¹ The Appeal of Final Letter Grade policy was adapted from Drake College.

Academic warning, probation, and dismissal are described below. All decisions for academic probation and dismissal will be reviewed by the Academic Standards Committee.

Academic Warning

- A student may be placed on academic warning when he/she (ANY of the following):
 - Earns less than a "B-" grade in any course;
 - Earns a cumulative professional GPA less than 3.0; or
 - Any professional issues.
- When a student is placed on academic warning, he/she will receive a formal letter from the Academic Director informing the student of the warning. The letter is copied to the student's faculty advisor and is included in the student's file. There is no appeal for academic warning.
- Students placed on academic warning due to course deficiency or a cumulative GPA less than 3.0 are required to meet with their faculty advisor within one week of receiving notification from the Academic Director. If the notification occurs at the end of a semester, the student must meet with their faculty advisor within one week of the beginning of the subsequent term unless the deficiency has already been remediated. At the meeting with his/her faculty advisor, the student and advisor will develop a plan for academic progress which must be approved by the Academic Director. Actions in a plan for academic progress could include peer tutoring, additional tutoring or review sessions with professor, formation of peer study groups, mandatory class attendance, study skills counseling, time management counseling, or other steps deemed appropriate under the circumstances.

Probation

Students may be placed on probation or dismissed from College and the program for a number of infractions. In addition, the following rules are in place:

- A course or rotation grade below a B- will place a student on probation.
- A semester GPA below 3.0 will place a student on probation.
- A student violating Honor Code or Code of Conduct policy will be placed on probation.
- A student can only be placed on probationary status one time. If a student qualifies for a second probationary status, they will automatically be dismissed from the program.
 - If a student is placed on probationary status, the student will remain on probation for two consecutive semesters.
- The student must achieve at least a 3.0 semester GPA while on probation and have a cumulative GPA of at least 3.0 to be removed from the probation list.
 - The student must meet all requirements of professionalism and academic standards on a continuing basis to be removed from probation.
 - A final grade on a clinical rotation below a B- requires the student to repeat the entire clinical rotation. A maximum of ONE clinical rotation may be repeated for academic reasons. A second rotation failure results in dismissal from the program.

Dismissal

- Any student who receives two (2) "C+, C, C-, or U" in the program will be dismissed.
- Any student who receives a didactic course grade of "F" will be dismissed.
- Dismissal from or failure of ONE clinical rotation may be considered grounds for dismissal from the Physician Assistant Program.

- Failure to maintain professional ethics is grounds for probation or dismissal from the program.
- Failure of a student to meet any standards outlined in this document or as determined by the faculty will result in probation or dismissal.
- Prior to dismissal, the Program Director, Provost, Academic Director, Clinical Director, and Medical Director will convene to discuss the case and decide on appropriate action.
- Any student who is dismissed will receive a certified letter with return receipt requested. It is the student's responsibility to be aware of their academic status.

There may be a financial consequence for remediation, probation, deceleration, repeating a course, or withdrawal.

Attendance and Absences

Didactic and Laboratory Courses and Examinations

Attendance at all regularly scheduled classes, laboratories, and examinations is **mandatory** and part of a student's obligation to the attainment of professional excellence. Students must comply with the faculty member's method of monitoring attendance (class roll, pre-class assessments, etc.). Absences from class activities may result in academic penalties. A student who will not be attending class must ask permission from the course director by e-mail, or letter at least 24 hours in advance of the class meeting time, unless otherwise directed by the course instructor in the course syllabus. In extraordinary circumstances, the course director may accept notification after the absence occurs. Failure to seek permission of the course director in accordance with the policy will be deemed an unexcused absence.

Students are not permitted unexcused absences. In general, excused absences are defined as absences resulting from medical emergencies, sickness, or death in the immediate family. In these instances, student must provide documentation that attests to the validity of the reason for the absence to the course director within 24 hours of return to campus. Without documentation, the absence is considered an unexcused absence. Unexcused absences will be reported to the Academic Director and Program Director. On the first occurrence of the unexcused absence the student will meet with both the Program and Academic Director. At the second occurrence of an unexcused absence the student may be immediately dismissed from the program.

Promptness is one of several traits that health care professionals should display. Consequently, students are expected to be at all class meetings, activities, etc. **on time**. Tardiness disturbs both the learner and the lecturer; repeated violations will be considered improper professional behavior and may result in disciplinary and/or academic action such as dismissal from the program. It is also unacceptable to arrive late for examinations. It is the instructor's discretion whether a student may be allowed to take the examination should the student arrive late. If the instructor allows the student to take the examination, the student must comply with all accommodations the instructor places for testing. This may include sitting in a certain location with no additional testing time allotted or an automatic reduction of grade for the examination. The instructor may also opt to provide a grade of zero if a student is late for an examination.

Clinical Practice Experiences

A student is expected to be present at his/her assigned site on the days and during the times designated on the Physician Assistant Studies program course schedule for the days and times specified by the preceptor for all scheduled days of the rotation. Except in the case of illness, injury, or emergencies, students should contact the Clinical Director before contacting the preceptor to request time off or any change to the published schedule.

Scheduled Absence: A scheduled absence is one that is initiated by the Physician Assistant Studies program. The program will notify the preceptor in advance. Typically, a student is not required to make up the actual hours missed as a result of a scheduled absence but is responsible for completion of all activities and objectives of the rotation.

Excused Absence:

- In the event of an anticipated absence, the student must request an excused absence from the Clinical Director well in advance of the need to be away from the site. The student will make up the missed hours in coordination with the Clinical Director and preceptor.
- Absences that are due to personal illness, illness or death of an immediate family member, inclement weather (see Inclement Weather Policy), or unavoidable mishaps (such as an automobile accident on the way to the rotation) are typically considered excused absences provided that the student communicates with the Clinical Director and the preceptor as soon as the situation allows. A letter from a physician or other appropriate professional familiar with the circumstances may be required to substantiate the reason.
- Missed rotation hours must be made up before the end of the semester and before the start of the next rotation, whichever comes first.

Unexcused Absence: An unexcused absence occurs when a student fails to arrive at the appointed time, leaves prior to the scheduled departure time, or fails to show up at the site for a full day or more without prior permission and/or knowledge of the preceptor or the Clinical Director. Consequences may include rotation reassignment, failure of the IPPE or APPE course, professionalism charges, and delay or prevention of graduation.

Other Absences: Students should not plan or request absences from their clinical site due to vacation, outside work obligations, homework assignments, or any other responsibilities.

Holidays: Students in their didactic year will observe College holidays as posted and advised by the Academic Director. However, clinical year students are not eligible for school holidays but should, instead, adhere to the holiday policy of the site.

Travel Time for Distant Rotations: Students who elect to do rotations that require air travel or other extensive travel plans are not guaranteed additional time from a previous or subsequent clinical rotation to accommodate such travel. Students must notify the Clinical Director before finalizing any travel plans that cannot be changed without penalty. The Physician Assistant Studies program is not responsible for reimbursement to the student for any penalties incurred when schedules are made without coordination with and approval by the Clinical Director. Early departure or late arrival at any clinical site due to travel issues could be considered an unexcused absence.

Removal from Site: A student may be removed from a clinical site for any reason as determined by the facility. In addition, the Clinical Director has the right to remove a student from a site after consultation with the preceptor, or other appropriate party for any reason. Reasons include failure to complete pre-rotation requirements, unprofessional behavior, request by site to remove the student, etc. Such removal could result in a non-passing grade for that course or dismissal from the program.

A student who does not complete the required number of hours for any rotation could receive a failing grade for that rotation and be required to remediate that entire course.

Missed Examination and Assignments

Missed examinations or assignments are defined as any missed assessments (components of the course on which the student may be graded) that constitute a portion of the final grade for a course or for the year. Students who are absent from any examination must contact the Academic Director who is responsible for approving all absences for examinations. Specific guidelines regarding missed examinations or assignments are as follows:

- Valid reasons for missing assessments of any kind may include personal illness, illness or death of an immediate family member, or unavoidable mishaps such as an automobile accident on the way to the examination. Work is not a valid excuse.
- A letter from a physician or other appropriate professional familiar with the circumstances may be required to substantiate the reason.
- When a student misses an examination, it is the student's responsibility to notify the Academic Director and provide documentation within 3 days of the missed examination. The Academic Director will notify the course instructor as to whether the absence was excused or unexcused. If the absence is deemed excused, the course instructor will determine the time and method for a make-up exam. If the absence is deemed unexcused, the student will receive a zero.
- When a final examination or an annual competency examination has been missed, the student will receive a zero if the course instructor or the Academic Director is not notified within 3 days of the manner for arrangements to be made.
- Where a reason and/or documentation are not presented, the student will receive a zero for the missed examination or assignment.

Special Considerations for Learning

Clinical education occurs in special environments such as classrooms, laboratories, off campus health care facilities, etc. These environments may expose students to chemicals, body fluids, communicable diseases, etc. Certain student populations need to make an informed decision concerning their participation in particular learning environments.

Students with allergies, chemical sensitivities, disease states, or pregnancy who have concerns about participating in any educational activity should notify the Clinical Director. Students must be evaluated by an appropriately credentialed health care professional at his/her own expense and must present documentation of the medical evaluation to the Clinical Director and Medical Director. The Academic Director will contact relevant course instructors and the student's concerns and situation will be presented and reviewed.

Classroom Etiquette

The student should adhere to professional standards for behavior when communicating with faculty and fellow students in the classroom:

- Address the faculty member by title: "Professor" or "Doctor" in all school related activities both on or off-campus.
- Be respectful in all communications with everyone.
- Arrive on time (or preferably early). Students who arrive late must ask permission to enter the classroom. Faculty have the right to refuse entrance until classes break to avoid disruption.
- Students may eat or drink in class at the discretion of the instructor.
- Students may not bring in guests, pets or children to the classroom.

Transfer Credit Policy and Advanced Placement (A3.15)

The Physician Assistant Studies program does accept transfer credits from other Physician Assistant programs nor is there an option for advanced placement.

Graduation and Completion Deadline and Requirements Policy E1.09)(A3.17b)

Students who have satisfactorily completed all academic requirements (as indicated by the successful completion of the Physician Assistant Studies program curriculum) and who have been recommended by the Physician Assistant Studies program faculty may be awarded the Masters of Science in Physician Assistant Studies degree, provided that they have met the following standards. They must:

- Maintain at least an overall 3.0 GPA.
- Successfully complete all courses in the didactic and clinical phase with a "C-" or above.
 - Only one grade can be a "C+, C, or C-"
- Successfully complete the pre-clinical examination with 75.00% or higher and final summative examination with 80.00% or higher
- Pass the Objective Structured Clinical Examinations (OSCE) during the clinical phase 4 times with a minimum of 80% or higher.
- Adhere to all behavioral, ethical, and procedural requirements outlined in the Program Student Handbook.
- **All students must complete the program within a period of 3 years regardless of academic or personal leaves that are extended by the program and institution.**

Student Organizations

Student organizations provide students opportunities to develop leadership skills, broaden social and professional perspectives, and contribute to the activities and initiatives of the Physician Assistant Studies program. Anticipated outcomes of professional organizations are the sharing of ideas, values, activities, and cultures among faculty, staff, and students. Ultimately, active participation in student organizations benefits the Physician Assistant Studies program, the student, and the profession. Membership and active participation in professional organizations is an expectation of the students enrolled in the program.

Student Organizations Purpose Statement

- Advocate for the profession as a unified group;
- Serve and educate the community;
- Develop students as professionals and leaders;
- Represent the Presbyterian College Physician Assistant Studies program;
- Provide networking and collaborative opportunities for students while exposing them to a variety of practice and career opportunities; and

Recognized Student Organizations

The following student organizations are recognized by the School:

1. American Academy of Physician Assistants (required), AAPA
2. South Carolina Association of Physician Assistants (required), SCAPA
3. Christian Medical and Dental Association (optional), CMDA
4. Presbyterian College Physician Assistant Studies Program Student Society (required)
5. Presbyterian College Pre-Physician Assistant Club (optional)

6. Pi Alpha National Society for Physician Assistants (nominated)

Students on academic alert or professional warning will not be allowed to hold office in student organizations or represent physician assistant students on any College or program committees or any professional organization.

Physician Assistant Student Society

- The class will form a program student government and elect four officers from the first year class.
- These officers include: President, Vice-President, Secretary, and Treasurer.
- Any student interested in being an officer will need to submit a position application. Faculty will then choose the designated roles. The primary purpose of the student government is to represent the program at regional and national physician assistant events. Students can raise money and use it for charitable causes or conference attendance fees.
- The class president will be expected to lead the class with meeting and fundraising activities.
- The class president will need to notify society faculty advisor at least one week prior to meetings and activities.
- The faculty advisor has the right not to authorize activities.
- The president will also be the SAAPA Assembly of Representatives (AOR) representative. He or she will be required to attend the national conference for the annual meeting.
- Vice-president: will be the AOR alternate and will need to attend the national conference as well.
- Secretary: will record meeting minutes for all meetings and submit to program assistant. Secretary will also fill the role of Outreach Chair. This position serves as a liaison to coordinate activities and public relations efforts between their student society and external groups and works to promote the profession with these external groups. The Outreach Chair will need to coordinate all community activities with the Faculty Advisor.
- Treasurer: will be responsible for all finances of the student society. He/she will track the bank account following Student Life guidelines. Treasurer will also be the State Chapter Student Representative (SCSR).
- All costs for activities and conference attendance are up to the individual. Each position will be reviewed by faculty yearly. Each position may be renewed or open for new applications on an individual basis.

The Physician Assistant Student Society conducts business meetings monthly. Additional meetings may be called by the faculty advisor or president as needed.

Physician Assistant Challenge Bowl Team

Each year the AAPA holds a student Challenge Bowl competition at the national conference. Students from PA Programs throughout the nation compete to determine who the best is. Winning is a significant bragging right.

Each year the Presbyterian College PA Program will hold an internal challenge bowl. All class cohorts are allowed to compete. Details of the Presbyterian College Challenge Bowl will be available separately. Students will have the chance to place in the top 5 positions by merit. The top three will be representatives for the college at the AAPA Challenge Bowl. The top fourth and fifth positions will be alternates. All top 5 positions will need to have proof of conference registration upon 1 week after placing. Each position has to be renewed yearly.

Organizing Professional Service Learning Activities

Each student organization should sponsor at least one community service activity per year (general community service or professional service learning). Philanthropy differs from community service and participation in philanthropy does not fulfill service requirements.

Health Fairs and Screenings

Physician Assistant Students may be asked to participate in health fair and screenings performed by Presbyterian College. Any students or faculty participating in such events are governed by the policies set forth by the policies of the College.

Sponsored Events

All events must be discussed with and approved by the Faculty Advisor and the Academic Director. The Academic Director will review each request with the Academic Committee.

Fundraisers by the sale of goods must be in good taste and professional and have prior approval from the Academic Director. All student organizations must work together in a professional manner to insure fundraising efforts are spread out through the calendar year.

Alcohol Policy for Sponsored Events

No alcoholic beverages are allowed at student organization-sponsored events except for those events approved by the Program Director. Organizations and individuals that host an event on or off campus at which alcohol will be present may be held responsible for the actions and well-being of their members and guests. The location of the event must have an appropriate alcohol license deemed appropriate by Presbyterian College. Off campus locations must be approved accordingly by the Academic Director. Events serving alcoholic beverages conducted on-campus must use PC Dining Services, the vendor contracted by Presbyterian College, for bartending services. BYOB is not allowed at on-campus events.

The College expects any group of students, either formally or informally organized, to conform to the laws of South Carolina. Presbyterian College expects those students who are under age 21 to refuse an alcoholic beverage if one is offered. The expectation for off-campus BYOB events is that only those persons of legal age will bring alcohol. At any social event, students and guests shall be required to show photo identification to the designated monitor and comply with all event policies.

If alcoholic beverages are present, non-salty food items and non-alcoholic beverages must be available throughout the event. Social events may not include any form of "drinking contests" in its activities or promotions. Common containers of alcohol may not be used (e.g. kegs). No alcoholic beverages may be awarded as prizes or incentives. Advertisements, posters or invitations from student groups that are intended for public viewing may not mention or depict alcohol or use terms referring to alcohol such as beer or happy hour.

To promote personal responsibility and self-governance, organizations that sponsor social events shall assume the responsibility of enforcing these guidelines. The sponsoring student organization shall designate at least two students to serve as monitors for the event. The monitors must not consume alcoholic beverages before or during the event. Monitors must "ID", comply with event policies, issue wrist bands to those of age, and register the organizational members and their guests at the entrance, and they shall assist those responsible for the event. Hosts and monitors are responsible for assisting in making arrangements for the safety of those who appear to be impaired. Campus safety officers and staff members may visit registered events periodically to check with the persons responsible for the event, primarily to offer assistance. If a violation of the law or College policy is observed, the officer will issue a violation and report the incident to the appropriate College official.

Fundraising

All fundraising efforts must support, and not compete with, the College's overall efforts to secure funding for annual operating needs, capital projects, and endowed funds. The Office of Advancement is responsible for coordinating the cultivation, solicitation and stewardship of donors for the Physician Assistant Studies program and, therefore, oversees all fundraising appeals to any Presbyterian College constituents: alumni, students, faculty, staff, friends, local businesses, foundations, corporations, and parents of students and alumni. The fundamental principles that guide efforts are that Presbyterian College's overall interests take precedence over the special interests of individual departments, organizations, teams, clubs, or other groups; and that all fundraising on behalf of Presbyterian College must be in compliance with Sec. 501(c)(3) of the Internal Revenue Code, which governs non-profit tax-exempt organizations.

If a fundraising activity is deemed unsuitable by the Academic Director, it will not be approved.

Student organizations are not tax-exempt entities and may NOT solicit external monetary donations. Gifts and donations to student organizations are not tax deductible. If gifts-in-kind are received (e.g. guest speaker pays for lunch for members attending his/her talk), the student organization should write a thank you note but cannot imply that the donation is tax deductible. Donations for student travel should be remitted to the Academic Director, not to a student organization. Such gifts will be used to augment Presbyterian College student travel funds and are tax deductible.

When fundraising for charity, all requests for donations, publicity, and print materials should disclose the intended charity and the percentage of profit to be remitted to the charity. The name and contact information of the sponsoring student organization should also be included. Donors not purchasing goods and making monetary gifts should write checks directly to the charity. For monetary gifts, the student organizations raising money should provide a receipt to the donor indicating the charity, the amount donated, and the value of any goods received in return for the donation. Copies of said receipts or a list of donors should be remitted to the charity. It is the charity's responsibility to provide tax information to the donor. Acknowledgment of the donation may be provided by the student organization, but the acknowledgment should not infer that a gift was received by Presbyterian College or the organization. Student organization funds or program funds should not be used to offset the costs of a fundraising event for charity; instead the donation to the charity should be based on the net revenue of the fundraiser. The amount donated and the results of the fundraiser should be reported in terms of net revenue, or the actual amount donated. The total dollar amount raised should not be reported without disclosing the actual amount donated.

Student organizations should demonstrate responsible giving/fundraising by evaluating the charity before raising money for the charity. If available, a charity rating should be provided with the Intent to Solicit form. Charity ratings may be obtained from Charity Navigator at <http://www.charitynavigator.org/>. If the selected charity is not listed with Charity Navigator, the student organization must provide documentation that the financial health of the organization, accountability and transparency, and outcomes of the intended charity have been investigated. Each student organization may conduct one fundraiser per year for philanthropy. A student organization is not allowed to schedule a Dress Down Day to raise money for the organization's chosen philanthropy.

The Academic Director must approve all fundraising efforts before any fundraising is initiated or external entities contacted. Approval must be granted before any supplies may be ordered, materials sent to printers, etc.; therefore requests should be submitted well in advance of the proposed fundraiser.

Financial Policies and Procedures

Presbyterian College and student organizations run on a fiscal year budget (July 1 – June 30).

Student organizations maintain a checking account at a local bank. The Academic Director, organization faculty advisor, and treasurer must be listed on the account. Monthly bank statements must be remitted to the faculty advisor of the relevant organization. Monthly budget reports should be presented to the student organization membership.

An EOY financial report must be prepared annually and remitted to the Faculty Advisor by May 15. The annual financial report also should be presented to the membership. The annual financial report must include

- Beginning and ending balance in the organization bank account
- Fundraising information including date, items sold, net amount generated, use of funds raised (e.g. donation, food for member meetings, etc.).
- Revenue by category (i.e. fundraiser for organization, membership dues, etc.)
- Expenditures by category (i.e. fundraiser expenses, affiliate membership dues, food/supplies for membership meetings, food/supplies for events, etc.)

Funds may be requested for the following types of expenses:

- Supplies for community service, professional service learning, community outreach, etc.; or
- Printing for presentations, fundraising events, community service, membership drive, member handbooks, etc..

Outreach and External Relations

All outreach and external relations by student organizations should strive to represent Presbyterian College and the Physician Assistant Studies program accurately and positively. Language, graphics, and presentations should be professional. Presentations should be well-conceived and polished before delivered to external constituents. When speaking to news sources, always indicate that your views are your own. Do not speak for the College, program, or national organization. Presbyterian College logos and brands are property of the College and the use of Presbyterian College logos or brands on goods for sale, communications, or publications must be approved by the Office of Communications prior to distribution. Student organizations must adhere to the communications approval process to ensure that the materials distributed are professionally presented and consistent with the Presbyterian College brand. Adulteration of the brand or logo is not permitted.

Reports

Student organizations should collect the following information throughout the year and provide it to their faculty advisor within 5 days of the last final exam for the semester.

- Dates and attendance at membership and leadership meetings
- Event/activity information including date, description, attendance, community impact (e.g. collected goods, number of persons served, etc.)
- Beginning and ending balance in the organization bank account
- Fundraising information including date, items sold, net amount generated, use of funds raised (e.g. donation, food for member meetings, etc.)
- Revenue by category (i.e. fundraiser for organization, membership dues, etc.)
- Expenditures by category (i.e. fundraiser expenses, affiliate membership dues, food/supplies for membership meetings, food/supplies for events, etc.)

APPENDICES

Appendix A: Guidelines for Ethical Conduct (C3.02)

Note: This can also be found at: <https://www.aapa.org/workarea/downloadasset.aspx?id=815>

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.

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.

Physician assistants are professionally and ethically committed to providing nondiscriminatory care to all patients. 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.

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.

Nondiscrimination

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.

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, Harassment, and Sexual Harassment (A3.17g)

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.

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.

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, both 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.

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.

These duties are pledged with sincerity and upon my honor.

Dated: _____

Signature: _____

Print Name: _____

Appendix B: Course Descriptions (D1.05; Appendix 16)

First Year (Didactic Phase)

MPAS 5000, Introduction to the PA Profession (2)

This course will expose students to the physician assistant field. It will cover a number of introductory topics such as the history, development, current status, and the projected future of the physician assistant profession. Other topics include scope of practice, health care delivery systems, interpersonal communication, medical decision making, medical ethics, licensing and certification, prescriptive authority, and employment issues. Lecture.

MPAS 5005, Biomedical Ethics (2)

This course will explore current and historical ethical and legal issues pertaining to the health care industry, and specifically the role of physician assistants. Students will examine various topics including, but not limited to, euthanasia, abortion, behavioral modification, allocation and distribution of medical resources, in vitro fertilization, genetic screening, and human experimentation. Lecture.

MPAS 5010, Research Methods and Evidence Based Medicine (2)

This course will provide an overview of the research process, research methods, and evidence-based practices (EBP). Problem analysis and evaluation techniques are presented. Students are shown methods for defining, researching, analyzing, and evaluating problems. Students will be exposed to research tools and study approach, design, data collection, analysis and reporting methods. In addition, students will be exposed to EBP methods including critical appraisal of quantitative and qualitative studies and methods to apply EBP in clinical medicine. Health care delivery will be reviewed in the setting of evidence based practice. Lecture.

MPAS 5015, Global Health and Disease Prevention (2)

Global Health and Disease Prevention is a Master's Level course as part of the Physician Assistant Studies program designed to educate the student on current health topics, including policy and legislation, as well as health care and concerns spanning different socioeconomic classes and cultures and public health related issues. The course will also provide an introduction to the role of lifestyle and nutrition in the prevention of many diseases along with the role of health screenings for prevention. The course will also prepare students for health care training in underserved and overseas populations.

MPAS 5020, Anatomy & Physiology I Lecture (2)

This course is part 1 of a 3-part lecture series designed to familiarize the student to gross anatomy and physiology. The course is essentially split into regional anatomy and medical physiology. While anatomy and physiology are split they will integrate similar topics. A separate lab will be done following the lecture. The regional anatomy section will identify, review, and analyze the structures in the head, neck, thorax, abdomen, pelvis, and upper and lower limbs. Correlating pathologic conditions will also be discussed. This portion of the class is important in understanding the human body as a 3-dimensional structure. It has many implications to surgery. The medical physiology section will analyze and review general human and systems based physiology. Human neurologic, hematologic, immune, lymphatic, respiratory, cardiac, circulatory, renal, gastrointestinal, integumentary, musculoskeletal, endocrine, reproductive systems will be reviewed, demonstrated, and analyzed. Fetal and neonatal physiology will also be discussed. Lecture.

MPAS 5021, Anatomy & Physiology I Lab (1)

This course is a part 1 of a 3-part lab series designed to familiarize the student to anatomy and physiology. The course is essentially split into regional anatomy and medical physiology. While anatomy and physiology are split they will integrate similar topics. The lab integrates topics discussed in lecture. The regional anatomy section will identify, review, and analyze the structures in the head, neck, thorax, abdomen, pelvis, and upper and lower limbs. Correlating pathologic conditions will also be discussed. This portion of the class is important in understanding the human body as a 3-dimensional structure. It has many implications

to surgery. The medical physiology section will analyze and review general human and systems based physiology. Human neurologic, hematologic, immune, lymphatic, respiratory, cardiac, circulatory, renal, gastrointestinal, integumentary, musculoskeletal, endocrine, reproductive systems will be reviewed, demonstrated, and analyzed. Fetal and neonatal physiology will also be discussed. Lab.

MPAS 5030, Anatomy & Physiology II Lecture (2)

This course is part 2 of a 3-part lecture series designed to familiarize the student to gross anatomy and physiology. The course is essentially split into regional anatomy and medical physiology. While anatomy and physiology are split they will integrate similar topics. A separate lab will be done following the lecture. The regional anatomy section will identify, review, and analyze the structures in the head, neck, thorax, abdomen, pelvis, and upper and lower limbs. Correlating pathologic conditions will also be discussed. This portion of the class is important in understanding the human body as a 3-dimensional structure. It has many implications to surgery. The medical physiology section will analyze and review general human and systems based physiology. Human neurologic, hematologic, immune, lymphatic, respiratory, cardiac, circulatory, renal, gastrointestinal, integumentary, musculoskeletal, endocrine, reproductive systems will be reviewed, demonstrated, and analyzed. Fetal and neonatal physiology will also be discussed. Lecture.

MPAS 5031, Anatomy & Physiology II Lab (1)

This course is a part 2 of a 3-part lab series designed to familiarize the student to anatomy and physiology. The course is essentially split into regional anatomy and medical physiology. While anatomy and physiology are split they will integrate similar topics. The lab integrates topics discussed in lecture. The regional anatomy section will identify, review, and analyze the structures in the head, neck, thorax, abdomen, pelvis, and upper and lower limbs. Correlating pathologic conditions will also be discussed. This portion of the class is important in understanding the human body as a 3-dimensional structure. It has many implications to surgery. The medical physiology section will analyze and review general human and systems based physiology. Human neurologic, hematologic, immune, lymphatic, respiratory, cardiac, circulatory, renal, gastrointestinal, integumentary, musculoskeletal, endocrine, reproductive systems will be reviewed, demonstrated, and analyzed. Fetal and neonatal physiology will also be discussed. Lab.

MPAS 5040, Anatomy & Physiology III Lecture (2)

This course is part 3 of a 3-part lecture series designed to familiarize the student to gross anatomy and physiology. The course is essentially split into regional anatomy and medical physiology. While anatomy and physiology are split they will integrate similar topics. A separate lab will be done following the lecture. The regional anatomy section will identify, review, and analyze the structures in the head, neck, thorax, abdomen, pelvis, and upper and lower limbs. Correlating pathologic conditions will also be discussed. This portion of the class is important in understanding the human body as a 3-dimensional structure. It has many implications to surgery. The medical physiology section will analyze and review general human and systems based physiology. Human neurologic, hematologic, immune, lymphatic, respiratory, cardiac, circulatory, renal, gastrointestinal, integumentary, musculoskeletal, endocrine, reproductive systems will be reviewed, demonstrated, and analyzed. Fetal and neonatal physiology will also be discussed. Lecture.

MPAS 5041, Anatomy & Physiology III Lab (1)

This course is a part 3 of a 3-part lab series designed to familiarize the student to anatomy and physiology. The course is essentially split into regional anatomy and medical physiology. While anatomy and physiology are split they will integrate similar topics. The lab integrates topics discussed in lecture. The regional anatomy section will identify, review, and analyze the structures in the head, neck, thorax, abdomen, pelvis, and upper and lower limbs. Correlating pathologic conditions will also be discussed. This portion of the class is important in understanding the human body as a 3-dimensional structure. It has many implications to surgery. The medical physiology section will analyze and review general human and systems based physiology. Human neurologic, hematologic, immune, lymphatic, respiratory, cardiac, circulatory, renal, gastrointestinal, integumentary, musculoskeletal, endocrine, reproductive systems will be reviewed, demonstrated, and analyzed. Fetal and neonatal physiology will also be discussed. Lab.

MPAS 5050, Clinical Medicine I (4)

The Clinical Medicine Series (I, II, III) presents anatomy, physiology, public health issues, epidemiology, pathophysiology, signs, symptoms, differential diagnosis, diagnostic studies, diagnostic criteria, staging, prognosis, treatment, management, and use of evidence based medicine in a wide range of disease states. The Clinical Medicine Series is the cornerstone of the curriculum providing the foundation for other courses within the curriculum. Other courses, such as Patient Evaluation, Pharmacology, Clinical Laboratory and Diagnostic Medicine will further enhance and develop the student's knowledge of the disorders covered. Information will be presented by lecture, demonstration, and audio-visual formats. Lectures are presented by faculty member and invited guests. Lecture.

MPAS 5051, Clinical Medicine II (4)

The Clinical Medicine Series (I, II, III) presents anatomy, physiology, public health issues, epidemiology, pathophysiology, signs, symptoms, differential diagnosis, diagnostic studies, diagnostic criteria, staging, prognosis, treatment, management, and use of evidence based medicine in a wide range of disease states. The Clinical Medicine Series is the cornerstone of the curriculum providing the foundation for other courses within the curriculum. Other courses, such as Patient Evaluation, Pharmacology, Clinical Laboratory and Diagnostic Medicine will further enhance and develop the student's knowledge of the disorders covered. Information will be presented by lecture, demonstration, and audio-visual formats. Lectures are presented by faculty member and invited guests. Lecture.

MPAS 5052, Clinical Medicine II (4)

The Clinical Medicine Series (I, II, III) presents anatomy, physiology, public health issues, epidemiology, pathophysiology, signs, symptoms, differential diagnosis, diagnostic studies, diagnostic criteria, staging, prognosis, treatment, management, and use of evidence based medicine in a wide range of disease states. The Clinical Medicine Series is the cornerstone of the curriculum providing the foundation for other courses within the curriculum. Other courses, such as Patient Evaluation, Pharmacology, Clinical Laboratory and Diagnostic Medicine will further enhance and develop the student's knowledge of the disorders covered. Information will be presented by lecture, demonstration, and audio-visual formats. Lectures are presented by faculty member and invited guests. Lecture.

MPAS 5060, Pharmacology I (2)

The Pharmacology Series (I, II, III) is designed to provide information regarding the pharmacology of commonly used therapeutic options coupled with clinical information in a practical and systemic way so that the most appropriate drug therapy may be selected for a particular patient. The major focus includes general therapeutic principles (E.g. pharmacokinetics and pharmacodynamics) and a review of recommended drug therapy for common medical disorders. Students will be instructed to develop a systematic approach to prescribing which will include identification of disease state, reviewing available therapeutic options for the state including the most current evidenced-based medicine, and developing individualized therapeutic treatment plans. Students will also be instructed on contraindications, adverse reactions, safety, efficacy, therapeutic monitoring, and toxicity. Pharmacology lectures will be coordinated with the content delivered in the Clinical Medicine series so students can gain a more comprehensive understanding of the pathophysiology of conditions as they relate to therapeutic options. Lecture.

MPAS 5061, Pharmacology II (2)

The Pharmacology Series (I, II, III) is designed to provide information regarding the pharmacology of commonly used therapeutic options coupled with clinical information in a practical and systemic way so that the most appropriate drug therapy may be selected for a particular patient. The major focus includes general therapeutic principles (E.g. pharmacokinetics and pharmacodynamics) and a review of recommended drug therapy for common medical disorders. Students will be instructed to develop a systematic approach to prescribing which will include identification of disease state, reviewing available therapeutic options for the state including the most current evidenced-based medicine, and developing individualized therapeutic treatment plans. Students will also be instructed on contraindications, adverse reactions, safety, efficacy, therapeutic monitoring, and toxicity. Pharmacology lectures will be coordinated

with the content delivered in the Clinical Medicine series so students can gain a more comprehensive understanding of the pathophysiology of conditions as they relate to therapeutic options. Lecture.

MPAS 5062, Pharmacology III (2)

The Pharmacology Series (I, II, III) is designed to provide information regarding the pharmacology of commonly used therapeutic options coupled with clinical information in a practical and systemic way so that the most appropriate drug therapy may be selected for a particular patient. The major focus includes general therapeutic principles (E.g. pharmacokinetics and pharmacodynamics) and a review of recommended drug therapy for common medical disorders. Students will be instructed to develop a systematic approach to prescribing which will include identification of disease state, reviewing available therapeutic options for the state including the most current evidenced-based medicine, and developing individualized therapeutic treatment plans. Students will also be instructed on contraindications, adverse reactions, safety, efficacy, therapeutic monitoring, and toxicity. Pharmacology lectures will be coordinated with the content delivered in the Clinical Medicine series so students can gain a more comprehensive understanding of the pathophysiology of conditions as they relate to therapeutic options. Lecture.

MPAS 5070, Patient Evaluation & Counseling I (2)

The Patient Evaluation series (I, II, III) prepares students to perform comprehensive examinations and procedures on patients. Students will learn the knowledge and skills essential for performing a comprehensive medical history and physical examination. The course emphasizes patient interviewing, performing a comprehensive physical and psychological examination, accurately documenting and presenting findings, developing a differential diagnosis, listing possible tests and treatment plans, and providing patient education along with appropriate follow-up. Lectures, reading assignments, hands-on labs, and supplemental assignments emphasize core concepts. Patient interaction and communication are essential skills that will be developed during the course. Over the entire semester, close interaction will occur between students, faculty, preceptors, and various other clinical personnel both inside the college and at external institutions. Lab with preparation.

MPAS 5071, Patient Evaluation & Counseling II (2)

The Patient Evaluation series (I, II, III) prepares students to perform comprehensive examinations and procedures on patients. Students will learn the knowledge and skills essential for performing a comprehensive medical history and physical examination. The course emphasizes patient interviewing, performing a comprehensive physical and psychological examination, accurately documenting and presenting findings, developing a differential diagnosis, listing possible tests and treatment plans, and providing patient education along with appropriate follow-up. Lectures, reading assignments, hands-on labs, and supplemental assignments emphasize core concepts. Patient interaction and communication are essential skills that will be developed during the course. Over the entire semester, close interaction will occur between students, faculty, preceptors, and various other clinical personnel both inside the college and at external institutions. Lab with preparation.

MPAS 5072, Patient Evaluation & Counseling III (2)

The Patient Evaluation series (I, II, III) prepares students to perform comprehensive examinations and procedures on patients. Students will learn the knowledge and skills essential for performing a comprehensive medical history and physical examination. The course emphasizes patient interviewing, performing a comprehensive physical and psychological examination, accurately documenting and presenting findings, developing a differential diagnosis, listing possible tests and treatment plans, and providing patient education along with appropriate follow-up. Lectures, reading assignments, hands-on labs, and supplemental assignments emphasize core concepts. Patient interaction and communication are essential skills that will be developed during the course. Over the entire semester, close interaction will occur between students, faculty, preceptors, and various other clinical personnel both inside the college and at external institutions. Lab with preparation.

MPAS 5080, Clinical Laboratory & Diagnostic Medicine I (2)

The Clinical Laboratory & Diagnostic Medicine (I, II, III) series provides a basic understanding of laboratory testing involved in the evaluation of common disease processes. Emphasis is placed on the pathophysiology, application, and interpretation of laboratory testing for diagnostic and therapeutic purposes. Lectures correlate with the Clinical Medicine series courses and other courses within the Physician Assistant curriculum. Lecture.

MPAS 5081, Clinical Laboratory & Diagnostic Medicine II (2)

The Clinical Laboratory & Diagnostic Medicine (I, II, III) series provides a basic understanding of laboratory testing involved in the evaluation of common disease processes. Emphasis is placed on the pathophysiology, application, and interpretation of laboratory testing for diagnostic and therapeutic purposes. Lectures correlate with the Clinical Medicine series courses and other courses within the Physician Assistant curriculum. Lecture.

MPAS 5082, Clinical Laboratory & Diagnostic Medicine III (2)

The Clinical Laboratory & Diagnostic Medicine (I, II, III) series provides a basic understanding of laboratory testing involved in the evaluation of common disease processes. Emphasis is placed on the pathophysiology, application, and interpretation of laboratory testing for diagnostic and therapeutic purposes. Lectures correlate with the Clinical Medicine series courses and other courses within the Physician Assistant curriculum. Lecture.

MPAS 5100, Didactic Summative (1)

Didactic Summative Evaluation provides a summative review of the didactic year. It will focus on evaluating history taking and physical examination performance skills, as well as interpersonal communication and clinical reasoning ability, professionalism, the ability to summarize and document clinical encounter findings, and demonstration of psychomotor clinical and cognitive critical thinking skills.

Second Year (Clinical Residency Phase)

MPAS 6000, Clinical Residency – Family Medicine (5)

This clinical experience is designed to familiarize the student with all aspects Family Medicine in ambulatory, inpatient and long-term care settings. The student, will perform the collection of historical, physical and laboratory data, and develop an understanding of patient evaluation and treatment under the supervision of physicians or mid-level practitioners. The student is expected to have an emphasis on the wide range of care provided in Family Medicine.

MPAS 6010, Clinical Residency – Internal Medicine (5)

This clinical experience is designed to familiarize the student with all aspects of Internal Medicine in ambulatory, inpatient and long-term/geriatric care settings. The student, will perform the collection of historical, physical and laboratory data, and develop an understanding of patient evaluation and treatment under the supervision of physicians or midlevel practitioners.

MPAS 6020, Clinical Residency – Psychiatry & Behavioral Medicine (5)

This clinical experience is designed to familiarize the student with all aspects Psychiatry/Behavioral Medicine in ambulatory, inpatient, and long-term care settings. The student, will perform the collection of historical, physical, and laboratory data, and develop an understanding of patient evaluation and treatment under the supervision of physicians or mid-level practitioners

MPAS 6030, Clinical Residency – Women’s Health (5)

This clinical experience is designed to familiarize the student with all aspects of Woman’s Health in ambulatory, inpatient, and long-term care settings. The student, through the collection and acquisition of historical, physical, and laboratory data, develops an understanding of patient evaluation and treatment under the supervision of physicians or mid-level practitioners. This clinical rotation will emphasize routine gynecologic care and common complaints, as well as prenatal care of the female patient.

MPAS 6040, Clinical Residency – Pediatric Medicine (5)

Completion of all PA didactic courses this clinical experience is designed to familiarize the student with all aspects Pediatric Medicine in ambulatory, inpatient and long-term care settings. The student, will perform the collection of historical, physical and laboratory data, and develop an understanding of patient evaluation and treatment under the supervision of physicians or mid-level practitioners. In addition, the student is expected to have an emphasis on infant through adolescent care, covering the wide spectrum of skills required for pediatric and adolescent patients.

MPAS 6050, Clinical Residency – General Surgery (5)

This clinical experience is designed to allow the student exposure to a wide variety of surgical problems. Under supervision, the student is expected to participate in preoperative, operative, and postoperative patient care. This experience will include taking histories, performing pre-surgical physical examinations, and assisting in the operating room.

MPAS 6060, Clinical Residency – Emergency Medicine (5)

This clinical experience is designed to stress the evaluation and management of both medical problems of the patient in an acute care situation. Students gain experience in the initial evaluation of patients in the emergency setting, perform problem specific examinations, practice minor surgery skills, and participate in the management of emergency care cases.

MPAS 6070, Clinical Residency – Elective (5)

This clinical experience is designed to acquaint the student with the role of the physician assistant in practice. Students train under the supervision of a physician or midlevel provider in an office/or hospital setting. Through this clinical rotation the student will gain an in-depth exposure to a wide-spectrum of acute and chronic patient problems. This experience can occur in a clinical area that has already been experienced by the student or a specialty area of the student's choosing (with prior faculty approval).

MPAS 6100, Clinical Summative (1)

The Clinical Summative Evaluation course is intended as a summative evaluation of student's ability to acquire and understand assessment and management of patients, use problem solving skill sets for multi-system case-based problems and demonstrate specific psychomotor and clinical competencies. In addition this course will assess the student's ability to meet defined program objectives for the knowledge, skills, and attitudes suitable for clinical practice.

Appendix C: PA Professional Oath Form

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

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

These duties are pledged with sincerity and upon my honor. ¹²

Dated: _____

Signature: _____

Print Name: _____

¹² The Student Academy of the American Academy of Physician Assistants (SAAAPA) developed the oath, which was adopted by their Assembly of Representatives.

Appendix D: Receipt of Student Handbook Form (A3.02)

I acknowledge that my signature confirms that I have received a copy of the current physician assistant student handbook titled, PC PA Student Bulletin.” I understand that I am responsible for all the information contained in this handbook and I will be expected to conform to these guidelines and policies during my entire education. Failure to comply may result in suspension or termination from the Presbyterian College Physician Assistant Program. I understand that some policies are subsequent to change and I am subject to the policies of the most current handbooks for Presbyterian College.

Dated: _____

Signature: _____

Print Name: _____

Appendix E: Release of Health Information Form

I, _____, hereby grant the Presbyterian College Physician Assistant Program the ability to provide the health care training facility (preceptor and administrative personnel) the required health and immunization status from my medical record as stated within the rules, regulations, and contractual affiliation agreement of the facility and Presbyterian College. My signature below acknowledges my understanding and agreement to provide the above stated information.

Dated: _____

Signature: _____

Print Name: _____

Appendix F: Disclosure Form

The Presbyterian College Physician Assistant Program meets the standards set forth by the Accreditation Review Commission on Education of the Physician Assistants (ARC-PA) and the Ohio Board of Regents.

As a student of the College, I understand and agree that I will engage in timely surveys on my development as a physician assistant.

I understand and agree to allow Presbyterian College to use all of my evaluation criterion information for the use of continued evaluation of the program. This material includes, but is not limited to, admission criteria, didactic and clinical phase performance measures, Physician Assistant National Certification Exam (PANCE) and any other summative instrument.

I hereby grant permission to the College to photograph and/or videotape me. In addition, the college may also photograph, video, and/or audio record me during examinations and these recordings may be used as evidence for any cases of expected violation of any College or Program policies (i.e. Honor Code violations).

I hereby grant permission to the College to submit my immunization records and drug screen results to clinical sites as appropriate.

I also authorize the College to use and/or permit others to use the aforementioned images/videos for educational, academic integrity, informational, and promotional purposes without compensation.

Dated: _____

Signature: _____

Print Name: _____

Appendix G: Participation of Students as Human Subjects Form

Functional anatomy and physical diagnosis are best learned through the study of living subjects. Firm foundations laid early in physical diagnosis will prevent uncomfortable floundering and error in clinical areas involving real patients. For this reason, we require the participation of our students as living subjects, as well as examiners (in an interchangeable fashion), during selected courses during the Didactic and Clinical Phases.

The experience of working with such real live patients is the only way to achieve a genuine learning experience in advance of actual, less structured clinical situations. We expect all students in this program to participate willingly in all aspects of physical exam practicum in a professional, cooperative manner aimed at the best possible learning experience for each of you.

Generally, students learn these examination techniques and skills in teams of two or three with the guidance of an experienced instructor. Students are required to come to these laboratory sessions prepared to partially disrobe. Students also agree to practice comprehensive examinations on both genders to successfully complete the program. Failure to practice skills on both genders may result in dismissal from the program.

Thus, when working on the lower extremities, both male and female students should come prepared by wearing athletic shorts. With the upper limb, thorax and abdomen, male students should simply shed their shirts; women should wear a sports bra, halter, or other appropriate tops beneath easily shed shirts. Students should maintain this clothing in their lockers.

It should be understood that this participation does not include the genitalia and breast examinations. The students learn to examine and evaluate these anatomical areas using simulators and with professional patients.

It should also be understood that we expect all students to participate in these learning activities by dressing as outlined above and by submitting to inspection and palpation by their classmates.

By signing below, you are hereby signifying that you understand this policy and agree to abide by it.

Dated: _____

Signature: _____

Print Name: _____

Appendix H: Statement of Confidentiality Form

I, _____, hereby acknowledge my responsibility under federal applicable law and the affiliation agreement between the clinical training facility and Presbyterian College to keep confidential any information regarding facility patients, as well as all confidential information of the facility. I also agree, under penalty of law, not to reveal to any person or persons except authorized clinical staff and associated personnel any information regarding any patient, and further agree not to reveal to any third party any confidential information of the facility.

Dated: _____

Signature: _____

Print Name: _____

Appendix I: Technical Standards Attestation Form (Student Edition)

Technical standards establish the skills necessary for satisfactory completion of physician assistant training. A candidate for the Master of Physician Assistant Studies (MPAS) must meet these standards without exception. In the event an applicant is unable to fulfill these technical standards prior to or any time after admission, with or without reasonable accommodation, the student will not be allowed to enter or progress within the program.

Candidates for the PA program must possess ability, aptitude and skills as outlined below:

1. Observation: The candidate must be able to:
 - Observe demonstrations and experiments in the basic sciences, visual presentations in lectures and laboratories, laboratory evidence and microbiologic cultures, microscopic studies of microorganisms, and tissues in normal and pathologic states.
 - Observe a patient accurately at a distance and close at hand.
 - Use the sense of vision, somatic sensation, and smell as part of the observation process.
2. Motor: Candidates must have sufficient motor skills and coordination to:
 - Execute the movement required to provide patient care such as palpitation, auscultation, percussion, and other diagnostic maneuvers
 - Execute movements required to provide general care and emergency treatment to patients. These skills require coordination of gross and fine muscular movement, equilibrium, and sensation.
 - Manipulate equipment and instruments necessary to perform basic laboratory tests and procedures required to attain curricular goals (e.g. needles, stethoscope, ophthalmoscope, tongue blades, intravenous equipment, gynecologic speculum, and scalpel)
3. Communication: A candidate should be able to:
 - Communicate effectively and efficiently in oral and written forms with all members of the healthcare team.
 - Be able to speak, hear, and observe patients in order to elicit information, perceive nonverbal communications, and describe changes in mood, activity, and posture.
 - Utilize speech, reading, writing, and computers as part of the communication process.
 - Communicate effectively and sensitively with patients and families.
4. Intellectual-Conceptual, Integrative and Quantitative Abilities: Candidates must be able to:
 - Comprehend three-dimensional relationships and the spatial relationship of structures.
 - Collect, organize, prioritize, analyze, and assimilate large amounts of technically detailed and complex information within a limited time frame. This information will be presented in a variety of educational settings, including lectures, small group discussions, and individual clinical settings
5. Behavioral and Social Attributes: Candidates must have:
 - Emotional health, maturity, sensitivity, intellectual ability, and good judgment needed to complete all responsibilities associated with the diagnosis and care of patients
 - The ability to tolerate physical, mental, and emotional stress associated with training and the profession.
 - Qualities of adaptability, flexibility and be able to function in the face of uncertainty.
 - Sufficient interpersonal skills to interact positively with people of all ages, races, genders, socioeconomic and culturally diverse backgrounds.
6. Physical Demands: The candidate must have:
 - The physical ability to learn and implement the various technical skills required by the program.
 - An adequate range of body motion and mobility, with or without accommodation, to perform the following essential functions: prolonged periods of sitting, occasional bending and stooping, and the ability to lift and carry books and other items such as medical instruments weighing up to ten (10) pounds, with or without accommodation.
7. Ability to Practice Medicine: The candidate must demonstrate:
 - The cognitive capacity to make appropriate clinical diagnoses and exercise reasonable medical judgments and to learn and keep abreast of medical developments;
 - The ability to communicate those judgments and medical information to patients and other healthcare providers, with or without the use of aids or devices, such as a voice amplifier.
 - The physical capability to perform medical tasks such as physical examination and surgical procedures, with or without the use of aids or devices, such as corrective lenses or hearing aids.

I hereby signify that, to the best of my knowledge, I am able to meet the technical standards as outlined in this document. If I am unable to fulfill these technical standards at any time before or after admission, with or without reasonable accommodation, I understand that I will not be allowed to progress in the program.

Dated: _____

Signature: _____

Print Name: _____

Appendix J: Professional Performance Evaluation (PPE)¹³

Physician Assistant Student Department of Physician Assistant Studies Presbyterian College

The Department of Physician Assistant Studies *Professional Performance Evaluation Form (PPE)* was developed to assess the professional behavior and attitudes of physician assistant students through a formal, written feedback process that compliments regular feedback provided by faculty advisors to their student advisees. The completion of these forms is an integral part of summative evaluation---an ARC-PA required component of student evaluation.

Procedure:

1. Form must be completed by the faculty advisor, but may be utilized to indicate student performance problems during both the didactic or clinical phases.
2. Faculty advisors are to meet with each advisee student and complete the PPE using the following schedule along with a normally scheduled Advising Session:
 - Didactic phase
 - December
 - July
 - Clinical phase
 - December
 - July
3. It is important that substantive commentary be included in the comments section, especially if there are/were professional performance problems.
4. Faculty advisors must be prepared to offer specific examples that justify all ratings, especially needs "improvement" or "unsatisfactory" performance ratings.
5. Obtain the necessary signatures (with professional credentials after them) and specify the date of completion.
6. Each faculty member is responsible for notifying the Program Director and Academic Director immediately if a student receives an "Unsatisfactory" score in any area.
7. The completed documents will be given to the Academic Director and stored in the student's files
8. Under no circumstance is the form to be filed without having been reviewed and signed by both the advisor and advisee).
9. **For the final assessment, just prior to graduation - each parameter must be evaluated as "Outstanding" or "Satisfactory" or "Needs Improvement" in order for a student to graduate the program.**

Ordinarily, the advisor meets with each advisee to complete a professional performance form on the schedule outlined above. If, however, a student is having professional performance problems, it may be necessary to complete the form on more than an annual basis. If necessary the Program Director can meet with faculty and any advisee about whom a faculty member is concerned.

¹³ Adapted from a form developed by the Department of Physician Assistant Education, Stony Brook University

**Professional Performance Evaluation (PPE)
Physician Assistant Student
Department of Physician Assistant Studies
Presbyterian College**

Student: _____ Evaluation Date: _____ Advisor/Evaluator: _____

1 = Outstanding	2 = Satisfactory	3 = Needs Improvement	4 = Unsatisfactory
------------------------	-------------------------	------------------------------	---------------------------

Check Rating:

1	2	3	4	
				Reliability and Responsibility
				Strives for the highest standards of competence in skills and knowledge
				Takes personal responsibility for own learning
				Fulfills course/clerkship responsibilities in a reliable manner
				Fulfills administrative responsibilities in a reliable manner, e.g., submitting course evaluation and E-Value logging
				Assumes personal responsibility for choices
				Is on time for learning activities
				Submits assignments on time and in professional format
				Maintains confidentiality standards and is HIPAA compliant
				Ethical, e.g., identifies/reports unprofessional behavior, truthful
				Committed to ethical principles of the PA profession
				Adheres to institutional policies and procedures
				Adheres to negotiated decisions
				Uses professional language and is mindful of the environment
				Self-Improvement and Adaptability
				Able to accept and offer constructive criticism
				Incorporates feedback to make positive behavioral change
				Recognizes limitations of own knowledge and seeks help when necessary
				Asks questions in a constructive manner
				Demonstrates respect, empathy and compassion for patients and colleagues
				Adapts well to change
				Maintains professional appearance and hygiene
				Maintains composure during adverse interactions or situations
				Committed to ongoing professional development
				Relationships with Students, Faculty, Staff and Patients
				Able to effectively relate to patients, peers, and colleagues
				Honors the choices and rights of others
				Respects faculty and their teaching endeavors
				Understands and respects cultural differences
				Uses appropriate verbal and non-verbal communication
				Resolves conflicts in a manner that respects the dignity of every person involved

				Listens attentively
				Responds to the needs of others without regard to self-interest
				Exhibits the attributes of a team player
				Contributes to creating an atmosphere conducive to learning and the practice of medicine

Comments and suggestions/correction plan offered by advisor and/or student:

Advisor/Evaluator Signature: _____ **Date:** _____
Student Signature*: _____ **Date:** _____

*Signature indicates that the professional performance evaluation has been reviewed with the student.

Appendix K: Remediation Form

Presbyterian College Physician Assistant– Formal Individualized Remediation Plan

Student Name: _____ Start Date: _____ End Date: _____

Item	Description	Notes / Plan
Characterization of the lapse or performance improvement needs (check all that apply)	<input type="checkbox"/> Pre-existing academic issue (i.e. learning disability) <input type="checkbox"/> Specific testing issue (i.e. severe test anxiety) <input type="checkbox"/> Insufficient working knowledge base <input type="checkbox"/> Insufficient communication skills <input type="checkbox"/> Insufficient physical examination skills <input type="checkbox"/> Insufficient clinical reasoning <input type="checkbox"/> Poor organization / time management skills <input type="checkbox"/> Extenuating psychological or medical condition <input type="checkbox"/> Non-verbal learning issue (i.e. socially awkward) <input type="checkbox"/> Attitudinal / behavioral issues <input type="checkbox"/> Other (describe)	
Goal(s)	Describe in terms of specific competency(ies) that need to be developed based on the characterization of the lapse(s) described above.	
Requirements: Educate	Activity(ies) for learner	<input type="checkbox"/> Refer student to Student Counseling and/or external Counseling <input type="checkbox"/> Refer student to Private PA Tutor / Consultant <input type="checkbox"/> Professional Performance Evaluation Form (attached to this plan) : <input type="checkbox"/> Organizing Your Study Time Video1 http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> Organizing Your Study Time Video2 http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> Improving Your Listening Skills http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> Taking Better Lecture Notes http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> How to Predict Test Questions http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> Preparing for Tests http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> Test-Taking Skills http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> More Test Taking Skills http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> How to Remember for Tests http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> Memory Tricks http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> More Memory Tricks http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> Great Ways to Study http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> More Great Ways to Study http://www.lbcc.edu/LAR/studyskills.cfm <input type="checkbox"/> DynaMed Plus (or other) Assignment(s) of (specify): <input type="checkbox"/> Stanford Medicine 25 Clinical Skills Assessment Assignment(s) of: <input type="checkbox"/> 1x1 Faculty Coaching of: <input type="checkbox"/> 1x1 Physician or PA Coaching of (clinical rotation skills remediation):

		<input type="checkbox"/> Peer Coaching of: <input type="checkbox"/> Other:
Requirements: Behavior/Performance Change	<i>SMART objectives</i> 1. Specific 2. Measurable 3. Achievable 4. Realistic 5. Time	<i>Specific Objectives:</i> <i>Measurement / Metric:</i> Achievable (Y/N): <input type="checkbox"/> Yes <input type="checkbox"/> No Realistic (Y/N): <input type="checkbox"/> Yes <input type="checkbox"/> No Date for Completion of the Remediation:
Requirements: Monitoring	Who, frequency, expectations for follow-up meetings	
Consequences for incomplete success	<input type="checkbox"/> See PA Student Handbook – Remediation Policy	
Consequences for relapse	<input type="checkbox"/> Failure of module / exam <input type="checkbox"/> Failure of course <input type="checkbox"/> Removal from program	

Academic Advisor Signature/Date _____

Academic Director Signature/Date _____

Student Signature/Date _____

“I have read and understood the content and terms of this remediation plan. I understand what is expected of me and what I need to accomplish in order to successfully complete it.”

Date for Remediation Completion Assessment:

Remediation Completion Assessment (to be completed after remediation process outline above)

Student successfully completed the remediation Student ***DID NOT*** successfully complete the remediation

Academic Advisor/Date _____

Academic Director Signature/Date _____

Developed based on a lecture by Bar-on, Singh, Wahi-Gururaj, "One Size Does Not Fit All: Learner-Centered Remediation Plans." University of Nevada School of Medicine. <http://www.acgme.org/Portals/0/PDFs/2015%20AEC/Presentations/ses066.pd>. Also, based upon Kalet A, Chou C. Remediation In Medical Education. [Electronic Resource] : A Mid-Course Correction [e-book]. 2014. Available from: THOMCAT: James H. Thomason Library Catalog, Ipswich, MA. Accessed August 11, 2017.

Appendix L: Incident Reporting Form

Report any incident including injury, property damage, or other concern:

1. Immediately following the incident, call the Clinical Director
2. Follow up by immediately completing and faxing or emailing this form to paprogram@presby.edu

PLEASE PRINT CLEARLY

INFORMATION ON PERSON SUBMITTING THE REPORT		
Name:		
Address:		
Phone numbers:	Home:	Work:
	Cell:	E-Mail:
INFORMATION ON THE INCIDENT		
Nature of the activity:		
Place of the activity:		
Date of the incident:	Time of the incident:	
Exact location of the incident:		
Name of Leader in charge at the time:		
Description of incident:		
Witness Name:	Cell Phone:	Work Phone:
Witness Name:	Cell Phone:	Work Phone:
COMPLETE ONLY IF THIS INCIDENT WAS REPORTED TO THE POLICE		
Police Station Name, Number:		
Police Station Address:		
Name and Phone Number of Officer in Charge:		

INFORMATION ON INJURED PERSON		
Name:		Birth date:
Address:		
Phone Numbers:	Home:	Work:
<p>Please describe nature of injury or property damage (use a separate sheet if necessary) Be sure to include information on:</p> <ul style="list-style-type: none"> • Nature of the injury – punctures, scratch, bite, etc. • Extent of injury – depth, amount of blood or fluid potentially injected or on exposed surface • Name and medical record number/social security of patient whose blood or fluid you were exposed to and any pertinent information known about the patient; if the source is HIV+, the stage of disease, viral load, and antiretroviral resistance information, if known and if permitted to disclose. • Personal protective equipment worn at the time of the exposure • Decontamination/first aid provided at time of incident 		
Complete if applicable:	Name of doctor consulted:	Phone:
Complete if applicable:	Name and address of hospital or clinic:	Phone:
	Signature:	Date:

Appendix M: Student Advising Form

Presbyterian College Physician Assistant

Note: Use in conjunction with Appendix K: Remediation if there are remediation issues. Both are to be used together and stored in the student file.

Student Name: _____

Advisors Name: _____

Date: _____

Item	Description	Notes / Plan
Characterization of the nature of the meeting (check all that apply)	<input type="checkbox"/> Routine (once per semester) <input type="checkbox"/> Academic Performance <input type="checkbox"/> Behavioral / Professional Issue <input type="checkbox"/> Personal Issue <input type="checkbox"/> Career Counseling <input type="checkbox"/> Insufficient clinical reasoning <input type="checkbox"/> Other (describe)	
<u>Routine Advising Checklist:</u> Faculty Advisor to cover all items in this section with the student for routine advising appointments.	<input type="checkbox"/> Academic Record / Grades to date <input type="checkbox"/> Clinical Skills <input type="checkbox"/> Attendance / Punctuality <input type="checkbox"/> Interpersonal / Team Skills <input type="checkbox"/> Leadership <input type="checkbox"/> Dependability <input type="checkbox"/> Professionalism <input type="checkbox"/> Initiative <input type="checkbox"/> Ask student for feedback on curriculum <input type="checkbox"/> Ask student for feedback on facilities / equipment <input type="checkbox"/> Ask student if they have improvement suggestions <input type="checkbox"/> Ask student what they enjoy about the program	
Action Items from Meeting	<input type="checkbox"/> None <input type="checkbox"/> Initiate Remediation Plan (complete Appendix: Remediation Form) <input type="checkbox"/> Other (specify to the right)	

Academic Advisor Signature/Date _____

Academic Director Signature/Date _____

Student Signature/Date _____

"I have read and understood the content and terms of this advisement plan. I understand what is expected of me and what I need to accomplish in order to successfully complete it."

Index

A1.05	34	Deceleration/Leave of Absence Policy	56
A1.06	47	Disclosure.....	88
A2.05	6	Discrimination and Harassment	28
A3.01	7	Drug/Alcohol Policy	20
A3.02	86	E1.09	64
A3.04	26	Emergencies	32
A3.05	26	Forbidden Activities	19
A3.06	26	Gender Discrimination, Harassment, and Sexual Harassment	75
A3.07	14	Goals.....	6
A3.08	16	Grievances.....	57
A3.09	13	Guidelines for Ethical Conduct.....	71
A3.10	32	Health Insurance Policy	13
A3.11	28, 29	Healthcare Providers Policy	13
A3.14	13	Honor Code	45
A3.14a	6	Immunizations	14
A3.14h	26, 27	Incident Reporting Form	97
A3.15	64	Inclement Weather.....	27
A3.15a	8	Leave of Absence	30
A3.15d	7	Mission	6
A3.15e	9	Offers of Admission	9
A3.17	30	PA Professional Oath	85
A3.17a	47	Policies Disclaimer	7
A3.17b	64	Professional Liability Insurance.....	16
A3.17c	59	Professional Performance Evaluation.....	92
A3.17d	57	Professional Standards	38
A3.17f	54, 55, 56	Program Requirements	7
A3.17g	28, 75	Receipt of Clinical Handbook	86
A3.20	34	References	8
A3.21	34	Release of Health Information.....	87
Academic Criteria for Progression	59	Remediation Form	95, 99
Academic Standards	47	Remediation Policy	54
Accommodations.....	24	Remediation Practices	55
Accreditation Statement.....	6	Reporting Concerns.....	27
Appeal of Final Letter Grade.....	57	Required Drug Screenings	21
Appendix 16	49, 79	Sexual Misconduct.....	29
Attendance and Absence Policy	61	Statement of Confidentiality	90
Attire.....	40	Student Advising	34
B2.04	47	Student Advising Form.....	99
B3.01	41	Student Organizations	64
C3.02	40, 71	Student Travel	33
C3.04	38	Students as Human Subjects.....	89
C4.01	51	Students Working for Program	26
Code of Professional Conduct.....	39	Technical Standards	9
College-Wide Services	36	Technical Standards Attestation	91
Confidentiality of Student Records.....	34	Technology Policy	15
Counseling and Wellness Policy	32	Tobacco Use	26
Course Descriptions.....	79	Transportation Policy.....	15
Criminal Background Check.....	19	Tuition, Fees, and Refund Policy.....	13
D1.05.....	79		

Tutoring 34
Vacation/Holiday 57
Values 6

Vision 6
Withdrawal 30
Working While In Program 27