

A.T. STILL UNIVERSITY  
ARIZONA SCHOOL OF HEALTH SCIENCES

ATSU

**DEPARTMENT OF PHYSICIAN ASSISTANT STUDIES**

**CLINICAL YEAR  
STUDENT HANDBOOK**

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# ***PROGRAM POLICIES AND STANDARDS FOR THE CLINICAL YEAR***

## **Introduction**

The Clinical Year Student Handbook of the Department of Physician Assistant Studies (DPAS) describes policies and procedures pertinent to success in the clinical year. The didactic component of education provides a broad base knowledge, which will be developed, challenged, and solidified through hands on clinical training during the clinical year. It is important to remember that while clinical year students are seldom on campus, they remain Arizona School of Health Sciences (ASHS) students who are expected to adhere to A. T. Still University (ATSU) and Program policies.

The Program reserves the right to alter, change, add, or delete the content in this handbook. Students will be notified in writing of any changes.

## **Purpose Statement**

*The purpose of the ASHS Department of Physician Assistant Studies is to educate competent and dedicated Physician Assistants to provide professional, knowledgeable and compassionate health care for a diverse patient population.*

The Department advocates and values the following:

- The ATSU “Body/Mind/Spirit” philosophy of healing
- The development of lifelong learning practices to maintain competencies
- Adherence to medical ethics
- Respect for the diversity of patients
- The values of compassion and empathy toward patients
- Professionalism in attitude and demeanor
- Respect for fellow medical professionals
- A commitment of service to community

The Department educates Physician Assistants with a philosophy that patients come first. We instill the concept of addressing the entire patient through the Body, Mind, and Spirit. This philosophy has at its core the tenant that healing is more than treatment of a medical diagnosis. We recognize the interconnection of the **Body** (physical nature), the **Mind** (psychological and emotional) and the **Spirit** (spiritual and or religious). Our graduates address the “whole patient” through competent medical treatments, application of educational and preventive strategies, psychological support and value of the individual’s spiritual beliefs.

## **Requirements for Completion of the Clinical Component**

1. Follow all rules and regulations published by ATSU and the DPAS
2. Complete eight (8) six week clinical rotations
3. Successfully complete examinations and assignments
4. Submit documentation of compliance with the ATSU *Health and Immunization* policy and other site specific requirements as needed
5. Maintain BLS and ACLS certification throughout clinical rotations
6. Comply with the Professionalism section of this handbook
7. Attend Rotation Assessment Days (RAD)
8. Submit an acceptable Capstone Paper

## ***CLINICAL ROTATION DESCRIPTIONS***

### **Clinical Courses**

#### **PA651 – Emergency Medicine:**

During this clinical experience, students have the opportunity to examine and treat individuals with a variety of urgent and emergent conditions. The student will become proficient in taking an accurate history, performing a rapid and accurate focused physical exam, ordering appropriate diagnostic tests, and developing a treatment plan with subsequent oral case presentation. Clinical procedures performed during the rotation may include wound care, nasogastric tube insertion, endotracheal intubation, and ACLS activities.

#### **PA652 – Family Medicine I:**

During this clinical experience, students gain proficiency and experience in patient/provider interaction and working as a member of an organized primary care team. The student will collect histories, perform physical exams, and order appropriate laboratory and diagnostic tests. The student will use this information to formulate a diagnosis and develop patient education information. Patient care will involve both acute and chronic conditions, and will allow the student to integrate information obtained during the didactic training component.

#### **PA653 – Pediatrics:**

This clinical experience will expose students to child and adolescent development, growth within the family unit, and peer interaction. History taking and physical exam skills in the pediatric age group will be developed and refined. The student will perform well-child examinations, diagnose and treat ill children and adolescents with a variety of acute and chronic illnesses, and determine appropriate use and administration of immunizations. The student will interact with parents providing guidance and education as the child progresses through developmental milestones.

**PA654 – Internal Medicine:**

This experience allows the student to refine the skills of history taking, physical exam and identification of examination findings. Students gain proficiency in ordering and interpreting laboratory and diagnostic tests and developing diagnosis and treatment plans. The student will be able to recognize emergent, acute, and chronic diagnoses and participate in care of the adult patient in outpatient and inpatient settings.

**PA655 – Surgery:**

During this clinical experience students function as a member of a health care team providing pre, peri, and post-operative care. The student will evaluate individuals with acute illness, potential surgical conditions, identify surgical indications, contraindications and complications, and assist with surgical procedures.

**PA656 – Women’s Health:**

This clinical rotation exposes students to the care of patients with gynecologic and obstetrical conditions. The student will gain proficiency in assessment of the female patient, with emphasis on preventive care, screening, and the responsibilities involved with the primary care of women. The student may have the opportunity to observe or participate in child birth and pre and post-natal care.

**PA657—Program Elective**

This clinical rotation is determined by the Program. It may be used to provide students with additional experience in a specific area of clinical medicine. Or, it may be used as an opportunity to enhance student learning by providing exposure to a new specialty or setting not otherwise found in the curriculum.

**PA658 – Student Elective:**

The elective rotation is designed to give students the opportunity to enhance an area of interest. The elective rotation is generally scheduled later in the clinical year sequence and requires Program approval.

**PA659 – Capstone Paper:**

This course is designed to enable PA students to research and prepare a scholarly paper on a topic of relevance to clinical medicine. The assignment, introduced in the didactic curriculum phase of training, is culminated with the development of a paper of publishable quality submitted to the DPAS. The paper establishes that the student is capable of critical analysis sufficient to interpret medical research and publications. The project is submitted during the clinical year. An assigned faculty member participates in the project as an advisor.

### **Rotation Assessment Days (RAD)**

After clinical rotations, students return to campus for assessment activities. These activities may include, but may not be limited to, End of Rotation Exams (EORs), Objective Structured Clinical Encounters (OSCEs), Case Presentations, lectures on topics relevant to PA practice, and administrative issues. Attendance is mandatory and requests to be excused will only be granted under extreme circumstances by the Program Chair.

### **Comprehensive Examination**

Students are required to complete the online ePACKRAT examination near the end of their clinical year. This is a statistically referenced examination and should be used by students for self-assessment purposes.

## ***ACADEMIC POLICIES***

### **Academic Progression**

Progression in the Program is contingent on continued mastery of program objectives, course content, and demonstration of behaviors consistent with a healthcare professional as outlined in the *Professionalism* section of this handbook. Students who fail one or two program course(s) will be placed on academic probation and must repeat the course(s) on a schedule determined by the Program. Course repetition may cause a delay in graduation. Students who fail two courses must go before the Academic Progress Board for review. Students who fail three program courses will be recommended for dismissal. Students dismissed from the Program may wish to consult the *ASHS Catalogue* to review the appeal process.

During clinical rotations, students receiving an evaluation that does not meet Program expectations for level of training, clinical performance, or professionalism will be reviewed by the Program faculty. Termination of a rotation by a preceptor or faculty as a result of poor or inadequate student performance shall result in an automatic failure for that rotation.

### **Academic Standing**

A student who is in good standing in the DPAS will have met the following criteria:

1. Maintain an overall grade point average (GPA) of 2.0 or higher and achieve a "C"/Passing or better letter grade in all didactic and clinical courses required by the DPAS.
2. Meet the defined DPAS *Professionalism Expectations* and be in compliance with all DPAS and University policies and procedures.

### **Academic Probation**

Students who fail to maintain a minimum cumulative GPA of 2.0 or who fail an ASHS PA Program course or do not meet *Professionalism Expectations* will be placed on Academic Probation. In written notification, the Program Chair will specify the reason(s) for academic probation, the requirements for restoration of good standing (if applicable), and the deadline for completing requirements. A pro-rated tuition fee will be charged for repeat courses.

### **Academic Progress Board**

This board is composed of DPAS faculty with a minimum of four members to constitute a quorum. The Academic Progress Board will be convened by the Program Chair to consider PA students who do not meet standards for progression (beyond failure of one course). The student is invited to submit a written statement to the board. The board may require the student to attend the meeting via conference call or in person to clarify issues or answer questions. After consideration of the individual case, the Program Chair will notify the student of the board's decision via written communication.

### **Academic Dishonesty**

The *Code of Academic Conduct* is outlined in detail in the *ASHS Catalog*. Students should read the code and make sure they understand all content. Additionally, the *ASHS Catalog* outlines the procedure for reporting and investigating violations of the code to the Peer Review Council (PRC) of the Student Government Association (SGA).

## ***PROFESSIONALISM***

An important aspect of any professional educational curriculum is the development of professional behaviors and role identity. Evidence shows that unprofessional behavior exhibited during training is a predictor of future problems with state regulatory boards and the need for disciplinary actions (Papadakis, Hodgson, Teherani and Kohatsu, 2004). Unprofessional behavior presents a potential danger to the provision of good patient care and reflects on the credibility of the profession. Professionalism therefore shares equal importance to content knowledge and manual skills at ATSU.

Recognizing the responsibility for professional behavior, the DPAS sets expectations for and evaluates students on their professional conduct. Students must demonstrate acquisition of these important behaviors.

The National Board of Medical Examiners has identified behaviors consistent with professionalism. These behaviors are listed below. As a mechanism to assist students in the acquisition of these professional skills, a monitoring system has been established to identify unprofessional behaviors and to provide mentoring and guidance. Students identified as exhibiting unprofessional behavior will be provided with remediation opportunities. Students who reflect a pattern of unprofessional behavior (deficiencies identified in two or more courses or clinical experiences) will be placed on academic probation and will receive documentation of and counseling for deficiencies. Severe infractions of professional behavior may be grounds for academic dismissal.

## **Professionalism Expectations**

### **Altruism**

1. Helps colleagues and team members
2. Takes on extra work to help the team
3. Serves as a knowledge or skill resource to others
4. Advocates for policies, practices and procedures that benefit patients
5. Endures inconvenience to meet patient needs

### **Honor and Integrity**

1. Admits errors and takes steps to prevent reoccurrence
2. Deals with confidential information appropriately
3. Does not misuse resources (i.e. school or clinical site property)
4. Attributes ideas and contributions appropriately for other's work
5. Upholds ethical standards in research and scholarly activity
6. Requests help when needed

### **Caring and Compassion**

1. Treats patients as individuals, and considers lifestyle, beliefs and support systems
2. Shows compassion to patients and families
3. Maintains appropriate boundaries in professional relationships
4. Responds to patient needs in an appropriate way
5. Optimizes patient comfort and privacy when conducting examinations

### **Respect**

1. Respects institutional colleagues, faculty, and staff
2. Demonstrates respect for patients
3. Participates constructively as a team member
4. Adheres to institutional and departmental policies and procedures
5. Adheres to dress code

### **Responsibility and Accountability**

1. Presents self in an appropriate manner
2. Completes assignments and tasks in a timely manner
3. Responds promptly when notified
4. Intervenes when unprofessional behavior presents a clear and present danger
5. Responds appropriately to an impaired colleague

6. Responds professionally to other's lapses in conduct and or performance
7. Elicits patient's understanding to enhance communication of information
8. Facilitates conflict resolution
9. Remains flexible to changing circumstances and unanticipated changes
10. Balances personal needs and patient responsibilities
11. Provides constructive feedback

### **Excellence**

1. Has internal focus and direction
2. Sets goals to achieve excellence
3. Takes initiative in organizing and participating with peer groups and faculty
4. Maintains composure under difficult situations

Adapted from Behaviors Reflecting Professionalism National Board of Medical Examiners.

## ***ROTATION PROCEDURES***

### **Scheduling**

- The DPAS Clinical Coordinator/team will schedule students for each rotation.
- Students may suggest potential rotation sites. (Please Note: Establishing a new clinical rotation site is a time and labor intensive activity.)
- The required and approved paperwork must be in place prior to a student beginning a clinical rotation.
- Due to unforeseen circumstances, there may be changes in rotation assignments.
- Students should plan personal matters and finances to ensure their availability to concentrate on their education.
- Students may be scheduled to work evening and night hours, weekends and holidays.
- Students should plan for clinical rotation assignments that may involve travel outside the Phoenix area. Some rotation sites provide housing to the student. Housing is limited and may not always be available. The program may provide a financial stipend toward the cost of housing in certain circumstances.

### **Clinical Sites**

- The Program maintains Affiliation Agreements with preceptors and clinical sites.
- The Program is committed to developing new relationships with preceptors and clinical institutions. Students who identify new/potential clinical preceptors should provide the Program with the individual's and facility name, business address, and contact phone number(s).
- Students may not contact clinical sites independently to seek potential clinical rotations.

- Students who have impromptu contact with established clinical preceptors/sites should only do so as a representative member of the student body and Program, not as an individual student.

### **Affiliation Agreements**

- Affiliation Agreements must be established between all clinical sites/preceptors and the University before students can enter the clinical site as a student.
- Affiliation Agreements are legal documents that address liability, malpractice and issues pertinent to the site location and practice type.

### **Program Responsibilities**

- The Program will provide specific rotation learning objectives to preceptors and students.
- The University is committed to serving the medically underserved population. The Program strives to place all students in a clinical rotation that will expose the student to the needs of the underserved.
- The Clinical Coordinator is responsible for assigning a student rotation grade. Information from evaluations, activity logs, testing, OSCE performance, case presentations, projects, and professionalism are the basis for the course grade.

### **Liability Insurance Coverage**

ATSU maintains a malpractice insurance policy for students in the clinical setting. Students will receive a copy of the certificate to provide to preceptors.

### **Rotation Site Visits**

Students will be visited during their clinical training. Evaluations of the student may be scheduled as necessary by the program, clinical site, or student. Faculty visits are an important component for the student and preceptor. The purpose of a visit is to evaluate student progress. A *Clinical Student Evaluation* form will be completed, reviewed and signed by the student. This evaluation will become a part of the student's permanent file.

### **Student Evaluation**

There are many characteristics that are desirable in a PA. These include comprehensive medical *knowledge*, *skill* in applying knowledge through the provision of medical care, and *professionalism* in conduct. A PA must possess attention to detail, reliability, punctuality, and the ability to work as a team player.

In the clinical component of study, PA students are expected to demonstrate these traits, and at progressively higher levels, as they move toward completion of clinical training. *Knowledge* is assessed through oral, written and practical testing. *Skill* is assessed via student evaluation by clinical preceptors and DPAS faculty. *Professionalism* is assessed

through cooperation with the program faculty and staff, attendance at mandatory functions, participation in conferences and group exercises, and adherence to the guidelines of this handbook.

### **End of Rotation Exams**

Students will complete end-of-rotation exams. Students who fail testing will be required to provide satisfactory remedial assignments or work to the Clinical Coordinator that demonstrates the knowledge and skills to meet the rotation objectives.

### **Objective Structured Clinical Encounters (OSCEs)**

These proctored graded simulations, during RAD, focus on aspects of patient encounters and may include: history taking, physical exam skills, critical thinking, development of differential diagnosis/management plan, patient education, and oral communication skill.

### **Case Presentations**

Students are required to present oral cases during RAD. These case presentations should be limited to five to ten (5-10) minutes with additional minutes reserved for medical disease/condition discussion and questions from classmates and faculty. The presentation will be graded by an assigned faculty member utilizing an evaluation form.

### **Paper/Essay Writing Assignments**

Clinical students may be assigned to write papers during clinical training. These short papers, assigned by the Clinical Coordinator, will cover primary care topics pertinent to PA practice. These assignments may be factored into a rotation grade.

### **Assignments**

Students are advised to keep a copy of all assignments/paperwork. If an assignment is not posted or is misplaced, a grade of zero will be given if the student does not have a backup copy. Acceptance of late submissions of assignments/paperwork is at the discretion of the Clinical Coordinator.

### **Grading Policy**

The Clinical Coordinator is responsible for submitting clinical course/rotation grades for each Physician Assistant student to the ATSU Registrar. The grade for each student will reflect evaluation of the following criteria:

- Attendance at RAD
- Preceptor student evaluations
- Student rotation evaluation
- Satisfactory assignments
- Case Presentations

- OSCE performance
- Test grade
- Completion of required paperwork
- Completion of required electronic patient logging

### **Preceptor Evaluations of Student Performance**

- It is the student's responsibility to ensure that Preceptor Evaluation forms (mid and final) are submitted to the Program.
- The preceptor's evaluation should be based on the student's medical knowledge and skill in performance of history-taking, physical examination, formulation of a differential diagnosis and tentative diagnosis, patient education, and proficiency in medical procedures as designated and permitted by preceptors.
- The preceptor should have an exit interview with the student. It is expected that this process will allow direct feedback between the student and preceptor.
- Failure to submit complete evaluation forms will result in an incomplete grade.
- Preceptor evaluation forms become a part of the student's record and are factored into the grade received for a particular rotation.

## ***STUDENT RESPONSIBILITIES***

### **Communication**

Communication between ASHS faculty and PA students is accomplished through a variety of modes that include personal visits, phone calls, voice mail, and ATSU electronic mail. The ATSU electronic mail address is the official means of communication at the University. Communication between students and all ATSU personnel should be via ATSU assigned e-mail accounts. Students are required to check e-mail on a daily basis.

### **Conflict Resolution**

Problems during rotations can occur, be they academic, professional, or personal in nature. Students should use the following guidelines in dealing with problems:

- Attempt to resolve problems with the appropriate individual directly.
- If this is not possible, discuss it with the clinical preceptor.
- If unable to resolve the problem, contact the Clinical Coordinator.

### **Responsibilities to Site**

- It is the student's responsibility to contact the preceptor or his/her designated contact person two weeks prior to the start of a new rotation.
- The Program clinical faculty or staff must be notified of all absences for any reason.

- If you must be absent from a rotation for any unplanned reason, notify the rotation site as early as possible EACH MORNING that you will be absent.
- Students are not permitted to request time off from rotations without prior approval from the Program.
- Student clinical training is expected to encompass at least 40 hours per week, plus any on-call nights/weekends as scheduled by the preceptor.
- Students are expected to make up any time missed while on rotation. This may be determined by the preceptor and/or the Program.
- Students who miss three days or more from an individual rotation, for any reason, risk having to repeat a portion or all of that rotation. This may result in delay of graduation.
- Students who miss three days or more from an individual rotation for illness may be required to submit a statement from their health care provider on official letterhead.
- Students will be excused from rotation requirements during the University scheduled holiday break.
- Breaks may include Memorial Day, July 4<sup>th</sup>, Labor Day, Thanksgiving, Good Friday and Easter. During these times students may take the same time off as their preceptor or clinical site.
- Objectives for each rotation will be provided to the student and preceptor as an outline of expected rotation experiences. Clinical experiences may vary depending on patient population and site variation. It is the student's responsibility to review the objectives and augment clinical experiences with independent study, research and discussion with the preceptor and clinical faculty.
- Students are required to keep a Program specified clinical log of each patient encounter and the number of clinical training hours.
- Students must abide by HIPAA guidelines.
- Students are responsible for following OSHA guidelines of universal precautions.
- Students are to request information and orientation on issues specific to safety at each assigned site.

### **Student Evaluation of Rotation**

Students shall submit an Evaluation of Clinical Site form after each rotation. The completed form is submitted to the Program on RAD, or faxed to the Clinical Coordinator. Failure to submit Evaluation of Clinical Site forms may result in an incomplete rotation grade.

### **Incident Reporting**

Should a student sustain an injury or exposure at a clinical site, the student should report the incident immediately to the preceptor, complete the site incident form (if available), and receive appropriate medical care. The student is then required to contact the Clinical Coordinator. Students are responsible for initiating care and recommended follow up after injury or exposure to possible infectious pathogens. Injuries which occur at clinical sites and ASHS are not covered by workers compensation insurance unless specifically identified as such in individual affiliation agreements. All costs for evaluation and

treatment are the responsibility of the student.

### **Employment**

Employment is not consistent with the learning environment in the clinical year. It is the student's responsibility to NOT allow employment to interfere with clinical rotation responsibilities. Students must not accept payment while on rotation for work at clinical sites. Rotation experiences are for educational purposes only.

### **Housing**

Housing on clinical rotations while in the greater Phoenix metro area (including Casa Grande) is the responsibility of the student. Students arranging elective rotations are expected to provide their housing. The program budget allots a limited stipend to offset housing expenses on program assigned rotations outside the Phoenix metro area. It should be noted that the stipend will not cover all housing expenses. While every attempt is made to arrange housing at low cost to the student on assigned away rotations, the program cannot guarantee that stipends will be available in all situations.

### **Dress Code**

Students should maintain a professional appearance and dress appropriately whenever they are representing ASHS and the PA profession in any setting. This includes the campus, clinical sites, meetings, and special events. Being neatly dressed and well groomed exemplifies professionalism. Students should adhere to the following dress code:

- CLOTHING:** Business casual attire. Clothing should allow for adequate movement during patient care, and should not be tight, short, low cut or expose the trunk or undergarments. Students are not to wear flip-flops, shorts, cut-offs, hats, jeans, clothing with rips/tears, sweat clothing, workout attire, short skirts/tops, halter type tops or T-shirts.
- JEWELRY:** Watches, wedding bands and/or single engagement rings are permissible.  
Earrings - no more than two earrings per ear, no dangling or oversized earrings.  
No excessive jewelry.  
No other visible body piercing permitted.
- NAILS:** Fingernails should be kept trimmed and when in surgical settings or rotations without polish or artificial nails
- TATTOOS:** Students may not exhibit tattoos.
- PERFUME / AFTER-SHAVE:** No excessive or heavy perfumes or after-shave/colognes.

- HAIR:** Hair should be clean and arranged so as not to interfere with providing patient care. Facial hair should be neatly trimmed.
- NAMETAGS:** Proper identification as a PA student is mandatory at all times. ATSU ID must be worn while in the classroom and on clinical sites. Some individual sites also require wearing separate security I.D. badges; these badges will be arranged during orientation at the beginning of the rotation.
- PROFESSIONAL ATTIRE:** A student type white coat should be worn in clinical settings. No open-toed shoes in patient care settings.
- EXCEPTIONS:** Established dress codes at clinical rotation sites supersede those of the Program (except required ATSU ID badges). All other exceptions will be considered on a case by case basis by the program Chair.

Clinical supervisors, preceptors, or DPAS faculty reserve the right to ask a student who is inappropriately dressed to leave the clinical site.

### **Health Requirements**

Students are required to maintain the following ATSU Health and Immunization Policy during their clinical training. Some clinical rotations may have additional requirements for testing including background and security checks and other vaccination and laboratory requirements. When applicable, these additional requirements are the responsibility of the assigned student.



Return form to: A.T. Still University of Health Sciences  
Student Services  
5850 E. Still Circle  
Mesa, AZ 85206

ASDOH return form by June 30 prior to matriculation.  
ASHS return form by August 16 prior to matriculation.

### HEALTH AND IMMUNIZATION POLICY

All students are required to submit evidence of immunization or immunity against communicable diseases, and health insurance coverage **prior to matriculation**. The following immunizations or proof of immunity are **required** to be completed prior to matriculation.

1. Diphtheria / Tetanus (DT) – completion of primary series of diphtheria/tetanus or latest booster within ten (10) years prior to the beginning of the academic year.
2. Polio – documentation of primary series of polio vaccine. If documentation cannot be produced, student must receive primary series of inactivated polio vaccine.
3. Measles / Mumps / Rubella (MMR) – students born after 1/1/1956 are required to provide documentation of MMR vaccine prior to matriculation. If vaccination was given prior to 1975, evidence of a re-vaccination is recommended.
4. Tuberculosis - tuberculosis skin test (PPD) or quantiferon blood test within the year prior to matriculation. For individuals who have had a positive PPD test, PPD testing is not advisable. The quantiferon test, a negative chest X-Ray, or a record of INH treatment may provide evidence of absence of TB disease. In individuals who have had BCG vaccination, PPD testing or the quantiferon test or chest X-Ray should be performed as noted above. TB status must be updated annually.
5. Hepatitis B (HEP B) – initiate or provide proof of immunity or complete a series of Hepatitis B vaccination prior to matriculation. Series must be completed according to the prescribed timeline.

#### CARDIOPULMONARY RESUSCITATION (CPR) FOR HEALTH CARE PROVIDERS:

Students must maintain current CPR certification through matriculation.

**HEALTH INSURANCE:** All students are required to have health insurance. Health insurance policies must be approved for acceptable coverage amounts. Minimum coverage requirements are:

- Deductible maximum: \$1000
- Major medical coverage of at least \$1,000,000
- Outpatient testing reimbursement, hospitalization benefits, and outpatient ambulatory surgery coverage at a minimum of 60/40% co-pay of first \$5,000 in claims.

Please have your health insurance company complete the enclosed form for approval.

**ALL HEALTH INFORMATION IS REQUIRED TO BE SUBMITTED TO STUDENT SERVICES  
BY JUNE 30 (ASDOH) AND AUGUST 16 (ASHS).**