ATSU College for Healthy Communities

ATSU CENTRAL COAST PA PROGRAM

MASTER OF PHYSICIAN ASSISTANT STUDIES

STUDENT PROGRAM GUIDE

TABLE OF CONTENTS

How This Guide is Organized

This guide provides students with information to describe and prescribe how to succeed in the program. The first section describes the program and its relationship to the University and the Central Coast Physician Assistant (PA) Program (CCPAP). The second section describes the courses students will complete and the competencies that a successful graduate can demonstrate. The third section details policies and procedures for the program overall first, then provides policies and procedures specific to the pre-clinical and clinical components of the program. Unless stated otherwise, program level policies and procedures apply to the entire program.

Changelog

The following is a record of the changes made to this date after initial publication 8/29/2019.

Orientation to the Program

CCPAP Mission

The Central Coast Physician Assistant Program (CCPAP) educates culturally humble, diverse physician assistants (PAs) to serve the primary care needs of medically underserved communities.

CCPAP Values

- Excellence
- Teamwork
- Diversity & Inclusion
- Osteopathic Philosophy
- Equity
- Freedom of Expression

CCPAP Educational Philosophy

PA students are engaged learners of the art and science(s) of medicine. This is accomplished by teaching them to ask probing questions from patients and listen carefully to make informed decisions based on all the available evidence. Our students will build the knowledge, skills and understanding of how the social world impacts human health and well-being.

Students learn in a technology-rich environment in small groups through facilitated discussion and case-based problem-solving, simulations, videos, field trips and presentations. Students engage in study, discussion, reflection, and independent research regarding social factors that influence health.

We aim to produce a medical provider who is not only proficient in medicine, but also one who provides compassionate care in the treatment of the whole person. PA students will learn to be calm, self-reflective, insightful and aware of professional roles, limitations, needs, styles and values of patients and other health professionals. We believe in training a healer with attention, awareness, compassion and empathy. We follow the founder A.T. Still's philosophy to treat the whole person. And to that end, we anticipate significant positive changes in quality of life, morbidity and mortality of the body, mind, and spirit within the community directly related to the introduction of compassionate care in the treatment of patients with our Community Health Center (CHC) partners in Santa Maria, CA, and beyond.

Definition of a PA

Physician Assistants (PAs) are academically and clinically prepared to practice medicine in teams with doctors of allopathic medicine or osteopathic medicine and other healthcare professionals. The physician/PA team relationship is fundamental to the PA profession and enhances the delivery of high quality healthcare. Within the physician/PA relationship, PAs practice with defined levels of autonomy and exercise independent medical decision making within their scope of practice including, but not limited to, a broad range of diagnostic, therapeutic, preventive, and health maintenance services. The clinical role of PAs includes primary and specialty care in medical and surgical practice settings. PA practice is centered on patient care and may include educational, research, and administrative activities.

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 relates to the credibility of the profession. Professionalism therefore shares equal importance to content knowledge and manual skills at ATSU. The CCPAP considers violation of professional conduct a significant deficiency.

Recognizing the responsibility for professional behavior, the CCPAP sets expectations for and evaluates students on their professional conduct. Students must demonstrate the 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 corrective guidance. 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 these 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 appropriately
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
5. Remains flexible and adaptable to change

These expectations were adapted from [Behaviors Reflecting Professionalism National Board of Medical Examiners](#).

Structure of the Central Coast PA Program (CCPAP)

Organization of ATSU College for a Health Community

```
                              ┌──────────────┐
                              │   Dean CHC   │
                              └──────────────┘
┌─────────────────────────┐   ┌──────────────┐
│ Common University       │   │    CCPAP     │
│ Services                │···│ Program Chair│
│  • Student Services     │   └──────────────┘
│  • Financial            │
│    Services             │        ┌─────────────┐  ┌─────────────┐  ┌─────────────┐
│  • Library              │        │ CCPAP Medical│  │   Program   │  │ Director of │
│  • Information          │        │   Director   │  │ Admin Asst. │  │   Program   │
│    Tech                 │   ┌──────────────┐    │  └─────────────┘  │ Assessment  │
└─────────────────────────┘   │Assistant Chair│                       └─────────────┘
                              │    CCPAP     │
                              └──────────────┘
                                                   ┌─────────────┐  ┌─────────────┐
                                                   │   Faculty   │  │ Maintenance │
                              ┌──────────────┐     │  Admin Asst │  │and Security │
                              │   Faculty    │     └─────────────┘  └─────────────┘
                              │Preclinical and│         ┌─────────────┐
                              │  Clinical    │          │  Clinical   │
                              └──────────────┘          │ Admin Asst. │
                                                        └─────────────┘
```
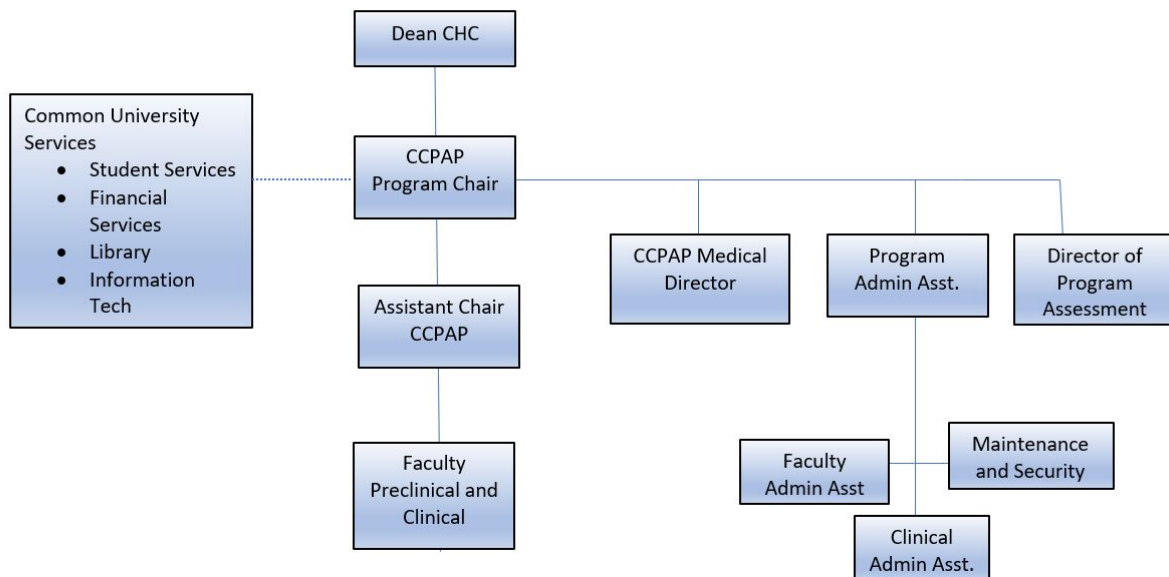
Roles and Responsibilities

Below are descriptions for some of the specific roles faculty and staff have in the program. The list below is not comprehensive; it is designed to help students understand who, by way of role, may be able to address a specific concern.

Program Chair
The Program Chair is responsible for all aspects of the PA program, including academics, faculty and staff supervision and evaluation, and student experience.

Director of Pre-Clinical Education
The Director of Pre-Clinical Education is responsible for curriculum, assessments, instruction, scheduling, and related matters for the pre-clinical component.

Director of Clinical Education
The Director of Clinical Education is responsible for curriculum, assessments, instruction, scheduling, site recruitment & monitoring, and related matters for the clinical component.

Principal Faculty
The Principal Faculty are comprised of the Director for Pre-Clinical Education, Director for Clinical Education, and all other faculty (at least 0.5FTE). Principal faculty is responsible for admissions, curriculum, program and student assessment,

clinical site visits, student advising, department & university committee work, and clinical and/or scholarly activity.

Administrative Assistant
The Administrative Assistant is responsible for assisting with admissions-related activities, reception, secretarial tasks, program scheduling, program retreat and other event planning, staff committee participation, and duties supporting the Program Chair.

Program Administrative Assistant
The Program Administrative Assistant is a senior administrative position specifically tasked with management of student data, including immunizations, clinical rotation logs, student schedules, and preceptor licensure information. Other duties support the Program Chair and faculty, including exam creation, distribution, scheduling, and proctoring; room and facilities scheduling; staff committee participation, and assistance to the CCPAP Student Services Coordinator.

Assessment Manager
The Assessment Manager is a senior administrative position specifically tasked with management and preparation of student assessment data, course and faculty evaluation surveys and data, accreditation data and reports, and statistical assistance with faculty scholarly activity.

Portal Manager
The Portal Manager is a senior administrative position specifically tasked with management of accreditation data, accreditation document preparation, ARC-PA Portal maintenance.

Curriculum

Graduate Competencies

Graduates from the ATSU Central Coast Physician Assistant Program (CCPAP) will achieve a specific set of competencies during their course of PA study. Many PA programs use the "4-Orgs" Competencies, developed in 2012 by the AAPA, PAEA, ARC-PA, and NCCPA to represent competencies for practicing PAs. After careful consideration by faculty, administration, our medical director, and CHC stakeholders, CCPAP has chosen the Core Competencies for New PA Graduates, developed by the Primary Care Competencies Task Force of the Physician Assistant Education Association (PAEA) to represent the skills, attributes, and behaviors expected of any new PA graduate. Although still in draft form, CCPAP believes these to more accurately reflect the competencies we expect from our students at the time of their graduation.

To that end, the goals and learning objectives provided for CCPAP courses are designed to prepare the learner in a manner that they will be able to excel in the

following professional competencies, as outlined in the [Core Competencies for New PA Graduates](#):

- Patient-centered practice knowledge (PCPK)
- Society and population health (SPH)
- Health literacy and communication (HLC)
- Interprofessional collaborative practice and leadership (ICPL)
- Professional and legal aspects of health care (PLAHC)
- Health care finance and systems (HCFS)
- Cultural Humility (CH)
- Self-Assessment and Ongoing Professional Development (SAOPD)
- Essential Skills (ES)

Patient-Centered Practice Knowledge (PCPK)

Description:
Graduates will be able to recognize healthy versus ill patients in the context of the patients' lives and determine the stage of illness — acute, at risk of illness (emerging), or chronic. Graduates will demonstrate the ability to utilize up-to- date scientific evidence to inform clinical reasoning and clinical judgment.
1.1 Recognize normal and abnormal health states
1.2 Discern among acute, chronic, and emerging disease states
1.3 Elicit and understand the stories of individual patients and apply the context of their lives (including environmental influences, cultural norms, socioeconomic factors, and beliefs) when determining healthy versus ill patients
1.4 Develop meaningful, therapeutic relationships with patients and their families
1.5 Partner with patients to address issues of ongoing signs, symptoms, or health concerns that remain over time without clear diagnosis despite evaluation and treatment

Essential Skills:
• Information gathering
• History-taking
• Physical examination
• Discernment of important versus extraneous information
• Prioritization of actions and clinical care decisions based on information available and the patient's beliefs about their care
• Empathetic listening
• Relationship building
• Evidence-based decision-making

Society and Population Health (SPH)

Description:
Graduates will be able to recognize and understand that the influences of the larger community may affect the health of patients and integrate knowledge of social determinants of health into care decisions.

2.1 Recognize the cultural norms, needs, influences, and socioeconomic, environmental, and other population-level determinants affecting the health of the individual and community being served

2.2 Recognize the potential impacts of the community, biology, and genetics on patients and incorporate them into decisions of care

2.3 Demonstrate accountability and responsibility for removing barriers to health

2.4 Understand the role of structural disparities in causing illness

2.7 Reflect on personal and professional limitations in providing care

2.8 Exercise cultural humility

2.9 Elicit and hear the story of the individual and apply the context of the individual's life (including environmental influences, culture, and disease) when determining healthy versus ill patients

2.10 Understand and apply the fundamental principles of epidemiology

2.11 Recognize the value of the work of monitoring and reporting for quality improvement

2.12 Use appropriate literature to make evidence-based decisions on patient care

Essential Skills:
• Patient advocacy
• Patient agency
• Self-advocacy
• Self-agency
• Active community engagement
• Resourcefulness
• Relationship development
• Self-awareness
• Interpersonal skills including influence, empathy, and humility
• Awareness of unconscious biases
• Information gathering
• Discernment of important versus extraneous information
• Prioritization of action steps based on information available
• Awareness of biases and attitudes towards others
• Empathetic listening

Health Literacy and Communication (HLC)

Description:
Graduates will be able to communicate with patients as partners who engage in shared decision-making and who communicate, interpret, and express themselves as individuals with unique personal, cultural, and social values.

3.1 Establish meaningful, therapeutic relationships with patients and families that allow for a deeper connection and create space for exploration of the patients' needs and goals to deliver culturally competent care

3.2 Interpret information so that patients can understand and make meaning out of the information conveyed to them

3.3 Recognize the need for and governing mandates that ensure patients have access to interpreters and appropriate resources when barriers to communication arise

3.4 Demonstrate insight and understanding about emotions and human responses to emotions that allow one to develop and manage interpersonal interactions

3.5 Communicate effectively with patients, families, and the public

3.6 Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs

3.7 Organize and communicate information with patients, families, community members, and health team members in a form that is understandable, avoiding discipline-specific terminology when possible, and checking to ensure understanding

Essential Skills:
- Self-awareness
- Knowing when to consult
- Awareness of unconscious biases
- Interpersonal skills
- Active listening
- Patient education
- Cultural competency
- Health literacy
- Trust-building

Interprofessional Collaborative Practice and Leadership (ICPL)

Description:
Graduates will be able to recognize that the patient is at the center of all health care goals and to partner with the patient to define the patient's health care goals.

4.1 Articulate one's role and responsibilities to patients, families,communities, and other professionals

4.2 Redirect the focus of the health care team to the needs of the patient

4.3 Assure patients that they are being heard

4.4 Ensure patients' needs are the focus over self and others

4.5 Contribute to the creation, dissemination, application, and translation of new health care knowledge and practices

4.6 Recognize when referrals are needed and make them to the appropriate health care provider

4.7 Coordinate care

4.8 Develop relationships and effectively communicate with physicians, other health professionals, and health care teams

4.9 Use the full scope of knowledge, skills, and abilities of available health professionals to provide care that is safe, timely, efficient, effective, and equitable

Essential Skills:
- Interpersonal skills including humility and beneficence
- Self-awareness
- Effective communication
- Empathetic listening
- Advocacy
- Teamwork
- Relationship building

• Care planning

Professional and Legal Aspects of Health Care (PLAHC)

Description:
Graduates will be able to practice medicine in a beneficent manner, recognizing and adhering to standards of care while attuned to advancing social justice.
5.1 Articulate standard of care practice
5.2 Admit mistakes and errors
5.3 Participate in difficult conversations with patients and colleagues
5.4 Recognize one's limits and establish healthy boundaries to support healthy partnerships
5.5 Demonstrate respect for the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care (IPEC VE2)
5.6 Demonstrate responsiveness to patient needs that supersedes self interest (PCRS 5.2)
5.7 Demonstrate accountability to patients, society, and the profession (PCRS 5.4)
5.8 Exhibit an understanding of the regulatory environment

Essential Skills:
• Interpersonal skills including humility, compassion
• Empathetic listening
• Ethical decision-making
• Integrity
• Accountability
• Humanism
• Responsibility
• Help-seeking behaviors
• Self-advocacy

Health Care Finance and Systems (HCFS)

Description:
Graduates will be able to articulate the essential aspects of value-based health care and apply this understanding to the delivery of safe and quality care.

6.1 Recognize that healthcare is a business
6.3 Appreciate the value of the collaborative physician/PA relationship

Essential Skills:
• Systems thinking
• Adaptability
• Leadership
• Stewardship of resources
• Help-seeking behaviors
• Reimbursement
• Coding
• Care coordination

- Technology fluency
- Patient and personal safety
- Quality improvement
- Evidence-based practice
- Practice-based improvement

Pre-Clinical Component Courses

Pre-Clinical Component Schedule

Students will complete two semesters on the Santa Maria, CA campus. Each semester will typically have two 10-12-week sessions with a one week break from classes between each session. The first semester will explore the basic sciences and lay the foundations of medicine by concurrently studying normal and abnormal function of each body system. Curricular material will be synchronized across the anatomy & physiology, basic sciences, clinical medicine, history & physical exam, PA professional practice, and critical community health studies courses. Modules will vary in length based on the breadth of the curriculum. Concurrent with systems-based study, the two course series will expose and instruct students in the human side of medicine. The Critical Community Health Studies course series will present seminars exploring a variety of topics in the medical humanities and practice as a medical professional. The second semester will include study of the diagnosis of each of the medical conditions, comparison and contrast of the conditions to formulate a differential diagnosis, pharmacologic and nonpharmacologic treatment and prevention of each. The pre-clinical year is capped off with a 3-week hands-on lab where students will learn and practice skills such as suturing, advanced cardiac life support, and others critical to practice in the clinical year and beyond.

Note: This course list is for the PA Class of 2022. Please refer to the curriculum documents on the [program webpage](#) for cohort-specific course lists.

Foundations of Medicine Series

Recognizing that every student enters the CCPA Program with a different fund of knowledge and abilities, based on previous courses and experiences, the courses in the Foundational Medicine Series are designed to ascertain each student's baseline basic science knowledge, their knowledge of pharmacology, and their medical knowledge and skills abilities. Each course begins with instruction/review/practice in the principles of studying, learning, practicing, and test-taking as they apply to the study of each course in particular, and medicine in general. The courses will then present foundational material in each of the basic sciences (A&P, genetics, microbiology, cell & molecular biology, biochemistry) as it applies specifically to clinical practice, followed by a systems-based analysis of clinical medicine basic sciences foundations, and history & physical exam techniques as they pertain to conditions in each system and in each anatomical region.

CCPA5000 Basic Medical Sciences (5 semester hours)
This course will begin with instruction/review/practice in the principles of studying, learning, practicing, and test-taking as they apply to the study of basic sciences in particular, and medicine in general. The course will review prerequisite basic science knowledge expected of the student at the time of matriculation, as well as present more advanced concepts as they apply to clinical medicine. Students will gain a foundation in recognizing the differences between normal and abnormal disease states by integrating basic and advanced concepts in genetics, cell and molecular biology, microbiology, biochemistry, immunology, embryology and pathophysiology. This course will be taught with demo/discussion by faculty and daily case analysis and discussion with classmates and guidance by faculty.

CCPA5010 Clinical Anatomy & Physiology (5 semester hours)
This is a general survey course designed to review the prerequisite anatomy and physiology (A&P) knowledge expected of the student at the time of matriculation, as well as presenting more advanced concepts as they apply to the practice of clinical medicine. The emphasis in anatomy is on sectional, regional anatomy as demonstrated by radiologic imaging modalities. Anatomy is sequenced by region, and physiology by organ system. Learning opportunities in physiology will include readings and video viewings, and analysis/discussion of case studies. Demonstrations using images, 3D software, and short videos will enhance the discussions.

CCPA5015 Introduction to Patient Assessment (5 semester hours)
Introduction to Patient Assessment presents the fundamental methods for obtaining and presenting a complete screening medical history and physical examination. Techniques for conducting a physical examination are covered. Instructional methods include demonstrations, group discussion, role-playing, and labs. Students conduct interviews and physical examinations under supervision. Students are expected to spend additional time outside of class obtaining histories and performing physical exams, and preparing for presenting case information and findings. Course content will be organized along the following broad topics: Patient interviewing skills, Basic screening head-to-toe physical exam skills, Principles of Patient Education, Basic Patient Presentation Skills.

CCPA5020 Introduction to Clinical Medicine (5 semester hours)
Introduction to Clinical Medicine will begin the study of medical conditions by system: dermatologic, cardiovascular, gastrointestinal, pulmonary, etc. Concurrently with A&P, Basic Medical Sciences and Intro to Patient Assessment, progressing from head to toe, students will learn what conditions most commonly affect what systems, normal and abnormal basic science considerations, and typical signs/symptoms of conditions in anatomical region. In educational terms, this course will provide a broad scaffolding upon which students will organize and add detail to in future courses and in clinical practice.

CCPA5130 Technical Skills for Clinical Practice I (6 semester hours)
The Technical Skills seminar is 3 weeks of hands-on learning and practice of basic, intermediate, and advanced skills necessary for PAs in clinical practice. These include, but are not limited to, point of care ultrasound; foreign body removal; wound care and suturing; surgical gowning, gloving and assisting; venous

cannulation; nasogastric and bladder catheterization; breast, pelvic and rectal exam; medication administration; lumbar puncture; trauma care; orthopedic skills; and basic and advanced cardiac, pediatric, and trauma life support. This course has no prerequisites or corequisites.

Clinical Medicine Series

The Clinical Medicine series consists of two courses that provide PA students a case-based education on health promotion and disease prevention, and patient evaluation, diagnosis, and management across the life span. The program offered by CCPAP is unique in that there is an emphasis on the health care needs of medically underserved communities, particularly as they present in the Nation's Community Health Centers.

Building upon the material presented in the foundations of medicine courses, each course in the clinical medicine series will provide instruction covering:
- review of normal anatomy and physiology of body systems;
- review of pathophysiologic basis of disease (including genetics and molecular mechanisms of disease);
- review of, and practice obtaining histories and performing physical exams;
- generating systems-specific differential diagnoses;
- ordering and interpreting diagnostic studies;
- formulating and implementing pharmacologic and non-pharmacologic health management plans;
- health maintenance, patient education and preventative measures.

Having concentrated primarily on the scientific basis of each condition, system by system, and the discovery of pertinent history and findings through physical exam in the Introduction to Clinical Medicine course, the Clinical Medicine I & II courses will continue evaluation of medical conditions through ordering and interpreting diagnostic tests, formulation of a differential diagnosis, and pharmacologic and non-pharmacologic management, with patient education on prevention and health maintenance. The CCPAP curriculum emphasizes team-based approaches to patient care and models this by using small group and inquiry-based learning activities. Utilizing case studies, students in small groups will learn holistic problem solving and medical decision-making through the completion of written and practical examinations. This program of study will prepare PA students to provide preventive, emergent, acute, chronic, rehabilitative, palliative, and end-of-life care to prenatal, pediatric, adult, and elderly populations.

The Clinical Medicine series has been carefully organized to present material in parallel with other courses in the curriculum, i.e. Critical Community Health Studies, and PA Professionalism, and incorporates an understanding of the important relationship between body, mind, and spirit in health and well-being.

CCPA5025 Clinical Medicine I (11 semester hours)
Using a variety of teaching modalities, including demonstration, inquiry-based learning, small group discussions, standardized patient evaluation, and gaming, this

course will examine cases in all systems, focusing on selecting and interpreting diagnostic studies to formulate and narrow the differential diagnosis. Cases will be based on topics from the PANCE blueprint, will focus on coverage of the diagnostics and differential diagnosis task areas, and will be heavily weighted with considerations for the social determinants of health, medical law and ethics, interpersonal communication and cultural awareness as they apply to the management of each patient.

CCPA5030 Clinical Medicine II (12 semester hours)
The final course in the Clinical Medicine Series, this course continues examination of conditions by using a variety of teaching modalities, including demonstration, inquiry-based learning, small group discussions, standardized patient evaluation, and gaming. This course will examine cases from all body systems, based on topics from the PANCE blueprint. This course will examine the same conditions as previous clinical medicine courses, but this time with a focus on utilizing all of the information obtained from the knowledge of basic scientific aspects of the condition, findings in the patient's history and physical examination, results of diagnostic studies, and the potential differential diagnosis into problem-solving and medical decision-making in order to formulate a management plan, including pharmacologic and non-pharmacologic therapies, patient education, and follow-up or referral recommendations. As in all of the clinical medicine series, cases and discussions will be heavily weighted in consideration of the social determinants of health, medical law and ethics, interpersonal communication and cultural awareness as they apply to the management of each patient.

Critical Community Health Studies Series

Presented in each semester of pre-clinical training, this course exposes the student to seminal material germane to the role of the practicing physician assistant, specifically as they will encounter in the Community Health Center environment. Foundational topics in the following areas will be presented: Lifelong learning skills; Cross Culturalism and Care of Diverse Patient Populations; Bias in Medical Care Delivery; Concepts of Public Health; Patient Safety and Prevention of Medical Errors; Ethical Practice; Patient and Practitioner Wellness; and Spirituality in Medicine.

CCPA5100 Critical Community Health Studies I (3 semester hours)
This course focuses on the systematic study of the social conditions and economic factors under which people live which determine their health and wellbeing. We will explore how social influences such as political instability, anti-immigrant sentiment, homophobia, fear, poverty, cohesion, capital, job insecurity, discrimination, and stress affect health and longevity. We will also examine the role of public policy in shaping health outcomes for communities.

CCPA5110 Critical Community Health Studies II (3 semester hours)
The second in the Critical Medical Studies Series, this course will continue the systematic study of the social conditions and economic factors under which people live which determine their health and well-being. Utilizing additional readings, case studies and presentations, as well as building on knowledge gained from CCPA5100

Critical Community Health Studies I, we will explore how social influences such as political instability, anti-immigrant sentiment, homophobia, fear, poverty, cohesion, capital, job insecurity, discrimination, and stress affect health and longevity.

PA Professional Practice Series

The PA Professional Practice series is a two-course series that exposes the student to material & concepts germane to the role of the practicing physician assistant. Foundational topics in the following areas will be presented over the five terms in this course series: Professionalism (including intellectual honesty and appropriate professional and academic conduct); Interprofessional Team Concepts; Communication & Leadership skills; Healthcare Delivery Systems; Evaluation of the Medical Literature; Concepts of Public Health; Risk Management, Patient Safety and Prevention of Medical Errors; Legal & Ethical Practices; Patient and Practitioner Wellness; PA-Physician Team Practice; PA Professional Issues; and Development and History of the PA Profession.

CCPA5080 PA Professional Practice I (3 semester hours)
Presented in the first semester of training, this course exposes the student to foundational material important to the role of the practicing physician assistant. Topics in the following areas will be presented: professionalism in academics and intellectual honesty; the PA profession- history, current trends and future; The course will also cover medical law and medical ethics, as well as QA/QI concepts including patient safety, prevention of medical errors, risk management and health informatics & electronic clinical documentation (ECD). Students will gain an understanding of interprofessional practice.

CCPA5090 PA Professional Practice II (3 semester hours)
This course begins with a comprehensive survey of normal and abnormal development across the lifespan and human sexuality, followed by measures of violence identification and prevention. Professionalism as it relates to palliative care, end-of-life care, issues of death, dying and loss, and response to illness, injury and stress will be discussed.

Clinical Component Courses

Clinical Component Schedule

The clinical portion of the program is a 12 month series of experiences designed to expose the student to patients in a variety of clinical settings. The setting, assigned tasks and schedule will vary depending on the clinical site.

The year will consist of seven Supervised Clinical Practice Experiences (SCPE), and three additional courses:
- Seven 5-week core SPCEs
- CCPA6100 Clinical Assessment I (2 semester hours)

- CCPA6110 Clinical Assessment II (2 semester hours)
- CCPA6310 Transition to Practice (5 semester hours)

Note: This course list is for the PA Class of 2022. Please refer to the curriculum documents on the [program webpage](#) for cohort-specific course lists.

Required Supervised Clinical Practice Experiences

- **CCPA6200 Women's Health SCPE (5 semester hours)**
- **CCPA6210 Emergency Medicine SCPE (5 semester hours)**
- **CCPA6220 Behavioral Health SCPE (5 semester hours)**
- **CCPA6230 Family Medicine SCPE (5 semester hours)**
- **CCPA6240 Internal Medicine SCPE (5 semester hours)**
- **CCPA6250 Pediatrics SCPE (5 semester hours)**
- **CCPA6260 General Surgery SCPE (5 semester hours)**

Clinical experiences will average approximately 40-50 hours/week on site, in patient related care. Some clinical experiences may involve slightly shorter (no less than 36 hours/week) or longer hours (no more than 80 hours/week), evening, weekend or on-call responsibilities. The preceptor or clinical site will determine the student's on-site schedule and clinical responsibilities. Students must adhere to each clinical experience schedule and to all assignments developed by the preceptor. If this is not possible in any given week at a specific clinical site, the student is to notify the clinical team in advance.

Patient related care includes evaluating and treating patients, charting and appropriate paperwork (written or electronic), case presentations, discussions with the preceptor, and other duties as applicable.

Each clinical experience will have a designated preceptor who is responsible for the coordination of the student's overall learning experience. The preceptor may delegate some of the teaching to other qualified clinicians.

Other Clinical Component Course(s)

The Clinical Assessment series is a two course series whose goal is to help the student and the program identify and correct areas of weakness in their cognitive (knowledge), psychomotor (skills) and affective (behavior) learning domains. Assessment measures will include, but are not limited to, online computerized exams, short presentations, mini and full OSCEs, portfolios, oral exams, and short student presentations (oral, written, and/or recorded). Upon identification of potential weaknesses, the student will have numerous opportunities to review/relearn the material through a variety of methods that may include but are not limited to: demo, pre-recorded lectures, discussion, repetitive quizzing, and presentations.

CCPA6100 Clinical Assessment I (2 semester hours)
Specific topics in this course include review of credentialing, licensure, PA practice, PA-SP relationship, PANCE prep, and preparation/practice for the Program

Summative Exam. Material will be presented primarily by assigned readings, recorded dems/lectures, asynchronous online discussions, quizzes, and one-on-one help from advisers.

CCPA6110 Clinical Assessment II (2 semester hours)

This course continues with Packrat II, PANCE prep, and robust self-assessment in cognitive, psychomotor and affective domain abilities. Material will be presented primarily by assigned readings, recorded dems/lectures, asynchronous online discussions, quizzes, and one-on-one help from advisers.

CCPA6310 Transition to Practice (5 semester hours)

This course is where resume creation & other job-seeking skills will be examined. PANCE prep continues, and students will take the multifactorial Program Summative Exam. Material will be presented primarily by assigned readings, recorded demonstrations/lectures, asynchronous online discussions, quizzes, and one-on-one help from advisers. The Summative Exam will be a combination of a written exam, OSCE, and Multiple Mini OSCEs to measure achievement of competency in each of the CCPAP Program Learning Objectives.

Policies and Procedures

Program-Wide Policies and Procedures

The policies and procedures listed below apply to students through all components (pre-clinical and clinical) of the program. Students will be informed of these policies during orientation and will have a chance for clarification. These policies also apply to the Program Chair, and all faculty, unless superceded by University Faculty Staff handbook policies.

Communication

Communication between CCPAP faculty and staff and PA students can be accomplished through a variety of modes that include personal visits, phone calls, voice mail, and ATSU email. The student's ATSU email address is the official means of communication at the University. Email communication between students and all ATSU personnel must occur via ATSU assigned email accounts. ATSU personnel are not permitted to respond to student emails originating from non-ATSU assigned email accounts. Students are required to check ATSU email and respond on a daily basis.

PA students are cautioned against the use of social media while enrolled as a student. All public communications while a student of ATSU can be construed as a message on behalf of ATSU or reflective of ATSU's values, policies, or actions. Considerable thought should be given to the implications of sharing any information on the internet. Any information a student distributes through a social media

platform becomes public information (even when the platform purports to limit access to the information being shared).

Postings/pictures/videos or other material that violates the professionalism standards CCPAP students are held may be cause for disciplinary action, even if said postings are not on ATSU maintained platforms.

Please take special note: It is a violation of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and University policy for students to distribute ANY information related to patient care via social media. This even includes de-identified patient case details, and certainly photos of patients. A special discussion board will be created in Canvas where students can discuss de-identified patient information during the pre-clinical and clinical training periods.

Academic Assistance

Faculty Academic Advising
A team-centered approach will be utilized to provide any needed academic support with the program advisor as the centerpiece of the effort. Faculty academic advisors are assigned to each student at matriculation. While it is the program's intent to provide all available support to students who are experiencing academic difficulty, this policy is not intended to undermine the basic tenant that it is ultimately the student's responsibility to seek out and utilize the resources made available to meet the requirements of ATSU and CCPAP.

Tutoring Services
The program and Student Affairs maintain contact with students, graduates, and others who express interest in providing tutoring to PA students challenged by the program. Students wishing to obtain tutoring should contact their advisor and/or Student Affairs to inquire about available tutors.

Students with Disabilities
Learning & Disability Resources (LADR) supports ATSU students with disabilities by determining eligibility and coordinating necessary academic adjustments (accommodations), while maintaining the standards of the University. Any student seeking academic adjustments to accommodate limitations due to a documented disability is required to register with LADR. ATSU faculty will not provide disability-related academic adjustments without referral to and notice from LADR.

To register, or to discuss adjustments and services as they may apply to your individual situation, please contact LADR at disabilityresources@atsu.edu, 660.626.2774 Missouri campus, or 480.245.6248 for the Arizona and California campus. For more information visit:
www.atsu.edu/learning_resources/disabilities/index.htm

In addition to registration with the director of learning resources, any student who feels that they have a disability or condition which might jeopardize the safety of patients or prohibit their participation in classroom, laboratory, or clinical activities

must notify the appropriate faculty and/or program director so that reasonable accommodations can be made. Employ

Student Access to Faculty

In addition to teaching, PA faculty members have administrative, University, and clinical responsibilities. Time students spend with faculty should be for academic counseling, advisement, academic questions or other concerns related to the PA program. PA faculty members generally maintain an "open door" policy for student access. Please use good judgment and respect faculty members' time. If extended periods of time are needed, please consult the faculty member to make appointments.

Although students have significant access to program faculty, principal faculty, the program chair, and the medical director are not allowed to provide medical care to PA students except in an emergency situation.

Fair Practices

PA students have equal access to facilities and programs of CCPAP as do students of other ATSU programs. CCPAP is committed to equality of opportunity and does not discriminate against applicants, students, or employees based on race, religion, color, creed, national origin, gender, age, sexual orientation, or disability. All policies concerning discrimination, harassment, and retaliation are found in Appendix C, page 42, of the ATSU University Student Handbook.

Grading

Course Score and Grade Calculation
Grades for each PA student will reflect the evaluation criteria as stated in the course syllabi. CCPAP students are evaluated by a number of methodologies to insure they are meeting curricular goals and competencies. The following are examples of methods that may be used to provide either formative or summative evaluation of student performance:
- Examinations (either written or computer based), quizzes and assignments
- Observation of Head-To-Toe Physical Exam
- Observation of Problem-Specific Physical Exams
- Performance of Clinical Procedures
- Performance at Clinical Experiences
- Discussion with Preceptors at Clinical Sites
- Behavioral Performance Evaluation
- Comprehensive End-of-Year Examinations
- Faculty Advisory Reviews
- Evaluation of Medical Documentation
- Observation of Patient Presentations
- Objective Structured Clinical Examinations (OSCEs)
- Multiple Mini-OSCEs (MMOs)

Final pre-clinical course and system grades are reported as Pass (PASS >=70%), or Fail (FAIL <70%). In addition to earning a cumulative grade above 70%, individual courses may also specify further requirements in order to successfully pass. A failed class that is remediated is reported as a Remediated Pass (RPASS). GPA is calculated using the final actual percentage score a student achieved in a course or system, weighted in proportion to the units of the course or system. Class rank is determined by ordering the GPA's of the members of the class from highest to lowest. While GPA and class rank are not reported on the official transcript, CCPAP can provide this information in an official letter at the student's request.

Incomplete Grades
PA students whose academic work at the end of a course is incomplete may be given, at the course director's discretion, a grade of I (incomplete). An Incomplete Grade Agreement will be drafted, reviewed, and signed by the student and course director issuing the incomplete, which will define the terms and timeline for completing the course and converting the I to a letter grade. Incomplete grades for which there is not a signed Incomplete Grade Agreement form will become failing grades two weeks (14 days) after being issued. When the terms of an Incomplete Grade Agreement are not fulfilled, the incomplete grade will be converted to an F.

Academic Standing

A student who is in good standing in the program will have met the following criteria:
1. A passing grade in all pre-clinical and clinical courses required by the ATSU CCPAP.
2. Meet the defined CCPAP Professionalism Expectations and be in compliance with all program and University policies and procedures.

Academic Progression

Progression in the program is contingent on maintaining good academic standing, continued mastery of program objectives, course content, and demonstration of behaviors consistent with a healthcare professional as outlined in the Professionalism section of this program guide.

At-Risk Student Policy

Identifying At-Risk Students
Each learner is ultimately responsible for their own success. The program is committed to supporting students, including monitoring for early-warning signs of struggle. Students may be deemed at-risk using one or more of the following criteria:

1. Students experiencing a course failure.
2. Students failing to meet program standards on any required standardized test (e.g. End-of-Rotation exams) or program summative exams.
3. Students failing two or more major unit assessments.
4. Students failing to meet program defined professionalism expectations.

5. Students earning a failing grade on the first attempt of two or more End-of-Rotation (EOR) exams.
6. Students earning a failing grade on one or more SCPEs.
7. Consistently performing at a sub-standard level with regard to preceptor evaluations during the clinical year
8. Consistently performing at a sub-standard level with regard to student site visits during the clinical year
9. Student who is dismissed from a clinical experience by a site or preceptor.
10. Deficiencies in clinical experience course performance and/or fund of medical knowledge as identified during a clinical site visit.
11. Students not necessarily meeting any of the above criteria, but are of significant concern to current program faculty and/or program partners

At-Risk Student Intervention
Once a student has been identified as being at risk, the Program Chair (or their designee) will contact the student in writing. Based on prior experience supporting students who struggle, the program will prescribe a series of steps or tasks for the student to complete.

Student Progress Board (SPB)
The program may elect to review a student's performance via a Student Progress Board (SPB). The student will be informed of the SPB in writing and may be called to appear in person (or by video-conference) or to submit a written statement (or both). Students who fail to respond to contact attempts by the program will have documentation of failure to respond entered into the student's file, which could adversely affect any professional recommendation.

Each SPB will be convened by the Program Chair to consider an at-risk PA student. This board will include the program chair, the director of pre-clinical and/or clinical education (as appropriate), the student's advisor, the instructor(s) of any of the courses with failed assessments, a faculty member acting as student ombudsman, and any other appropriate faculty and staff. When a specific member of the board is unavailable, a pro tem may be designated. A minimum of four faculty members are required (in-person or online) to constitute a quorum.

The student is not allowed visitors or legal representation during the SPB meeting.

The SPB will consider each case individually, and will render a decision that may include (but is not limited to) any of the following:

- Mandatory advisor meetings
- Review of Strengths & Opportunities Report and/or faculty & SP feedback (SPE)
- Mandatory tutoring
- Counseling referral
- Re-testing
- Re-submit missed/failed assignments
- Extended plan of study (e.g. special topics course [before clinical experiences begin], repeat of clinical experience course)

- Probation
- Deceleration
- Dismissal from the program

In the event a student fails to meet academic or professional standards, the student will be subject to dismissal from the program by the SPB.

Whenever the program intervenes to support an at-risk student, the program chair (or their designee) will send a formal letter to the student detailing the reason for the intervention, the specific steps ordered, and, in the case of probation, what will qualify the student to be released from probation. A copy of this notice will be added to the student's file. After the decision, the student has the option to file an appeal as outlined in the ATSU Catalog.

Probation

Students who fail to maintain good academic standing will be placed on Probation by the Student Progress Board (see At-Risk Student Intervention section). In written notification, the Program Chair will specify the reason(s) for probation, the requirements for restoration of good standing, and the prescribed methods for completing those requirements. Probationary status is noted on the student's official transcript. Probation may affect a student's financial aid status and/or funding opportunities.

Remediation

- All students earning a failing grade in a course (unless receiving a grade of incomplete) will be officially notified by their Course Director via email.
- Students earning a 74.9% or below are automatically required to participate in the remediation process and will receive an "F" grade for the individual module and will be placed on Academic Probation.
- The Course Director will work in conjunction with the course instructor to create a Remediation Plan unique to that student's individual needs.
- At the discretion of the Course Director, students may be scheduled to complete the remediation process during student breaks, holidays, or any other dates in which the University is open for business. This may include administering assessments during Fall Break, Thanksgiving Break, Winter Break, Spring Break, and/or Summer Break.
- Students will always be notified in advance of their remediation schedule.
- To successfully complete and pass the remediation process, students must receive a passing grade on their Remediation Plan.
- Remediation Plans may include additional assignments, examinations, quizzes, case studies, projects, oral or slide presentations and/or typed papers and are determined at the discretion of the instructor.
- Remediation Plan assessments should provide an opportunity for students to demonstrate comprehension of the course content and be directed toward the content areas within the course in which the student was deficient.

- It is the responsibility of the student to ensure they have met and passed all requirements outlined in their Remediation Plan by the determined deadlines.
- The student must fulfill all the requirements outlined in the remediation plan within 60 days of not passing the course. The course director has the discretion to extend the remediation period if needed.
- Students who successfully complete the remediation process with a passing grade will receive a final grade of "RPass" for the course.
- If all course remediation requirements are not successfully completed in accordance with CCPAP policies, the final individual course grade will remain an "F" and a final course grade of "F" will be recorded on the student's transcript. The student will be placed on academic probation and must then retake the course at the student's own expense. Students will be notified by the Finance Office in regards to their fee.
- Students who fail when retaking a course will be referred to the Student Progress Board (SPB) and/or may be recommended for dismissal.
- Students may be allowed to repeat up to two courses while in PA school. Students required to retake a third course may be recommended for dismissal.

Deceleration

Deceleration is defined by the ARC-PA as "the loss of a student from the cohort, who remains matriculated in the physician assistant program."

Deceleration may occur as a result of academic failure or following a voluntary Leave of Absence (see Absence Policies in the University Student Handbook). Deceleration is a mechanism for allowing students in the PA program an opportunity to complete the 24-month curriculum through required repetition of a portion of the curriculum as a result of failure to meet the program's standards for progression. A student who is decelerated will be required to repeat all or part of the pre-clinical and/or clinical portion of the curriculum after a period of suspension (see Definition of suspension in the University Student Handbook).

A student identified by program faculty as having a significant deficit in knowledge, skills, or professional behaviors at any point in the program may be subject upon SPB review to sanctions which include remediation, deceleration, or dismissal from the program.

Deceleration may occur following failure of a course or following a requested Leave of Absence. A student with a failing grade (F) in any course during the pre-clinical or clinical phase of the program (including the PA Summative Evaluation) will be referred to the SPB, which will review the student's performance in the course and the student's entire record in the program. The Committee will make a recommendation regarding academic sanction to the program director, who will make a final decision about the student's disposition. Possible sanctions include required repetition of a portion of the curriculum as described above (deceleration) and dismissal from the program (see Dismissal Policy).

At the discretion of the SPB, any student who is decelerated may also be required to comply with a formal remediation plan. Deceleration occurring in either the pre-clinical or clinical phase of the program will result in a delay in graduation.

Plan for Deceleration and Follow-up of Decelerated Students

In the event that a student is decelerated, the SPB will provide a detailed Plan for Deceleration which will include all courses to be completed and the timeframe for completion of all components of the program. The Plan for Deceleration will be signed by the student and the program chair, and will be maintained in the student's permanent program record.

Students repeating any portion of the curriculum will be closely monitored by program faculty upon resuming their coursework. The SPB will evaluate all decelerated students upon completion of the course (or courses) within the Plan for Deceleration. If a student fails to meet academic or professional standards while decelerated, the SPB will review the student's entire record in the program and make a recommendation to the program director regarding disposition. Failure to meet academic and/or professional standards while decelerated may result in dismissal from the program.

Special Topics Course

Students who have academic or professional challenges may be required to complete a special topics course (CCPA5200, CCPA5210, CCPA6500, CCPA6510). This course is designed to assist at-risk students in successfully meeting program expectations and may be required prior to and/or during the clinical year.

The content of this course will be determined by the program, but will be tailored to the student's individual needs, taking student input under advisement. Students required to complete the special topics course are required to achieve a passing grade for the course, in order to advance in the program. Such course may incur additional fees and/or tuition.

Academic Dishonesty

The Code of Academic Conduct and the Code of Behavioral Standards are outlined in detail in the ATSU University Catalog. Students are expected to be familiar with this code. Additionally, the University Student Handbook outlines the procedure for reporting and investigating violations of the codes.

Conflict Resolution

An important aspect of professional conduct in an organization is working within the organizational hierarchy to address conflict and concerns. Though rare, conflict, challenges, and unsatisfactory interactions may occur during pre-clinical and/or clinical training. These may be academic, professional, or personal in nature. Students with concerns are expected to act professionally at all times, and to follow

the steps below to resolve conflict with course directors/program faculty, clinical preceptors, University and clinical training site staff, and colleagues.

Pre-Clinical Component

1. Contact the course director or course faculty (if applicable) *first*. If this does not resolve your concern or if the problem does not relate to a specific course:
2. Contact your assigned faculty advisor. If the issue is not resolved:
3. Contact the Director of Pre-Clinical Education. If the issue is not resolved:
4. Contact the Program Chair.

Clinical Component

1. Attempt to resolve problems with the appropriate individual directly. If this does not resolve your concern:
2. Contact the Preceptor. If this does not resolve your concern:
3. Contact RDPAE. If this does not resolve your concern:
4. Contact the Director of Clinical Education. If this does not resolve your concern:
5. Contact the Program Chair.

Only students who have exhausted the conflict resolution pathways above may bring their unresolved concerns to the Dean of the College of Healthy Communities located on the second floor of the Coast Hills Building in Santa Maria, California.

If a student is experiencing personal problems, the student should speak with their faculty advisor. The advisor will guide the student to appropriate ATSU-CCPAP resources.

Do not allow small problems to turn into large problems. Address those issues immediately so that the issue can be resolved quickly.

Student Health

Counseling Services
Central Coast Physician Assistant Program does not provide direct counseling services to students. Students should access ATSU's Behavioral Health & Wellness Counseling page.

CCPAP Assessment of Immunity, Screening & Certification Information
CCPAP requires all residential students to provide documented proof of completion of all required immunizations, immunity, screenings and certifications, and maintain compliance with the requirements in this section for the duration of enrollment in the program. Students are responsible for all costs associated with being in compliance with these requirements.

Failure to comply with the health requirements defined below is considered unprofessional conduct and may impact course standing, clinical experience attendance, and graduation date.

Assessment for immunity to disease will require documentation of the following:
- Hepatitis B
  - Documentation of three (3) dose series of Hepatitis B vaccine. Series must be started prior to matriculation and completed per prescribed timeline
  - OR documentation of a blood test (titer) of immunity to Hepatitis B
- Influenza – Post matriculation requirement due to seasonal vaccine availability
  - Documentation of seasonal annual Influenza vaccination
  - The CCPAP clinical administrative team will establish a deadline for proof of immunization each calendar year and notify students prior to matriculation
- Measles Mumps and Rubella – MMR
  - Documentation of two (2) doses of MMR vaccine
  - OR documentation of a blood test (titer) of immunity to Measles Mumps Rubella
- Tetanus Diphtheria and Pertussis (Whooping Cough) - Tdap
  - Documentation of one (1) adult dose of Tdap vaccine within the last ten (10) years
  - Infant dose (DPT) does not meet this requirement
- Varicella – Chicken Pox
  - Documentation of two (2) doses of varicella vaccine.
  - OR documentation of a blood test (titer) of immunity to Varicella
  - History of this disease does not meet this requirement
- Tuberculosis – annual screening
  - During the pre-clinical phase, one (1) negative PPD skin test or one (1) negative QuantiFeron TB Gold blood test within the last twelve (12) months
  - During the clinical phase, a 2-step TB test will be required. Students will not be permitted to attend clinical experiences until all site requirements are met.
  - Students with a history of positive PPD skin test or positive QuantiFeron TB G blood test
    - Documentation of a negative chest x-ray (CXR)
    - AND documentation of medical clearance from your personal healthcare provider annually

Immunization Exemptions:
Under certain religious or health circumstances, a request for exemption from preventive health requirements may be granted. However, CCPAP cannot guarantee placement in clinical rotations when this exemption is granted. Consequently, students receiving an exemption from preventive health requirements may take longer to complete the curriculum and graduate, or the student may not be able to complete the curriculum and graduate.

Knowledge and ability to perform CPR will require documentation of the following:
- Documentation of unexpired Basic Life Support (BLS) for Healthcare Providers Adult & Child AED certification issued by American Heart Association, American Red Cross, or the Health & Safety Institute

- No other credential issuers will be accepted
- Valid certification must include in-person skills testing; online-only certifications will not be accepted

The Student Risk Management Record supplied electronically MUST be filled in and signed by your personal healthcare provider (MD, DO, PA or NP). ALL verifying documentation must be included.

Pre-matriculant students should mail, fax or email the Student Risk Management Record and documentation to:	Matriculated students should mail, fax or email proof of continued compliance with these health requirements to:

PA Program Admin Assistant
Central Coast Physician Assistant Program
College of Healthy Communities
1075 Betteravia Road
Santa Maria, California 93455
O: Forthcoming
F: Forthcoming

Program Preventative Health Requirements
1. Students are required to maintain compliance with the CCPAP Assessment for Immunity, Screening & Certification rules (as above).
   a. Students are required to submit the Student Risk Management Record prior to matriculation (provided to students electronically to complete).
   b. Students are required to maintain continued compliance with immunity and certification rules.
2. Students are responsible for obtaining any clinical experience site-specific immunization or certification requirements. These documents shall be delivered to clinical site in a timely manner. It is the student's responsibility to maintain compliance throughout the duration of the clinical experience.
3. Students are responsible for the costs for maintaining continued compliance with all immunization and CPR requirements.

Maintaining Continued Compliance with Health Requirements
4. CCPAP clinical support staff will email each student a reminder for upcoming immunization and/or CPR compliance expiration(s) both 2 months and 1 month prior to the expiration of the requirement(s).
5. Students are required to submit proof of continued compliance with all immunization and CPR requirements to the CCPAP clinical support staff via email to ccpap@atsu.edu prior to coverage/certification expiration(s).
6. CCPAP clinical support staff:
   a. Notify the student they are out of compliance.
   b. Informs program director or designee will issue the student a written warning.

c. Notify appropriate faculty advisor, clinical experience RDPAE, that the student will be absent from the assigned learning experience.
    d. A program faculty person will privately inform the student to leave campus and/or required and elective educational activities if the student is found out of compliance while attending a scheduled activity.
7. Students are not allowed to participate in required or elective educational learning activities, either on campus or off, while out of compliance.
    a. Student absences from required educational activities due to non-compliance are considered unexcused absences.
    b. Students absent from a required educational activity due to non-compliance may be required to, at the discretion of appropriate faculty, forfeit some or all of the professionalism points from missed activities.
    c. Students absent from a required educational activity due to non-compliance may, at the discretion of appropriate faculty, be granted the opportunity to make-up missed assignments/exams on a timeline established by the faculty person(s).
    d. Absences from required educational activities because of non-compliance may negatively impact the students' academic standing in the program. Such neglect could result in course failure and or delay graduation. Students who remain out of compliance for more than 30 consecutive days will be placed on probation and called before an SPB for unprofessional conduct.
8. Students out of compliance are required to submit appropriate documentation of compliance to CCPAP clinical support staff to return to compliance.
    a. Pre-Clinical Component students are required to also notify their advisor of return to compliance.
    b. Clinical Component students are required to also notify the CCPAP clinical support staff of return to compliance.
    c. The preferred method of student notification of program faculty and staff is using the carbon copy (cc) field when emailing documentation of compliance to CCPAP clinical support staff.

Students who return to compliance (and meet the terms of their probation if applicable) will be permitted to return to campus and required and elective educational activities.

Dress Code

The PA program dress code has been designed to assist students in presenting a professional appearance in order to inspire confidence in both colleagues and patients, as well as to comply with health and safety standards that promote effective patient care and minimize the possibilities for body fluid exposure or the spread of infectious disease, (ARC-PA Standards 3.02 and 3.08). Students should maintain a professional appearance and dress appropriately whenever they are representing CCPAP and the PA profession in any setting. This includes the campus, all clinical sites, meetings, and special events. Being neatly dressed and

well-groomed exemplifies professionalism and courtesy toward your colleagues and patients. Attire should not distract from the educational effort.

Professional Dress for Class Attendance on the ATSU CCPAP Campus
The rules below apply to classroom, laboratory, and campus events
Monday-Saturday between the hours of 8:00 am and 5:00 pm.
1. School identification card with photo must be worn and visible at all times.
2. Clothing must be clean and free of wrinkles, rips, tears, and stains.
3. Clothing must fit appropriately. Clothing must not be loosely fitting, which can promote disease transmission through accidental contact, or tightly fitting, which can restrict range of motion.
4. Clothing must not expose the back, midriff, cleavage, or undergarments.
5. These garments may be worn:
   a. Clean Sneakers (only with scrubs)
   b. Program scrubs (in the classroom or in lab only)
   c. Head coverings for religious observance
6. Jewelry must be kept to a minimum.
7. Fingernails should be kept trimmed and, when in surgical settings or clinical experiences, without polish. Artificial nails are prohibited.
8. Perfume, cologne, or aftershave, if worn, must be kept to a minimum.
9. Hair must be clean and arranged to avoid interference with providing patient care. Facial hair should be neatly trimmed.
10. Good personal hygiene is to be maintained at all times. This includes regular bathing/showering, use of deodorants/antiperspirants, and regular dental hygiene.

Professional Dress for Patient Encounters and Attendance at Off-Campus Conferences
This section covers dress for all patient encounters including simulated patient encounters, history-taking experiences, clinical experiences, and off-campus professional conferences.

All of the rules in the above section apply to patient encounters and off-campus conferences with the following modifications/additions:
1. Established dress codes at health fairs and clinical experience sites supercede those of the program (except required ATSU-CCPAP ID badges).
2. White coats must be worn, except during professional functions (eg conferences)
3. Scrubs may only be worn at a clinical site if approved by the site or preceptor.

Attendance

Attendance & Personal Time Off (PTO)
The Program works hard to ensure all scheduled educational activities are necessary and valuable to promoting and supporting student learning. As a result, attendance is mandatory for scheduled educational activities. The University's semester calendar allows for one week of time away from scheduled educational

activities approximately every 10 weeks during the pre-clinical phase. Students are encouraged to use these scheduled days off for routine working-day events (eg medical appointments, preventative vehicle maintenance). During the pre-clinical phase of education, students may earn up to 5 personal days off, but may use no more than 3 days per 20-22-week semester. This time may be used for activities personally important to the student, including but not limited to: job interviews, personal or family illnesses, weddings, etc. Personal days may NOT be used for absence on program testing days. All pre-clinical-year personal days MUST receive prior approval from the Director of Pre-Clinical Education.

During the clinical phase of education, students may earn up to 5 personal days off per year, but may use no more than 2 days per clinical experience. This time may be used for activities personally important to the student, including but not limited to: job interviews, personal or family illnesses, weddings, etc. Personal days may NOT be used for absence on program testing days. All clinical-year personal days MUST receive prior approval from the RDPAE.

Acute illness and personal emergencies, while uncommon, do take place. Students who have an unplanned absence from the program accept the risk of missing quizzes, exams, and activities that take place while they are absent. Students may only be allowed to make up any quizzes, exams, or activities if a timely PA Absence Request (PAAR) is submitted for an illness (verified with documentation from a healthcare provider), emergency, family death (verified by documentation of death or funeral proceedings), or approved professional activity, and the appropriate instructor approves of the make-up.

The Program will establish blackout days where no absence will be approved, and communicate that list of blackout days to students. Blackout days will commonly be days where final assessments are scheduled, but may include other scheduled educational activities. Students who are absent from blackout days will be demonstrating unprofessional behavior.

Program Attendance Expectations
- Students are expected to attend all scheduled educational activities.
- Students are expected to arrive with sufficient time prior to activity start time to be prepared to participate immediately when the activity begins. Arriving "on the dot" is not professional behavior.
- Students are responsible for all materials (instructions, curricular content, assessments, etc.) presented in or discussed during scheduled educational activities, whether or not they are in attendance.
- Students are expected to arrange for appropriate care for home, family, and/or pet obligations prior to and during the program to avoid foreseeable barriers to attendance.
- Students who anticipate being absent are expected to request an excused absence in advance.
  - Requests for unanticipated absences (eg. illness, emergencies) should be made as soon as possible, no later than 24 hours after the absence begins.

- ○ Requests for professional activities (eg. professional conferences) must be made a minimum 4 weeks prior to the event.
- Absences will not be retroactively approved, except in verifiable emergent situations.
- An absence of three or more consecutive days due to illness requires a written excuse from a healthcare provider on official letterhead.
- Additional ATSU policies on absences are located in the [ATSU Catalog](#).
- Repeated absences may result in review by the Student Progress Board (SPB), grade-related penalties, other disciplinary action, and delayed graduation.
- Students are expected to follow the program [Absence Request Process](#) when they will be or have been absent.
- Expectations unique to the clinical component
  - ○ Student requests for unanticipated absences (eg. illness, emergencies)will be made to the clinical experience site manager (if applicable), Regional Director of Medical Education (RDME) or Regional Director of Physician Assistant Education (RDPAE), preceptor, and the clinical team.
  - ○ Students must obtain permission from the Director of Clinical Education, then from their preceptor, 4 weeks prior to an absence for professional activities (eg. conferences, speaker events).
  - ○ Students may not be absent for more than 2 days during any single clinical experience.
  - ○ Students are expected, when possible, to arrange make-up hours for any hours of absence during an experience.
  - ○ Students are expected to minimize patient flow disruptions by limiting absences to whole days only.
  - ○ Students are expected to contact the Director of Clinical Education (and RDME/RDPAE if applicable) immediately if a clinical preceptor is absent for any reason or any reduction in clinical exposure arises.

Requesting an Excused Absence
To request an excused absence, a student must submit a PA Absence Request (PAAR) using the appropriate form ([CO2022 Form](#)).

The form will be sent to the Program Chair and either the Director of Pre-Clinical Education (for the pre-clinical year) or the Director of Clinical Education (for the clinical year). Once the request is reviewed, you'll receive another email whether the absence is excused.

An absence request is only in effect for one calendar day. Each day of absence requires a new PAAR.

Tardiness & Unexcused Absences
Promptness is an important trait that students are expected to display during all parts of the program. Repeated tardiness and/or absence from scheduled educational activities, any unexcused absence, and failure to submit a PAAR for each day of absence, are all considered unprofessional behavior. At the discretion of the appropriate instructor(s):

- a professionalism report may be submitted for the absent student,
- the student may receive grade-related penalties, up to a failing grade in the course or courses affected by the absence,
  - grade-related penalties will be described in course syllabi
- the student may be delayed in completing the pre-clinical or clinical component of the program or the program as a whole,
- and/or the student may be referred to the SPB.

Religious Observance and Practice
ATSU policy forbids discrimination because of religious beliefs or practices or any absences resulting from them. In addition, the student cannot be discriminated against for seeking a religious accommodation pursuant to this policy. A refusal to accommodate is justified only when undue hardship would result from each available alternative of reasonable accommodation. Students must submit a PAAR at least one month prior to an anticipated absence for religious observance and/or practice.

Minimal Technical Standards for Admission and Matriculation

Statement of Diversity and Inclusion
Diversity and inclusion encompass an authentic understanding and appreciation of difference and, at their core, are based upon the value each human being brings to our society and each person's access and opportunities to contribute to our University's cultural proficiency. A.T. Still University of Health Sciences is committed to equal access for all qualified applicants and students. Minimal Technical Standards for Matriculation (the "Standards") state expectations of ATSU students.

The Standards provide sufficient information to allow the candidate to make an informed decision for application. Minimal Technical Standards for Matriculation are a guide to accommodation of students with disabilities. Academic adjustments can be made for disabilities in some instances, but a student must be able to perform in a reasonably independent manner.

Applicants and current students who have questions regarding the technical standards, or who believe they may need to request academic adjustment(s) in order to meet the standards, are encouraged to contact Learning and Disability Resources. Procedures to apply for academic adjustments are found at the conclusion of this policy.

The holder of a health sciences professional degree must have the knowledge and skills to function in a broad variety of clinical situations and to render a wide spectrum of patient care. In order to carry out the activities described below, candidates for a degree in Physician Assistant Studies, must be able to consistently, quickly, and accurately integrate, analyze, and synthesize data.

A candidate for the Master of Science degree at ATSU-CCPAP must possess abilities and skills in seven identified categories, including observation; communication; motor; sensory; strength, mobility and endurance; intellectual, (conceptual,

integrative, and quantitative); and behavioral and social. These abilities and skills are defined as follows:

• Observation: Candidates and students must have sufficient uncorrected or corrected visual acuity, depth perception, and color perception to be able to observe demonstrations, experiments, and laboratory exercises in the basic and clinical sciences. They must be able to observe a patient accurately at a distance of 20 feet and up close. Vision must be sufficient to utilize clinical instrumentation; identify dissected nerves and landmarks on anatomical structures such as the tympanic membrane; observe motion; and evaluate posture, locomotion and movement in a clinical setting. Adequate visual capabilities are necessary for proper evaluation and treatment integration, including the assessment of symmetry, range of motion, and tissue texture changes.

• Communication: Candidates and students must possess formal and conversational speech and language skills in English. The must be able to write, read and comprehend classroom lecture and assessment materials, technical reports, diagnostic and treatment reports and professional correspondence in English. They must be able to speak, hear (with or without the use of amplification and/or other assistive technology), and observe patients in order to elicit information; examine and treat patients; describe changes in mood, activity, and posture; and perceive nonverbal communication. They must be able to communicate effectively and sensitively with patients. They must be able to communicate effectively in oral and written form with all members of the healthcare team.

• Motor: Candidates and students must have sufficient motor functions to execute movements required to perform laboratory exercises and provide clinical care. Such actions require coordination of both gross and fine motor movements and equilibrium, and functional use of the senses of touch and vision.

• Sensory: Candidates and students must have functional use of sensory skills such as tactile discrimination and proprioception for classroom, laboratory and clinical experiences. Functional use of hearing and vision are also required and are described in the sections above.

• Strength, mobility and endurance: Candidates and students must have sufficient upright posture, balance, flexibility, mobility, strength and cardiovascular endurance for standing, sitting, lifting moderate weight and participating in classroom, laboratory and clinical experiences.

• Intellectual (conceptual, integrative, and quantitative): Candidates and students must be able to engage in activities of discovery, measurement, calculation, reasoning, analysis, and synthesis. Problem solving, the critical skill demanded of health professionals, requires all of these intellectual abilities. In addition, candidates and students should be able to comprehend three-dimensional relationships and understand the spatial relationships of structures.

• Behavioral and social: Candidates and students must possess the emotional health required for full utilization of their intellectual abilities, the exercise of good judgment, the prompt completion of all academic requirements and responsibilities attendant to the diagnosis and care of patients. Candidates and students must be able to develop mature, sensitive, and effective relationships with patients. Candidates and students must be able to adapt to changing environments, display flexibility, and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, respect for

differences, interpersonal skills, interest, and motivation are all personal qualities that will be assessed during the admission and educational processes.

Additional Information

Records and communications regarding disabilities and academic adjustments with the Director of Learning and Disability Resources have no bearing on the application process. You may contact the director at Learning and Disability Resources, A.T. Still University of Health Sciences, 800 W. Jefferson Street, Kirksville, MO 63501, disabilityresources@atsu.edu, or by phone at 660.626.2774.

In addition, the CCPAP has additional technical standards that a student must meet, which include:

1. Students must be able to observe and participate in all demonstrations, visual presentations in lectures and laboratories, and computer assisted instruction. In addition, students must be able to observe laboratory evidence and microbiologic cultures, microscopic studies of microorganisms and tissues in normal and pathologic states.

2. Students must be able to observe patients accurately and completely, both at a distance and closely. This ability requires functional vision, hearing and somatic sensation.

3. Students must be able to problem solve, 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. Students must be able to analyze, integrate, and apply this information appropriately for problem solving and decision-making.

4. Students must be able to comprehend three dimensional relationships and the spatial relationships of structures.

5. Students must have sufficient use of the senses of vision, hearing and smell necessary in order to elicit information, perceive nonverbal communications, and describe changes in mood, activity and posture in addition to the psychomotor abilities to allow the performance of all skills/tests in the physical exam. Students must be able to perform inspection, palpation, auscultation and percussion.

6. Students must be able to relate to patients and family members and establish an empathetic, professional and effective relationship with patients and families including not only speech but reading and writing.

7. Students are expected to be able to communicate the results of the examination to the patient and to their colleagues with accuracy, clarity, and efficiency in oral, written and electronic formats.

8. Students are expected to possess the ability to work collaboratively with all members of the healthcare team.

9. Students must have motor function sufficient to execute movements reasonably required to provide general care and emergency treatment to patients. Such skills require coordination of gross and fine muscular movements, equilibrium and sensation.

10. Students should be able to manipulate equipment and instruments 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).

11. Students 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.

12. Students must have the emotional health to fully use their intellectual ability, exercise good judgement, and complete all responsibilities attendant to the diagnosis and care of patients.

13. Students must be able to tolerate physical, mental, and emotional stress in training and continue to function effectively.

14. Students must possess qualities of adaptability, flexibility and be able to function in the face of uncertainty. He/she must have a high level of compassion for others, motivation to serve, integrity, and a consciousness of social values.

15. Students must possess sufficient interpersonal skills to interact positively with people from all levels of society, all ethnic backgrounds, and all belief systems.

16. Students must be able to accept criticism and respond by appropriate modification of behavior.

17. Students are expected to be able to display appropriate judgment in the assessment and treatment of patients. In addition, students must be able to learn and demonstrate the ability to recognize limitations in their knowledge, skills and abilities and to seek appropriate assistance with their identified limitations.

18. Students are expected to possess perseverance, diligence, and consistency to complete the physician assistant curriculum and enter into the practice of medicine as a certified and licensed physician assistant.

Student Contact Information

Students are expected to provide the program with current address and phone number information at all times. If your address and/or phone number change, please submit information immediately to:

1. Program administrative staff - XXXXXX (XXXXXXXX)
2. Enrollment Services - Update contact information in Campus Nexus Portal ([tutorial](#))

Background Checks and Substance Use Testing

Students were required to undergo a background check prior to matriculation into the PA program. These background checks are available to clinical sites upon request to the PA department. Some clinical sites may require a more recent background check and/or urine drug screen and possibly fingerprinting. In these cases, students shall be responsible for paying any and all associated costs.

Final approval for clinical experience placement is contingent upon satisfactory review (by the program and clinical site) of information contained in the criminal background check report and/or drug screen, as required by individual clinical sites. If a student is using prescribed medication(s) that would result in a positive result in a drug screen, the program will require an official statement (on letterhead) from the prescribing provider verifying that they prescribe said medication(s) for the student. This must be furnished prior to the sample collection in a sealed envelope, and will only be opened by the program if the drug screen result is positive.

Please note that some clinical experience sites may have requirements beyond those stated in this document (eg. tobacco screening). Students who do not meet these additional requirements may not be able to be placed on those clinical experiences. This may affect the ability of the program to assign the student to required clinical experiences.

The CCPAP reserves the right to prohibit matriculation based upon the results of such testing, or the refusal to submit to such testing.

Patient Privacy

Prior to beginning clinical experiences, all students are trained in the Health Insurance Portability Accountability Act (HIPAA) medical privacy regulations. Students will not be permitted to begin clinical experiences without HIPAA training. Students must demonstrate continuous compliance with these regulations throughout the pre-clinical and clinical year. Failure to do so may result in suspension or dismissal from the program.

OSHA Training for Students

During the pre-clinical component of the program, each student receives training in accordance with the requirements of the Occupational Health & Safety Administration on Universal Precautions and learns about the appropriate methods of handling blood, tissues, and bodily fluids as well as dealing with the management of communicable diseases. As part of professional development, each student is responsible for incorporating these precautionary measures into the daily routine while taking care of patients. It is the student's responsibility to become familiar

with the policies and procedures for applying these precautions during all CCPAP-sanctioned volunteer activities, and at each of the clinical sites to which the student is assigned.

Incident Reporting

Methods of preventing infections and environmental exposures are covered within the OSHA component of the Introduction to Clinical Medicine. Each student is issued a card to be carried at all times when seeing patients, which outlines procedures to be followed in the event of exposure. Should a student sustain an injury, exposure, or other unexpected and unintended adverse event at a clinical site or during program activities, the student should report the incident immediately to the clinical instructor or supervising faculty person, complete the Site Incident Form, and receive appropriate medical care according to clinical site protocol. If there is no protocol at the clinical site, seek treatment at the nearest appropriate healthcare facility.

The student is then required to contact the program within 24 hours with a detailed history of the incident. 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 CCPAP are not covered by workers compensation insurance unless specifically identified as such in individual affiliation agreements. All costs for evaluation and treatment, if not covered by the facility or student's health insurance or the program's needlestick coverage, are the responsibility of the student.

All schools except ASDOH utilize Hartford as the "needlestick" coverage carrier. This policy is an accident policy where coverage is afforded to a student while performing activities that are part of the curriculums "covered activities". This is a supplemental policy to the student's health insurance. If a claim occurs, the Hartford policy will pay for copays or unpaid costs that the student's primary insurance coverage did not cover. The contact responsible for needlestick claims is: Bob McMullen, PA-C at jmcmullen@atsu.edu .

Liability Insurance Coverage

ATSU maintains a malpractice insurance policy for students in the clinical setting. When applicable, the program will provide clinical sites/preceptors with a certificate of coverage.

Student Employment

Because of the intensity of the PA program, students are strongly discouraged from seeking or maintaining employment during the entire program. If a PA student chooses to work during the program, it is their responsibility to ensure that employment does not interfere with or hinder academic progress. Students are NOT to be required to work for the CCPA Program. Students must not substitute for or function as instructional faculty. Students with specific prior knowledge,

experiences and skills may be allowed to assist faculty in pre-clinical and laboratory sessions to share their knowledge and skills. Students are not to be the primary instructor or instructor of record for any component of the curriculum.

Textbook Policy

It is expected that students will obtain textbooks as listed in the course syllabus. Many texts are available electronically through the A.T. Still Memorial Library. It is considered an infringement of copyright law to copy an entire textbook.

Consent for Educational Research

CCPAP tracks student data, (admissions data, grades, standardized test scores and other metrics), not only to track student progress, but as an accreditation requirement for program self-study and possible performance improvement. To this end, the program would like your consent to utilize this data for analysis and research. The results of this research may be published. Any research reports or publications resulting from this research will not reveal your name or identity and will provide results in aggregate. Your participation is completely voluntary and you can withdraw at any time. You have the option to opt out during the pre-clinical orientation in writing, and at any time during the pre-clinical or clinical year by requesting an opt-out form from program staff.

Pre-Clinical Component Specific Policies & Procedures

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 pre-clinical component of study, PA students are expected to demonstrate these traits, and at progressively higher levels, as they move towards completion of pre-clinical training. Thus, the evaluation of PA students includes consideration of knowledge, skill, and professionalism. Knowledge is assessed through oral, written and practical testing. Skill is assessed via faculty evaluation. Professionalism is assessed through cooperation with the program faculty and staff, attendance in class and at mandatory functions, participation in conferences and group exercises, and adherence to the guidelines of this program guide.

CCPAP students are evaluated by a number of methodologies to insure they are meeting the expected competencies. The following are examples of methods that may be used for formative or summative evaluation of student performance.

- Examinations (either written or computer based), quizzes and assignments
- Observation of head-to-toe physical exam
- Observation of problem specific physical exams
- Performance of Objective Structured Clinical Exams (OSCEs)
- Performance of Multiple Mini-OSCEs (MMOs)
- Performance of clinical procedures
- Performance at clinical experiences
- Tracking of patient/condition encounters during clinical year
- Discussion with preceptors at clinical sites
- Behavioral performance evaluation
- Comprehensive end-of-year examinations
- Faculty advisory reviews
- Completion of self-assessment exercises through journaling & portfolios
- Evaluation of medical documentation
- Observation of patient presentations
- Simulated Patient Encounters (SPEs)
- Clinical Examination Exercise (Mini-Cex)

Assessments

Assessment content is derived from course objectives and complemented by assigned readings, classroom, and lab experiences.

Student Expectations
CCPAP students are expected to exhibit the highest degree of intellectual honesty in the completion of examinations and assignments given by the School. Behaviors that are not consistent with this standard include, but are not limited to, having or seeking access to assessment materials before the assessment, impersonating an examinee or engaging someone else to take the assessment by proxy, copying answers from someone else or allowing one's answers to be copied, altering or misrepresenting scores, possessing unauthorized items during an assessment (e.g. recording or photographic devices, reference material, etc.).

The content of CCPAP assessment and assignments is proprietary and strictly confidential. Unauthorized retention, possession, copying, distribution, disclosure, discussion, or receipt of any assessment question, in whole or in part, by written, electronic, oral or other form of communication (including but not limited to e-mailing, copying or printing of electronic files and reconstruction through memorization and/or dictation) before, during, or after an assessment, is strictly prohibited.

Such behaviors as are defined above (within this section) are subject to disciplinary actions and sanctions outlined in the CCPAP Policies, Procedures and pre-clinical Student Program Guide, the ATSU University Catalog, and University Student Handbook.

Assessment Scheduling
Assessments will not be administered early. If you cannot attend an assessment, you are required to follow the procedure outlined in the Attendance section of this document. A make-up assessment may be given at the discretion of the instructor, who will determine the date, time, content, and format of the make-up exam.

In extreme circumstances (i.e. death of an immediate family member) and at the discretion of the course director, an assessment may be given late (after the scheduled date and/or time indicated in the syllabus).

The CCPAP reserves the right to assess students for the cost of reproducing assessments or clinical competency demonstrations (i.e. pelvic exams) where the reproduction of a particular exam or demonstration would be excessive (for example, require special scheduling of a standardized patient). Missing an assessment or assignment is not consistent with the Professional Expectations and may be cause for referral to the CCPAP SPB.

Assessment Procedures
All work on assessments, exercises and assignments are to be completed individually unless direction is given by the faculty member that an assignment may be completed as a group project or with the assistance of others.

To provide for a consistent and secure test environment, the guidelines presented in Appendix I will be followed by all CCPAP students in preparation for and during written major unit assessments.

Students are responsible for being prepared for exam day. The program will communicate to students the window of time during which they must download exams from Examplify. A penalty of one full letter grade will be applied to the exam grade for those students who have not downloaded all parts of the exam in Examplify by the end of the download window. This applies to all written exams delivered in Examplify except group exams. If a student fails to download a group exam by the end of the download period, the student will still be required to participate in the group exam, but will not be allowed to upload an exam file and will not receive group points.

In order to ensure downloads will be available on exam day, students should not update their Examplify software between the successful download of exam files and the upload of the completed exam files. If students do update after successful downloads, and thus lose their downloaded exam files, they will be assessed the one full letter grade penalty per exam.

Standardized Patient Encounters (SPEs)
These proctored graded simulations, given during the History and Physical Examination courses, focus on aspects of patient encounters and may include: history taking, physical exam skills, critical thinking, developing differential diagnoses, developing management plans, patient education, technical skills, and written and oral communication skills.

Pre-Clinical Summative Examination
A comprehensive examination assessing progress in achieving mastery of program competencies to include pre-clinical knowledge, clinical skills, and professionalism will be administered to first year PA students near the end of the pre-clinical component of the curriculum. These examinations may consist of 1) written and oral assessments and 2) simulated patient encounters (SPEs). Students must successfully pass all comprehensive assessments before beginning clinical year courses. Unsatisfactory performance on these assessments resulting in a course failure may result in delayed entry into the clinical component of the program.

Additionally, students will take the Physician Assistant Clinical Knowledge Rating and Assessment Tool (PACKRAT) examination. This statistically referenced exam will be used by students for self-assessment purposes only.

Course and Instructor Evaluations

Students are expected to complete evaluations of each course and instructor. Evaluations will be made available to students at the end of each course electronically, and students will be given a due date for completion of these evaluations. This due date will fall before the due date the program has for reporting course grades to Enrollment Services. Students who do not submit course and instructor evaluations by the due date will have their course grade held and a professionalism report filed. If the course and instructor evaluations have not been submitted as of the due date for reporting course grades to Enrollment Services, a course grade of I (Incomplete) will be issued (and the rules below for incomplete

grades will be followed). This course grade of I will only be converted to an earned grade once course and instructor evaluations are complete.

Requirements for Completing the pre-clinical Component

1. Follow all rules and regulations published by ATSU and the CCPAP
2. Complete all pre-clinical courses with a passing grade
3. Submit documentation of and maintain compliance with ATSU and CCPAP program Health Requirements
4. Maintain BLS and achieve ACLS certification prior to beginning the clinical component
5. Comply with the Professionalism section of this program guide
6. Attend all program-designated scheduled educational activities
7. Successfully complete the comprehensive pre-clinical SPE and pre-clinical comprehensive written examination

Students must complete standardized examinations as identified by the program and perform to accepted standards on these exams.

Classroom Etiquette

Activities that distract from the classroom environment and interfere with the conduct of the educational process are prohibited. Students are expected to abide by the following professional standards:

- ELECTRONIC DEVICES: Use of electronic devices during scheduled educational activities should be limited by the student to activities that enrich the educational environment without distracting the student or others in attendance. All electronic devices should be set to "silent mode" during scheduled educational activities.
- INTERNET USE: Do not send emails or instant messages, play games, surf the Internet, shop, or work on other assignments during lecture or class meetings. Failure to comply with this regulation will result in disciplinary action.
- GUESTS: Do not bring guests to class without first obtaining approval from the course director and director of pre-clinical education.
- PLAGIARISM: Do not plagiarize the work of another individual. Plagiarism includes but is not limited to the buying, receiving, or obtaining by any other means another's work or idea and submitting it as one's own.

Frequent breaks are given during the day. Please make every attempt to limit your exit and entry during class by using break time appropriately.

Clinical Experience During the Pre-Clinical Component

The pre-clinical clinical experience (DCE) program, part of the Clinical Medicine and the Critical Community Health Studies course series, is designed to provide students with the opportunity to experience the real life application of the information they are being exposed to in the pre-clinical curriculum by participation

in health fairs, local clinics and hospitals, and other health care-related sites (pharmacy, mortuary, OT/PT office, optometry, audiology, social work, etc.) The program is also a chance for students to emulate experienced providers as role models in the application of effective interpersonal skills and patient education techniques to patient care. Students will be expected to attend clinical experiences during the pre-clinical year which are scheduled during evenings, overnights, and/or weekends.

Clinical Policies & Procedures

Program Responsibilities

1. The program is responsible for coordinating (identifying, contacting, and evaluating) and assigning all student clinical experiences.
2. The program will provide clinical experience learning objectives to preceptors and students.
3. The University is committed to serving the medically underserved population. The program strives to place students in clinical experiences that will expose them to the needs of the underserved.
4. The program will protect the student and their educational learning experience if it is deemed they are in danger or in an environment not conducive to learning.
5. The program will withdraw any student from a clinical experience at the request of the preceptor when it is deemed that the student's work, conduct, or health is considered unsafe or detrimental to patients or the practice site.
6. The program will determine the final grades for students in the clinical year.

Affiliation Agreements

Affiliation Agreements (AAs) must be established between all clinical sites/preceptors and the University before students can begin their clinical experience. The AA is a legal document that addresses liability, malpractice and issues pertinent to the site location and practice type. These agreements are obtained by the program.

Clinical Experience Scheduling Process

Clinical experiences are scheduled and arranged by the program (not the student).
To be clear: Students are NOT to solicit clinical sites.
Multiple factors are considered in creating student schedules including, but not limited to the following:
- Quality of the learning experience
- Preceptor availability
- Requirements of the preceptor and/or clinical site
- Satisfaction of requirements outlined in the ARC-PA accreditation standards
- Satisfaction of the mission and vision of the ATSU CCPAP

Once the clinical experience schedule is published, clinical experiences will not be changed to accommodate student preferences or requests. Only extreme circumstances (i.e. a severe health emergency) will be considered for a potential change in the schedule, and this is at the discretion of the clinical team.

There are circumstances which may necessitate a change in a student's scheduled clinical experience (i.e. the preceptor/clinical site requests a change in schedule, preceptor terminates partnership), and these situations are managed by the clinical team on a case-by-case basis. Given the multiple variables in creating a student's schedule these circumstances may require the clinical team to rearrange a student's clinical experience schedule, to ensure that the student receives all experiences required to meet program graduation expectations. Clinical faculty understand the inconvenience schedule changes may cause and do their best to minimize these types of changes, but must be flexible in working with the available preceptors' schedules. Students are expected to be flexible and professional in such matters.

Students are not permitted to participate in two different clinical experiences during the same rotation block.

Clinical experiences are scheduled in various geographic locations and are coordinated to provide quality learning experiences, satisfy accreditation standards, and align with the CCPAP mission. Travel and residence outside of the Phoenix metropolitan area may be required, Housing, travel, food and utilities will be the student's expense.

Shadowing

Students may take advantage of shadowing opportunities during the clinical year. Shadowing requirements are as follows:
- The student is NOT to represent themselves as a student of the ATSU PA program, nor function in the capacity of a PA student. The student is NOT to wear their school assigned white coat, their ATSU scrubs, nor their ATSU badge during the shadowing experience.
- The program will not schedule, nor arrange for shadowing experiences.
- Any shadowing experience must take place on the student's own time. A student is not allowed to miss time from their assigned clinical experience, for a shadowing opportunity.
- Given that shadowing experiences are not sanctioned by the PA program and are considered a student driven private activity, the student will assume full responsibility and liability for their actions and consequences of such actions.

Student Request for Specific Clinical Experiences

Students are not permitted to arrange their own clinical experiences, but may suggest potential opportunities to the clinical team. The program is committed to developing new relationships with quality preceptors and clinical sites. Students may NOT train with preceptors who are relatives, but may train with a different practitioner in the setting where their relative is employed. Additionally, they may suggest healthcare provider relatives as a potential preceptor for other students.

Students should recognize that it may take months to arrange such an experience, and must observe the following:

1. Students should allow at least six months for the necessary paperwork to be completed.
2. The student is prohibited from contacting the clinical site without first obtaining written permission from the CCPAP clinical faculty. Once permission has been granted to contact the site, the student completes the [Clinical Site Development Request Form](#).
3. Using information from the Clinical Site Development Request Form, the clinical faculty will evaluate the potential site/preceptor to determine whether or not the site meets program expectations.

Travel, Transportation, Housing

All students will be assigned to one of our CHC partners, and may be required to move away from Santa maria for the year. Once at the CHC, completion of clinical experiences will require travel to local clinical sites. Therefore, students are required to have reliable transportation and bear the cost of all transportation during the clinical year. Our CHC partners make every effort to schedule clinical experiences at sites within a 60 mile radius of the CHC main headquarters. However, there are extenuating circumstances that may occasionally require a student to be assigned to a site that is outside of this 60 mile radius. Flexibility with regard to travel distance to clinical experience sites will be required during the clinical year. Housing during clinical experiences, regardless of location, is the responsibility of the student.

Preceptor Evaluation of Student

Preceptors evaluate student performance during each clinical experience using the mid- and final student evaluation forms. The mid-evaluation will only be used as a formative evaluation and not included in the student's calculated grade. Only the final evaluation will be factored into the final course grade. Students who fail to meet professionalism and/or clinical performance standards during a clinical experience may trigger an SPB. Refer to the [At-Risk](#) and [Professionalism](#) sections of this guide for more information.

Each aspect of student performance is graded on a Likert scale, and all grades are calculated to two decimal points.

*A pass/fail score is required for an individual clinical experience. In case of a fail score the remedy shall be remediation of the clinical experience course. The final determination will be based on the final preceptor evaluation, assignments (SOAP notes, etc) and professionalism components, in addition to the previously achieved EOR exam pass/fail.

The following actions are considered a violation of the University academic code of conduct:
- Failure to submit a completed mid-point or final Preceptor Evaluation Student

- Withholding a mid-point or final Preceptor Evaluation of Student and submitting a separate evaluation in lieu of the original
- Tampering with marks or comments made by the preceptor on either a completed mid-point of final Preceptor Evaluation of Student

The above actions will result in referral to the program's Student Progress Board and/or the University Ethics Board. Resultant action that could be taken includes, but is not limited to, academic failure of the clinical experience course, being placed on probation for unprofessional behavior, or dismissal from the CCPA program.

Evaluation Due Dates
Midpoint and final evaluations are to be completed and returned to the program by the Friday of the 2nd and 5th weeks of the clinical experience. Evaluations received later than 8:00 am the first Monday following both of these deadlines are considered late. There may be a 1/5 professionalism points deduction from the faculty professionalism component of the grade for late evaluations.

EOR Exam

At the conclusion of each required clinical experience, and the elective experience, students will be assessed using an End-of-Rotation (EOR) exam. EOR exams are aligned with the learning objectives as stated in the syllabus for each clinical experience. Students may also reference the PAEA EOR blueprints and topic lists at www.endofrotation.org. A minimum z-score of greater than -1.5 standard deviations below the national mean is required to achieve a passing grade for the exam. The student's EOR exam grade is reported as a raw score calculated using the conversion equation provided by PAEA who administers the exams. If a student does not achieve a passing score on the first attempt they will be allowed one additional attempt, which must be taken within 30 days of the first attempt. Keep in mind, the initial converted score will be utilized to determine course grades.

If a passing score is not achieved on the second attempt, the student will be issued a failing grade for the course, be identified as at-risk, and will be required to repeat the clinical experience course, which will result in a delay of graduation.

Professionalism Grading in the Clinical Year

Students are expected to consistently demonstrate the highest level of professionalism, adhering to all ATSU and CCPAP policies. The professionalism component of the final course grade is determined using items required by the program (i.e. patient logging, communication and paperwork deadlines) as well as items evaluated by preceptor(s).

Unless otherwise indicated, the program's professionalism component of the clinical experience grade will be determined on a case-by-case basis. In addition to the professionalism section of the preceptor evaluation, the program evaluates professional conduct during the clinical year using the following items:

1. Communication (i.e. responds to program communication within 2 business days, professional tone in communication, check-in during week one of clinical experience).
2. Paperwork (submission of evaluations and other program-required documents by published deadlines)
3. E*Value logging (logging within 72 hours of patient encounters)
4. Attendance (clinical experiences, Return to Campus Days [RCD], and Clinical Assessment Days [CAD])
5. Dress code adherence

Failure to comply with requirements is considered unprofessional conduct and warrants an unprofessional behavior infraction. Each infraction will result in the loss of professionalism percentage points in the currently enrolled clinical experience course.

Notable "Inconsistent" or "Not observed" marks in preceptor evaluations of student will be grounds to review the student's professionalism using an SPB. Please refer to the At-Risk and Professionalism sections of this program guide for further details.

Summative Evaluation

Prior to the completion of the clinical year, each student is required to successfully complete a summative evaluation consisting of a written exam, oral exams, and a practical examination (OSCE) and Multiple Mini-OSCEs (MMOs). These assessments are scheduled toward the end of the clinical year, within four months of anticipated graduation. A minimum z- score of greater than -1.5 standard deviations below the mean is required to achieve a passing grade for the exam. The practical portion is graded according to the same manner as all other practicals over the course of the clinical year.

Students who do not pass one or both portions on the first attempt will be identified as "at-risk". Please refer to the At-Risk section of this program guide for further details.

PACKRAT Exam

Students will take a second PACKRAT towards the end of their clinical year, in the Clinical Assessment II course. This is used as an assessment tool to help the students gain an appreciation as to their individual knowledge base, and is not a graded assessment.

Site Visits

A faculty (or adjunct faculty) member will visit each student at least one time during clinical training. Site visits provide the program with the opportunity to assess both the student and the clinical site. Additionally, these visits provide faculty with an opportunity to evaluate student progress as well as address any questions or feedback from the student and/or preceptor. The faculty member will

observe the student during a patient encounter and may observe an oral case presentation.

A student evaluation form will be completed during the site visit and placed in the student's file. Students will receive immediate and written feedback on their performance. Additional site visits may be arranged at the discretion of the clinical team.

Students must "pass" their site visit by attaining a status of "knowledge and skill level appropriate for level of training." If a student does not "pass" a site visit, they may be identified as "at-risk."

Failure of Required Clinical Experience

Students who fail a required clinical experience may have graduation delayed as they will be required to make up the failed rotation after the final Transition to Practice course.

Student Check-in Process

Student will receive an email from program staff on the first day of a SCPE with their clinical site and preceptor, reminders for assessments to complete, and a link to an electronic check-in form. All students are required to complete this form by the Friday (midnight MST) of the FIRST week of each clinical experience. The check-in process is designed to assure that the student is not encountering any difficulties with the clinical experience/preceptor(s) or site, and to monitor professionalism of the student. Failure to check in by the designated time will result in a loss of points from the clinical experience faculty professionalism grade.

Just as in many jobs after PA school, students will be required to "clock in/out" daily using E*Value. Failure to do so will be considered unprofessional behavior.

Clinical Preceptor Responsibilities

The following are guidelines and expectations regarding PA student clinical experiences. Clinical experiences should be an educational experience for the PA student. Students should refer to the Minimum Requirements of Clinical Year Patient Encounters document for each clinical experience.

All students should exhibit a baseline of medical knowledge and clinical skills that are appropriate to their current level of training. Also, it is expected that students will be capable of handling more complex clinical scenarios as they progress during the clinical year.

Please note that students must not substitute for clinical or administrative staff during supervised clinical practical experiences.

The program expects the following types of tasks to be assigned to PA students:
1. Obtaining histories and performing physical examinations.

2. Assessing common medical problems and recommending appropriate management.
3. Performing and assisting in diagnostic and therapeutic procedures.
4. Assisting the preceptor in hospital/nursing home rounds, recording progress notes, transcribing specific orders of the preceptor-as allowed by the facility.
5. Following protocols (verbal or standing orders) of the preceptor.
6. Presenting patient cases orally and in a written format.
7. Discussing the basic pathophysiologic mechanisms that have produced the signs, symptoms, and disease processes under investigation.
8. Completing assigned readings and preparing presentations as requested by clinical preceptors and/or program faculty.
9. Attending all teaching rounds and conferences.
10. Following the assigned on-call schedule when applicable.
11. Discussing/recommending treatment approach, medications, and follow-up care.

Expectations of Preceptors
1. Provide student(s) with an orientation to the office on the first day of the clinical experience. This may include a tour, introduction to EHR system, and policies/procedures as applicable.
2. Discuss clinical experience specific expectations with the student.
3. Review learning objectives and guide students to assist them in the achievement of these objectives for your discipline. These can be found in the course syllabi or on our Preceptor Support website: CCPAP Preceptor Information Site
4. During most clinical experiences* students are expected to work a minimum of 40 or more hours per week, (no more than 80 hours per week) and to accumulate a minimum of 200 hours by the end of the clinical experience.
5. Allow students to obtain patient histories, perform physical examinations, and perform procedures on patients based on your comfort level.
6. Allow student(s) the opportunity to present patient cases.
7. Discuss diagnostics, assessment, plan and patient education with student.
8. Observe the student in patient interactions.
9. Provide student(s) with regular feedback regarding their performance.
10. Complete the midpoint and final clinical experience evaluations.

*A minimum of 36 hours/week is the expectation for clinical experiences where the preceptor works 12-hour shifts (such as ER, BH).

Student Responsibilities/Expectations

The following is a list of responsibilities to which the student must adhere during their participation in the clinical year. These are in conjunction with or in addition to student expectations covered elsewhere in this program guide and the University Student Handbook, the "Expectations for Clinical Year Physician Assistant (PA) Students" document signed by the student prior to the start of the clinical year, and Minimum Requirements of Clinical Patient Encounters.

1. The student will conduct him/herself in a courteous, respectful, and professional manner at all times.
2. The student will wear proper identification as an A.T. Still University Physician Assistant Student while on campus and while participating in program assigned clinical experiences.
3. The student will be conscientious and accountable.
4. The student will be responsible for taking an active role in his/her clinical education.
5. The student will demonstrate awareness of professional limitations and will only perform activities assigned by, and under the supervision of their preceptor.
6. On the first day of the clinical experience, the student will discuss educational goals with the preceptor and review clinical experience objectives and evaluation form with the preceptor.
7. The student will adhere to the regulations and policies of CCPAP student guides.
8. The student will follow the rules and regulations of the hospital or other institutions in which he/she works and agrees to complete any additional training and/or testing required by the facilities. The student will comply with requests for information needed for credentialing in clinical facilities.
9. The student will complete all assignments (as assigned by CCPAP or preceptor(s)) and submit site and preceptor evaluations to CCPAP by stated deadlines.
10. The student will be responsible for discussing a mid- and final clinical evaluation with their preceptor(s) for each clinical experience.
11. The student will handle all confidential information in a professional and ethical manner in accordance with all applicable federal and state regulations, including HIPAA laws.
12. If a student is removed from a clinical experience either by the program or at the request of a preceptor, the student must be available to meet in-person with the clinical team and/or the Student Progress Board. The student may be placed on academic probation, dismissed from the program, and/or the graduation of the student may be delayed.
13. Students are required to keep a timely program specified clinical log of each patient encounter (updated at least every 72 hours). These records are monitored by the program using the E*Value electronic tracking system. Failure to adhere to logging deadlines will result in a reduction of the students Professionalism grade.
14. If a clinical experience requires that a student participate in supervised call time, the student is expected to do so.

Students are required to meet all defined policies and procedures included in this program guide. Failure to meet requirements will be considered a professional conduct infraction/violation and may result in disciplinary action including but not limited to removal from the clinical site, referral to the Student Progress Board, and dismissal from the program.

Student Requirements for Completing the Clinical Component

1. Follow all rules and regulations published by ATSU and the CCPAP
2. Successfully complete all required clinical experiences, CCPA6100 Clinical Assessment I, CCPA6110 Clinical Assessment II and CCPA6310 Transition to Practice
3. Successfully complete courses, examinations and assignments as directed by the program
4. Submit documentation of compliance with the CCPAP [Health and Immunization](#) policy and other site-specific requirements as needed. Keep current throughout the clinical year and update records as applicable.
5. Maintain BLS and ACLS certification throughout the clinical year
6. Comply with the Professionalism expectations as stated in the [University Student Handbook](#) and this student program guide.
7. Attend Clinical Assessment Days (participation may be different for students at different CHCs)

Adhere to the policies of ATSU, CCPAP as stated in the [University Student Handbook](#) and this student program guide.

Appendices

Appendix Table of Contents

Appendix A: Immunization Release Form

PERMISSION TO RELEASE IMMUNIZATIONS, SCREENINGS, CERTIFICATIONS AND BACKGROUND INFORMATION

I, _____(Print Name), give A.T. Still University - Central Coast Physician Assistant Program permission to release my Student Risk Management Records and Criminal Background Check results to other institutions for the purpose of securing clinical experiences as requested and appropriate. I understand that if I choose not to give permission, the program may not be able to secure clinical experiences and/or my graduation may be delayed. This permission will be enforced through the duration of my enrollment as a student at CCPAP. I may withdraw my permission at any time in writing to the Department of Physician Assistant Studies Director of Clinical Education.

I allow release of my information as stated above:

Signed _____

Date   _____

I DO NOT allow release of my information as stated above:

Signed _____

Date   _____

Page 1 of 1

Version 1.11.17

Professional Performance Evaluation
Central Coast Physician Assistant Program

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

5 = Exemplary	4 = Very Good	3 = Satisfactory	2 = Needs Improvement	1 = Unsatisfactory

Check Rating:

1	2	3	4	5	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. E*Value logging, Week 1 check-in
					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
					Exhibits ethical behaviors and conduct, is 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
1	**2**	**3**	**4**	**5**	**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
					Exhibits flexibility in dealing with needed changes
					Maintains professional appearance and hygiene
					Maintains composure during adverse interactions or situations
					Committed to ongoing professional development
1	**2**	**3**	**4**	**5**	**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 nonverbal communication
					Resolves conflicts in a manner that respects the dignity of every person involved
					Appropriately engaged in learning process
					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
					Strives to maintain healthy lifestyle and balance
					Uses respectful demeanor in discussions and in using learning tools

Page 1 of 2

Professional Performance Evaluation
Central Coast Physician Assistant Program

Student: _____ Advisor/Evaluator:_____

Evaluation Date: _____

Comments and suggestion/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.
<center>Page 2 of 2</center>

Appendix C: Learner Self-Assessment

(A, Strongly Agree; B, Agree; C, Neutral; D, Disagree; E, Strongly Disagree)

1.	I am punctual.	A	B	C	D	E
2.	My appearance represents a positive image for the profession.	A	B	C	D	E
3.	I am prepared for my assigned classes.	A	B	C	D	E
4.	I accomplish things on time.	A	B	C	D	E
5.	I understand the School's expectations.	A	B	C	D	E
6.	I can keep up with the School expectations.	A	B	C	D	E
7.	I understand the School's instructional objectives.	A	B	C	D	E
8.	I complete my assigned readings.	A	B	C	D	E
9.	I do self-initiated readings on topics I am interested in.	A	B	C	D	E
10.	I do self-initiated readings on topics I am weak in.	A	B	C	D	E
11.	I take advantage of opportunities that are appropriate to my level of training. (i.e. clinical experiences)	A	B	C	D	E
12.	My history taking skills are appropriate for my level of training.	A	B	C	D	E
13.	My physical examination skills are appropriate for my level of training.	A	B	C	D	E
14.	My clinical knowledge base is appropriate for my level of training.	A	B	C	D	E
15.	My differential diagnoses are appropriate for my level of training.	A	B	C	D	E
16.	My pharmacology knowledge base is appropriate for my level of training.	A	B	C	D	E
17.	My patient education skills are appropriate for my level of training.	A	B	C	D	E
18.	I am able to organize and communicate my findings verbally.	A	B	C	D	E
19.	I am comfortable with my overall level of ability as it relates to my role as a student physician assistant.	A	B	C	D	E
20.	My present stress level is (circle one):	Low	Medium	High		

My strengths are:

_____

_____

My opportunities for improvement are:

_____

_____

_____

My professional goals are:

_____

_____

_____   _____

Signature of Learner   Date   Page 1 of 1

Appendix D: Learner-Advisor Midpoint Progress Evaluation

Learner: _____   Date of Review: _____

Expectations

		Data Not Available	Meets	Doesn't Meet*
1	Behavior Performance: (Professional dress, Attendance and Interactions with Faculty, Staff and Peers)	_____	_____	_____
2	Performance on practice quizzes	_____	_____	_____
3	Performance on exams	_____	_____	_____
4	Participation in small groups	_____	_____	_____
5	Practical Examinations	_____	_____	_____
6	H&P Write-up/ SOAP Note Grades	_____	_____	_____
7	Patient Encounters	_____	_____	_____
8	OSCEs/MMOs	_____	_____	_____

Recommendations:

_____

_____

_____

_____

_____

_____   _____   _____
 **Signature of Student   Signature of Advisor   Date

* Any ranking of 'doesn't meet' must be accompanied by written recommendations for improvement.
**My signature does not signify my agreement with the statements, just my review.   Page 1 of 1

Appendix E: Professionalism Report Template and Example

Note: This template is used to prepare a report for advisors using data collected from faculty and staff using a form. Where you see text wrapped in double-carets (<< >>), the specific information from the form would be inserted.

Template

Greetings <<advisorname>>,

<<reportingfaculty>> submitted a report about your mentee, <<studentname>> on <<timestamp>>. This report describes the student demonstrating proficiency or deficiency in <<professionalismcategory>> (one of the facets of professionalism described in the pre-clinical Program Guide).

Proficiency in Professional Conduct:
<<proficientprofessionalconduct>>

Deficiency in Professional Conduct:
<<deficientprofessionalconduct>>

_____
Please provide this information to <<studentname>> in the manner you deem appropriate.

Example of Completed Professionalism Report

Greetings Mr. Black,

Dr. McMullen submitted a report about your mentee, Maria Björkman on 5/17/2020. This report describes the student demonstrating proficiency or deficiency in Responsibility and Accountability (one of the facets of professionalism described in the pre-clinical Program Guide).

Proficiency in Professional Conduct:
This student came to my office today to inform me they had not completed the pre-class work I had assigned for yesterday's class. The student explained why they had not completed it, and asked for guidance on how to avoid this problem in the future.

Deficiency in Professional Conduct:

_____
Please provide this information to Maria Björkman in the manner you deem appropriate.

Appendix F: Clinical Site Development Request

Student Name: _____ Date: _____

Clinical Experience Requested: 1 2 3 4 5 6 7 8

Site Name:_____

Preceptor: _____ Specialty: _____

Address:

_____

Street

_____

City/State/Zip

Phone:_____ Extension:_____

Fax:_____

Contact Person:_____

Email Address:_____

Preferred Method of Contact: _____ Phone _____ E-mail

Setting(s) in which the student will be involved (check all that apply):

_____ Outpatient _____ Hospital

_____ Inpatient _____ Emergency Department

_____ Operating Room _____ other (specify) _____

If student will have experiences in a hospital setting:

Hospital Name_____

Contact person for contracts _____ Phone_____

Has this site worked with students before? _____Yes _____No

Information that you feel is important for us to know about this site

_____

_____

_____

For CCPAP Clinical Team Use Only

Date Received _____

Reviewed by _____

Check One: Approved _____ or Rejected _____

Reason_____

Page 1 of 1

Appendix G: Minimum Requirements of Clinical Year Patient Encounters

The following minimum requirements (MRs) for patient encounters must be completed by each student by the end of the clinical year in order to graduate from the program. These requirements will be achieved throughout the course of the student's supervised clinical practice experiences. More than one requirement can be claimed per patient encounter. For example, if you see a female patient, who presents with abdominal pain and you perform a pelvic exam as well as order radiology studies, you may claim each of those requirements for that individual encounter.

A few things to note, many patient encounters will be in the settings of outpatient, emergency department and surgical but please note that students are expected to gain inpatient exposure as well. A minimum of 10 inpatient visits are required. Also, note that certain diagnostic, routine exams and counseling requirements have specific age stipulations to ensure students are seeing patients across the lifespan.

To receive credit for having achieved seeing/managing each of these conditions or performing each procedure, the student will have to submit a written report of each case, answering the questions provided in the form (found in Canvas) for each condition/experience/procedure.

Diagnostic Minimum Requirements

To receive credit, the student must have assisted or performed most or the entire patient encounter, and complete the online form located in Canvas.

General/Other
1. Medication management   10 (1 pt>65 y/o)
    (evaluating efficacy of treatment plan for a pt with > 2 medications for >2 chronic diseases)
2. Chronic pain   5 (1 pt>65 y/o)
3. End of life   1
    (DNR orders, power of attorney issues or will, or transitions to higher levels of assisted care)
4. ETOH/Drug/Tobacco   5
5. Altered mental/Cognitive status   5 (1 pt> 65 y/o)
    (Neurological – trauma, alcohol, drugs, Alzheimer's, CVA) or (Non-psychiatric reasons)
6. Physical/Emotional abuse   2

Respiratory/ENT
1. Viral URI   10
2. Otitis media (OM)   10 (2 pts < 10 y/o)
3. Otitis externa (OE)   5
4. Sinusitis   5
5. Allergic rhinitis   5

6. Acute bronchitis/pneumonia   10
7. Asthma   10
8. COPD   10

Cardiovascular

1. Hypertension   30 (5 pts >65 y/o)
2. Hyperlipidemia   10 (1 pt > 65 y/o)
3. CHF   5
4. Arrhythmia   5
5. Heart murmur   5
6. Peripheral vascular disease (PVD)   5
     (includes deep vein thrombosis DVT)

Neurology

1. Dizziness/Vertigo   5
2. TIA/Stroke   3
3. Seizure disorder   1

Gastrointestinal

1. Diarrhea   5 (1 pt < 10 y/o)
2. GERD   5
3. Rectal bleeding   1
4. Constipation   5
5. Liver disease   5

Genitourinary

1. STI/STD   5
2. UTI   5 (1 pt < 65 y/o)
3. Erectile dysfunction (ED)   2
4. Prenatal visit   5
5. Postnatal visit   1
6. Urinary incontinence   2 (1 pt > 65 y/o)
7. Vaginitis (any etiology)   5
8. Pelvic pain – female   4
9. Menstrual irregularities   5
10. Contraception management   5

Renal

1. Chronic kidney disease   5
2. Nephrolithiasis   1

Musculoskeletal

1. Osteoarthritis or rheumatoid arthritis   5 (2 pts > 65 y/o)
2. Upper extremity problem   5 (1 pt < 18 y/o)
3. Lower extremity problem   5 (1 pt < 18 y/o)

Dermatology

1. Rash or lesions (contact dermatitis, skin CA, etc.) 5 (1 pt < 10 y/o, 1 pt > 65 y/o)
2. Skin infection (bacterial, fungal)   5 (1 pt < 10 y/o, 1 pt > 65 y/o)
3. Acne   5

Hematology
1. Anemia   5
2. Anticoagulant management   5

Ophthalmology
1. Vision change   5
2. Red eye   5

Psychiatry
1. Mood disorders   5 (1 pt > 65 y/o)
2. Anxiety disorders   5 (1 pt > 65 y/o)
3. Sleep disorders   5 (1 pt > 65 y/o)
4. Cognitive disorder (ADD/ADHD, dementia, etc.) 5

Endocrine
1. DM   15
2. Thyroid disorder   5
3. Osteoporosis   5

Surgery
1. Pre-op management   5
2. Intra-op management   5
3. Post-op management   5
4. Operating Room experience   5

Undifferentiated
1. Chest pain   5
2. Fatigue   5
3. Headache   5
4. Cough   5
5. Unintentional weight gain/loss   5
6. Fever/chills   5
7. Abdominal pain   5
8. Neck pain   5
9. Back pain   5
10. Dyspnea   5
11. Neuropathy   5

Routine Examination Minimum Requirements

To receive credit, the student must have actively participated in patient care.

Routine Examinations
1. Well child check < 24 months   5
2. Well child check 2-11 y/o   5
3. Well child check 12-17 y/o   5
4. Well visit 18-64 y/o   5
5. Well visit >65 y/o   5

Counseling Minimum Requirements

To receive credit, the student must perform 100% of all counseling.

Patient Education/Counseling
1. Immunization counseling (across the lifespan)   10
2. Nutrition counseling (across the lifespan)   5
3. Pediatric Anticipatory guidance   5
4. Sexual Health Counseling   5
5. Menopause   5
6. Contraception/Family planning/HRT   5
7. Smoking cessation   5
8. Counseling for Healthy Lifestyle   5

Procedure Minimum Requirements

To receive credit, the student must perform 100% of the procedure.

Procedures/Diagnostics
1. Pap smear   5
2. Pelvic exam   5
3. Breast exam   5
4. Injections   5
5. Suture placement   5
6. Suture/staple removal   3
7. EKG interpretation   5
8. Imaging interpretation – CXR   5
9. Imaging interpretation – skeletal   5
10. Prostate/rectal exam   5
11. Hernia/testicular exam   5

Appendix H: Program Completion Form

Students must successfully complete these items in order to complete the program and progress to graduation.

Student Name _____ Student Number _____

- ❏ Successfully complete all aspects of the pre-clinical curriculum
- ❏ Gain sufficient patient exposure, evidenced by documentation of patient encounters, through supervised clinical experience with patients seeking:
  - Medical care across the life span to include infants, children, adolescents, adults and the elderly
  - Women's health (including prenatal and gynecologic care)
  - Care for conditions requiring surgical management, including pre-operative, intra- operative, and post-operative care
- ❏ Supervised clinical practice experience in settings including: outpatient, emergency department, inpatient and operating room
- ❏ Five or more weeks of supervised clinical practice experiences in the core areas of family practice, internal medicine, general surgery, women's health, pediatrics, behavioral health, and emergency medicine.
- ❏ Achieve passing score on program summative exam within 4 months of anticipated graduation
- ❏ Successfully complete the Clinical Assessment I & II courses, and the Transition to Practice course
- ❏ Successfully complete all clinical courses
  - Were the student's final evaluations rated satisfactory or above? (Y/N)_ If no, please explain below
- ❏ Complete the program in good academic standing
  - Was the student required to repeat any training? (Y/N)_
  - Any actions (including probation), restriction or limitations? yes or no If yes, please explain below
  - Did the student have any medical condition that impairs or limits the ability to safely practice? (Y/N)_
- ❏ Fulfill program professionalism expectations

- ❏ Reviewed and approved by program faculty

_____   _____
Program Chair signature   Date

Comments/Explanations

_____

_____

Appendix I: Testing Procedures

These procedures apply when preparing for a pre-clinical written exam delivered in Examplify.

1. You will be notified via email when your exams are available for download. All exams are taken in Examplify and must be downloaded before the download window closes. Any student who fails to download all exams before the close of the download window will receive a professionalism report.
2. All exams must be downloaded to the computer on which you will take your exam. The exams, once downloaded, are no longer sitting in the cloud. They are on the actual computer you will test on; therefore, once you download an exam to a computer, you will not be able to download it to a different device.
3. All exams must be taken on a laptop. Our department does not support testing on iPads, tablets, or phones.
4. All students are expected to keep their Examplify versions current. You will be notified when there is a new update to the software. You must update your version prior to downloading any exams and you should not update it again until after your downloaded exams have been taken and uploaded. If you fail to maintain a current version of Examplify, or if you download an exam and then update your version, you run the risk of losing your downloaded exams.
5. Exam days typically consist of three individual exams in the morning and one group exam after lunch. The group exam is the three individual exams combined into one test. You will be assigned groups for the group exam and you will receive those group assignments via email either the day before the exams or the morning of the exams. Groups will change for each exam day.
6. When you arrive for exam day, enter the testing classroom and check the seating chart for your testing seat assignment for that day. The chart will be posted near the classroom entrance. Once you determine your seating assignment, locate your seat, indicated by numbered cards on the desks. These seating assignments will change each testing day.
7. Place all of your belongings at the side of the room or at the front of the room. You may not have anything at your desk other than a writing utensil, earplugs, and a bottle of water. Earphones and other electronic ear devices are not permitted. You may not have any notes with you unless the instructor has indicated it is an open-note exam.
8. There will be colored scratch paper at the end of each row of desks at the beginning of each exam. Do not touch the paper until told to do so. When instructed, pass the paper down the row, each student taking one paper. You may not write on this paper until you have begun the exam.
9. Open your exams to the password screen and wait for the password to be given. Once given, enter the password and begin the exam.
10. If you are unable to view an image in a question, notify a proctor. Proctors will have printed copies of each image in all exams. You may view the

images at the front of the room in the proctor's presence. The printed images may not be taken back to your testing seat.

11. If you have to use the restroom during an exam, raise your hand and notify a proctor who will excuse you. Please note: Your testing time will not stop while you are in the restroom. The exam clock will continue to run and you will not be able to recover this time.

12. Once you have completed an exam using Examplify, upload it to ExamSoft. Make sure you get the green screen confirming the upload. Once you get the green screen, you must close your computer and leave the room. Your computer must remain at your seat. You may take your other belongings with you when you leave the room, but they must be returned to the side or front of the room when you return for your next exam. Please be considerate of those still testing and be as quiet as possible.

13. Prior to leaving the room between exams, you must turn your colored scratch paper in to the proctor. Scratch paper may not be taken out of the room. When you return for your next exam, a new pile of different colored scratch paper will be at the end of each row. Follow the same procedures outlined in #8 above for distribution and use of the new scratch paper. Each exam will have new, different colored scratch paper. You may not use the same scratch paper for more than one exam. You are responsible for bringing your own writing utensil.

14. When you return to the room for your next exam, return your belongings to the side or front of the room, return to your assigned seat, and open your next exam to the password screen.

15. When you have completed all of your individual exams, please take your computer and your other belongings with you when you leave the room. You will not be able to re-enter the exam room until it is time for the group exam.

16. When you return for the group exam, place your belongings at the side or front of the room. Find your group members and sit with them. You may not have any items with you during the group exam other than a writing utensil and a water bottle. No notes may be with you unless the professor or proctor have indicated it is OK to have them.

17. The group exam is meant to be a review for each group member; therefore, each group member must take the exam and upload an individual exam file. You must work together, but submit your own exam.

18. Once your group has completed the exam and you have uploaded your individual exam file, you may leave the testing room with all of your belongings.

19. If you feel you need academic adjustments for testing, you must contact Student Services and request such adjustments. Once you have been notified that you have been approved for testing adjustments, you must contact Ashley Purviance, via email, and let them know you have been approved and how you wish to use them (ex. for all exams, only certain exams, etc). We cannot offer you adjustments unless you inform us that you have them and wish to use them.

20. If you have academic adjustments, you will take your individual exams in the Testing Center on the second floor. You will join the rest of the class in the testing classroom for the group exam. Students with academic adjustments for testing will be on a different individual exam testing schedule

in order to allow them to join the class for the group exam; therefore it is imperative that you pay attention to the testing schedules emailed to you.

21. If you encounter an emergency or a problem with your exams during testing or upload, please inform the proctor immediately. If you encounter a problem downloading your exams, please contact Corey Cooper or Ashley Purviance immediately.

Appendix J: Routine Student Advisement Form

This form will be used by faculty advisors after each advising session unless the Midpoint Progress Evaluation is completed instead.

Meeting Date:_____
Student Name:_____   Class of:_____
Faculty Member(s):_____

Concern:

Plan of Action:

Follow-up Meeting Date:_____

Advisor Signature:_____   Date:_____

Student Signature[1]:_____   Date:_____

[1] Signature indicates that the above described concerns and plan of action have been reviewed by the student.

Updated 9-12-2017 DK, minor formatting 7-20-2018 CMC