Marywood University
Physician Assistant Program
Clinical Handbook
(Updated 3/2015)

Mission and Goals .................................................................................................................. 5
The Physician Assistant Program Mission Statement .......................................................... 5
Goals of the Physician Assistant Program ............................................................................ 5
Program Accreditation ........................................................................................................... 5
Purpose .................................................................................................................................. 6
Role of the Physician Assistant Student .................................................................................. 7
Clinical Evaluation Grading Policies and Procedures .............................................................. 7
  Academic Regulations and Evaluation Guidelines ............................................................... 7
Professionalism ..................................................................................................................... 9
  Academic Honesty Policy ..................................................................................................... 9
  Classroom Behavior ............................................................................................................. 10
  Clinical Practicum Behavior ................................................................................................. 11
  Interpersonal Behavior ......................................................................................................... 11
  Professional Image .............................................................................................................. 12
  Professional Behavior ......................................................................................................... 13
Dismissal for Non-Academic Reasons .................................................................................... 13
  Probation, Grievance Process & Harassment ...................................................................... 13
  Anti-Discrimination Policy .................................................................................................. 14
Accommodations for Students with Documented Disabilities .............................................. 15
  Social Networking/Technology/Electronic Communication Policy ..................................... 16
Attendance Policy ................................................................................................................ 17
  Leave of Absence ............................................................................................................... 18
  School Closure and Delays ................................................................................................. 19
Clinical Rotation Experience ................................................................................................. 19
  General Rotation Information .............................................................................................. 19
  Student Guidelines ............................................................................................................. 22
    Conduct ............................................................................................................................ 22
  Attire and Identification ....................................................................................................... 23
  Preceptor Guidelines .......................................................................................................... 24
    The Needs of Students and Instructors ........................................................................... 24
Malpractice Insurance ............................................................................................................ 26
CPR & ACLS Certification ..................................................................................................... 26
Learning Resources ........................................................................................................27
Job Placement ..............................................................................................................27
Extracurricular Activities ..............................................................................................28
State Laws and Regulations .........................................................................................28
Safety Concerns ...........................................................................................................28
Advisors .......................................................................................................................29
Academic Problems ...................................................................................................29
Student Health Services ..............................................................................................30
Health Records and Medical Insurance .....................................................................30
Background Screenings and Drug Testing .................................................................32
Significant Exposure Guidelines ................................................................................33
Marywood University Counseling/Student Development Center .............................34
Comprehensive Knowledge Examination ................................................................35
Withdrawal Information ..............................................................................................35
Financial Policies and Tuition Costs ..........................................................................36
Clinical Issues ............................................................................................................36
Marywood University Physician Assistant Program ..............................................37
Clinical Syllabus ........................................................................................................37
PA 610/611/612/613/614/615: 3 credits each ..............................................................37
PA 640/650: 6 credits each ..........................................................................................37
Teaching Methods .......................................................................................................41
Recommended Texts ...................................................................................................41
Requirements .............................................................................................................42
Specific Clerkship/Preceptorship Assignments .........................................................42
Clerkship I/PA 610: 3 credits ......................................................................................43
Clerkship II/PA 611: 3 credits .....................................................................................43
Clerkship III/PA 612: 3 credits ...................................................................................44
Clerkship IV/PA 613: 3 credits ...................................................................................45
Clerkship V/PA 614: 3 credits ....................................................................................46
Clerkship VI/PA 615: 3 credits ...................................................................................47
Preceptorship I/PA 640: 6 credits ..............................................................................48
Preceptorship II/PA 650: 6 credits ..............................................................................48
Cardiology Objectives ...............................................................................................50
Dermatology Objectives ............................................................................................52
Emergency Medicine Objectives (Required) ...........................................................53
Ear, Nose, & Throat Objectives ................................................................................55
Family Medicine Objectives (Required) .................................................................56
Gastrointestinal Objectives .......................................................................................58
General Surgery Objectives (Required) ..................................................................59
Mission and Goals

The Mission and Goals of the Physician Assistant program are consistent with the mission statement and educational goals of Marywood University.

The Physician Assistant Program Mission Statement

The Physician Assistant program at Marywood University is committed to providing students with an exceptional education in a supportive and nurturing environment. This professional education will include the biomedical and clinical knowledge necessary to diagnose, treat, educate and empower patients in a variety of settings across the lifespan.

This program is committed to preparing the student to deal with the changing health care environment while promoting the PA profession.

Marywood’s Physician Assistant program will emphasize the importance of sharing knowledge with future PA students while providing leadership in the community.

We acknowledge that patients are more than their physical body and so the program is dedicated to teaching the students the appreciation of the patients’ spirit as well as caring for their body.

The Marywood University Physician Assistant program has an awareness of the need for quality healthcare both regionally and globally and this program will assist our students in carrying out Marywood’s goal for all students - learning to live and practice responsibly in an interdependent world.

Goals of the Physician Assistant Program

Goal One:
1. To provide students with the knowledge, skills, and experience to be successful, competent Physician Assistants.

Goal Two:
2. To prepare students to participate as effective members of an interdisciplinary healthcare team in the promotion of health, prevention of illness and care of diverse populations across the lifespan.

Goal Three:
3. To develop effective interpersonal and communication skills within the medical community.

Goal Four:
4. To encourage students to incorporate Marywood University’s goal of learning to live and practice medicine responsibly in an interdependent world.

Goal Five:
5. Develop as professionals and leaders at the local, state, and national level, shaping future policy and legislation to promote Physician Assistant practice.

Program Accreditation

STANDARD A3.01 Program policies must apply to all students, principal faculty and the program director regardless of location.
STANDARD A3.02 The program must inform students of program policies and practices.

Marywood University’s Physician Assistant program has been granted accreditation by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).

This handbook is based on the Accreditation Standards for Physician Assistant Education. The standards provide the requirements to which each program is to be held accountable. Based on compliance with the Standards, ARC-PA will confer or deny program accreditation. For more information on the accreditation process or detailed information regarding Accreditation Standards for Physician Assistant Education, please refer to http://www.arc-pa.org/

Purpose

The purpose of this Clinical Phase of the Physician Assistant Program is:
1. To give the student supervised exposure to the many facets of the practice of medicine in various disciplines, specifically Emergency Medicine, Family Medicine, Internal Medicine, Women’s Health, Pediatrics, Surgery, Orthopedics and Psychiatry.
2. To expose students to the various aspects of primary health services across the life span, to include appropriate assessment, diagnoses, treatment, ordering and interpreting diagnostic tests, patient education, and applying the principles of preventive medicine.
3. To provide the student with hands-on teaching and supervision by clinical preceptors in actual clinical settings.
4. To initiate and foster the process of self-learning in the development of a competent health care provider.
5. To develop a realistic awareness and understanding of the role of the Physician Assistant as a functioning member of a health care team.
6. To facilitate interpersonal and communication skills that results in the effective exchange of information and collaboration with patients, their families, and other health professionals.
7. To provide students the opportunity to interact with patients seeking medical care across the life span, to include infants, children, adolescents, adults, and the elderly.
8. To provide students with the experience of providing care for conditions requiring surgical management, pre-operative, intra-operative, and post-operative care, management of emergent, acute and chronic conditions, preventative care, care for behavioral and mental health issues and women’s health issues to include prenatal and gynecologic care.

**Role of the Physician Assistant Student**

The Physician Assistant (PA) student shall be considered the extension of his/her specific Preceptor and is permitted to perform tasks delegated to him/her by the Preceptor. Although the specific role of the PA student will vary from rotation to rotation, there are certain broad procedures which should be followed by both Preceptor and PA student.

There are two basic reasons for the establishment of these procedures:

1. To monitor the activities of the student in a manner that will afford the Preceptor together with the PA Program faculty, a continual and objective assessment of the student’s performance throughout his/her practical training.
2. To provide a mechanism to enable the PA Student to be a lifelong learner. The continuous feedback system of the clinical phase will provide students with the foundation necessary to continue throughout their medical career and life in accordance with the Mission statement and values of Marywood University and the PA Program.

**Clinical Evaluation Grading Policies and Procedures**

Students’ clinical evaluations and grades are the responsibility of the Clinical Director, Coordinators, and Preceptors. Final grades will be based on knowledge of the subject matter as determined through testing and/or assessment and observation of student performance by the Clinical Director, Coordinators, and Preceptors. It will also be based on professional considerations such as attendance, punctuality, dependability, initiative, ability to accept and utilize constructive criticism, ability to relate to other health care professionals, and adherence to professional standards and the profession’s code of ethics.

**Academic Regulations and Evaluation Guidelines**

Final Letter Grades are assigned at the completion of each Clerkship and Preceptorship.

1. In the computation of grade point averages, the following system is used:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Range</th>
<th>GPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>97-100</td>
<td>4.0</td>
</tr>
<tr>
<td>Grade</td>
<td>Score Range</td>
<td>GPA</td>
</tr>
<tr>
<td>-------</td>
<td>-------------</td>
<td>-----</td>
</tr>
<tr>
<td>A-</td>
<td>92-96</td>
<td>3.67</td>
</tr>
<tr>
<td>B+</td>
<td>88-91</td>
<td>3.33</td>
</tr>
<tr>
<td>B</td>
<td>84-87</td>
<td>3.0</td>
</tr>
</tbody>
</table>

_B is the minimum acceptable grade for the Physician Assistant Program’s Clinical Phase._

*These guidelines may be modified either at the discretion of the program faculty and/or Academic Advisory Committee.*

2. Students must achieve a 3.0 or higher for each Clerkship and Preceptorship to advance to the next clinical rotation in good standing.

3. In the event a student fails an end-of-rotation (EOR) examination, remediation will be available. Students will be limited to 2 retests (following remediation) of EOR examinations in the clinical phase. Failures will result in Academic Probation, review by the Academic Performance Committee, and the possibility of Program dismissal.

4. Daily Activity Logs via Typhon are required to be recorded by students for every clinical rotation. Activity Logs are graded as 10% of the final grade for the current clinical rotation.

5. It is the students’ responsibility to be familiar with Typhon and record all patient encounters and clinical skills within the specified timeframe. These will be evaluated throughout each clinical rotation/experience.

6. Clinical paperwork assignments change per rotation. (See specific assignments beginning on pg. 38). All written assignments, to include a Preceptor evaluation, will be graded as part of the final grade for the current clinical rotation.

7. EOR examinations will be administered after every clinical rotation. All EOR will be given at 10 AM on the first EOR day. This examination is worth 30% of the final grade for the current clinical rotation. * EOR exams will be computerized examinations as determined by the PA faculty throughout the clinical phase.

8. Mid-Point Clinical Evaluations are required for each student for each clinical rotation and preceptorship (excluding 3 week rotations for OBGYN and psychiatry). It is the students’ responsibility to provide the Preceptor(s) the Evaluation Form(s) at least one week prior to the end of week 3 of the clinical rotation to allow ample time for completion. Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.

9. Preceptor Evaluations are required for each student for each clinical rotation. It is the students’ responsibility to provide the Preceptor(s) the Evaluation Form(s) at least one week prior to the end of the clinical rotation to allow ample time for completion. Students must submit the Evaluation Form with all EOR paperwork on the EOR day. The Preceptor Evaluation is worth 30% of the final grade for the current clinical rotation.
10. The PACKRAT (2) will be administered at the end of Preceptorship I instead of the EOR examination. The PACKRAT will not be part of your EOR grade. The PACKRAT is used as a self-assessment tool.

11. All papers must be submitted as a Microsoft Word® document in APA style using appropriate citation when necessary. Details of this format can be found on Marywood University’s Library webpage at https://owl.english.purdue.edu/owl/resource/560/01/

12. All students must complete a minimum of 100 Exam Master® questions related to the specialty for each clerkship. Students must document 300 questions via Exam Master® during Preceptorships. All documentation of Exam Master® questions is to be submitted at each EOR before the EOR examination.

13. Requests for clerkships are due at the beginning of the spring semester prior to clinical rotations. Requests for preceptors/sites for both Preceptorships are due at the end of clerkship 4. Students are not required to set up their own rotations. Failure to adhere to published deadlines may result in a lower grade in the corresponding clerkships as determined by the faculty.

**Professionalism**

**Academic Honesty Policy**

The Marywood University community functions best when its members treat one another with honesty, fairness and trust. The entire community, students and faculty alike, recognizes the necessity and accepts the responsibility for academic honesty. Students must realize that deception for individual gain is an offense against the entire community.

Students have a responsibility to understand and adhere to the University's Academic Honesty Policy. Violations of this academic honesty statement or the intent of this statement carry consequences. Any violations of academic honesty in the clinical rotations will result in the assignment of a grade of 0 (zero) for the coursework in which the infraction occurred. Marywood University’s Academic Honesty Policy can be found at http://www.marywood.edu/policy/detail.html?id=167071&crumbTrail=Academic%20Honesty&pageTitle=Policies%20and%20Procedures%20Manual:%20Academic%20Honesty

**Academic dishonesty may result in immediate dismissal from the PA Program as determined by the Academic Performance Committee.**

Cheating and plagiarism are behaviors which are destructive of the learning process and of the ethical standards expected of all students.

1. **Cheating** is defined as (but not limited to) the following:
   A. having unauthorized material during an examination
B. copying from another student or permitting copying by another student in a testing situation
C. completing assignments for other students (e.g. examination, paper, laboratory or computer report)
D. submitting out-of-class work for an in-class assignment without faculty knowledge
E. changing grades
F. unauthorized retention of examinations
G. unauthorized submission of the same paper in two different classes
H. inventing data, unless a class exercise, or falsifying an account of data collection
I. unauthorized tampering with electronic record
J. violating privacy rights on computer software
K. copying in any way of previously taken examination materials is strictly prohibited
L. receiving material from previous PA students concerning examinations

2. **Plagiarism** is defined as the offering as one’s own work; the words, ideas, existing imagery, or arguments of another person without appropriate attribution by lines for the correction of accurate or misleading data through informal and formal hearings. A policy statement explains in detail the procedures to be used by Marywood University for compliance with the provisions of the act. Copies of the statement can be found in the Offices of the Registrar and Deans. Plagiarism is considered unprofessional by the Physician Assistant Program and therefore may result in dismissal from the Physician Assistant Program. All students must complete the plagiarism module and examination found at [https://www.indiana.edu/~istd/plagiarism_test.html](https://www.indiana.edu/~istd/plagiarism_test.html).

**Classroom Behavior**

If a student demonstrates a basic incompatibility with and/or inability to perform professionally in the program’s classroom based on requirements, they may be dismissed from the program. A student may demonstrate an overall pattern of incompatibility with and/or inability through (but not limited to) the following:

1. Inability to follow instructions as demonstrated by being consistently late in meeting academic deadlines and failing to complete requirements.
2. Being consistently late and/or absent from required classes.
3. Failure to respect other’s opinions in classroom discussions as demonstrated by verbal abuse, and pejorative labeling of others.
4. Disrespect of faculty and/or classmates either in or out of the classroom setting.
5. Unprofessional behavior in or out of the classroom.
6. Cell phones are not to be used at any time during class. This includes making or receiving phone calls, and/or text messaging, and/or surfing the internet. In addition, cell phones cannot be used as a calculator, if a calculator is needed, one
must be brought to class. Cell phones should be turned off or silenced so they do not interrupt classroom activities.

**Clinical Practicum Behavior**

Appropriate clinical practicum behaviors are necessary to promote learning while maintaining professional, respectful interactions among students, preceptors, site staff, faculty, and colleagues. If a student demonstrates a basic incompatibility with and/or inability to perform the program’s clinical practicum requirement, that student may be dismissed from the program. This incompatibility/inability may be demonstrated through (but not limited to) the following:

1. Persistent noncompliance with the policies of the program as outlined in the student manual to include unexcused absences, excessive tardiness and inability to maintain the required GPA.
2. Inappropriate behavior. This may include but not limited to the inability to accept the student role in the learning process, persistent angry or hostile mood, recurring behavior or mood conflicts with the staff, preceptors or faculty to illustrate a few.
3. Persistent failure to appear at the designated practicum site at the prescribed time and/or days.
4. Failure to meet EOR deadlines.
5. Failure to complete assignments in a timely manner.
6. Current illegal activities (including but not limited to) drug trafficking, persistent trouble with the law, fraud on admissions documents, sexual harassment, assault, intentional intimidation of others, violations of the personal rights of others.

**Interpersonal Behavior**

Appropriate interpersonal behaviors are pleasant and professional to maintain and perpetuate an environment of respect and collegiality. If a student demonstrates interpersonal behaviors which are incompatible with the program’s classroom or clinical practicum requirements, they may be dismissed from the program. Students may demonstrate an overall pattern of incompatibility with and/or inability through the following but not limited to:

1. Demonstrated inability to establish and maintain positive and constructive interpersonal relations including: the inability to deal with conflict and the inability to demonstrate appropriate assertiveness.
2. Demonstrated emotional instability and/or immaturity as measured through repeated difficulties in forming professional relationships with faculty, staff, other practicum personnel, and peers (e.g. physical or verbal abuse, acts of relational impropriety, and/or criminal violation of the personal and/or property rights of others).
3. Demonstrated persistent personality deficits that consistently and significantly interfere with student’s learning or classroom integrity.
4. Demonstrated behaviors that show symptoms of sufficient dysfunction or personal distress so as to compromise the patient/provider integrity, or the inability to function as a member of the health care team.

**Professional Image**

The Professional Image is designed to maintain and perpetuate professionalism among students throughout the program. By adhering to professional standards of dress, safety, and hygiene students will project competence and credibility during their interactions with patients, colleagues, and the general public. Professional dress code includes, but is not limited to, the following criteria:

1. Clothing should allow for adequate movement during patient care, and should not be tight, low-cut, or expose the trunk or undergarments.
2. Watches, wedding bands and / or engagement rings are permissible. No excessive necklaces or bracelets, no more than 2 earrings per ear, no dangling or oversized, large earrings.
3. No other body piercings are permitted, to include nose and tongue piercings.
4. Fingernails should be kept clean and trimmed.
5. Students may not exhibit offensive tattoos. Students may be required to cover tattoos.
6. No excessive or heavy perfumes or aftershaves / colognes.
7. Hair should be clean and arranged so as not to interfere with patient care. Hair should be of a color that occurs naturally.

If a student demonstrates significant difficulties in forming a professional image that deems his/her as incompatible with or unable to fully interact in or complete the program’s classroom and field practicum requirements, or to productively engage with future patients and colleagues, they may be dismissed from the program. Students may demonstrate significant difficulties in forming a professional image through but not limited to the following:

1. Severe and persistent problems with personal hygiene which inhibit interaction with others. This may stem from a severe lack of self-awareness, emotional instability/immaturity, a cultural incongruence with accepted minimum professional standards and/or disregard for minimum public health standards.
2. Severe and persistent disregard for university dress codes of a degree to be considered disruptive to the learning environment or run counter to the professional integrity of the university or the Program.
3. Seriously inappropriate affect as demonstrated by extremely withdrawn personality style, persistent incongruent affective responses in the classroom and/or clinical site, violent and inflammatory responses, or persistent angry and hostile mood.
4. Personal problems of such magnitude that the student is unable to work effectively with colleagues and/or patients.
Professional Behavior

In addition to mastery of cognitive skills and knowledge, comprehensive evaluation of student’s performance in clinical medicine includes appraisal of performance skills and attitudes. Students are evaluated on the following:
1. Adherence to professional codes of ethics (Appendix A)
2. Sensitivity to patient and community needs
3. Ability to work with and relate to peers, faculty and other members of the healthcare team
4. Attitude
5. Attendance and punctuality
6. Professional demeanor
7. Appearance/Image
8. Appropriate dress—clean and pressed while wearing a white lab coat bearing Marywood University Physician Assistant program patch.

Dismissal for Non-Academic Reasons

Students may be dismissed for reasons other than academic deficiency in either the didactic or clinical phase of the physician assistant program. A student’s advancement in the program may be delayed or terminated for professional performance criteria. The policies and practices in this area have been established and are abided by in order to protect the rights of students, the well-being of patients, the reputation of the practicum sites, and the integrity of the profession.

Probation, Grievance Process & Harassment

STANDARD A3.11 The program must define, publish and make readily available to faculty and students policies and procedures for processing student grievances and allegations of harassment.
STANDARD A3.17 d, e, g The program must define, publish, and make readily available to students upon admission academic performance and progression information to include:
   d) policies and procedures for processing student grievances
   g) policies and procedures for processing allegations of harassment

Students dismissed from the program or those who are placed on probation for reasons such as academic, clinical, or unsafe practices may appeal the action.
   1. The student will receive a letter from the PA program outlining the action taken by the program and the reasons for that action.
   2. The student may contact his/her advisor for further explanation of the action.
   3. The student may appeal the decision in writing to the program director within seven (7) days of having received the letter of action.
4. The program director may invite the student to attend and present his/her position to the Physician Assistant Academic Performance Committee.

5. The Physician Assistant Academic Performance Committee decides on a course of action and communicates the decision and reasons for the action in writing to the student and the Dean of the College of Health and Human Services.

6. The student may then appeal in writing as per the Marywood University Academic Appeals Policy. More information regarding academic appeal can be found at http://www.marywood.edu/studenthandbook/policies-and-procedures/index.html?id=247073&crumbTrail=Grade%20Appeals&pageTitle=Grade%20Appeals.

Anti-Discrimination Policy

Marywood University (the “University”) declares and reaffirms a policy of equal educational and employment opportunity and non-discrimination in its educational programs and all other activities that it operates both on and off University property. Marywood University does not condone and will not tolerate discrimination, harassment, or assault by any member of the faculty, staff, administration and student body as well as volunteers on and visitors to the University upon another individual, regardless of whether the action is based on race, sex (including sexual harassment and sexual violence), color, gender, national or ethnic origin, age, creed, ancestry, religion, disability, or any other legally protected status. Anyone believing she/he has been the victim of or a witness to, or otherwise has reason to believe or become aware of, discrimination, harassment or assault by, or involving, any member of the University community, guests or visitors on University property or any property controlled by the University, including off-campus University sponsored events, should report the incident as soon as possible after the conclusion of the incident to the Title IX Coordinator or Deputy Title IX Coordinator or a member of the University faculty, staff or administration.

The University’s Anti-Discrimination Policy applies to all faculty, staff, administration, supervisors, employees, students, volunteers and visitors both on and off campus property. Off-campus property includes, but is not limited to, University programming, internships, study abroad programs and sporting events.

In order for the University to be able to remedy alleged discrimination, harassment or assault, it is imperative that claims are immediately brought to the attention of administration. University faculty, staff and administrators who know, or in the exercise of reasonable care should have known, of discrimination, harassment or assault and fail to appropriately handle the report may be subject to disciplinary action. Failure to report claims of such conduct hamper the University’s ability to take appropriate steps to remedy such situations. Every report of perceived discrimination or harassment will be fully investigated and corrective action will be taken when appropriate. Marywood University will not allow any form of retaliation against individuals who report claims of
discrimination or harassment or who cooperate in the investigation of such reports in accordance with this Policy. The University strongly encourages and expects all members of the University community to report suspected or actual incidents involving discrimination, harassment and violence.

Contact information for the Title IX Coordinator and Deputy Title IX Coordinator follows:

Dr. Patricia E. Dunleavy, Assistant Vice President for Human Resources, 
Title IX Coordinator 
dunleavy@marywood.edu 
570-348-6220 
570-961-4740 fax 
86 Liberal Arts Center

Dr. Amy Paciej-Woodruff, Dean of Students 
Deputy Title IX Coordinator 
apaciej@marywood.edu 
570-340-6016 
570-340-6037 fax 
107C Nazareth Student Center

Marywood University is committed to taking all necessary steps to comply with any obligations it may have under Section 504 of the Rehabilitation Act, the Americans with Disabilities Act, and Title IX of the Civil Rights Act of 1964, as amended. These are explicit civil and legal applications of the formulation of beliefs already cherished in Marywood University’s religious commitment, objectives, and practices.

Accommodations for Students with Documented Disabilities

Marywood University complies with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 as amended by the ADA Amendments Act of 2008. Students with disabilities who need special accommodations must submit documentation of the disability to the Office of Disability Services, Liberal Arts Center 223B, in order for reasonable accommodations to be granted. The Office of Disability Services will partner with students to determine the appropriate accommodations and, in cooperation with the instructor, will work to ensure that all students have a fair opportunity to perform in this class. Students are encouraged to notify instructors and the Office of Disability Services as soon as they determine accommodations are necessary; however, documentation will be reviewed at any point in the semester upon receipt. Specific details of the disability will remain confidential between the student and the Office of Disability Services unless the student chooses to disclose or there is legitimate academic need for disclosure on a case-by-case basis. For assistance, please contact Diane Webber, Associate Director of Disability Services, at (570) 348-6211 x2335 or dtwebber@marywood.edu.
Social Networking/Technology/Electronic Communication Policy

The PA Program faculty recognizes that social networking websites and applications, including but not limited to Facebook, MySpace and Twitter, are an important and timely means of communication. However, students who use these websites and other applications must be aware of the critical importance of privatizing their websites so that only trustworthy “friends” have access to the web sites/applications. They must also be aware that posting certain information is illegal. Violation of existing statutes and administrative regulations may expose the offender to criminal and civil liability, and the punishment for violations may include fines and imprisonment. Offenders also may be subject to adverse academic actions that range from a letter of reprimand to probation to dismissal from the Program.

The following actions are strictly forbidden:

1. In your professional role as a care-giver, you may not present the personal health information of other individuals. Removal of an individual’s name does not constitute proper de-identification of protected health information. Inclusion of data such as age, gender, race, diagnosis, date of evaluation, or type of treatment or the use of a highly specific medical photograph (such as a before/after photograph of a patient having surgery or a photograph of a patient from a medical outreach trips) may still allow the reader to recognize the identity of a specific individual.

2. You may not report private (protected) academic information of another student or trainee. Such information might include, but is not limited to: course or clerkship grades, narrative evaluations, examination scores or adverse academic actions.

3. In posting information on social networking sites, you may not present yourself as an official representative or spokesperson for the PA Program.

4. You may not represent yourself as another person, real or fictitious or otherwise attempt to obscure your identity as a means to circumvent the prohibitions listed above and below.

5. You may not utilize web sites and/or applications in a manner that interferes with your official work commitments. This is, do not tie up a hospital or clinic computer with personal business when others need access to the computer for patient-related matters. Moreover, do not delay completion of assigned clinical responsibilities in order to engage in social networking.

In addition to the absolute prohibitions listed above, the actions listed below are strongly discouraged:

1. Display of vulgar language.

2. Display of language or photographs that imply disrespect for any individual or group because of age, race, gender, ethnicity or sexual orientation.

3. Presentation of personal photographs or photographs of others that may reasonably be interpreted as condoning irresponsible use of alcohol, substance abuse or sexual promiscuity.
Please be aware that no privatization measure is perfect and that undesignated persons may still gain access to your networking site. A site such as YouTube, of course, is completely open to the public. Future employers often view these network sites when considering potential candidates for employment. Therefore, think carefully before you post any information on a website or application. Always be modest, respectful and professional in your actions.

When communicating electronically with the Program, only Marywood University email accounts will be recognized for student communication. In accordance with proper technology and professional communication, texting between faculty and students is prohibited.

Violations of these guidelines may be considered unprofessional behavior and may be the basis for disciplinary action.

**Attendance Policy**

In so much as motivation, enthusiasm and commitment to the study of medicine are directly reflected in the discipline of prompt, regular attendance and preparation for classes, the program has an important obligation to maintain a positive rapport with the visiting physicians and other health care professionals who are adjunct faculty of the program. These relationships are vital to the ongoing success and development of the program and the support of the clinical clerkship experiences. Attendance of class is a minimum demonstration of this commitment. Given the overall importance of class attendance, the following policy will be enforced:

1. Attendance is **mandatory** in all classes, labs, seminars, small group discussions, field experiences, Clerkships, Preceptorships and any other activities designed by the program staff and administration.
2. Students are expected to be in their respective classes, labs, small groups, etc. at the scheduled time ready to begin class participation (i.e. properly prepared for labs regarding equipment and dress).
3. Tardiness will be addressed by the Physician Assistant Program faculty and disciplined appropriately. Tardiness disrupts the entire class and it will not be tolerated.
4. An unexcused absence is defined as any absence from class or clinical practicum without prior approval from the instructor or program administrator.
5. Unexcused absences in any class may automatically lower the final letter grade achieved in that class as per the instructor or clinical practicum. Three unexcused absences may result in dismissal from the program.
6. Any examination missed due to an unexcused absence will not be graded higher than 80%, at the discretion of the faculty member.
7. Any examination missed during an absence due to an illness or major life event must be made up within 24 hours of return to class or as otherwise scheduled by the instructor or academic coordinator.
8. Friends or family members are not permitted in classrooms, labs or at clinical sites.
9. Any absence due to illness during the didactic phase must be reported to the academic coordinator as soon as possible. It is the responsibility of the student to obtain and missed work or make-up assignments. Any absences during the clinical phase must be reported to the clinical site and the Clinical Director prior to the start of the clinical day. This should not occur after the absence has occurred unless in the case of an emergency.
11. Any student missing two (2) or more days total from class or clinical during any semester due to physical or emotional illness will be required to submit a letter from their physician. The program director, academic coordinator and/or clinical director will review the letter and determine the student’s ability to continue in the program.

Leave of Absence

A written request to the Program Director must be made when a leave of absence is needed. Leave of absences may be granted at the discretion of the faculty within the following guidelines.
1. The student is in good academic and clinical standing.
2. The student has successfully completed at least one semester of coursework.
3. The requested leave of absence will not exceed one year.
4. Each student will only be allowed one leave of absence while matriculating in the Marywood University Physician Assistant Program.
5. Re-entry requirements will be determined by the program faculty and may include repeating coursework.
6. Permission to reenter will be granted on a space-available basis and a case-by-case basis.
7. Re-entry is not automatic.
8. Documentation of satisfactory resolution of the problem necessitating the leave of absence must be provided to the PA program prior to the return to coursework.

A leave of absence may be granted for medical illness. The student must meet with the program director to discuss the problem. The attending physician should supply proper documentation regarding reason for leave of absence plus expected duration of disability. If a leave of absence is needed for a situation other than illness, the student will meet with the program director. A leave of absence will be granted, only if deemed necessary.

A maximum one (1) year leave of absence may be applied for by a student in either phase (didactic or clinical) of the program. Approval of leave will be dependent upon academic status and reason for request. Any period of time in excess one year will require the student to repeat the entire program beginning with the didactic year. All decisions concerning Leave of Absence will be made by the principal faculty of the program. All students must present a written release from their primary care provider
stating that they are cleared to return the program and they are able to abide by the technical standards.

**School Closure and Delays**

In the event of the University closing (i.e. weather emergency or other unforeseen problems) there will be no classes.

1. Any canceled or missed class may be scheduled and made up at another time.
2. Any absences during the clinical phase must be reported to the clinical site and the Clinical Director prior to the start of the clinical day. This should not occur after the absence has occurred unless in the case of an emergency.

Information for the E2Campus notification system can be found at [https://www.e2campus.net/my/marywood](https://www.e2campus.net/my/marywood). It is mandatory that all students enroll in this service in order for emergency information to be disseminated in a timely manner throughout the campus.

**Clinical Rotation Experience**

**General Rotation Information**

1. Congratulations on your performance thus far….for the past 12 months you have been learning the science of medicine, now you will begin the practice of the art of medicine. Now is the time to make the transition from theory to practice and from simulated cases to real patients.
2. Remember, you are a guest in the Preceptors’ ‘home’ and must act like one. During the clinical education experience, the PA student is expected to behave and perform in a manner consistent with the highest standards expected of a health care professional. The PA student must be respectful to all people at all times.
3. The clinical phase of the PA Program consists of 6 Clerkships and 2 Preceptorships. The Clerkships include clinical rotations in each of the following: Emergency Medicine, General Surgery, Orthopaedics, Pediatrics, Women’s Health, Psychiatry, and an elective. The Preceptorships include experience in Family Practice and Internal Medicine. Students may elect to apply to a Specialty track in the area of Surgery, Emergency Medicine, Hospitalist, Orthopaedics or Pediatrics. This experience will be scheduled during Preceptorship I.

**STANDARD A3.03 Students must not be required to provide or solicit clinical sites or preceptors. The program must coordinate clinical sites and preceptors for program required rotations.**

4. Students have the opportunity to request preceptors/sites. Students are not required to find preceptors/sites. Schedules will be finalized by the Clinical Director/Coordinators only after preceptors/sites are fully assessed by program faculty. All student requests may not be able to be utilized based on programs evaluation.
5. Remember to contact your preceptor/clinical site at least 1 week PRIOR to the start date of your rotation. Keep in mind all sites are aware you are coming however, this is a courtesy call to remind them. This is also a great opportunity for you to inquire about start times, scheduling, directions, and any other details related to the rotation.

6. It is helpful to give Preceptors and or the office staff a copy of the business card of the Clinical Coordinator(s) and/or Clinical Director when you arrive. This will also be a good time to remind them that during week 3 or 4 of your rotation the Clinical Director/Coordinators may need to complete a site/phone visit with the Preceptor.

7. Remember to record your clinical skills daily whenever possible. You will only have a 15 days window to log cases via Typhon Clinical Tracking Program.

8. You will need to check your Marywood email daily for any announcements from the Clinical Director and Clinical Coordinators.

9. Mid-rotation evaluations are to be completed first by the student and then the preceptor. These allow for mid-rotation feedback and an opportunity to discuss the plan of action for the remainder of the clinical experience. It is the student’s responsibility to submit mid-rotation evaluations to the program midway through the rotation. All clinical rotations except Women’s Health and Psychiatry will require a mid-rotation evaluation. Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.

10. The last 2 days of each rotation are the EOR days. All EOR assignments are mandatory and must be submitted prior to taking the EOR examination. Students are required to return to Marywood University after each clerkship and preceptorship and attend all EOR activities. Students should expect a schedule from 8:30AM through 4:30PM. In addition, additional mandatory activities will be scheduled at the end of each Preceptorship. Attendance at the Board Review Course (at end of Preceptorship II) is mandatory.

11. All clinical paperwork is due prior to taking the EOR examination.

12. Students are expected to be available for clinical experience whenever the Preceptor is available. Therefore, often times students are expected to be available on evenings or weekends, or to spend more time than originally planned during certain periods. A preceptor should expect a student to be dependable and prompt, and to demonstrate professional integrity. The clinical schedule does not follow the Marywood academic schedule.

13. Self-directed learning is an important aspect in the education of any health care provider, especially in the clinical phase of the PA Program. The PA student should show a willingness to learn, an interest in assuming professional responsibilities, and initiative in approaching his/her work. It is important for the PA student to use their time wisely and to read guidelines and instructions in a thorough and efficient manner.

14. Ask questions! Clinical Preceptors not only like to be stimulated, it shows them that you are interested in learning. Keep in mind there are better times to ask questions,
than others. Use your best judgment, be appropriate, or make a list of questions to ask at the end of a busy day.

**STANDARD A3.06 Students must not substitute for clinical or administrative staff during supervised clinical practical experiences.**

15. PA students cannot be used to substitute for hospital or office staff. Student may **NOT** receive monetary or other compensation for their services at a clinical site.

**STANDARD B3.05 Instructional faculty for the supervised clinical practice portion of the educational program must consist primarily of practicing physicians and PAs.**

**STANDARD B3.06 Supervised clinical practice experiences should occur with: a) physicians who are specialty board certified in their area of instruction, b) PAs teamed with physicians who are specialty board certified in their area of instruction or c) other licensed health care providers experienced in their area of instruction.**

16. Preceptors during the clinical phase are primarily practicing physicians and physician assistants. On occasion, you may be assigned to a preceptor other than a physician or PA. For instance, you may be assigned to a Nurse Practitioner during portions of your Women’s Health rotation. Any questions, please contact the Clinical Director/Coordinators as soon as possible.

17. The PA student at Marywood University is covered by liability (malpractice) insurance; however, the Preceptor has ultimate legal responsibility for the actions of the PA student while under his supervision. Students are not allowed to see patients in an office or clinic setting without the clinical preceptor present.

18. Students are referred to individual institutional policy regarding the types of entries which can be made by students on medical records. All students’ entries must be countersigned by the supervising physician. If there is any doubt as to the correct format, students must consult with their immediate supervisor.

19. All students will maintain Health Insurance Portability and Accountability Act (HIPAA) compliance regulations per facility.

**STANDARD B3.01 PA students must be clearly identified in the clinical setting to distinguish them from physicians, medical students and other health profession students and graduates.**

20. Name tags must be clearly displayed to ensure student identification in the clinical setting. This also serves to distinguish the student from physicians, medical students, and other health profession students and graduates.

21. Patient data will remain confidential and is not to be documented on any assigned/completed paperwork to be collected by the clinical coordinator.

22. Using collective judgment, the faculty reserves the right to recommend the withdrawal or dismissal of a student whose health, scholastic standing, clinical
performance, or professional conduct makes it inadvisable for that student to continue in the program.
23. Full-time or part-time employment is discouraged because of the rigors of the program. A student’s clinical schedule will not be altered or reduced to accommodate outside employment.

**STANDARD A 3.04 PA students must not be required to work for the program.**

24. PA students are not required nor permitted to work for the PA program.
25. It is the students’ responsibility to register for each semester at the appropriate time.
26. All students are required to notify the program administrative assistant of any address or phone number changes as soon as possible during the didactic and the clinical phases of the program.
27. All students are required to document clinical skills, patient logs, data, etc. via Typhon Clinical Tracking Program. All students will receive Typhon training and will be given a unique ID and password. See Clinical Director/Coordinators for more information or visit [www.typhongroup.net/marywood](http://www.typhongroup.net/marywood).
28. Once students’ clinical schedules are confirmed with preceptors, site and student, no changes will be made unless due to unforeseen emergency on the part of the preceptor and/or site/facility.
29. All students will have a minimum of two (2) site visits per clinical phase.

**Student Guidelines**

**Conduct**

1. Students are required to spend a **minimum** of 40 hours per week on each clerkship/clinical service to which they are assigned. In addition, each student may take call, usually in the same schedule as the preceptor to whom he/she is assigned.
2. In the event of an illness, students are required to notify both the Clinical Director and the Clinical Preceptor prior to the start of the clinical day unless in the case of an emergency. Make up work for all unexcused absences may be assigned by the Clinical Director or Preceptor.
3. When a student would like to be excused from clinicals for a non-emergency cause (e.g. professional or educational conferences, job interviews, etc.), a written request to the Program Director must be made as at least 4 week prior to the event. All such absences must have prior program approval before a student may notify the clinical supervisor. Failure to comply with the above stated policy will result in the student being placed on probation for the remainder of the clinical year.
4. Student attendance at all EOR examination days is mandatory (be available from 8:30AM to 4:30PM).
6. Students are excused from their sites on New Year’s Day, Good Friday, Easter Monday, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and/or other requested religious holidays and observances. Students may be at a site that is open these days; however the student is not required to attend.

7. If the supervising physician is on vacation for longer than a two-day time period, the student must report this to the program so they can be reassigned to another supervisor for additional clinical hours. Failure to comply with the above stated policy will result in the student being placed on probation for the remainder of the clinical year.

8. Students are required to travel to clinical sites and are responsible for their own transportation. “Local” rotations may be scheduled at a location within 1 hour drive from the University.

9. During the clinical phase, students are required to do the first rotation local to Scranton (within approximately 120 miles of the University). Subsequently students may be allowed to complete their rotation out of the area as assigned by the Clinical Director/Clinical Coordinators. Students may request rotations at clinical sites near their home but these are not guaranteed.

10. There may be additional fees required for housing at certain clinical sites. This fee is the students’ responsibility.

11. Clinical rotations and preceptor packets will be distributed to the students and discussed with the Clinical Director/Coordinators during a Clinical Transition Day prior to the start of the Clinical Phase.

12. Problems encountered on clinical rotations should be reported to the Clinical Director/Coordinators as soon as possible.

13. Mid-rotation evaluations are to be completed by the student first and then the clinical preceptor and returned to the program (via scanned copy/fax/dropped off) midway through rotation.

14. Students failing to comply with any of the above or earn below the required minimum grade, may be placed on academic probation. Academic probation will be for the remainder of the current rotation and until the successful completion of the following Clerkship or Preceptorship. Additional documentation (i.e. may include but not limited to weekly subjective, objective, assessment, and plan [SOAP] notes, additional research paper, repeating EOR exam) may be required for the student for the remainder of the rotation. Failure to comply may result in the dismissal from the Program. Subsequent failures will result in probation and/or program dismissal.

**Attire and Identification**

1. It is the belief of Marywood University’s Physician Assistant Program that we, as healthcare professionals, have a responsibility to our patients and colleagues to maintain the highest standards with regard to appearance and identification. Students are expected to be neatly dressed and groomed.
STANDARD B3.01 PA students must be clearly identified in the clinical setting to distinguish them from physicians, medical students and other health profession students and graduates.

2. Name tags must be clearly displayed and contain the following information: Marywood University, Physician Assistant Program, Student’s name with the designation of Student. Students are also required to display the Marywood University patch to be worn on the left shoulder. Students must always clearly identify themselves as a physician assistant student. Verbally: The student must introduce themselves by their first and last name followed by Marywood University physician assistant student. Written documentation: The student must sign their first and last name followed by PA-S in any medical documentation.

3. Name tags must be clearly displayed to ensure student identification in the clinical setting. This also serves to distinguish the student from physicians, medical students, and other health profession students and graduates.

4. Failure to comply with the above attire and identification criteria may result in probation for the remainder of the clinical rotation.

Preceptor Guidelines

Learning in a clinical setting presents a unique set of challenges to both the instructor and the student. The traditional educational structure of classroom and examination is replaced with the highly personal and loosely structured mentor relationship of preceptor and student. Each student/preceptor relationship is very subjective, based on the style of the practice, and is not necessarily generalized or transferred to other clinical situations.

There are some principles which apply to clinical education which may help preceptors both to conceptualize and to specify their own objectives in the teaching situation. They are presented here to focus preceptors’ thinking about the Clerkship/Preceptorship experience as a teaching model, and to help develop an individual teaching plan.

The Needs of Students and Instructors

1. Clearly defined objectives: an understanding of what is to be learned/taught.
2. A commitment by teacher and student to achieve these objectives.
3. A clearly stated plan for achieving these objectives, which emphasize practice by the learner and observation and review by the teacher.
4. An evaluation process, based on formal and informal feedback mechanisms, which measure the student’s progress in achieving the objectives.

Feedback is an essential learning ingredient in the preceptor/student relationship. Evaluation of clinical learning must attempt to achieve the same validity and objectivity as evaluation of classroom learning. To do this, there must be similar sets of well-defined objectives and standardized criteria have been met. The defined objectives and
evaluative mechanisms enhance learning most if they are utilized as teaching aids which are used before, during and at the time of the clinical learning experience.

The Marywood University PA Program has written specific objectives for behavioral and intellectual skills, and established methods of evaluating these skills. These tools are designed to give the preceptor and students a clear understanding of the learning goals of the program, provide a means of measuring the achievement of these goals, and enhance the learning process thorough the use of ongoing feedback.

Responsibilities expected of Preceptors
1. **Task Assignment:** The specific tasks delegated to the PA-S should be examined as to the skill and training required to adequately perform the task(s) and the competence of the PA-S in performing the task. Task delegation, during this segment of the curriculum, should emphasize developing good and strong skills in the area of data collection, history and physical examination, diagnosis and development of treatment plans, as well as placing the student in a position which will begin a trend of competent problem-solving skills.

2. **Student Supervision:** Preceptors serve as Clinical Faculty of Marywood University by providing clinical direction and supervision during the clinical experience.

3. **Courses Objectives:** Please refer to the listed Clinical Objectives within the related discipline. These should serve as a guide for providing clinical exposures and teaching. We do not expect you to attempt to provide exposures unrelated to your practice.

4. **Student Schedule:** We expect the Clinical Preceptors to create a schedule for the student to maximize the clinical exposure for the PA-students. We would like the students to experience a varied, but typical exposure to clinical practice in your field. The students are expected to be available and in close association with you during the hours of your practice. We request that students accompany you to the hospital(s), nursing home(s), and/or other clinical practice facilities. We recognize evenings and weekends are beneficial to the student experience, and therefore request if you practice during such hours, please involve our students as well. Students are required a minimum of 40 hours and should be limited to 60 hours.

5. **Student Academic Responsibilities:** Each student should play an active role in his/her learning experience during the clinical phase of the PA Program. The student is expected to show initiative, ask questions and complete reading assignments as given. Students will be given an EOR examination at the end of each clinical rotation on materials pertinent to the objectives as outlined in this manual.

6. **‘Agree to Precept’ Form:** All Preceptors are required to have a signed copy of an ‘Agree to Precept’ form on file with Marywood University prior to the clinical rotation.

7. **Liability Insurance:** Proof of insurance is forwarded to each preceptor prior to the start of clinical rotations. Please retain this copy in your office during the duration of the students’ rotation.
8. **Student Identification:** Students are required to properly identify him/herself as such at all times. It is also important that the office staff understands the role of the PA student while assigned to your facility. Patients are also entitled to a brief introduction as well.

9. **Troubleshooting:** It is necessary that the PA Program become aware of any potential problems as soon as they arise. If you or your office staff has any concerns regarding a student, please notify the PA Program as soon as possible.

10. **Evaluation:** All Preceptors are expected to provide feedback to the students throughout the clinical rotation based on their performance and progress. In addition, all preceptors are required to complete a mid-point clinical evaluation as well as a final clinical evaluation of the student. The mid-point clinical evaluation form will be provided to the preceptor by the student half way through the clinical rotation. The purpose is to provide the student and preceptor the opportunity to assess progress to date, redefine expectations, and provide a plan for continued development of knowledge and skills. After completion by the student and preceptor, the mid-point clinical evaluation will be submitted to and reviewed by the program midway through the clinical rotation. The final clinical evaluation form is completed near the end of the clinical rotation based on Knowledge for Level of Training, Interpersonal Skills, and Professionalism. The students will provide the form for this purpose during the last week of the clinical rotation and are responsible for returning this form to the Program as part of their clinical assignments. We request that you meet with the students to discuss your evaluation and sign the form indicating whether it has been reviewed with the students.

**Malpractice Insurance**

All students are required to carry malpractice insurance when participating in clinical experiences. This applies to clinical experiences which occur during the didactic phase of the program, as well as those in the clinical year. The cost is approximately $90.00/yr. (This is added into the base tuition as a “fee”.) Marywood University provides this coverage through Global Risk Management, LLC. The policy provides each student coverage with $1,000,000 per occurrence and $3,000,000 per aggregate as required in Pennsylvania. Students must take a copy of their malpractice insurance forms with them to each clinical site. This certificate will be provided to all clinical sites prior to student assignments. This certificate will be provided to each student prior to any clinical experience in the senior year. Students are not covered by malpractice during personal volunteered activities not coordinated by the program. Malpractice insurance must be renewed annually.

**CPR & ACLS Certification**

All physician assistant students are required to maintain current CPR certification. A CPR certification/recertification course is provided at Marywood University for first year
students prior to the clinical rotations. A student may be excused from participation if he/she provides documentation of current certification and continued coverage through the end of their clinical phase.

ACLS (Advanced Cardiac Life Support) certification is required prior to the clinical rotation year. A mandatory course is offered during the spring semester at Marywood University for all first year students. A student may be excused from participation if he/she provides documentation of current certification and continued coverage through the end of their clinical phase.

Maintaining current BCLS & ACLS after the didactic phase is the responsibility of each student. The cost to the student of BCLS is approximately $75. The cost to the student of ACLS is normally $175.00 - $200.00. These fees are part of the students’ tuition.

Copies of the certification cards will be kept in the students’ file throughout the clinical phase.

Learning Resources

1. Library
   A collection of current texts, journals, periodicals and reference materials applicable and related to the curriculum and the continued professional growth of the physician assistant is housed in the Learning Resource Center and is available for student use. Various texts are kept on reserve at the Library for on premise use only. A mini-reference section is housed in the program lounge area. Students may use these resources within the department only. A copy of each current text is available in the academic coordinator’s office.

2. Physical Assessment Laboratory (PAL)
   The Physician Assistant program maintains a number of audio-visual and manual demonstrative teaching modalities. Examination rooms, models, and equipment are available to practice clinical skills in the PAL.

3. Internet
   Internet access is available for all students. The PA program is housed in a wi-fi enabled building. All students will use their assigned Marywood University email address for program emails.

Job Placement

The Physician Assistant program does not guarantee its graduates employment as a physician assistant upon successful completion of the program. The program will, however, act as a liaison for the student in the employment process.
Extracurricular Activities

Students are encouraged to be as active in their state, society, and professional organizations as their time academic commitments will allow. During the first year, only class representatives or student participants may be excused from classes to attend a state or national conference at the discretion of the PA faculty. Judgment will be rendered on a case-to-case basis.

Students are discouraged from participating in an excessive amount of non-professional extracurricular activities as this will take time away from their academic studies.

1. Students may be excused from a clinical site to attend a professional conference. Students must submit a written request for permission to the Clinical Director/Coordinators to attend a conference at least 4 weeks in advance of the event.
   A. These requests are not to exceed 5 days per event.
   B. Students must also be agreeable to make up all assignments missed during their absence.
   C. Students must supply the program with proof of registration for the conference.
   D. Student may be required to submit a certificate of completion following the conference.

State Laws and Regulations

Each student should review the law and regulations of the state in which he/she is planning to work. Please refer to the specific states’ website. It is the duty of each graduate to register in the state of employment and request all required transcripts from the Registrar’s Office.

Safety Concerns

STANDARD A1.03 The sponsoring institution is responsible for:
   g) addressing appropriate security and personal safety measures for PA students and faculty in all locations where instruction occurs

All students and faculty should feel safe at all times while on campus or at an assigned clinical rotation. If at any time safety is a concern contact the PA program office immediately. Marywood University Campus Safety Department can be reached at any time at 570-348-6242. Campus Safety Policies and Reports are available at http://www.marywood.edu/campus-safety/policies/.
Advisors

**STANDARD A1.05** *The sponsoring institution must provide academic and student health services to PA students that are equivalent to those services provided other comparable students of the institution.*

Each Physician Assistant student is assigned to a member of the program faculty for academic counseling and advisement. Each student must meet with their assigned advisor at least one time during each semester of the didactic year. Students may meet with assigned advisors or any core faculty member as needed. Should there be a personal conflict between student and advisor then they may make an appointment with the Program Director or Dean of the College of HHS. Additionally, professional counseling services, if needed, are available through Marywood University’s Counseling Center. Tutoring services are available through Marywood University’s Academic Excellence Center.

Academic Problems

**STANDARD A3.11** *The program must define, publish and make readily available to faculty and students policies and procedures for processing student grievances and allegations of harassment.*

If a student is having any academic difficulty, that student should see the instructor promptly. If not addressed, academic problems have a way of multiplying themselves and making their repercussions felt in other courses in a cumulative manner.

Academic problems which arise should be resolved by seeking advice in the following sequence:
1. Instructor
2. Advisor
3. Academic Coordinator
4. Program Director and Medical Director
5. Dean of College of Health & Human Services (for graduate students) or the Dean of the College of Liberal Arts and Sciences for undergraduate students in the Pre-PA program

Clinical problems which arise should be resolved by seeking advice in the following sequence:
1. Preceptor
2. Clinical Coordinator
3. Clinical Director
4. Program Director and Medical Director
5. Dean of College of Health & Human Services
Student Health Services

**STANDARD A1.05** The sponsoring institution must provide academic and student health services to PA students that are equivalent to those services provided other comparable students of the institution.

**STANDARD A3.07** The program must have and implement a policy on immunization of students and such policy must be based on current Centers for Disease Control recommendations for health professionals.

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

**STANDARD A3.21** Student health records are confidential and must not be accessible to or reviewed by program, principal or instructional faculty or staff except for immunization and tuberculosis screening results which may be maintained and released with written permission from the student.

Marywood University Student Health Services is available to all students currently enrolled at Marywood University. The professional staff of Health Services is committed to meeting today's highest health standard. Registered Nurses are available to provide health care that is sensitive to the needs of all students. A certified Registered Nurse Practitioner is available Monday through Friday, 8:30 a.m. to 4:00 p.m., either by appointment or walk-in. A physician is also available at posted times and dates.

Students are not permitted to ask or seek medical advice or treatment from any core faculty, the medical director, or the program director of the Physician Assistant program unless in the case of an emergency.

**Health Records and Medical Insurance**

Upon acceptance into the Physician Assistant Program, students are required to obtain a physical examination by a licensed MD, DO, PA-C, or CRNP of their choice and have that provider complete Marywood University’s “**Student Health Services: Health History, Physician Examination and Immunization Record**”. This form can be found at [http://www.marywood.edu/dotAsset/d06852cd-8e3a-4608-9b1b-7447fd12e0c4.pdf](http://www.marywood.edu/dotAsset/d06852cd-8e3a-4608-9b1b-7447fd12e0c4.pdf)

This form must be completed and submitted to office of Marywood University’s Dean of Health and Human Services by May 1st, before the first day of classes of the Physician Assistant Program. Failure to submit the appropriate paperwork in a timely manner may affect the student’s eligibility to start the program. This record will be maintained by Marywood Student Health Services.
The Clinical Facilities that are used for clinical training require additional immunizations and proofs of immunity (titers). Therefore, all Physician Assistant students must provide dates of all the immunizations listed below and must submit titer results for Measles, Mumps, Rubella and Varicella.

The Physician Assistant Program Immunization Policy is based on, but not limited to, current Center for Disease Control recommendations for health professionals and is subject to change at any time in order to stay in compliance with those recommendations. Students who are not correctly immunized pose a significant public health risk to patients, coworkers, and themselves. If immunizations are not up-to-date, we cannot guarantee that you will be accepted at educational clinical sites. This could impact your timely progression through the program, prevent you from participating in a variety of clinical experiences, and ultimately prevent you from graduating.

To ensure confidentiality, student medical records are neither seen nor reviewed by the Physician Assistant Program faculty or staff. Student medical information is sent by the student or healthcare facility directly to Student Health Services. The staff of Student Health Services reviews the medical information and the Physician Assistant Program receives a health clearance form. Health clearance forms may be released with written permission from the student and forwarded to clinical facilities as necessary to schedule and secure clinical rotations.

Some clinical facilities may require additional immunizations, titers, or screenings which students must obtain prior to starting clerkships at those sites. Failure to comply with this immunization policy or failure to complete additional immunization, proofs of immunity or required clearances/screenings may result in the inability to enter, continue or complete clinical Clerkships or Preceptorships.

**Tetanus, Diphtheria, & Pertussis (Tdap)**
- Completed primary series of tetanus-diphtheria immunizations
- 1 dose within the last 10 years

**Measles, Mumps & Rubella (MMR)**
- Serologic proof of immunity (positive titers) for all 3 and
- Dates of 2 dose MMR series, if received.

**Hepatitis B**
- Dates of 3 dose series or
- Serologic proof of immunity (positive titer)

**Varicella (Chicken Pox)**
- Serologic proof of immunity and
- Dates of 2 dose Varicella series, if received.
- Written documentation of disease by health care provider will no longer be accepted as proof in immunity.

**Tuberculosis (TB)**
- 2-Step tuberculin skin test (TST) initially
• Annual 1-Step TST in subsequent years
• Yearly chest x-ray if TST is positive or with previous history of reaction

**Influenza**
• Annual vaccine each fall

**Polio**
• Written documentation of completed series as a child

All costs incurred in complying with this policy are the responsibility of the student. It is also the student’s responsibility to remain current with all immunizations and to maintain current copies of their health and immunization records.

It is recommended that the PA student carry this record to the clinical site on the first day of each rotation in case proof of immunization is requested by that site.

Health Clearance forms will be updated annually based on the information provided by the student to the Student Health Services Office at Marywood University.

All students are required to maintain Medical Insurance through the program. Students must provide a copy of their insurance coverage to be maintained in the Program office.

**Background Screenings and Drug Testing**

Criminal background checks (CBC), child abuse clearances, fingerprinting, and 10 panel drug screening must be done yearly as part of the requirements of the Marywood University Physician Assistant Program (Program). Clinical sites require annual screenings and testing. The initial checks and testing will be done in July of the didactic year of the Program. The cost of the CBC, child abuse clearance, and drug screening completed during the didactic year will be covered by the Program. Fingerprinting done during the didactic year must be paid by the student. CBC, child abuse clearance, fingerprinting, and a 10 panel drug screening will then be repeated in July of the clinical phase (2 months into the start of the clinical phase of the Program).

In July of the didactic year of the Program, student data will be entered by the Program into the portal of the background company, Certiphi Screening, Inc., (Certiphi) that will handle the screening. Each student will then receive an email from Certiphi with instructions on how to complete the CBC and child abuse clearance. The student will also receive a second email with instructions on how to complete the drug screening. The steps are summarized below. They are explained as well in the information each student receives from Certiphi.

1. **CBC:** To complete this background check, each student simply needs to enter their information into the Certiphi portal.
2. **Child abuse clearance:** To complete this background check, each student needs to enter their information into the Certiphi portal. Next, the student must print the
form that Certiphi includes, complete the form, and mail it to Certiphi at the address provided.

3. Drug screening: To complete the screening, each student needs to enter their information into the Certiphi portal. Next, a document will be generated that the student will bring to the lab (locations provided on the document) when they submit their urine sample.

Certiphi does not handle fingerprinting. The student must register at www.pa.cogentid.com for fingerprinting and choose the fingerprinting for Pennsylvania Department of Public Welfare. (Payment information can be entered on the Cogent website.) Next, the student must go to a fingerprinting center (locations are listed on the website).

The Program will be able to access all records from Certiphi (i.e. CBC, child abuse clearance, and drug screening). The Program cannot access fingerprinting records. The results of fingerprinting will be mailed to the student’s home. The student is responsible for delivering the fingerprinting results to the Program office. CBC, child abuse clearance, fingerprinting, and drug screens will then be repeated in July during the clinical phase of the Program. Once again, each student data will be entered into the Certiphi portal by the Program; the student will receive information on the CBC, child abuse clearance, and drug screening. The procedure for completing the screenings will be the same as during the didactic year, however, the student will be responsible for the cost of all screenings. (The student will be asked to enter payment information into the Certiphi portal.) The student must also complete fingerprinting once again during the clinical phase by registering at www.pa.cogentid.com, entering payment information, and follow the procedure as above.

**Significant Exposure Guidelines**

**STANDARD A3.08** The program must inform students of written policies addressing student exposure to infectious and environmental hazards before students undertake any educational activities that would place them at risk.

In the event of a significant exposure from a needle stick, puncture wound, or contamination of any open wound or the mucous membranes by saliva, or other body fluids, the following guidelines will be followed:

1. If exposure occurs at an off-campus site, the off-campus site’s protocol will be followed.
2. If exposure occurs at Marywood University, or if the off-campus site will not extend protocol, the following procedure will be followed:
   A. Immediately cleanse the wound with soap and water.
   B. Student should immediately report the incident to Marywood University’s
Clinical Director/Coordinator and Marywood University’s Student Health Services.

C. An incident report needs to be completed by the Security Office of Marywood University.

3. Guidelines to be followed off campus or on campus:
   A. Determine the source’s HIV and Hep C status if possible. Obtain the patient’s age and exposure recipient’s permission for blood testing as possible an arrange for pre-test counseling.
   B. The person who was exposed should have baseline blood drawn to test for anti-Hbs, anti-Hep C, and anti-HIV within 24-72 hours of the exposure.
   C. The treatment recommendations are as per current CDC guidelines for exposure. Information can be found at [http://www.cdc.gov/niosh/topics/bbp/emergnedl.html](http://www.cdc.gov/niosh/topics/bbp/emergnedl.html)
   E. The program director must be notified of the incident as soon as possible.

Marywood University Counseling/Student Development Center

**STANDARD A3.10** The program must have written policies that provide for timely access and/or referral of students to services addressing personal issues which may impact their progress in the PA program.

All students currently enrolled at Marywood University are welcome to use the Marywood University Counseling/Student Development Center for any type of personal or academic problems. Often times it is advisable to utilize this service before problems begin to impact a students’ academic progress.

The Counseling Center staff is bound by ethical and legal guidelines to protect students’ rights to confidentiality. No information, written or oral is released to other persons without your written permission. The only exceptions to these guidelines are governed by law. These are specific to situations where we have reason to believe that there is intent to harm yourself, another or a child, and to situations where we may be court-ordered in case of your involvement in a lawsuit.

Appointments may be scheduled in person at the Counseling/Student Development Center which is located in the McGowan Center 1017, or by calling the office at (570) 348-6245 or through email at csdc@maryu.marywood.edu. Evening and weekend
appointments are sometimes possible. The Center's office hours are Monday through Friday, 8:30 AM - 4:30 PM.

In the event of an emergency, students may walk-in and meet with a therapist during regular business hours, 8:30 AM to 4:30 PM. In the event of a psychological crisis after hours and on weekends, the director, assistant director, or staff counselor can be reached for phone consultation and support.

Students may call the center at (570) 348-6245 to obtain the on-call phone number. This service is available when school is in session.

Students may also call the Scranton Counseling Center at (570) 348-6100 and a counselor there will help you.

Comprehensive Knowledge Examination

An electronic Comprehensive Physician Assistant Core Knowledge Examination (ePACKRAT) will be administered to first and second year PA students at a cost of approximately $40 per student. (This amount is added in as a “fee” to your course work.) It is a nationally based examination where the students and the program receive pertinent feedback on strengths and weaknesses. The data is designed to be used as a study guide for the Physician Assistant National Certifying examination and as a curriculum guide for the program.

Withdrawal Information

STANDARD A3.17 The program must define, publish and make readily available to students upon admission academic performance and progression information to include:
  a) policies and procedures for withdrawal and dismissal

If a student withdraws from the Marywood University for any reason, a percentage of the semester’s tuition fees and room and board costs will be canceled according to a predetermined schedule. Information concerning refunds can be found at http://www.marywood.edu/studenthandbook/services/cashiers-office.html. A withdrawal form must be completed. This form can be found at http://www.marywood.edu/dotAsset/103113.pdf. This information can also be found via the academic calendar published each semester by the registrar’s office. This can be found at http://www.marywood.edu/registrar/academic-calendar.html. Requests for refunds must be submitted in writing to the manager of the Cashier’s Office. The percentage of tuition and fees due the University, as listed, must be paid in full at the time of withdrawal, if full payment was not made at time of registration. That is, the amount owed the University is not affected by the payment plan (deferred tuition plan, financial aid deferred, employer deferred) selected by the student. Please see

Financial Policies and Tuition Costs

Detailed information regarding the current financial policies, tuition, and fees of Marywood University can be found at http://www.marywood.edu/cashier/financial-facts/tuition-and-fees.html.

Clinical Issues

Clinical issues or problems on a clinical rotation occasionally arise. The best way to prevent a serious problem is to address a minor problem before it ripens. Some examples include, but are not limited to, conflict with the preceptor, experience taking on a role of ‘observer’ and unprofessionalism or disrespect.

If a problem arises, students should seek advice in the following order:
1. Preceptor
2. Clinical Coordinator
3. Clinical Director
4. Program Director
5. Dean of the College of Health and Human Services

Under all circumstances, it is the student’s responsibility and the Program faculty’s expectations that students will notify the Clinical Director/Coordinators of any issues that may arise as soon as possible and initiate procedures to obtain academic and/or clinical assistance.

The Clinical Director/Coordinators expect all clinical sites to assure student safety while at a clinical site or facility. Student security and personal safety is of utmost importance to the faculty and staff of the PA Program. This is addressed during the Clinical Transition Day prior to beginning the clinical phase and students are reminded to contact the Program immediately if they ever feel threatened in any way.
Marywood University Physician Assistant Program
Clinical Syllabus

PA 610/611/612/613/614/615: 3 credits each

PA 640/650: 6 credits each

Instructors:  Justine Samanas, MPAS, PA-C  Clinical Director
             Marie Bonavoglia, Ph.D., PA-C  Clinical Coordinator
             Abigail Davis, MPAS, PA-C  Clinical Coordinator

Offices:     Healthy Families 111, 114, and 120 respectively

Office Hours: By appointment

Telephone:   PA Program office: (570) 348-6298
             Dr. Swanchak cell: (570) 947-0087
             Mrs. Samanas’s office: (570) 340-6084
             Dr. Bonavoglia office: (570) 340-6005
             Mrs. Davis’s office: (570) 340-961-4543

E-mail:      samanas@marywood.edu
             msbonavoglia@marywood.edu
             abidavis@marywood.edu

This syllabus represents all Clerkship and Preceptorship experiences (course numbers listed above) for the clinical phase of the Program. Each student is required to complete a clerkship in: Emergency Medicine, Surgery, Orthopedics, Pediatrics, Women’s Health, Psychiatry, and 1 elective chosen by the student. The Preceptorships are in the areas of Family Medicine and Internal Medicine. If a student chooses to complete a Specialty track during Preceptorship I, it may be in Orthopedics, Emergency Medicine, Hospitalists, Surgery or Pediatrics. This specialty track experience will be completed in addition to required time spent in Internal Medicine and Family Practice.

Course Description

PA 610 – 615, Clerkships I-VI:

Clerkships are 6 week clinical courses that provide students with experiences in inpatient and outpatient medicine in the areas of Emergency Medicine, Orthopedics, Pediatrics, General Surgery, Women’s Health, Psychiatry, and a 6-week elective of the student’s choice. The student will elicit a medical history, perform a physical examination, initiate the proper
evaluation through ordering and interpreting of appropriate diagnostic studies, and correlate all findings to develop an appropriate differential diagnosis, final diagnosis and treatment plan.

PA 640 & 650, Preceptorship I & II:

Preceptorships are 12 weeks of clinical training in either the primary care setting, internal medicine and/or area of chosen specialty track, working under the supervision of a preceptor. All students will complete supervised clinical experiences in Family Medicine and Internal Medicine during these preceptorships. Emphasis will be on further development and refinement of clinical skills, patient assessment and diagnosis, treatment, follow up and referral in the provision of health care services.

Course Objectives

STANDARD B3.02 The program must inform students of program policies and practices.

Primary practice requires specific skills in many disciplines, including internal medicine, family medicine, women’s health, surgery, pediatrics, psychiatry, orthopedics and emergency medicine. The PA student is expected to develop basic diagnostic and therapeutic skills related to preventive, chronic, acute, rehabilitative, end-of-life and emergent problems which commonly arise in each of these disciplines. General objectives for the student’s level of performance, which should be applied to all the disciplines of primary care, follow.

1. Given a patient with a medical problem in any primary care setting, the PA student will:
   A. Collect the data relevant to the diagnosis of the presenting problem:
      a. Take a thorough history, which includes a chief complaint, history of present illness, relevant aspects of the patient’s past medical history, social history, family history, and appropriate review of systems.
      b. Perform a thorough and logically ordered physical examination directed at evaluating physical findings related to the patient’s complaint.
      c. Be familiar with the laboratory tests and procedures which would be useful in diagnosing the patient’s problem, and understand basic interpretation of their results. The student will also be aware of the dangers and limitations of such tests and procedures.
   B. Present the data: The student will be able to present the results of the history, physical examination, and previous laboratory and diagnostic studies to the Preceptor. The presentation may be oral or written and will be logically ordered in a problem-oriented format. In the presentation, the student will demonstrate an understanding of the relevant positive/negative findings in evaluating the patient’s problems.
   C. Assess the data: The student will begin to formulate an accurate list of the patient’s problems. He/she will provide a specific diagnosis for relatively
uncomplicated problems, and list major elements of the differential diagnosis for more complicated problems.

D. Comprehend principles of treatment for the patient’s particular problem: Develop and implement appropriate treatment plans to include the proper use of medications in treating the medical problem, including dosage, route of administration, side-effects, and drug interactions. Write prescriptions to be countersigned by the physician. Demonstrate the appropriateness of other diagnostic testing and procedures relevant to the patient diagnosis.

E. Document the data: Using appropriate SOAP and H&P formats in patient records and/or electronic medical recording system (as per institution’s regulations) and as assigned by the Clinical Faculty.

F. Appropriate referral of patients: Understand the network and teamwork of healthcare professionals and demonstrate an awareness of appropriate referrals as needed per patient diagnosis.

STANDARD B2.04 The program curriculum must include instruction in interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families and other health professionals.

STANDARD B2.09 The program curriculum must include instruction in basic counseling and patient education skills.

2. The PA student will demonstrate effective communication skills that results in the effective exchange of information and collaboration with patients, their families, and other health professionals.

STANDARD B2.05 The program curriculum must include instruction in patient evaluation, diagnosis and management.

3. The PA student will demonstrate the ability to interview, elicit a medical history, perform a physical examination, order and interpret tests/diagnostic studies, develop and implement treatment plans, present data in an oral format and document data of patients that present across the life span.

STANDARD B2.10 The program curriculum must include instruction to prepare students to search, interpret, and evaluate the medical literature, including its application to individualized patient care.

4. The PA student will demonstrate the necessary skills to search, interpret, and evaluate medical literature in order to maintain a critical, current, and operational knowledge of new medical findings and apply it to individualized patient care.

STANDARD B3.04 Supervised clinical practice experiences must occur in the following setting: a) outpatient b) emergency department c) inpatient and d) operating room
5. The PA students will have supervised clinical experiences in the following settings:
   A. Outpatient
   B. Emergency room/department
   C. Inpatient
   D. Pre-Operative, Intra-Operative, Post-Operative care
   E. Acute care
   F. Chronic care
   G. Preventative care

The specific medical problems with which the PA students are expected to be familiar with are listed in the objectives for each clinical rotation which follow the Preceptor Guidelines section.

**Minimum Competencies**

Students are required to meet specific minimum competencies during their clinical clerkships and preceptorships prior to graduation. This information will be tracked using the Typhon system. If a student anticipates having difficulty meeting a specific minimum competency, it is their responsibility to contact the Clinical Director or Clinical Coordinators as soon as possible and not when the rotation is complete. Students failing to meet specific minimum competencies may face a delay in graduation where additional experiences will be scheduled.

<table>
<thead>
<tr>
<th>Type of Patient Encounter</th>
<th>Number of Patient Encounters Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preventive</td>
<td>100</td>
</tr>
<tr>
<td>Acute</td>
<td>100</td>
</tr>
<tr>
<td>Chronic</td>
<td>100</td>
</tr>
<tr>
<td>Emergent</td>
<td>100</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>100</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>100</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>100</td>
</tr>
<tr>
<td>Women’s Health</td>
<td>50</td>
</tr>
<tr>
<td>Prenatal</td>
<td>5</td>
</tr>
<tr>
<td>Pre-Operative</td>
<td>100</td>
</tr>
<tr>
<td>Intra-Operative</td>
<td>100</td>
</tr>
<tr>
<td>Post-Operative</td>
<td>100</td>
</tr>
<tr>
<td>Behavioral and Mental Health</td>
<td>50</td>
</tr>
<tr>
<td>Outpatient setting</td>
<td>100</td>
</tr>
<tr>
<td>Emergency department setting</td>
<td>100</td>
</tr>
<tr>
<td>Inpatient setting</td>
<td>100</td>
</tr>
<tr>
<td>Operating room setting</td>
<td>100</td>
</tr>
</tbody>
</table>
Teaching Methods

Practical Clinical Experience, Examinations, History and Physicals, Research Papers, Peer Review Presentations, Class Discussions.

Recommended Texts

Various texts are available for students to be signed out from the Clinical Director/Coordinator's office to be used for the duration of clinical rotations. Based on the students' interest, it may be in their best interest to purchase certain texts. Preceptors will assign readings throughout Clinicals based on patients seen during the rotations or assign reading on a weekly basis. The student may be required to purchase certain texts based on the preferences of the office. This will be handled on an individual basis per Preceptor/site. Below is a list of suggested texts.

Orthopaedics
Paget, Gibofsky, Beary. *Manual of Rheumatology and Outpatient Orthopaedic Disorders: Diagnosis and Therapy*. (Spiral Bound) Lippincott, Williams & Wilkins.
Hoppenfield, S. *Physical Examination of the Spine and Extremities*.
Skinner, H. B. *Current: Diagnosis and Treatment in Orthopedics*

Emergency Medicine

Women's Health
Pediatrics
Hay, W. et al. CURRENT Pediatric Diagnosis and Treatment. Lange Medical Books/McGraw-Hill.

Surgery

Family Practice/Internal Medicine (titles only)
Cecil’s Textbook of Medicine
Ferri’s Clinical Advisor
Current Medical Diagnosis and Treatment
The Washington Manual of Medical Therapeutics
Differential Diagnosis of Common Complaints
Appleton and Lange’s Physician Assistant Review
Primary Care for Physician Assistants Pretest: Self-Assessment and Review
Clinical Survival Guide for PA Students
Tarascon Pocket Series (e.g. Tarascon Pocket Pharmacopoeia 2014 Deluxe Lab-Coat Edition)
Cecil Essentials of Medicine
CURRENT Diagnosis & Treatment in Family Medicine
The Merck Manual
The Family Medicine Handbook: Mobile Medicine Series by University of Iowa
First Aid Series (e.g. USMLE, Wards, etc.)

Requirements

1. Attendance at all sites and on all scheduled End of Rotation Days is required (see Attendance Policy).
2. Completion of all assignments, evaluations and examinations by published deadlines and submitted to Clinical Director/Coordinators.
3. A minimum of 1 (one) case presentation during and EOR day.
4. Obtain a minimum of a B in all Clerkships/Preceptorships.

Specific Clerkship/Preceptorship Assignments

The written assignments in the Clinical Phase of the PA Program are designed to document attendance, daily activities, patient demographics, clinical encounters/experiences, and skills (whether observed/assisted/ performed). Additional assignments
will allow the students to share their clinical experiences and knowledge gained and will serve as a means of evaluation of students’ performance throughout this phase of the PA program.

Clerkship I/PA 610: 3 credits

1. **Daily logs** recorded through Typhon®, clinical tracking software, to include the date, start time, and end time, and all patient encounters/cases including the patient’s age, chief complaint, diagnosis, treatment provided/assisted/observed by student. The logs equal 10% of the final grade of Clerkship I.

2. **A complete H&P** on any case of particular interest, unusual presentation, etc. The H&P equals 10% of your final Clerkship I grade.

3. **Case Study Paper**: This case study is a 3-5 page paper reflecting on the patient in the H&P. The students focus may be their own learning experience, the interaction between student-patient, the diagnosis and treatment of the patient. This is a reflection of the case encountered. Research may be included and if so, must be from current, peer-reviewed medical journals and cited with current APA style. All papers must be type-written using 12 point Times New Roman font. The Case Study Paper equals 20% of your final Clerkship I grade.

4. **Mid-Point Clinical Evaluation** is required for each student for each clerkship (excluding 3 week rotations for OBGYN and psychiatry). Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.

5. **Preceptor Evaluation** in which the assigned Preceptor will assess your professionalism, knowledge for level of training, interpersonal skills and assign a letter grade. The Preceptor Evaluation equals 30% of your final Clerkship I grade.

6. **The EOR examination** will be administered at 10AM on the EOR day 1. The EOR examination will focus on the rotation completed by the students, for example, a student completing the ER rotation will take the Emergency Medicine examination while another student may be taking the General Surgery exam following their General Surgery rotation. The EOR Examination equals 30% of the final Clerkship I grade.

7. **Exam Master Questions** are to be completed prior to taking the EOR exam with a minimum of 100 questions completed. Proof of completion of these questions needs to be provided when handing in paperwork.

Clerkship II/PA 611: 3 credits

1. **Daily logs** recorded through Typhon®, clinical tracking software, to include the date, start time, and end time, and all patient encounters/cases including the patient’s age, chief complaint, diagnosis, treatment provided/assisted/observed by student. The logs equal 10% of the final grade of Clerkship II.
2. **A complete H&P** on any case of particular interest, unusual presentation, etc. The H&P equals 10% of your final Clerkship II grade.

3. **Research Paper**: This Research Paper is a 3-5 page paper focusing on the diagnosis of the patient presented in the H&P. This paper must include current research of diagnosis, prognosis, treatment, and/or patient education. Your research must be supported from current, peer-reviewed medical journals and cited with current APA style. All papers must be type-written using 12 point Times New Roman font and include a title page and reference page. The Research Paper equals 20% of your final Clerkship II grade.

4. **Mid-Point Clinical Evaluation** is required for each student for each clerkship (excluding 3 week rotations for OBGYN and psychiatry). Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.

5. **Preceptor Evaluation** in which the assigned Preceptor will assess your professionalism, knowledge for level of training, interpersonal skills and assign a letter grade. The Preceptor Evaluation equals 30% of your final Clerkship II grade.

6. **The EOR examination** will be administered at 10AM on the EOR day 1. The EOR examination will focus on the rotation completed by the students, for example...a student completing the ER rotation will take the Emergency Medicine examination while another student may be taking the General Surgery exam following their General Surgery rotation. The EOR Examination equals 30% of the final Clerkship II grade.

7. **Exam Master Questions** are to be completed prior to taking the EOR exam with a minimum of 100 questions completed. Proof of completion of these questions needs to be provided when handing in paperwork.

---

**Clerkship III/PA 612: 3 credits**

1. **Daily logs** recorded through Typhon®, clinical tracking software, to include the date, start time, and end time, and all patient encounters/cases including the patient’s age, chief complaint, diagnosis, treatment provided/assisted/observed by student. The logs equal 10% of the final grade of Clerkship III.

2. **Research Question/Thesis Statement/Introduction**  
   (The first stage of Professional Contribution)  
   The research question should be posed in the form of a strategic question. This should not be a question answerable by yes/no. It can be a compare/contrast question such as: *Sterile water is preferred over Betadine as the most appropriate cleansing solution for acute wounds in the Emergency Department?* Students must use and submit PICO style questions illustrating each section to include P: population, I: Intervention, C: Comparison, O: Outcome. In addition to the research question, provide a Thesis Statement. The thesis statement of the example may be *Sterile Water is more effective and less cytotoxic than Betadine as a cleaning solution in the E.R. for acute wounds.* In addition, students must submit a one page type-
written (12 point font, Times New Roman) introduction of why this research is important, current statistics, and/or practical implications related to the thesis. A reference page should be included using APA style with APA citation used throughout the text. The Research Question/Thesis and Statement/Introduction equals 30% of your final Clerkship III grade.

2. **Mid-Point Clinical Evaluation** is required for each student for each clerkship (excluding 3 week rotations for OB/GYN and psychiatry). Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.

3. **Preceptor Evaluation** in which the assigned Preceptor will assess your professionalism, knowledge for level of training, interpersonal skills and assign a letter grade. The Preceptor Evaluation equals 30% of your final Clerkship II grade.

4. **The EOR examination** will be administered at 10AM on the EOR day 1. The EOR examination will focus on the rotation completed by the students, for example...a student completing the ER rotation will take the Emergency Medicine examination while another student may be taking the General Surgery exam following their General Surgery rotation. The EOR Examination equals 30% of the final Clerkship III grade.

5. **Exam Master Questions** are to be completed prior to taking the EOR exam with a minimum of 100 questions completed. Proof of completion of these questions needs to be provided when handing in paperwork.

**Clerkship IV/PA 613: 3 credits**

1. **Daily logs** recorded through Typhon®, clinical tracking software, to include the date, start time, and end time, and all patient encounters/cases including the patient’s age, chief complaint, diagnosis, treatment provided/assisted/observed by student. The logs equal 10% of the final grade of Clerkship IV.

2. **Mid-Point Clinical Evaluation** is required for each student for each clerkship (excluding 3 week rotations for OB/GYN and psychiatry). Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.

3. **Preceptor Evaluation** in which the assigned Preceptor will assess your professionalism, knowledge for level of training, interpersonal skills and assign a letter grade. The Preceptor Evaluation equals 30% of your final Clerkship IV grade.

4. **Background and Title Page** *(The second stage of Professional Contribution)*
   The Title Page should be submitted in APA format. The background section should summarize the epidemiology, incidence, etiology, pathophysiology, clinical presentation, diagnostic evaluation, differential diagnosis, treatment, prognosis, and prevention of the topic. This should concentrate on the section most important to your topic (for example: if your question is about specific surgery, the treatment...
section of your background should be the most comprehensive). The background should be 2 pages type written minimum with a maximum of 5 pages. 12 point font and Times New Roman should be used. Revised introduction should be included. Reference page should be included using APA style with APA citation used throughout the text. The Background and Title Page equals 30% of your final Clerkship IV grade.

5. **The EOR examination** will be administered at 10AM on the EOR day 1. The EOR examination will focus on the rotation completed by the students, for example...a student completing the ER rotation will take the Emergency Medicine examination while another student may be taking the General Surgery exam following their General Surgery rotation. The EOR Examination equals 30% of the final Clerkship IV grade.

6. **Exam Master Questions** are to be completed prior to taking the EOR exam with a minimum of 100 questions completed. Proof of completion of these questions needs to be provided when handing in paperwork.

7. Requests for preceptors/sites for both Preceptorships are due. Failure to submit will result in the lowering of final letter grade.

**Clerkship V/PA 614: 3 credits**

1. **Daily logs** recorded through Typhon®, clinical tracking software, to include the date, start time, and end time, and all patient encounters/cases including the patient’s age, chief complaint, diagnosis, treatment provided/assisted/observed by student. The logs equal 10% of the final grade of Clerkship V.

2. **Discussion of Articles: Summary and Critical Analysis** *(The third stage of Professional Contribution)*
   This review will be comprised of at least 5 current peer-reviewed articles or texts related to the research question and comprehensively reviewed (published within the past 5 years). The articles should be summarized and then critically analyzed. The discussion of the articles should be a minimum of 5 pages type written with a maximum of 8 pages using 12 point font and Times New Roman. A revised introduction, background, title page, and reference page should be included. APA citation should be used through the text. The Discussion of Articles equals 30% of your final Clerkship V grade.

3. **Mid-Point Clinical Evaluation** is required for each student for each clerkship (excluding 3 week rotations for OBGYN and psychiatry). Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.=

4. **Preceptor Evaluation** in which the assigned Preceptor will assess your professionalism, knowledge for level of training, interpersonal skills and assign a letter grade. The Preceptor Evaluation equals 30% of your final Clerkship V grade.

5. **The EOR examination** will be administered at 10AM on the EOR day 1. The EOR examination will focus on the rotation completed by the students, for example...a
student completing the ER rotation will take the Emergency Medicine examination while another student may be taking the General Surgery exam following their General Surgery rotation. The EOR Examination equals 30% of the final Clerkship V grade.

6. **Exam Master Questions** are to be completed prior to taking the EOR exam with a minimum of 100 questions completed. Proof of completion of these questions needs to be provided when handing in paperwork.

**Clerkship VI/PA 615: 3 credits**

1. **Daily logs** recorded through Typhon®, clinical tracking software, to include the date, start time, and end time, and all patient encounters/cases including the patient’s age, chief complaint, diagnosis, treatment provided/assisted/observed by student. The logs equal 10% of the final grade of Clerkship VI.

2. **Methods Section**  
   **(The fourth stage of Professional Contribution)**  
   This section will discuss the inclusion and exclusion criteria used to select articles. The level of evidence chosen should be discussed and an explanation of why certain articles were chosen. The methods section should be a minimum of 1 paragraph type written with a maximum of 2 paragraphs. 12 point font and Times New Roman should be used. A revised introduction, background, title page, discussion of articles and reference page should be included. APA citation should be used appropriately through the text. The Methods Section equals 30% of your final Clerkship VI grade.

3. **Mid-Point Clinical Evaluation** is required for each student for each clerkship (excluding 3 week rotations for OBGYN and psychiatry). Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.

4. **Preceptor Evaluation** in which the assigned Preceptor will assess your professionalism, knowledge for level of training, interpersonal Skills and assign a letter grade. The Preceptor Evaluation equals 30% of your final Clerkship VI grade.

5. **The EOR examination** will be administered at 10AM on the EOR day a. The EOR examination will focus on the rotation completed by the students, for example...a student completing the ER rotation will take the Emergency Medicine examination while another student may be taking the General Surgery exam following their General Surgery rotation. The EOR Examination equals 30% of the final Clerkship VI grade.

6. **Exam Master Questions** are to be completed prior to taking the EOR exam with a minimum of 100 questions completed. Proof of completion of these questions needs to be provided when handing in paperwork.
Preceptorship I/PA 640: 6 credits

1. Daily logs recorded through Typhon®, clinical tracking software, to include the date, start time, and end time, and all patient encounters/cases including the patient’s age, chief complaint, diagnosis, treatment provided/assisted/observed by student. The logs equal 10% of the final grade of Preceptorship I.

2. Conclusions/Areas for Future Research related to Professional Contribution
   This section will provide any and all conclusions derived by the student related to the research area. In addition, the students will discuss areas for further inquiry or research and the importance of future research. This conclusion section must be at least 3 pages in length not to exceed 5 pages. In addition, all previous sections must also be submitted with necessary revisions per faculty feedback. This document should include (consecutively) a title page, introduction, background, discussion of articles, methods section, conclusion with future research related to PC with appropriate headings. All written work must be completed in current APA style. The Conclusion equals 40% of your final Preceptorship I grade.

3. Mid-Point Clinical Evaluation is required for each student for each clerkship (excluding 3 week rotations for OBGYN and psychiatry). Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.

4. Preceptor Evaluation in which the assigned Preceptor will assess your professionalism, knowledge for level of training, interpersonal skills and assign a letter grade. The Preceptor Evaluation equals 50% of your final Preceptorship I grade.

5. The EOR examination will be administered at 9AM on the EOR day 1. The EOR examination will focus on general medicine via the PACKRAT. The PACKRAT score is not part of your EOR grade. The PACKRAT is used as a self-assessment tool for the student.

6. Exam Master Questions are to be completed prior to taking the EOR exam with a minimum of 300 questions completed. Proof of completion of these questions needs to be provided when handing in paperwork.

Preceptorship II/PA 650: 6 credits

1. Daily logs recorded through Typhon®, clinical tracking software, to include the date, start time, and end time, and all patient encounters/cases including the patient’s age, chief complaint, diagnosis, treatment provided/assisted/observed by student. The logs equal 10% of the final grade of Preceptorship II.

2. Presentations of Final Professional Contribution: All students will present their research to include Research Question, Thesis Statement, introduction, background, discussion of articles, methods section, conclusion with future research related to PC, and resources used. A schedule of times of presentation will be posted. The Final Presentation equals 30% of your final Preceptorship II grade.
3. **Mid-Point Clinical Evaluation** is required for each student for each clerkship (excluding 3 week rotations for OBGYN and psychiatry). Students must submit the Mid-Point Clinical Evaluation form to the Clinical Director or Clinical Coordinators by 8AM on Friday of week 4 of their clinical rotation. Failure to do so will result in a deduction of the final rotation grade by one letter grade.

4. **Preceptor Evaluation** in which the assigned Preceptor will assess your professionalism, knowledge for level of training, interpersonal skills and assign a letter grade. The Preceptor Evaluation equals 30% of your final Preceptorship II grade.

5. **Exam Master Questions** are to be completed prior to taking the EOR exam with a minimum of 300 questions completed. Proof of completion of these questions needs to be provided when handing in paperwork.

Standard C3.04 The program must conduct and document a summative evaluation of each student within the final four months of the program to verify that each student is prepared to enter clinical practice.

6. The student will also be required to demonstrate success on a comprehensive **Summative Evaluation** to include:
   A. EOR examination which will be administered at 9AM during Back to Campus Week in May. This will be a Mock Board type examination. The EOR Examination equals 30% of the final Preceptorship II grade.
   B. The student will also be required to successfully complete a final OSCE (Objective Structured Clinical Exam)
   C. Randomly selected clinical skill(s) and interpretation.
   D. Attend Marywood University’s Board Review Course
Cardiology Objectives

1. When assigned a patient with a cardiovascular complaint, disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will be able to recognize various heart murmurs and arrhythmias when auscultating the patient’s heart, including but not limited to systolic and diastolic murmurs, clicks, rubs and split heart sounds. The student will also properly grade the murmurs on a scale of I – VI.

3. The student will demonstrate an understanding of the various forms of stress testing, echocardiograms, EKG’s, Holter monitors and event monitors, as well as cardiac catheterization and angiograms and venograms.

4. The student will demonstrate an understanding of the role of the PA in cardiothoracic surgical procedures to include coronary bypass graft surgery, valve replacement, valvuloplasty, thoracotomy, aneurysmectomy, and endarterectomy.

5. The student will demonstrate knowledge of the comprehensive care of the following cardiovascular conditions:
   A. Cardiomyopathies to include dilated, hypertrophic, and restrictive
   B. Conduction disorders to include atrial fibrillation, atrial flutter, atrioventricular blocks, bundle branch blocks, supraventricular tachycardias, ventricular tachycardias, and ventricular fibrillation.
   C. Congenital heart diseases to include atrial septal defects, coarctation of the aorta, patent ductus arteriosus, tetralogy of Fallot, ventricular septal defects
   D. Congestive heart failure
   E. Hypertension (Essential, secondary and malignant)
   F. Hypotensive disorders to include cardiogenic shock and orthostasis/ postural hypotension
   G. Ischemic heart disease to include acute myocardial infarction, and angina pectoris to include stable, unstable and Prinzmetal’s (variant).
   H. Vascular disease to include acute rheumatic fever, aortic aneurysm / dissection, arterial embolism/ thrombosis, chronic / acute arterial occlusion, and giant cell arteritis, peripheral vascular disease, phlebitis / thrombophlebitis, venous thrombosis, and varicose veins
   I. Valvular disease to include aortic stenosis/ insufficiency, mitral stenosis/ insufficiency, mitral valve prolapse, tricuspid stenosis/ insufficiency, pulmonary stenosis/ insufficiency
   J. Bacterial endocarditis, acute pericarditis, cardiac tamponade and pericardial effusion.

6. The PA student will also be familiar with the following classes of cardiac medications based on patient, side effect profile, dosages, and drug interactions:
   A. Diuretics
B. Beta blockers  
C. Calcium channel blockers  
D. ACE and ARB  
E. Other classes of antihypertensive drugs  
F. Antianginals and nitrate preparations  
G. Anticoagulants and antithrombotic  
H. Hyperlipidemic agents  
I. Circulatory/perfusion agents  

7. The student will demonstrate proper medical documentation.
Dermatology Objectives

1. When assigned a patient with a dermatological complaint, disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following dermatological conditions:
   A. Eczematous eruptions to include the various forms of dermatitis, dyshidrosis, and lichen simplex chronicus.
   B. Papulosquamous diseases to include dermatophyte infections (tinea versicolor, tinea corporis/ pedis), drug eruptions, lichen planus, pityriasis rosea, and psoriasis.
   C. Desquamative diseases to include erythema multiforme, Steven-Johnsons syndrome, and Toxic epidermal necrolysis.
   D. Bullous diseases to include Pemphigus vulgaris and Bullous pemphigoid
   E. Verrucous lesions to include seborrheic keratosis and actinic keratosis
   F. Infestations to include lice, scabies, and spider bites
   G. Neoplasms to include basal cell carcinoma, melanoma, squamous cell carcinoma, and Kaposi sarcoma.
   H. Alopecia
   I. Onychomycosis
   J. Paronychia
   K. Viral conditions to include condyloma acuminatum, exanthems, herpes simplex, molluscum contagiosum, verrucae, varicella zoster
   L. Bacterial infections to include cellulitis, vasculitis, erysipelas, impetigo, folliculitis, and abscess
   M. Acanthosis nigrans
   N. Burns
   O. Decubitus ulcers
   P. Hidradenitis suppurativa and Pilonidal disease
   Q. Lipomas
   R. Melasma
   S. Urticaria
   T. Vitiligo
   U. Acne vulgaris and acne rosacea

3. The student will demonstrate an understanding of the various technical skills to include removal of skin lesions, biopsies, appropriate slide staining, skin scrapings, suturing and suture removal.

4. The student will demonstrate proper medical documentation
Emergency Medicine Objectives (Required)

1. When assigned a patient with an emergent complaint, disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following emergent conditions:
   A. Cardiovascular conditions to include myocardial infarction, cardiac dysrhythmias and cardiac arrest
   B. Respiratory distress, obstruction, failure and arrest
   C. Acute pulmonary edema, congestive heart failure
   D. Shock to include anaphylactic, cardiogenic, neurogenic, hypovolemic, and septic
   E. Acute abdomen
   F. Trauma and orthopedic injuries
   G. Open wounds, lacerations, and hemorrhage
   H. Diabetic emergencies
   I. Environmental emergencies to include burns, cold injuries, heat injuries, near drowning, and bites/stings
   J. Poisoning and overdoses
   K. Psychiatric emergencies to include depression, mania, and suicidal/homicidal ideations and attempt
   L. Pelvic pain and vaginal bleeding
   M. Acute visual loss and eye emergencies
   N. Neurological disorders to include coma, seizures, stroke, increased intracranial pressure, and nontraumatic headaches

3. The student will demonstrate an understanding of the various technical skills to include the following:
   A. Intravenous therapy
   B. Venipuncture
   C. various injections
   D. Electrocardiogram
   E. Cardio-pulmonary resuscitation
   F. Casting and splinting
   G. Application of dressings and bandages, control external hemorrhage
   H. Insertion and removal of nasogastric catheter
   I. insertion and removal of urinary bladder catheter
   J. Administration of oxygen
   K. Cleansing, irrigation, and debridement of wound
   L. Suturing and suture removal
   M. Obtaining stool, sputum, urine, wound culture for testing
N. Carry out aseptic and isolation technique

4. The PA student will perform and/or assist with the following procedures only under direct physician supervision:
   A. Paracentesis
   B. Lumbar puncture
   C. Joint aspiration or injection
   D. Insertion of CVP line
   E. Thoracentesis
   F. Endotracheal/nasotracheal intubation

5. The student will demonstrate proper medical documentation.
Ear, Nose, & Throat Objectives

1. When assigned a patient with an Otolaryngology complaint, disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following conditions:

Ear complaints to include acoustic neuroma, acute/chronic otitis media, barotrauma, cerumen impaction, hearing impairment/sudden deafness, labyrinthitis, mastoiditis, Meniere’s disease, otitis externa, otosclerosis, ototoxic drugs, tympanic membrane perforation, vertigo, vestibular neuritis.

   A. Nose and sinus disorders to include epistaxis, nasal fractures, neoplasms, polyps, rhinitis, septal deviations and perforations and sinusitis
   B. Nasopharyngeal disorders to include Tornwald’s cysts and neoplasms
   C. Oropharyngeal disorders to include aphthous ulcers, dental abscess, epiglottitis, oral candidiasis, oral leukoplakia, oral herpes simplex, pharyngitis, tonsillitis, peritonsillar abscesses, neoplasms, parotiditis, sialadenitis,
   D. Disorders of the larynx to include vocal cord polyps, nodules, ulcers, laryngitis, and neoplasms

3. The student will have a demonstrate an understanding of the various technical skills to include the following:

   A. Otoscopic exam to include Rinne and Weber testing
   B. Tympanometry and audiometry
   C. Transillumination of the sinuses

4. Surgically the PA student will observe and/or assist in procedures to include, but not limited to:

   A. Placement of myringotomy tubes
   B. Tonsillectomy
   C. Tympanoplasty
   D. Cochlear implant
   E. Postnasal packing
   F. Removal of polyps
   G. Cyst excision/biopsy
   H. I and D of tonsillar abscess

5. The PA student will demonstrate proper medical documentation.
Family Medicine Objectives (Required)

1. When assigned a patient with a primary care complaint, disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following conditions:
   A. Disorders or complaints involving the eye to include double vision, red eye, blurred vision, painful eye, loss of visual acuity, foreign body
   B. Disorders or complaints of the ear, nose and throat to include deafness and decreased hearing acuity, tinnitus, vertigo, earache, epistaxis, nasal obstruction, foreign body, pharyngitis, hoarseness, and sinusitis:
   C. Disorders or complaints of the neurologic system to include headache, abnormal gain, loss of feeling/sensation, weakness, paralysis, seizures, altered level of consciousness, tremors, peripheral pain, paresthesias.
   D. Disorders or complaints of the respiratory system to include hemoptysis, normal vs. abnormal breath sounds, cough and sputum production, dyspnea, and respiratory pain.
   E. Disorders or complaints of the cardiovascular system to include hypertension, chest pain, palpitations, edema, syncope, varicose veins, phlebitis, claudication, heart murmurs, gallops, rubs, and vascular bruits.
   F. Disorders or complaints of the gastrointestinal system to include nausea, vomiting, diarrhea, hematemesis, gastroesophageal reflux, abdominal pain, dysphagia, melena, jaundice, rectal pain, pruritis, and rectal bleeding
   G. Disorders of the genitourinary system to include dysuria, polyuria, hematuria, anuria, oliguria, nocturia, urethral discharge, scrotal mass/pain, abnormal urinalysis, positive results in sexually transmitted disease testing
   H. Disorders or complaints of the endocrine system to include fatigue, unexplained weight loss or gain, obesity, hirsutism, gynecomastia, abnormal blood/urine glucose testing, diabetes mellitus types 1 and 2, thyroid dysfunction,
   I. Disorders or complaints of the hematologic system to include bleeding tendency, easy bruising, enlarged lymph node, anemia, leukocytosis, leukopenia, thrombocytosis, and thrombocytopenia
   J. Disorders or complaints of the musculoskeletal system to include pain, swelling or tenderness in joints, limitation in range of motion, muscular pain, muscle strain, muscle sprain, bone pain, and fractures.
   K. Disorders or complaints of the dermatologic system dermatologic to include skin lesions, infection, abnormal pigmentation, insect bite/infestation, and rashes
   L. Constitutional complaints to include chills, fever, night sweat, malaise, acute poisoning, and dehydration
M. Disorders or complaints of the psychological system to include depression, anxiety, stress, sexual dysfunction, abusive situation, eating disorders, psychiatric dysfunction, suicidal/homicidal ideations

N. Complaints or disorders commonly found in the geriatric population including mental status changes, depression, dementia, changes or difficulty with mobility, pressure ulcers, incontinence, urinary tract infections, osteoarthritis, abuse, neglect, and osteoporosis

3. The student will demonstrate the ability to perform the following assessments: Mini Mental Status Assessment (MMSE), activities-of-daily living assessment (ADLs), and independent activities-of-daily living assessment (IADLs).

4. The student will demonstrate an understanding of the various technical skills to include obtaining throat, nasopharyngeal, blood, urethral, vaginal, stool, and wound culture specimens; testing stool for gross and occult blood; administering and reading purified protein derivative (PPD) test for tuberculosis; testing visual acuity using Snellen Chart; administering subcutaneous, intradermal, intravenous and intramuscular injections; obtaining a blood sample from a finger stick or phlebotomy; performing an electrocardiogram and reading this for technical accuracy; identifying simple abnormal cardiac rhythm on EKG or cardiac monitor; insertion of an intravenous (IV) line; monitoring an IV site for infiltration, phlebitis or cellulitis; inserting nasogastric tube

5. Be familiar with the normal and abnormal values of laboratory test including:
   A. CBC and differential
   B. Urinalysis
   C. BUN, creatinine
   D. Electrolytes (Na⁺, Ca²⁺, K⁺, Cl⁻, CO₂)
   E. Liver enzymes including SGOT (AST), SGPT (ALT), LDH, alkaline Phosphatase, total bilirubin, direct bilirubin and indirect bilirubin
   F. Glucose
   G. Free T4, TSH
   H. Arterial blood gases Prothrombin time (PT) and activated partial thromboplastin time (APTT)

6. Demonstrate knowledge of which radiologic study is appropriate and how to interpret findings.

7. The student will demonstrate proper medical documentation.
Gastrointestinal Objectives

1. When assigned a patient with a gastrointestinal (GI) complaint, disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following conditions:
   A. Disorders of the esophagus to include esophagitis, motor disorders, Mallory-Weiss tears, neoplasms, strictures, varices
   B. Disorders of the stomach to include gastroesophageal reflux disease (GERD), gastritis, neoplasms, peptic ulcer disease, pyloric stenosis
   C. Disorders of the gallbladder to include acute/chronic cholecysitis and cholelithiasis
   D. Disorders of the liver to include acute/chronic hepatitis, cirrhosis, and neoplasms
   E. Disorders of the pancreas to include acute/chronic pancreatitis and neoplasms
   F. Disorders of the intestine and colon to include appendicitis, constipation, diverticular disease, inflammatory bowel disease, intussusception, irritable bowel disease, ischemic bowel disease, neoplasms, obstructions, and toxic megacolon
   G. Disorders of the rectum to include anal fissure, anorectal abscess/fistula, fecal impaction, hemorrhoids, neoplasms, pilonidal disease, and polyps
   H. Hernias to include hiatal, incisional, inguinal, umbilical, and ventral hernias
   I. Infectious diarrhea
   J. Nutritional deficiencies to include niacin, thiamine, vitamin A, riboflavin, vitamin C, vitamin D, and vitamin K deficiencies
   K. Metabolic disorders to include lactose intolerance and phenylketonuria

3. The PA student will perform and/or assist with the following procedures only under direct physician supervision:
   A. EGD
   B. Endoscopy
   C. Colonoscopy
   D. ERCP
   E. Esophageal dilatation
   F. Liver biopsy
   G. Paracentesis

4. The student will demonstrate proper medical documentation.
General Surgery Objectives (Required)

1. When assigned a patient with a surgical or potential surgical complaint, disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following conditions:
   A. Acute and chronic abdominal pain
   B. Abdominal mass
   C. Rectal bleeding
   D. Weight loss
   E. Hernias (diaphragmatic, inguinal, umbilical, incisional, femoral)
   F. Injury, including CPR, shock, hemorrhage, and specific emergency treatments.
   G. Masses, in any location
   H. Burns

3. The student will demonstrate an understanding of the various technical skills to include the following:
   A. Treatment of simple wounds, including cleansing and irrigation, debridement, different types of closures, and sterile dressings.
   B. Administration of local anesthetics (tissue infiltration or digital block)
   C. Correct selection of suturing materials
   D. Examine, describe and debride a burn area, check progress for healing.
   E. Control anterior and posterior nasal hemorrhage.
   F. Incise and drain abscesses.
   G. Remove ingrown toenails
   H. Remove foreign bodies from ear canal, conjunctiva and nose, including the removal of impacted cerumen for the ears.
   I. The principles of treatment of insect, animal, and human bites.

4. Surgically the PA student will observe and/or assist in procedures to include, but not limited to demonstrate knowledge of anatomy, surgical procedures, and indications for surgery; demonstrate ability to clamp and tie bleeders using proper suture materials and demonstrate knowledge of suture material and indications for each; demonstrate ability to tie one-handed and two-handed surgical knots and cut ends into appropriate lengths depending on the type of suture and location of the knot; demonstrate ability to dress a closed wound; demonstrate ability to transfer patient to recovery room; and demonstrate the importance of post-operative care

5. The PA student will also be familiar with the following classes of medications based on patient, side effect profile, dosages, and drug interactions:
   A. Antihypertensives
   B. Antiarrhythmics
C. Narcotics
D. NSAIDs
E. Diuretics
F. Anticoagulants
G. Antiplatelet aggregates

6. The student will demonstrate proper medical documentation.
Internal Medicine Objectives (Required)

1. When assigned a patient with a general medicine complaint, disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following conditions:
   A. Disorders of the eye to include macular degeneration, glaucoma, and cataract
   B. Disorders or complaints of the neurologic system to include cerebrovascular accident (CVA), multiple sclerosis (MS), Parkinson’s disease, Alzheimer’s disease, delirium, abnormal gait, weakness, paralysis, seizures, altered level of consciousness, peripheral neuropathy, diabetic neuropathy
   C. Disorders or complaints of the respiratory system to include chronic obstructive pulmonary disease (COPD), pneumonia, and lung cancer
   D. Disorders or complaints of the cardiovascular system to include hypertension, chest pain, angina, murmurs, valvular disease, palpitations, peripheral edema, congestive heart failure, claudication, coronary artery disease, atherosclerotic disease, cardiomyopathies
   E. Disorders or complaints of the gastrointestinal system including Crohn’s disease, ulcerative colitis, colorectal cancer, GERD, ulcers, H. pylori infection, irritable bowel syndrome, tumors, and polyps, nausea, vomiting, diarrhea, and constipation
   F. Disorders or complaints of the genitourinary system including total body fluid volume disorders, acute and chronic renal failure, anuria, oliguria, scrotal mass, pain, abnormal urinalysis, benign prostatic hyperplasia (BPH), bladder cancer, incontinence, sexually transmitted disease
   G. Disorders or complaints of the endocrine system including diabetes mellitus types 1 and 2, adrenal insufficiency, Cushing’s disease, thyroid dysfunction, thyroid cancer, diabetes insipidus, fatigue, unexplained weight loss/gain, hirsutism, obesity
   H. Disorders or complaints of the hematologic system including bleeding tendency, easy bruising, anemias, coagulopathies, proliferative disorders and malignancies, impaired blood, lymph circulation, leukopenia, leukocytosis, thrombocytopenia, and thrombocytosis
   I. Disorders of the immunologic system to include rheumatoid arthritis (RA), human immunodeficiency virus (HIV), Systemic Lupus Erythematosus (SLE), scleroderma, and other immune deficiencies
   J. Disorders or complaints of the dermatologic system to include psoriasis, vasculitis, stasis and pressure ulcers, eczema, rashes, lesions, and insect bites/infestations, and hyperpigmentation
K. Constitutional complaints or diseases including sepsis, chills, fever, night sweats, malaise, and dehydration

L. Disorders or complaints of the psychological system including dementias, delirium, depression, stress, anxiety, sexual dysfunction, severe psychiatric dysfunction, suicidal/homicidal ideations, and abuse/neglect

M. Complaints or disorders commonly found in the geriatric population including mental status changes, depression, dementia, changes or difficulty with mobility, pressure ulcers, incontinence, urinary tract infections, osteoarthritis, abuse, neglect, and osteoporosis

N. The student will demonstrate the ability to perform the following assessments:
   Mini Mental Status Assessment (MMSE), activities-of-daily living assessment (ADLs), and independent activities-of-daily living assessment (IADLs).

3. The student will demonstrate an understanding of the various technical skills to include obtaining throat, nasopharyngeal, blood, urethral, vaginal, stool, and wound culture specimens; testing stool for gross and occult blood; administering and reading purified protein derivative (PPD) test for tuberculosis; testing visual acuity using Snellen Chart; administering subcutaneous, intradermal, intravenous and intramuscular injections; obtaining a blood sample from a finger stick or phlebotomy; performing an electrocardiogram and reading this for technical accuracy; identifying simple abnormal cardiac rhythm on EKG or cardiac monitor; insertion of an intravenous (IV) line; monitoring an IV site for infiltration, phlebitis or cellulitis; inserting nasogastric tube.

4. Be familiar with the normal and abnormal values of laboratory test including:
   A. CBC and differential
   B. Urinalysis
   C. BUN, creatinine
   D. Electrolytes (Na\(^+\), Ca\(^{2+}\), K\(^+\), Cl\(^-\), CO\(_2\))
   E. Liver enzymes including SGOT (AST), SGPT (ALT), LDH, alkaline Phosphatase, total bilirubin, direct bilirubin and indirect bilirubin
   F. Glucose
   G. Free T4, TSH
   H. PO\(_2\), PCO\(_2\), PH
   I. Prothrombin time (PT) and activated partial thromboplastin time (APTT)

5. Demonstrate knowledge of which radiologic study is appropriate and how to interpret findings.

6. The student will demonstrate proper medical documentation.
Obstetrics/Gynecology Objectives (Required)

1. When assigned a patient with a gynecological or obstetric complaint, disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following conditions:
   A. Disorders of the uterus to include dysfunctional uterine bleeding (DUB), endometrial cancer, endometriosis, leiomyoma, and prolapse
   B. Disorders of the ovary to include polycystic ovarian syndrome, ovarian cysts and neoplasms
   C. Disorders of the cervix to include cancer, cervicitis, dysplasia, and incompetent cervix
   D. Disorders of the vagina and vulva to include cystocele, neoplasm, prolapse, rectocele, and vaginitis
   E. Disorders of the menstrual system to include amenorrhea, dysmenorrhea, and premenstrual syndrome
   F. Menopause
   G. Disorders of the breast to include abscesses, carcinoma, fibroadenoma, fibrocystic disease, gynecomastia, galactorrhea, and mastitis
   H. Pelvic inflammatory disease
   I. Contraceptive methods
   J. Infertility
   K. Uncomplicated pregnancy to include prenatal diagnosis/care and normal labor/delivery.
   L. Complicated pregnancy to include abortion, abruptio placentae, Cesarean section, dystocia, ectopic pregnancy, fetal distress, gestational diabetes, gestational trophoblastic disease, hyperemesis gravidarum, hypertension disorders in pregnancy, multiple gestation, placenta previa, postpartum hemorrhage, premature rupture of membranes, and Rh incompatibility.

3. The student will demonstrate an understanding of the various technical skills to include pelvic exam, PAP smear, wet prep cultures, urinalysis, pregnancy testing, bimanual examination, breast examination, colposcopy, biopsies, subdermal contraceptive implantation, IUD placement, diaphragm fitting, obstetrical ultrasound, fundal height measurements, Leopold maneuvers, fetal monitoring, induction of labor, rupture of membranes, episiotomy, episiotomy repair, normal vaginal delivery, forceps delivery, delivery of placenta, cesarean delivery, total abdominal hysterectomy, vaginal hysterectomy, salpingo-oophorectomy, laparoscopic surgery, dilatation and curettage, cystocele/rectocele repair, Cesarean delivery.

4. The student will demonstrate proper medical documentation.
Hematology/Oncology Objectives

1. When assigned a patient with a hematologic or oncologic disease or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will be able to recognize various hematologic and oncologic diseases and disorders, and will demonstrate knowledge of the comprehensive care of the following cardiovascular conditions including but not limited to the following:
   A. Anemias of chronic disease, aplastic anemia, folate deficiency anemia, G6PD deficiency anemia, hemolytic anemia, iron deficiency anemia, sickle cell anemia, thalassemia, vitamin B₁₂ deficiency anemia
   B. Coagulation disorders including clotting factor disorders, hypercoagulable states, idiopathic thrombocytopenic purpura, and thrombotic thrombocytopenic purpura
   C. Malignancies including acute and chronic lymphocytic leukemia, acute and chronic myelogenous leukemia, lymphoma, and multiple myeloma

3. The student will be able to demonstrate knowledge of cancer treatment factors that is local treatment modalities vs. systematic modalities. Local treatments include surgery and radiation therapy. Systemic treatment modalities include antineoplastic chemotherapy, hormonal therapy and immunological therapy.

4. The student will be familiar with the diagnosis, treatment, and education of patients involving the following cancers: lung, breast, skin, colon, prostate, gynecologic, pancreatic, liver, thyroid, bone, brain, kidney, bladder, and testicular.

5. The student will be able to explain the significance of the following commonly used tumor markers for screening: CEA, CA-125, CA 19-9, CA 15-3, HCG, progesterone receptors, PSA, and AFP

6. The student will demonstrate proper medical documentation.
Orthopedics Objectives (required)

1. When assigned a patient with an orthopedic or musculoskeletal complaint, disease, or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following orthopedic conditions:
   A. Disorders of the shoulder to include fractures, dislocations, rotator cuff disorders, separations, and sprains/strains. Disorders of the forearm, wrist, and hand to include fractures, dislocations, sprains/strains, and tenosynovitis.
   B. Disorders of the back and spine to include ankylosing spondylitis, back strain/sprain, cauda equina, herniated nucleus pulposus, kyphosis, low back pain, scoliosis, and spinal stenosis
   C. Disorders of the hip to include avascular necrosis, development dysplasia, fractures/dislocations, and slipped capital femoral epiphysis
   D. Disorders of the knee to include fractures, dislocations, Osgood-Schlatter disease, and soft tissue injuries
   E. Disorders of the ankle and foot to include fractures, dislocations, and soft tissue injuries
   F. Infectious diseases to include acute/chronic osteomyelitis and septic arthritis
   G. Neoplastic diseases to include bone cysts/tumors and ganglion cysts
   H. Osteoarthritis
   I. Osteoporosis
   J. Compartment syndrome
   K. Rheumatologic conditions to include fibromyalgia, gout/pseudogout, juvenile rheumatoid arthritis, polyarteritis nodosa, polymyositis, polymyalgia rheumatic, reactive arthritis (Reiter syndrome), rheumatoid arthritis, systemic lupus erythematosus, systemic sclerosis (scleroderma), and Sjögren syndrome

3. The student will demonstrate an understanding of the various orthopedic testing procedures to include, but not limited to, the following: Apley scratch test, Impingement/Apprehension tests, straight leg raises, Trendelenburg test, Babinski sign, Oppenheim reflex, Tinel’s sign, Phalen’s sign, Lachman test, anterior and posterior drawer test, and the McMurray test

4. The student will have a demonstrate an understanding of the various technical skills to include the following: immobilization and transportation of the patient with orthopedic trauma, cast application and removal, splinting, appropriate application and use of tape, ace bandages, slings, and cervical collars, and joint injections and aspirations, the proper use of heat vs. cold, and instruction in cane/walker/crutches use
5. Surgically the PA student will observe and/or assist in procedures to include, but not limited to demonstrate knowledge of anatomy, surgical procedures, and indications for surgery; demonstrate ability to clamp and tie bleeders using proper suture materials and demonstrate knowledge of suture material and indications for each; demonstrate ability to tie one-handed and two-handed surgical knots and cut ends into appropriate lengths depending on the type of suture and location of the knot; demonstrate ability to dress a closed wound; demonstrate ability to transfer patient to recovery room; and demonstrate the importance of post-operative care.

6. The student will demonstrate proper medical documentation.
Pediatric Objectives (Required)

1. When assigned a patient with a pediatric complaint, disease, or disorder, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following orthopedic conditions:
   A. Disorders of the respiratory system to include airway obstruction, asthma, cystic fibrosis, epiglottitis, hyaline membrane disease, laryngotracheobronchitis, pneumonia, RSV, lower respiratory tract infections, sleep apnea, tuberculosis, respiratory distress syndrome
   B. Disorders of the musculoskeletal system to include acute orthopedic trauma, developmental dysplasia of hip, slipped capital femoral epiphysis, Osgood Schlatter disease, muscular dystrophy, cerebral palsy, scoliosis, bone tumors, juvenile rheumatoid arthritis
   C. Disorders of the EENT system to include hearing loss, acute/chronic otitis media, otitis externa, epistaxis, pharyngitis, mononucleosis, upper respiratory tract infections, allergic rhinitis, strabismus, foreign body in the nares and/or eye, corneal abrasion, peritonsillar abscess, oral candidiasis, acute epiglottitis, retinoblastoma, and conjunctivitis
   D. Disorders of the GI system to include constipation, gastroenteritis, diarrhea, problems with feeding, GERD, pyloric stenosis, dehydration, obesity, rectal bleeding, hernias, Hirschsprung’s disease, intussusception, Celiac disease, jaundice, necrotizing enterocolitis, pinworms, congenital anomalies of the GI tract, and rectal impaction
   E. Disorders of the genitourinary system to include dehydration, acute/chronic urinary tract infections, enuresis, diaper rash, Wilms tumor, testicular torsion, testicular swelling/pain, undescended testicle, and acute glomerulonephritis
   F. Social disorders to include child abuse, poisoning, neglect, child not meeting predetermined milestones based on age, and battered child syndrome
   G. Disorders of the neurological system to include febrile vs. nonfebrile seizures, meningitis, head injuries, headaches, and convulsive disorders
   H. Cognitive and psychological disorders to include delayed speech, learning disabilities, autism, attention deficit disorder, attention deficit hyperactivity disorder, eating disorders, depression, and phobias
   I. Common cardiac disorders including innocent vs serious cardiac murmurs, cardiomyopathy, and congenital heart diseases
   J. Disorders of the integumentary system to include acne, dermatitis/eczema, diaper rash, cellulitis, erysipelas, impetigo, paronychia, lice, scabies, spider bites, burns, birthmarks, and urticaria
K. Disorders of the hematologic/oncologic system to include anemia, leukemia, lymphoma, ITP/TTP, and bleeding disorders.
L. Disorders of the endocrine system to include diabetes, DKA, and hypothyroidism.
M. Disorders due to infectious diseases to include varicella, measles, mumps, rubella, rubeola, viral diseases, scarlet fever/rheumatic fever, Kawasaki disease, diphtheria, pertussis, and children born to HIV+ mothers.

3. The student will be knowledgeable about the following topics in pediatric care:
   A. Developmental milestones
   B. Normal growth/development
   C. Pediatric nutrition
   D. Puberty
   E. Reflexes (infantile)
   F. Vaccinations

4. The student will be able to interpret the following diagnostic tests.
   A. CBC with manual and automated differential
   B. BMP (basic metabolic panel)
   C. UA/C&S (urinalysis/culture & sensitivity)
   D. PPD (purified protein derivative)
   E. Urinalysis
   F. Culture and sensitivity

4. The student will be able to complete the following collect samples including urine, stool, venous blood, sputum and wound swabs; perform intramuscular, intradermal, and subcutaneous injections; screening audiometry.

5. The student will be able to assist with the collection of CSF.

6. The student shall be able to provide medical education and counseling of the parents’, guardians, family members, and patient’s level of comprehension to include diagnosis, treatment, and prevention.

7. The student will demonstrate proper medical documentation.
Plastic Surgery Objectives

1. When assigned a patient with a plastic surgery or cosmetic complaint, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation, through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following conditions including but not limited to cancerous lesions including malignant melanoma, squamous cell carcinoma, basal cell carcinoma; precancerous lesions; burns; breast reconstructions secondary to cancer; cleft palate; lacerations; body dysmorphic disorders; wounds; and reconstructive procedures including breast reduction/augmentation, rhinoplasty, abdominoplasty, and rhytidectomy.

3. The student will demonstrate an understanding of the various technical skills to include the following: removal of superficial lesions, punch biopsy, first assist during surgical procedures, wound debridement, cryosurgery, and cauterization.

4. Surgically the PA student will observe and/or assist in procedures to include, but not limited to demonstrate knowledge of anatomy, surgical procedures, and indications for surgery; demonstrate ability to clamp and tie bleeders using proper suture materials and demonstrate knowledge of suture material and indications for each; demonstrate ability to tie one-handed and two-handed surgical knots and cut ends into appropriate lengths depending on the type of suture and location of the knot; demonstrate ability to dress a closed wound; demonstrate ability to transfer patient to recovery room; and demonstrate the importance of post-operative care.

5. The student will demonstrate proper medical documentation.
Psychiatry Objectives (Required)

1. When assigned a patient with a psychiatric complaint, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation, through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following conditions including but not limited to:
   A. Anxiety disorders including panic attack, generalized anxiety disorder, post-traumatic stress disorder, and phobias
   B. Attention deficit disorder and autism
   C. Eating disorders including anorexia nervosa, bulimia nervosa, and obesity
   D. Mood disorders including adjustment disorder, bipolar disorder, depression, and dysthymia
   E. Personality disorders including antisocial, avoidant, borderline, dependent, histrionic, narcissistic, obsessive-compulsive, paranoid, schizoid, and schizotypal
   F. Psychoses including delusional disorder, schizophrenia, and schizoaffective disorder
   G. Somatoform disorders
   H. Substance abuse including alcohol abuse/dependence, drug abuse/dependence, and tobacco use/dependence
   I. Other psychiatric disorders including child and elder abuse, domestic violence, uncomplicated bereavement, and acute stress reactions.

3. The student should be able to recognize a psychiatric emergency and be able to maintain the safety of him/herself as well as the safety of the patient.

4. The student shall be familiar with various screenings tools used in the assessment of psychiatry and addictive medicine (ie. CAGE, MMSE).

5. The student shall be able to order and interpret appropriate diagnostic tests to include, laboratory tests, imaging studies and any other indicated tests.

6. The student will demonstrate proper medical documentation.
Nephrology/Urology Objectives

1. When assigned a patient with a urologic complaint, the PA student will perform an appropriate and thorough history and physical examination, initiate the proper evaluation, through ordering and interpreting of appropriate diagnostic studies, develop appropriate differential and final diagnosis, as well as proper treatment, management, follow up, patient education and referral for the condition.

2. The student will demonstrate knowledge of the comprehensive care of the following conditions including but not limited to:
   a. Benign Conditions of the GU Tract including benign prostatic hyperplasia, cryptorchidism, erectile dysfunction, hydrocele/varicocele, incontinence, nephro/uro lithiasis, paraphimosis/phimosis, and testicular torsion
   b. Infectious/Inflammatory Conditions including cystitis, epididymitis, orchitis, prostatitis, pyelonephritis, and urethritis
   c. Neoplastic Diseases including bladder carcinoma, prostate carcinoma, renal cell carcinoma, testicular carcinoma, and Wilms’ tumor
   d. Renal Diseases including acute/chronic renal failure, glomerulonephritis, nephrotic syndrome, and polycystic kidney disease
   e. Electrolyte and Acid/Base Disorders including hypo/hypernatremia, hypo/hyperkalemia, hypo/hypercalcemia, hypomagnesemia, metabolic alkalosis/acidosis, respiratory alkalosis/acidosis, volume depletion, and volume excess

3. The student will be able to interpret the following diagnostic tests including PSA, VCUG, cystoscopy, KUB, CT scan, urinalysis, ultrasound, BUN/creatinine, CBC, renal arteriography, post void residual.

4. The student shall be able to perform rectal exams and catheterization of male and female patients.

5. The student shall be able to assist the urologist on the following surgical procedures including vasectomy, adult circumcisions, and prostatectomy

6. The student will demonstrate proper medical documentation.
Appendix A

Marywood University Physician Assistant Program
Code of Ethics of the Physician Assistant Profession

The American Academy of Physician Assistants recognizes its responsibility to aid the profession in maintaining high standards in the provision of quality and accessible health care services. The following principles delineate the standards governing the conduct of physician assistants in their professional interactions with patients, colleagues, other health professionals and the general public. Realizing that no code can encompass all ethical responsibilities of the physician assistant, this enumeration of obligations in the code of ethics is not comprehensive and does not constitute a denial of the existence of other obligations, equally imperative, though not specifically mentioned.

Physician Assistants shall be committed to providing competent medical care, assuming as their primary responsibility the health, safety, welfare and dignity of humans. 
Physician Assistants shall extend to each patient the full measure of their ability as dedicated, empathetic health care providers and shall assume responsibility for the skillful and proficient transactions of their professional duties.
Physician Assistants shall deliver needed health care services to health consumers without regard to sex, age, race, creed, socio-economic and political status.
Physician Assistants shall adhere to all state and federal laws governing informed consent concerning the patient’s health care.
Physician Assistants shall seek consultation with their supervising physician, other health care providers, or qualified professionals having special skills, knowledge or experience whenever the welfare of the patient will be safeguarded or advanced by such consultation. Supervision should include ongoing communication between the physician and the physician assistant regarding the care of the patient.
Physician Assistants shall take personal responsibility for being familiar with and adhering to all federal/state laws applicable to the practice of their profession.
Physician Assistants shall not misrepresent in any manner, either directly or indirectly, their skills, training, professional credentials, identity or services.
Physician Assistants shall uphold the doctrine of confidentiality regarding privileged patient information, unless required to release such information by law, or such information becomes necessary to protect the welfare of the patient and the community.
Physician Assistants shall strive to maintain and increase the quality of individual health care service through individual study and continuing education.
Physician Assistants shall have the duty to respect the law, to uphold the dignity of the physician assistant profession and to accept its ethical principles. The physician assistant shall not participate in or conceal any activity that will bring discredit or dishonor to the physician assistant profession and shall expose, without fear of favor, any illegal or unethical conduct in the medical profession.
Physician Assistants, ever cognizant of the needs of the community, shall use the knowledge and experience acquired as professionals to contribute to an improved community. Physician Assistants shall strive to maintain a spirit of cooperation with their professional organization and the general public.
Appendix B
Marywood University Physician Assistant Program
Graduate Competencies

Upon completion of the Marywood University PA Program, the graduate will be able to:

Elicit a medical history
- Ensures patient comfort
- Establishes rapport with patient (and/or family)
- Reviews medical record
- Recognizes and interprets verbal and non-verbal cues
- Includes all relevant components
- Adjusts according to reason for visit, patient demographics, etc.
- Elicits psychosocial factors which may impact upon patient’s health

Perform a physical examination
- Explains examination procedures
- Ensures patient comfort and privacy
- Utilizes diagnostic tools appropriately
- Assesses general status of patient
- Utilizes the skills of inspection, palpation, percussion and auscultation
- Obtains vital signs
- Examines/assesses appropriate systems
- Employs special procedures where appropriate
- Adjusts according to reason for visit, patient demographics, patient condition, etc.
- Uses principles of economy of motion, economy of time

Develop a diagnostic management plan
- Differentiates normal from abnormal findings
- Orders appropriate diagnostic tests
- Performs diagnostic tests as appropriate
- Considers cost, sensitivity, specificity, invasiveness, appropriate sequencing, etc.
- Repeats or orders additional tests as indicated
- Considers referral as option

Analyze data and develop a differential diagnosis
- Analyzes subjective and objective findings
- Recognizes diagnostic patterns
- Recognizes impact of social and behavioral issues
Applies principles of epidemiology and principles of evidenced based medicine
Uses problem oriented system

Develop a therapeutic management plan
- Applies principles of pharmacotherapeutics
- Considers patient’s overall condition including socioeconomic factors
- Develops plan with patient (and/or family)
- Includes non-pharmacologic modalities as appropriate
- Considers referral as option
- Ensures implementation
- Ensures follow-up
- Adjusts plan as needed
- Obtains patient’s informed consent as appropriate

Provide patient education
- Maximizes patient autonomy
- Applies principles of adult learning
- Instructs patients in health promotion and disease prevention principles
- Assists patient/family with utilization of community services
- Develops patient education materials
- Includes family members as appropriate

Maintain medical records
- Obtains biographical data for patient
- Writes history, physical examination, progress notes, orders, etc.
- Utilizes proper medical charting principles
- Prepares summaries as needed (admission, discharge, surgery, etc.)
- Uses written and oral (dictation) communication techniques
- Obtains physician signature
- Maintains confidentiality of record

Perform medical and surgical techniques
- Performs basic and advanced cardiac life support
- Provides wound care including suturing and removal of foreign bodies
- Obtains specimens (blood, fluid, or tissue)
- Administers medications by various routes
- Assists in surgery (first or second assist)
- Applies casts and other forms of immobilization
- Uses principles of aseptic technique and universal precautions
Utilize administrative, management and research skills
- Complies with local, state, and federal laws and regulations
- Monitors patient care for quality outcomes and cost effectiveness
- Follows guidelines for third-party reimbursement
- Develops research proposal
- Utilizes technology including computer technology to enhance patient care
- Participates in active scholarship and teaching

Demonstrate professionalism
- Demonstrates clear and effective oral and written communication skills
- Maintains patient confidentiality
- Maintains high moral and ethical standards
- Functions as a member of the health care team
- Participates in service to the community and the profession
- Demonstrates respect for individual and cultural diversity
- Recognizes limitations and seeks physician counsel
- Promotes the physician assistant profession and philosophies
- Applies humanistic approach to health care

Acknowledges the importance of lifelong learning and professional education
- Maintains certification status
- Keeps abreast of current medical/surgical trends and technology
- Provides education to the community and/or profession
- Keeps abreast of technological advances