



West Liberty University
Physician Assistant Program

STUDENT HANDBOOK
POLICIES AND GUIDELINES
2015-2017

**West Liberty University
Physician Assistant Program**

Student Handbook

West Liberty University and the Faculty and Staff of the Physician Assistant Program welcome you! We congratulate you on this accomplishment and look forward to assisting you in achieving your career goal of becoming a practicing physician assistant. The path you have chosen is intense, yet highly rewarding. In addition to guiding you through the academic and clinical phases, the program will also instill professionalism and empathy, traits that are essential in the arena of patient care.

The Student Handbook provides information about the policies, procedures and requirements for successful navigation and completion of the program. The information provided is not all inclusive and school-wide policies and procedures are also covered in the West Liberty University Student Handbook. Additional information will be distributed and/or discussed throughout the course of the program.

Questions about policies, requirements, and procedures may be directed to faculty, staff, or the Program Director for clarification. You are encouraged to refer to the handbook frequently for information. Please retain this handbook for the duration of the program.

You are also required to detach the Statement of Acknowledgement form, sign, date, and then return it to the department Administrative Assistant no later than two weeks from receipt of the handbook.

Welcome!

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Statement of Acknowledgement

I have received a copy of the Physician Assistant Program *Student Handbook-Policies and Guidelines, 2015-2017*. I agree to read this and to follow the policies outlined.

Name (print)

Signature

Date

TABLE OF CONTENTS

Topic	Page
ACCREDITATION STATUS	7
MISSION AND GOALS	8
CURRICULUM.....	9
COURSE DESCRIPTIONS.....	10 -19
CODE OF ETHICS OF THE PHYSICIAN ASSISTANT PROFESSION	20
TECHNICAL STANDARDS.....	21
OBSERVATION	21
GENERAL POLICIES ON ACADEMIC PERFORMANCE:.....	23
EDUCATIONAL ASSUMPTIONS	23
Dress Code.....	24
Program Expectations of Students	25
Decision Points	26
The Grading and Assessment System.....	26
CPR/ACLS.....	27
THE CLINICAL YEAR	27
THE PHYSICIAN ASSISTANT CLINICAL KNOWLEDGE RATING AND ASSESSMENT TOOL (PACKRAT)	29
EXAMINATION POLICIES AND PROCEDURES	30
Academic Dishonesty	30
PROFESSIONAL EXPECTATIONS.....	31
POLICY REGARDING REMEDIATION AND DECELERATION AND DISMISSAL	33
WLU PA STUDIES GIREVANCE AND APPEAL PROCEDURE.....	35
HEATH SCIENCES GRIEVANCE & APPEAL POLICY.....	36
GUIDELINES FOR ACADEMIC PROBATION	37

PROGRAM DISCIPLINARY ACTIONS.....	38
GUIDELINES FOR ADDRESSING SEXUAL HARASSMENT AND OTHER FORMS OF UNLAWFUL DISCRIMINATION AND GRIEVANCE	39
GUIDELINES FOR VOLUNTARY WITHDRAWAL.....	40
GUIDELINES FOR LEAVE OF ABSENCE.....	40
ACADEMIC ADVISING AND COUNSELING.....	41
REQUIREMENTS FOR PROGRESSION/GRADUATION.....	42
CLEARANCE FOR GRADUATION	42
CLEARANCE FOR THE NCCPA (National Commission on Certification of Physician Assistants) BOARD EXAMINATION	43
OPPORTUNITIES FOR CONTRIBUTIONS TO PA EDUCATION AND THE PA PROFESSION.....	
HEALTH PROFESSIONAL REQUIREMENTS	443
Health Screening and Immunization Verification.....	44
Health Insurance/Financial Responsibility	45
Universal Precautions:	45
STUDENT BACKGROUND CHECKS AND DRUG SCREENINGS	47
PROGRAM COSTS, FINANCIAL AID and REFUND POLICY.....	48
Tuition and Fees.....	48
Financial Aid.....	48
Estimate of Costs (FY 2015-16).....	48
Tuition Refund Policy.....	49
Registration.....	49
Change of Address.....	49
Practice Liability Insurance.....	49
ID Badges.....	49
GRADE REPORTS	50

Incomplete Grades	50
MISCELLANEOUS ISSUES.....	50
WLU – Department of PA Studies Communication Policy for Students	50
E-mail Addresses	50
Social Media policies/Guidelines	52
ADDITIONAL CLINICAL PHASE INFORMATION AND POLICIES.....	54
Section 1 - General Clinical Year Policies	55
Section 2 - Entry into the Clinical Year	57
Section 3 - Dress & Behavior Standards	58
Section 4 - Attendance.....	61
Section 5 - Grading Policies & Academic Standards	64
Section 6 - Miscellaneous Standards, Policies & Issues	66
APPENDICES	71
Appendix A - Patient Rights	72
Appendix B - Guidelines for Written case Presentations for Clinical Clerkships	73
Appendix C - Psychiatric/Behavior Medical Case Study Template	78
Appendix D - Power Point Presentation	82
Appendix E - Decision Point Checklist	83

ACCREDITATION STATUS

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

Accreditation remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the *Standards*. The approximate date for the next validation review of the program by the ARC-PA will be **March 2022**. The review date is contingent upon continued compliance with the Accreditation *Standards* and ARC-PA policy.

MISSION AND GOALS

West Liberty University Mission Statement

To provide our students the opportunity for a high quality undergraduate, graduate, and professional education.

West Liberty University Physician Assistant Program

Mission Statement and General Goals

Mission Statement

The West Liberty University Physician Assistant Program is committed to providing a high-quality education to physician assistant candidates, who as an integral part of the health-care team, will provide empathetic and competent care to the patients they serve, including those in underserved areas.

General Goals

Graduates of the Master of Science in Physician Assistant Studies will:

- ✓ Be clinically competent primary care physician assistants who practice evidence-based medicine.
- ✓ Reflect the highest standards of compassionate, legal, ethical, and moral conduct.
- ✓ Be team-oriented, culturally sensitive providers who are dedicated to their communities.
- ✓ Encourage improvement in the quality, accessibility, and cost-effectiveness of patient care in their community and state.
- ✓ Be critical-thinking and effective communicators with both patients and health care professionals.
- ✓ Identify the lack of medical care in rural and underserved regions and consider practicing their discipline or providing service in such locations.
- ✓ Have an appreciation of the greater field of knowledge beyond their discipline and recognize the importance of lifelong learning in maintaining a level of excellence in their practice.

West Liberty University

Physician Assistant Program

Curriculum
June 2015 – June 2017

Jun 29-Sep 18 2015	Sep 28-Dec 18 2015	Jan 04-Mar 25 2016	April 4 -Jun 15 2016	Clinical Clerkship	Begin	End
				Clinical Clerkship-1	Jun 27, 2016	Jul 29, 2016
Human Anatomy & Physiology I (PA-501) (4 units); 6	Human Anatomy & Physiology II (PA-502) (4 units); 6	Health Promotion & Disease Prevention. (PA-519) (1 unit); 2	Behavioral Medicine (PA-518) (2 units); 2	Clinical Clerkship-2	Aug 01, 2016	Sep 02, 2016
				Clinical Clerkship-3	Sep 05, 2016	Oct 07, 2016
Research I (PA-504) (1 unit); 2	Research II (PA-505) (1 unit); 2	Clinical Skills I (PA-536) (2 units); 3	Clinical Skills II (PA-537) (2 units); 3	Clinical Clerkship-4	Oct 10, 2016	Nov 11, 2016
				Clinical Clerkship-5	Nov 14, 2016	Dec 16, 2016
Principles of Physical Diagnosis I (PA-520) (3 units); 6	Principles of Physical Diagnosis II (PA-521) (3 units); 6	Principles of Physical Diagnosis III (PA-522) (3 units); 6	Women's Health (PA-535) (2 units); 2	Christmas Break	Dec 17, 2016	Jan 01, 2017
				Clinical Clerkship-6	Jan 02, 2017	Feb 03, 2017
				Clinical Clerkship-7	Feb 06, 2017	Mar 10, 2017
PA Professional Issues I (PA-512) (1 unit); 1	Pathophysiology of Disease I (PA-510) (2 units); 3	Pathophysiology of Disease II (PA-511) (2 units); 3	PA Professional Issues II (PA-549) (1 unit); 1	Clinical Clerkship-8	Mar 13, 2017	April 14, 2017
Clinical Ethics (PA-503) (2 units); 3	Clinical Pharmacology I (PA-526) (2 units); 3	Clinical Pharmacology II (PA-527) (2 units); 3	Rural Medicine (PA-539) (2 units); 2	Clinical Clerkship-9	April 17, 2017	May 19, 2017
				Summer Break	May 20, 2017	June 4, 2017
Clinical Lab Science (PA-516) (2 units); 2	Clinical Medicine I (PA-528) (3 units); 4	Clinical Medicine II (PA-529) (4 units); 5	Clinical Medicine III (PA-530) (4 units); 5			
Medical Microbiology (PA-538) (2 units); 2		Clinical Genetics (PA-532) (1 unit); 2	Clinical Medicine IV (PA-531) (2 units); 2	Board preparation	June 5, 2017 – June 30, 2017	
				Make-ups		
15 units 22 contact hrs/wk	15 units 24 contact hrs/wk	15 units 24 contact hrs/wk	15 units 17 contact hrs/wk	Check out		

COURSE DESCRIPTIONS

Didactic Phase:

PA- 501: Human Anatomy and Physiology-I (4.0 Semester Hours)

This is the first course in a two-part series devoted to the study of human anatomy and physiology. The course will cover topography, internal structures, and functions with correlations to diagnostic modalities currently used by practitioners. Case studies will illustrate the anatomical findings in classical clinical presentations of the most common chief complaints. Pertinent biochemical principles will be integrated into the course to cover cellular structures and processes which impact health and disease. A systems and an intersystem approach is used throughout and reinforced in the guided lab. Topics in A&P-I include the cardiovascular, lymphatic, respiratory, gastrointestinal, and genitourinary systems. Additional topics include water, electrolytes, acid-base balance, and nutrition and metabolism.

PA-502: Human Anatomy and Physiology-II (4.0 Semester Hours)

This is the second course in a two-part series devoted to the study of human anatomy and physiology. The course will cover topography, internal structures, and functions with correlations to diagnostic modalities currently used by practitioners. Case studies will illustrate the anatomical findings in classical clinical presentations of the most common chief complaints. Pertinent biochemical principles will be integrated into the course to cover cellular structures and processes which impact health and disease. A systems and an intersystem approach is used throughout and reinforced in the guided lab. Topics in A&P-II include the integumentary, muscular, skeletal, neurological, and endocrine systems as well as human development.

PA-503: Clinical Ethics (2.0 Semester Hours)

The ethics course is designed to expose the student to legal and ethical dilemmas faced in medical practice. The course presents approaches that facilitate thinking through the complexities of ethical issues in clinical practice. In addition, representative opinions are offered. The format will include assigned readings, reflection and application papers, and class discussions. Topics include death and dying decisions, informed consent, decisional capacity, cultural and religious beliefs, euthanasia and assisted suicide, genetic screening, and the use of humans in clinical research. Students will develop the ability to recognize and think through ethical issues as they arise in their professional practice. They will be prepared to take ethical responsibility as part of the health care team and practice empathy, principles, and protocols that enhance patient welfare.

PA-504: Research I (1.0 Semester Hour)

This course is the first course of a two-part series, and introduces the students to methods and common tools used in research. Topics include the research process, types of research, sampling and generalizability, reliability and validity, research design, methods of measurement, data collection, and statistical analysis. The course integrates article reviews by the student. Students will search the internet and critique peer-reviewed medical literature. The course will also provide the students with a working knowledge of research in the physician assistant and general medical profession and stimulate critical thinking. Students will recognize the relevance and value of research in their professional development and obtain the skills necessary to pursue a lifetime of learning through examination and evaluation of current medical literature.

PA-505: Research-II (1.0 Semester Hour)

This is the second course in a two-part series and builds on theory and concepts learned in Research-I. Students will analyze methods used in medical research and evaluate the reliability of findings. Topics include medical writing, research ethics, research paper design, and critical review of the literature using published research articles. In addition, students will also make recommendations which could improve the research process. Students will cover the essential requirements for a research paper and discuss the AMA paper format. The course will culminate in a critical analysis of peer-reviewed literature, using concepts taught in class. Students will be able to recognize the relevance and value of research in the medical professions. They will also acquire the necessary skills to critique medical literature through examination, evaluation, and application of research theory and methods, and have an understanding of medical writing.

PA-510: Pathophysiology of Disease-I (2.0 Semester Hours)

This is the first course in a two-part series which provides an introduction to the pathophysiology of disease. The course covers a review of relevant normal structure and function of human organ systems followed by a study of pathophysiological mechanisms that underlie diseases related to that system. Topics covered include cardiovascular, blood, pulmonary, gastrointestinal, liver, exocrine pancreatic, renal, and male reproductive disease. Topics will be covered in coordination with the clinical pharmacology and clinical medicine series. Students will become familiar with the pathogenesis, pathology, and clinical manifestations of disease as organized by system. In doing so, they will obtain the fundamental knowledge essential for further study and management of disease processes.

PA-511: Pathophysiology of Disease II (2.0 Semester Hours)

This is the second course in a two-part series providing an introduction to the pathophysiology of disease. The course covers a review of relevant normal structure and function of human organ systems followed by a study of pathophysiological mechanisms that underlie diseases related to that system. Topics covered include nervous system, bone and mineral metabolism, endocrine, immune, rheumatologic, and dermatologic diseases as well as infectious disease and neoplasia. Students will become familiar with the pathogenesis, pathology, and clinical manifestations of disease as organized by system. In doing so, they will obtain the fundamental knowledge essential for further study and management of disease processes.

PA-512: PA Professional Issues-I (1.0 Semester Hour)

This is the first course of a two-part series designed to acquaint students with the history, development, and current status of the PA profession. Topics include the evolution of the PA profession, current and expected future practice trends, the PA's role as part of the health care team, patterns of health care delivery, and political and legal factors that affect PA practice. Types of health care systems, billing, and patient privacy issues are also presented. In addition, standards of ethical behavior, professional responsibilities, and the importance of membership in professional organizations are emphasized.

PA-516: Clinical Lab Science (2.0 Semester Hours)

This course covers the clinical considerations for laboratory tests based on patient presentation and clinical findings. Indications for ordering the specific test, interpretation of lab results, and correlation with disease processes are covered. Topics include hematology/oncology, urinalysis, and chemistry. An emphasis is placed on interpretation and clinical significance of commonly ordered laboratory tests. The course incorporates both observation and performance of selected laboratory testing procedures applicable to a primary care setting. This includes techniques for the collection and performance of wet preps, gram stain, urinalysis – routine and microscopic, KOH prep, normal saline prep, and blood specimen.

PA-518: Behavioral Medicine (2.0 Semester Hours)

This course is designed to provide an overview of the psychological and social factors that influence human behavior. It will focus on factors that shape health behaviors and response to stressors. In addition, students are taught how behavior can be influenced by illness, leading at times to poor coping skills, and physical and mental manifestations. Topics covered include psychological models of the mind, development through the life cycle, sleep, sexuality, violence, and reaction to illness. Students will learn how to take a proper mental health history and perform a mini-mental examination. This course will provide strategies for students to deal with patients, and give insight into the social and behavioral principles that promote empathy, cultural competency, communication, and collaborative care.

PA-519: Health Promotion and Disease Prevention (1.0 Semester Hour)

The course provides strategies for fostering a provider-patient partnership and tools for effectively communicating healthy lifestyles. Students will be presented with current information about various conditions commonly seen in the clinical setting. Topics include: benefits of prevention, barriers to preventive care, historical perspectives, shared decision-making, selectivity of ordering tests, and improving the delivery of preventative clinical services. Particular attention will be paid to Healthy People 2010. The course also covers selected topics dealing with aspects of preventive medicine and community resources. It explores the efficacy of lifestyle modification in optimizing health. Specific topics include domestic violence, environmental health and sanitation, clinical genetics, geriatrics, immunizations, trauma, sexually transmitted diseases, women's health, men's health, and systemic diseases. This course provides information to educate the clinician about the importance of incorporating preventative measures and health promotion in all patient encounters.

PA-520: Principles of Physical Diagnosis-I (3.0 Semester Hours)

Physical Diagnosis-I is the first course in a three-part series, and is designed to introduce Physician Assistant students to the knowledge, skills, and ability to conduct a comprehensive medical interview, to interact appropriately with patients, and to perform the appropriate organ system physical examination. Topics include critical thinking and differential diagnosis, interviewing techniques, examination techniques, equipment use, patient responses, the culturally diverse patient, obtaining the patient history, documentation of information using the SOAP format, and the use of medical terminology. The skin, head and neck, eyes, ears, nose, sinuses, oral cavity, and nutritional assessment are also covered in this course. The format include lectures, written assignments, case presentation, student presentation, role playing, vignettes, reflection papers, and labs. Upon completion of this course, students should be able to present the information obtained in the proper written and oral format, be able to perform the appropriate examination, understand the critical thinking process, and reflect on the need for cultural competency.

PA-521: Principles of Physical Diagnosis-II (3.0 Semester Hours)

Physical Diagnosis-II is the second course in a three-part series and is designed to further acquaint Physician Assistant students with current methods used in evaluating and diagnosing medical conditions in the general population. It presents information in a lecture format, which is followed by a guided practical lab, a practice session, and then testing of the material covered. Methods utilized include interviewing techniques, proper use of equipment, history taking, note writing, performing examinations, and correlating signs and symptoms with disease processes. Systems covered in this section include the chest, heart, peripheral vascular system, the abdomen, and the male genitalia. During this course, students will also perform OSCEs (Objective Structures Clinical Exams). Upon completion of this course, students should be able to present the information obtained in the proper written and oral format and be able to perform the appropriate examination

PA-522: Principles of Physical Diagnosis-III (3.0 Semester Hours)

Physical Diagnosis-III is a the final course in a three-part series, and is designed to further acquaint Physician Assistant students with current methods used in evaluating and diagnosing medical conditions in the general population. It presents information in a lecture format, which is followed by a guided practical lab, a practice session, and then testing of the material covered. Methods utilized will include interviewing techniques, proper use of equipment, history taking, note writing, performing examinations, OSCEs, and correlating signs and symptoms with disease processes. Systems covered in this section include the breast, female genitalia, the pregnant female, the musculoskeletal system, and the nervous system. Consideration of special populations such as the pediatric and the geriatric patient will also be covered. The practical culmination will be the performance of a comprehensive physical examination. Upon completion of this course, students should be able to present the information obtained in the proper written and oral format and be able to perform the appropriate examination.

PA-526: Clinical Pharmacology-I (2.0 Semester Hours)

This is the first course in a two-part series. This course will introduce students to the principles of pharmacology and clinical pharmacotherapeutics. Topics include discussion of treatment guidelines, indications, contraindications, drug information resources, and case studies. Students will begin an in-depth analysis of pharmacotherapeutics and the application of drugs for the diagnosis, treatment and prevention of disease. A pathophysiologic approach will be used, with emphasis on the rational selection and use of drugs in the care and treatment of the pediatric, adult, and geriatric patient in primary, urgent, and emergent care settings. Specific therapeutic regimens will be reviewed from a systems approach in coordination with the clinical medicine series. Topics include general pharmacologic principles, bacterial, eukaryotic and viral infections, chemotherapy and immunosuppression, cardiovascular, and peripheral neuropharmacology.

PA-527: Clinical Pharmacology-II (2.0 Semester Hours)

This is the second course of a two-course series. This course provides information on clinical pharmacotherapeutics and pharmacodynamics. Topics include discussion of treatment guidelines, indications, contraindications, drug information resources, and case studies. The student will continue an in-depth analysis of pharmacotherapeutics and the application of drugs for the diagnosis, treatment, and prevention of disease. A pathophysiologic approach will be used, with emphasis on the rational use of drugs in the care and treatment of pediatric, adult, and geriatric patients. Specific therapeutic regimens will be reviewed from a systems approach in coordination with the clinical medicine series. Topics include central neuropharmacology, substance abuse and pain, autacoids, anti-inflammatories, endocrine pharmacology, vitamins and supplements, toxicology, and poisons and antidotes.

PA-528: Clinical Medicine-I (3.0 Semester Hours)

This is the first course in a four-part series and provides a study of common medical and surgical disorders encountered in general medicine. Topics include typical clinical presentation, etiology, pathophysiology, diagnostic work-up, formulation of treatment plans and referral. Students will also develop strategies for enhancing patient education and compliance, taking into consideration the socioeconomic and cultural aspects of health care. A correlational approach will be used, with interaction with physical diagnosis, pharmacology, and clinical diagnostics. Lessons will be presented by systems. The format includes formal lectures, discussions, and case presentations. Systems covered include the head, eyes, ears, nose, throat, heart, and lungs.

PA-529: Clinical Medicine-II (4.0 Semester Hours)

This is the second course in a four-part series and continues the study of common medical and surgical disorders encountered in general medicine. The course content includes typical clinical presentation, etiology, pathophysiology, diagnostic work-up and management of these disorders. Students will also develop strategies for enhancing patient education and compliance, taking into consideration the socioeconomic and cultural aspects of health care. A correlational approach will be used with interaction with physical diagnosis, pharmacology, and clinical diagnostics. Lessons will be presented by systems. The course format includes formal lectures, discussions, and case presentations. Systems covered

include the gastrointestinal, male genitourinary, renal, musculoskeletal, and endocrine. Rheumatologic and fluids, electrolytes and acid-base disorders are also covered.

PA-530: Clinical Medicine-III (4.0 Semester Hours)

This is the third course in a four-part series, exposing the student to the study of common medical and surgical disorders encountered in general medicine. Course content includes typical clinical presentation, etiology, pathophysiology, diagnostic work-up, formulation of treatment plan and referral. Students will also develop strategies for enhancing patient education and compliance, taking into consideration the socioeconomic and cultural aspects of health care. Topics covered include dermatology, neurology, infectious diseases, sexually transmitted diseases, oncology/hematology and coagulation disorders, psychiatric disorders, family violence and abuse, rehabilitative medicine, end-of-life issues, and emergency medicine.

PA-531: Clinical Medicine-IV (2.0 Semester Hours)

This course is designed to orient Physician Assistant students to common medical and surgical disorders with emphasis on primary care concepts in the pediatric and adolescent populations. Students will review pertinent anatomic and pathophysiologic aspect of disease conditions, clinical presentation, physical findings, diagnostic work-up, diagnosis, formulation of treatment plans, and referral. Students will also develop strategies for enhancing patient education and compliance, taking into consideration the socioeconomic and cultural aspects of health care.

PA-532: Clinical Genetics (1.0 Semester Hour)

Course Description: In Clinical Genetics, we will study the basic principles of heredity (including cytogenetics, molecular and mendelian genetics) and the processes that lead to genetic variability in humans. We will look at how different genetic mutations and chromosomal abnormalities can give rise to genetic disorders. Through a few select genetic disorders, we will become aware of their genetic causes, genetic testing, clinical manifestations of genetic diseases, as well as physical, psychological and social impacts of these disorders on patients. We will also consider recent discoveries from human genomics and pharmacogenetics that have influenced postsymptomatic treatment strategies and presymptomatic prevention-based healthcare. The course will include workshop sessions to solve genetic problems as problem-based learning is a proven method and is well-suited to medical genetics because it involves integration of skills and knowledge from many fields.

PA-535: Women's Health (2.0 Semester Hours)

This course exposes students to common problems encountered in caring for women. Students will review pertinent anatomic and pathophysiologic aspects of disease conditions, clinical presentation, physical findings, diagnostic work-up, diagnosis, formulation of treatment plans, and referrals. Students will also develop strategies for enhancing patient education and compliance, taking into consideration the socioeconomic and cultural aspects of health care. Topics include pregnancy, fetal medicine, dysmenorrhea, isoimmunization, diabetes and hypertension in pregnancy, complications of pregnancy, labor and delivery, post-partum issues, sexually transmitted diseases, menstrual-endocrine

abnormalities, reproductive life extremes, fertility regulation, disorders of pelvic support, ovarian, endometrial, cervical and vulvar neoplasia, and cancer.

PA-536: Clinical Skills-I (2.0 Semester Hours)

This is the first of a two-part lecture and lab sequence providing a practical approach to management of medical and surgical conditions. This course introduces students to the basic skills and knowledge needed to evaluate and treat common illnesses and injuries. Lectures are followed by practical applications in guided lab sessions. Topics include prescription writing, aseptic techniques, gowning, gloving, venipuncture, IV therapy, casting, splinting, and dermatological procedures using oral/case presentations.

PA-537: Clinical Skills-II (2.0 Semester Hours)

This is the second of a two-part lecture and lab sequence providing a practical approach to the management of medical and surgical conditions. Topics include radiology, lung and heart sounds, bladder catheterization, nasogastric tube placement, joint access, steroid therapy, anesthesia techniques, BLS, ACLS, and miscellaneous urgent care/primary care procedures. Lectures are followed by practical applications in guided lab sessions. In addition, students will take a PACKRAT and an OSCE exam.

PA-538: Medical Microbiology (2.0 Semester Hours)

The student will discuss the mechanisms of microbial pathogenicity and common organisms associated with specific infectious diseases. Students will cover basic structure and physiology, pathogenicity, bacterial growth, virulence factors and basic epidemiology. Organisms covered include bacteria, fungi, parasites, mycoplasmas, rickettsias, chlamydias, spirochetes, vibrios, and viruses. Upon completion of the course students will become familiar with important micro-organisms and their roles in infectious diseases in preparation for advanced coursework in pharmacology, pathophysiology, and clinical medicine.

PA-539: Rural Medicine (2.0 Semester Hours)

The course explores health disparities in the rural population and special considerations of providing care in this setting. Specific medical conditions that are unique to rural areas in West Virginia will be included. The use of medical networks, medical informatics, and telemedicine will also be covered. In addition, students will be exposed to the principles that guide rural health organizations and the utilization of patient consultation. Finally, students will explore the characteristics of the rural patient and the rural health care provider, the economics of rural health practice, and the quality and role of primary care in the rural setting.

PA-549: PA Professional Issues-II (1.0 Semester Hour)

This course is presented as the second of a two-part series of professional issues and will prepare students for transition from the role of student to medical practitioner. Employment considerations and professional liability are included in this section. This section also include patient safety, risk management, interprofessional relationships, resume writing, job search, interviewing strategies,

contract negotiation, certification, state licensure, networking, state practice requirements, credentialing, privileging, DEA certification, and supervisory agreement.

Clinical Phase:

The clinical phase of the program is 12 months long and consists of clinical clerkships under the supervision of a clinical preceptor. During this phase, students' knowledge and practical skills attained during the didactic phase, is utilized through interaction with clinical faculty and staff. In addition, it provides students opportunities to refine and develop new knowledge and skills. This phase consists of nine clerkships lasting 5 weeks, for a total of 45 semester units. The clinical clerkships are listed below.

PA-570: Family Medicine (5 weeks) 5.0 Semester Hours

This five-week outpatient clerkship reinforces primary care knowledge and concepts taught during the didactic phase of the program through practical applications. Working as part of a health care team, students are expected to assimilate and correlate patient history, physical findings, and diagnostic studies to make diagnoses and formulate treatment plans. Students will be exposed to a broad range of medical conditions seen in the pediatrics to geriatrics population. This includes patients in long term care. Activities include patient examination, pharmacotherapeutics, treatment modalities, follow-up evaluation, case presentations and documentation. Students work under the supervision of a licensed clinical preceptor and undergo an end of rotation evaluation. **Hours:** 40 plus per week.

PA-571: Internal Medicine (5 weeks) 5.0 Semester Hours

This five-week clerkship allows students to demonstrate knowledge, clinical examination techniques, and other learned competencies in the inpatient and outpatient settings. Students correlate pathophysiology, clinical signs and symptoms, and diagnostic studies to make assessments and formulate treatment plans. Students also participate in follow-up evaluations. The rotation covers patients along the continuum of life from young adult to geriatrics, including long term care. Activities included patient examination, pharmacotherapeutics, treatment modalities, follow-up evaluations, case presentations and documentation. Students work under the supervision of a licensed clinical preceptor and undergo an end of rotation evaluation. **Hours:** 40 plus per week.

PA-572: Emergency Medicine (5 weeks) 5.0 Semester Hours

This five-week clerkship allows students to demonstrate knowledge, clinical examination techniques, and other learned competencies in the urgent and emergent settings. Students correlate pathophysiology, clinical signs and symptoms, and diagnostic studies to make assessments and formulate treatment plans. The rotation covers patients along the continuum of life spectrum. Activities include patient examination, pharmacotherapeutics, other treatment modalities, follow-up evaluation, case presentation and documentation. Conditions include cardiac, respiratory, trauma, and other life-threatening conditions. Procedures include reduction techniques, suturing, aspirations, IV placements, splinting, and minor surgical procedures. Students will also interact with members of the surgical and medicine teams. Students learn when and how to make proper referrals, interpret laboratory and radiological studies, formulate treatment plans, discharge, refer, and admit patients. Students work under the

supervision of a licensed clinical preceptor and undergo an end of rotation evaluation. **Hours:** 40 plus per week.

PA- 573: Pediatric and Adolescent Medicine (5 weeks) 5.0 Semester Hours

This five-week clerkship exposes students to patients in the pediatric and adolescent age groups. Students use knowledge, examination techniques, diagnostic studies, and current treatment modalities to diagnose and treat medical conditions commonly found in this patient population. Students also learn how to perform common pediatric treatment procedures in the inpatient and outpatient settings. Students will learn to recognize developmental milestones and life-threatening conditions. Students are also expected to perform drug dosage calculations, provide immunizations, and perform well-child and school physicals. Students will also provide health promotion and disease prevention education. Students work under the supervision of a licensed clinical preceptor and undergo an end of rotation evaluation. **Hours:** 40 plus hours per week.

PA- 574: Women's Health (5 weeks) 5.0 Semester Hours

This five-week rotation provides students with the opportunity to apply the principles of pathophysiology, physical diagnosis, clinical lab diagnostics, and therapeutics in treating women from adolescence through their later years in both the inpatient and outpatient settings. Students are expected to become proficient in performing pelvic examinations, saline-preps, KOH preps, specimen collection, and some minor surgical procedures (abscess incision and drainage). Students will evaluate, diagnose, and treat women with conditions such as menstrual irregularities, sexually transmitted diseases, breast conditions, genitourinary symptoms, and neoplasia/cancer of the reproductive tract. In addition, students will be involved in providing prenatal care, preventive education and health promotion related to issues in women's health. Instruction in family planning will also be provided. Students work under the supervision of a licensed clinical preceptor and undergo an end of rotation evaluation. **Hours:** 40 plus hours per week.

PA-575: General Surgery (5 weeks) 5.0 Semester Hours

This five-week rotation provides students with the opportunity to learn about general and specific principles of treating surgical patients in both the inpatient and outpatient settings. Students will learn how to evaluate, diagnose, manage, and refer patients presenting with surgical conditions. Students will perform pre-operative work-ups and post-operative care for patients. In addition, students will assist in the operating room as part of a surgical team. Mastery of aseptic techniques, gowning, gloving, instrumentation, suturing, and first and /or second assisting will be expected. The rotation will cover surgical conditions across the spectrum of body systems. Late evenings and weekend calls may be scheduled. Students work under the supervision of a licensed clinical preceptor and undergo an end of rotation evaluation. **Hours:** 40 plus hours per week.

PA-576: Behavioral Medicine/Psychiatry (5 weeks) 5.0 Semester Hours

This five-week clerkship exposes students to patients with emotional and psychiatric conditions. Students will reinforce concepts of psychopathology, psychotherapeutics, and patient interviewing techniques to obtain patient histories, make diagnoses, and formulate treatment plans.

Students are expected to develop skills to manage patients' response to psychiatric illness. The experience includes interaction along the lifespan in both the inpatient and outpatient settings. Students work under the supervision of a licensed clinical preceptor and undergo an end of rotation evaluation.

Hours: 40 plus hours per week.

PA-577: Elective-I (5 weeks) 5.0 Semester Hours

This five-week clerkship is an opportunity for students to gain additional or new clinical experience. During this rotation students may choose to return to a previous rotation or pursue studies in another area of clinical interest. Students work under the supervision of a licensed clinical preceptor and undergo an end of rotation evaluation. **Hours:** 40 plus hours per week.

PA-578: Elective-II (5 weeks) 5.0 Semester Hours

This five-week clerkship is another opportunity for students to gain additional or new clinical experience. During this rotation students may choose to return to a previous rotation or pursue studies in another area of clinical interest. Students work under the supervision of a licensed clinical preceptor and undergo an end of rotation evaluation. **Hours:** 40 plus hours per week.

Guidelines for Ethical Conduct for the Physician Assistant Profession

(Established by the American Academy of Physician Assistants)

(Adopted 2000, amended 2004, 2006, 2007, 2008, reaffirmed 2013)

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

To review the guidelines in their entirety, go to:

<https://www.aapa.org/WorkArea/DownloadAsset.aspx?id=815>

TECHNICAL STANDARDS

The intent of the Physician Assistant Studies Program is to educate competent primary care Physician Assistants (PAs) who can evaluate, manage, and provide quality health care to the general population. Candidates admitted to this program are expected to complete the academic and clinical requirements of the professional program.

Candidates are reviewed for admission into the program on an individual basis. In addition to meeting the academic, professional, and administrative requirements, candidates must also have the ability to develop the intellectual capacity and technical skills required to perform the functions of a practicing physician assistant. Candidates who are accepted as students in the physician assistant program must meet the following standards:

Observation

The student must have sufficient vision to be able to observe demonstrations, experiments, laboratory exercises, visual presentations and computer-facilitated instruction. He or she must be able to differentiate between normal and pathological states and distinguish between colors. In addition, the student must be able to observe patients closely and at a distance. Observation necessitates the complimentary use of smell, touch and hearing.

Communication

The student must be able to speak, hear, read and write in order to elicit and exchange information with patients, family members, and other health care providers. He or she must be able to perceive verbal and non-verbal cues as it pertains to patients' conditions. In addition, the student must be able to facilitate the flow of information with respect and sensitivity towards faculty, patients, families, and other members of the health care team.

Motor

The student must have the motor control and coordination to perform physical examinations through inspection, palpation, auscultation and percussion in order to elicit information. He or she must be able to perform laboratory procedures, clinical skills and diagnostic maneuvers, with and without the use of equipment. In addition, the student must be able to bend, manipulate, lightly lift to approximately twenty-five pounds, and assist patients.

Intellectual, Conceptual, Integrative, and Quantitative

The student must have the ability to comprehend, memorize, interpret, analyze and synthesize information presented in the classroom, laboratory and clinical settings. He or she must also be able to measure, calculate, formulate, reason and make diagnostic and therapeutic decisions. The student must be able to assimilate and integrate information through a variety of modalities such as classroom instruction, group interaction, research, individual study, and presentations. In addition, the student must be able to integrate the use of computer programs and web-based resources into learning.

Behavioral and Social Attributes

The student must have the emotional health for full utilization of his or her intellectual capabilities, to exercise good judgment, to promptly complete all responsibilities and assignments attendant to the diagnosis and care of patients, and the department to exercise sensitive, empathic, mature and effective relationships with patients, their families, peers and other members of the health care team. The student should be able to recognize limitations of his or her education and training. The student should also be willing to seek consultation when appropriate, and be able to recognize, handle and/or assist in life-threatening situations. He or she must also have the humility to accept constructive critique and the perseverance to complete an arduous course of study.

All students are expected to perform physical examinations on both males and females and on each other. Breast and pelvic examinations will be conducted on anatomic models and/or simulated patients during the didactic (1st) year, and on real patients during the clinical year. Candidates who are unable to meet this requirement based on religious beliefs or other reason must inform the program upon acceptance so that reasonable arrangements may be made.

Reasonable accommodations will be made for applicants with handicaps; however, as part of the admission process, all applicants must be able to perform all listed technical requirements.

Chronic or recurrent illnesses or problems that may interfere with patient care or safety, or may lead to a high likelihood of absenteeism are incompatible with PA training or clinical practice. Deficiencies in knowledge, judgment, integrity, character, professional attitude or demeanor may jeopardize patient care. ***Candidates are not required to disclose the nature of any disability to the PA faculty; however, any candidate who has questions about his/her ability to meet these technical standards is strongly encouraged to discuss the issue with the Dean of the College of Sciences prior to the interview process.*** If appropriate, and upon the request of the candidate, reasonable accommodations may be provided.

Accommodations for disability: *If you are an individual with a disability and need reasonable accommodation to fully participate in this program, please contact Bridget Dawson at the Student Learning and Development Center, Main Hall, 140, Ext.: 8018.*

GENERAL POLICIES ON ACADEMIC PERFORMANCE:

Educational Assumptions

1. The curriculum is based on continuous improvement.
2. Students are adult, self-motivated learners.
3. Learning is collaboration between faculty, staff and students.
4. The Guidelines for Ethical Conduct for the Physician Assistant Profession will be followed.
5. Constructive critique between students, faculty and staff will be accepted.
6. Cultural diversity in the class will be recognized as a strength and will be tolerated.
7. Students will display professionalism in dealing with instructors, program staff, peers, and patients.
8. Attitudes and behaviors, as well as academic performance are essential elements for successfully completing the PA program.

Classroom, Didactic and Other Issues

1. The West Liberty University PA Program is committed to maintaining the highest standards of academic performance, which includes professional behavior. Behaviors such as cheating, plagiarism or falsified documentation of clinical findings will be viewed as academic performance issues subject to disciplinary measures.
2. Students will be reliable, honest, professional and mutually supportive.
3. Each student has a different learning style and has a different perspective based upon their academic background and clinic experience. What may be intuitively obvious to you may be beyond the grasp of a classmate at that moment. Each of you will have a time when you will be the expert and a time when you will be the novice.
4. Just as each student has an individual learning style, each instructor and guest speaker has an individual teaching style. It is not possible to match learning and teaching styles perfectly. It is the responsibility of the PA Studies department to provide a variety of valid educational experiences and to be responsive to valid and constructive critique.
5. There are opportunities for students to evaluate speakers and courses. These evaluations are most valuable when everyone in class participates and responds constructively.
6. Punctuality and attendance are very important issues to us. Tardiness, early departure and absence from classes are not conducive to optimal learning for you or your colleagues. The structure of the PA Studies curriculum is fast-paced and builds upon previous instruction. It is the responsibility of the student to arrive on time, to be prepared for class, and to remain for the entire class period. Chronic tardiness and/or early departures or absences will result in intervention by your faculty advisor and may have consequences on your continuance in this program.
7. You are expected to wear appropriate attire at all times for the classroom, clinic, and other WLU experiences.
8. Students should not bring children or other guests to class unless they are specifically invited. Permission must be obtained from the PA faculty or lecturer.
9. Obtain permission from individual instructor/lecturer for tape-recording or videotaping lectures or demonstrations.

10. All electronic communication devices such as pagers and cellular phones must be turned off while in class. Advise family and significant others to contact the front office in case of an emergency. Staff will call your attention to any emergency.
11. Under no circumstances shall students replace faculty, staff or other administrative personnel. Students are not to perform any work for the department.
12. As a matter of policy, advanced placement for didactic courses and/or clinical rotations completed prior to acceptance into the program, or for experiential learning, is not granted to applicants to the program.
13. Students are not allowed access to the academic records or other confidential information of other students or faculty.
14. Student health records are confidential and will not be accessible to or reviewed by program, principal or instructional faculty or staff except for immunization and tuberculosis screening results which will be maintained and released with written permission from the student.
15. The Program Director, Medical Director and other principal faculty members are prohibited from providing medical care to students enrolled in the PA program.
16. Transfer of credit, as substitution for courses in the didactic phase of the department is not allowed. Transfer of credit is also not allowed in the clinical phase.

*PA Program **Dress Code** is as follows:*

A. Attire for the classroom:

1. Males and Females: Hunter Green scrubs with drawstrings, crew-cut white undershirt and “Consultant” (short) white jacket with embroidered school logo, name and student status. Tops must be tucked into trousers. Black comfortable shoes (no sneakers). Hair well groomed; nails cut and clean (must not extend beyond finger-tips; and no body- rings except for modest earrings (studs) on the ears of females (none on males). No exposed tattoos. **Facial Hair:** (i.e. Beards/Moustache/Goatee, etc.) no longer than half-inch (1/2"). Neck must be clean shaven.

Other Classroom attire as directed:

- a. **Males:** solid color or lightly patterned shirts, ties encouraged, slacks; dress shoes (no sneakers). Professional, conservative dress required.
- b. **Females:** dress shirts or blouses, skirts, dresses, or slacks and dress shoes (no sneakers). Professional, conservative dress required.

2. The student’s body must be adequately covered. Inappropriate skin exposure includes the torso, back, thighs, and cleavage.

B. Attire for the clinic:

1. Males – laboratory jacket with WLU PA logo and identification, solid color or lightly patterned shirts, ties, slacks, dress shoes with covered toes and heels (no sneakers). Professional, conservative dress required. Scrubs when appropriate.
2. Females – laboratory jacket with WLU PA logo and identification, dress shirts or blouses, skirts, dresses, or slacks and dress shoes with covered toes and heels (no sneakers). Professional, conservative dress required. Scrubs when appropriate.
3. The student’s body must be adequately covered. Inappropriate skin exposure includes the torso, back, thighs, and cleavage.

C. Examples of inappropriate attire and accessories:

1. Tank tops, spaghetti straps, transparent garments, T-shirts, low cut pants or jeans that expose underwear, leggings as pants, hats and caps worn in the classroom, excessive jewelry. This is not an exhaustive list.

Program Expectations of Students

- ✓ Attendance of all university-wide and program-sponsored events is expected of all students. This includes all classes, clinical rotations, and activities determined to be essential for scholastic and/or professional development.
- ✓ Prior program permission to be absent from any scheduled scholastic or professional event is required. Students must notify the program secretary by e-mail or phone of any emergency situation that may preclude them from attending scheduled events. Documentation of notifications will be placed in a student’s file.
- ✓ Demonstration of professional respect for peers, faculty, staff, guest lecturers, clinical preceptors and support staff on and off-campus is expected.
- ✓ Compliance with instructions of the PA faculty and staff regarding didactic or clinical concerns is expected.
- ✓ Any student who elects to disregard these expectations will be subject to disciplinary action as determined by the PA faculty in consultation with the Dean of College of Sciences.

Written Work for WLU – PA Program

- ✓ Students will be required to write several papers during their PA training. Guidelines for these projects will be provided as papers are assigned. Students are required to have a laptop with word processing capability. We expect that you will utilize this tool to create papers, and will follow the American Medical Association format.
- ✓ We expect students to submit all assignments in a timely manner. Penalties may be assessed for late submissions.
- ✓ In the didactic year, students must submit all due assignments at the beginning of the class period.

- ✓ In the clinical year, students must complete all charts and have them counter-signed by the end of the each business day before leaving the clinical site. Students are also expected to
- ✓ Submit all write-ups, evaluations, papers and other assignments to the PA Program office on the due dates published in the clinical manual or otherwise specified by the instructor. Submission may be made by date-stamped fax, clearly dated postmarked mail, or personal delivery no later than 4:00 PM (M-TH) to the PA Program office and 12:00 noon on Fridays.

Decision Points

Students who are admitted to the West Liberty University PA Program will be formally evaluated at specific points throughout the program. Because the curriculum builds upon previous instructions, students must pass each of these evaluations, or decision point, and be officially approved to continue on to the next phase of training. Failure to pass one of these decision points may result in probation or disqualification from the program. Formal decision points are as follows:

- ✓ For each didactic quarter
- ✓ End of didactic year (students must pass formally from the didactic to the clinical phase) (Summer)
- ✓ At the end of the 3rd and 6th clinical rotation
- ✓ End of clinical year rotations

Failure to pass a decision point may result in remediation, repetition of a course, delay of graduation, or dismissal from the program.

The Grading and Assessment System

A score of 70% on all didactic examinations and 60% on all EOR examinations is the passing level on all numerically graded examinations and “satisfactory” on examinations that are graded on a satisfactory/unsatisfactory basis. A PA student who does not achieve the minimum grade on any written examination or a “satisfactory” on examinations that are graded satisfactory/unsatisfactory will receive a failing grade. The student will be notified immediately and will be required to remediate within a two-week window. If the student fails to remediate, it will trigger a review of his/her academic record plus departmental action. This action may include probation, remediation or disqualification from the program. Each student must also pass the final examinations for every course. Course failures may also result in deceleration or dismissal from the program.

Please note the following:

- ✓ If a student’s cumulative GPA falls below 3.0 he/she will be subject to academic discipline.
- ✓ Remediation is student and/or situation specific and is determined by the PA faculty.
- ✓ Arrangements for remediation are made with the course coordinator/instructor.

- ✓ Academic probation is specific regarding duration, action taken, requirements, and terms for discontinuation.
- ✓ Prior to the beginning of the next quarter, students on probation are required to remediate and/or provide sufficient proof of having fulfilled the terms of the probation.
- ✓ A course may be repeated only one time.
- ✓ Failing grades may also be given in courses that include assessment of professional development in the grading policy.

CPR/ACLS

1. Students must take CPR and ACLS during their training unless already certified when entering the PA Studies program. Students must present proof of certification to the PA Studies office.
2. The program will arrange CPR and ACLS courses during the didactic year. Students are ultimately responsible for CPR and ACLS certification and the associated costs.
3. CPR and ACLS certification must remain current throughout the clinical year.
4. Failure to obtain CPR and ACLS certification by the end of Fourth Quarter of the didactic phase will delay the student beginning the clinical phase of training.

THE CLINICAL YEAR

1. Preparation for the Clinical Year:

During the didactic year, each student will have the opportunity to meet with the Clinical Coordinator to discuss plans for the clinical year. Clinical sites are determined solely by the PA Faculty. Students may submit information on potential preceptors and clinical sites. However, the PA Program reserves the right to approve the site for clinical training. *Clinical sites will be provided the university.*

2. Clinical Site Placement:

- ✓ The ultimate decision for clinical site placement rests with the West Liberty University PA Program.
- ✓ Students are prohibited from contacting any rotation site to volunteer their services in the name of the PA Program. They are also prohibited from functioning in any manner at any site by falsely stating or implying that they have the authorization of the PA Program.
- ✓ Students may be allowed to request two out of state rotation sites of their choice prior to the clinical year. All requests for this option are subject to (1) faculty approval of the site, (2) overall performance of the student involved, and (3) submission of a written request by the student by the winter quarter of the didactic year. This will enhance the department's ability to complete all necessary paperwork on a timely basis.

3. Clinical Performance:

Unsatisfactory performance during the clinical year may result in a temporary suspension of the current clinical rotation or a delay in the commencement of the next scheduled rotation. Factors that lead to a suspension or delay include but are not limited to the following:

- ✓ Failure to complete written assignments or charting by scheduled deadlines.
- ✓ Unsatisfactory progress in professional development, attitudes and professional conduct.
- ✓ Unexcused and/or unexplained absence from a clinical site during a scheduled rotation.
- ✓ Failure to receive a passing evaluation at the end of a clinical rotation.
- ✓ Failure of an end of rotation examination.
- ✓ Unprofessional interactions and/or inappropriate behavior at a clinical site.
- ✓ Unexcused and/or unexplained absence from a scheduled didactic class or activity.

Suspension or delay of clinical rotations will remain in effect until either written work has been submitted as required, or other steps for remediation as determined by the program, have been completed.

4. Clinical Evaluation:

- ✓ Students who receive a clinical evaluation of “unsatisfactory” at the end of a clinical rotation will be required to repeat it, or complete an additional rotation at a substitute clinical site.

5. Program Extension:

- ✓ A student who receives an unsatisfactory grade in any clinical rotation must reregister for that rotation and pay the applicable tuition fee. A rotation may be repeated only one time.

6. Delayed Graduation:

- ✓ If a student is unable for any reason to complete the clinical year as scheduled, that student will not be allowed to participate in the graduation ceremony until the following year.

7. Student Requirements:

- ✓ Students are only expected to satisfy the requirements for successful completion of their rotations. *Under no circumstances shall students replace clinical faculty, staff or other administrative personnel.*

Clinical Year Expectations

1. We expect students to understand and abide by principles of confidentiality with patients, peers, the PA Program, and the profession.
2. It is important to approach clinical assignments with an open mind.
3. The family medicine clinical rotations are intended to be in-depth clinical experiences. This

- is a primary care program, and specialty experiences are intended for exposure, not mastery.
4. Procedures are relatively easy to learn; the ultimate goal of this department is to teach clinical reasoning and problem solving.
 5. Your expectations for clinical experiences may be different from those of the preceptor or this department.
 6. We attempt to individualize your clinical experiences within the parameters of a fast-paced, primary care program of study.
 7. Everyone's experience will be different – even at the same site.
 8. If a preceptor is not at the clinical site when you are scheduled to be there, you are *not* automatically excused from attending clinic. Contact the Program office for advice.
 9. Take advantage of the current technology (e-mail, phone service) to maintain frequent and close communications with the faculty, staff and your advisor.
 10. Flexibility about scheduling and traveling is an important expectation for the clinical year. Arrangements with clinical sites sometimes change on short notice for a multitude of reasons.
 11. Transportation to and from clinical rotations is the student's responsibility. Please inform us if you have a problem with transportation.
 12. Students will return to the department for testing and evaluation and at the end of each clerkship and at the end of the clinical year.
 13. Behavior and attitudes are important for a successful clinical year. In addition to discussions and handouts, the Code of Ethics for the Physician Assistant Profession provides some guidance on expectations for professional conduct.
 14. Remember that the clinical year is still a part of the educational training. Students are not expected to know everything. This is a time to show intellectual curiosity.
 15. Meals during the clinical rotations are the responsibility of the student.
 16. Housing during clinical rotations is the responsibility of the student.
 17. Students are expected to abide by the decisions of the Clinical Coordinator regarding their clinical placements. Students are also required to complete the duration of their appointed clinical rotation. There are no exceptions.

THE PHYSICIAN ASSISTANT CLINICAL KNOWLEDGE RATING AND ASSESSMENT TOOL (PACKRAT)

The PACKRAT is an assessment tool that is administered by an independent organization that is designed to assess the knowledge base of PA students, and by extension, their level of readiness. In the case of first year students, their readiness for the clinical year, and in the case of second year students, their readiness for the Physician Assistant National Certifying Examination (PANCE). The PA Program attaches great importance to this examination and students are expected to perform well. The PACKRAT is intended to be a self-evaluation tool and indicates whether the student has the basic fund of knowledge in PA education. Students who perform poorly in this examination may be required to undergo remediation.

EXAMINATION POLICIES AND PROCEDURES

All tests and examinations are serious occasions. Therefore, we ask that the following behaviors be observed in order to minimize distraction and anxiety during testing.

1. All tests will begin on time. Please plan to arrive early enough to stow your coat, books and other gear (including cell phones) in your locker or in front of the classroom.
2. Please be certain to keep your eyes on your own paper.
3. Talking between students or other forms of “communication” is not allowed during testing.
4. Any corrections to a test will be posted on the whiteboard at the front of the classroom. Check for any changes before turning in your test.
5. Double-check your exams before leaving the classroom to guarantee that you have answered all questions.
6. When you have finished testing, exit the classroom quietly and move away from the classroom before engaging in conversation.
7. Examination by demonstration requires extra concentration on the part of the examiner and the examinee. Feedback will be provided only after completion of the examination. “Hinting” by body language during physical exams may result in score penalties for the “patient.”
8. We believe in the confidentiality of test scores. Test results will be returned to individual students. All examinations can be reviewed either with the Academic Coordinator, or with the specific course instructor.
9. It is expected that students will take examinations and quizzes at the regularly scheduled time. To take an examination at a time other than when it is scheduled, the student must secure the consent of the instructor and the Program Director.

Academic Dishonesty

Inappropriate testing behavior reflects unsatisfactory professional development and therefore leads to academic review of the student and possible dismissal. Do not provide or receive unauthorized assistance on exams. Do not remove exams from designated review areas or obtain exam material prior to distribution by faculty. Irregularities that you observe in test-taking should be referred to the proctor or course instructor.

Types of Academic Dishonesty:

1. **Cheating:** Using or attempting to use unauthorized materials or methods in any exercise. E.g. having a substitute take a test, having another person complete a research or writing paper, using concealed notes during exams, hinting during practicums, providing information to other students during OSCEs or board type exams. Passing on information about test questions to students in subsequent classes and reconstructing exams.
2. **Fabrication:** Falsifying or inventing any information or evidence, or neglecting to follow established guidelines of research and documentation. E.g. distortion of evidence, creation of false sources or fictitious evidence.
3. **Collaboration:** Assisting others in engaging in scholarly wrongdoing. E.g. stealing and distributing tests, permitting others to use a research paper and permitting another to copy from his/her paper during an exam. “Buying” a research paper.

4. Destruction of Reference Sources: Denying others access to learning materials. E.g. destruction of journal articles in the library collection. Stealing of books and other materials from the library or other sources.
5. Plagiarism: Representing the words or ideas of another as one's own. E.g. not giving credit for referenced information and not acknowledging a paraphrase. Using another author's material as one's own.

Note: The student who provided the information and the student who received the information in a case of academic dishonesty will both be held accountable.

In an examination setting – the student will be permitted to complete the examination and surrender it (as applicable). The PA Program Director and the exam proctor will meet with the student privately, immediately, or at an appointed time to discuss the details of the unsatisfactory behavior. A written report will be placed in the student's file. The student will be referred to the Dean of the College of Sciences for further action.

In a non-examination setting, the Program Director will meet privately with the student to discuss the details of the behavior. A written report will be placed in the student's file. The department faculty will decide on further disciplinary action.

PROFESSIONAL EXPECTATIONS

WLU-PA students are expected to achieve an acceptable level of competence in the prescribed curriculum, to demonstrate appropriate professional behavior in all interactions with faculty, staff, fellow-students, clinic personnel and patients, and to uphold standards of personal conduct and integrity both in the academic setting and within the community. Upholding the standards of professional and personal conduct includes, among other things, demonstrating behavioral patterns and attitudes consistent with the code of ethics for the PA profession. It also involves being accountable for one's own conduct as well as assuming responsibility for the professional behavior of one's colleagues within the profession.

The WLU –PA Program will assist its students in understanding the levels of professional behavior and conduct that are expected by the program and the profession through discussions at orientation programs and class meetings, as well as in the PA Professional Issues course. Unacceptable behavior includes but is not limited to the following:

- ✓ Cheating on any examination.
- ✓ Plagiarism.
- ✓ Misrepresenting documentation of clinical findings
- ✓ Reporting/discussing patient information by name to anyone not authorized by the patient.
- ✓ Taking sexual advantage of a patient.
- ✓ Performing examinations or procedures on patients without appropriate consent.
- ✓ Falsely reporting on a patient's history and/or physical findings (i.e., reporting more data than was actually obtained).

- ✓ Falsely stating the involvement of a physician or other personnel in the management of a patient (i.e., stating that the physician concurred on a treatment plan or examined a patient when he or she did not).
- ✓ Attending classes or clinical experiences while under the influence of alcohol or drugs.
- ✓ Failing to wear a nametag designating status as a Physician Assistant student during any assigned clinical experience.

The PA Program maintains a policy that students must pass all interval and final examinations, written assignments, course and clinical rotations in order to graduate. In the event of failure of a major exam or rotation, the PA faculty will review the student's entire record. A student who fails a course or a rotation will trigger program action which may include probation, remediation, or disqualification from the program.

Assessment of student performance encompasses knowledge, attitudes, behaviors, and skills. This includes attendance and participation in class, conduct in the classroom and/or clinical setting, and satisfactory clinical performance. Attitudes and professional suitability are also assessed as part of academic performance evaluations. Satisfactory progress in professional behaviors and attitudes must be achieved in order to advance and complete the program of study.

1. Attendance: It is a program requirement that all students are required to attend and participate in all didactic and clinical classes, experiences and projects, as well as all other scheduled functions. This includes arriving on time and remaining until the class or other function has ended. Students are required to notify the program office of any absence and the reasons for the absence.
2. Professional Behavior: Students are expected to act in a professional manner in the classroom or clinical setting. Behavior such as disrespect of fellow-classmates, department faculty and staff, visiting lecturers, preceptors or clinic staff, as well as patients, is an academic performance issue.
3. Satisfactory Clinical Performance: Students will be assessed on their clinical performance by program faculty and preceptors. Unsatisfactory clinical performance includes, but is not limited to, repeated or unexplained lateness to or absence from clinical experiences, failure to complete required written assignments and charting by scheduled deadlines or scheduled functions and didactic and clinical learning experiences, failure to receive a "satisfactory" in a clinical clerkship, failure of exams at the completion of rotation, and inappropriate behavior at a clinical site. Students are required to notify the program office of any absence... Failure to make satisfactory progress in the clinical year may result in extension of an individual's training schedule and even disqualification from the program at the discretion of the PA faculty.
4. Policy Governing Student Employment: This is a fast-paced, intensive program with a finite amount of time to assimilate course work and complete assignments. ***Due to the rigorous academic coursework of the WLU PA Program, students are strongly discouraged from working during the***

course of study. Students who choose to work must inform the Program Director in writing. If employment affects a student's performance or causes a pattern of concern (e.g. failing grades, interfering with academic or clinical duties, or sustained marginal performance), the student will be subjected to administrative action up to and including dismissal from the program. A student who fails a course, and when reviewed as a whole it is determined that the student will likely succeed, will be decelerated and allowed to re-enter the program at the appropriate time when the course is again presented. A student who fails a clinical rotation will be required to repeat the rotation. Any student who fails a repeated course or clinical rotation will be dismissed from the program.

5. Policy Governing Class Officers: All class officers must be in good standing (academically and professionally/behaviorally) in order to continue to execute their official duties.
6. Policy Governing Student Safety: West Liberty University takes the safety of its students seriously. The University will vigorously investigate all reports of bodily harm, as well as threats that are made to the student body.
7. Policy Governing Eligibility for the National Board Examination: Students are required to complete all didactic and clinical courses to be eligible to sit for the National Board Examination. Students who fail to complete these courses will be disqualified from taking the board examination.
8. Behavior: The University will discipline criminal or inappropriate behavior that occurs on campus as well as that which occurs off-campus.

Policy Regarding Remediation, Deceleration, and Dismissal

Grading and Assessment:

The WLU PA Program is a competency based program. Students are required to complete each component of the program successfully before progressing on to the next phase. The minimum passing score is 70% on all didactic exams and 60% on EOR exams, and a grade of "satisfactory" on professionalism, all skills and clinical clerkships. The minimum passing grade is a C for each course using a letter system. A "satisfactory" must be obtained in all courses graded as satisfactory or unsatisfactory.

Student progress is monitored and documented in a manner that promptly identifies deficiencies in knowledge or skills. Students who are identified through self-referral or through faculty observation as being at risk for failure will be referred for remediation. Remediation may include tutoring, self-study, reading assignments, completion of specific tasks, written response to selected exam items, or referral to the Learning and Student Development Center for counseling.

Guidelines for Remediation and Dismissal:

1. Remediation is required for any failed written examination or skills assessment.
 - a. Written exam or skills assessment = written tests, check-offs/lab practicals, papers, presentations, OSCE's, and end-of rotation (EOR) exams
2. Remediation of exams and skills assessments must be completed within two weeks.
3. Remediation is for learning, and the student must demonstrate he/she has learned the material for the areas in which the deficiency was identified.
4. Successful remediation will allow the student to progress, however, the original assessment score will be recorded and will count toward the final course score.
5. Remediation may also be required when an academic or professional deficiency is identified by a faculty member in any other activity associated with the PA program.
6. Failure to successfully remediate will trigger a comprehensive review of the student's academic record resulting in administrative action which will include probation or deceleration or dismissal from the program.
7. If a student receives a grade of D in a didactic **COURSE** he/she will have the opportunity to meet with the instructor at the end of the semester after final examinations. Weak areas will be identified and the student will have an opportunity to do self-study and then repeat a comprehensive final exam (not identical to the one already used).
 - a. Passing this second examination does not guarantee passing of the course.
 - b. The remediated grade will be averaged with all other course grades to determine the final course grade.
 - c. If a student fails to achieve at least a "C" for the course grade after taking the comprehensive final exam a second time, they will immediately decelerate (stop progress in the program), return at the beginning of the next cohort, take all required courses again, and pay for all required courses again.
 - d. The student will not be given a passing grade higher than a C in the remediated course.
 - e. To be eligible for this comprehensive remediation, the student must have taken the final exam.
 - f. Students will have the opportunity to do this for **no more than two courses** during the didactic year of the program.

Please note the following:

- ✓ Remediation is student and/or situation specific and is determined by the PA faculty and the course director/instructor.
- ✓ Arrangements for remediation are made with the course director/instructor.
- ✓ If a student's cumulative GPA falls below 3.0 he/she will be subject to academic discipline that may result in probation or disqualification from the program.

If a student fails **a course** after attempted remediation, the student's file will be viewed as a whole. If it is believed that the student will succeed in the future, he/she may be decelerated and allowed to repeat the course the next time it is given. If the failure is in a clinical clerkship, the student may be allowed to repeat the clerkship in the next rotation. *Any student who fails a **repeated course or clerkship** will be dismissed from the program. A student may not repeat more than two courses total (one in didactic and one in clinical) while in the program.*

Although a student may have passing grades in all courses, but when viewed as a whole, the record shows a *pattern of concern**(see below), that student will be given a written warning or be placed on probation with a remediation plan. *Failure to successfully complete the terms of the plan will result in *dismissal from the program.* Decisions concerning academic issues are made in consultation with the Student Progress Committee and Faculty Committee.

***Pattern of concern:**

- ✓ Failure of two (2) or more exams in one course. For courses that include labs/practical exams, failure of 2 or more exams in either the written or lab/practical
- ✓ Failure of three (3) or more exams across all courses in a single term.
- ✓ Receiving a mark of “unsatisfactory” on a Preceptor Evaluation of a student.
- ✓ Failure of an End of Rotation (EOR) examination.
- ✓ Cumulative GPA below 3.0
- ✓ Consistent marginal passing scores/grades.
- ✓ Failure to adhere to professional standards.

***Reasons for dismissal from the program include, but are not limited to: academic dishonesty, unprofessional conduct, unsatisfactory attendance in classes or clinical assignments, positive drug testing, and inability to pass a background check. Each case will be investigated and will be based on objective findings.**

WLU PA Program Grievance & Appeal Procedure

A student who believes that his/her course grade, course failure, suspension, probation, or dismissal from the Institution or from the PA Program was based on inadequate evidence or prejudicial judgment, may appeal this action. Please note that, when considering course grades, there is always a subjective component. Because of the specialized nature of Physician Assistant education, the Graduate Health Sciences Council is not in a position (does not have the expertise) to second guess the instructor as to the appropriateness of a grade. In an appeal of a grade, the student must demonstrate the grade was unfair in some way (expectations were unclear; the instructor was unprofessional in dealing with you etc). The standard of appealing a grade is very high and must be accompanied by clear, unambiguous documentary evidence. The burden of proof is upon the student for all appeals.

The appeals process is the following:

Step 1

It is recommended that a PA student consult with his or her academic advisor before and while initiating a complaint or grievance.

1. The Physician Assistant (PA) student shall discuss the problem with the instructor (for problems involving a single class) or Program director (for problems involving the program in general) and attempt to resolve the issue.

Step II

1. If the complaint is not satisfactorily resolved in Step I, the PA student may appeal this action in writing to the Program Director who will then bring the student's appeal before the Student Progress Committee within ten (10) calendar days of the receipt of such notification. The appeal will be brought before the Committee for arbitration.

Step III

1. If the complaint is not satisfactorily resolved in Step II, the PA student has the right to file a grievance with the Graduate Health Sciences Council. The PA student wishing to file an appeal must submit a letter of appeal (petition) to the Dean of the College of Sciences. The letter of appeal must state the action being challenged; including a statement of the facts and evidence made with sufficient clarity to reasonably support the challenge.
2. In general, the following types of grievances will be heard by the Graduate Health Sciences Council: appeal of final course grades, extension of time to complete program requirements, non-professional behavior, plagiarism, and any other matter that may potentially fall within the scope of the Council.
3. The Graduate Health Sciences Council will hear the PA student's case (using the procedure below). The decision of the Graduate Health Sciences Council will be forwarded to the Dean of the College of Sciences within eight class days of the hearing. If an appeal of the Graduate Health Science's Council's decision arises, the Dean can affirm or overturn the decision. The Dean will inform the PA graduate student and the council of the final decision. The Dean's decision is final and therefore, there is no appeal of it.

HEALTH SCIENCES COUNCIL GRIEVANCE & APPEAL POLICY

1. The Graduate Health Sciences council will be comprised of 3 WLU faculty from the College of Sciences. The members, as well as the Chair of the Graduate Health Sciences Council, will be selected by Dean of the College of Sciences in consultation with the Physician Assistant Program Director. The Program Director will provide the PA student with a copy of this procedure.

2. The PA student may select a (WLU faculty or staff member) as an advocate to assist in the preparation and presentation of the petition. The advocate may appear with the student before the Council. The advocate can consult with the student but, may not speak directly to the Council.
3. The student, working with his/her advocate, will produce a written allegation describing the grievance, a summary of the circumstances surrounding it, the related evidence, and what has already been done in attempting to resolve it. Sufficient copies of this document must be delivered by the student to all faculty members of the Graduate Health Sciences Council at least 48 hours prior to the hearing.
4. The PA student will work with the chair of the Graduate Health Sciences Council to schedule the hearing at a mutually agreeable time. The student is entitled to a hearing within 15 class days of the time the student first contacts the Chair of the Graduate Health Sciences Council.
5. At the hearing, the PA student will have a reasonable amount of time (about 15 minutes) to present his or her grievance. The faculty member and/or program representative will then have a similar amount of time. Neither of the affected parties will be present to hear the other party's presentation; neither of the affected parties will be present during deliberations. The Graduate Health Sciences Council may hear additional witnesses at the chair's discretion. A decision will be forwarded to the Dean within 8 class days of the hearing.
6. There will be no legal counsel present in the hearing.
7. The Graduate Health Sciences Council shall maintain confidentiality concerning any information presented in the hearing; all materials shall be maintained in the Office of the Dean of the College of Sciences
8. The Graduate Health Sciences Council and PA Program Director shall have access to all materials that are relevant to the case.
9. Cases brought before Graduate Health Sciences Council will be decided by a simple majority vote.
10. The PA student may withdraw the grievance at any point in the proceedings by requesting in writing to the Dean or Chair of the Graduate Health Sciences Council.
12. The Dean or Chair of the Health Sciences Council may grant an extension of the time limit of this procedure for good cause.

Guidelines for Academic Probation

Placement on Probation

A student may be dismissed or placed on program probation in response to circumstances that include but are not limited to the following:

- ✓ Failure at any formal "decision point" (see section entitled Decision Points).
- ✓ Failure of a midterm or final exam, or course.
- ✓ Failure to complete written assignments or charting by scheduled deadlines.
- ✓ Unsatisfactory attendance records (including chronic tardiness or leaving early).
- ✓ Unsatisfactory progress in professional development, attitudes and professional conduct.
- ✓ Failure to receive a passing evaluation on a clinical rotation.
- ✓ Failure of exams at the completion of a rotation.
- ✓ Unprofessional interactions or inappropriate behavior at an academic or clinical site.

- ✓ Failure to be present at all scheduled assignments: classes, functions, and didactic or clinical information and learning experiences.
- ✓ A pattern of documented evaluator concerns about a student's performance that indicates unsatisfactory progress when the record is viewed as a whole, although passing grades have been assigned.
- ✓ Failure to meet professional expectations.

Status while on Probation

Program probation refers to student status within the PA Program. It is not forwarded to the University, nor does it appear on official transcripts. If the PA faculty recommends probation, the student will be notified in writing by the Program Director, Academic, or Clinical Coordinator. This letter will also state the minimum length of the probation and the conditions for removal from probationary status, i.e., a remediation plan. This notification is essentially a warning that the student must demonstrate improvement if he or she is to remain in the program of study.

Removal from Probation

Completion of a remediation plan is required for removal from probation. Failure to complete a remediation plan successfully will disqualify the student from this program. Review of probation status occurs at the end of each quarter.

- ✓ In the case of failed exams, the student must complete remediation as approved by the program.
- ✓ If a student is on probation for failures in multiple courses, probation may be carried over into the following quarter or until he or she demonstrates satisfactory progress.
- ✓ Probation for professional conduct issues will be reviewed by the program faculty at the end of each quarter, at which time the faculty may recommend continued probationary status or disqualifications from the program.
- ✓ Probation during the clinical year is reviewed at the end of each clinical rotation, at which time the program faculty may recommend either continued probationary status or disqualifications from this program.

When a remediation plan has been completed successfully, the Program Director, Academic, or Clinical Coordinator will notify the student in writing that he or she has been removed from probation.

Program Disciplinary Actions

Written Warning:

Disciplinary action initiated by the faculty that involves the student signing a document that includes: the reason for the warning, the activities that the student will be required to complete, a time period (if necessary) and the consequences for failure to complete the stated activities.

Probation:

In the case of disciplinary action initiated by the PA faculty in response to students failing examinations, demonstrating unsatisfactory performance, or displaying unprofessional conduct in either the didactic and clinical phases of the program, the student in default is required to sign a “Probation Contract,” that includes the following: a statement of the problem, conditions for removal of the probation, a date for completion of the conditions, and the consequences for failure to complete the conditions for removal from probation. It is signed by the Program Director, the Academic or Clinical Coordinator, and the Student.

Suspension:

This could take one of the following forms: (i) a specified period of physical separation from the program, or (ii) disqualification from the program. In the case of the former, the student will be required to sign a document that indicates: the reason for the suspension, the duration of the suspension, the activities that the student will be required to complete before he/she can be reinstated into the program, and the consequences for failure to complete these activities. In the case of the latter, the student will be required to sign a document that indicates the reason for the disqualification.

Note: Students on probation or suspension may not communicate physically or by any other means with a clinical site.

Guidelines for Addressing Sexual Harassment, Other Forms of Unlawful Discrimination and Grievance Procedure

All members of the University community are expected to support an environment of mutual respect and sensitivity, free from all forms of unwelcome verbal or physical conduct of a sexual nature, which would constitute harassing, hostile, disruptive or patently offensive behavior. Therefore, sexual harassment, in any form, of students and employees of West Liberty University is a violation of University policy and is expressly prohibited. All faculty, students, and staff of the University are expected to:

- ✓ engage in conduct that meets professional standards
- ✓ remain sensitive to the effect of their actions and words on others
- ✓ take appropriate action to prevent sexual harassment
- ✓ avoid behavior that might be construed as sexual harassment
- ✓ become familiar and knowledgeable regarding this policy

Those individuals in positions of supervisory authority have a responsibility to discourage sexual harassment and to implement and enforce this policy. Any form of sexual harassment is unacceptable behavior and engagement in such conduct is subject to appropriate disciplinary sanctions up to and including termination of employment or expulsion from the institution.

In addition, acts of sexual harassment that constitute sexual battery or other violations of criminal law will be referred to the appropriate authorities for prosecution. One incident, or the aggregation of a series of incidents, may constitute sexual harassment. The University recognizes sexual harassment may occur

in a variety of ways, by and or between individuals of the same or different sex, ages, positions, sexual orientation, occupations, or responsibilities.

This policy derives its basis and authority from the following: Title IX of the Education Amendments of 1972; the 1980 EEOC interpretive guidelines of Title VII of the Civil Rights Act of 1964; The West Virginia Human Rights Act, WV Code 5-11-1 to 19; The Campus Security Act, and the Higher Education Reauthorization Act of 1992.

A student may file a formal complaint at any time. For detailed policy and procedures concerning sexual harassment and other forms of unlawful discrimination, go to: <http://www.westliberty.edu/bog/files/2010/01/Policy-32-Sexual-Harassment-and-Other-Unlawful-Discrimination.pdf>

Guidelines for Voluntary Withdrawal from the PA Program

Students may voluntarily withdraw from this program at any time prior to a formal notice of dismissal from the PA Program. Students must file a “Withdraw from All Classes Form.”

Guidelines for Leave of Absence

In exceptional circumstances – such as the sudden onset of a serious medical condition – a leave of absence from the PA Program may be granted by the Program Director. Due to the cumulative nature of the material, extended absences during the program are not permitted. Students may request a leave of absence for up to one year in length. All requests must be made in writing. Please note the following: (i) a student who is not registered after one quarter’s absence and has not requested a leave of absence will be dropped from the program; (ii) a student who has not re-registered with the program after a leave of absence of one year will be dropped from the program.

The PA Program reserves the right to determine the conditions for re-entry after any leave of more than one month duration. Coursework, exams and clinical experiences missed during any leave must be made-up within a time-frame agreed upon by the course instructor and the Program Director of the PA Program before the student may continue in this program in good standing. Additional tuition may be required to complete this program after re-entry.

Guidelines for Consideration for Reinstatement to the PA Program

Because of constant changes in curriculum presentation, re-admission, if desired, must be negotiated with the Program Director for the PA Program. Requests for reinstatement must be made in writing. The student must show that the problem leading to the withdrawal has been resolved such that success in this program will follow if the student is reinstated. Reinstatement is also dependent on the availability of a clinical training site.

Academic Advising and Counseling

Faculty – Student Relationships

Faculty is more personally involved with students in this program than in traditional educational experiences. We expect you to rely on us to handle information in a trustworthy manner. Your faculty advisor acts as your mentor during the junior year. We worry about the impact of isolation on a personal and professional level and expect a certain amount of openness from you. Students who close themselves off are shutting the door to a potential avenue for help.

Students and faculty advisors will have at least one formal meeting each quarter during the academic year. These meetings are opportunities to become better acquainted, to problem-solve any individual issues (academic, personal, and/or professional), to provide guidance in developing your role in the PA profession, etc. Additional advisor-student meetings may be scheduled at the request of either the student or faculty member. A different faculty member may be assigned as your senior advisor for the clinical year.

Attempts to resolve program problems should initially be undertaken within the PA Program. We would rather hear about issues directly from you than from some other source.

Students may refer themselves, or may be referred by faculty to the Learning and Student Development Center for assistance with tutoring, study skills or medical referral.

Stress

This program is very demanding, and stress will be felt by each student in different ways, and at different times. Each term has its own unique stresses and rewards. We expect you to develop functional ways of dealing with stress because it will continue long after this program is over. Your faculty advisor can be a resource for you in dealing with stress. In addition, we encourage you to contact the Learning and Student Development Center and take advantage of their services.

Learning and Student Development Center

Counseling Services provides intervention to students whose personal difficulties and problems interfere with their academic adjustment and ability to fully benefit from the college experience. Counseling Services also helps students with social, emotional, and academic concerns in a sensitive, caring, and confidential manner.

- ✓ All services are free.
- ✓ Office hours are 8 a.m. to 8 p.m. Monday through Thursday, 8 a.m. to 4 p.m. Friday...
- ✓ Evening appointments are made by arrangement.
- ✓ The counseling services personnel maintain a strict policy of confidentiality within professional and ethical standards and legal guidelines.
- ✓ Students may schedule an appointment by calling the counselor, e-mailing the counselor, or stopping by the Counseling Office (Main Hall, 140).

Requirements for Progression/Graduation

Didactic Phase Summative Evaluation: Occurs at the end of the 1st year (July)

In order for a student to progress to the Senior Year (year 2), he/she must:

1. Pass all courses with a minimum passing grade of “C.”
2. Have an overall GPA of not less than 3.0 on a 4.0 scale.
3. Pass a graded OSCE.
4. Pass a comprehensive written examination.
5. Pass all decision points.
6. Meet all professional requirements.
7. Be recommended by the Student Progress Committee for advancement to the senior year.

Clinical Phase Summative Evaluation (Graduation Requirements): Occurs at the end of the program (July).

In order for the student to graduate from the program he/she must:

1. Pass all courses with a minimum passing grade of “C.”
2. Pass all clinical clerkships with a “Satisfactory” grade.
3. Have an overall GPA of not less than 3.0 on a 4.0 scale.
4. Pass a graded OSCE.
5. Pass a comprehensive written examination.
6. Pass all decision points.
7. Meet all professional requirements.
8. Be recommended by the Student Progress Committee for graduation from the program.
9. Meet all of the University’s requirements for graduation (tuition paid up to date/successful check-out).

CLEARANCE FOR GRADUATION

It is the responsibility of the student to:

- ✓ Verify with the Registrar’s Office that official transcripts from all institutions he/she attended have been submitted and are on file at that office.
- ✓ Verify with the Registrar’s Office that transcripts for all prerequisite courses for entry into the physician assistant program have been received and are on file at that office.
- ✓ Verify with the Program Director or his designee that all degree compliance reports received from the Registrar’s Office are true and accurate representations of his/her current and pending graduation status.
- ✓ Students must satisfy all program decision points.
- ✓ Students on probation must have documented proof of having completed all requirements for removal from probation.

Clearance for the NCCPA (National Commission on Certification of Physician Assistants) Board Examination

Note #1: *If a student is cleared for either graduation or the NCCPA board examination and it becomes evident that the student has not fulfilled one or more requirements (listed above), the PA faculty reserves the right to delete that student's name from the list of students who are eligible to participate in these activities. A student whose name has been deleted may not be eligible for placement on either list until the following school year.*

Note #2: *It is the student's responsibility to communicate as often as necessary with the Registrar's Office to verify that all requirements are fulfilled for graduation and for taking the NCCPA board examination. Students who fail to do this may find themselves ineligible for one or both of these events.*

OPPORTUNITIES FOR CONTRIBUTIONS TO PA EDUCATION AND THE PA PROFESSION

Course Evaluations and Student Input

There are opportunities throughout the PA Program for students to evaluate speakers and courses. These evaluations are most valuable when everyone in class participates and responds constructively. We expect that all students will complete evaluation forms for each course. If you have suggestions for course coordinators during the quarter, you may provide input directly to him/her. You may also discuss your comments at meetings with your faculty advisor. Please remember to provide constructive feedback; sarcastic or offensive comments or axes to grind are unhelpful in any context.

Admission Interviews

Each year, students may be selected to participate as admissions interviewers for the current applicant pool. This usually involves at least one half day of interviewing applicants, writing comments, and taking part in discussions with the other interviewers. Participating seniors are selected on the basis of coordination with any current clinical assignments. The Principal Faculty will make final selection of candidates.

Professional and Student Organizations

Being a PA is a political as well as a clinical role. As relative newcomers among health care professionals, PAs must constantly strive to educate patients, other health care professionals, legislators, insurance companies and health care organizations about their role as members of the health care team. One of the most effective ways to do this is to join PA professional organizations. The WLUPA Program encourages all students to join and be active participants in the local, state and national professional organizations for physician assistants. As a condition of acceptance into the program,

students are required to join the American Academy of Physician Assistants and the West Virginia Academy of Physician Assistants. The minimal membership dues required of students is money well spent.

Students in the WLUPA Program are encouraged to get involved with the University community as well as the local community. PA students can participate in community events and service projects such as health fairs and food banks, social events, public education activities such as PA Day displays, career days, and fund-raisers for class activities. Second year students are encouraged to attend PA conferences (if they do not compromise their education). Students must obtain department permission to attend physician assistant conferences prior to registering for them. Only students who are in satisfactory academic standing at the end of the quarter prior to the event are given this permission. ***Requests must be submitted in writing or e-mailed no later than one month prior to the event.*** Arrangements to make up and complete any missed exams or assignments must be made with individual course chairs/coordinators, or preceptors. Professional leadership development for state and national academies begins during student years. Individuals can and do make a difference in our profession.

HEALTH PROFESSIONAL REQUIREMENTS

Health Screening and Immunization Verification

A health screening and immunization record form is to be completed by the successful candidate and forwarded to the Health Services Center as part of the application process prior to, and as a condition of, matriculation. Students will be required to update their health status and immunizations, prior to entering the clinical phase of the program. Health screening, immunizations, and tests are available at the Student Health Services center. Candidates and students may obtain the immunizations from their own health care provider, but will still need to show proof and obtain clearance from the campus Student Health Services. Students must provide documentation of immunization or make arrangements with the Student Health Services to meet these requirements. Documentation of compliance with these requirements (i.e., clearance from Student Health Services) is provided to the Department of PA Studies for inclusion in the student's permanent record. Students must sign an authorization that allows the Student Health Services office to provide documentation that the health and immunization requirements have been met.

Immunizations

West Liberty University requires that its students and faculty be up to date on the following immunizations and skin tests. Students are expected to have these immunization current upon matriculation and updated as needed prior to beginning their clinical clerkships.

Tuberculosis (TB)	Must be completed within the six months prior to entering the program. Applicants with a history of positive tests must provide documentation of appropriate screening and treatment. A history of receiving the BCG vaccine is not a contraindication to skin testing. <i>Two-step testing is required.</i>
Diphtheria-Pertussis-Tetanus	Primary series of 4 doses with DTaP or DTP. Tdap booster within the last 10 years.
Measles-Mumps-Rubella (MMR)	Series of 2 doses. Dose 1 at 12-15 months or later, dose 2 at 4-6 yrs or later and at least one month apart from the 1st. Measles titer showing immunity required.
Rubella	Immunization and titer showing immunity required.
Mumps	Immunization and titer showing immunity required.
Influenza	Immunization is required each year.
Hepatitis B	A series of three immunizations and serological testing for antibody to show proof of immunity is required.
Chicken Pox (Varicella)	A series of 2 vaccines is required. History of disease is acceptable however, titer is still required.

Bacterial Meningitis immunization is strongly recommended.

Health Insurance/Financial Responsibility

Students must submit proof of health insurance coverage by the time of matriculation. PA students are required to maintain health insurance throughout the duration of this program. Some clinical training sites will allow students to participate in their practice only if adequate health insurance is carried. Be prepared to demonstrate evidence of coverage if asked to do so.

We cannot over-emphasize the importance of health insurance. The costs of hospitalization, whether from an illness or accident, can be very high, and without insurance, the full financial burden of the costs becomes solely your responsibility. ***Thus, it is important to have health insurance throughout your entire PA training. Costs for medical services will be charged to your account. We do not endorse any particular insurance but it is a requirement for your continued participation in the PA program.***

Universal Precautions

The program will ensure that you receive training in the appropriate handling of blood, tissues, bodily fluids, sharps and needles during your training. As part of your professional development, you will be responsible for incorporating these precautions into your routine practice while in patient care situations

and for being certain that you understand what is available at each site as you rotate from one site to another.

Infection/Contamination/Needle Stick or similar injuries and exposure to communicable diseases.

If you experienced a needle stick or sharps injury or were exposed to the blood or other body fluid of a patient during the course of your work, ***immediately follow these steps:***

- ✓ Wash needle sticks and cuts with soap and water
- ✓ Flush splashes to the nose, mouth, or skin with water
- ✓ Irrigate eyes with clean water, saline, or sterile irrigants
- ✓ Immediately follow established protocol. If no established protocol, immediately proceed to the emergency department for evaluation, treatment, and follow-up as indicated.
- ✓ Report the incident to the appropriate medical/administrative personnel and your preceptor.

If you have questions about appropriate medical treatment for occupational exposures, assistance is available from the Clinicians' Post Exposure Prophylaxis (PEP) Line at 1-888-448-4911 or <http://www.nccc.uscf.edu/>

Immediately after the above steps, contact the Clinical Coordinator (304)-336-5294 and provide the following information:

1. Date/Time of the incident and procedure being performed what the incident occurred.
2. Who assigned the duties?
3. Nature of the accident/how it happened
4. Nature of the injury-puncture/scratch/bite etc.
5. Extent of injury-depth, amount of blood, or fluid potentially injected or on exposed surface.
6. Personal protective equipment worn at time of the exposure?
7. Decontamination/first aid provided at time of incident?
8. Name(s) of other personnel that witness incident
9. Name(s) of personnel notified of incident

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

The effects of exposure to infectious and/or environmental hazards can lead to significant disease and disability. These potential harmful effects may also significantly impact student learning such as causing a student to miss classroom or clinical days which could necessitate delay of progression in the program, delay in beginning rotations, delay in completion of rotations, delay in graduation from the program, and potentially even withdrawal from the program before completion. All of these potential delays could result in additional costs to the student.

Student Background Checks and Drug Screenings

West Liberty University policy states that all students entering a program with clinical affiliations must have a background check and drug screening. These will be required of all successful applicants upon matriculation and prior to clinical rotations.

All PA students are required to complete their background check and drug screening before beginning their program of training.

- ✓ Students will be required to complete a second background check prior to beginning the clinical year. You will be advised when and how to complete this requirement.
- ✓ Students are responsible for securing and paying for their own background checks from an approved vendor.
- ✓ Students must provide a certificate/report of completion to the Program Director of the Physician Assistant Program as confirmation of having completed this requirement.

PROGRAM COSTS, FINANCIAL AID and REFUND POLICY

Tuition and Fees

All tuition and fees will be collected through the Business office located in Main Hall, West Wing. Through this system, your payment will be applied directly to your tuition. In addition to tuition, you may have other fees that will be collected by the Business office.

Financial Aid

PA students are eligible for financial aid through the WLU Financial Aid office. *For further information, (See Financial Aid Office under the Current Student section of the WLU Web page <http://www.westliberty.edu/financial-aid/>)*

Estimate of Costs (FY 2015-2016)

Item	Year One	Year Two
Tuition: In-State	\$ 25,200	\$ 26,460
Tuition: Out-of-State	\$ 37,800	\$ 39,690
Lab coats/Scrubs	\$ 400	\$ 300
Diagnostic Equipment	\$ 723	\$ 000
Books (Approximately)	\$ 2,000	\$ 500
Lap Top Computer	\$ 750	\$ 000
Membership AAPA/WVAPA	\$ 150	\$ 150
BLS/ACLS	\$ 105	\$ 000
Background Check	\$ 40	\$ 40
Drug Screen X 2	\$ 56	\$ 50
On-Campus Housing/Food	\$ 11,000	\$ 11,000
Off-Campus Housing(1-room) /Food	\$ 12,000	\$ 12,000
Travel cost estimate (Clinical year)	N/A	\$ 2,000
Graduation Fees	N/A	\$ 150
Estimated Total cost <i>In-State</i> students:		
Tuition only: \$50,400		
All Expenses:		
Year 1 <i>On-Campus</i> : \$40,424 Year 2 <i>On-Campus</i> : \$39,350		
Program Total: \$79,774		
Year 1 <i>Off-Campus</i> : \$41,424 Year 2 <i>Off-Campus</i> : \$40,350		
Program Total: \$81,774		
Estimated Total cost <i>Out of-State</i> students:		
Tuition only: \$79,380		
All expenses:		
Year 1 <i>On-Campus</i> : \$54,914 Year 2 <i>On-Campus</i> : \$53,880		
Program Total: \$108,794		
Year 1 <i>Off-Campus</i> : \$55,914 Year 2 <i>Off-Campus</i> : \$54,880		
Program Total: \$110,794		

***Tuition and fees are subject to change.**

Tuition Refund Policy

A student who withdraws from the program by following the proper procedure will be issued a refund of tuition and fees upon receipt of a withdrawal slip signed by the Registrar. A student who officially withdraws from a portion of their courses during the refund period must request a refund from the Business office. A student who is required to withdraw for disciplinary reasons shall not be entitled to any refund. Refunds are calculated from the first day of classes. Lab and course fees are not refundable. Students who officially withdraw shall receive a refund of regular fees in accordance with the following schedule:

Refund Schedule	
During the first and second weeks	90% Refund
During the third and fourth weeks	70% Refund
During the fifth and sixth weeks	50% Refund
Beginning with the seventh week	No Refund

Registration

The student must register on the dates designated in the WLU Course Schedule and Registration Instructions published each quarter, as well as on dates designated in the quarterly Student Information Sheet available from the Registrar's Office. Registration procedures include recording information on forms furnished by the Office of Registrar, clearing financial arrangements with the Student Accounting Office, and having a student identification picture taken. Students must follow the policies set by the Admissions Office.

Change of Address

Students are responsible for notifying the Office of the Registrar and the PA Program office if their address changes. WLU – PA students must also notify the PA Program office of phone number changes. *If you receive financial aid, you should notify the Student Financial Aid office directly of any change of address. This extra step will ensure that this office has your most current information on file at all times.*

Practice Liability Insurance

West Liberty University assumes the financial responsibility for providing liability insurance for students during their clinical clerkships and other assigned clinical events.

ID Badges

You will be issued a WLU student ID badge the first time you are enrolled as a student at the University. Once issued, if the badge is lost, you may have to pay to have it replaced. The ID badge is your "passport" allowing you access to a variety of services on campus, such as the library, computer labs, student activities, etc.

Grade Reports

Students can access grades from the university's web page. This is a secure information system. Students are allowed access only to their own records by logging into the system using a personalized access code.

Incomplete Grades

A student who is unable to complete a course during any term has to file a petition to receive an incomplete grade. The student is responsible for completing all additional work that may be required to clear the incomplete. This must be done by a date that is no later than the beginning of the regular examination week scheduled for the following quarter. Failure to comply with these conditions will result in a failing grade. Senior students in their clinical year who are in danger of not completing requirements of their rotations will have the opportunity to discuss the deficiencies.

MISCELLANEOUS ISSUES

WLU PA Program Communication Policy for Students

Each student must have a laptop as part of the program requirement. You should arrive at the PA program with adequate computer skills. This means that you should have and know how to use a web-browser and a word processing program. The primary method of communication between faculty, staff and students will be via e-mail. Therefore, you should have e-mail skills as you will be using this medium to communicate with the PA Program.

Students may request access to their student files. Please contact your advisor to make arrangements.

E-mail Addresses

All students need to set up an individual account at the beginning of the program. WLU will arrange for you to set up an account and use the University system.

What Students Can Expect of the WLU PA Program:

- ✓ The program will notify students of schedule changes, assignments, etc., via e-mail if known 24 hours in advance. If there is less than 24 hours notice, we will find another forum: phone, posting a notice, etc.
- ✓ Program announcements will be by faculty notification verbally, via e-mail or by posting a notice.
- ✓ Since faculty and staff often have significant responsibilities away from the office (e.g., site visits, administrative or organizational meetings), they will identify time out of the office by posting a message on their office door and/or notifying the secretary. At these times, students should refer questions, etc., to another faculty member or staff.
- ✓ E-mail will be checked daily by faculty and staff when they are in the office. Faculty and staff may check voice mail at least once each business day even when they are out of the office.

- ✓ All program contacts will be responded to in a prompt manner (ideally within 24 hours during the workweek, or by the following Monday during a weekend), even if it is to say, “We received the message, and we are working on it – a definite response will come later.”
- ✓ When responding to e-mail, responses will include the original message when appropriate.
- ✓ Messages will be forwarded to others when appropriate.

Social Media Policies/Guidelines

Participation in social media and online activities such as blogging, tweeting, wiki, or any other form of online publishing is commonplace in modern society. As a future health care professional, you will be held to a higher standard of behavior regarding the use of these types of activities. The tenets of professionalism, good taste, and common sense should permeate every aspect of your social media interaction. If, as part of your activities online, you identify yourself as a student in the West Liberty University Physician Assistant program, you are now connected to every person in your class, your program, and even those who will follow you as students. The following guidelines and policies are intended to help you make the proper choice as you engage in social media.

General Guidelines

Be thoughtful how you represent yourself on social networks. The line between private and public, personal and professional typically blur in online social networks. Respect your colleagues and your audience. Recognize that your fellow students in the West Liberty University Physician Assistant program in general, and the community as a whole represent diverse customs, values and points of view. Express your opinion, be yourself, but be respectful. This includes avoiding the use of obscenities, personal insults, ethnic, religious or racial slurs, sexually harassing or inappropriate commentary, as well as topics that can be considered inflammatory or obscene. If you are unsure, ask for guidance from faculty.

Respect the privacy of others, especially classmates, other students, faculty and staff. If you disagree with anyone, it is rarely appropriate to air your differences publically. Use sound judgment in considering anything you put into writing as it will be seen by others.

General Email Etiquette

- ✓ Always address an email with an appropriate salutation (“Dear Professor Jones”, “Dear Susan”).
- ✓ Email for professional communication should *not* include the common abbreviations utilized in personal texting. Sentences should be complete and appropriate grammar should be used.
- ✓ Be judicious when cc’ing emails. “Reply to all,” is not always an appropriate action.
- ✓ Do not expect answers to emails from faculty late at night. Please understand email is not necessarily designed to provide unrestricted 24/7 access to the recipient.
- ✓ If you choose to craft an email about a subject you disagree with or are upset about, either as an original email or in response to an email from someone else, do not respond when you are angry or upset. This will often result in an email that is unprofessional and emotional. Instead, consider

what you wish to say, write it out, do not send it, and then return to it when you are less emotional. All emails you choose to send should be professional, appropriate, and polite at all times. In addition, anything you choose to say in an email you should feel comfortable and willing to say to an individual or group in a face-to-face meeting.

- ✓ Avoid SPAM.

Guidelines for Use of Social Media and the Internet during class or lab time

Respect class time and your colleagues' time. You should participate in personal social media conversations on your own time and not during scheduled class time or program activities.

The use of social media, chat rooms, instant messaging and/or "surfing" the web during class when not engaged in sanctioned web-based course activity is unprofessional and inappropriate.

Guidelines/Policy when posting as a member of West Liberty University PA Program

- ✓ Maintain confidentiality. Do not post confidential or proprietary information about your patients, their families, clinical facilities and staff, West Liberty University, its students, or its alumni. Use good ethical judgment and follow WLU PA program policies and federal requirements, such as the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and the Family Educational Rights and Privacy Act (FERPA).
- ✓ Students should never refer to a patient in a derogatory or disparaging manner, even if the patient is not identified
- ✓ No photos or videos of patients without written permission may be taken on a personal device, including cell phones.
- ✓ There is no protected or private speech on a social media site. Search engines turn up your words and pictures years later. Comments can be copied by others and forwarded.
- ✓ Respect copyright laws: You must have written permission before using any copyrighted or proprietary materials such as photographs, videos, texts, art, music, etc. In general, verbal or written permission must be obtained from individuals whose images are identifiable. However, written permission is always better.
- ✓ Do not post personally identifiable information: information that can be used to locate someone offline, including phone numbers, addresses, birth dates, email addresses, etc. should not be posted.
- ✓ Employers typically conduct web searches (including searches on Facebook and other social media) on job candidates before extending offers. Assume they will do this for you as well when applying for positions. Do not post commentary and other postings deemed to be copyright infringement, defamatory, proprietary, obscene, or dangerous on the web. Potential employers may see this content and disqualify you from an offer of employment.

* Students are prohibited from transmitting any patient-related image via electronic media without written permission.

Guidelines/Policy when posting as an Individual

- ✓ Be honest: Tell people who you are. In personal posts, you may identify yourself as a student in the West Liberty University Physician Assistant program. However, please be clear that you are sharing your personal views and are not speaking as a formal representative of WLU PA program. If you identify yourself as a member of the WLU PA program, ensure your profile and related content are consistent with how you wish to present yourself to colleagues.
- ✓ Protect yourself: While you should be honest about yourself, do not provide personal information that scammers or identity thieves could use. Do not list your home address or telephone number. Do not use your WLU email address for social media sites.
- ✓ Do not use the West Liberty University or West Liberty University Physician Assistant program logo or make endorsements without permission. Do not use the West Liberty University or West Liberty University Physician Assistant program logo to endorse political candidates or endorse products or causes.
- ✓ Is your content appropriate? If the content of your message would not be acceptable for face-to-face conversation, over the telephone, or in another medium, it is not acceptable for a social networking site.

Specific Policies for the West Liberty University Physician Assistant program

As a student in the WLU PA program, you assume all responsibility related to the security, privacy and confidentiality risks inherent in sending any content over the Internet. By its very nature, a website and the Internet cannot be absolutely protected against intentional or malicious intrusion attempts. The West Liberty University Physician Assistant program does not control the third party sites and the Internet over which you choose to send confidential, personal, health information or other content and therefore, does not warrant any safeguard against any such interceptions or compromises to your information. The West Liberty University Physician Assistant program does not endorse any product, service, views or content displayed on your or other's social media site(s).

If identifying yourself with the West Liberty University Physician Assistant program, you may not provide any content to a social media site that contains any product or service endorsements or any content that may be construed as political lobbying, solicitation or contributions, or use the social media site to link to any sites of political candidates or parties or use the social media site to discuss political campaigns, issues or for taking a position on any legislation or law.

Inappropriate use of electronic/social media can lead to disciplinary action including but not limited to formal reprimand, suspension, or dismissal from the program.

This policy may be updated at any time without notice, and each time a user accesses a social networking site, the new policy will govern usage, effective upon posting. All internet users are subject to state and federal laws regarding its use.

ADDITIONAL CLINICAL PHASE INFORMATION AND POLICIES

The Clinical Year provides you with the opportunity to acquire clinical skills in a supervised setting. This is to ensure that you gain competency as a clinician and to assure the safety and welfare of the patients you work with. Your success is dependent on the cooperation of preceptors, clinicians, support staff and patients at the various clinical sites. Each site is essential to your completion of the program. **BE INFORMED THAT UNDER ANY CIRCUMSTANCE STUDENTS ARE NOT TO REPLACE REGULAR CLINICIANS OR EMPLOYEES.**

Your clinical rotations are designed to be learning experiences. You may be assigned to either a team or a staff clinician. The clinician supervising you or your team will assign you specific tasks to perform and provide guidance to ensure your patient's safety and welfare.

This is the time and place to ask questions, learn your strengths and weaknesses, and to develop critical thinking skills. While you are expected to have basic skills and knowledge to build upon, you are not expected to be experts. The clinical rotations are opportunities for you to learn from working alongside experienced clinicians.

During your clinical rotations, you will gain experience in a variety of clinical settings and you will have the opportunity to deliver health care to diverse communities and populations. These experiences are intended to reflect the mission and goals of West Liberty University.

We have set high standards of personal and professional behavior for Physician Assistant students. We are here to work with you to help make your educational goals a reality. Please contact us if any questions or should problems arise.

SECTION 1

GENERAL CLINICAL YEAR POLICIES

1. Preparation for the Clinical Year:

During the didactic year, each student had the opportunity to meet with the Clinical Coordinator to discuss plans for the clinical year. Clinical sites are determined solely by the PA program faculty. Students may submit information on potential preceptors and clinical sites. However, the PA program reserves the right to approve any site for clinical training.

2. Clinical Site Placement:

The ultimate decision for clinical site placement rests with the West Liberty University Physician Assistant Program. *Students are not responsible for providing their own clinical rotation sites.*

3. Clinical Performance:

Unsatisfactory performance during the clinical year may result in a permanent or temporary suspension of the current clinical rotation or a delay in the commencement of the next scheduled rotation. Factors that lead to a suspension or delay include but are not limited to the following:

- ✓ Failure to complete written assignments or charting by scheduled deadlines.
- ✓ Unsatisfactory progress in professional development, attitudes and professional conduct.
- ✓ Unexcused and/or unexplained absence from a clinical site during a scheduled rotation.
- ✓ Failure to receive a satisfactory evaluation at the end of a clinical rotation.
- ✓ Failure of an end of rotation examination.
- ✓ Unprofessional interactions and/or inappropriate behavior at a clinical site.
- ✓ Unexcused and/or unexplained absence from a scheduled class or activity.

Suspension or delay of clinical rotations will remain in effect until either required assignments have been submitted, or other steps for remediation, as determined by this program, have been completed.

4. Clinical Evaluation:

“Unsatisfactory” end of rotation clinical evaluations may result in suspension from clinical rotations, remediation, repeating a rotation, delayed graduation, course failure or dismissal from the Program.

5. Program Extension:

A student who receives an unsatisfactory grade in any clinical rotation must reregister for that rotation and pay the applicable tuition fee. A rotation may be repeated only one time. A student who receives an unsatisfactory grade in a repeated clinical rotation will be subject to dismissal from the program.

6. Delayed Graduation:

If a student is unable for any reason to complete the clinical year as scheduled, that student will not be allowed to participate in the graduation ceremony until all required course work is completed.

7. Student Requirements:

Students are only expected to satisfy the requirements for successful completion of their rotations. **THEY MUST NOT BE USED TO SUBSTITUTE FOR REGULAR CLINICAL OR ADMINISTRATIVE STAFF FOR ANY REASONS.**

Clinical Year Overview

1. We expect students to understand the principles of confidentiality and to abide by them in their relationships with patients, peers, the PA faculty and other health care professionals.
2. It is important to approach your clinical assignments with an unbiased mind.
3. The clerkships are intended to be in-depth clinical experiences. This is a primary care program and specialty experiences are intended for exposure, not mastery.
4. Procedures are relatively easy to learn. The ultimate goal of this is to teach clinical reasoning and problem-solving.
5. Your expectations of the clinical experiences may be different from those of the preceptor or the program.
6. We attempt to individualize your clinical experiences within the parameters of a fast-paced, primary care PA program.
7. Everyone's experience will be different – even at the same site.
8. If your preceptor is not at the clinical site when you are scheduled to be there, you are **NOT AUTOMATICALLY** excused from attending clinic. If you cannot make other arrangements with clinical personnel, immediately contact the Clinical Coordinator.
9. We intend that this student manual will be your primary source of information for the duration of the program. Read It. Refer to it. Keep it close to you.
10. Take advantage of the current technology (e-mail, phone service, pager) to maintain frequent and close communications with the PA program and your advisor.
11. Flexibility about scheduling and traveling is an important expectation for the clinical year. arrangements with clinical sites sometimes change on short notice for a multitude of reasons.
12. ***Transportation to and from clinical clerkships is the student's responsibility.*** Please inform us if you have a problem with transportation.
13. Students will return to the PA program for testing and evaluation at the end of each clerkship.
14. Behavior and attitudes are important for a successful clinical year. In addition to discussions and handouts, the Guidelines for Ethical Conduct for the Physician Assistant Profession provides some guidance on expectations for professional conduct.
15. Remember that the clinical year is still a part of your educational training. Students are not expected to know everything. Don't be too hard on yourself.
16. ***Meals during the clinical clerkships are the responsibility of the student.***
17. ***Housing during the clinical clerkships is the responsibility of the student.***

SECTION 2

ENTRY INTO THE CLINICAL YEAR

A. Requirements for entry into the clinical year

1. Successful completion of all didactic year classes and assignments and successful completion of any remediation, probation, or other make-up work.
2. Possession of a current American Heart Association Basic Life Support (BLS) Card that will NOT expire during the clinical year. You may be required to take an update course if AHA standards change.
3. Successful completion of an American Heart Association Advanced Cardiac Life Support (ACLS) class or the equivalent as determined by the Physician Assistant Program, that will not expire during the clinical year.
4. An updated health clearance form from Student Health services, including current immunizations and an up to date TB clearance.
5. Completion of registration. You will not be allowed in the clinical sites until ALL registration requirements are completed. Failure to complete any of the above requirements may result in a delay of your clinical year or your dismissal from the program.
6. Satisfactory completion of a drug screen and a background check is required prior to entry into the clinical year. The background check must be performed by a West Liberty University approved agency.

B. Delayed entry into the clinical year

1. If for any reason you are unable to begin your clinical rotations on time, this may result in delaying your graduation, rescheduling or relocating your clinical clerkship, registering for one or more extra terms, and increasing your educational expenses.
2. The Program will make every effort to keep you on track with your peers. However, if you delay in beginning your clinical clerkship, we cannot guarantee that you will complete the program in time to graduate with your class.

SECTION 3

DRESS AND BEHAVIOR STANDARDS

A. Dress/Attire in Clinical Sites

1. Professional Dress: Students are expected and required to report to their clinical sites wearing appropriate clothing. Failure to follow dress codes may result in reprimand, removal from a clinical site, or other disciplinary actions.
2. Appropriate attire for clinical sites:
 - ✓ Men: Approved clinical jacket (short white jacket with long sleeves), shirt with tie, pressed trousers, socks, and comfortable, closed-toe shoes. Athletic-type shoes should only be worn with scrubs *(see scrubs section that follows).
 - ✓ Women: Approved clinical jacket (short white jacket with long sleeves), dress or blouse with skirt or slacks, hose or socks, and comfortable, closed-toe shoes. Skirts or dresses should be knee-length or longer. Athletic shoes should only be worn with scrubs (see scrubs section that follows).
 - ✓ No logos or patches except for West Liberty University's logo.
3. Earrings: Females: One pair of studs. Men: None.
4. Finger rings: One low-profile ring per hand.
5. Necklaces: Limited to one. It must be concealed.
6. Hair: Must be neat and clean. Hair must be pulled into a ponytail, braided, or pinned up if shoulder length or longer. Wear an approved head cover while in the operating room or when doing procedures that require aseptic measures. Rollers, shower caps, or other such items are not to be worn in class or at clinical sites. Head coverings required for religious reasons must not compromise aseptic measures or present a safety hazard.
7. Beards/Mustaches: Must be neat, clean and trimmed. Cover them completely while in the operating room or during procedures that require aseptic measures.
8. Fingernails: Must be clean and trimmed. Artificial nails cannot be worn during your clinical clerkships.
9. Tattoos: Must be concealed.
10. Shoes: No open toes, sandals, or clogs. For safety reasons, wear only closed toe shoes. Bare feet are not allowed.
11. Clothes: As per the *Student Handbook*, attire must be neat, clean and professional. No shorts, Cargo pants, t-shirts, tank or halter-tops. **PLEASE OBSERVE THESE RULES EVEN IF YOU MAY CHANGE TO SCRUBS AT THE CLINICAL SITE.** These rules also apply for any academic activity in the PA program. You must wear green scrubs or professional attire.
12. Unless you are in a rotation that allows you to wear scrubs, you are to appear neat, clean, conservative, professional clothing. This includes ties for men, and hose or stockings for women. *Please review the Student Handbook for details.*

***Scrubs:** Do not wear them outside the facilities. You may wear your own set of scrubs if you are at a clinical site that allows their use but does not provide them. However, do not wear scrubs with a logo other than West Liberty University. Wear **only scrubs authorized by the program**. Do not wear scrubs that may create a problem identifying you or your assigned service

***Jackets:** Wear the short, white consultation jacket with long sleeves and WLU logo. Keep it clean, pressed, and free of blood and other body fluids. **PA Program Name Tag, and WLU ID Badge unless instructed otherwise at the clinical sites. DO NOT** wear jackets, tags, or Logos other than those authorized by the program.

B. Family and Personal Needs

1. Please do not bring children, pets, or other dependents to class or to clinical sites. If an emergency arises that requires your immediate attention or presence to attend to the needs of a dependent, please contact the Clinical Coordinator and the preceptor as soon as possible.
2. If you require medications that are scheduled daily (other than for a brief illness), or if you experience seizures or loss of consciousness, you **MUST** do the following prior to beginning clinical rotations:
 - ✓ Notify the office of the Clinical Coordinator and/or Program Director, and make a specific request for accommodation.
 - ✓ Obtain a Medic Alert or similar identification that will allow people to assist you in the event that you become incapacitated while in a clinical site.
3. Notify the Preceptor and the Clinical Coordinator if you take regularly scheduled medications during the hours you are present at a clinical site. If you must carry medications or must take medications (such as insulin or bronchodilators) while in the facility, notify the Preceptor and Clinical Coordinator. The Preceptor can facilitate your needs regarding your medication schedule.

C. Impairment Issues

1. Appearing at a clinical site while intoxicated or under the influence of a substance will result in removal from that site and may result in dismissal from the program.
2. If you have a medical condition that requires you to take a prescription medication that may result in impaired functioning, please contact the Physician Assistant office. We will instruct you how to proceed.

D. Behavior Standards

1. Clinical facilities may have additional orientations, background checks, drug testing, immunizations requirements, dress codes, parking restrictions, identification badges, and other policies and standards that you may be required to observe and/or pay for while on their premises.
2. Development of professional attitudes and professional demeanor while you are a student on clinical clerkships are just as important as the development of theoretical knowledge, technical skills, and test-taking skills. Professional attitudes and demeanor are also scrutinized and evaluated during the clinical rotations. Satisfactory professional attitudes and demeanor are more

than a daily physical presence at a clinical site and perfunctory completion of assigned reading, tasks or patient care duties.

3. Satisfactory development of professional attitudes and demeanor while at a clinical site may be demonstrated by, but not limited to the following traits:

- ✓ Willingness to work as a team member, including helping other team members to complete their assigned tasks or duties.
- ✓ Willingness to change work habits or attitudes.
- ✓ Willingness to learn new information, new skills, or to try new methods
- ✓ Displaying enthusiasm for responsibilities, assignments and your role as a learner.
- ✓ Demonstrating enthusiasm for your role as a Physician Assistant and team member.
- ✓ Conferring with the team leader or preceptor prior to leaving the clinical site or prior to performing procedures on patients.
- ✓ Asking and thanking patients for permission to participate in their care.
- ✓ Including patient personal, spiritual and psychosocial needs in your care plans and discussions.
- ✓ Respectful acceptance of constructive recommendations or counseling.
- ✓ Respectful treatment of clinical site staff, clinicians, patients, and visitors.
- ✓ Accepting responsibility for your errors or omissions, even if unintentional.
- ✓ Asking the preceptor or mentor thoughtful questions regarding your progress, strengths and weaknesses.

4. Unsatisfactory professional attitudes and demeanor can be inferred by the preceptor if the following or similar types of behavior are exhibited:

- ✓ Failure to change unsatisfactory work habits, negative attitudes, or inappropriate attendance patterns after counseling.
- ✓ Failure to accept responsibility for errors or incomplete assignments.
- ✓ Displaying or verbalizing negative attitudes towards constructive recommendations or counseling.
- ✓ Rude or uncaring behavior towards team members, clinicians, non-clinical staff, patients, or visitors.
- ✓ Blaming others for your errors, failures, negative attitudes, or failure to gain knowledge or skills during a clinical clerkship.
- ✓ Failure or refusing to participate as a team member.
- ✓ Failure to communicate with your team leader or preceptor prior to leaving a clinical site or prior to performing a procedure on a patient.
- ✓ Leaving the team or clinical site without permission or under false pretenses (i.e., you said that you have a required class to attend, but really do not).
- ✓ Communicating false or misleading information regarding your clinical activities to the preceptor or Clinical Coordinator.

5. Unsatisfactory professional attitude and demeanor may result in disciplinary action, up to and including dismissal from the program.

6. **You are not to substitute for paid clinicians, clerical staff, or other workers at the clinical sites.** If you are not sure if assigned duties are essential to your clinical learning experience, contact the Clinical Coordinator as soon as possible.

SECTION 4

ATTENDANCE STANDARDS

A. Clinical Rotation Attendance and Scheduling

1. You are expected to be present as scheduled for clinical rotations as if at work. Patients and clinicians are expecting you to be there. If your preceptor is scheduled to be at the clinical site on a holiday, you are expected to be there as well. Attendance is mandatory for all assigned clinical experiences. Failure to fulfill this requirement may result in remediation, disciplinary action, delay in progression, failure of a clerkship, dismissal from the program or other consequences.
2. You must inform the clinical site if you will be more than 15 minutes late.
3. You are expected to contact both the clinical site AND the PA program Clinical Coordinator if you will be absent. In case of an emergency, contact the clinical site first. See your clinical rotation information packet for your contact person.
4. Contact the Clinical Coordinator well in advance before scheduling personal/family events (weddings, reunions, presentations at meetings, PANCE prep courses etc.) from which you request time away from clinical clerkships. A request for time away from clinical clerkships is not guaranteed to be granted and may be denied if deemed inappropriate. You may be required to make up missed clinical time.
5. Unexcused absences can/will require two days to be made up for every day absent from the clinical site.
6. Clinical sites often have set schedules that are not easily altered. You must follow the rotation schedule unless the Clinical Coordinator approves other arrangements in writing. Do not contact your preceptor to change your schedule. It is imperative that you **ONLY** contact the Clinical Coordinator with this request.
7. Some clinical rotations have on-call schedules. Do not switch on-call days with someone else unless cleared by your team leader, preceptor, and Clinical Coordinator.
8. The Physician Assistant Program will provide clinical rotations for each student and will give advance notice of clinical rotation schedule changes. However, there may be unexpected changes with clinical sites that lead to changes in assigned clinical rotations without advance notice.
9. Leaving your clinical site prior to completing your shift will constitute an unexcused absence.

B. Illness

1. **Notify BOTH the Preceptor (OR DESIGNATED CONTACT PERSON) and the PA Program Clinical Coordinator if you are ill and cannot report to a clinical site. You must text/page the Clinical Coordinator at 8:00 a.m. (including weekends and holidays) on the date of your absence due to illness.**
2. Do not report to a clinical site if you are ill or symptomatic and unable to function. This will reduce the potential for spreading an illness. Contact the Clinical Coordinator.

3. If you are absent for more than 1 day from any clinical clerkship due to illness, you must submit written clearance from your health care provider to the Clinical Coordinator prior to resuming clinical duties.
4. Students returning to a clinical clerkship after a prolonged (longer than 14 days) absence due to illness will need a health clearance from Student Health or your healthcare provider. Please contact the PA Program when you are ready to return to the clinical rotations.
5. Students returning to clinical rotations after an illness or injury and limited by a healthcare provider from full participation (no heavy lifting, wear a cast, etc.) must contact the PA Program for further instructions.
6. Missed clinical time due to illness will require make-up as determined by Clinical Coordinator

C. Family or Personal Emergencies

1. Do not call in sick to attend to routine family or personal needs. Make prior arrangements well in advance with the Clinical Coordinator
2. If an emergency arises contact the department Clinical Coordinator and Preceptor as soon as possible. Text the Clinical Coordinator as soon as you can safely do so. Inform the Clinical Coordinator if you were unable to contact the Preceptor.
3. Submit in writing, reasons for absence from a clinical rotation. Be prepared to provide documentation (obituaries, notes from the health care provider, etc.) of your reason for absence.

D. Frequent or chronic attendance problems

1. We will monitor absence and tardiness. Patterns that suggest avoidance of on-call responsibilities, holiday or weekend duties, or frequent episodes of absence/tardiness will require a full written explanation and may result in remediation or disciplinary action.
2. Inform the Clinical Coordinator *in writing* if you have medical, family, or personal problems that require frequent or lengthy absences from the clinical sites.
3. You may request a leave of absence for serious medical, family, or personal problems.
4. Frequent or lengthy absence from clinical rotations may result in repeating a clinical rotation, delayed graduation, or dismissal from the program.

E. Abandonment of a Clinical Site

1. Failure to appear and/or failure to report your absence from a clinical site may be considered an abandonment of your assigned rotation. This is a serious offense and will result in a failed clerkship and/or other disciplinary action up to dismissal from the program.
2. If you have a personal, medical, or family emergency, contact the Clinical Coordinator and the clinical site as soon as possible to preserve your status in the program.

E. Clinical site etiquette

1. If you are issued a pager by the clinical site or by the department, please follow these instructions:
 - ✓ Leave the pager on at all times that you are in the clinical site.
 - ✓ Leave the pager on until 6:00 PM on days that you are not on call, even if you are excused from the site. We may need to contact you.
 - ✓ Please return pagers provided by the clinical site to the appropriate person at the clinical site. Do not pass it on to the next student.
 - ✓ Please bring West Liberty University pagers back to the Department at the end of each clinical rotation.
 - ✓ Please report any pager malfunctions or problems as soon as possible to the appropriate person. Contact the Clinical Coordinator for West Liberty University pagers.
 - ✓ **REMEMBER TO CHECK THE BATTERIES.**
 - ✓ Please ask for help if you do not know how the pager works.
2. Please do not go to a clinical site for social or other reasons unless the staff invites you, you are assigned there, or you have specific business such as obtaining a letter of reference from a preceptor or a job interview.
3. Please return any keys issued by a clinical site directly to the appropriate person at that site at the end of a rotation. Do not pass them along to the next student.
4. Please be aware that if a clinical site provides housing or a sleep room, facility personnel may enter these accommodations with little or no warning for inventory, housekeeping, maintenance, or security purposes.

F. Jury Duty, Military Duty, and other Obligations

1. Please contact the Clinical Coordinator as soon as you are notified regarding your jury duty summons or notice to report for duty.
2. You may be asked to reschedule your Jury Duty for a scheduled break, holiday, or vacation.
3. If you are a member of a Military, Police, Fire, or similar reserve or auxiliary service, please again notify us prior to the start of the clinical year.
4. If you are called on an emergency basis for military, police, EMS, or fire department duty as a reservist, please have a family member or your unit contact us as soon as possible.
5. If you are a member of the Red Cross, or other Volunteer agency, please inform us prior to the start of the clinical year. Service as a volunteer will require prior approval from the program unless it occurs during a scheduled holiday, vacation, or break.

SECTION 5

GRADING POLICIES AND ACADEMIC STANDARDS

A. Grading

1. The Clinical clerkships are graded satisfactory/unsatisfactory (S/U).
 - ✓ The final grade is based upon the results of end of rotation written examinations, the clinical evaluations, and written projects or assignments.
 - ✓ Passing and competency are interpreted as 60% of the points possible on end of clerkship written examinations, and a “satisfactory” in clinical evaluation.
 - ✓ An “unsatisfactory” in the clinical evaluation may result in suspension from clinical clerkship, remediation, repeating a clerkship, delayed graduation, course failure or dismissal from the program.
 - ✓ Elective rotations are subject to the same grading criteria as the required rotations. All clinical rotations, required or elective, must be passed
 - ✓ A grade of **SATISFACTORY** for a clinical clerkship is passing.

B. Grade Determination

1. The final grade for a clinical clerkship and the decision to pass or fail a student are academic issues and are the purview of the Physician Assistant Program faculty.
2. Each clinical rotation will have specific written projects or papers that must be submitted to the Clinical Coordinator at the end of the clerkship. These projects include, but are not limited to procedure cards, patient logs, case studies, SOAP or progress notes, admission and discharge summaries or notes, and other documentation of your patient care activities.
3. Instructions for written projects or papers are included in Appendix B, C & D of this handbook. Read and follow the instructions prior to submitting written assignment:
 - ***Failure to submit written assignments in a timely manner or failure to follow the instructions for written assignments may result in an UNSATISFACTORY final grade for that clerkship. Contact the Clinical Coordinator if you have any questions regarding written assignments.***
4. Attendance and participation in rounds and lectures may be required at the clinical site and these may be used by the preceptor to determine your mid or end-of-clerkship evaluation.
5. Clinical faculty may use written tests or projects to help them determine your end of rotation clinical evaluation. These are separate from written program tests or assignments.
6. Due to the dynamic nature of the clinical sites, there are currently no predetermined numerical values for types or quantities of patients you must see, or types and numbers of procedures that you must perform during individual rotations. However, the data you submit will be evaluated for trends and will assist in determining performance standards.
7. “Unsatisfactory” mid-rotation evaluations may result in removal from a clinical site, restarting a rotation at another site if available, remediation, delayed graduation, course failure, and possible dismissal from the program.

8. Abandoning a clinical site by unexcused or unexplained absences is justifiable cause for failure, suspension from clinical rotations, repeating a rotation, or possible dismissal from the program.

C. Remediation

1. The goal of remediation is to correct deficiencies in academic and clinical performance and to attain an acceptable level of competency.
2. The goal of the mid-rotation evaluation is to identify deficiencies early in a rotation when remediation will be most beneficial.
3. Remediation may include, but is not limited to: written projects, retests, supervised patient interactions, skills workshops, repeating or restarting a clinical rotation and possible lengthening the clinical year.
4. The WLU PA Program is a competency based program. Students are required to complete each component of this program successfully before progressing on to the next phase. The minimum passing score is 60% on all written exams and a grade of “satisfactory” on professionalism, all skills and clinical clerkships.
5. Students who are identified through self-referral or through faculty observation as being at risk for failure will be referred for remediation. Remediation may include tutoring, self-study, completion of specific tasks, or referral to the Learning and Student Development Center for counseling.
6. Any student not achieving the minimum passing grade will receive a failing grade. The student will be notified and will be required to take a reexamination within two weeks. Should the student fail a retest, this would trigger a comprehensive review of his/her academic record resulting in administrative action which may include probation, deceleration or dismissal from the program.
7. Any student who fails a repeated course or clerkship will be dismissed from the program.
8. Failure to satisfactorily progress professionally, although a student may have passing grades in all courses, and when viewed as a whole, the record shows a pattern of concern, may result in a student being placed on probation, and/or completing a remediation plan, or dismissal from the program. Failure to successfully complete the terms of remediation will result in dismissal from the program.

D. Program Progression in the Clinical Phase

1. At the end of each clerkship, the Physician Assistant faculty review each student’s progress.
2. Each student’s attendance, written assignments, test scores, and preceptor evaluations are reviewed prior to grade submission and approval for progression to the next term.
3. Each element reviewed must demonstrate that the student is displaying positive progress in his or her clinical abilities and professional demeanor.
4. Failure to demonstrate positive progress in any of the elements reviewed may result in remediation, disciplinary action, delay in progression, failure of a clerkship, dismissal from the program or other consequences.

E. Academic Standards and Ethical Clinical Behavior

1. The standards of academic integrity for the didactic year apply to clinical year written projects and examinations.

2. Falsifying charting, forging signatures, obtaining fraudulent prescriptions, sexual liaisons with patients and staff, unauthorized examinations or procedures, and theft of materials from clinical sites are not only unethical, but may also result in criminal prosecution.
3. A student accused of the stated or similar activities may/will be removed from the relevant clinical site and an investigation will be initiated. Suspension from clinical rotations or placement in an alternative site will be determined on a case-by-case basis. Unethical behaviors such as those but, not limited to those stated above may result in remediation, disciplinary action, delay in progression, failure of a clerkship, dismissal from the program or other consequences.

F. Patient Rights, Communications, Confidentiality, and Privacy

1. Please review the attached Patient Rights and your role as a student Physician Assistant in safeguarding those rights (Appendix A).
2. Protect the privacy and confidentiality of patients and medical records at each clinical site.
4. Do not discuss patient cases, identities or situations in public locations where family members, patients, friends, or others can overhear.
5. Do not leave medical records where patients, family, or others may have unsupervised or unauthorized access to them.
6. Do not joke about, denigrate, or criticize other clinicians, clinical facilities, patients, or visitors. These are both liability and privacy issues.
7. Be clear, precise, and accurate when speaking with patients or family. If a translator is needed, determine if the clinical site provides this service or try to locate a family member or another person who is fluent in the patient's language.
8. Avoid discussing your findings, plans, or tentative diagnosis with the patient or family until you have discussed the case with your preceptor or mentor. If asked, inform the patient that you will return to discuss the findings and care plan after consulting with the preceptor, or the preceptor will discuss the findings with the patient personally.
 - ***Failure to observe these guidelines may be interpreted as unprofessional conduct and may lead to removal from a clinical site, failure of a rotation, or dismissal from the program. State and Federal law may also apply in serious breaches of patient confidentiality or privacy.***

SECTION 6

MISCELLANEOUS STANDARDS, POLICIES AND ISSUES

A. Safety and Security Issues

1. If you have been threatened, accosted, propositioned, intimidated or have encountered other unacceptable behavior at a clinical site, contact the Clinical Coordinator as soon as possible. Preferably, do this before leaving the site.
2. If you are in danger or are in a threatening situation, leave the premises if possible and contact the facility security or the police immediately. Contact the Clinical Coordinator after you are out of danger. You may be required to file an incident report or police report.
3. If you are threatened, attacked, injured, or accosted by a patient or his/her family members or guests, contact your preceptor or mentor immediately. Report this even if the patient was ill and

unaware of his/her actions. You may also be required to file an incident report, contact the clinical site security, or to contact the police.

4. ***The University does not tolerate Sexual Harassment. Please review the West Liberty University sexual harassment policy at the following web address: <http://aws.westliberty.edu/bog/files/2010/01/Policy-32-Sexual-Harassment-and-Other-Unlawful-Discrimination.pdf>. Avoid behaviors that may be interpreted as sexual harassment and follow the guidelines for reporting sexual harassment.***

B. Liability and Risk Management Issues

1. West Liberty University covers you for medical liability related to your activities as a student while you are on assigned clinical rotations at clinical sites affiliated with the University.
2. Always consult with your mentor or preceptor prior to performing any procedures except life-saving first-aid or CPR in emergencies.
3. Examine only patients assigned to you by the mentor or preceptor.
4. Report any complaints or problems related to your patients or your team's patients immediately to your preceptor or mentor.
5. Always identify yourself as a **PHYSICIAN ASSISTANT STUDENT**. Please contact the Clinical Coordinator if there are any problems related to this at a clinical site.
6. In the event that you choose to act as a **volunteer** at a healthcare facility during the clinical year, you must report to the volunteer services department at the facility. **While acting as a volunteer, you are NOT to identify yourself in any way as a PHYSICIAN ASSISTANT STUDENT or a WEST LIBERTY STUDENT. You cannot wear any garment displaying your WLU PA student patch or badge.**

C. HIPAA Training and Information

1. West Liberty University will provide basic Health Information Portability and Accountability Act (HIPAA) training for the clinical year.
2. The clinical sites may require you to attend in-services or complete other instructional material related to HIPAA.

D. Health-Related Issues and Health Coverage

1. You must be covered by a Health Plan if you are a full-time student and when you are off campus at a clinical affiliate. Students are responsible for procuring their own health insurance from whichever source they choose.
2. Each student must obtain a Tuberculosis Skin Test (Mantoux, PPD) or other documentation of TB clearance from Student Health prior to starting clinical rotations.
3. Each student must have confirmed current immune status or immunizations prior to starting clinical rotations.
4. **On campus NEEDLE STICK** or similar injuries and exposure to communicable diseases: Report to your preceptor or mentor immediately and the Clinical Coordinator as soon as possible. You will be sent to the Urgent Care/Emergency Department for evaluation, treatment, and follow-up as indicated.

5. **Off campus NEEDLE STICK** or similar injuries and exposure to communicable diseases: Report to your preceptor or mentor immediately and the Clinical Coordinator as soon as possible. Immediate care will be provided by the facility where the injury occurred following their policies, or you will be referred to an appropriate facility if services are not available there. Costs of services must be covered by the student's own insurance.

E. Housing, Meals, and Transportation

1. Each student is responsible for his/her lodging during clinical clerkships.
2. If the clinical facility provides housing or sleeping accommodations at no cost, the facility personnel may enter these accommodations with little or no advance warning for inventory, security, or maintenance related issues.
3. Each student is responsible for his/her meals at a clinical rotation, on or off-campus. Some clinical sites may provide meals or meal tickets when you are on overnight call. However, at most locations you will be expected to provide or purchase your own meals.
4. Each student is responsible for his/her transportation to and from each clinical site, regardless of location.
5. We cannot guarantee that you will have clinical rotations at locations that you have requested or that are conveniently located.

F. Computer and Communications Policies

1. E-mail policy: It is a University policy that all e-mail between the PA program and WLU students must utilize the e-mail address assigned to each student at registration.
2. The PA program is committed to utilizing technology to improve communication and enhance your educational experience. We will use computer-based resources on an increasing basis for both didactic and clinical years.
3. **NOTE: Students are responsible for all information communicated to them from the department via e-mail.** WLU e-mail must be checked frequently (at a minimum, daily) during the clinical year.
4. Computer Use: We require that you to have access to a computer to access your WLU student e-mail account. This includes the clinical year.
 - Clinical year written assignments such as case histories and presentations are to be typed, using MS Word with standard fonts (10-12) and typefaces (Times New Roman, Verdana, Etc.). NO script, cursive, or "personalized" typefaces please.
 - Written papers may be transmitted to the Clinical Coordinator as e-mail attachments using MS Word. Please DO NOT use Word Perfect, html, or plain text for attached documents or written assignments. You will be asked to resubmit the document if it is not attached and formatted in MS Word.
5. **Standard Case Presentation Template**: Please refer to Appendix B for the format to follow for your written case presentations.

G. Miscellaneous Policies

1. Letters of Recommendation:
 - ✓ Please contact the Program Director if you need a letter of reference for a prospective employer, a post-graduate residency, a state licensing board, or for credentialing purposes.
 - ✓ It is your responsibility to provide any forms that the department must complete for you, information regarding where any forms are to be sent, and any other information related to your request for a letter of recommendation.
 - ✓ The department will issue a single letter of recommendation that encompasses your didactic and clinical performance
2. State License, Interim Permit, and NCCPA Registration:
 - ✓ The published program completion date for the class of 2015 is June 23, 2017.
 - ✓ The PA program is unable to provide documentation attesting to the successful completion of the program until all classes and all clinical clerkships are successfully completed, all grades are entered and the graduation checklist is completed.
 - ✓ The normal turnaround time for release of documents related to state licensing is two weeks **AFTER SUBMISSION OF GRADES.**
 - ✓ The Program will provide documentation to the NCCPA regarding eligibility for the PANCE for the earliest possible examination date that occurs **AFTER THE OFFICIAL PUBLISHED PROGRAM COMPLETION DATE, approximately 7 days.**
 - ✓ If you do not complete your coursework or clinical rotations as scheduled, this may affect your eligibility for the PANCE, the date for taking the PANCE, and the process of your state license documents.
 - ✓ You will not be able to work as a Physician Assistant until you have been granted an Interim Permit or a license by your state.
3. Clinical site information concerning fellow students:
 - ✓ Please pass along pearls of wisdom or information that will help your classmates to succeed during the clinical year.
 - ✓ Please contact the Clinical Coordinator if you have material from a clinical site that you think should be distributed to your classmates. We will review the material for possible inclusion in the syllabus or as supplemental reading.
4. New clinical sites:
 - ✓ We are interested in adding clinical sites or new preceptors who would like to work with us on a regular basis, even for a few times per year.
 - ✓ If you have a Physician or Physician Assistant contact, please inform the Clinical Coordinator

H. Final thoughts

The clinical year is challenging, enjoyable, hard work, and will appear to pass rapidly. Take advantage of this time to develop good learning and work habits. You will develop your own style eventually, but learn as much as you can from others.

This section of the handbook is intended to clarify issues that may arise during the clinical phase of the program and to provide guidelines for grading and behavior. However, it is beyond the scope of this handbook to cover all possible issues that may arise in the clinical year.

Our goal is to help you be a successful Physician Assistant Student and to become a graduate of our program. **Please contact your assigned program advisor or the Clinical Coordinator if you have any concerns regarding your progress in the program, or if you feel overwhelmed.**

Appendices

Appendix A

PATIENT RIGHTS:

In accordance with Federal and State laws, all patients have certain rights that safeguard their personal dignity and respect their cultural, psychosocial, and spiritual values. Their rights include, but are not limited to:

- Considerate and respectful care
- The name of the medical provider who will care for them
- Information about their illness, course of treatment, and recovery
- Informed consent or refusal of treatment or procedure
- Participation in healthcare decisions, including information and assistance about their rights to formulate advance directives. The advance directive can allow patients to name a surrogate decision-maker and to provide written instructions about their own healthcare wishes.
- An explanation of their bill regardless of type of payment
- Discharge instructions and continuing healthcare requirements
- Privacy and confidentiality of their health information – written, verbal, and computerized

In addition to the rights listed above, the Association for the Care of Children's Health (ACCH) developed a Bill of Rights for children that is not limited to:

- Care that supports the child and his or her family
- Care that respects their need to grow, play, and learn
- Information that they can understand
- Opportunity to make choices

What is my role with Patient Advocacy?

Each of us has a responsibility to ensure that the rights of our patients and their families are respected. This makes each one of us a patient advocate. If a patient or family member has a conflict about the patient's care, you should be knowledgeable about the process for making a complaint for your area. This process may include allowing the patient to:

- Discuss the complaint with his or her attending doctor
- Speak to the person in charge of the particular patient care area
- Speak to the department head/manager of the particular patient care area
- Contact a patient representative if available for the particular patient care area

If you should have any questions about your complaint process, please take time to speak with your department head, manager, or supervisor so you may be an effective patient advocate.

Physician Assistant Students shall inform the preceptor, mentor, or their assigned team leader of any complaints or specific requests made by the patient (or their family) regarding their care. Each facility will have a process and guidelines to follow regarding these issues. Since the Physician Assistant Program is not providing healthcare, the facility or the people that provide healthcare services to the patient must deal with these issues.

Appendix B

WEST LIBERTY UNIVERSITY Physician Assistant Studies Program

Guidelines for Written Case Presentations for Clinical Clerkships

PURPOSE:

The Written Case Presentations are intended to help you develop three important Physician Assistant Skills:

1. Identification of pertinent information
 - Patients may have an extensive medical history and many abnormal findings.
 - Patients may have little previous medical history, have few or vague symptoms, and few or vague physical findings.
 - Which information should you focus on?
2. Writing concise History and Physical Examinations and similar notes (Admit Note, Discharge Summary)
 - What information should you record, and in what form?
 - How should the information be organized, where does it go?
3. Pattern recognition of diseases and conditions
 - What conclusion can be drawn from this information?
 - What conditions could present this way?
 - Are there other patient problems that should be addressed?

These written case presentations should be chosen carefully. If possible, choose a patient with a problem that you are interested in, need to learn about, or a situation that posed a diagnostic or treatment dilemma.

The ultimate goal is to help you gain clinical skills that will help you in the future as well as the present.

Structure:

This is a concise and mainly prose presentation. It should be written in a manner similar to the case presentations found in the peer reviewed medical journals. Some information may be presented in outline or table formats.

Information to include:

Demographic information: Pseudonym, age, race, gender

- No protected health information (PHI) as per HIPAA

Presentation: CC, HPI

History: Pertinent PMH, surgeries, Meds, Allergies, relevant social and family history

- Always include the gynecologic history for women if available
- Always include a brief birth and developmental history in persons less than 18 years if available
- The younger the child, the birth and developmental history will be more important.

Review of systems: Cover as many systems as possible, but keep focused on symptoms and history that may have a bearing on the chief complaint and HPI. List pertinent negatives and positives:

Example:

Review of systems:

General: Denies sweats, chills, fevers, weight loss or weight gain

Cardiovascular: Denies chest pain, does have intermittent claudication of the left leg with walking 1 block, relieved by rest. Denies rest pain, numbness, or weakness of the extremity

Respiratory: See HPI

Physical Examination:

- Vital Signs, height, weight
- Include the Head Circumference in children from birth to 36 months if available.
- Find the age specific percentile for height (length), weight, and head circumference for children from birth to 36 months.
- Include the age specific percentile for height and weight for children 3 -18 years only if it is abnormal.
- Physician findings of systems related to the presentation
- If something was not examined state so and why (“not indicated”).
- Do not write, “deferred,” unless you will go and do that examination later.
- Frequently the breast, rectal, and GU examinations are not done. If such an examination was not done for a reason, state why (not indicated, patient refused or declined, etc.).
- If someone else did part of the H&P and you are using those notes, transcribe what they examined, but do not make any comments about what was not examined. Include an explanatory note at the end of the H&P stating the source of the transcribed information.
 - Exception: If the breast, rectal, G-U, or pelvic was done by another provider (in ER, Ob-Gyn), state the findings of that exam and the source.
 - E.g., Pelvic: Performed in Ob-gyn by Dr. Y, no abnormalities found (or whatever the findings were).

Writing the data: This should be listed by system

Vital Sign: P 102, R 20, T 100.6 F (Tympanic), B/P 100/70, Ht. 68”, Wt. 164 lbs.

General: Well nourished, well-developed white male, no apparent distress (Chart will show this:

WNWDWM, NAD-do not use in write up!)

HEENT: Head-Normocephalic, atraumatic, male pattern alopecia; Eyes-PERRLA, EOMI (everyone does this, use it), no sclera icterus, conjunctiva clear; Ears-TM’s gray, intact, normal landmarks, no discharge;

Nose- patient, no discharge; Mouth-multiple crowns and fillings, no lesions, tongue midline, mucosa moist; Throat-small tonsils, no exudates, no lesions, voice clear

Neck: Trachea midline, no adenopathy, full range of motion

Chest: Continue using this format, use abbreviations sparingly!

Diagnostic Studies: Any laboratory, x-ray, or other diagnostic data gathered from the patient work-up. You may use tables for these, or list in outline form.

EKG: Normal sinus rhythm, no S-T segment abnormalities, no hypertrophy

CXR: Right upper lobe mass, normal cardiac silhouette, no infiltrates or pulmonary edema

LABS: CBC: WBC 12.1, Hb 12.6, HCT 37.1%, Platelets: 120K, etc.

Assessment/Impression: List the most likely diagnosis (or diagnoses if pertinent) and a brief differential diagnosis list (3 most likely alternate diagnoses, no more than 5 or 6) if appropriate. If a person comes in with a gunshot wound, you don't have a lot of choices (except perhaps intentional v accidental v suicide or suicide attempt), unless you are not sure what organs or systems were affected.

If a patient has multiple problems, list the problem that brought the patient in first along with the brief differential diagnosis list (2 or 3 most likely alternate diagnoses). Then list the other current active problems, but without differential diagnosis lists.

E.g.: Impression:

Altered level of consciousness
Differential Diagnosis: Sepsis
Metabolic Encephalopathy
Hyperosmolar Non-Ketotic Coma
Meningitis
Myxedema Coma

Other Diagnoses:

Type II Diabetes Mellitus
Hypothyroidism

Note: Always be sure that your Impression and Differential Diagnosis list fit the situation. You would not want testicular torsion on the differential list for a female with abdominal pain, or PID on a male.

Plan: This should include treatment (if decided upon), further diagnostic studies, follow-up, and appropriate patient education.

E.g. For the Patient above with Altered Level of Consciousness your plan may look like this:

Plan:

Stat blood glucose (finger stick)
ABG
 CBC with differential
Blood cultures
Electrolyte panel
 Chest x-ray
Urinalysis and culture
Urine toxicology screen
Spinal tap for Gram stain, cell count, culture, viral PCR's glucose, and protein
O2 at 4 lpm via nasal cannula
Cardiac monitor
Continuous SPO2 monitor
Admit to telemetry unit, Internal Medicine service
Education: Discuss current status and plans with family

Final Diagnosis: Sometimes you may have the luxury of following a patient for a while and observe the evolution of his/her care. Diagnosis studies ordered earlier, or an exploratory surgery may have shown the cause of the problem. You should make a separate entry for the final diagnosis if you want to include this in your case presentation. Follow this with a brief statement describing how the treatment changed (if it did) based upon the new evidence.

E.g.: Final diagnosis: Foreign body aspiration

The patient was taken to the operating room for removal of the foreign body. He was subsequently admitted to the pediatric unit for intravenous ampicillin, gentamicin, and metronidazole, and respiratory care until the right lower lobe pneumonia cleared. He was then discharged to home on Augmentin 400 mg p.o. BID for 10 days. He was scheduled for a follow up visit in one week with Dr. X.

Case Discussion: A brief discussion of the diagnosis or most likely diagnosis, describing the usual presentation, findings, etiology, pathophysiology, natural history (what happens if left untreated), keys to diagnosis, essentials of treatment, and prognosis. Try to condense this into two or three paragraphs.

References: Two references for the discussion on the primary diagnosis. One should be from a standard text; the other should be from a recent journal article.

- Do not use journals for non-medical readers (NO WebMD).
- Use standard, peer-reviewed journals, no older than 5 years.
- Web-based journals must meet the same standards as for print journals.
- Use a standard medical or surgical text for one of the references. This means a large book like Sabiston's, Schwartz, Cecil, Harrison, Kelley, or Nelson. Texts specifically for a subspecialty should be used if available (Cardiology, Obstetrics and Gynecology, etc.). These should not be more than 6 years old.
- Use the *American Medical Association Manual of Style, 9th Edition*, or the attached Uniform Requirements for Manuscripts Submitted to Biomedical Journals for citing your references.
- For these written case presentations, you do not need to number your references in the text. List them after the case discussion.

Format:

Please use a word processor

- Use Microsoft Word if you will e-mail this paper as an attachment
- Standard fonts (10 or 12 points, no script or designer fonts)
- Black ink on white paper
- **Do not** use HTML, Rich Text, Note Pad, Excel, or Text Boxes
- **Do not** attach copied pages from the clinical sites
- **You must write this in your own words.**

Written case presentations are easier to read if you write them in a manner similar to the history and physician examinations found in the medical records, but with fewer abbreviations, and with more complete sentences. The majority of the case should be written similar to an outline, with some paragraphs. Some information can be presented using tables, such as laboratory values.

Psychiatry and behavioral medicine use a different template for their written history and physical examination, and use the Multiaxial Assessment as described in the DSM-IV TR/DSM V. Please follow that format for the written case presentation from Psychiatry/Behavioral Medicine. A sample of this write up will be provided for you prior to your Psychiatry/Behavioral Medicine rotation.

HIPAA INFORMATION: You must not have any information that can identify the patient. Use an alias, use age, not date of birth, do not name the hospital or the doctors involved, etc. Do not use dates, account or case numbers, phone numbers or addresses. Age, race, gender, and occupation are usually sufficient for these case write-ups.

References:

Bickley, L.S., Hoekelman, R.A. Bates Guide to Physical Examination and History Taking, 7th ed. Philadelphia, Lippincott, 1999.

Ballweg, R., Stolberg, S., Sullivan, E. Physician Assistant: A Guide to Clinical Practice, 2nd ed. Philadelphia, W. B. Saunders, 1999.

Appendix C

Psychiatric/Behavior Medical Case Study Template

HISTORY AND PHYSICAL:

NAME: Beth H.

DOB: 10/11/79

SEX: Female

RACE: Caucasian

PHYSICIAN: John Smith, MD

DATE: 2/21/03

CHIEF COMPLAINT: Patient is labile, agitated, disorganized, has auditory hallucinations (+AH), paranoia, and is threatening suicide (+SI).

HISTORY OF PRESENT ILLNESS: This is a 23-year-old female was transferred on a 5150 hold from Wheeling Emergency Treatment Services (ETS). Ms. H states she has had mood swings and emotional problems for months. She does not answer further questions, “Don’t get smart with me” and states, “I’m not really Beth.” The patient is a poor historian, and is difficult to obtain complete and accurate information from on admission.

PAST PSYCHIATRIC HISTORY: H/O schizophrenia and bipolar mood disorder per notes from Dr. Q at Jackson Wellness Center.

PAST MEDICAL HISTORY: Per notes, pt has reported seizures q week, migraine HA, tremors, and LMP was last month.

ALLERGIES: Penicillin causes a rash.

MEDICATIONS: Neurontin 100mg TID, Seroquel 25mg qhs, Vistaril 50mg q 8° PRN agitation; ginseng, and women’s vitamins.

SURGERIES/HOSPITALIZATIONS: None.

SUBSTANCE USE HISTORY: Uses Marijuana, denies tobacco use.

SOCIAL HISTORY: Pt is single and lives at a board and care facility.

FAMILY MEDICAL AND PSYCHIATRIC HISTORY: Mother – depression, father – schizophrenia. Strong family HX of drug and ETOH abuse and HTN.

REVIEW OF SYSTEMS: Difficult to assess, however, reports increased appetite, excessive fatigue, has memory loss, sleeping problems and reports being sexually active.

PHYSICAL EXAM:

GENERAL: Well nourished, well developed, but disheveled and somnolent female.
No acute distress

B/P: 132/88 **T:** 99.1°F **P:** 100 **R:** 18

HEENT: Head is shaved, normocephalic, and atraumatic, PERRL, EOMI, oral and nasal mucosa pink, no tonsillar erythema or exudates.

RESP: Clear to auscultation bilaterally

CARDIO: Tachy, no murmurs

GI: Soft, non-tender, + bowel sounds

GU/RECTAL: Not examined, not indicated

MUSCULOSKELETAL: 5/5 strength BUE/BLE

SKIN: Bruising and possible “bite marks” on upper L arm

NEURO: CN II – XII grossly intact, tongue midline, uvula midline

MENTAL STATUS EXAM:

Appearance: Sitting in a chair with blanket over her head

Psychomotor behavior: +PMA

Speech: Broken, short responses.

Mood: “mood swings”

Affect: Labile

Thought Process: Disorganized

Thought Content: +AH “I hear my uncle arguing with me”, + Paranoia, per notes “I feel people are out to get me”; currently denies SI/HI.

Insight/Judgment: None

Orientation: Confused, inappropriate response “seems like it is the 8th week”

Dangerousness (suicidal or homicidal): Denies SI/HI

MINI MENTAL STATUS EXAM

Orientation: 1/10

Registration: 3/3

Attention & Calculation: 0/5

Recall: 2/3

Language: 5/9

Total: 11/30

DIAGNOSTIC DATA:

142	107	5
3.6	27	0.8

Glucose 96, Ca²⁺2.3, T pro 6.8, Alb. 3.6, T bili 0.4, AlkPhos 67, AST 20, ALT 17

TSH 2.31, B₁₂21.2; UA – neg, β HCG – neg

UDS: Amphetamine -, barbiturates -, benzodiazepines -, cannabinoids -, cocaine -, opiates -, PCP-

ADMITTING DIAGNOSIS:

(Below refer to DSM IV TR. Axes may not be appropriately used with the DSM V.)

- AXIS I:** Schizophrenia, probable paranoid type
- AXIS II:** Deferred
- AXIS III:** Seizure disorder, allergic to PCN
- AXIS IV:** Moderate – chronic illness
- AXIS V:** GAF – 10

PLAN: Gather more information about patient's history, stabilize on medications.

EXPECTED OUTCOME AT DISCHARGE: Better thought process, improved mood/resolution of SI, stabilized on medications

DISCUSSION:

Schizophrenia is a diagnosis that is made based on five diagnostic criteria. The first is that the patient must have at least two of the following characteristic symptoms, each present for a major portion of time during a 1-month period: 1. delusions, 2. hallucinations, 3. disorganized speech, 4. grossly disorganized or catatonic behavior, 5. Negative symptoms such as flattened affect or alogia.

Second, there has to be social or occupational dysfunction whereby a significant portion of the time since the onset, one or more major areas of functioning (e.g., work, interpersonal relations or self-care) are markedly below the level before the onset. Third, there must be a duration of continuous signs that persists for at least 6 months and during this six-month period at least one month of characteristic symptoms as described above. Fourth, schizoaffective disorder and mood disorders with psychotic features have been ruled out of the diagnosis. Last, the symptoms seen must not be due to the direct effects of substances or a general medical condition.

With schizophrenia, the greater the number of delusions and hallucinations present, the more likely the person is to progress to a chronic psychotic condition. If a patient is diagnosed with a paranoid form of schizophrenia, it is often noted that the paranoid delusions are often the only major symptoms and they tend to remain stable over time. A possible differential diagnosis for a patient presenting with symptoms of schizophrenia, especially with a psychotic episode, includes affective disorders, a systemic medical illness, toxic drug reaction, and sleep deprivation.

The epidemiology of schizophrenia shows a prevalence in the general population of about 1% for lifetime risk. A person from a lower socioeconomic environment is eight times more likely to develop this disorder than a person in a higher socioeconomic environment. Males and females are affected in equal proportion over their entire lifespan with the age on peak onset in males being 15 – 24 years old and in females, 25 – 34 years old.

The anatomic origin of the symptoms has yet to be determined and the pathophysiology of schizophrenia is unknown at this time. Nevertheless, schizophrenia-like hallucinations and delusions can be caused by a number of conditions such as trauma, seizure disorders, and Huntington's disease. However, there is strong evidence that genetic factors are present in many schizophrenic patients. Schizophrenic parents have a 10 – 15% chance of passing the disease to their offspring. Furthermore, the coincidence of schizophrenia in monozygotic twins is roughly 60%.

There is no specific treatment for schizophrenia and the prognosis is poor. Antipsychotic medication is the major symptomatic treatment. Psychosis is initially treated with the newer, “atypical” antipsychotic drugs such as olanzapine, risperidone, quetiapine, and clozapine. These are termed “atypical” because their side effect profile includes less acute motor system side effects than the older drugs and may have less long-term risk for the development of tardive dyskinesias. The quality and severity of the psychotic symptoms will dictate how aggressive the medications will be.

REFERENCES

1. Goldman. *Cecil Textbook of Medicine (21st edition)*. Philadelphia: W.B. Saunders Company; 2000: 2053–2056.
2. Mortensen PB, Pedersen CB, Westergaard T, et al. Effects of family history and place and Season of birth on the risk of schizophrenia. *N Engl J Med.* 340(8): 603-608, 1999. Accessed on February 21, 2003 on www.mdconsult.com.

Appendix D

Power Point Presentation

General guidelines:

15-20 minute presentation

10-15 slides

Content:

CC / HPI

Physical Exam

Labs / Diagnostics

Differential Diagnosis

Treatment Plan

Rx

Patient Education / Follow-up

References

Appendix E



West Liberty University
 Physician Assistant Studies Program
Decision Point Checklist
 (To be completed by the program faculty)

Date: _____ **Student's Name:** _____

Term: _____

The Decision Point is a *Summary Review* of a student's performance for the entire term and is done at the end of each didactic term and at the end of the 3rd, 6th and 9th clinical clerkship. Criteria for successful individual course completion is listed in each syllabus. General expectations of performance and behaviors are listed in the Student Handbook and in the Clinical Handbook. **To satisfy all standards, a student must receive a "Yes" on applicable items in 1-8.** Policies concerning remediation, probation, academic review and disqualification from the program are delineated in the Student Handbook. Each student will be provided with a copy of the Student Handbook and Clinical Handbook, and will receive orientation concerning all program policies and expectations prior to matriculation. Students should consult a faculty member if there are questions. The Decision Point Checklist can be found in the program's website and in the Student Handbook.

Student demonstration of the following: <i>Note: a student who has successfully met the requirements for retakes on exams, OSCEs and Checks-off, and those who have successfully remediated, will be considered as meeting the standards of items 2-6.</i>		Yes	No	N/A
1.	Does the student have a GPA of 3.0 or higher?			
2.	Did the student receive a passing score on all written exams? (70% or "Satisfactory" as applicable).			
3.	Did the student receive a "Passing" score on oral case presentation?			
4.	Did the student complete all clinical clerkships during this period with a grade of "Satisfactory"?			
5.	Did the student obtain a "Satisfactory" on graded OSCEs and Skills Check-Offs?			
6.	Did the student successfully meet professional standards (dress, grooming, attendance, interpersonal behaviors) in didactic classes or clinical clerkships as delineated in the Student Handbook and Clinical Handbook?			
7.	Did the student successfully complete a Background Check? (No adverse item) done before starting program and in the 4 th term.			
8.	Did the student successfully pass a Drug Screen? (Negative result). Done in 1 st year and as needed.			

Student Progress Committee Recommendations:

Meets all standards Yes: []	No: []	Remediation
Promotion		Continue remediation
Place on probation		Academic review
Continue probation		Meeting with:
Remove from probation		Disqualification from program

Comments:

 Academic Coordinator's/Clinical Coordinator's Signature

 Program Director's Signature

PLEASE NOTE: The policies and procedures stated in this handbook take precedence over West Liberty University policies and procedures. The policies and practices listed in this publication are those in effect as of June 29, 2015 and are subject to change. If there are changes which are effective for the 2015-2016 and 2016-2017 academic years, insofar as possible, these will be announced by email. Every effort has been made to assure the accuracy of the information in this publication. Students are advised, however, that such information is subject to change without notice. Therefore, students should always consult with the PA Program faculty and administration for current information

(UPDATED: August 11, 2016)