
Department of Physician Assistant Studies

# PA Program Student Handbook

Academic Year 2025-2026

# INTRODUCTION

## THE PA PROGRAM STUDENT HANDBOOK

The faculty and administration of the Saint Joseph's University (SJU) Department of Physician Assistant Studies has developed this PA Student Handbook (the "Handbook") to provide information about the Physician Assistant Program (the "Program") requirements, Physician Assistant ("PA") student rights and responsibilities, PA student support, and Program-specific guidelines. Any questions about the information, policies, or procedures in this Handbook should be directed to the Program Director.

In addition to the Program-specific policies and procedures found in this Handbook, all university-wide policies and procedures apply to PA students, including but not limited to the SJU Student Handbook. This Handbook will link to university-wide policies where applicable, for ease of reference and to ensure that students have the most up-to-date information.

Additional general Program information can be found on the Program website. Additional information for each individual cohort can be found on the cohort-specific google drive, for which access will be provided during the pre-matriculation process. Additional course-level policies and procedures can be found in each individual course syllabus where applicable, which will be posted for students no later than one week before the start of each semester. We encourage every student to become familiar with, and refer to, those and other SJU publications for further information.

All of the policies in this Handbook are derived from the ARC-PA Accreditation Standards for PA Education, 5th Edition (the "ARC-PA Standards") and the new ARC-PA 6th edition. Where policies are related to specific ARC-PA Standards, they will be notated with a reference to the corresponding Standard (e.g., (A1.01)). All policies and procedures in this Handbook apply to the following individuals in the Program: all students, principal faculty, instructional faculty, the Medical Director, clinical preceptors, and the Program Director, regardless of location, throughout the curriculum, during both the Didactic and Clinical Phases (A3.01). A Clinical Education Affiliation Agreement or memorandum of understanding between SJU and a clinical site may specify that certain Program policies will be superseded by those at the clinical site (A3.01).

ARC-PA 6th Edition Alignment Statement:
The PA Program is dedicated to staying compliant with the latest accreditation standards. To support this, the student handbook will be reviewed and updated to fully align with the ARC-PA 6th Edition Standards. A detailed review of the 6th Edition will be carried out, and necessary updates will be made to reflect current expectations for student policies, procedures, and academic requirements. Information from ARC-PA needed to guide these updates is scheduled to be released in early September 2025.

SJU has the right to update and amend this Handbook at any time in its sole discretion. New policies or procedures approved after publication of this Handbook may add to or supersede those contained herein. As updated policies or procedures are available, they are effective immediately, and the students will be notified in writing at that time.

## ACCREDITATION

### Program Accreditation

The Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) is the accrediting body for Program.

At its March 2025 meeting, ARC-PS places the Saint Joseph's University Physician Assistant program on Accreditation-Probation status until its next review in March 2027.

Probation accreditation is a temporary accreditation status initially of not less than two years. However, that period may be extended by the ARC-PA for up to an additional two years if the ARC-PA finds that the program is making substantial progress toward meeting all applicable standards but requires additional time to come into full compliance. Probation accreditation status is granted, at the sole discretion of ARC-PA, when a program holding an accreditation status of Accreditation-Provisional or Accreditation-Continued does not, in the judgment of ARC-PA, meet the Standards, or when the capability of the program to provide an acceptable educational experience for its students is threatened.

Once placed on probation, a program that fails to comply with accreditation requirements in a timely manner, as specified by the ARC-PA, may be scheduled for a focused site visit and is subject to having its accreditation withdrawn.

Specific questions regarding the Program and its plans should be directed to the Program Director and/or the appropriate institutional official(s).

The program's accreditation history can be viewed on the ARC-PA website.

As part of the licensing process in most states, including Pennsylvania, both successful completion of an accredited program and passing the PANCE are required to practice medicine as a physician assistant. Specific information regarding the licensing process can be obtained by contacting the licensing authority in the state of intended practice.

### University Accreditation

Saint Joseph's University is approved and recognized by the Commonwealth of Pennsylvania Department of Education (PDE) and accredited by the Middle States Commission on Higher Education (MSCHE). The Master of Science in Physician Assistant Studies program has the status of Accreditation - Probation by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA).

# SJU PA PROGRAM - GENERAL PROGRAM INFORMATION

## MISSION STATEMENT

The mission of the Program is to educate future physician assistants with a foundation in equitable, person-centered, evidence-based care, with a focus on primary care (family medicine), interprofessional healthcare, and an exposure to underserved and diverse populations.

## PROGRAM GOALS

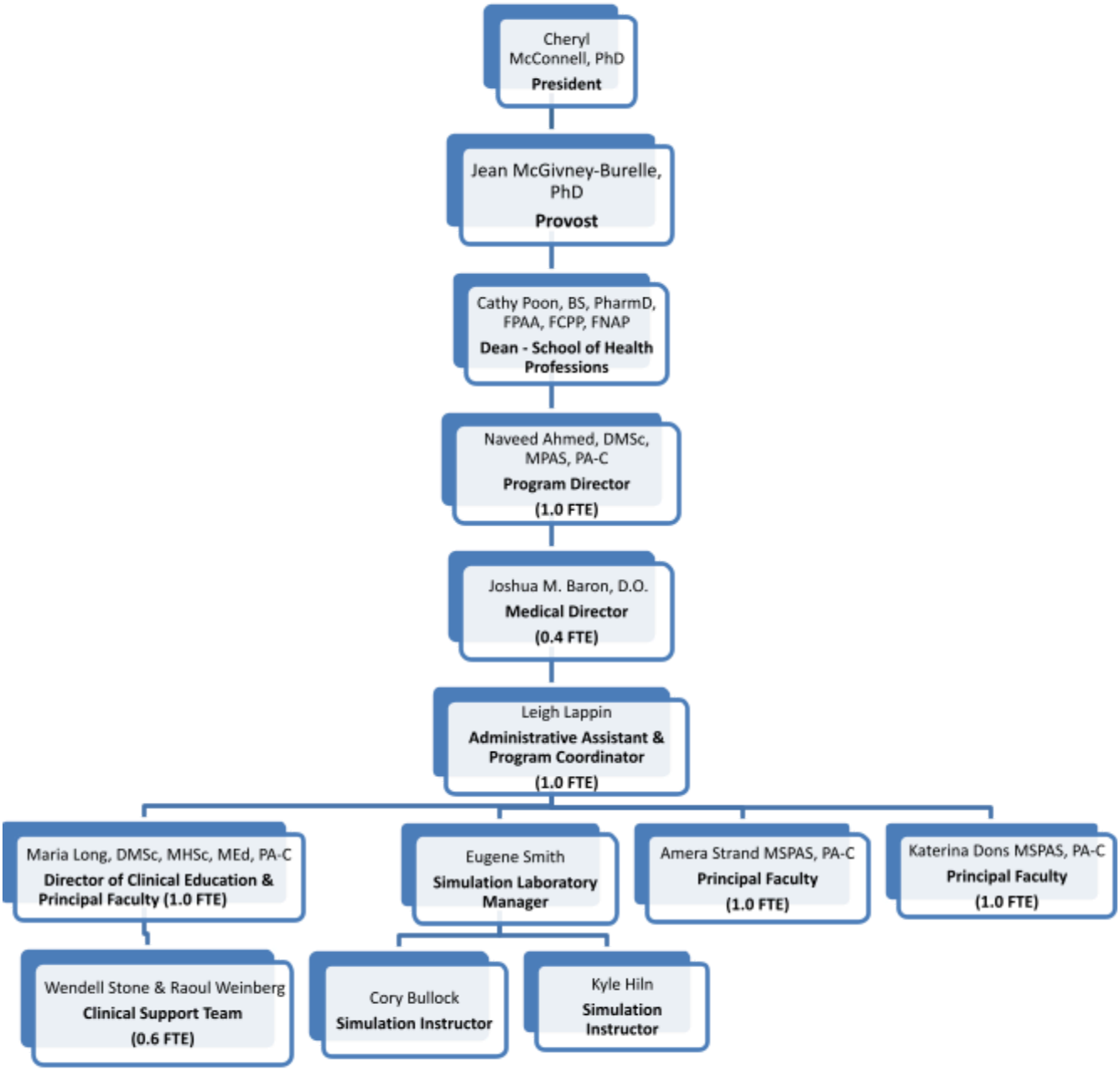
1. Develop the skills needed to practice evidence-based medicine and be effective lifelong learners.
2. Prepare students with a strong foundation in primary care to function as entry-level members of the healthcare team that provides equitable, person-centered care.
3. Engage students in interprofessional medical education that will enable them to adapt to the changing healthcare environment, work with a healthcare team, and understand the various roles in healthcare.
4. Facilitate and cultivate the development of professional and ethical attitudes and behaviors essential to the role of a PA and to provide equitable patient care.
5. Promote a person-centered approach to medicine that highlights critical thinking and medical problem-solving skills to all students.
6. Prepare highly trained physician assistants with a robust didactic and clinical curriculum with a strong foundation in primary family medicine by possessing the knowledge and skills to function as entry-level members of the healthcare team.
7. Promote and support a diverse and inclusive community, consistent with the University's mission, throughout the program, with a focus on providing a solid foundation in concepts related to diverse and underserved populations. (Goal #7 is currently paused)

## PROGRAM ADMINISTRATION

### Program Faculty and Staff

| Name | Title | Office | Number | Email Address |
|---|---|---|---|---|
| Naveed Ahmed, DMSc, MPAS, PA-C | Program Director | IPEX 216 | 215-596-7145 | nahmed@sju.edu |
| Joshua M. Baron, D.O. | Medical Director | IPEX PA Suite | | jbaron@sju.edu |
| Leigh Lappin | Administrative Assistant & Program Coordinator | IPEX 205 | 215-596-7140 | llapin@sju.edu |
| Maria Long, DMSc, MHSc, MEd, PA-C | Director of Clinical Education | IPEX 207 | 215-596-7140 | mlong@sju.edu |
| Katerina Dons MSPAS, PA-C | Principal Faculty | IPEX 212 | 215-596-7144 | kdons@sju.edu |
| Amera Strand MSPAS, PA-C | Principal Faculty | IPEX 208 | 215-596-4495 | astrand@sju.edu |
| Eugene Smith | Simulation Laboratory Manager | SIM LAB | 215-596-7163 | esmith@sju.edu |
| Cory Bullock | Simulation Instructor | SIM LAB | 215-596-7163 | cbullock@sju.edu |
| Kyle Hihn | Simulation Instructor | SIM LAB | 215-596-7163 | khihn@sju.edu |

## Organizational Chart



### Administration of the Program

The Program Director, faculty, and the administrative staff conduct day-to-day operations of the Program. The Program faculty are responsible for class selection, curriculum design and development, student and course evaluation, student advising, and other matters relevant to the Program.

The Program faculty and the Program Director are responsible for:

- Developing the mission statement for the Program
- Selecting applicants for admission to the Program
- Providing student instruction
- Evaluating student performance
- Giving academic counseling to students
- Assuring the availability of remedial instruction
- Designing, implementing, coordinating, and evaluating curriculum
- Administering and evaluating the Program

In addition to the Program's core faculty and SJU's full-time science and clinical faculty, the Program engages guest lecturers and adjunct faculty.

## STUDENT PROGRESS COMMITTEE

The Student Progress Committee (SPC) oversees the academic, professional, and personal growth of PA students, so that students graduate with the skills, knowledge, judgment, empathy, humility, and appropriate behavioral attributes to assume the responsibilities of a physician assistant. The SPC is composed of at least three faculty members from the Program and/or the other areas of the university and is chaired by a faculty member appointed by the Program Director.

The SPC reviews all students' academic progress for the purpose of tracking and supporting students at-risk of not meeting academic progression criteria. The SPC also reviews and determines sanctions for violations of the Program's academic requirements and Professional Standards policies. To perform its duties, the SPC may request information from Program faculty or students, or cooperate with other SJU offices or departments, such as the Office of Community Standards. Any member of the SJU community may refer an issue concerning a student's academic or professional performance to the SPC.

The SPC generally meets at least monthly and also meets on an ad-hoc basis to review potential violations of the Program's academic and Professional Standards. The SPC may invite a student to appear before it for any reason. Generally, students are invited to appear before the SPC to discuss academic or professional circumstances of concern; if the Program

recommends probation for a violation of the policies and procedures in this Handbook; or if SJU's Community Standards Board issues a sanction for a violation of the policies and procedures in the SJU Student Handbook. The SPC informs and updates the Program Director and relevant faculty and staff on its reviews and determinations as needed.

## INCLUSIVE EXCELLENCE

The Program supports SJU's statement on diversity and SJU's mission to educate and care for the whole person, across all aspects of identity and to create a community where voices are heard, opinions are respected and differences are celebrated and valued. As reflected in the University's diversity statement, the University, consistent with its mission, will actively seek to welcome and retain a diverse and inclusive community of students, staff, and faculty. Increasingly conscious of a more interdependent world, the University remains dedicated to developing people for and with others.

Please see more information in SJU's non-discrimination statement.

## STUDENT ORGANIZATIONS

Any student organization undertaking an activity in the community must first obtain written approval from the Program. In general, any activity undertaken with minors (under 18 years of age) must be approved in advance and adhere to the University's policies and processes related to university programs and activities involving minors. This may include, but is not limited to, background check screenings; individual informed consent waiver forms to be signed by the participant's parents or legal guardians; and training. A student organization undertaking an approved group program in the community (such as training on self-breast examination with a church group) is required to routinely communicate to the group that the information is presented as community service information and not prescribed medical treatment.

# GENERAL INFORMATION - THE PHYSICIAN ASSISTANT PROFESSION

## PROFESSIONAL AGENCIES AND REGULATORY BODIES

### AAPA

The American Academy of Physician Associates (AAPA) is the national professional organization of PAs. Its membership includes practicing and student PAs as well as affiliate membership for physicians and PA educators. The AAPA provides a wide range of services for its members from

representation before federal and state governments and health related organizations, public education, pamphlets and brochures, insurance and financial programs, and employment assistance.
The Program requires students to become AAPA members. Benefits include multiple publications, free record keeping and reporting of CME requirements, and a membership discount for the annual spring conference. Student PA Societies are an integral part of the AAPA and make up a body referred to as the Student Academy of the American Academy of PAs (SAAAPA).

### PSPA

The Pennsylvania Society of Physician Associates (PSPA) represents PAs within the Commonwealth of Pennsylvania. The PSPA's goals and objectives are to enhance quality medical care in Pennsylvania through a process of continuing medical education; to provide loyal and honest service to the public and to the medical profession; to promote professionalism among its membership; and to promote understanding of the PA profession.

The Program requires students to become PSPA members. The PSPA is a constituent chapter of the AAPA and sends delegates to the AAPA House of Delegates. Two of the six elected PSPA board members are student members.

### PAEA

The Physician Assistant Education Association (PAEA) is a national organization representing PA educational programs. They work to ensure quality PA education.

## NCCPA

The National Commission on Certification of Physician Assistants (NCCPA) certifies physician assistants nationally, ensuring the completion of certification requirements, such as examinations and continuing medical education credits. All graduates of ARC-PA accredited PA programs are eligible to sit for the national certifying exam (PANCE) offered by the NCCPA.

### ARC-PA

The Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA) is the accrediting agency for the PA profession. It defines the ARC-PA standards for PA education and evaluates PA educational programs within the territorial United States to ensure their compliance with those standards.

Please see the Program Accreditation above for additional ARC-PA information.

## POST-GRADUATE CERTIFICATIONS AND LICENSURE

Graduation from the Program does not ensure that one can practice as a PA. Graduates must successfully pass the Physician Assistant National Certification Examination (PANCE) and meet state registration/licensing requirements.

### PANCE

It is required that graduates take and successfully pass the PANCE to practice professionally. Students may only sit for the PANCE exam upon graduation from the Program. Registration is completed online on the NCCPA website. Within 180 days of graduation, the Program will inform NCCPA of a student's pending graduation and this will allow for registration when instructed by the Program in the final months. The available testing dates for each candidate will begin seven days after the expected program completion date and end 180 days later.

Once certified through the NCCPA, each graduate must complete 100 hours of continuing medical education (CME) every two years. In addition, PANCE recertification exams (PANRE) are also required in most states every 10 years.

### SJU Professional Licensing Disclosures

This disclosure reflects Saint Joseph's University's reasonable assessment of whether its program meets the *educational* requirements for a professional license or certification in each state. Many states have additional requirements beyond the educational requirements, which may include, but are not limited to, work experience; passing one or more exams; demonstrating good moral character; completing satisfactory background checks; and submitting applications and payment of fees. *Saint Joseph's University ("SJU") cannot and does not guarantee that a professional licensing board/authority will approve a student's individual application for licensure in any field or in any jurisdiction.*

State licensing boards may change their requirements without advance notice to SJU. Students are strongly encouraged to review the requirements in the state(s) where they intend to work and consult with the appropriate licensing board(s). Please note that SJU does not make any representations or claims about whether its programs satisfy the requirements for professional licensure or certification in any country or jurisdiction outside of the United States.

## PROFESSIONAL PUBLICATIONS

| Journal of the American Academy of Physician Associates (JAAPA) | |
|---|---|
| Clinician Reviews | The Clinical Advisor |

## PROFESSIONAL AND ETHICAL GUIDELINES FOR THE PHYSICIAN ASSISTANT

Adherence to the highest professional and ethical conduct standards is one of the core requirements of the physician assistant profession. As such, professionalism is a core program competency. Both the curriculum and the Professional Standards and policies in this Handbook are rooted guidelines set forth by professional organizations and governing bodies. The Program expects students to not only be familiar with the entirety of the following guidelines – which are only summarized here – but also to adhere to them in their academic and clinical performance during the Program.

### AAPA Ethical Guidelines for the PA Profession

Four main bioethical principles broadly guided the development of these guidelines: autonomy, beneficence, nonmaleficence, and justice. When faced with an ethical dilemma, PAs may find the guidance they need in the AAPA Ethical Guidelines for the PA Profession.

*Autonomy* means self-rule. Patients have the right to make autonomous decisions and choices, and PAs should respect these decisions and choices.

*Beneficence* means that PAs should act in the patient's best interest. In certain cases, respecting the patient's autonomy and acting in their best interests may be difficult to balance.

*Nonmaleficence* means to do no harm, to impose no unnecessary or unacceptable burden upon the patient. Justice means that patients in similar circumstances should receive similar care.

*Justice* also applies to norms for the fair distribution of resources, risks, and costs. PAs are expected to behave both legally and morally. They should know and understand the laws governing their practice. Likewise, they should understand the ethical responsibilities of being a healthcare professional. Legal requirements and ethical expectations will not always agree. The law describes minimum standards of acceptable behavior, and ethical principles delineate the highest moral standards of behavior.

### AAPA Statement of Values

The Statement of Values within the Ethical Guidelines for the PA Profession document defines the fundamental values that the PA profession strives to uphold.

#### Statement of Values of the PA Profession

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

### Physician Assistant Education Association's (PAEA) Core Competencies for New Graduates

This set of competencies is designed to serve as a roadmap for the individual PA, for teams of clinicians, for health care systems, and other organizations committed to promoting the development and maintenance of professional competencies among PAs. While some competencies are acquired during the PA education program, others are developed and mastered as PAs progress through their careers.

### NCCPA Code of Conduct

PA students are expected to adhere to the same high ethical and Professional Standards required of PAs. The NCCPA Code of Conduct outlines the principles that all "certified or certifying PAs are expected to uphold." Seven competency domains capture the breadth and complexity of modern PA practice:

(1) Knowledge for Practice – Demonstrate knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient

care.

(2) Interpersonal and Communication Skills – Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.

(3) Person-Centered Care – Provide person-centered care that includes patient- and setting-specific assessment, evaluation, and management and health care that is evidence- based, supports patient safety, and advances health equity.

(4) Interprofessional Collaboration – Demonstrate the ability to engage with a variety of other health care professionals in a manner that optimizes safe, effective, patient- and population-centered care.

(5) Professionalism and Ethics – Demonstrate a commitment to practicing medicine in ethically and legally appropriate ways and emphasizing professional maturity and accountability for delivering safe and quality care to patients and populations.

(6) Practice-Based Learning and Quality Improvement – Demonstrate the ability to learn and implement quality improvement practices by engaging in critical analysis of one's own practice experience, the medical literature, and other information resources for the purposes of self-evaluation, lifelong learning, and practice improvement.

(7) Society and Population Health – Recognize and understand the influences of the ecosystem of person, family, population, environment, and policy on the health of patients and integrate knowledge of these determinants of health into patient care decisions.

As PAs develop greater competency throughout their careers, they determine their level of understanding and confidence in addressing patients' health needs, identify knowledge and skills that they need to develop, and then work to acquire further knowledge and skills in these areas. This is a lifelong process that requires discipline, self-evaluation, and commitment to learning throughout a PA's professional career.

## PROGRAM COMPETENCIES AND CURRICULUM

### TECHNICAL STANDARDS (A3.13E)

All students in the Program must possess the “physical, cognitive and behavioral abilities required for satisfactory completion of all aspects of the curriculum and for entry into the profession.” (ARC-PA Standards, Fifth Edition, p. 23.) These technical standards include: [1] communication, [2] cognition, [3] behavioral/professionalism, and [4] psychomotor skills and are required for admission, promotion and graduation. The PA Program Technical Standards are on the PA department website. These technical standards are not intended to deter any prospective student for whom reasonable accommodation will allow access to the curriculum. Please contact SJU’s Office of Student Disability Services for more information.

## CORE COMPETENCIES

### Program Competencies (B4.03)

The Saint Joseph's University PA Program level student competencies required to enter clinical practice were developed referencing the competencies from PAEA, AAPA, ARC-PA, and NCCPA, (collectively known as the Cross-Org Competencies Review Task Force to address clinical and technical skills, clinical reasoning and problem-solving abilities, interpersonal and communication skills, medical knowledge, and professional behaviors; the NCCPA Content Blueprint for entry-level medical content and tasks; the ARC-PA Standards and the most common diseases and skills used in medicine. These core competencies will be assessed within the final four months of the program to ensure and verify that each and every student meets the program requirements required to enter clinical practice.

At the completion of the program the PA student will be able to:

1) Medical Knowledge
    a) Effectively apply medical knowledge and evidence-based care to patient interactions across the lifespan and disease trajectory inclusive of up-to-date knowledge of disease processes, diagnostic assessments, and treatment strategies.

2) Clinical and Technical Skills
    a) Demonstrate proficiency of the clinical and technical skills necessary for a competent and safe entry-level physician assistant.

3) Clinical Reasoning and Problem Solving
    a) Integrate clinical reasoning skills and problem solving abilities to address patient problems using relevant data such as medical knowledge, the patient history and physical examination, evidence based practice, and patient presentation and preferences, to create an appropriate differential diagnosis and inform medical decision making.

4) Interpersonal skills

a) Demonstrate strong interpersonal and interprofessional communication skills with an emphasis on a person/patient-centered approach to medicine.
b) Demonstrate competency in written, oral, and non-verbal forms of communication.

5) Professional Behaviors
    a) Demonstrate professional behaviors in all interactions inclusive of legal and ethical conduct that is consistent with the fundamental principle of Cura Personalis and the core values of the PA profession.
    b) Demonstrate a practice of self-reflection on performance to identify strengths, areas for improvement, and the development of action plans.

### Course-Level Student Learning Outcomes

Within the curriculum, each didactic and clinical course has its own course-level student learning outcomes ("SLOs") that represent the overall goals of the course. Each course-level SLO corresponds with a set of instructional objectives, which are meant to guide student learning with more precision and detail. Students must be prepared to be assessed on all course-level SLOs and instructional objectives as listed in the course syllabus. The Program intends for students to master the instructional objectives that are part of learning experiences, labs, lectures, lecture material, required readings, and any other resources/activities provided within the course.

## CURRICULUM

Course descriptions can be found in the Physician Assistant section of the Academic Catalog or by clicking on the course number below. The semester for which a student registers for a particular Clinical Phase course will be guided by the Director of Clinical Education.

### Didactic Phase (Professional Year 1 - Class of 2027 and Beyond)

Fall P1

| | | |
|---|---|---|
| PHA 501 | Human Anatomy | 4 cr |
| PHA 502 | Human Physiology | 3 cr |
| PHA 503 | History/Physical I | 3 cr |
| PHA 505 | PA History | 1 cr |
| PHA 508 | Human Pathophysiology | 3 cr |
| PHA 509 | Medical Science Foundation | 1 cr |
| | | |
| Total Credits | | 15 cr |

Spring P1

| | | |
|---|---|---|
| PHA 507 | Psychosocial Med | 2 cr |
| PHA 522 | History/Physical II | 3 cr |
| PHA 523 | Clinical Medicine I | 5 cr |
| PHA 535 | Diagnostics I | 2cr |
| PHA 528 | Pharmacological Therapy I | 3 cr |
| PHA 529 | Clinical Research | 1 cr |
| PHA 547 | Women's Health | 2 cr |
| | | |
| Total Credits | | 18 cr |

Summer P1

| | | |
|---|---|---|
| PHA 541 | Clinical Medicine II | 5 cr |
| PHA 542 | Diagnostics II | 2 cr |
| PHA 548 | Pharmacological Therapy II | 3 cr |
| PHA 543 | Research Design | 1 cr |
| PHA 544 | Pediatrics | 2 cr |
| PHA 545 | Emergency Med | 3 cr |
| PHA 546 | Surgery | 2 cr |
| | | |
| Total Credits | | 18 cr |

## Clinical Phase (Professional Year 2 - Class of 2027 and Beyond)

P2 Fall

| | | |
|---|---|---|
| PHA 601 | Professional Practice I | 1 cr |
| PHA 602 | Geriatrics I | 1 cr |
| PHA xxx | Clinical Rotations (3) | 5 cr |
| | | |
| Total Credits | | 17 cr |

P2 Spring

| | | |
|---|---|---|
| PHA 603 | Professional Practice II | 1 cr |
| PHA 605 | Geriatrics II | 1 cr |
| PHA xxx | Clinical Rotations (3) | 5 cr |
| | | |
| Total Credits | | 17 cr |

P2 Summer

| | | |
|---|---|---|
| PHA 604 | Capstone | 2 cr |
| PHA 606 | Professional Practice III | 1 cr |
| PHA xxx | Clinical Rotations (3) | 5 cr |
| | | |
| Total Credits | | 18 cr |

Students will rotate through the following 5 credit clinicals in the P2 year:

PHA 651 Family Medicine I
PHA 652 Family Medicine II
PHA 653 Internal Medicine
PHA 654 Pediatrics
PHA 655 Women's Health
PHA 656 Behavioral/Mental Health
PHA 657 Surgery
PHA 658 Emergency Medicine
PHA 660 Elective

# ACADEMIC STANDARDS AND POLICIES

## ACADEMIC STANDARDS (A3.15A)

### Academic Requirements

Reflecting the level of professionalism and expertise needed to practice as a physician assistant, Program students are held to the high academic standards needed to satisfy the Program Competencies.

At all times while enrolled in the Program, students must meet the following academic standards ("Academic Standards"):

- 3.00 cumulative GPA at the end of each semester;
- Passing each and every course, meaning:
    - Obtaining a grade of 70.00%; and
    - Completing any other criteria required for passing, as outlined in each individual course syllabus.

Failure to meet the above Academic Standards will result in the following:

- At the end of any semester, a student who does not achieve a cumulative 3.00 GPA or does not pass a course will be put on Academic Probation.
- A student who fails to achieve a 3.00 cumulative GPA and fails a course in the same semester will be dismissed from the Program.
- A student who fails more than one course in the same semester will be dismissed from the Program.
- A student already on Academic Probation who does not achieve a cumulative 3.00 or does not pass a course will be dismissed from the program.

In addition, as further described below, to complete and graduate from the Program, students must:

- Complete the Curricular Requirements in succession;
- Meet the Progression Requirements for each of the Didactic and Clinical Phases of the Program; and
- Complete all Graduation Requirements

### Curricular Requirements

The Program uses a cohort-based curriculum. Students who enter the Program at the same time progress through the academic curriculum together – taking the same classes at the same time – and finish their degree together. Students are expected to take a total of 103 credits and must register for all courses listed above. Classes must be taken in the appropriate semester for their

cohort. Failure to do so may impact progression in the Program (see Deceleration Policy for more information).

### Packrat Examination

The PACKRAT examination is a 225-question exam used to assess PANCE readiness. It must be completed once during the end of the Didactic Phase and once during the Clinical Phase. Failure of a PACKRAT examination is subject to Remediation, as described in the Remediation Policy below.

## Progression Requirements (A3.15b)

In addition to maintaining the academic and curricular requirements above, progression requirements and deadlines for completion are outlined below.

### Didactic Phase

To complete Year 1 of the Program and move on to the Clinical Phase, students must:

1. Pass each course in the Didactic Phase.
2. Successfully remediate any assessments or courses as described in the Remediation Policy, below.
3. Complete PACKRAT Examination (subject to Remediation)
4. Demonstrate the required skills necessary for clinical practice, as determined by the Program.
5. Actively participate in required advising activities.
6. Obtain BLS/ACLS certification.
7. Complete all performance improvement plans, as required by the Program.

Deadline for completion of all Didactic Phase requirements: the end of each semester in which they occur.

### Clinical Phase

To complete Year 2 of the Program, students must:

1. Pass each course in the Clinical Phase.
2. Complete PAEA End of Rotation exams ("EOR exams") with a minimum grade of 65.00%.
3. Obtain an 80.00% (i) on all Preceptor Final Evaluations and (ii) in the professionalism section of each Preceptor Final Evaluation Form.
4. Successfully remediate any assessments or courses as described in the Remediation Policy, below.
5. Complete PACKRAT Examination (subject to Remediation)
6. Demonstrate the required skills necessary for clinical practice, as determined by the Program.
7. Actively participate in required advising activities.

8. Complete all performance improvement plans, as required by the Program. Deadline for completion of all Clinical Phase requirements: the end of each semester in which they occur (unless subject to applicable Remediation or Academic Probation requirements).

### Graduation Requirements

Students must fulfill all Program and SJU requirements before being awarded a diploma. In addition to meeting the Program's Academic Standards, to fulfill Program graduation requirements, students must:

1. Have a cumulative 3.00 GPA
2. Complete the Didactic Phase progression requirements
3. Complete the Clinical Phase progression requirements

Deadline for completion of all graduation requirements: the end of each semester in which they occur (unless subject to applicable Remediation or Academic Probation requirements).

### Grading Policies

Student GPAs are calculated in accordance with this Grading Policy, submitted to SJU's Office of the Registrar, and recorded in Banner. While students may receive unofficial GPAs calculations from the Program during the course of the semester, only GPAs recorded in Banner are considered "official", and only "official" GPAs will be used for all progression, probation, and dismissal decisions.

The course director makes all final decisions regarding student grades for written examinations, assignments, practical exams, Objective Structured Clinical Experiences ("OSCEs"), other assessments outlined in each course syllabus, and for overall grades for a course. Failure to comply with all aspects of the course learning outcomes, instructional objectives, and other attributes described in the course syllabus may adversely affect a student's course grade. The Program does not participate in grade replacement. Once a course grade has been reported to the Registrar there is no opportunity to retake that course for a higher grade.

### Grade Reviews of Individual Assessments

Students will not be permitted to review individual assessment if they achieve a passing score. If a student fails an assessment, reviews may occur only as follows:

Failing an exam – at the discretion of the Course Director, a student may review only the incorrect answers. The review must be done in person with the course director or their designee, and students may not take notes or record the review. Such review requests must be made in writing within five days (5) from when the exam grade is released.

Failing a practical exam or OSCE – Students will review video recordings of skills as a part of a required remediation process. This will take place with the Course Director.

### Rounding

All assessments and course grades in the PA Program are recorded after rounding at the hundredths decimal point (2 decimal points). For example:

0. An assessment score of 69.77656 is recorded as a 69.78
1. A course grade of 69.987 is recorded as a 69.99, and is a final grade of an "F"
2. A GPA of 3.456 will be recorded as a 3.46.
3. The one instance that a whole number would be impacted is if the grade equals or surpasses a .995, for which rounding would naturally carry into the whole digits. For example, if a student obtains a grade of 89.995, this will be recorded as a 90.00, and the student will receive an A.

The PA Program utilizes University GPA calculations, with associated rounding policies, to determine progression.

## Grade Scale

| % COURSE GRADE | COURSE LETTER GRADE | CORRESPONDING GPA GRADE |
|---|---|---|
| 90.00 and over | A | 4.00 |
| 87.00-89.99 | B+ | 3.30 |
| 80.00-86.99 | B | 3.00 |
| 77.00-79.99 | C+ | 2.30 |
| 70.00-76.99 | C | 2.00 |
| 0-69.99 | F | 0.00 |
| Incomplete | I | N/A |

## Rubric Grade Scale

| Didactic Rubrics | % Grade for Assignment |
|---|---|
| 5 (Entry-Level Clinician) | 100.00 |
| 4 (P2 Level Expectation) | 90.00 |
| 3 (Proficient/P1 Level Expectation) | 80.00 |
| 2 (Needs Improvement) | 70.00 |
| 1 (Unsatisfactory) | 00.00 |

| | |
|---|---|
| Clinical Preceptor Rubrics | % Grade for Assignment |
| 5 (Expert) | 100.00 |
| 4 (Advanced Proficient) | 90.00 |
| 3 (Proficient) | 80.00 |
| 2 (Below Average) | 70.00 |
| 1 (Needs Improvement) | 60.00 |

### Pass/Fail Assignments

In several courses throughout the curriculum, there may be assignments, assessments, tasks for completion, or other components that are graded as Pass/Fail. The course syllabus shall list the conditions for passing or failing any of these components. All Pass/Fail components – even those without percentage weight within the course – must be passed in order to fulfill the requirements of the course. Students may resubmit failed assignments until a passing grade is achieved.

### Grade Appeals

Grades on individual assessments within courses

- SJU's Student Complaint Policy applies to course-related issues, other than final course grades (addressed below).

- Final course grades. SJU's Grade Appeal policy applies to the final course grades in the Program.

## REMEDIATION POLICY (A3.15C)

Students who receive a failing grade on certain assessments within a course, or a failing grade for the entire course, will be required to go through the remediation process. In most cases (with the exception of clinical courses), "remediation" means that the student will (i) work with the Course Director and/or advisor (or designees) to identify didactic or clinical deficiencies, (ii) remediate the deficiencies through review and active learning and (iii) "demonstrate competence" by achieving a passing score on a reassessment created by the course director in alignment with the identified deficiencies.
For purposes of Remediation, failure is defined as:

- <70.00% (F) on any individual assessment
- "Fail" on a Pass/Fail assignment
- An overall course grade of <70.00% (F)
- For EOR exams or end-of-curriculum exams ("EOC exams") : <65.00% or a scaled score of <1400.

- Preceptor Final Evaluation: < (i) 80% overall and/or (ii) < 80% on the professionalism section of the Preceptor Final Evaluation form

- For PACKRAT examinations: as described in the "PACKRAT Exams" section below
- If Remediation is required on an assessment or for a course, a student will be notified by the Course Director promptly after grades are calculated. Cumulative GPAs, as they pertain to Progression Requirements, are calculated after Remediation. Course Remediation must be completed before the beginning of the next semester. Remediation is mandatory; failure to successfully remediate a failed course will result in dismissal from the Program.

### Remediation of Didactic Course Assessments

Failure to successfully remediate the following assessments will result in failing the entire course.

- Clinical Medicine I and II Summative Exams
- History and Physical I Practical exams
- History and Physical II Clinical Skills labs
- History and Physical II Clinical Skills exam
- Capstone Course: All assessment items

The remediated assessment grade will be recorded as no higher than a 70.00% – even if the student achieved a grade higher than a 70.00 on the reassessment. Students have one attempt to successfully remediate the above assessments.

### Remediation of Clinical Rotation Course Assessments

Failure to successfully remediate the following assessments will result in falling the entire course.

- All clinical course assignments
- EOR exams

Students have one attempt to successfully remediate the above assessments.
Note: Preceptor Final Evaluations are not eligible for Remediation.

### Remediation of Packrat Exams

Students will be required to remediate PACKRAT exams if the following threshold scores are not attained:

4. Score of <118 on the first PACKRAT examination
5. Score of <129 on the second PACKRAT examination
6. Less than 11-point difference on the score from first to second PACKRAT.
    - Students who achieve a 145 or higher on either examination are exempt from the 11-point difference stipulation.

Students who are required to participate in PACKRAT Remediation must meet with their advisor and submit a Remediation plan. The Remediation plan must include regular reassessments in the UWorld platform and be approved by the advisor using the student's strengths and weaknesses report and the NCCPA blueprint. The student is then required to have regular check-ins with their advisor to assess that the student is following the Remediation plan. Remediation is considered sufficiently complete in the following instances:

- Score of at least a 129 on the second PACKRAT examination
- Successful completion of the EOC exam.
- Completion of Remediation plan that takes place from the EOC exam until the end of the Capstone Course, as determined by the advisor.

### Remediation of Didactic Courses

Students may remediate only one failed didactic course or failed clinical course during the Program. Students on Academic Probation cannot remediate a didactic course or clinical course.

Successful course Remediation will be defined as meeting all requirements of the Remediation plan and achieving a 70.00% on the reassessment. The remediated course grade will be recorded as a 70.00% – even if the student achieved a grade higher than a 70.00 on the reassessment.
Students have one attempt to successfully complete the reassessment.

Please see the Capstone Course Remediation section below for information specific to this course.

### Clinical Rotation Remediation

Remediation as described above is not applicable to clinical courses. If a student fails a clinical course, the student must retake the entire clinical course to remediate the deficiencies, in accordance with SJU registration policies and procedures.

#### PHA 604 Capstone Course Remediation

The PHA 604 Capstone Course is a requirement for graduation from the Program. A student who fails to successfully complete the PHA 604 Capstone Course, but who has met all other Program graduation requirements, may remediate the Capstone Course, at the sole discretion of the Program.

Capstone Course Remediation requires a comprehensive plan to address deficiencies and demonstrate the competencies required for graduation. Therefore, Capstone Course remediation (i) will take place in a subsequent semester, delaying graduation and (ii) may result in additional tuition and/or fees charged to the student.

## ACADEMIC PROBATION

Students will be put on Academic Probation at the end of any semester in the Program when:

7. their end-of-semester, cumulative GPA is below 3.00; or they receive one final course grade below 70.00%

Once on Academic Probation, failure to achieve a cumulative 3.00 GPA after any subsequent semester, or the failure of any course, will result in dismissal from the Program.

### Academic Probation Procedures

Academic Probation is based upon a student's final course grades only. The Program Director will notify the student when their semester performance results in Academic Probation. The student remains on Academic Probation for the duration of the Program, including return from any University-approved temporary separation. If a student has a second Academic Standard violation, the student will be notified by the Program Director that they are dismissed from the Program.

### Academic Probation Appeals

Academic Probation cannot be appealed. However, if the student is successful in a grade appeal that changes the student's GPA or final course grade so that Academic Probation is not applicable, the Academic Probation will be repealed. See the Grade Appeal section for more information.

### Consequences of Academic Probation

Students on Academic Probation may not participate in student club organizations in any capacity.

In some states, territories, or districts, a student's Academic Probation status must be documented on applications for professional licensure.

Certification by the NCCPA and credentialing for institutional privileges from certain employers also may be restricted or limited as a result of Academic Probation.

## ACADEMIC HONESTY POLICY AND PROCEDURES

## INTERIM HEALTH PROFESSIONS ACADEMIC HONESTY POLICY (IHPAHP)

Acts of academic dishonesty in Program courses fall under the University's Interim Health Professions Academic Honesty Policy and will be referred to the Dean of Students. If a student is found to have violated the IHPAHP, the Program will automatically place the student on Professional Probation, and the student will be required to sign a Probation Contract, subject to this Handbook's Professional Probation appeal policies.

## PROGRAM INTEGRITY PROCEDURES

The Program has specific expectations and requirements for its assessments. Violations of the procedures listed below will be reported to the SPC. Depending on the severity, the SPC will, in its discretion, refer the report to the Dean of Students or their designee under the IHPAHP, or follow the procedure for Professional Standards violations described in the Professional Probation policy.

a. Students are not permitted to write, photograph, record, or replicate examination/assessment material in any form.

b. Students are not permitted to access or review prior examination/assessment questions provided by others.

c. In-person assessment protocols
   - Students should download the assessment, if applicable, the evening before. Failure to do so may result in loss of time to take the test if there are technological issues with the download.
   - Students must arrive 10 minutes prior to the start of the examination/assessment time to complete security protocols and prepare their technology and space for the assessment. Students who arrive late to any graded examination/assessment will not be permitted to have additional time in which to complete the assessment.
   - Students must arrive with a fully charged laptop that meets the Program's technology requirements, if applicable
   - Students will turn off all other electronic devices.
   - Students will place all other belongings (with the exception of drinks and a non-electronic writing utensil) away from the testing area (e.g., in the front of the classroom, outside the simulation room, etc.) including but not limited to bags, electronic devices of any kind, all watches, learning materials, blankets, clothing not being worn, etc.
   - Students will show the proctor all drink containers if they wish to place them at their desk.
   - Students will demonstrate to the proctor that they do not have any technology, including showing that a watch is not being worn.
   - After all security checks are complete, students will be provided the password

from the proctor, if applicable.

- Students will be provided one piece of scrap paper. Students must write their full name on this paper and submit it to the proctor upon leaving, if applicable.
- Students will remain silent during examinations (unless the assessment calls for speaking) and will work to ensure a quiet learning environment without distraction.
- Students are not permitted to approach the proctor with questions during the examination
- Upon completion of the examination/assessment, students will leave the room immediately and not return until the scheduled examination/assessment time is complete.
- Leaving the exam room/breaks. Students are not permitted to leave the examination/assessment at any time, with the exception of an emergency or illness as determined by the proctor, in which case an escort may be required, and additional time will not be permitted.
- Students are not allowed to leave the exam room during a routine course (one-hour) exam, practical assessments, or OSCEs. If a student leaves the room during one of these exams, the exam will be considered completed/final. It is best if you do not need to leave the room during any exam, unless a student has accommodations related to this.
- One student at a time is allowed to use the restroom during EOR exams, EOC exams, and PACKRAT exams. The time allotted for these exams will not stop or be paused during a restroom break.
- Students who complete the examination/assessment early may leave the examination room and may not return until the exam scheduled time is over.
- Students are required to vacate the immediate testing area and refrain from discussing examination/assessment material until after the conclusion of the exam for all students.

d. Virtual Assessments

The Program does not allow virtual examination/assessment proctoring. All examinations/assessments scheduled on a day of an absence will be rescheduled in accordance with the missed assessment policies and procedures. Certain formative assessments are eligible for exception, and if applicable, will be detailed within the individual course syllabus.

e. Open-note assessments

Throughout the Program, students will be expected to complete synchronous and asynchronous assessments, sometimes with the assistance of resource materials. All academic work submitted is expected to be the result of the student's sole effort, unless otherwise specified. When students submit work purporting to be their own, but which in any way borrows ideas, organization, wording or anything else from another source without appropriate acknowledgment of the fact, the students are guilty of plagiarism. Self-plagiarism is also considered plagiarism, as reproduction of previously submitted assignments and work to

replace new submissions is considered plagiarism. Submitted writing must follow AMA citations to avoid incidental plagiarism, which is also considered plagiarism. Students may be expected to submit written work through plagiarism software, and when applicable, will be prompted to do so through the assignment submission section of the learning management system. Failure to comply with this policy will result in referral to the University's Office of Community Standards and SPC.

# PROFESSIONAL STANDARDS AND POLICIES

## PROFESSIONAL STANDARDS

Professionalism is taught throughout the entire curriculum, and the Program expects students to abide by professional standards ("Professional Standard(s)") that reflect the standards of the PA profession. Anyone who witnesses a potential violation of the Professional Standards can refer the incident to the SPC. The SPC will review the reported incident, and, in its discretion (depending on the level of severity) choose to: (1) issue a verbal or written warning, (2) follow the procedures for Professional Probation (as set forth below), or (3) refer the report to the Office of Community Standards.

If referred to the Office of Community Standards, the SPC will take no further action until the matter has been concluded, including all appeals, under Community Standards procedures. If the Community Standards Board finds that a Community Standard has been violated, the student will be automatically placed on Professional Probation, subject to the Professional Probation appeal policies in this Handbook.

### General Professional Standards

The following offenses are violations of the Program's Professional Standards (and may also be Community Standards violations, depending on their severity):

a. Professional honesty
   - Lying to Program faculty/staff or clinical preceptors
   - Forgery, altering or misuse of Program and/or medical documents, or knowingly furnishing false information
   - Violation of the Student Identification Policy, including by misrepresenting oneself as a graduate of the Program, or in a capacity other than that of a PA student

b. Obstruction or disruption of the Program's educational process or other SJU functions, while on or off SJU or clinical site property
c. Entry into an unauthorized area of the Program, SJU, or clinical site
d. Theft, malicious, or non-accidental damage to Program, SJU, or clinical site property
e. Repeated violations of the Attendance Policy or Punctuality Policy
f. Soliciting or assisting another person to perform any act which could subject the student to discipline, as cited in this section

g. Proven deficiencies in patient care or being a danger to patients

### Remote/Virtual Instruction/Telehealth Professional Standards

As is expected in the physical classroom, students should adhere to similar behaviors during remote instruction, telehealth and telemedicine encounters:

1. Student should be dressed appropriately for the setting
    a. Lectures/conferences/workshops etc. - classroom attire
    b. Telehealth/telemedicine - Professional attire or scrubs with white coat
2. Students should not be wearing pajamas or other attire not suited for the classroom/professional setting.
3. Microphones should be muted except if asking/responding to questions, directly commenting, or called on by the instructor.
4. Video must be enabled during all lectures, conferences, workshops, meetings, etc. Students must be on-camera for all learning activities.
5. Adequate lighting for appropriate interaction with classmates and instructors is mandatory.
6. Be mindful of your surroundings/environment when your video is on and make every attempt to minimize visual and sound distractions to the lecturer and your classmates. Students should remain seated and not walk around and cause distracting movement within their display screen.
7. Students should not have external programs running and should be prepared to actively engage in polling, breakout groups, links, self-assessments, quizzes, and in- class assignments without delay.
8. Be sure your internet, sound, and video capabilities are working properly before each class.
9. The student must use their first and last name for their display name in the Zoom box for all synchronous virtual learning sessions.
10. Students attending lectures/labs/workshops, or any event virtually, must be focused on the material being discussed and must not be performing other activities (i.e. the student should not be in a car, driving, making meals, communicating to others in any format, etc.).

### Student Accountability

PA students will be held accountable for their role in health care delivery as follows:

- Students shall perform only those procedures authorized and appropriately supervised by the Program, clinical site, supervisor, and/or preceptor.
- Students at clinical sites must always work under the supervision of a preceptor and are prohibited from assuming primary responsibility for a patient's care. For example, students shall not treat or discharge a patient without prior consultation with and approval of a clinical preceptor or a licensed medical practitioner assigned to the student by the preceptor.
- Students must complete all assignments and duties effectively and to the best of their ability.

  - Students are responsible for identifying and reporting unprofessional, unethical, and/or illegal behavior by health care professionals and students, faculty, or staff of the Program. If a student has a reasonable belief that such conduct has occurred, they should report it to the Program Director, faculty advisor, preceptor, supervisor, or Director of Clinical Education, as may be appropriate under the circumstances. Retaliation against a student for reporting is prohibited and will be addressed according to University and Program policies.
  - Students are expected to accept and apply constructive feedback.
- Students are required to exercise sound judgment.

### Concern for the Patient

- Students must, by their words and behavior, demonstrate concern for the patient. Concern for the patient is manifested in many ways including, but not limited to, the following:
  - Students must treat all patients and their families with dignity and respect.
  - At all times the physical and emotional comfort of the patient is of paramount importance.
  - Students must use appropriate verbal and non-verbal communication to convey concern, pleasantness, and professionalism to the patient.
  - The patient's safety, modesty, and privacy must be considered at all times.
  - Students shall deliver health care services to patients without regard to their race, religion, national origin, age, sex, marital status, citizenship, sexual orientation or gender identity, disability, medical condition, socioeconomic status, political beliefs, or any status protected by law.
  - Students may not accept gifts or gratuities from patients or their families.
  - Students may not give gifts, money, etc. to patients.
  - Sexual, romantic, and/or familial relationships with patients are prohibited and will not be tolerated.
  - Students may not communicate with patients or patient families (e-mail, phone, text, social media sites) outside of the clinical site.

### Professional Demeanor

Good personal hygiene is always required.

Sexual and/or romantic relationships with principal faculty, instructional faculty, Program support staff, clinical preceptors while in the Program is strictly prohibited.

## Dress Code

Students of a professional PA program represent both the University and the profession. In this role, students will encounter a variety of patients and practitioners who come from diverse cultural, ethnic and socioeconomic backgrounds. In order to efficiently establish professional and trusting relationships and to decrease the potential for offense or discomfort to patients, a standard of professional grooming, hygiene, and clinical attire is required. A health care provider's dress and appearance are essential in establishing a relationship of trust and confidence with patients. In some cases, this requires that individual personal attire preferences be secondary to the need for effective patient interaction. As a student and soon-to-be medical professional, patients' needs come first, even at the expense of individual expression.

Every student must prominently display the student's official Saint Joseph's University' ID card at all times while on campus and display their official name tag while in attendance at all affiliated training locations. During the didactic year of PA education, clinical or professional attire is expected during patient interviews, clinical laboratories, interprofessional activities, and when visiting facilities for further educational opportunities. Any student not dressed appropriately for clinical encounters will not be allowed to participate in clinical experiences and will lose grade points appropriately.

Much of the first year of training is spent in lecture halls and classrooms where patients are not present. Attire during lecture and small group seminars may be comfortable but must not detract from the educational atmosphere. Avoid dress or attire that may be potentially offensive to one's peers, the faculty, or patients. When in doubt, consult the faculty or your faculty advisor.

Students that demonstrate a pattern of poor attire choices in didactic and/or clinical settings will be at risk for being placed on Professional Probation.

Proper attire, including a white coat, should be worn for all patient encounters, events occurring in actual healthcare settings, volunteer activities in the community for health screening events, and activities involving simulated patients or patient instructors unless specifically told otherwise by supervising faculty.

General:

- Hair:
  - Long hair should be worn back if necessary to avoid interference with work or patient care.
  - Hair should be clean and appropriately groomed
- Nails:
  - Nails must be clean and trimmed short for proper infection control and for patient/standardized patient comfort/safety; nails must not extend past the fingertips. Nails that are found to be too long must be trimmed prior to commencement of educational activities/patient encounters.
  - Nail polish should be muted tones if required by clinical rotation site.
  - Artificial nail requirements are as per clinical site

- Jewelry should be minimized as to allow for proper infection control and patient comfort/safety. Avoid wearing any loose or dangling jewelry to avoid injury to self or patients.
- No offensive or inflammatory clothing, accessories, or materials are permitted. Avoid revealing clothing or clothing not well suited for maneuverability.
    - Classroom Setting:
        - Casual attire
        - Name tag and Student ID badge properly displayed
        - Students can wear sneakers and open-toed shoes
    - Anatomy Lab (PCOM):
        - Old scrubs should be worn, or clothing you don't mind throwing away.
        - You must wear protective eye goggles, and a gown provided to you at the lab.
        - Wear gloves at all times while in the Anatomy lab
            - You must wear non-slip rubber soled, closed toe shoes (sneakers)Consider wearing an old pair. You may want to consider throwing these away after the semester
            - No shoes with holes in them (i.e., Crocs), no flip flops/sandals, or high heeled shoes.
        - You must wash your hands prior to leaving the lab
        - Follow all lab specific rules, policies, and procedures
    - Clinical Skills & Simulation Labs:
        - For ALL Standardized Patient encounters- professional business attire or scrubs
        - Avoid wearing ties, dangling/excessive jewelry, dangling scarfs/neck/head coverings, perfume/cologne/body sprays, revealing clothing or clothing not well suited for maneuverability.
        - White coat, name tag, and ID badge
        - Skills learning sessions- scrubs are recommended
        - Closed-toed, non-slip (rubber soled) shoes are required
    - Clinical Year (Supervised Clinical Practice Experiences, SCPEs):
        - Business attire appropriate for the setting or scrubs. - Students should confirm the dress code with their preceptor prior to the start of the rotation.
        - Avoid wearing ties, dangling/excessive jewelry, dangling scarfs/neck/head coverings, perfume/cologne/body sprays, revealing clothing or clothing not well suited for maneuverability.
        - White coat, name tag, and ID badge must be worn at all times,

except in the Operating Room, or otherwise instructed by onsite preceptors
- Closed-toed, non-slip (rubber soled) shoes are required

### Maintaining Composure

Students must maintain a professional and calm demeanor at all times, even in emergencies and other highly stressful situations.

## Attendance and Punctuality Policies

Attendance and timeliness are important aspects of professional behavior. Students must report to all classes, labs, seminars, Call Back Days, clinical sites, and other scheduled activities on time. Timely return from designated breaks is required.

Students who are absent from any scheduled activities as mentioned above will be held responsible for the material they have missed. For all virtual synchronous and asynchronous events held remotely throughout the program, attendance will be filed in the course record using an exported attendance report. These reports provide who was present, the number of minutes the student was present, their order of arrival, and statistics related to viewership of asynchronous recorded lectures. Virtual attendance will be noted for all events.

Students may request to be virtual for extenuating circumstances. These requests require submission of a Student Absence Form in accordance with the attendance policy.

Students are required to maintain professionalism standards as outlined in the section for remote/virtual instruction. Not complying with this virtual attendance policy will be marked as an unexcused absence.

Please see below for more information.

## ATTENDANCE POLICY

It is the responsibility of the student to obtain and complete the *Student Absence Request Form* whenever absent, whether the student believes it is excused or unexcused. This form must be submitted as soon as possible upon learning of the absence. It must be filled out for each missed course and must be emailed to the Program Coordinator, the and the affected Course

Director(s). An excused absence is granted on a case-by-case basis.

Physician assistant students are expected to meet all professional responsibilities as described in the physician assistant Program competencies, which may be found in this Handbook. Professional students' full participation in the learning environment is important in nurturing professional development. Thus, students are expected to arrive punctually and participate in all educational activities in all didactic, rotations, and clinical activities, including interactive workshops, conferences, laboratories, presentations, and examinations/assessments. In addition, the PA student is expected to submit all assignments on time as outlined by the Course Directors.

Given the importance of attendance, the following policy will be enforced:

- Attendance is mandatory in all classes, labs, seminars, small group discussions, field experiences, clinical rotations, and any other activities designed by the Program administration.
- Personal appointments, travel arrangements, and any other personal scheduling should be scheduled outside of routine class time (8:00 am to 5:00 pm). Schedules frequently change due to clinical lecturer availability and students must be adaptable and flexible with their schedules.
- An unexcused absence is defined as any absence from a class or clinical rotation without prior approval from the Program. An unexcused absence is considered unprofessional and may result in a formal evaluation of a student's professionalism and require remedial action.
- Unexcused absences in any course or activity may automatically lower the final letter grade in that course or rotation as outlined in the syllabus.
- If a student is determined to have more than one unexcused absence at any time during the Program, the student may be placed on Probation for deficiencies in professionalism. Any further unexcused absences during the Program may result in the recommendation of dismissal from the Program.
- If a student misses any examination/assessment due to an unexcused absence, the student will not be able to achieve a grade higher than 70% (didactic year) or 65% (clinical year) on that examination/assessment, no matter what their actual score is. Missed examinations due to an unexcused absence are ineligible for remediation.
- Any absence due to illness during the didactic phase or clinical phase must be reported to the Program Director, Course Director, and Program Coordinator prior to the scheduled activity the student will be missing; this should not occur after the absence has occurred unless in the case of an emergency.
- No matter the reason for absence, it is the responsibility of the student to obtain any missed work, make up assignments, or make up missed clinical time. If notification is not made prior to the start of the activity, the absence will be considered unexcused.
- Any absences for any reason (excused or unexcused) may negatively impact your academic success and may require an action plan, as determined by the Associate Program Director, in consultation with Program Director, course director, and the student's PA Program faculty advisor. This action plan may include referral for probation or dismissal.

- If a student needs to request an excused absence, the student must submit a completed *Student Absence Form* to the Program Director, the Program Coordinator, and the affected Course Director(s) at least 4 weeks prior to the event. There is no guarantee that the excuse will be granted; all requests are made on a case-by-case basis. It is the expectation of the Program that students will not request absences.

### Punctuality Policy

Students in the PA Program must report to all scheduled program functions on time, dressed appropriately, with any necessary equipment, and prepared to participate fully. This applies to all classes, clinical labs, seminars, critical thinking sessions, small group activities/discussions, clinical experiences, examinations/assessments, and any other activity required by the PA program.

A student who is late for a class, arrives on time but is not dressed appropriately for the activity, does not have the equipment required to participate in the class, or otherwise is not prepared to participate, may be denied access to the class, lab, or other activity, and this will be counted as an unexcused absence.

Tardiness disrupts the entire class and clinical site and will not be tolerated.

Students are strongly encouraged to arrive at least 10-minutes before the start of any class or assessment. Students are expected to be in their respective classes, labs, small groups, clinical rotation, etc. at the scheduled time ready to begin class and/or to participate.

If the student is going to be late, they must notify the Program as soon as possible, by phone at 215-596-7140 or by emailing the Program Coordinator and give an estimate as to when they will be arriving.

- The student must also submit, as soon as reasonably possible, an email to the PA Course Director, and "cc" the Program Administrative Coordinator with the reason for being late, and what time they actually arrived in class.

- If a student is found to demonstrate a pattern of lateness, they will be referred to the SPC. Depending on the severity, the student can be placed on Probation for deficiencies of professionalism, and ultimately, recommended for dismissal from the Program.

- The faculty reserves the right to prevent students who are late from entering the class until the official class break.

- To minimize disruption of a class already in progress, and distraction to other students and instructors, a student arriving after a class has begun is required to enter the lecture hall by the rear entrance and move promptly, quietly, and with minimal disruption to the closest available seating.

- If a student does not notify the Program and respective Course Director of lateness, they may be recommended to the SPC for a professionalism review.

- The student must arrive at least 10 minutes prior to the start of any exam, quiz, OSCE, Sim lab encounter, or other graded assessment with the exam already downloaded, and all devices charged and ready to go.

- Students who arrive late to any graded assessment will not be permitted to have additional time in which to complete the written examination, quiz, OSCE, Sim lab encounter, or any other graded assessment.

### Missed Assessments

Students who miss an assessment due to an absence are eligible to take the examination/assessment upon return. Make-up examinations/assessments will be scheduled at the discretion of the course director. The content and format of the make-up examination/assessment may differ from that of the original examination/ and will be determined by the Course Director. If the student is not present for the scheduled make-up, they will receive a grade of zero. A second make-up opportunity will not be provided.

If a student misses any examination/assessment due to an excused absence, they are eligible for full credit. If it is an unexcused absence, the student will not be able to achieve a grade higher than 70% (didactic year) or 65% (clinical year) on that examination/assessment.

Late submitted work is subject to 10% per day penalty.

## JURY DUTY

A student who receives a summons for Jury Duty may bring the summons to the Program Coordinator and Program Director for a letter requesting an exemption.

### Inclement Weather Policy

Students who are attending coursework during the didactic year, in any SJU location, should follow inclement weather announcements and decisions by SJU. Inclement weather status updates can be found here.

Students on clinical rotations away from SJU are responsible for contacting the preceptor and/or site in the event of inclement weather to confirm the facility is requiring them to report. If the student is directed not to report to the respective clinical site, the PA student must stay home and work on assignments. The PA student must email the Director of Clinical Education if they are not to report to their assigned clinical site due to inclement weather immediately.

## PROFESSIONAL PROBATION POLICY

### Professional Probation

Students will be put on Professional Probation at any time during the Program if (1) they are found to have violated the IHPAHP or SJU Community Standards or (2) the SPC finds them in violation of the Program's Professional Standards.

Once on Professional Probation, a student remains on Professional Probation for the duration of the Program, including return from any University-approved temporary separation. A second violation of (1) the IHPAHP or Community Standards (after the conclusion of all appeals), or (2) Program Professional Standards, in the discretion of the SPC, will result in dismissal.

### Professional Probation Procedures

If the SPC refers a student's conduct to the Office of Community Standards, and the student is found to have violated the IHPAHP or Community Standards, the SPC will automatically place the student on Professional Probation; provided, however, that the student may appeal Professional Probation as set forth in the Professional Probation Appeals section below.

The SPC will follow the process below to determine if the student's conduct is subject to Professional Probation in the following instances: (1) the SPC refers the student to the Office of Community Standards, but the student is not found to have violated the IHPAHP or Community Standards or (2) the SPC does not refer the student to the Office of Community Standards:

- The SPC will notify the student in writing.
- The student must provide a letter to the SPC outlining the details of the Professional Standards violation, including objective information related to the violation and a plan to insure no further violations.
- The SPC will convene to review the letter and any supporting information/documentation, any prior warnings, the student's academic and/or nonacademic performance, and any other relevant information.
- At this point, the SPC may, in its sole discretion, invite the student to meet with the SPC. If the student is invited to a meeting:
    - The student's attendance and/or participation is optional; not attending and/or not participating and will not be held against the student.
    - The student may bring one advocate, who may be an SJU faculty or staff member. This advocate cannot be a Program faculty or staff member. An advocate is optional; not bringing an advocate will not be held against

the student. The role of the advocate is as a support person only; the advocate will not be able to speak or answer questions on behalf of the student.
    - If the student intends to bring an advocate, they must identify the advocate to the SPC in advance.
    - An advocate may not attend the SPC meeting without the student, (i) barring exceptional circumstances, and (ii) without advance permission from the SPC well in advance of the meeting.
- The SPC will vote on Professional Probation. Thereafter, the student must sign a Probation Contract with the terms and conditions of the Professional Probation, which may include, but are not limited to, specific academic or behavioral requirements, or other conditions.
- If a student fails to comply with the Probation Contact terms, the student will be dismissed from the Program.

**Professional Probation Appeals**

a. First-level appeal to the Program Director

- The student may submit a written petition for appeal to the Program Director or their designee within five (5) business days from the date of notification of Professional Probation.

- The petition must include the following information:
    - The student's letter to the SPC, including any supporting documentation
- The reason for the appeal, including any new information that was not presented to the SPC
- The Program Director or their designee will notify the student in writing of their appeal decision.

b. Second-level appeal to the Dean

- If the Program Director or their designee denies the appeal, the student may request a second-level review from the Dean or their designee. The request must be submitted in writing to the Dean's Office within three (3) business days from the date of notification of the Program Director's denial.

- The second-level appeal must include the following information:
    - The student's letter to the SPC, including any supporting documentation;
    - The student's petition to the Program Director, including any supporting documentation;
    - The reason for the appeal to the Dean, including any new information that was not provided in the previous steps

- The Dean or their designee will notify the student in writing of their decision, which is final and may not be appealed.

### Consequences of Professional Probation

Students on Professional Probation may not participate in student club organizations in any capacity.

In some states, territories or districts, a student's Professional Probation status must be documented on applications for professional licensure.

Certification by the NCCPA and/or credentialing for institutional privileges from certain employers also may be restricted or limited as a result of Professional Probation.

## DISMISSAL POLICY (A3.15D)

Students dismissed from the Program for any reason may not reapply to and will not be readmitted into the Program.

### ACADEMIC DISMISSAL

Students are subject to Academic Dismissal when they:

- Fail to achieve a 3.00 cumulative GPA and fail a course in the same semester
- Fail more than one course in the same semester
- Are on Academic Probation and (i) do not achieve a cumulative 3.00 GPA at the end of any semester or (ii) do not pass a course
- Fail to successfully remediate a course

The Program Director will notify a student in writing of the dismissal.

Academic Dismissals cannot be appealed. However, if the student is successful in a grade appeal that changes the student's GPA or final course grade so that Academic Dismissal no longer applies, the Academic Dismissal will be repealed. See the Grade Appeal section for more information.

### PROFESSIONAL STANDARDS DISMISSAL AND APPEALS

Students are subject to dismissal for violating the Program's Professional Standards when:

- A student already on Professional Probation violates the IHPAHP or Community Standards (after the conclusion of all appeals to the Office of Community Standards)
- A student already on Professional Probation violates Professional Standards
- They fail to comply with any term of a Professional Probation Contract

The SPC will follow the process below to determine if the student's conduct is subject to dismissal for violating Professional Standards.

- The SPC will notify the student in writing.

- The student must provide a letter to the SPC outlining the details of the violation that led to the dismissal, including objective information related to the violation.

- The SPC will convene to review the letter and any supporting information/documentation, any prior warnings, Probation Contract, the student's academic and/or nonacademic performance, and any other relevant information.

- At this point, the SPC may, in its sole discretion, invite the student to meet with the SPC. If the student is invited to a meeting:
  - The student's attendance and/or participation is optional; lack of attendance, or not participating in the meeting, will not be held against the student.
  - The student may bring one advocate. Advocates must be an SJU faculty or staff member who is not a Program faculty or staff member. An advocate is optional; not bringing an advocate will not be held against the student. The role of the advocate is as a support person only; the advocate will not be able to speak or answer questions on behalf of the student.
    - If the student intends to bring an advocate, they must identify the advocate to the SPC in advance.
    - An advocate may not attend the SPC meeting without the student, (i) barring exceptional circumstances, and (ii) without advance permission from the SPC well in advance of the meeting. At the meeting or a subsequent meeting, the SPC will determine, via majority vote, whether to dismiss. If dismissed, the student will be notified by the Program Director.

A student may appeal a dismissal for violating Professional Standards as follows:

a. First-level appeal to the Program Director

- The student may submit a written petition for appeal to the Program Director or their designee within five (5) business days from the date of notification of

dismissal. At the sole discretion of the Program Director or their designee, the student may be permitted to attend class during the appeal process.

- The petition to the Program Director, or their designee, must include the following information:
    - The student's letter to the SPC, including any supporting documentation
    - The reason for the appeal, including any new information that was not presented to the SPC

- The Program Director or their designee will notify the student in writing of their decision.

    - A successful appeal of dismissal may include a (new) Professional Probation Contract with specific conditions of reinstatement and/or probation. These conditions are final and may not be appealed. If the student fails to satisfy such conditions, the student will be dismissed from the Program without further opportunity to appeal.

b. Second-level appeal to the Dean

- If the Program Director or their designee denies the appeal, the student may request a second-level review from the Dean or their designee. The request must be submitted in writing to the Dean's Office within three (3) business days from the date of notification of the Program Director's denial.

- The second-level appeal must include the following information:
    - The student's letter to the SPC, including any supporting documentation;
    - The student's petition to the Program Director, including any supporting documentation;
    - The reason for the appeal to the Dean, including any new information that was not provided in the previous steps

- The Dean or their designee will notify the student in writing of their decision, which is final and may not be appealed.

# PROGRAM COMPLETION: TIMELINE, TEMPORARY SEPARATION, AND DECELERATION

## TIMELINE FOR PROGRAM COMPLETION

Students enrolled in the Program have five years to complete their master's degree. The time limit begins when the student begins their first course in the Fall 1 (Didactic Phase) semester. Students who exceed the time limit to complete their degree will be dismissed from the Program. Unless other University policy applies, this time-limit is inclusive of any time away from the Program, including temporary separation.

## TEMPORARY SEPARATION

Students may temporarily separate from the University as set forth on SJU's Temporary Separation website.

For more information, see the Temporary Separation website or contact the Office of Student Success at success@sju.edu or 610-660-2656.

## DECELERATION POLICY (A3.15C)

Students must advance sequentially through the Program within their cohort. Students are allowed to join a later cohort, or "decelerate," only if they qualify for a leave under the SJU Temporary Separation policy.

If temporary separation is approved by the University, a student may join a new cohort in a subsequent academic year, beginning at the start of the semester in which the temporary separation began. If the subsequent cohort is at capacity, the student will be offered the next available seat in a following cohort.

To support a successful return to the Program, a student will be required to pass a re-entry examination (cumulative of their completed coursework up to the date of temporary separation) as a condition of matriculating into a subsequent cohort. Therefore, it is strongly recommended that students commit to self-study and review of materials during their leave. The Program will provide reasonable guidance on a course of study to prepare the student for the re-entry examination until the student successfully passes the exam.

# COSTS

## DIRECT COSTS

Direct costs are those that will appear on the SJU bill, such as tuition and fees, housing, and meal plan costs. The Program's direct costs include tuition and a comprehensive fee that supports ancillary services and expenses, including but not limited to: recreational facilities, student events & programs, student associations & groups, and technology. Tuition and fees for the current year for the Program are available on the Program Costs & Financial Aid website. All direct costs are subject to change. SJU reserves the right to make changes in tuition and fees, fees, and room and board charges.

## INDIRECT COSTS

Indirect costs are not billed by SJU but are still necessary for participation in the Program.

Indirect costs include books, supplies, transportation, personal costs, and possibly off-campus room and meal expenses and may vary. Diagnostic instrument and supply costs are dependent on personal selection of equipment.

Estimated indirect costs for the Program are available on the Program Costs & Financial Aid website.

### Technology Requirements

The Program requires all students to have a laptop computer that meets the minimum system requirements to support the software and platforms listed below. Please refer to the product websites for the most up-to-date system requirement information. If the software provider changes the system requirements for laptops, students are responsible for making the appropriate updates to their technology. Tablet devices and cellular phones are not adequate replacements for a laptop computer.

1) Learning Systems:
   TolTech Anatomy Software
   Download options are available on this site as well.

2) Didactic-format
   Assessments:
   ExamSoft/Examplify
   Students will be prompted to download Examplify when an account is created internally for

them.

3) Clinical Phase Assessments:
PAEA Exam Delivery Platform. (Students will also be required to download and install the SecureClient lockdown browser.)

### Travel/Parking/Housing

Travel (including public transportation, gas, or tolls), parking, and housing expenses related to off-site clinical rotations and other educational experiences, are not covered by Program tuition and are the student's personal and financial responsibility.

Program students should expect to attend didactic educational experiences and clinical sites in the Philadelphia area, not all of which may be easily accessible by public transportation. Program students also should expect to be placed at clinical sites outside the immediate Philadelphia area to provide the opportunity to train in a variety of clinical settings. Students are still responsible for all related costs.

## FINANCIAL AID

Information about financial aid options, eligibility, and deadlines is available on the Financial Aid Office web page.

## WITHDRAWAL AND REFUNDS (A3.15D; A1.02K)

Students may not withdraw from an individual course. Doing so effectively ends matriculation in the Program, resulting in immediate dismissal. Students may, however, temporarily separate from the University if approved under the Temporary Separation policy.

Students are strongly advised to consult University policies and procedures prior to withdrawing from a course (which will result in dismissal) or taking a temporary separation: the Withdraw/Refund Policy, the general refund schedule, any specific refund dates that are posted, and all financial aid policies. Tuition refunds (if any) will be made in accordance with SJU policy and/or Department of Education policies for federal financial aid. Note that, in some cases, students who receive federal financial aid funding may be required to return this aid upon withdrawing.

Under SJU policy, students must submit required forms to provide proper notice of withdrawal. Ceasing to attend and/or giving notice to instructor(s) does not constitute proper notice of withdrawal.

There are no refunds for unauthorized withdrawals. Instructions and additional information are available on the Advising: Forms page.

For additional information on tuition refunds, please contact the Office of Financial Aid or the Office of Student Accounts.
Financial Aid Office | Tel:610-660-2500|finaid@sju.edu
Office of Student Accounts | Tel:610-660-2400|bursarsoffice@sju.edu

## STUDENT LIFE

### STUDENT LIFE POLICIES

#### Student Grievances and Allegations of Student Mistreatment Policy and Procedures (A1.02j, A3. 15f,g)

Students with academic complaints should follow the processes set forth in the SJU Student Complaint Policy or Grade Appeal policy, as discussed in the Grade Appeal section, above. Students with complaints about violations of academic honesty should follow the processes set forth in the IHPAHP or contact the SPC.

Students with complaints about violations of community standards should follow the processes set forth in the SJU Student Handbook or contact the SPC.

SJU provides grievance procedures for the prompt and fair resolutions of complaints by SJU students, as detailed below.

| Nature of Complaint | Applicable Procedures |
|---|---|
| Grade appeal | Grade Appeal Policy |
| Academic (excluding grade appeals) | Student Complaint Policy |
| Violations of Academic Honesty | Interim Health Professions Academic Honesty Policy or contact the SPC |
| Violations of Community Standards | SJU Student Handbook or contact the SPC |
| Discrimination, harassment (including sexual harassment, sexual assault, and unethical relationships) or retaliation | Interim Policy Prohibiting Discrimination, Harassment, and Retaliation or contact the Office of Title IX & Equity Compliance (titleix@sju.edu or bias@sju.edu) |

| | |
|---|---|
| Allegations of bias, crime, hazing, sexual harassment, sexual misconduct, behavioral concerns about a student, and other health/safety concerns | Incident Reporting Form |
| Denial of appropriate accommodations or equal access under the Americans with Disabilities Act (ADA) or the Rehabilitation Act of 1973 (Section 504) | Student ADA/Section 504 Grievance Procedures or contact Office of Student Disability Services (sds@sju.edu) |
| Complaints against a University employee that are not otherwise subject to the Interim Policy Prohibiting Discrimination, Harassment, and Retaliation | Contact the Office of Human Resources |
| Student Mistreatment | Student Mistreatment Policy and Procedures or contact the PA Program Director |

External Grievance Procedures

Students have the right to file complaints with the Pennsylvania Department of Education and/or the Middle States Commission on Higher Education. For more information, please contact:

Pennsylvania Department of Education
Postsecondary and Higher Education
607 South Drive, 3rd Floor
Harrisburg, PA 17120
Phone: (717)-783-6786
Email: ra-highereducation@pa.gov

Middle States Commission on Higher Education
1007 North Orange Street, 4th Fl, MB #166
Wilmington, DE 19801
Telephone: (267)-284–5000
E-mail: info@msche.org
Web: https://www.msche.org/complaints/

## Student Mistreatment Policy & Procedures

### Student Mistreatment Policy

For purposes of this Student Mistreatment Policy (the "Policy), Student Mistreatment means behavior directed toward one or more Physician Assistant student(s) that is harmful, disrespectful, and/or injurious, and unreasonably interferes with the student's pursuit of the Program or related activity. Student Mistreatment may include, but is not limited to, insults; harsh language; offensive conduct; disregard for student safety; abuse of authority; unprofessional relationships; and intimidating behavior.

This Policy is intended to address circumstances where other SJU policies and procedures (including grievance procedures) are not applicable, and/or where SJU does not (i) have authority over or (ii) control the disciplinary actions applicable to the alleged perpetrator of the behavior. (For example, when Student Mistreatment is caused by a clinical instructor that is not an employee of the University or a non-SJU student during clinical rotations on the premises of another organization.)

Any form of retaliation against a student for reporting an allegation of Student Mistreatment is expressly prohibited, and allegations of retaliation are subject to applicable SJU policies and procedures.

A student who knowingly submits a false allegation of Student Mistreatment may be subject to disciplinary action under this Handbook and/or other applicable policies and procedures.

### Student Mistreatment Procedures

The following Student Mistreatment Procedures are not intended to supersede any other applicable SJU policies and procedures that could apply to the alleged Student Mistreatment, including, but not limited to, the Interim Policy Prohibiting Discrimination, Harassment, and Retaliation. Please see the Internal Student Grievances Procedures section.

#### Reporting

- Allegations of Student Mistreatment should be reported to the Program Director (or their designee).

- The Program Director (or designee) reserves the right to consult with other University offices or departments (e.g., Community Standards, Title IX & Equity Compliance, Human Resources) to determine the proper procedures for addressing the allegation.
- The Program Director (or designee) will inform the student whether other SJU policies apply and the procedures to follow.

Investigation & Resolution

If the allegation falls under these Procedures, the Program Director (or designee) will initiate a resolution process appropriate for the facts and circumstances of the allegation, including but not limited to:

- Meeting with the student and others involved to obtain more information;
- Implementing reasonable and available measures to support the student (e.g., securing an alternate clinical location);
- If the allegation involves an individual who is not a student or employee of SJU, as applicable, reasonable and appropriate:
    - Informing the institution/organization of the allegation;
    - Obtaining information about how the organization/institution will address the allegation;
    - Suggesting and/or facilitating measures by the institution/organization to support the student (e.g. appointing a different clinical instructor); and/or
    - Suggesting and/or facilitating any other resolution efforts between the student and the organization/institution.

Students who pursue grievances outside applicable complaint processes, including those referenced above and/or the other processes in this Handbook, may violate the Program's Professional Standards.

### Student Disability Services

The University's Office of Student Disability Services ("SDS") coordinates support services for students that self-identify with a disability to ensure equal access to the learning environment. Academic accommodations are determined by SDS through an interactive, individualized process that includes student self-disclosure to SDS, documentation of the disability, and a meeting with SDS staff.

To request an accommodation, students must register with SDS. Information about registration and documentation is available on the Registration Process page. Note that all medical information, accommodation requests, questions about the process, or anything related to

disability services should be directed to SDS – and not to the Program. SDS will communicate with the Program about accommodations in accordance with SJU policies and procedures. A student may be provided reasonable accommodations with respect to the Professional Probation or Dismissal processes if the student is registered with SDS prior to the process for which such accommodations are requested.

In compliance with applicable laws and institutional policies, the Physician Assistant program ensures that students with documented disabilities receive reasonable accommodations to support their academic and clinical success. When a student is granted accommodations, the program will inform the preceptor in a timely and confidential manner, providing specific details about the accommodations needed to ensure the student's full participation in clinical rotations. The preceptor will receive only the necessary information to facilitate the accommodation process, while maintaining the student's privacy and confidentiality in accordance with HIPAA and FERPA regulations. Information shared with the preceptor may include the type of accommodation required (e.g., extended time for tasks, modified duties) but will not include any details about the nature of the student's disability or medical history. It is important for preceptors to work collaboratively with the program to ensure the student's needs are met without compromising the quality of the educational experience, while respecting the student's privacy.

SDS contact information is available on the SDS webpage.
Email: sds@sju.edu
Grievance procedures related to accommodations can be found on the SDS Grievance Procedures website.

### Student Records Policy

In accordance with SJU's Policy on the Confidentiality of Student Records, which conforms with relevant state and federal regulations, including but not limited to The Family Educational Rights and Privacy Act (FERPA), students may request access to inspect and review their education records.

Procedures for requesting an amendment of an education record, along with additional information is available in the Policy on the Confidentiality of Student Records.

## PA STUDENT ORGANIZATIONS

PA students can create and participate in their own student organizations. In addition to applicable policies on student organizations set forth in the Student Handbook, policies and procedures that apply to PA student organizations can be found on the cohort-specific webpage.

## MENTORSHIP & ADVISING

### Mentors

a. Student Mentor Program

The Student Mentor Program utilizes second-year students to establish a relationship with incoming students. The goal of this program is to orient new students to the rigors and demands of PA education. This mentor relationship may help acclimate new students to appropriate preparation methods, helpful resources, information pertaining to professional organizations such as AAPA and PSPA, as well as information regarding rotations.

b. Professional Mentors

The Program recognizes the importance of professional role-modeling. To this end the Program recommends and fosters relationships between its students and PAs working in the community. This relationship may take various forms, from a one-time professional advisement session, completion of master's capstone projects, to shadowing or participation in an elective rotation. The program participates in scheduled social events during which students may meet and network with a larger group of PAs. Students and faculty are also recommended to attend professional PSPA and AAPA conferences, which provide students with networking opportunities with other PAs and health care practitioners.

### Advising

Each student is assigned a faculty advisor who will serve as a guide and supporter throughout the student's enrollment in the program.

Advisors will conduct mandatory, once- per-semester advising meetings, during which Program objectives, both academic and behavioral, will be discussed. These sessions are an opportunity to assess strengths, identify areas for improvement, and to develop plans to capitalize on strengths and improve weaker areas.

The advising process is highly beneficial to the success of the student. Advisor meetings will also occur on an as-needed basis, which can be at the request of the student or the advisor. Other mandatory meetings may include disciplinary meetings, remediation meetings, and research project planning.

Communication is an important aspect of professional development. Although the student is expected to handle situations to the best of the student's own ability, there may be times when it is advisable to make the faculty advisor aware that a difficult situation exists. Talking with an advisor maintains a channel of communication in the event that changes in the student's status must be made.

## Advisor Responsibilities

- Meet with the student at least once per semester in both the Didactic and Clinical Phases of the program:
- Invite the student sometime before week 6 to schedule the once-per-semester advising meeting.
- Assess students using Professionalism Performance Evaluation Form and discuss this with the student (see below).
- Review the Advising Self-Assessment Form with the student
- Discuss strengths and areas for improvement.
- Meet with at-risk students as requested by the Program Faculty and Staff Committee, the SPC, or the Program Director.
- Create and guide program-level remediation for the following: PACKRAT, EOC exam remediation, and specific course level remediations (Exams, OSCEs, Skills) when the Course Director is not available.
- Refer students to appropriate services, including but not limited to, the Student Health Center (SHC), Counseling and Psychological Services (CAPS), the Office of Student Disability Services, the Office of Learning Resources, Invisible Safety Net, Behavioral Intervention Team (BIT), etc., as needed.
- Suggest improvements in time management and preparation skills, as needed.
- Maintain awareness of the student's grades, skills, and professional conduct.
- Assist the student in meeting the instructional objectives, learning outcomes, and competencies of the Program.
- Record once-per-semester meetings with Student Advising Form and file on the shared drive in the student's file.
- Record all other meetings with the Advising Note and place them in the student's file.
- Follow-up with the student regarding progress of any proposed plans.
- Provide updates to the Program Faculty and Staff Committee, the Program Director, and/or the SPC, as appropriate. Meet with an advisee under the request of the student.
- Complete Professionalism Evaluation of student once-per-semester

## Student Responsibilities

- Timely reply to invitations to the once-per-semester advising meeting before the end of week 5 with a proposed date and time of their advising meeting. It is the student's responsibility to schedule the meeting. Meetings should be held before the end of week six.
- Discuss areas of strengths and areas for improvement with the faculty advisor.
- Complete the Advising Self-Assessment Form prior to the start of the meeting.
- Complete the SALAMI wrapper (as appropriate) for any required at-risk advising sessions or remediations.
- Help plan a course of action to remediate deficiencies and capitalize on strengths.

- Meet with faculty advisor on an as-needed basis when problems arise.
- Make an honest effort to follow the plans devised from the session.
- Follow up with the advisor if a specific action is required.
- Review, sign, date and return all at-risk advising, remediation, and advising forms in a timely manner.
- Have a basic familiarity with all University and Program policies and guidelines or know where to locate the appropriate policy or guideline.

## STUDENT HEALTH AND WELLNESS

### STUDENT HEALTH INSURANCE REQUIREMENTS

Personal health insurance coverage is required for participation in the Program, and any costs that students incur as a result of injury, illness (whether on campus or during off-site clinical rotations) or hospitalization while enrolled in the Program are a student's sole financial responsibility.

Students will be required to provide proof of a valid health insurance policy prior to matriculation in the Program and again at various points throughout the Clinical Year. Note that health insurance coverage is a requirement of clinical placement sites, and failure to show proof of a valid insurance policy will result in removal from clinical rotations, which in turn may result in delay of graduation from the Program.

Students may choose to be covered under SJU's Student Health Insurance Plan (SHIP) or another comparable plan that is filed and approved in the US and compliant with the Affordable Care Act (ACA). Please note that SHIP coverage is from mid-August to mid-August and students are required to have health insurance coverage through graduation. Students are also required to have health insurance that will provide coverage for clinical placement locations.

Students will be automatically enrolled in and charged for SHIP ***unless*** they submit a waiver form annually to opt-out of SHIP by the deadline. The waiver will be reviewed to ensure that their plan is compliant.

### STUDENT IMMUNIZATION & TRAVEL HEALTH POLICY (A3.07A AND B)

(A3.07a and b) PA students are required to meet specific health requirements in order to participate in the PA program. All PA students are required to follow the PA pre-matriculation steps as outlined in the welcome letter and the pre-clinical rotation requirements as directed by the Director of Clinical Education. S These requirements include medical clearance required for participation in the PA program, annual physicals, immunizations, and other items. PA program

health and immunization requirements are based on current Center for Disease Control (CDC) guidance and recommendations for health professionals. Students are financially responsible for all charges associated with meeting pre-matriculation and clinical requirements.

## Immunization Policy

Students are required to provide proof of immunization at the start of the PA program. The following Immunizations or positive titers are required for all PA students:

MMR (Measles, Mumps, Rubella)

Varicella (if you have not had chickenpox, or titers are negative)

Hepatitis B

Polio

Meningococcal

(optional) COVID-19 &

Booster

Tdap (Tetanus, Diphtheria, Pertussis) - (Adacel or Boostrix are acceptable)

Influenza (required on a yearly basis)

Pneumococcal (optional, recommended > 65 years old, or immunocompromised)

Students may complete their clinical rotation in a state other than Pennsylvania. Please note that certain states and clinical sites may have their own vaccination/immunization requirements. For more information please visit this CDC website.

IMPORTANT NOTE: Exemptions accepted by the University related to vaccination requirements do not transfer or otherwise apply to clinical placements. Each student must comply with the vaccination requirements for all clinical sites to which the student is assigned. It is within the sole discretion of each clinical site whether or not to allow for an exemption/waiver from vaccination requirements. Many clinical sites will not accept exemptions to their vaccination requirements. Please direct any questions to the Director of Clinical Education.Students not complying with clinical rotation vaccination policies may have their graduation delayed and, in some cases, may not be able to complete the curriculum. In addition to delays in graduation, students may face a professionalism review.

### Health Screening

Students who have not completed all pre-matriculation requirements, including, but not limited to, health screening forms will not be permitted to participate in courses, assignments, or

clinical rotations. This delay may disrupt the student's curriculum timeline and force them to sit out of the program's didactic curriculum until the following year or delay the completion of their clinical rotations.

Depending on the requirements of the affiliation agreement between the clinical site and the University, the documentation requested may be coordinated by or at the training site or facilitated by the University using campus-based programs or by an external agency. In all cases, the student is ultimately responsible for ensuring the requirements have been satisfied.

### Drug Screening

Students who are required to participate in experiential education as part of their academic program may be required to complete a drug screen and provide documentation of a negative drug screen as a condition of participation in experiential learning. Students must sign a release to have this information reported to the assigned experiential learning site and the University. The type of drug screen required may vary depending upon each experiential site; therefore, students should coordinate with the Director of Clinical Education for more detailed information. Students are financially responsible for all costs associated with required drug screens, and more than one may be required depending on clinical placements.

Students who have a positive drug screen or fail to comply with this policy may not be able to complete their clinical rotation and are responsible for any additional costs or delays in Program completion that may result. This may include delayed progression in their program, a delay in graduation, and/or the inability to successfully complete their program.

PA students should refer to university alcohol policies and drug policies for more information. Suspected failure to comply may be reviewed by the Student Progress Committee and is subject to Community Standards review and sanctioning, in accordance with the Office of Community Standards policies and procedures and the policies outlined in the University Student Handbook.

(A3.07B) Saint Joseph's University Physician Assistant Program does not allow for elective international clinical rotations or didactic coursework.

## MEDICAL PROVIDER POLICY (A3.09)

The faculty, staff, the Program Director, and the Medical Director must not participate as health care providers for students in the program, except in emergency situations. If a student has a medical problem, they should be evaluated at the nearest emergency department or see the outside provider of their choice. If a student is interested in seeking out counseling, they can visit SJU Counseling and Psychological Services (CAPS) for mental health services.

At no point in time may principal faculty, the Program Director, or the Medical Director participate as health care providers for students in the program, except in an emergency

situation. If a student has a medical problem, they should be evaluated by the nearest emergency department, or by their personal medical provider of their choice. The Program, faculty and staff do not have access to student health records but requires students to submit proof of meeting program health screening and immunization requirements, which may be maintained and released by the Program by written permission of the student.

## STUDENT MEDICAL RECORD POLICY (A3.19)

Student health records are confidential and are not accessible or reviewed by the Program faculty, principal faculty, instructional faculty or staff. Immunization records and screening results are an exception to this, and are maintained and released on an as-needed basis with written permission from the student. It is not permissible for students to send information to the PA Program in any other form, including but not limited to SJU Student Health Requirements, Office of Student Disability Services paperwork, and health care provider excuse notes containing health information. Students must utilize the SJU Student Health Portal for health information.

### Procedures for Timely Access and/or Referral of Students with Personal Issues (A3.10)

The SJU PA Program is committed to supporting our students both personally and professionally. In addition to assigned faculty advisors, an open-door policy within the department for walk-in student support, and weekly intradepartmental communication, the following resources and procedures are available for timely access to care for personal issues.

Faculty and staff are expected to refer students in need of assistance with personal issues and/or academic issues using the SJU Invisible Safety Net program, which allows for a team of SJU personnel to reach out to the student for support independent of academic faculty.

### SJU Student Medical Emergency Response

Call 911 and contact Public Safety immediately.

Hawk Hill - (610) 660-1111
University City - (215) 596-7000

### Starfish

All students and faculty have accounts in Starfish. Starfish software provides instructors a better way

to connect with students about their class performance and allows support staff to better assist students who may be facing academic challenges. Starfish also lets students schedule appointments with faculty and support professionals, access their student success network and easily find contact information for campus offices.

### Support from the Office of Diversity, Equity, and Inclusion

Students are supported by the SJU Office of Diversity, Equity, and Inclusion.
Support and resource information can be found in the Student Resource section.

### Anonymous Referral to Behavioral Intervention Team

Anonymous Referral to Behavioral Intervention Team

In order to promote the safety and health of all Saint Joseph's University students, the Behavioral Intervention Team (B.I.T.) addresses student behaviors that may be inappropriate or concerning.

Any member of the SJU community can refer to the B.I.T. To refer a student behavior to the BIT for review, evaluation and possible intervention. Please see the Anonymous Behavioral Concern Form.

### SJU Health Center

For the most up to date information about eligibility, services, and hours visit the Student Health Center webpage.

Students must schedule an appointment to be evaluated and treated in the Hawk Hill center. To schedule an appointment at either Student Health Center,
use the Health Portal or call Hawk Hill Student Health Center at (610) 660-1175.

If a student needs medical assistance at a time when the Student Health Centers do not have available appointments, please refer to the Local Resources webpage. Transportation options include the Office of Public Safety and Security Escort Services: Hawk Hill at (610) 660-1111, University City at (215) 895-1117. Be sure to leave adequate time as the escort services are based on availability.

### SJU Division of Student Life Student Outreach and Support

The Office of Student Outreach & Support offers individual support, guidance, and referral to helpful resources for all students during critical incidents and difficult situations. The office's staff manage outreach and follow-up care for students who are experiencing crisis or distress that impacts their social, personal, and/or academic stability.

### Counseling Services

Counseling and Psychological Services, located on Hawk Hill in Sister Thea Bowman Hall, promotes the psychological wellbeing of SJU students through the provision of a variety of therapeutic interventions and outreach programs. The delivery of these services is framed by "transformative learning goals" and occurs within a campus climate that supports the whole person; academically, socially, physically and spiritually. The website for Counseling and Psychological Services contains more information and the ability to make an appointment.

SJU encourages students to recognize that academic success requires students to be emotionally and physically well. If you are having difficulty coping with stress associated with the classroom or are experiencing other personal issues, please follow the below instructions.

In the event of a personal emergency during normal working hours, students can call 610-660-1090 or come in person to Sister Thea Bowman Hall.

After office hours, on weekends and holidays, students may access support for emergencies by calling 911, Hawk Hill SJU Public Safety (610-660-1111) or accessing after hours counselors (610-660-1090, option 2).

All services listed above are all free and confidential.

*When helping someone in crisis, it is important to remember to:*

- clarify the problem
- communicate your commitment to help
- contact appropriate professional staff
- talk in a calm, direct, and reassuring manner
- stay until assistance arrives

The following resources are additional sources of help:

| | |
|---|---|
| Fire or Medical Emergencies | 911 |
| Philadelphia Mental Health Crisis Line | 215-685-6440 |
| Suicide Prevention Lifeline | 988 |
| Crisis Text Line | Text START to 741-741 |
| SJU Rape Education Prevention Program (REPP) | 610-733-9650 (24hr helpline) |
| Addiction Hotline | 844-222-0553 |
| AIDS Hotline | 800-342-2437 |
| Women Organized Against Rape | 215-985-3333 |
| Domestic Violence Hotline | 866-723-3014 |

**Substance Use Resources**

The Office of Student Outreach and Support coordinates alcohol and drug education and programming as well as materials to assist students with issues concerning alcohol and drug usage.

Student Resources:

Office of Student Outreach and Support | Alcohol & Drug Education https://www.sju.edu/offices/student-life/sos |610-660-3462

Collegiate Recovery Program
https://www.sju.edu/recovery-residence recovery@sju.edu

Student Health Center
https://www.sju.edu/offices/student-life/student-health-center

Hawk Hill: 610-660-1175
University City: 215-596-8980

Counseling and Psychological Services (CAPS)
https://www.sju.edu/offices/student-life/caps

Hawk Hill: 610-660-1090
University City: 215-596-8536

Mutual Aid and 12-Step Meetings (on SJU's campuses)
Please see this website:

https://www.sju.edu/offices/student-life/sos/recovery-residence/resources

Alcoholics Anonymous
(off-campus) https://www.aa.org

Narcotics Anonymous
(off-campus) https://na.org/

*For additional resources please visit this website:*
*https://www.sju.edu/offices/student-life/sos/recovery-residence/resources*

*The Drug-Free Schools and Communities Act Biennial Review provides more detailed information about Saint Joseph's University alcohol and drug programs* (https://www.sju.edu/offices/student-life/sos/alcohol-drug-education).

## Student Disability Services

Students are encouraged to reach out to the Office of Student Disability Services as needed.

# STUDENT SAFETY

## INFECTIOUS AND ENVIRONMENTAL HAZARDS PREVENTION POLICY (A3.08A)

### Universal Precautions, Prevention and Safety Education

(3.08A) This section discusses general information and prevention. Please see section on sharps and infectious disease exposure for detailed policies and procedures in the event of a biohazard exposure, needle stick, sharps injury, or potential bloodborne pathogen exposure.

All students must be present for all training related to universal precautions and student safety prior to engaging in any educational activities. Please see below for procedures and care after exposure, and information regarding financial responsibility of such events.

### Bloodborne Pathogen Training

In any situation involving possible exposure to blood or potentially infectious materials, students should always practice Universal Precautions and try to minimize exposure by wearing protective barrier devices (i.e., gloves, splash goggles/face shields, gowns, pocket mouth-to-mouth resuscitation masks, etc.).

All students will need to complete online video training on Bloodborne Pathogen Exposure prior to starting any educational activities. Students are required to pay for this training which is included in their mandatory student fees. All students are required to demonstrate competency in this topic prior to possible exposure to blood or potentially infectious materials.

### Universal Precautions

Students are responsible for following OSHA Guidelines for universal precautions for all learning experiences, including the use of protective gloves, eyewear, and clothing, the proper use and disposal of sharps, regular hand washing/hand sanitation, PPE use, and other precautionary measures. These guidelines will be presented in the Surgery and PA Professional Issues didactic modules and pre-clinical orientation activities prior to starting clinical rotations. Students should

follow universal precautions in any didactic or clinical setting, regardless of the location. Students should also follow any additional precautions required by each clinical rotation (including individual patient encounters).

Any documented allergies to latex products should be reported to the preceptor and the Director of Clinical Education. Each student is responsible to supply any latex-free products they may need, if they are not otherwise available at a given clinical site.

## Universal Precautions Guidelines

1. Avoid direct contact with blood, body fluids, secretions, excretions, mucous membranes, non-intact skin, and lesions

2. Avoid injuries from all "sharps"

3. Avoid direct contact with items, objects, and surfaces contaminated with blood, body fluids, secretions, and excretions

4. Dispose of all "sharps" promptly in special puncture-resistant containers

5. Dispose of all contaminated articles and materials in a safe manner, as prescribed by law in practice, using Universal Precautions also requires:

- Students wash their hands immediately, or as soon as feasible, after removal of gloves or other personal protective equipment.
- Following any contact of body areas with blood or any other potentially infectious material, students wash their hands and any other exposed skin with soap and water as soon as possible. Students are to also flush any exposed mucous membranes with water.
- Depending on job duties and risk of exposure, use appropriate barriers, which may include gloves, gowns, aprons, hair covers, caps, shoe covers, hoods, lab/white coats, masks, goggles/safety glasses, N95 masks, and/or face shields
- Contaminated needles and other contaminated sharps are not to be bent, recapped, or removed. Recapping may only be done if:
  - It can be demonstrated that there is no feasible alternative.The action is required by a specific medical or research procedure.
  - In the two situations above, the recapping or needle removal is accomplished using a mechanical device or is already designed with a one-handed safety device.
- Contaminated sharps are placed in appropriate containers immediately, or as soon as possible after use. Containers must be disposed of when approximately 3/4 full or earlier.
- Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses are prohibited in areas where there is potential for exposure to bloodborne pathogens.
- Mouth Pipetting/suctioning of blood or other infectious materials is prohibited.

- All procedures involving blood or other infectious materials will be conducted in a manner that will minimize splashing, spraying, or splattering and generation of droplets of these materials.
- Specimens of blood or other materials are placed in designated leak-proof containers, appropriately labeled, for handling and storage.
- If outside contamination of a primary specimen container occurs, that container is placed within a second leak-proof container, appropriately labeled, for handling and storage. (If the specimen can puncture the primary container, the secondary container must be puncture resistant as well).

## Personal Protective Equipment

- PPE including gloves, are to be removed after each use and PROPERLY disposed of.
- Gloves and other PPE are NOT to be worn from one patient or activity to another.
- Reusable personal protective equipment (including white coats) is to be cleaned regularly
- and decontaminated as needed at the student's expense.
- Single-use contaminated personal protective equipment (or equipment that cannot, for whatever reason, be decontaminated) should be disposed of as biohazardous waste. Any garments penetrated by blood or other infectious materials are removed immediately, or as soon as feasible.
- All personal protective equipment is removed prior to leaving the patient room or clinical area.
- Gloves should be worn in the following circumstances:
  - Whenever students anticipate hand contact with potentially infectious materials, fluids, and/or upon instruction by instructional faculty or preceptors.
  - When performing vascular access procedures.
  - When handling or touching contaminated items or surfaces.
  - Examining a patient on any type of contact precautions
  - At the student's digression
- Disposable gloves are replaced as soon as practical after contamination or if they are torn, punctured, or otherwise lose their ability to function as an exposure barrier.
- Masks and eye protection (such as goggles, face shields, etc.) are used whenever splashes or sprays may generate droplets of infectious material.
- Protective clothing (such as lab coats, gowns and/or aprons) is to be worn whenever potential exposure to the body is anticipated.

**SHARPS & INFECTIOUS DISEASE POST EXPOSURE POLICIES AND PROCEDURES (A3.08B & C)**

## Emergent Accident/Exposure Protocols

Please refer to the Needlestick and Bloodborne Pathogen protocol for incidents involving needlestick and bloodborne pathogen exposures (e.g. blood or other bodily fluids). This section applies to all emergent incidents involving accidents and exposure (e.g. chemical exposure) that should be treated as a medical emergency.

If applicable, the affected student should wash the area thoroughly with soap and water. (For eye and mucous membrane exposure, flush copiously with water for a minimum or 15 minutes, and use designated eye wash stations or chemical showers if applicable). In the event of a hazardous substance exposure, do what is necessary to prevent further injury or illness. Wash or flush exposed skin or eyes/mucous membranes with copious amounts of water for at least 15 minutes at an appropriate location (e.g., eyewash, safety shower, sink); and/or move to a safe environment to get fresh air for an inhalation exposure. Seek immediate medical attention.

In an emergency taking place on campus, if there is a hazardous substance exposure, or serious injury or illness, call 911 and then the Office of Public Safety (610-660-1111). Students are advised to seek emergent screening and/or treatment at the nearest Emergency Department. Do not move a seriously injured person unless they are in further danger.

Students should follow all site-specific protocols for off-campus incidents, as outlined in safety and security protocols for the specific course or clinical rotation site.

After emergent medical care has been provided, students are expected to follow applicable accident and exposure policies listed below.

## Needlestick & Bloodborne Pathogen Exposure Protocols & Financial Information (3.08b and c)

### Needlestick and Bloodborne Pathogen Exposure Protocol

Exposure or needlestick incidents include:

1) puncture injury involving a potentially contaminated needle or other sharp instrument;

2) splash of blood or other potentially infectious materials to the eyes, mouth, or other mucous membranes;

3) blood or other potentially infectious materials in contact with broken skin; and/or human bites that cause a break in the skin.

In the Event of an Exposure or Needlestick Incident:

1. Immediately wash or flush the exposed region with copious amounts of water and for at least 15 minutes.

2. If a needlestick or puncture injury, milk the wound to express blood and wash as

recommended above.

3. If off-campus on a clinical rotation, immediately notify your clinical preceptor and the Director of Clinical Education. Failure to notify your clinical preceptor and the Director of Clinical Education may be grounds for a professionalism review.

a. The Director of Clinical Education will notify the Program Director of an incident within 24 hours.

4. If off-campus for any form of didactic instruction, immediately notify your instructor(s). Failure to notify your instructor may be grounds for a professionalism review.

a. The instructor(s) will notify the Program Director of an incident within 24 hours.

5. If on-campus for any form of didactic instruction, immediately notify your instructor(s). Failure to notify your instructor may be grounds for a professionalism review.

b. The instructor(s) will notify the Program Director of an incident within 24 hours. The instructor should contact Public Safety and advise the student to seek post-exposure evaluation and potential treatment as soon as possible at the nearest emergency department and within three to four hours of exposure, to the extent possible.

6. Attempt to obtain the HIV/HBV/HCV status of the source individual. High-risk exposures may require immediate prophylactic treatment.

7. Exposures and needlestick incidents should be treated as a medical emergency. Seek post- exposure evaluation and potential treatment as soon as possible and within three to four hours of exposure, to the extent possible.

Where to go Following an Exposure or Needlestick

Incident Clinical sites with capability to provide care

Students who are exposed to bloodborne pathogens at a clinical site with the capability to provide care following an incident are expected to follow all instructions, guidelines, and recommendations of the clinical site. Many clinical facilities will initiate post-exposure procedures/protocols, including, but not limited to, risk evaluation, screening, and treatment.

Clinical sites without capability to provide care

Students who are exposed to bloodborne pathogens at a clinical site that does not have the capabilities to provide post-exposure care should immediately go to the nearest hospital emergency department or hospital-affiliated urgent care center. Students who are unable to transport themselves are advised to call 911 for an ambulance to take you to the hospital emergency department immediately.

Faculty and/or Preceptor Obligations

The student's instructional faculty or preceptors are responsible for providing the responders and/or medical facility with the Safety Data Sheets (SDSs) and the identity of the hazardous substances regarding the student's potential exposure. (Do not delay obtaining needed medical attention while securing the proper SDSs, if applicable.)

## (A3.08B) Post-Exposure Procedures

If a student is involved in an incident where exposure to infectious and/or environmental hazards may have occurred, PA program faculty and/or preceptors are responsible for:

1. Communicating to students that needlestick and exposure incidents are medical emergencies, and that students should seek a medical consultation and treatment (if necessary) as expeditiously as possible; and
2. Investigating the circumstances surrounding the exposure

incident. Follow-Up Care

Students should see their personal health care provider for any and all follow-up care, counseling, subsequent screenings, and treatment.

(A3.08C part 1 of 2) Student Financial Responsibility for Needlestick and Bloodborne Pathogens

Students are required to obtain and maintain adequate personal health insurance throughout their enrollment in the PA program. Students are responsible for using their own personal health insurance to pay for any medical visits (including, but not limited to, risk evaluation; screenings; testing; and treatment) associated with the exposure or needlestick incident. Students are responsible for copayments, deductibles, coinsurances, or any other uncompensated healthcare costs.

University Accident Insurance

**Note: The student's personal health insurance should be used as the primary source of coverage. Students are responsible for all medical and/or personal expenses resulting from treatment of injury incurred during clinical training or experience. This insurance coverage is in excess of the student's personal health insurance.**

The University has a Student Accident Insurance policy through the National Union Fire Insurance Company of Pittsburg, Pa (AIG). Students enrolled in the PA program who are injured while participating in scheduled, sponsored, and supervised clinical training activities are covered by this policy. The benefits and limits are outlined below:

Accidental Needlestick & Splatter Exposure Benefit: Screening Test Benefit: $5,000 per Incident. Indemnity Benefit: $50,000 per Incident.

Accident Medical Expense Benefit (Excess): $25,000. Dental sublimit: $250.

Accidental death & dismemberment benefit: $10,000 maximum. Benefit amounts are scheduled as a percentage of the maximum. Loss also includes sight, speech, and hearing. $500K per accident aggregate limit.

Step-By-Step Claim Instructions:

1. Download the Claim Form using your SJU account.
2. Complete all of Section B.
3. Obtain a copy of the following supporting documents:
    a. Incident report
    b. Itemized medical bills
    c. Explanation of benefits (from your personal health insurance provider)
    d. Payment receipts
    *e. If you are not covered under a personal health insurance, please indicate this on the Claim Form.*
4. Send the Claim Form and supporting documents to ogc@sju.edu. The Office of the General Counsel will arrange to complete Section A of the Claim Form. The completed form will then be returned to you.
5. Submit the Claim Form and supporting documentation to AHClaims@aig.com.
    a. Alternatively, the Claim Form and supporting documentation can be mailed to AIG at the following address: AIG Accident & Health Claims, P.O. Box 25987, Shawnee Mission, KS 66225 or via fax 866-893-8574.
    b. AIG support number: 800-551-0824

All costs and expenses remain the responsibility of the student. In the event a claim under the Student Accident Policy is denied, in whole or in part, the student remains responsible for any copayments, deductibles, coinsurances, or any other uncompensated healthcare costs and expenses.

Student Workers

Any student who is employed by the University in a paid position, and is injured during the performance of their duties should contact the Office of Human Resources and follow the applicable Workers Compensation policies and procedures. Supervisors of such students should investigate all incidents to the extent possible and complete any required Human Resources forms.

Other Accident and Injury Protocol

This protocol applies to all other injuries excluding needlestick and bloodborne pathogen exposure.

a. If off-campus on a clinical rotation, immediately notify your clinical preceptor and the Director of Clinical Education. Failure to notify your clinical preceptor and the Director of

Clinical Education may be grounds for a professionalism review.

b. The Director of Clinical Education will notify the Program Director of an incident within 24 hours.

2. If off-campus for any form of didactic instruction, immediately notify your instructor(s). Failure to notify your instructor may be grounds for a professionalism review.

a. The instructor(s) will notify the Program Director of an incident within 24 hours.

3. Students who are injured at a clinical site with the capability to provide care following an incident may, if they choose, seek treatment at the clinical site.

4. Students who are injured at a clinical site that does not have the capabilities to provide care or treatment should immediately go to the nearest hospital emergency department or hospital- affiliated urgent care center (if the injury is severe or high-risk). If the injury is not severe or high risk, students should seek treatment from their healthcare provider.

5. If on-campus for any form of didactic instruction, immediately notify your instructor(s). Failure to notify your instructor may be grounds for a professionalism review.

b. The instructor(s) will notify the Program Director of an incident within 24 hours. The instructor should contact Public Safety and advise the student to seek potential treatment as soon as possible at the nearest emergency department or urgent care.

6. Students should see their personal health care provider for any and all follow-up care, counseling, subsequent screenings, and treatment.

(A3.08C part 2 of 2) Student Financial Responsibility for Other Accidents and Injuries

Students are required to obtain and maintain adequate personal health insurance throughout their enrollment in the PA program. Students are responsible for using their own personal health insurance to pay for any medical visits (including, but not limited to, risk evaluation; screenings; testing; and treatment) associated with the exposure or needlestick incident. Students are responsible for copayments, deductibles, coinsurances, or any other uncompensated healthcare costs.

University Accident Insurance

The University has a Student Accident Insurance policy through the National Union Fire Insurance Company of Pittsburg, Pa (AIG). Students enrolled in the PA program are covered by this policy. The accident medical expense benefit (as defined in the policy) includes a maximum of $25,000 with a dental sublimit of $250. This benefit is separate and apart from the accident needlestick and exposure benefit.

This benefit is secondary to all other insurance (e.g. personal health insurance) that the student is covered by. Medical charges must first be submitted to the student's health insurance plan prior to filing a claim under this Student Accident Policy.

If a student suffers an injury that, within 90 days of the date of the incident, requires the student to be treated by a physician, this benefit can cover the usual and customary charges (as defined) incurred for medically necessary covered accident medical services (as defined) received due to that injury up to the maximum amount. Benefits are payable 52 weeks after the date of the accident causing the injury.

When an incident occurs, the following process must be followed in order to receive potential reimbursement of certain medical costs associated with an incident. Please note that a new claim is required for each new injury.

1. The student should obtain an incident report (detailing the incident and nature of the injury) from the clinical site and submit it to the Program Director and the Office of the General Counsel (ogc@sju.edu) as soon as possible.
    a. In the event that the injury takes place on-campus, the student should request a copy of the incident report from the Office of Public Safety & Security.
2. Students should submit any and all itemized medical bills, receipts, explanation of benefits, and copies of payment receipts (proof of payment) in connection with all medical expenses claimed, including prescription medication to the Program Director and the Office of the General Counsel ogc@sju.edu.

Students should not send any medical records or health information to the PA Program or the Office of the General Counsel.

All supplemental costs and expenses remain the responsibility of the student. In the event a claim under the Student Accident Policy is denied, in whole or in part, the student remains responsible for any copayments, deductibles, coinsurances, or any other uncompensated healthcare costs.

Student Workers

Any student who is employed by the University in a paid position, and is injured during the performance of their duties should contact the Office of Human Resources and follow the applicable Workers Compensation policies and procedures. Supervisors of such students should investigate all incidents to the extent possible and complete any required Human Resources forms.

## SAFETY & SECURITY PROTOCOLS AT SJU

### SJU Public Safety

The following policies and procedures are the appropriate security and personal safety measures for students in all locations where instruction occurs.

For students on clinical rotations, clinical sites may have their own safety and security policies that may supersede or be more specific than these. If a clinical site does not have their own

Safety and Security policies, students are asked to refer to these.

Students are required to review the SJU Office of Public Safety and Security webpage.
Please review and become familiar with the following:
University Emergency Operations Plan

If a student encounters any issues with safety, they may contact the following:

- Emergency: 911
- University City Dispatch: 215-895-1117
- Hawk Hill Dispatch: 610-660-1111
- Security Escort Service: 610-660-1620

Emergency call boxes are located throughout the entire campus.

SJU SAFE App with Public Safety applications should be downloaded by all students.
Students will attend an orientation session from the SJU Public Safety Department.
In the event of a public safety incident; in addition to contacting the SJU Public Safety and/or law enforcement, the student must fill out an Incident Reporting form, found in this Handbook.

### Evacuation Plans

The evacuation map for IPEX, where the majority of our educational activities are, can be found here. The IPEX post-evacuation meeting is the ARC parking lot. Details of general evacuation plans for all areas of Hawk Hill Campus and the University City campuses can be found on the SJU Emergency Preparedness webpage.

In the event of an emergency on campus, the SJU Department of Public Safety has the authority to evacuate campus buildings. An evacuation of a building does not automatically result in a cancellation of classes or the closing of all or part of the University. Only the University President or his designee has the authority to approve cancellation of classes or closing of the University.

In the event of an emergency off campus at a location where clinical rotations occur, all students, faculty and staff must follow the recommendations and procedures as designated by the clinicians, staff of the clinical practice site and/or emergency personnel. In the event that a clinical site does not have defined safety and security measures the following general procedures should be followed.

## STUDENT INVOLVEMENT IN ONGOING SELF-ASSESSMENT PROCESS

The Program is a dynamic entity. The Program faculty, staff, and university administrators are

constantly engaged in activities that provide evaluation data on the program's performance. Student input is a vital part of the evaluation process. Feedback from student evaluations can identify strengths and areas for improvement for the Program and may guide necessary changes in the curricula or clinical components. During the Program, students are continuously evaluating many aspects of the Program, including but not limited to courses, lecturers, clinical instructors, rotations, clinical sites, and textbooks.

All program students are obligated to participate in all ongoing Program evaluation efforts in a professional and appropriate manner. Where possible, data collection will include quantitative and qualitative feedback. All efforts to maintain anonymity of survey data will be maintained unless a student writes vulgar/hate speech or threatening language.

## GENERAL PROGRAM EVALUATION

Methods of program evaluation that employ student's input may include:

| | |
|---|---|
| - Didactic and Clinical Course Evaluations<br>- Instructor (Lecturer, Preceptor, etc.) Evaluations | - Curriculum Committee<br>- Student Government Association Feedback |

| | |
|---|---|
| - Admissions Process Survey<br>- Student Self-Assessment<br>- Preparation Surveys<br>- Class Meetings with Faculty Representative | - Focus Groups<br>- End of Didactic Phase Survey<br>- End of Curriculum Survey<br>- Post-Graduation Alumni surveys |

Additional methods of program evaluation include, but are not limited to:

- Analysis of student performance on NCCPA PANCE
- Analysis of student performance on PACKRAT exams
- Analysis of student performance on EOR exams
- Analysis of student performance on the EOC exam
- Analysis of student performance during Didactic Phase
- Analysis of admissions metrics and prerequisites
- Analysis of data collected at the end of Didactic Phase/Program, graduate/employer surveys
- Student input (student representatives/ Program Director forums)
- Faculty advising sessions
- Discussion and observation by clinical preceptors
- Discussion and observation by Program faculty
- Discussion of student performance/concerns/issues in weekly Program meetings

### Student Evaluation of Didactic Courses & Non-site Aspects of Clinical Rotation Courses

At the end of each course, SJU will administer course surveys in accordance with the SJU policies and procedures. Students are typically provided time within scheduled class time to ensure that students have enough time to reflect and provide feedback for our ongoing self-assessment process.

### Student Evaluation of the Site and Preceptor

This evaluation allows students to provide constructive feedback for preceptors and help guide the future use of clinical sites by the Program. Student feedback should offer insight, constructive criticism, and informative advice, and should not be judgmental or accusatory in nature. This contribution from students can be a powerful tool in improving the Program. Guidelines for giving constructive feedback include the following points:

- Base it on first-hand, personally observed/experiential data (and not on second-hand knowledge of the preceptor/site)
- Keep the tone professional, well-reasoned, and articulate
- Report specific information rather than generalized impressions
- Provide suggestions for improvement, if needed
- Provide commentary that would help guide other PA students rotating on the site

## Student Employment Policies (A3.04, A3.05A and B, A3.15E)

### PA Student Employment for Program Policy (A3.04)

The Program does not allow or require that any student work for the PA Program, at any time.

### PA Students as Instructors of Staff Policy (A3.05A and B)

The Program does not allow for any student to substitute for or function as instructional faculty, clinical staff, or administrative staff. Students may not be employed at a clinical site, or accept payment for participation in any clinical rotation. Accepting payment as a student could result in the loss of malpractice liability coverage for the student, along with further disciplinary actions for the student and for the clinical site and/or preceptor.

### PA Student Employment Policy (A3.15E)

The Program strongly advises against any employment while participating in the Program. Program obligations and schedules will not be altered due to a student's employment. It is further expected that employment obligations must not interfere with the student's progress or responsibilities while enrolled in the Program. In addition, employment interferes with learning opportunities during clinical rotations. The schedule at the clinical site will not be amended for student employment.

Students who are involved in or commence volunteer or paid work during the course of their PA training cannot use their affiliation with the Program in any aspect of that job.

Work outside the Program undertaken by the student, independent of the Program, is not covered by the liability offered for clinical work associated with the educational experience, and students may not represent themselves as SJU PA students.

## INFORMATION, POLICIES & PROCEDURES SPECIFIC TO CLINICAL PHASE

### GENERAL GUIDELINES

#### Pre-Clinical Requirements

In order to begin clinical rotations, students must comply with the following non-academic Program requirements.

Vaccination exemptions accepted by SJU do not transfer or otherwise apply to clinical rotations. Questions about vaccination requirements for clinical sites should be directed to the Director of Clinical Education.

Students should maintain a functional mobile phone number and SJU email. Students are responsible for updating contact information with the Program throughout the Clinical Phase. Students must check Program email at least once every 24 hours.

Pre-clinical requirements must be completed prior to the start of clinical rotations. For most students, prerequisites must be completed by the end of the Summer I semester.

#### Requirements for Participation in Clinical Rotations

SJU must satisfy certain contractual requirements imposed by training sites as a condition of student participation in clinical rotations. Additionally, prior to being permitted to begin or continue rotations at off-campus training sites, students may be required to:

- Provide a social security number
- Provide a medical history including immunity to infectious diseases by documented history of infectious diseases (e.g., measles, mumps, rubella, varicella, influenza, covid, hepatitis B) or vaccination including titers for certain agents
- Have a negative two-step PPD, or QuantiFERON gold, and/or chest x-ray (if indicated)
- Complete a physical examination
- Complete all required immunizations/vaccinations or positive titers (see complete list)
- Obtain and pass a N95 fit test
- Submit to criminal background checks with disclosure to site of any convictions consistent with their criteria
- Submit to drug screens with disclosure to the site of any positive findings for drugs that are taken without medical supervision (Please see the University Handbook for more information).
- Provide evidence of and maintain personal medical insurance coverage at all times while at off-campus training sites
- Provide BLS, ACLS, and any other clinical training certifications as required by site
- Be responsible for transportation to experiential sites
- Provide or create an NPI number

## Internship (Rotational) & Professional Liability Coverage

PA students are covered under the University's internship and professional liability policy during their participation in clinical training.

It is expected that all incidents involving students and patients will be reported immediately by e- mail to the Director of Clinical Education. The Director of Clinical Education is responsible for promptly notifying (within 24 hours) the PA Program Director and Office of the General Counsel upon receipt of information related to an incident at a clinical site.

## Goals for the Clinical Phase

The Clinical Phase is designed for students to gain hands-on experience through supervised, direct, and meaningful patient care. The Clinical Phase includes some didactic courses, as well as nine (9) clinical courses in five-week blocks that include a clinical rotation. The main goals of the Clinical Phase include:

- Apply clinical knowledge to patient care.
- Complete a directed history and physical exam.
- Practice oral presentations and formulate an assessment and plan.
- Perform clinical procedures.
- Improve critical thinking skills.

- Encounter patients from diverse populations.
- Develop an understanding of the healthcare system and work as part of a healthcare team.
- Expand on the fund of medical knowledge.

At the conclusion of clinical courses, students must complete the Capstone Course.

### General Rules Overview for Clinical Activity

1. Students on clinical rotations must work under the direct supervision of a board-certified, licensed physician or PA-C.
2. Students must comply with the Physician Assistant Student Identification Policy.
3. Students at clinical sites must always work under the supervision of a preceptor. They may not function as a substitute for any employee or assume primary responsibility for a patient's care. They must not consult, examine, treat, or discharge a patient from care without consultation with a clinical preceptor or supervisor.
4. Students shall perform only those procedures authorized by the Program, clinical site, and preceptor. Students must adhere to all rules and regulations of the Program and the clinical sites.
5. Students cannot appear at the University or clinical sites under the influence of alcohol or drugs.
6. Students shall not exhibit any behavior that may jeopardize the health and safety of patients, staff, faculty, or fellow students.
7. Students will deliver health care services to patients without regard to their race, religion, national origin, age, sex, marital status, citizenship, sexual orientation, gender identity or expression, disability, veteran status, medical condition, socioeconomic status, religious or political beliefs, or any status protected by law or executive order.
8. In the event of the temporary absence of the assigned preceptor, the preceptor or their designee will identify an alternate preceptor. At no time will students work at a clinical site without having a preceptor clearly identified.
9. All charts and written orders must be signed (if applicable) with the student's name clearly written, followed by the designation "PA-S." At no time may PA students use other professional titles (e.g. RN, EMT, DPT, etc.) while on clinical rotations.
10. The preceptor must countersign all chart entries and written orders immediately.
11. Students must know their limits while in training. Students must not consent to assess any patient or perform any procedure that is beyond their ability or scope of practice.
12. The highest levels of patient confidentiality and privacy will always be observed, in compliance with HIPAA guidelines.

## General Considerations

- Be professional, respectful, flexible, helpful, and cooperative always.
- Be intellectually curious, and strive to be an active learner, rather than passive.

- Accept constructive criticism.
- Be prepared to discuss and answer questions about any disease or procedure encountered during your rotations. Read ahead of time on expected or scheduled cases.
- If you do encounter any problems on a rotation, please notify the Director of Clinical Education as soon as possible.
- Students work entirely under the preceptor's supervision.
- Learning is best achieved by student participation under supervision.
- Learning by "trial and error" without supervision is unacceptable, as it jeopardizes patient care and threatens all health care professionals (physicians, PAs, nurses, administrators, etc.).

## The Clinical Site

The Clinical Site team (Preceptors, Director of Clinical Education) will notify you when you should contact your scheduled site for the next rotation.
The contact may be your assigned preceptor or their designee.

You will be informed where and when you are to report on your first day.
Much of this information will be available via EXXAT.

## Supervised Learning

Learning "under supervision" is defined in the following manner:
Eliciting a meaningful history (the preceptor is in the hospital or in office).
Performing a physical examination (the preceptor is in the hospital or in the office).
Progress notes, written or electronic medical record (EMR) keeping (dependent upon the policies of the individual clinical site).
Charting of orders (dependent upon the policies of the individual clinical site).

Technical procedures (the appropriate professional will be at the student's side or within immediate proximity).

## Starting a Rotation

Students should complete the following on the first day:

1) Confirm your daily/weekly schedule with the appropriate site designee (daily schedule, on-call, rounds, weekend hours, etc.).
2) Inquire regarding available educational experiences you may be able to attend while on rotation (grand rounds, daily/weekly conferences, CME presentations, etc.).
3) Review dress codes.

4) Obtain access to a Medical Library/Resource Center.
5) Review site specific safety and security policies and procedures.
6) Obtain WiFi access.
7) Review expectations, patient and procedure logs, and evaluations with your primary preceptor or designee.

### Expected Clinical Phase Progression

Students are trained to take detailed histories, perform physical examinations, give oral presentations of findings, and develop differential diagnoses. As the year continues, they should be able to more effectively formulate an assessment and plan collaboratively with the preceptor. If the preceptor deems it necessary, students initially may observe patient encounters. However, by the end of the first week, students should actively participate in evaluating patients. As the preceptor feels more comfortable with the student's skills and abilities, the student should be allowed progressively increasing supervised autonomy.

## ATTENDANCE

### ACGME Duty Hour Regulations

Students are expected to work the schedule that is provided by the preceptor, which is reviewed by the Director of Clinical Education. Schedules must meet duty hour federal regulations (2011 ACGME Restrictions, revised 2017). If your clinical schedule does not follow these rules, advise the attending physician or chief resident with whom you are working and the Director of Clinical Education immediately.

By Federal law, here are the regulations regarding duty hours of any/all students in the hospital setting (residents, interns, medical students, and PA students):

- Maximum 80 hours/week (*this may be averaged over a 4-week period*. i.e. 100 hours one week, 60 hours the next week, etc., for an average of 80 hours/week).
- Not more than one in every 3rd day on-call.
- Continuous duty not to exceed 28 *consecutive* hours. 24 hours on-call, and an additional 4 hours for didactic activities, transfer care of patients, or work in the outpatient clinics. No new patient may be accepted for admission after 24 hours of continuous duty. This does not count pre-round time.
- 24 hours off per 7-day period. Can be averaged over 4 weeks. For example, students may work 14 days straight but then have two days off. Post-call days do NOT count as a day off. A day off is free of any clinical activities.
- Post-call: minimum of 12 hours off-duty before starting the next shift.

### Holiday Policy

University holidays do not apply to students' schedules during the clinical year, and preceptors are not obligated to grant days off to students on holidays or weekends (but may do so at their discretion).

### Job Interviews

Job interviews are not considered valid reasons for absences. All attempts must be made to schedule an interview so that it does not interfere with the core clinical rotations (preferably during an elective rotation month). If this cannot be accomplished, students must first obtain permission from the Director of Clinical Education to attempt to arrange time off for the interview. Subsequently, the preceptor must grant permission for the absence, and students must make up the missed clinical time within the confines of that rotation. The PA Program must be notified as outlined above. A maximum total of TWO (2) days per calendar year will be allowed for interviews.

## RESPONSIBILITIES OF THE SUPERVISING PRECEPTOR

The student is assigned a primary preceptor, who provides a clinical environment for the student's training. The preceptor may be a licensed MD, DO, or PA who agrees to assume the responsibilities of instruction during the assigned rotation. The primary preceptor must be in good standing with their licensing board. Students may be given an assignment or may spend time with ancillary staff (x-ray, lab, physical therapy, etc.), as these experiences can be very valuable.

- Formulate with the student basic goals and expectations such as:
    - Schedule and hours
    - Attendance of educational activities
    - Documentation and oral presentation
    - Degree to which student will participate in care of the patients
- Work with the student to improve H&Ps, documentation, oral presentations, clinical skills, etc.
- Indicate clearly to the medical staff, the administration, and nursing/office staff which practitioner will be responsible for the activities of the student.
- Respond to questions as to the scope of the activities of the student.
- Provide the student with an orientation to the site including a review of the site schedule, safety, security, policies, and procedures.
- Assist students in meeting the assigned objectives for the specific rotation.
- Incorporate teaching activities. This can be accomplished in a variety of ways such as structured teaching rounds or chart review periods, reading assignments, informal consultation between patient encounters, and recommending specific conferences. The preceptor should assign the student activities such as: patient care, rounds, H&Ps, surgical assisting, etc.

- Be responsible for the evaluation of student competence and performance at the middle and the end of the rotation.
- The preceptor will be asked to complete an interim (mid-rotation) student evaluation form with feedback given directly to the student. The preceptor of any student achieving a failing mid-rotation evaluation must contact the Director of Clinical Education to develop a mid-rotation remediation plan.
- Ensure that students are not substituting for paid or volunteer clinical or administrative staff during clinical rotations. Attempt to handle minor problems directly with the student. Major or persistent problems with the student should be referred to the Director of Clinical Education.
- Provide required documentation to the Program, proof of liability insurance, CVs, license verification, etc. for all preceptors and clinical instructional faculty.

## RESPONSIBILITIES OF THE PROGRAM

- Adequately prepare the student for clinical rotations.
- Assign students to clinical sites that will provide a quality learning experience.
- Provide the preceptor with the respective syllabus and a set of learning objectives.
- Provide the preceptor with a fact sheet about the student.
- Ensure a current Clinical Education Affiliation Agreement is in place.
- Provide documentation of student malpractice insurance.
- Provide the preceptor/site with health, criminal, and child abuse clearances as required for the students in the Program.
- Continuously monitor students throughout their Clinical Phase.
- The Director of Clinical Education or designee will be responsible for assigning a final grade to each student for all rotations.
- The Director of Clinical Education or designee will meet with any student who fails an EOR exam or other component of a clinical course. The DCE will develop a remediation plan for students who fail an EOR exam. Students cannot remediate a failed Preceptor Final Evaluation.
- The Director of Clinical Education or designee will interact with preceptors on a regular basis and will be available to address any issues or concerns.
- The Director of Clinical Education or designee will arrange and coordinate call back day activities, including elective presentations, EOR exams, didactic sessions, etc.

## STUDENT RESPONSIBILITIES

- Learn unobtrusively from all persons involved in the clinical rotation for the benefit of the patient.
- Do not pose as a primary medical provider or advisor-counselor to the patient except

to relay information as directed by authorized professionals.
- Students must not misrepresent themselves as a physician, PA, or any other health care provider other than a PA student.
- Provide the site with all necessary records and perform any in-services required by the site.
- Report to clinical sites on time, well prepared, and appropriately dressed and groomed.
- Submit all required assignments and documents to the Program on or before their respective due date(s).
- Notify the Director of Clinical Education if the assigned preceptor will be off site (on vacation or absent) and a substitute preceptor is not assigned. Notify the Director of Clinical Education if the student will be away from their assigned clinical site for any reason (illness, reassignment, etc.).
- Active effort towards expected progression of a Clinical Phase student.

## PHYSICIAN ASSISTANT STUDENT IDENTIFICATION POLICY (A3.06)

The Program requires all students to clearly identify themselves in the clinical setting to distinguish themselves from other health profession students and practitioners.

Students must:
- Wear the embroidered SJU PA Program patch on their Program-issued short white coat
- Prominently wear/display:
    - The Program-issued name tag designating their student status
    - Their SJU student ID badge and/or any other ID badge required by the clinical site.

Students must always verbally identify themselves as PA students to patients, patient family members, health care providers, and clinical site staff.

Students should be advised that compliance with this Student Identification Policy is assessed in the professionalism section of the Preceptor Final Evaluation form.

## PROTECTED HEALTH INFORMATION

Protected health information ("PHI") – defined as individually identifiable health information in any form or media, whether electronic, paper, or oral under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") – is protected by the HIPAA Privacy Rule. Students must follow HIPAA regulations, as well as site-specific privacy and confidentiality regulations, with respect to PHI at a clinical site. PHI may include (but is not limited to) information, including demographic data, that relates to (i) a patient's past, present, or future physical or

mental health or condition or (ii) the provision of health care to the patient.

Charts, or contents within patient records such as lab reports or x-rays, are not to be removed from a clinical site. Permission from the preceptor and clinical site is needed to submit copies of work for evaluations or assignments, and all clinical site regulations must be followed (e.g., redacting identifying information such as names, addresses, ID numbers, etc.).
Taking any type of pictures, including selfies, at a clinical site is prohibited.

Referencing a patient in a dehumanizing or insensitive manner, at any time or in any context, is unprofessional and will not be tolerated and will be reviewed as a possible infraction of Professional Standards.

## CLINICAL PATIENT ENCOUNTER DOCUMENTATION GUIDELINES

The Center for Medicare and Medicaid Services (CMS) guidelines only permit students to document a portion of the History and Physical Exam (the Past Medical History, Family History, Social History, and Review of Systems). The preceptor must personally document all other key elements of the visit. If a particular site does not authorize or allow students to officially document patient notes in a paper or electronic chart, it is advisable for students to document the patient encounter on a separate piece of paper so that they can continue practicing their documentation skills and obtain feedback from the preceptor.

### Patient Records, Preceptor Review, and Countersignature

On each clinical rotation, it is the student's responsibility to ensure that the supervising preceptor also sees all their patients.
The preceptor should review all student notes written in the medical record and countersign.
If there is any doubt as to the correct format, students must consult with their preceptor.

### Charting Medical Records

Students are reminded that the medical record is a legal document. Whenever a student makes an entry into a patient's medical record (i.e., H&P, progress note, SOAP note etc.), the student must indicate they are a PA student when signing the entry, as follows:

Signature: John/Jane Doe, PA-
S Print: John/Jane Doe, PA-S
Time (Military) & Date
Contact phone #

### Prescription Writing

Students are not permitted to prescribe medications. Students may assist in the writing of a prescription or assist a preceptor or designee with transmission of a prescription, but the preceptor or designee must sign all prescriptions. A student's name is not to appear on the prescription. A student may not sign a prescription for the preceptor and then their initials after the preceptor's name. Any suspected noncompliance will be reviewed by the SPC.

## CLINICAL PHASE SCHEDULING

Assignment of students to clinical rotations is the sole responsibility and authority of the Program and will be scheduled by the Director of Clinical Education. Much of this clinical practice must be supervised by a board-certified, residency-trained physician (MD or DO) or experienced PA (PA-C). Other licensed, qualified, and experienced health care providers (certified nurse midwives, nurse anesthetist, psychologists, etc.) can also supervise limited portions of a student's clinical training but will not serve as the primary preceptor.

### Providing Contact Information

Students must notify the Director of Clinical Education as to how they may best be reached during regular office hours, and of any mailing address or phone number changes (i.e., personal mobile number, emergency contact number(s), clinical site number, and/or student pager number if cellular service is weak or unavailable at some clinical sites, etc.).

### Changes to Clinical Phase Schedules

Changes to clinical rotation assignments are rare and will only occur in extreme situations such as site cancellation, a serious issue that cannot be resolved satisfactorily for all parties, or an emergency on the part of the student or preceptor. Any change to a clinical rotation assignment will be made at the discretion of the Program.

### Elective Clinical Rotation Placement

Elective clinical rotation preferred placement is not guaranteed, but the Program will make every effort to send students to one of their top three choices. However, the Program reserves the option to choose an elective clinical rotation placement based on the student's strengths, weaknesses, or deficiencies in patient logging. Students are encouraged to pick an elective clinical rotation based on their own self-assessment on their strengths and weaknesses, with the end goal of successfully passing the PANCE. Students may also want to consider picking an elective with the future goal of working after graduation in a similar area of medicine.

### Student Concerns/Removal from Site

If a student has a concern about the professional, academic, or clinical training, the Director of Clinical Education must be made aware immediately. In rare cases, it may be necessary to remove the student from the clinical site. Students must provide written documentation of any issue for Program review.

## CLINICAL SITE PROCUREMENT POLICY & PROCEDURES

### Clinical Rotation Site Procurement Policy (A3.03)

Prospective and enrolled students are never required to provide or solicit clinical sites or preceptors. It is the responsibility of the Program to ensure that all students have access to all required clinical rotations and to have the ability to meet all Clinical Phase learning outcomes. The Program will allow students to volunteer to assist the Program in identifying new clinical site(s) where the student is interested in participating in a clinical rotation. These potential sites must undergo the same approval process as program-identified sites and be approved appropriate for use. Clinical sites not meeting Program standards will not be approved. Students interested in arranging their own clinical rotations should contact the Director of Clinical Education with all necessary information by May 1st of the Spring I semester.

### Clinical Site and Preceptor Onboarding Process

In order to ensure Program compliance with accreditation standards, all preceptors and clinical sites are evaluated carefully. The required components of establishing a clinical site are outlined below.

1. A preceptor or clinical site is recruited by the Program or contacts the Program directly regarding interest in preceptorship.
2. Program faculty conducts initial clinical site evaluation.
3. The preceptor manual is given to any potential preceptor at the clinical site.
4. The Director of Clinical Education determines who at the clinical site can serve as a preceptor with a review of their board certification, licensing, and their ability to meet the course learning outcomes.
5. The Director of Clinical Education will provide the syllabus to each preceptor and preceptors will attest to being able to meet the course learning outcomes.
6. The Clinical Year Subcommittee reviews the information gathered above regarding the

clinical site and any potential preceptors and endorses the clinical site and/or preceptor for use.

7. A Clinical Education Affiliation Agreement is executed by both parties, and all supporting documentation is gathered (i.e. proof of medical malpractice insurance, general liability insurance, board certifications, and licenses of all preceptors involved).

8. If an approved clinical site has an approved preceptor available, this information is utilized by the Director of Clinical Education to schedule a student to complete a clinical rotation.

### Precepting Process

1. The student is assigned to the clinical site by the Director of Clinical Education.

2. The student information is forwarded to the preceptor (as well as associated clinical sites), and includes: student biography, photograph, immunization records, date of last TB testing, N95 fit test, background check, verification of health insurance coverage, certificate(s) of malpractice insurance coverage, HIPAA training certification, and ACLS/BLS certifications.

3. The student begins the clinical rotation, and the Director of Clinical Education provides the preceptor with the most updated version of the specialty-specific objectives and outcomes.

4. The student will evaluate the clinical site, learning experience, preceptor, and clinical site resources at the conclusion of the clinical rotation.

5. The preceptor will evaluate the student's performance at mid-rotation and at the end of the rotation, and will send the appropriate documentation to the Program accordingly.

### Site/Preceptor Maintenance Process

1. Faculty will occasionally visit the site to assess student performance and observe student- preceptor interactions, in accordance with the Clinical Site Evaluation Visits policy below.

2. Preceptor feedback, student feedback, and site visit data is reviewed by the Clinical Year Subcommittee, which will make recommendations to the Director of Clinical Education and Program Director.

### Clinical Site Evaluation Visits Policy

The Program will conduct periodic site visits to maintain relationships with clinical sites and providers. These site visits can be completed by faculty, alumni, adjunct faculty, or other personnel that the Program determines to be appropriate. Site visits can occur in person, by phone, or by video conferencing.

1. Site visits are mandated under any of the following conditions:
   - In reply to a preceptor request or complaint about a student
   - In response to a student's concerns, whether communicated verbally or in conjunction

with the mandatory student evaluation of the site/preceptor
- At the sole discretion of the Program

2. Site visits can be requested for any reason by either the preceptor or the student by contacting the Director of Clinical Education. Under these circumstances the decision to conduct a site visit will be made by the Director of Clinical Education, in conjunction with the Program Director.

3. All sites have site visits conducted with the initial onboarding process, and then for any reason listed above. Sites that take 5 or more students per year will be visited a minimum of once every year. Site visits can be completed by faculty, alumni, adjunct faculty, or other personnel that the program determines to be in appropriate standing. Each visit will have a Periodic Follow-up Clinical Site Evaluation form filled out.

### Student Evaluation Site Visits

The Program will conduct site visits to assess the student's progress during the Clinical Phase. The goals of the visit are as follows:

- Assessment of the student's oral presentation along with formulating an assessment and plan.
- Observe a student-patient encounter, if permitted by the medical practice/institution.
- Review the student's patient logs, progress on clinical requirements, and verify clinical days completed.

Site visits will be well-defined and scheduled by the Program. Students will inform their preceptor at the beginning of the rotation if a site visit will be scheduled.

## CALL-BACK DAYS

All students on rotation are required to attend Call Back Days on campus. All Call Back Day activities are mandatory. There are a number of activities that take place on Call-Back Days. They may include any of the following:

- EOR exams.
- Elective Presentations: Student presentations on medical topics/patient case(s) experienced on rotations.
- Didactic Sessions: Review sessions based on the student's collective areas of weakness as determined by analysis of PACKRAT, Didactic Phase, EOR exam, and EOC exam performance.
- Lecture Series: assorted lectures on medical topics, CV writing, PANCE prep, coding/billing, contract negotiations, etc.
- Practical assignments: problem oriented practical exams, OSCE preparation, clinical skills training, technical skill proficiency assessment.

Call-Back Days will typically take place on the last Thursday and Friday of each five-week

block. Depending on the planned activities, students can expect to be dismissed no later than 6pm.

## CLINICAL ROTATION EVALUATION

### Preceptor Evaluations

a. Preceptor Mid-Rotation Evaluations: An interim formative evaluation will be submitted midway through the clinical rotation. This evaluation will not be graded but will provide the student, preceptor, and Program information on how the student is progressing through the clinical rotation. The Program's hope is to objectively measure how the students know their expectations. Any student receiving a score of less than "3" on any category will be required to meet with the Director of Clinical Education. Any preceptor who scores a student on any component less than "3" must contact the Director of Clinical Education to discuss a remediation plan. Students unable to improve these scores may fail the rotation.

b. Preceptor Final Evaluation: The student will be evaluated on their ability to understand various roles in health care and working on the health care team, clinical skills, medical knowledge, evidence-based decision-making, preventive care and counseling, and professional behavior. Students must obtain an 80% in the professionalism section of the Preceptor Final Evaluation form, and an 80% overall on the Preceptor Final Evaluation to pass a clinical course.

### Mid-Rotation Student Self-Evaluation

The student must fill out a Mid-Clinical Rotation Self-Assessment Check-in prior to attending the mid-rotation preceptor meeting. This form, individualized for each rotation, allows the student to understand their progress towards demonstrating competency in the preceptor evaluation items and guides the student towards ensuring that they are meeting ARC-PA Standards for clinical rotations. A student must inform the Director of Clinical Education if a response indicates that required experiences are not being met. This will prompt a conversation between the Director of Clinical Education, the preceptor, and the student to ensure ample opportunity to meet the requirements before the end of the rotation.

### PAEA End of Rotation Exams

PAEA End of Rotation exams ("EOR exams") are a set of objective, standardized evaluations intended to serve as one measure of the medical knowledge students gain during specific clinical rotations. More information on the content for each of the exams is available here.

### Patient Logging

It is imperative for the student to log all of their patient encounters throughout the Clinical Phase, to include all information that is asked for. This tool is vital to ensure that every student is meeting all of the standards related to clinical rotations. This will allow the SJU Physician Assistant Program faculty to track student progress towards meeting competencies and will allow for intervention if needed.

Students are to submit logs during the Clinical Phase documenting the patient encounters, diagnoses, and procedures while on rotations. It is understood that the number of patients may vary at specific sites.

Logging must be done daily so that data is not lost. Faculty will review this data on a weekly basis. Any technical problems with the electronic logging system should be addressed to the Director of Clinical Education immediately. Patient logging is Pass/Fail and must be completed for every rotation. Failure to log patients or procedures during a rotation will result in a failure of the rotation.

Failure to log patients and procedures on a daily basis (logs will be checked weekly) and/or to submit the Student Self-Assessment Mid-Rotation Form by the due date will result in a 2-point per week deduction from your overall course grade.

It is imperative that all patient encounters and procedures be logged. This data is utilized by the Program to evaluate sites/preceptors and number and type of student/patient experiences. Procedure logging may also help with credentialing post-graduation. The following fields are mandatory: age group, diagnosis, chief complaint, procedure/procedure code, case type, visit type, minutes with patient and preceptor, and the box clicked for Prenatal Care or Psych Care, if appropriate. Technical skills that students should be exposed to in each rotation are outlined in the respective syllabi. Preceptors will evaluate student's performance using the assigned rubric. Any technical skill that is not observed or rated below a ⅗ (proficient), will require remediation during the call back day at the end of each semester.

### Course-Specific Assignments

Each rotational course has specific assignments related to the course-level learning outcomes. This information can be found in the individual course syllabus.

## SAFETY & SECURITY PROTOCOL AT CLINICAL SITES

Each clinical site has specific safety and security protocols that can be located in EXXAT and/or in the safety and security folder of the cohort-specific Clinical Phase information webpage. Safety should also be discussed at your orientation to a new clinical site.

### Patient Evacuation Plans

Prioritizing patients with respect to the limited physical resources available for evacuation (e.g., personnel, elevators, stairwells, transport sleds) is among the most logistically and ethically challenging tasks involved in the evacuation of a hospital or clinic location.

There is no single priority model that will function equally well in all hospitals and all circumstances. Listed below are some general potential evacuation priorities in selected scenarios.

In an immediate evacuation that is severely time sensitive and involves immediate and broad threats to life safety, the priority must be to get as many patients out as possible. Therefore, the acuity model (wherein the patients needing the most assistance are the last to be moved) may be adopted in these situations. Default priorities in such situations are indicated in the table below.