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*This Student Handbook has advisory status and does not supersede the GVSU Undergraduate or Graduate catalogs.*
Welcome!

You are about to embark on an exciting journey. This program is a unique opportunity for you to engage in a rewarding educational experience. It combines the required elements needed to complete a health care professional degree with the necessary opportunities for personal and intellectual growth in a superior graduate level educational program. The goal of a professional curriculum is to facilitate the passage of learners from pre-professional coursework to active participation in a professional group. When you are accepted into the GVSU Physician Assistant Studies Program, you have entered the profession, and this implies that along with the status and privilege that you have attained, you also agree to the responsibilities that come with that acceptance. As a learner, the privileges include membership in the profession as an organization and the right to interact with patients in a clinical setting. The added responsibilities include professional behavior in all interactions. As a professional, you will also have extra time commitments in academic work and professional activities. Of highest importance is that you display integrity in all that you do, say and write. Deviance will not be accepted or tolerated. You are expected to act at a higher level and exhibit all of the required characteristics of a health care provider and future Physician Assistant. Professional behavior will be expected of you. (See Chapter 3: Professionalism, page 20.)

We, the faculty, have made a commitment to present medical education content which will enable you to practice safe and effective medicine and to pass the National Commission on Certification of Physician Assistant (NCCPA) – Physician Assistant Certification Examination (PANCE). We have also committed ourselves to working with you throughout the 28 months of this program to insure that you will be able to attain your goals. The faculty members are facilitators of the learning environment. We are one of your resources for medical information. During the course of your studies, emphasis will be placed on developing self-directed study to enable you to discover new medical knowledge and information in a self-actuating way. The curriculum is specifically designed in this way to enhance your skills needed for life-long learning. The goal of the faculty is to make your experience in this program a positive opportunity for you to demonstrate your readiness as well as your ability to take on the task of becoming a clinician. We will do all that we can to help you in this process.

Sincerely,

The PAS Faculty and Staff
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PAS DEPARTMENT MISSION

The mission of the program is to educate individuals to become competent Physician Assistants, who possess the skills necessary for interprofessional medical practice.

PAS DEPARTMENT GOALS and COMPETENCIES

Goal 1: Professionalism

Instill within the PAS learners the professional values and ethical behaviors expected of physician assistants

Professionalism

*Competencies*

- Students will exhibit honesty and integrity in all interactions
- Demonstrate respect, caring and compassion
- Provide PAS learning with the tools and experience to participate in lifelong learning
- Cultural Sensitivity: Promote awareness of cultural differences and their impact on healthcare

Active Engagement in Community Service

*Competencies*

- Student participation in at least one community service activity prior to graduation
- Encourage faculty involvement in community service

Goal 2: Medical Skills and Competence

Prepare entry level practitioners with the skills necessary to function in an evolving healthcare environment

Medical Knowledge

*Competencies*

- Recognize signs and symptoms that define a disease process
- Discuss the laboratory and radiographic testing that support a working diagnosis based upon the presenting signs and symptoms of a disease process
- Identify treatment options for a disease entity
- Define the potential complications of treatment (both medical and surgical)
- Understand the natural history of a disease process that goes untreated
• Explain pathophysiological processes leading to common acute and chronic diseases

Patient Care

**Competencies**

• Understand the role of preventive medicine in healthcare including screening recommendations
• Counsel and educate patients and their families while demonstrating compassion and respectful behaviors
• Develop and Implement patient management plans
• Perform medical and surgical procedural and technical skills essential to Physician Assistant practice
• Perform appropriate history and physical examinations

**Goal 3: Interprofessional Education**

Prepare graduates to work effectively in interprofessional health care teams

**Competencies**

• Develop an understanding of the unique and complementary abilities of the members of the health care team
• Understand the ways in which the members of the health care team interact with each other to optimize patient care

**Goal 4: Evidence Based Learning**

Instill the importance of medical research as it relates to clinical practice

**Competencies**

• Demonstrate an understanding of the meaning, purpose, and nature of scientific inquiry by relating its significance to evidence based medicine through evaluation of the medical literature
• Locate, appraise, and integrate evidence from scientific studies as it relates to pathology, diagnosis, therapeutics, and prevention
• Demonstrate the ability to synthesize, integrate and apply knowledge of study designs and statistical methods and their appropriate application in clinical studies
• Discuss the principles of beneficence, justice and respect for persons as it relates to the conduct of research involving human subjects and clinical practice.

**Chapter 1: Curriculum and Instructional Process**
Course length: 28 months (seven semesters)

- 16 month (four semesters) Phase I – Didactic Phase
- 12 month (three semesters) Phase II – Clerkship Phase

CURRICULUM CONVENTIONS

The following conventions apply throughout the outline of instruction:

Standards

Unless otherwise stated: A minimum of 80% accuracy standard is required for didactic learning objectives within PAS designated courses. Learners will receive a list of objectives with each syllabus.

All didactic objectives will be in accordance with texts or learner handouts as cited. A listing of required and suggested texts will be provided for each course and printed in the syllabus for the course.

For all didactic performance objectives, the performance will be simulated or real, and evaluation will be based upon written objectives stated in the syllabus. **NOTE:** When performance objectives are indicated and no practical time is listed for the lesson, the performance is expected to be completed during clinical clerkships. A minimum of 80% accuracy standard is required for successful completion of performance objectives.

Objectives for the clinical clerkships will be distributed or available online before learners enter Phase II of education. Clerkship learners are expected to complete/perform all stated objectives during the clinical clerkships. Although rotations may not always provide experience in all topics or procedures listed, the student is still responsible for knowing the material through ongoing reading, research and study during the rotation. The rotation syllabi and study guides provide a framework for the student to develop a study plan.

A minimum of 80% accuracy standard is required for successful completion of each clinical rotation.

Assumed Conditions

Performance is presumed to be in a normal classroom setting with all routine classroom supplies available for all didactic objectives.

For objectives where simulated or real performance is required, it is presumed that they will be performed in a simulated clinical/laboratory/practical or real clinic/laboratory setting, with all the routine equipment and supplies for that setting available by the learner or by the program.

Unless otherwise stated, reference materials are not to be used by the learner during evaluations, tests or practical exams.
Special Terms/Phrases

“Describe”, when not otherwise clarified in an objective is used to cause the learner to give an account of the salient features of an item through recognition and/or completion responses.

“Explain”, when not otherwise clarified in an objective is used to cause the learner to give both a descriptive response and the reasons or causes of an event or action and, if necessary, show the logical relationships.

“Identify”, when not otherwise clarified in an objective is used to cause the learner to work with illustrations, which include diagrams, drawings, photos, and models.

Entry Level Requirements/Required Competencies

Learners must achieve an 80% minimum scholastic rating in each core (PAS) course. In addition, learners must satisfactorily pass all performance evaluation instruments in order to graduate from the program.

All didactic courses must be completed prior to entering clinical clerkships. All required clinical clerkships must be completed before successful completion the program.

Test and Remediation Policy

Tests are administered as outlined in the syllabus for each course.

The following procedures are established for all PAS didactic examinations:

1. Minimum passing score for any PAS didactic course is 80%. A failing grade for the course will result in referral to Progress and Promotions Committee.
2. Any student scoring less than 80% in a class may be given ONE opportunity for a cumulative remediation exam which needs to be passed with an 80% or better. If that exam is passed, the final grade for the class will be only 80%.
3. No remediation exams will be given for individual exams for any PAS course.
4. Students may receive only one remediation for each failed course. A failure on a remediation exam results in a failing grade for the course, and the student will be referred to Progress and Promotions Committee.
5. Students are expected to attend all exams. If a student is unavailable due to illness or personal tragedy, s/he must notify the instructor by phone or e-mail at least one hour prior to the scheduled exam time. Failure to do so will result in a failing grade for the exam. All requests for make-up exams should be submitted in writing within three days of the original exam along with supporting documentation (i.e. doctor’s note.) Date and time of the make-up exam will be determined by the instructor.
6. A student may not remediate more than twice in a semester. Failure of more than two courses will result in referral to the Progress and Promotions Committee (P &P).
Determination of Grades

Grading for all PAS didactic courses:

A = 95-100% = 4.0
A- = 90-94.99% = 3.7
B+ = 85-89.99% = 3.3
B = 80-84.99% = 3.0
B- = 77-79.99% = 2.7
cr
C+ = 73-76% = 2.3
C = 70-72% = 2.0
C- = 67-69% = 1.7
D+ = 63-66% = 1.3
D = 60-62% = 1.0
F = <60% = 0.0

For courses without a designation of PAS (BMS, HPR, NUR, STA) students must maintain a required minimum grade of 70% (2.0) or better, but the final cumulative semester GPA cannot drop below a 3.0 or the student will be referred to P&P Committee.

Grounds for Probation:

i. A cumulative semester GPA below 3.0 in the physician assistant curriculum will result in a student being referred to P&P Committee.

ii. Any final course grade below a 3.0 (B) in a 500 or 600 level graduate course will result in a student being referred to P&P Committee. If a final grade below 3.0 occurs in a graduate course the student must retake the course to receive graduate credit.

iii. Any final course grade below a 2.0 (C) in a 400 level undergraduate course will result in a student being placed on physician assistant probation. If a final grade below 2.0 occurs in undergraduate courses, the student may be required to do remedial work or retake the course.

iv. A grade of “no credit” in a clinical education course also will result in the student being referred to P&P Committee.
Elective Coursework

Elective courses within the professional portion of the PAS DEPARTMENT can be taken as credit/no credit, as audit, or as a graded course. Please follow the procedures listed below:

Credit/No Credit: Student must initiate this process by obtaining a form from the records office and getting the appropriate signatures. All paperwork must be completed and returned to the records office by the end of the first week of classes. Student should keep a copy.

Audit: Student must initiate this process by obtaining a form from the records office and getting the appropriate signatures. All paperwork must be completed and returned to the records office by the end of the first week of classes. Student should keep a copy.

STUDENT RIGHTS AND RESPONSIBILITIES

The relationship of a learner with a university brings with it certain rights and privileges and imposes certain obligations and responsibilities. A learner has the right to competent instruction, good counseling, adequate facilities, and the right to expect the highest degree of excellence possible within the resources of the University. A learner also has the right to protection from unreasonable and capricious actions by faculty, administration, and learner organizations. Likewise, the learner has the responsibility to devote him/herself to the serious pursuit of learning and to respect the rights and opinions of others, including faculty, the administration, and his/her fellow learners (GVSU “Student Code Booklet”).

LEARNER RIGHTS

1. Each learner has the right to be considered for admission, advancement, degrees, honors, and all academic and co-curricular activities and benefits without regard to ancestry, religion, gender, sexual orientation, political belief, or country of origin.
2. Each learner has the right to know the regulations by which he/she is governed. Each learner has the right to advocate, without fear of reprisal, changes in any rule by which he/she is governed.
3. Each learner has the right to be advised in writing of charges that might lead to disciplinary action in nonacademic matters.
4. Each learner has the right to a fair hearing before final disciplinary action is taken.
5. Each learner has the right to free inquiry and scholarly investigation, and the right to discuss, exchange, and publish any findings or recommendations, either individually or in association with others, provided he/she makes no claim to represent the University without due authorization.
6. Each learner has the right to organize, join, and participate in recognized campus organizations, subject to the University rules governing such organizations.
7. Each learner has the right to a voice in democratic learner government within the University and its several schools, colleges, and divisions. Likewise, each learner has the right to advocate, without fear of reprisal, any policy or change in existing policy in all matters affecting learners.
8. Each learner has the right to be secure in his/her rights as a citizen without prejudice to his standing in the University, provided he/she does not make claim to represent the University without due authorization.

LEARNER RESPONSIBILITIES

1. Each learner has the responsibility to comply with the rules governing learners at the University, as well as rules and regulations unique to the PA Program as outlined in this handbook.
2. Each learner has the responsibility, when acting as a member of a learner organization, to observe the University rules governing such organizations.
3. Each learner has the responsibility, in word or act, whether individually or in association with others,
not to claim, without due authorization, that he/she is an official representative of the University.

4. Each learner has the responsibility to support academic integrity.

5. Each learner has the responsibility to conduct himself/herself in accordance with generally accepted standards of conduct as embodied in society’s laws and regulations.

6. Each learner, as a member of the University community, has the responsibility to conduct himself/herself in a manner, which sustains in all areas of University life, the atmosphere necessary for the broad educational purposes of the University community.

7. Each learner has the responsibility to respect innovation and individual differences and to conduct himself/herself so as not to violate the rights of other learners and members of the administration and faculty.

8. Conscientiously fulfill all assignments and requirements of the program.

9. Attend classes punctually, or notify instructor if you will be absent or tardy from a class.

10. Maintain a scholarly, courteous demeanor in class.

11. Uphold academic honesty in all activities.

12. Notify the instructor as early as possible if prevented from keeping an appointment or carrying out an assignment.

13. Discuss with instructor any class-related problem and follow established procedures in the resolution of these problems.

14. Adhere to instructor's and general University policies on attendance, withdrawal or other special procedures.

**LEARNER HONOR CODE**

Learners entering the Physician Assistant Studies Department are expected to abide by the principle of honesty, which is fundamental to the life of the University community and to the profession for which they are preparing.

Learners are expected to honor this principle as conduct in the classroom is indicative of conduct on the job. Learners who display integrity in academic endeavors will display similar traits in the clinic with patients and fellow employees. Any variance from total and complete honesty and integrity will result in dismissal from the program. Your future patients expect as much.

This principle of honesty binds all learners to act in accord with the requirements of academic integrity personally and to participate only in those activities which foster and maintain the purpose of the learning process. Learners are also expected to take appropriate action in cases where actual and/or suspected incidences of dishonesty are observed.

**FACULTY RIGHTS AND RESPONSIBILITIES**

Since education is a cooperative effort between educator and learner, both parties must fulfill their responsibilities if the integrity and efficacy of the instructional process are to be preserved (see GVSU “Student Code Booklet”).

**Responsibilities of Faculty Members**

1. Contribute to and remain abreast of the latest developments in their field of expertise.

2. Continually pursue teaching excellence.

3. Treat all learners with respect and fairness without regard to ancestry, race, religion, political belief, country of origin, gender, sexual orientation, age, marital status or disability.

4. Encourage differing viewpoints and demonstrate integrity in evaluating their merit.

5. Attend classes regularly and punctually, adhere to the scheduled class and examination times, and arrange for notification of absence and coverage of classes.

6. Establish and maintain appropriate availability to meet with learners.

7. Present early in the term, the following course information:
   a. Course objectives and general outline.
b. Classroom procedures to be followed, and expectations concerning class attendance, and proposed dates of major evaluations (including examinations, papers and other projects).

c. Where appropriate, schedule of class-related activities, including class meetings and laboratory sessions.

d. List of texts and/or other materials needed for the course. e. Other special policies.

8. Provide and, within reasonable limits, adhere to the written course syllabus.

9. Know course matter thoroughly, and prepare and present the material conscientiously.

10. Be informed of University/Departmental services and recommend their use to learners when advisable.

11. Follow these policies concerning written work and grades:
   a. Grade and return written work promptly. b. Submit final grades by the scheduled time.
   c. Allow learners to examine written materials not returned within the term (e.g., final exam, major papers) and retain such materials for seven academic years following graduation.

12. Implement unit procedures for learner evaluation of faculty teaching with attention to preserving learner anonymity.

13. Maintain a scholarly atmosphere.

14. Complete grading within a reasonable time frame following the exam or assignment

15. Post weekly office hours

16. Meet every semester to discuss the academic performance of each student

Meet at the end of every academic year to discuss the activities of the P&P Committee

**Expectations and the Handling of Complaints**

It is expected that faculty and learners fulfill their responsibilities to the instructional process. If, however, a complaint does arise, the parties should meet in an effort to resolve the matter. When such a discussion fails to resolve the problem or is inappropriate given the circumstances, the head of the academic unit should be contacted. If this contact fails to satisfy the complaint, the University's published procedures should be followed.
Chapter 2: Student Success

ADVISING

Assignment of Advisor

Each learner who is admitted to the Physician Assistant Studies Department will be assigned an advisor from the Physician Assistant Studies faculty. A list of who your advisor is will be posted on the Physician Assistant Studies News Board by the first day of the program. Learners may be assigned a different academic advisor when faculty turnover occurs or when personal advisee/advisor conflicts occur, as deemed necessary by Department Chair.

Advising Appointments

1. Learners may request advising sessions at any time and are encouraged to set up these appointments with their respective advisor at least once per semester.

2. Faculty post regularly scheduled office hours on their office doors, subject to change. Please call for an appointment. Some have drop in times available.

3. Formal advising sessions are to occur at the beginning of each semester. Learners accept the responsibility to schedule an advising appointment with their advisor. The topics to be covered during this appointment are to include at a minimum a discussion of progress toward the degree in Master’s of Physician Assistant Studies and a discussion of the learner’s progress along the continuum of generic abilities and review of the “Professionalism Evaluation” tool (Appendix 1).

4. Students are required to meet with their advisor if they receive a grade of less than 80% on any individual exam. It is the student’s responsibility to contact their advisor to set up an appointment and students are expected to contact their advisor within 5 days of receiving their grade.

5. Written documentation is to be kept of all advising sessions. Learners may be given a copy of the documentation of their individual advising appointments if the learner requests.

6. Learners may request time to review their file at any time by filling out a form requesting the privilege. Their advisor will be present during this review if he/she deems that in the best interest of the Program.
Tips for Successful PAS Students

The PAS Department strongly recommends:

1. Studying course material on a daily basis rather than waiting until the last minute to prepare for exams.
2. Avoiding outside employment throughout both didactic and clinical phases of PAS training.
3. Developing a strong support network prior to and during your training. Examples of this could include establishing study groups, arranging childcare, etc.
4. Familiarizing yourself with the content of the GVSU PAS program handbook. Continue to refer to it throughout your training.
5. Purchasing required textbooks and reading required sections.
6. Preparing as recommended for lectures. Do not study solely Power Points and/or classroom notes.
7. Utilizing all available resources and opportunities for learning within the PAS program. Examples of these experiences would include attending review sessions, using entire class time for laboratory sessions, etc.
8. Participating in student led activities within your PAS class to develop and strengthen your peer support network.
9. Developing a good relationship with your faculty advisor.
10. Incorporating occasional personal time to recharge.

Grand Valley offers many resources to help you succeed in your journey through the GVSU PAS program. The GVSU Student Academic Success Center can be accessed at 616.331.3588 or at www.gvsu.edu/saac and offers study skill coaching in

- Time management
- Note taking
- Reading strategies
- Test-taking strategies
- General study strategies
Facilitating Student Success Policy and Procedure

This policy is intended to facilitate student success in the following situations.

1. A student who is struggling with personal issues such as anxiety, illness, and/or death of a relative or friend that negatively impacts their performance in the GVSU PAS program.
   a. If a faculty member recognizes a student who meets these criteria during the didactic phase, the faculty member is required to refer that student to their faculty advisor for further consultation.
   b. If a faculty member recognizes a student who meets these criteria during the clinical phase, the faculty member will refer the student to the clinical coordinators and/or their faculty advisor.
   c. Recommendations made by the faculty advisor will be dependent on the specific situation but examples could include:
      • Referral to GVSU Student Academic Success Center (www.gvsu.edu/sasc)
      • Referral to GVSU Student Disability Services (www.gvsu.edu/dsr)
      • Referral to GVSU Counseling and Career Development Center (www.gvsu.edu/counsel)
      • Referral to GVSU PAS Progress and Promotions Center

2. A student who performs below the passing standard for the GVSU PAS program on one or more exams.
   a. If the instructor of record recognizes a student who meets this criterion during the course, that instructor may elect to schedule a meeting with the student to discuss his/her progress. Alternately, the instructor may defer to the individual student to initiate a meeting. Referral to the faculty advisor at this point is not recommended, as the instructor of record is the one knowledgeable about the specifics of the situation.
   b. If a student fails to meet the passing standard for any course by the end of the semester, the instructor of record must refer him/her to the GVSU PAS Progress and Promotions committee. See GVSU PAS student handbook for additional details.
ACADEMIC STANDING AND ACADEMIC PROBATION

(This text has advisory status and does not supersede the GVSU Undergraduate and Graduate Catalog.)

Graduate Academic Policies and Regulations (Excerpted from the University Catalog)

Full-time graduate students register for nine or more credits per semester. A cumulative grade point average of 3.0 or higher must be earned in the entire degree program in order to be graduated. A graduate student whose cumulative GPA falls below 3.0 after completion of nine hours of graduate level course work is placed on academic probation. Students on probation must achieve at least a 3.0 cumulative GPA after the next nine hours of course work to remain in the program. A cumulative GPA of 2.0 or below after nine hours of graduate level course work means automatic dismissal from the University. Students who are academically dismissed from the University may apply for readmission after one year.

The institutional minimums for a graduate degree are:

1. A minimum of 40 semester hours of graduate level course work.

2. A cumulative graduate GPA of at least a 3.0.

3. Requirements for the degree must be fulfilled within a period of eight consecutive years.

4. Only coursework completed in the five years prior to acceptance to a graduate status is considered for transfer credit, transfer credits must apply directly to the student’s program as determined by the director of the graduate program, only courses with grades of B (3.0) or above will be considered for transfer and correspondence courses will not transfer into graduate programs at GVSU.

5. All graduate students must complete a minimum of 24 credit hours in residency at GVSU.

6. Students registering for graduate credit will be required to perform at the graduate level.

7. Candidates for advanced degrees must:
   
a. Demonstrate not only their mastery of the subject matter but also their ability to integrate and synthesize it.

   b. Demonstrate their ability to generate new knowledge and/or apply existing knowledge to specific practical situations (thesis, comprehensive examination or an appropriate project.)
PROGRESS AND PROMOTIONS COMMITTEE:

The purpose of the Progress and Promotions Committee is to monitor the progress of students, both individually and collectively. The P & P Committee is comprised of every member of the PAS faculty. The P&P Committee Chair is appointed by the Department Chair. The P&P Committee Chair calls meetings of the Committee and assembles the members as necessary, taking care not to involve faculty members that are directly involved in the student issue.

The P&P Committee Chair shall meet with the Department Chair on an annual basis to evaluate the collective student body and shall generate a verbal report to the faculty regarding their findings. For individual students, a P&P Committee meeting may be called at any time by the Department Chair or any member of the faculty when there is concern for the academic or professional behavior of a student. The P&P Committee Chair will assemble a group of faculty and then contact the student in question to meet with them and discuss the issues at hand. The P&P Committee will generate a written recommendation regarding the student’s disposition. This letter will be given to the Department Chair for review. The Department Chair has final say in any disciplinary actions. The Department Chair will then write a letter to the student detailing the plan for remediation or dismissal. The letter will be reviewed by the P&P committee chair (and the Dean as necessary) prior to sending it to the student. The Department Chair will meet with the student to discuss the letter if the need arises. (See Appendix D)

Probation and Remediation

Definition: Probation is a status which can be assigned to students who have had academic or behavioral problems and have been referred to P&P Committee for disciplinary action.

Procedure:

- Students who are placed on probation due to inadequate performance in one or more courses will be required to do remedial work or retake those courses. The opportunity to remediate will be decided by the instructor of the course. The instructor has the option to deny remedial work in which case the student will be required to retake the course. Once the student satisfactorily completes remedial work or retakes the course, the student may proceed in the program. However, the probationary status will extend to the end of the following semester.

- When a student is placed on probation, the Department Chair in conjunction with the P&P Committee will draw up a contract which outlines the steps to be followed to be taken off probation. The contract will be signed by the student and the Department Chair. During the period of probation, the physician assistant faculty advisor will monitor the student’s progress, but the student is ultimately responsible for completion of the terms of the remediation plan. (See Test and Remediation Policy under Curriculum Conventions).

The above policy does not constitute grounds for university probation, but only applies to the Physician Assistant Program. Program probationary documents will not become part of a student’s university record on student transcripts.

Deceleration (Personal or Academic)

If, during the course of full-time study, difficulties are encountered by a student, the Progress & Promotions Committee may recommend a decelerated course of study. A collaborative plan of study will be developed with the faculty. Decelerated students will be expected to meet the criteria for satisfactory progress in study under these arrangements.
Withdrawal

At any time during the program, a student may elect to withdraw from the program. The student is required to write a formal letter of withdrawal to the Department chair. The Department Chair then may request to meet with the student to discuss reasons for withdrawing. Depending on the timing of the withdrawal, a student may or may not receive a “W” on the courses they are enrolled in. Please see the university catalog for more details on withdrawal. (Refer to GVSU Undergraduate and Graduate Catalogue, page 40 for more details on withdrawal.)

Dismissal from the Program

Grounds for Dismissal: Any one of the following items may constitute grounds for dismissal from the program:

i. Two consecutive semesters of physician assistant probation.

ii. Failure to complete remedial work required to be taken off physician assistant probation as specified in the remediation contract will result in dismissal from the program.

iii. A cumulative GPA below 3.0 in the physician assistant curriculum.

iv. Evidence of unethical or illegal behavior.

Procedure:

i. The Progress & Promotions Committee will be called in session for any student in danger of dismissal from the program as outlined above.

ii. The committee will review all of the information available on the student and determine if the student meets the criteria for dismissal. Recommendations will be made to the Department Chair for dismissal.

Appeal Process:

Should a student decide to appeal a decision for dismissal, the student must submit a written defense to the Department Chair within 30 days after receiving the letter of dismissal. The defense should contain any new information which the student may have and a clarification of old information. The defense will be considered by the Department Chair in consultation with the Progress & Promotion committee within 15 days of receipt and a decision given to the student. If the student is still not in agreement with the plan, then the student may elect to appeal their dismissal to the Dean of the College of Health Professions.

Dismissal from the University

The Physician Assistant Program is under no obligation to assist students who have been dismissed from the University, whatever the reason for their dismissal. However, the Program may initiate a process to decide whether or not to support the student’s application for readmission to the University. During this process, the Program may decide not to support the student’s appeal for readmission to the University. The student then may appeal for reinstatement without the Program’s support.
LEARNER
STATUS

The learner in remediation (see “Probation and Remediation” above) or who has an "I" on his/her record from the academic phase will not be allowed to begin any clinical education courses (clerkships) unless exempt from this requirement by faculty. Participation in clinical opportunities will be provided at a time when the learner demonstrates adequate preparedness (See “Clinical Education and Clerkships”), and appropriate compliance with health care screening.

GRADUATE STUDENT HONORS

Every year, each graduate program selects an outstanding graduate from a pool of eligible students. Eligibility is based upon the following faculty-established criteria:

2. Strong Class Participation, especially outside of the classroom.
Chapter 3: Professionalism

Professional Behavior is defined as follows:

1) Acting with integrity and honesty: You have an obligation to maintain a professional demeanor whenever you may be considered a part of the PA profession, starting right now.

2) Being polite and respectful: You have the obligation to maintain an attitude of compassion and welfare of the patient first.

3) Dressing appropriately for the situation

4) Holding yourself to high ethical standards: You have an obligation to know and accept the Guidelines for Ethical Conduct for the PA Profession (see appendix H.)

5) Life-long learning: You have the responsibility to engage in ongoing educational activities related to the profession, keeping current with the latest developments in medicine.

See Appendix B, “Professionalism Evaluation” form for detailed examples of expected professional behaviors, attitudes and attributes.

**PROFESSIONAL DECORUM POLICY/ DRESS CODE**

The Physician Assistant learner is a representative of the Physician Assistant profession. The maintenance of a professional appearance and demeanor facilitates the acceptance of the profession and the individual by patients and other health professionals.

**All learners should dress in a professional manner in ANY clinical setting:**

a. Students should wear a short lab jacket and name tag unless indicated otherwise.

b. Students should wear socks or hose, and shoes should be suitable for the clinical setting. (Note: no open-toed shoes per hospital/clinical protocol.

c. Students should keep their nails in good repair and not wear false nails or nail polish.

d. Students should avoid excessive jewelry, e.g. chandelier earrings, bangles, large medallion necklaces.

e. Students with tattoos should keep them covered.

f. Students with long hairstyles should keep the hair pulled back behind the shoulders to avoid its contact with the patient or a sterile field.

ALL PHYSICIAN ASSISTANT STUDENTS MUST BE CLEARLY AND CONTINUOUSLY IDENTIFIED AS LEARNERS DURING CLINICAL EXPERIENCES.

While attending classes or laboratory sessions on the Grand Valley State University campus, learners may express their personal choice in dress. Choices should be tasteful and neat.

**The following apparel is considered unprofessional in ANY setting:**

- Cut-off, cut-out, or torn clothing
- Ultra short skirts
- Short shorts
- Tank Tops
- Low-cut shirts
- Tube tops/halter tops

**The following apparel is considered unprofessional in the clinical setting:**

- Jeans
- Open toed shoes
Heavy perfume/aftershave
T-shirts
Hats
Any item that shows the torso

PROFESSIONAL CLASSROOM BEHAVIOR GUIDELINES

This policy has been developed in order to maintain a classroom atmosphere that enhances and fosters learning and demonstrates respect for the instructor and fellow learners (GVSU “Student Code”).

1. The learner(s) who disrupt classroom instruction will receive an initial warning from the instructor on the first occurrence for that class session.

2. A second disruption within the same class session will result in the automatic expulsion of the learner from the classroom and the learner will not be allowed to return until the next class session of that course.

3. If the learner is expelled from the same course a second time, he/she must report to the Department Chair (or his/her designee) before being allowed to re-enter the classroom. The Department Chair will determine the conditions under which the learner may return to the classroom.

4. Individual course attendance policies remain in effect and enforcement of this Professional Classroom Behavior Policy may affect the learner’s final outcome (grade) in the course in which the infraction occurs, as specifically spelled out in the course syllabi of record. It often relates to the class participation grades.
Chapter 4: Clinical Education and Clerkships

GUIDELINES FOR CLINICAL CONDUCT

A developing professional bears the responsibility of representing the profession to patients, the public, and other members of the health care team. Bear in mind that the PAS Program offers new challenges. The following guidelines should be observed in representing the Physician Assistant profession:

- Consistently demonstrate your concern for the welfare of the patient. Be thoughtful and professional when obtaining the history and performing the physical exam. Treat patients with respect and dignity, both in your interactions with them, and in your patient related discussions with other professionals. Demonstrate your concern not only for the medical problem but for the total patient.

- Conscientiously respect the rights of your colleagues. Characterize all of your professional encounters with cooperation and consideration. Strive to assume an appropriate and equitable share of patient care duties.

- Approach your responsibilities with dedication. Be truthful in ALL personal and professional communications. When meeting multiple demands, establish patient-centered priorities to guide you in completion of such work.

- Confidentiality of Medical Record & Health History Information: All data gathered about the patient and his/her illness, including all items within a patient’s medical history is privileged information.

  1. Learners should not discuss or present patient records in a manner or situation which would violate the confidential nature of that record.

  2. Charts or contents, e.g., lab reports, etc., are not to be removed from the hospital or clinical setting, either physically or electronically.

  3. Mandatory HIPAA Compliance training is provided during Phase I and II

- Patient Records: Physician Review and Countersignature: On each clinical clerkship, it is the learner's responsibility to insure that ALL patients seen by the learner are also seen by the supervising clinician. PAS learners are not expected to see, treat and manage patients independently. The supervising preceptor should review all learner notes written or entered in the medical records and countersign these documents.

- Countersignature by a licensed medical supervisor is required before any trainee order may be executed. Under no circumstances should a PA student initiate orders for any patient on any clerkship without immediate consultation and countersignature of the clinical supervisor.

  In addition, under no circumstance should a PA student sign prescriptions. The only signature which should appear on a prescription is that of the clinical supervisor.

  These guidelines must be strictly adhered to for the learner’s protection and the protection of the patients seen by learners.

- Social media, online communications and other technical communications may be treated as public forums. Be sure that you represent yourself, your school and your profession positively. Student behavior outside of professional
guidelines in social media sites may be referred to Progress and Promotion for further evaluation of behavior.

☐ Title Identification/Representation: Role and title confusion are common problems encountered in dealing with patients, (e.g., some patients identify all those wearing white coats as physicians). Learners should be aware of this problem and avoid misrepresentation by politely explaining their role and position.

1. In professional interactions with patients and others, a learner should introduce himself or herself as a ‘A Student’ using the title of Mr. or Miss, Mrs., or Ms.

2. Learners should use the designation, PA-S1, (P.A. Learner 1st year), PA-S2, PA-S3 following all notations in charts, records, and other medical forms.
   For Example: "Mary Blue, PA-S2"

3. In all professional communications, including paging or beepers, a learner should introduce him/herself as a “PA Student”. No learner should casually accept the 'page' of doctor.

☐ Learners may be subject to sanctions within the Program for failure to observe the clinical guidelines.

**CLINICAL EDUCATION AND CLERKSHIPS RULES FOR CLINICAL EDUCATION**

Clinical education is an important part of any Physician Assistant Studies professional curriculum. At GVSU the academic and clinical components of the curriculum are progressive and build toward your attainment of professional competence. To this end, clinical clerkships are placed after successful completion of all didactic professional curriculum. All learners must also satisfactorily complete each Clinical Clerkship (module) in order to fulfill Program requirements.

**LIABILITY INSURANCE**

Professional liability coverage for all learners is provided by Grand Valley State University Student Group Coverage Plan each year the learner is participating in clinical experiences.

**HEALTH COMPLIANCE**

All PAS learners are expected to adhere to the GVSU Health Compliance Policy (Appendix E. TB screening, Blood Borne Pathogen and HIPAA training or re-training is to be done annually.

Students are required to obtain and provide documentation of physical examinations, immunizations, BCLS/CPR and ACLS training (provided to all students during program) throughout the program. In addition, clinical sites require submission of criminal background checks and drug screens prior to the start of an experience. Any cost involved in fulfilling requirements of the university or clinical sites is the responsibility of the student. See GVSU General Health Compliance Policy in Chapter 5. Any criminal background check and drug screen results are to be sent directly to the GVSU Health Compliance Office and/or Grand Rapids Medical Education Partners. Physician Assistant Program faculty members are not to receive any communication regarding the results of these procedures.
During some clinical experiences students may be at risk of exposure to communicable diseases. Any cost for work ups relating to any exposures is the responsibility of the student.

CLERKSHIP PREREQUISITES

All students on rotation must have met the following criteria:
1. Successful completion of all didactic course work.
2. Successful completion of each previous rotation, or arrangement with the Clinical Coordinators to finish an “Incomplete” or remediate an unsatisfactory rotation grade at a later date.
3. Completion of all required immunizations and testing: MMR (2 or titers), DPT (10 years), Varicella (history of diagnosis with doctor's documentation or 2 vaccines), Hepatitis B, as documented by College of Health Sciences Health Compliance Officer.
4. Initial 2-step TB testing within past 12 months, as documented by CHS Compliance Officer.
5. Physical examination and review of health history by a medical professional, prior to starting the GVSU PAS Program.
6. Criminal Background Check and Drug Screen. (see below)
7. Contact Warren Olson, Health Compliance Officer, at (616) 331-5867 for further information on steps 3 through 6 above. (See Chapter 5 for GVSU Health Compliance Policy).

Learners will not be allowed to participate in clinical clerkships if there is a reason to believe that they are unprepared for this type of experience. Sufficient reasons include:

1. Academic probation gives reason to believe that a learner is unprepared to participate in clinical experiences. The clinics assume a specific level of knowledge in a learner who is to treat their patients. Academic probation puts the level of understanding of the learner into question. A learner who is on probation for an isolated course deficiency may be allowed to participate in a clinical experience if it is determined by the faculty that all other areas of knowledge are appropriate and that the deficiency can be remediated and is not critical to the learner’s performance in that particular clinical experience. Remedial work in the deficient area will be required and must be completed within one semester.

2. Evidence of unethical or illegal behavior or any breech of integrity or moral fitness. The Physician Assistant profession is built upon trust both between the physician and the PA and the provider and the patient. Lying or deceit breaches that trust. Anyone found lacking in character and fitness will be referred to the Progress and Promotions Committee. Please see Student Code Book & appendix E for AAPA Code of Ethics.

3. Medical or psychological conditions which could endanger the safety of the learners or the patients they will be entrusted with, or that prevent the learner from fully participating in clinical experience.

4. If the PAS learner should perform at less than satisfactory level for any one or more clerkships, the Progress and Promotions Committee will meet to decide what action is to be taken.

Options are:
   a. Dismissal from the Physician Assistant Studies Department.
   b. Arrangement for further clinical experience(s).
   c. Arrangement for more didactic work prior to further clinical experiences.

After reviewing reports of performance during these arranged assignments, the committee will make a recommendation on the status of the learner and provide this recommendation to the
5. The Clinical Coordinator has the right and obligation to remove a learner from an affiliation and/or to arrange an extended clinical experience, if deemed appropriate for satisfactory completion of the clinical experience.

6. All PAS learner course requirements are the responsibility of the PAS learner. If these requirements are not submitted on time, the learner will receive an Incomplete at the time grades are reported. The University will not be able to certify graduation for the learner's application for the certification exam. This would mean that the learner would not be able to receive a temporary licensure or sit for the national board exam until the Incomplete is corrected and the degree is granted.

A list of active clinical sites with which the Physician Assistant Studies Department has agreements for clinical education is updated on an ongoing basis. All sites are not available for all clinical education courses. Placements are determined by a combination of factors, including the needs and limitations of clinical rotation sites, preceptors, and students. Students should expect to complete up to 3 or 4 rotation experiences outside of West Michigan. Lodging and other personal expenses will be the responsibility of the student, although efforts will be made during the scheduling process to locate students where they have indicated that they have housing resources.

Further details of clinical education policies and procedures will be provided to students in a Clerkship Handbook which is provided to students at Pre-Clerkship Bootcamp.

**REQUIRED**

1. Each learner is required to purchase his or her own short white (half length) coat.

2. Each learner is encouraged to have a program approved PDA for patient tracking and logging.

3. Each learner is encouraged to have program-approved medical equipment. A list will be provided in PAS 501.

4. Each learner must provide his or her own transportation to and from assigned clinical sites.

5. The University will provide each learner with a nametag picture ID.

6. Each PAS learner must pay for his or her own physical examination(s), including required lab work. The completed reports on the physical examination are to be submitted upon entry into the PA program to the GVSU Health Compliance Office. TB testing needs to be updated annually. Submission of two TB skin tests will be required within the first semester of the program.

7. Each PAS learner must pay for criminal background checks & drug screens as required by clinical sites as directed by the GVSU Health Compliance Office. (No information should be given to the program).

**HEALTH INSURANCE**
The PAS Department **strongly encourages that all learners have health insurance coverage** in effect at all times, either through a family or individual plan or through university or professional group plans. In fact, **hospitals and clinics may require you to carry health insurance.** The payment of medical fees incurred due to any injury or illness arising out of participation in the Department are the responsibility of the learner. A health insurance plan is available for learners through Grand Valley State University. Details are available at [http://www.gvsu.edu/uco/riskmanagement/student-health-insurance-7.htm](http://www.gvsu.edu/uco/riskmanagement/student-health-insurance-7.htm) or by calling Student Assurance Services at 1-800-328-2739.

**There will be no pro-bono medical care provided by any clinical site, clinical provider, or faculty members.** The student must obtain medical care from either their personal health care provider or the university’s health center.

### Procedure for Clinical Site Evaluation

Clinical Coordinators conduct initial and ongoing evaluations of sites and preceptors, as documented by New Site Evaluations, Clinical Site Visits, weekly blogging by students, and analysis of Student Evaluations of Site and Preceptor.

The following are general procedures for clinical site development and evaluation:

1. **Students may suggest** preceptors/clinical sites to the Clinical Coordinators, but **may not contact** them to set up a rotation on their own.

2. The Clinical Coordinators are responsible for developing new clinical sites, by conducting a site visit in person. If a site is at a significant distance from the program, the Clinical Coordinators may conduct an evaluation by telephone or written questionnaire, or they may discuss the site with faculty from other medical education programs who use the site. The **New Site Evaluation Form** and or/a questionnaire specific to international rotations is used.

3. Information gathered during the initial site visit is documented in Typhon using the New Site Evaluation form and the site is given an over-all rating between 1 (Poor) and 5 (Excellent) based on 10 indicators. Sites scoring less than 3.5 overall are not used for rotations. Sites for which there are significant deficits in the ability of the site to provide sufficient experiences for achievement of rotation-specific objectives are not used for rotations, even if the overall score is 3.5 or above.

4. **Ongoing evaluation of established clinical sites occurs through multiple means.**
   a. Student experiences are monitored on a weekly basis through a required web log in which the student is required to communicate if the objectives are being met, particularly after the first week of the rotation. The student and the site are contacted
to explore the concerns. Actions taken are documented in the Clinical Site Visit form in Typhon or on a Student Advising Encounter form. If the Clinical Coordinators confirm that the site is not meeting objectives, and corrective action will not improve the situation, the student will be moved to a different clinical site for the remainder of the rotation and the site will not be used in the future.

b. Clinical site visits are conducted by the Clinical Coordinators on a regular basis and both the student and the site are evaluated using the GVSU PA Program Clinical Site Visit form in Typhon. Any site deficits that are identified are addressed with the preceptor and actions taken are documented on the Clinical Site Visit form in Typhon. If the Clinical Coordinators confirm that the site is not meeting objectives, and corrective action will not improve the situation, the student will be moved to a different clinical site for the remainder of the rotation and the site will not be used in the future.

c. Students complete an evaluation of the clinical site/preceptor at the end of each rotation using the Student Evaluation of Site/Preceptor form in Typhon. Analysis is conducted through PERC at the end of each Clerkship Year. Established clinical sites/preceptors consistently scoring at less than 3.5/5.0 are discontinued as training sites. See 2013 PERC Clinical Sites Report for examples. A discontinued clinical may be re-evaluated and used again in the future, if circumstances at the site change.

Chapter 5: Policies and Procedures

ATTENDANCE POLICY

The Physician Assistant Studies Department is committed to the development of professionals. Learners are expected to attend all classes and clinical days. Courses are designed to build upon previous knowledge. The faculty does recognize the need for vacation and that situations arise that may cause a learner to be absent or tardy. Therefore, the following guidelines will serve as the basis for faculty actions:

1. Attendance on all class days and clinical days is mandatory. Tardiness is frowned upon.

2. It is expected that learners will utilize semester breaks for vacation and other personal needs such as weddings, trips, etc. Semester schedules are printed in each Grand Valley catalog and allow sufficient time for planning purposes. Learners are encouraged to use semester breaks as a time of rest and recuperation. Vacations are not permitted during class days.

3. It is understood that unscheduled absences during the program are possible. Absences include illness and other unforeseen problems that prevent a learner from attending class. Excessive unexcused absence may be grounds for dismissal. The following steps must be taken in order to notify the Program of an absence:

   - Learners who are ill on a class day must notify the instructor of record
and/or Department Chair in writing by 9:00am (learners are responsible for any material covered, assignments or testing missed due to absence).

Patterns of unexcused absences (e.g., calling in prior to exams; immediately before or after vacations) are not permitted and may result in disciplinary action. Absence due to illness immediately prior to an exam or on the day of an exam will require a note from a physician.

4. Learners who are ill for an extended period of time may apply for a medical leave of absence after five (5) consecutive absences by contacting the Department Chair. A note from a physician will be required.

5. In the event of a serious injury, incapacitating illness, or other temporary medical disability, up to 8 weeks of temporary medical leave from the program will be provided, as medically necessary. Requests for temporary medical leave should be submitted to the Department Chair in advance if possible. Documentation from the treating physician will be required. The Department Chair will review the request with faculty and will notify the student of the decision in writing. If the request is granted, steps to be taken by the student to become reactivated in the program will be indicated. Students may be asked to demonstrate competence in coursework previously completed prior to reentry. Any learner who applies for a leave must realize that all course work and clinical requirements must be completed prior to graduation. Learners who return to the program following a leave may not be able to resume their studies and clinical activities at the point where they left due to curriculum revision. Completion of the Program may be delayed.

6. If learners elect to attend the annual MAPA and AAPA meetings, they will be excused from clinical clerkships and/or class (whenever possible). A student learner must submit a letter in writing at least 60 days prior to the conference. Requests for additional conference time will be reviewed on an individual basis. Failure to submit a written request will result in the student not being permitted to attend the meeting. For AAPA conference, students will be excused to attend all SAAPA Activities (maximum 3 days) plus one day travel before and one day travel afterwards. For every day the student attends a conference, he/she must provide a report reflecting a minimum of 4 CME per day submitted to the Department Chair. If CME will not be attained, an alternate activity must be discussed with the Department Chair prior to attendance.

7. Up to three (3) bereavement days may be granted for the death of an immediate family member at the discretion of the Department Chair. Immediate family members are defined as: spouse, parents, grandparents, siblings, children, and grandchildren. All of the above designations include “step” and “in-law” derivations.

**TARDINESS POLICY**

Classes begin promptly at the schedule class time. The expectation is to be on time and prepared. This will also be expected during clinical rotations and in any medical practice setting once you have graduated. If late, please respect your fellow classmates by entering the room with a minimum of disruption. Habitual tardiness is grounds for referral to Progress and Promotions Committee.

**TECH POLICY**

Laptops and cellphones are generally welcome for the purpose of note taking, research on topics under discussion, and/or review of PowerPoints, however please ask either the module coordinator or instructor of record prior to using these instruments in class. You will be asked to leave the class
if you find it necessary to text, talk, surf the web or review emails in class.

**ACADEMIC HONESTY POLICY**

University policies and rules regarding academic honesty are described in the GVSU Catalog Academic Policies. Physician Assistant Faculty consider any violation of these rules to be a serious offense, which may result in failure of the course or dismissal from the physician assistant program. It is expected that all work done represent the student’s original work. Cheating, Plagiarism and other forms of dishonesty will result in an immediate referral to the PAS Progress and Promotions Committee and may result in dismissal from the program. Writing down or photographing test questions is considered academic dishonesty and will not be tolerated.

**TESTING BEHAVIOR POLICY**

During a test or examination the following behaviors are expected:

1. Refrain from all talking, loud noises or other unprofessional distractions during the examination. If a student is performing on of these or similar behaviors during the examination, they may receive a warning or may result in failure of the exam with referral to P&P for possible examination failure, course failure, or program dismissal.
2. No backpacks, books, notebooks, cell phones, PDAs, electronic devices, water bottles (unless preapproved by the instructor), or other materials will be allowed at your test station. Only a writing utensil and/or blank sheet of paper will be allowed, if appropriate.
3. No student will be allowed to leave the test to use the restroom. Restroom usage must occur prior to the exam or at appropriately scheduled breaks.
4. No asking questions as it relates to the test question will be allowed during the examination, unless it has to do with numbering issues or typos.
5. Students may be randomly assigned seats during the examination at the discretion of the instructor.

**TEST QUESTION DISPUTE POLICY**

If you wish to dispute a test question, the dispute must be submitted in writing to the instructor of record within 24 hours of grade posting. A faculty member will respond in writing in a timely manner. The dispute may only reference lecture materials, required or recommended texts, and appropriate medical peer-reviewed articles/websites. Sources must be included with the written dispute. In the event of any dispute, the faculty member reserves the right to adjust the score as he/she deems appropriate.

**LEARNER ACADEMIC GRIEVANCE PROCEDURES**

Reference is made to the Undergraduate and Graduate Catalog, the Graduate Bulletin, and the Student Code book. The procedures followed are to be those in effect at the time of dispute, and are subject to change throughout the individual learner’s stay at GVSU.
SUBSTANCE ABUSE/CRIMINAL BACKGROUND CHECK POLICY

Felony or Misdemeanor Conviction

The application for licensure as a physician assistant asks questions about: felony conviction, misdemeanor conviction punishable by imprisonment for a maximum term of two years, misdemeanor conviction involving the illegal delivery, possession, or use of alcohol or a controlled substance (including motor vehicle violations), and treatment for substance abuse in the past 2 years. If any of the before are true, the State Licensing Board for Physician Assistants will review the application for licensure and will decide about moral fitness. The State Licensing Board of Physician Assistants may refuse to grant a physician assistant license to the applicant. Before beginning the Physician Assistant program at GVSU, the student who has a concern about licensure may contact the State Licensing Board to ask for clarification of the policy and pre-certification of moral fitness. If a student is caught engaging in any criminal activity after a criminal background check is completed, it is the responsibility of the student to disclose it to the Department Chair prior to entering a hospital or medical facility. Such incidents may limit educational opportunities. If a student does not disclose information, it may result in immediate dismissal from the program.

Grand Valley State University (the University) is concerned about the effect of alcohol and/or drugs on students, faculty and staff members, their families and the University community as a whole. The University recognizes that individuals with alcohol and/or drug problems may be rehabilitated. The University will continue to make efforts to emphasize awareness about the dangers of drugs.

The University encourages students, faculty, and staff with alcohol or other drug dependency problems to use the services of the University or community counseling centers for assistance. Assistance for students is available through the Counseling Center, and for faculty and staff is available through the Work Life Connections Program, administered through the Human Resources Office.

If treatment for drug and/or alcohol dependency is needed, students are encouraged to contact the Counseling Center at (616) 331-3266. Faculty and staff are encouraged to contact the Work Life Connections Program in the Human Resources Office at (616) 331-2215, or their insurance carrier to obtain information concerning coverage.

A criminal background check and drug screen are now required for Grand Rapids Medical Education Partners (GRMEP) scheduling of clinical placements and by most health systems. The student has the responsibility of arranging for the background check and drug screen as directed by the GVSU Health Compliance Office. If there is a positive result, depending on the degree of positivity, placements may not occur and GVSU legal counsel will be notified for appropriate deliberations (which may impact the student’s ability to progress in the PAS DEPARTMENT). The results of the screening(s) will be maintained in files at GRMEP and the GVSU Health Compliance Office. Physician Assistant Program faculty members are not to receive any communication regarding the results of these procedures.

The cost of such requirements is the responsibility of the student.

*Reference is made to the Grand Valley State University Student Code Booklet, Appendix E.

HEALTH SCREENING POLICY
All PAS learners must verify, via health screening mechanisms, that they do not have conditions that endanger the health and well-being of other learners and patients. Screening requirements are subject to change as mandated by clinical sites or changes in the laws regulating occupational exposure. In addition, each learner must be able to meet defined technical standards prescribed by the Program. Determination of learner health status is accomplished before matriculation. Appendix E contains the necessary forms for learners to verify the successful completion of health screening and technical standards. To that end, the following policies are presented:

1. Learners are responsible for any/all charges related to verification of health screening.

2. Learners may choose the examiner, either his/her own private physician or University Health Services may be utilized.

3. The Program’s Health Forms are to be used to satisfactorily complete all health screening requirements.

4. Program faculty/personnel are not to serve as providers of learners’ health care. The Department Chair and/or Clinical Coordinator may review reports from Spectrum Occupational Medicine which indicate student compliance with health screening policies but will not provide medical care or advice.

**EXPOSURE POLICY**

1. Learners are expected to use universal precautions in the classroom, laboratory or clinical site when the potential for exposure to hazardous materials or bodily fluids exists. All puncture/contamination events should be addressed using the individual location/site protocol. In addition to local reporting, the learner **must notify the GVSU PAS department** following initial treatment/testing at the site.

   Reference: [http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm)

   ‘Updated US Public Health Service Guide...Recommendations for post Exposure Prophylaxis’

2. Fees and cost accrued during the care of an exposure are the responsibility of the learner and/or their health insurance. The learners’ health insurance should be billed, not workers compensation or employee health. Follow-up testing/treatment can be done by the learners’ provider’s office and is the sole responsibility of the learner and/or their health insurance.

**COMPLAINT PROCEDURES**

The ability to give and receive feedback is a professional behavior physician assistant students are expected to develop. Physician Assistant Studies faculty members strive to continuously develop in their role as educators. We encourage students to communicate concerns regarding the Program to the appropriate individual(s) in a discreet and constructive manner. If a student has concerns about an instructor or class, the student should communicate directly to the person involved. If the instructor involved is not the primary course instructor, the student can also communicate with the primary instructor. If a student is unable to communicate with the involved person, he or she may communicate with the Department Chair or may use their assigned Physician Assistant Studies advisor as a resource to discuss
the issue. If concerns are not addressed to the satisfaction of the student, or for concerns that are not course or instructor specific, the student should communicate with the Department Chair. The Department Chair will document and keep on file complaints received and actions taken. Information about University academic grievance procedures can be found in the University catalog and Student Code. After institutional grievance and review mechanisms have been exhausted, a written complaint may be submitted to the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). The website address is www.arc-pa.org. Details of this process are available from the Director of the Physician Assistant Program at GVSU.

INCLUSION ADVOCACY
(EQUAL OPPORTUNITY POLICY)

Grand Valley State University is committed to equal opportunity and non-discrimination on the basis of race, creed, age, sex, national origin, handicap, or other prohibited matters in all educational programs, activities, and conditions. The University encourages diversity and provides equal opportunity in education, employment, all of its programs, and the use of its facilities. The University is committed to protecting the constitutional and statutory civil rights of persons connected with the University.

Unlawful acts of discrimination or harassment by members of the campus community are prohibited. In addition, even if not illegal, acts are prohibited if they harass or discriminate against any University community member(s) through inappropriate limitation of, access to, or participation in, educational, employment, athletic, social, cultural, or other university activities on the basis of age, color, disability, familial status, height, marital status, national origin, political affiliation, race, religion, sex/gender, sexual orientation, veteran status, or weight. Limitations are lawful if they are: directly related to a legitimate university purpose, required by law, lawfully required by a grant or contract between the University and the state or federal government, or addressing domestic partner benefits.

SEXUAL HARASSMENT POLICY

Harassment on the basis of sex is a violation of Title VII and Title IX of the Civil Rights Act and of the Elliott-Larsen Civil Rights Act. Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s employment or access to educational activities or programs, (2) submission to or rejection of such conduct by an individual is used as the basis for employment decisions or access to educational activities and programs, or (3) such conduct is unprofessional and has the purpose or effect of unreasonably interfering with or creating an intimidating, hostile, or offensive working or educational environment.

GVSU HEALTH COMPLIANCE POLICY

I. PURPOSE

As a student, faculty or volunteer (associates) at Grand Valley State University you may participate in clinical training activities at affiliated facilities. In order to be protective of everyone involved, your health and the health and safety of the community in which you may serve; certain participation guidelines have been established.
Infectious, communicable diseases are common in many clinical training sites and may be a threat to our associates. During the performance of clinical training, research or internship activities, our associates may interact and be exposed to clients and research participants with diseases such as but not limited to tuberculosis (TB), hepatitis B (HBV), Influenza, and other infections.

University policy, state and federal statutory regulations, accreditation standards for affiliated clinical agencies require that our associates comply with certain health, safety and legal requirements applicable to their occupation and that those individuals demonstrate particular cognitive and clinical competencies consistent with their program’s minimum practice standards. As such, Grand Valley State University is contractually mandated to ensure all associates attain and maintain full compliance with each program’s set compliance requirements.

II. ACCOUNTABILITY
   A. Student, Faculty and Volunteers
   All student, faculty, and volunteers (non-financially compensated positions) are responsible for maintaining their own health, protecting themselves and the clients or research participants with whom they interact from communicable, infectious disease, and attaining and maintaining compliance with identified requirements. Students and volunteers maintain full financial responsibility for obtaining all compliance requirements. All required and approved faculty compliance requirements will be paid for by the GVSU Health Compliance Program with the understanding that specific authorized health care providers must be utilized to obtain and maintain all health compliance requirements. Faculty members are financially responsible for obtaining and maintaining professional licensing and specialty certification. A specific list of approved compliance requirements and authorized providers will be listed within the faculty’s Health Compliance Blackboard account.

Students admitted to their program of study must achieve compliance with all health, safety and legal requirements applicable to the program to which they have been admitted prior to their program deadline. Students must maintain full compliance with all renewable requirements throughout their tenure with the University.

Faculty and volunteers upon hire or receipt of affiliate agreement must attain and maintain full compliance with all renewable requirements throughout their tenure with the University.

GVSU associates should retain all original documentation pertinent to each requirement and provide only a legible quality copy of each document to the Health Compliance Officer for entry into the Blackboard compliance database. Documents may be submitted in person, via US mail, fax, PDF via email, or upload to the documents section in the individual’s electronic Blackboard compliance account.

Supplementary requirements may be contractually mandated by any clinical facility to which individuals may be assigned. These additional elements are required, non-negotiable and deemed as critically important as University requirements.
Student Consequences for Non-Compliance: Upon program entry, any student who fails to attain or maintain compliance by their program's deadline date(s) will be barred from any clinical activities.

Faculty and Volunteer Consequences for Non-Compliance: Clinical participation will be suspended.

B. Health Compliance Officer
All compliance records will be maintained for current students and made accessible to the student up to one year after graduation through the secure electronic Blackboard site separate from other student records. One year after graduation all documents will be archived for seven years and then destroyed. Criminal Background records with criminal offenses are retained indefinitely and held as privileged and confidential information.

All compliance records for faculty and volunteers will be maintained while the individual is affiliated with the university. Records will be archived after one semester of inactivity, retained for seven years and then destroyed.

The Compliance Officer’s duties include but are not limited to:

- Maintaining and administering responsibilities for the Blackboard compliance site.
- Annually update of OSHA, FERPA and HIPAA training modules.
- Enforcing restrictions and notifications against students for non-compliance.
- Inputting all submitted documents into the Blackboard compliance data base.
- Providing notification to students/faculty/volunteers via email one month and one week prior to the expiration of a compliance item.
- Ensuring that all required items submitted meet standards set forth by the University, state and federal regulations, affiliation contracts, and the Center for Disease Control.

III. COMPLIANCE REQUIREMENTS
The following are detailed compliance items that may comprise of, but are not limited or subject to each program of study. (See Compliance Blackboard Site for program specific compliance requirements.)

A. Immunizations & Serologic Titers: Based on CDC recommendations for Healthcare workers

Immunizations:

- Tetanus and Diphtheria
  Following a primary series, a Td or Tdap booster within the last ten years

  If younger than age 65, individuals should be given a onetime dose of Tdap.

- Hepatitis B
  Immunization series of three injections are required

- Meningococcal
- Influenza
  Seasonal influenza vaccination

  Additional strain influenza (H1N1) if applicable and available
Immunity confirmed by serologic titer is required for:

- Measles (Rubeola), Mumps, German measles (Rubella), Hepatitis B, and Varicella (Chicken Pox)

**B. Physical Exam**

Upon matriculation, students must submit a completed Health and Immunization form available on the electronic Blackboard Health Compliance site. The form must be completed by one of the following licensed professionals; physician, certified Nurse Practitioner or Physician Assistant.

**C. CPR Certification**

Cardiopulmonary resuscitation (CPR) certification specific to program requirements. Certification must remain valid for your tenure with the school. ACLS may substitute for this requirement. Online initial or renewal CPR certification courses are not acceptable sources for certification.

**D. Criminal Background Check**

Upon matriculation, all majors must submit a seven year state of residency, National Sexual Offender Registry; and National Healthcare Fraud and Abuse scan. GVSU will only accept criminal background checks completed through designated University vendor. Directions to obtain criminal background checks are available on the electronic Blackboard Health Compliance site. All students, faculty and volunteers must notify the Health Compliance Officer of any convictions, arrests, detentions, charges or investigations by any law enforcement authorities that occur after the Certified Background inquiry is complete. Please be advised that subsequent checks may be requested in response to the requirements of a clinical education site. The discovery of a criminal record will not necessarily result in the revocation of an acceptance offer or expulsion from a program of study however; students who do not pass the security clearance may be subject to rescheduling or loss of training opportunities and may affect licensure after graduation. Individuals have the right to review the criminal background check reports for accuracy by contacting the judicial institution or Certified Background. The Federal Fair Credit Reporting Act (FCRA) promotes accuracy, fairness and privacy of information in the files of consumer reporting agencies. For more information, including information about individual rights under FCRA, go to www.ftc.gov/credit.

**E. TB Screening**

Tuberculosis screening must be validated by an initial two-step Tb screening (Mantoux skin test) and annual one-step screening thereafter. If TB skin test is positive, submission of an Annual Tuberculosis screening questionnaire (completed by a health care provider) and results of a chest x-ray within the past five years is required.

Two-step baseline PPD will be required for the following individuals: those who will be entering the annual TB testing program, those who have not been skin tested in the previous year and those who have historically had the BCG vaccine or who were born in a TB endemic country.

**Rationale**

Boosted reactions occur in people who have been infected with any species of mycobacterium or by past BCG vaccination. These persons develop a hypersensitivity to tuberculin which may gradually wane over the years. When skin is tested at this point, these persons may have a negative
reaction. However, the stimulus of this skin test may recall the hypersensitivity, which increases the size of the reaction to a subsequent test. This may be falsely interpreted as a recent conversion from negative to positive.

Two-Step Screening means one must submit documentation of results of two TB tests. Step two must be completed no sooner than 7 days and within 21 days of the initial TB test.

GVSU prohibits individuals from interpreting their own TB test results or from asking faculty to make this determination. Only the test source may interpret the results and issue a final reading determination.

F. Fingerprint
To be completed through the designated University vendor. Directions to fulfill this requirement are available on the Blackboard Health Compliance site.

G. Color Blind Testing

H. OSHA Training
To be completed online through the Blackboard Health Compliance site.

I. HIPAA Training
To be completed online through the Blackboard Health Compliance site.

J. FERPA Training
To be completed online through the Blackboard Health Compliance site.

K. Tuberculosis and Infection Control Training
To be completed online through the Blackboard Health Compliance site.

L. 10-Panel Drug Screen
All majors must submit a 10-panel drug screen. GVSU will only accept drug screens completed through the University designated vendor. Directions to complete a drug screen are available on the Blackboard Health Compliance site.

M. FIT testing
Individuals are required to complete the Tuberculosis and Infection Control tutorial available on the Blackboard site in addition to N-95 FIT testing.

N. If applicable, Current and unrestricted professional license
Licensed faculty and students must maintain a current unrestricted license to practice throughout their tenure with the school.

O. Authorization to Receive & Release Information
All majors must print, sign and submit an Authorization to Receive and Release Information form available on the Blackboard Health Compliance site.

IV. Renewable Compliance Requirements:
A. Annually:
Tuberculosis Screening validated by annual TB screening or, if

TB skin test positive, submission of Annual Tuberculosis screening Questionnaire
and results of a chest x-ray within the past five years.

Seasonal Influenza vaccination

Additional Strain Influenza vaccination (H1N1)

OSHA/HIPAA/FERPA /TB & Infection Control training/post-testing

Authorization to Receive & Release Information

B. Variable timeframe:
   Current CPR Certification
   
   If applicable professional licensure renewal: licensed faculty and students must maintain a current unrestricted license to practice throughout their tenure with the school.

V. Resources
   Unless otherwise stated in the policy students may obtain Health Compliance requirements at their Healthcare provider of choice. The following is a list of facilities in the community that provide services to GVSU students.

   Grand Valley State University Family Health Center
   72 Sheldon Blvd. S.E, Grand Rapids, MI 49503
   Phone: 616-988-8774

   Kent County Health Department
   700 Fuller Avenue NE
   Grand Rapids, MI 49503
   Phone: (616) 632-7100

   Ottawa Avenue Occupational Health
   973 Ottawa Avenue NW
   Grand Rapids, MI 49503
   Phone: (616) 391-7752

   Federal Fair Credit Report Act
   www.ftc.gov/os/statutes/031224fcra.pdf
GENERAL INSTRUCTIONS FOR LABORATORY
PRACTICE AND PROCEDURES

1. Equipment is stored in specific closet or storage space and should be returned to that area after use.

2. Water or other spilled materials should be mopped up immediately. Bodily fluid or hazardous material spills should be reported immediately to the lab supervisor or instructor.

3. Linens will be stored on shelves in the treatment rooms. Linens should be folded and replaced at the end of the lab sessions. Dirty linens should be placed in dirty linen hamper.

4. Materials such as tongue depressors, cotton swabs, etc. will be stored in the treatment rooms and specified closets. These should be returned to their original positions if unused, or disposed of properly after use. Please inform the instructor if you notice stock is getting low.

5. Equipment/Laboratories are not to be used for self-evaluation.

6. Equipment/Supplies are not to be used for personal use.

See Appendix A - Lab Liability

B. Learner/Patient Preparation

1. Determine goals of treatment, most effective procedure to use, rationale for use, and possible contraindications to treatment.

2. Position the patient for comfort and in a position appropriate for treatment.

3. Use principles of draping and privacy for your patient. Remove all clothing and jewelry from area to be treated.

4. Instruct the patient what to expect from the treatment C.

Laboratory Clothing

1. For labs requiring treatment modalities that may soil clothing, lab coats are recommended.

2. For physical evaluation and diagnostic labs, appropriate clothing is recommended. Specifics are spelled out by course instructors.

D. General Rules for the Laboratory

1. NO FOOD OR DRINK IS ALLOWED IN THE TEACHING LABORATORY AT ANY TIME.

2. At the conclusion of each classroom or lab session you are expected to prepare the lab for the next class - see that all tables, linens, chairs and equipment are returned to original positions and dispose of all trash in appropriate receptacles.
Chapter 6: Resources

MAIL

Please check your mail folder, located on the second floor of CHS at least once each day. Also check your campus e-mail daily. If your preferred e-mail address changes, please inform the CHP staff and update it on the blackboard system. However, due to university spam detectors for some email servers, students are strongly encouraged to use their assigned GVSU email account.

CONFIDENTIALITY

The Physician Assistant Studies abides by the laws ensuring confidentiality of information regarding learners. Accordingly, we do not release lists of names, grades, status in program to any individual other than the involved learners. We also release NO information over the phone, since specific identification is not possible. Should you want information released or letters written to specific audiences such as future employers, you must complete a release of information form. A copy is attached at the end of this handbook. (See Appendix F).

RECORDS

Learners may access their record file for personal review during regular office hours. Your academic advisor may assist you.

PARKING

Information about obtaining Parking permits, where to park, and shuttle service times can be located at www.gvsu.edu/operations. Some additional parking at certain hospital facilities may be available as part of clinical training experiences, but will not be disclosed until the appropriate time.

CHS BUILDING & FREY LIBRARY
HOURS

Information regarding CHS Building Hours can be located at www.gvsu.edu/operations and Frey Library Hours can be located at www.gvsu.edu/library/frey.
FACILITIES

CHS 200 - The College of Health Professions office suite houses the Dean of CHP and office staff.

CHS 218-232 & 250 - Physician Assistant Studies Faculty Offices

CHS 239 - This is a preparatory room for adjacent and nearby laboratories. This area includes locker rooms for students to change clothing in preparation for labs.

CHS 164 - Graduate Office Support

CHS 253 - Assessment Laboratory 1 – used for instruction in musculoskeletal, cardiopulmonary and integumentary examination through intervention.

CHS 255 - Assessment Laboratory 2 – used for instruction in musculoskeletal, cardiopulmonary and integumentary examination through intervention.

CHS 257 - This storage room houses equipment for both assessment labs. (Faculty access only, unless approved).

CHS 290 & 490 The Frey Foundation Learning Center houses recent journals and reference materials for health sciences, and audiovisual resources. Equipment is available in this Learning Center for viewing assigned or elective audiovisual resources. A copy machine is available for student use. Pfieffer Student Study – This portion of the library is intended to provide group and individual study space for students. A copier for student use is located in this area. CHP reference materials are available in this area for student use. Equipment is available in this area for viewing assigned or elective audiovisual resources, as well as additional library resources.

Campus Health Services. This Center, operated by Spectrum Health, is located just off the Allendale campus at 10383A 42nd Ave., and is open to all students, faculty and staff. Services include routine health maintenance, urgent care medical services, laboratory services, allergy shots, and emergency care (first aid, stabilization, and transportation). The hours for the Health Center are Monday through Friday from 9:00 a.m. to 4:30 p.m. and the phone is 331-2435. After hours services are available at Spectrum Health’s Alpine and Grandville Centers or Butterworth Emergency. The GVSU Family Health Center is located at 72 Sheldon Blvd. and the phone is 988-8774.

Department of Public Safety – Allendale campus. This Department can be reached at 331-3255. On campus escort services are provided by Public Safety from 6 p.m. until 3 a.m. Pew Campus Security can be reached at 331-6677.

Career Services and PA Job Opportunities are provided at CHS and through the GVSU Career Center website at www.gvsu.edu/careers. An appointment can be made with Ginger Lange at 331-6708.
SCHOLARSHIP INFORMATION

Scholarships are available which are specifically designed for physician assistant students enrolled in the professional curricula. These scholarships are offered by service organizations, hospitals, private practice groups, health related industries, and foundations. For specific scholarship information please contact your individual Physician Assistant faculty advisor. See website: http://www.gvsu.edu/pas/. Please select “Current Students” tab, then “Scholarships”.

FINANCIAL AID

Types of financial aid, eligibility, and application procedures can be found in the Graduate Bulletin. Contact the Financial Aid office if you have questions. For current tuition rates, expenses and financial aid information please go to www.gvsu.edu and select quick facts.

ACCOMMODATIONS

Any student who has special needs and/or accommodations must contact Disability Support Resources at 331-2490 to ensure those needs are met. The student also has the responsibility of informing each instructor, in writing, of any special needs and/or necessary accommodations at the beginning of each semester. If a student’s need for accommodation changes during the semester, the student must immediately notify the instructor in writing, specifying their needs and any necessary accommodations. A written statement from a physician or other appropriate professional should accompany the student’s request for accommodations.

ACCREDITATION

Grand Valley State University is accredited by the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA). The PA Program is in full compliance with the ARC-PA Standards.
# APPENDICES

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APPENDIX A

Program Forms
ACCEPtANCE FORM
PA Studies Program

1) Image Release: I give GVSU permission to use my image in forming a class portrait sheet, webpage development and for all forms of media, publicity and news releases.

Date __________________________ Signature __________________________ Please Print Name __________________________

2) Please print your name on the following line the way you want it to appear on ID badges and other signage needed to prove identity and gaining access to secured areas.

Please Print Name __________________________

3) Please tell us how you would like to be addressed on the line below: (For example, some persons named Richard prefer to be called “Dick” or “Rick”. Marcelyn may want to be called “Marcie”. Olga may want to be called “Margaret”.

Print how you would like to be addressed __________________________

4) If you have any physical disabilities, please explain below so that we can begin planning for your arrival. Thank you.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

5) Criminal Background Check or Drug Screen is required for clinical placements, and if positive may affect placements as well as future PA licensure.

Have you ever been arrested and/or convicted of a federal or state crime? If so, please attach a memo giving details. Please initial your choice and memo.

Yes ______ No ______ Today’s Date __________________________

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CONFIDENTIALITY AGREEMENT

This confidentiality agreement is entered into this ____ day of ____________ between all clinical preceptor sites and the undersigned (individual).

This agreement protects the preceptor’s confidential information from disclosure by any individual. This agreement is necessary due to the individual’s access to confidential information, which if disclosed by the individual, could cause harm to the preceptor or patient.

The individual shall not disclose or use at any time any secret, privileged, or confidential information concerning the preceptor/patient of which the individual become aware in any manner. Confidential information shall include information concerning the preceptor/patient no generally known to the public including but not limited to the preceptor’s products, services patient records, treatments or any other information relating to the business of the preceptor.

Student’s Name: ________________________________, PA-S

Student’s Signature: ______________________________

Date: ______________________________
PAS Laboratory Safety Agreement

Participation in the laboratory classes exposes persons to the risk of injury and illness from hazardous materials and equipment. Special risks arise to persons performing any testing involving urine, blood, or other biologic specimens. The transmission of hepatitis and AIDS is a special concern, but other diseases may also be transmitted by direct contact with clinical specimens. In addition, students will be working with other potentially hazardous material including but not limited to gels, casting material, scalpels, cow tongue, pig’s feet, fluoroscopy stain, etc. In order to reduce the risk of injury or infection, the following precautions must be followed:

1. Treat EVERY specimen as if it is contaminated.

2. Wear gloves when handling blood-soiled items or equipment and when performing phlebotomy. Gloves must be worn throughout testing.

3. Wash hands after removing gloves, immediately after coming into contact with blood or body fluids, and before leaving the classroom.

4. Wear a protective lab coat during all testing procedures. When removing the lab coat, fold with outside inward if it will be removed from the laboratory. It is recommended that lab coats be left in the lab.

5. Minimize the creation of aerosols during centrifugation by using caps and keeping centrifuge lids closed during centrifugation.

6. Use mechanical pipettes for manipulation of liquids.

7. Decontaminate all work surfaces with 10% bleach after any contamination and before leaving the lab.

8. Do not re-sheath needles, but disposed of them directly into the container provided.

9. Gloves, protective eye wear, and protective clothing must be worn when working with other chemicals, equipment, and other hazardous materials.

I hereby acknowledge that I have read and understand the above statements regarding the hazards of laboratory testing and the precautions to be taken to prevent injury and illness. I agree to comply with these and other established safety regulations and practices, and will consult the instructor for advice in circumstances where safety practice is in doubt.

_____________________________________________  ______________________________
Student's signature                                    Date

_____________________________________________  ______________________________
Witness signature                                   Date
PA Studies Program

Name: __________________________

Current mailing address: __________________________

Current Email address: __________________________

Current phone numbers:
  Home: __________________________
  Work: __________________________
  Cell: __________________________

Attach passport-size photo here:
APPENDIX B

Professionalism Evaluation
# APPENDIX B - PROFESSIONALISM EVALUATION

Student Name ___________________________ Semester _____________ Date _____________

Students will be evaluated on each of the eight categories. Examples of expected positive professional behaviors, attitudes and attributes are listed below under the first seven categories. The eighth category, **Professional Concerns** reflects undesirable and unprofessional behaviors, attitudes and attributes. A rating of “Satisfactory” on category eight means that the student has not demonstrated the behavior, attitude or attribute.

<table>
<thead>
<tr>
<th>Excellence</th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Strives for the highest standards of competence in skills and knowledge</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>* Accepts responsibility for educational challenges and self-learning</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>* Accepts correction and guidance graciously and corrects shortcomings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Respects Teachers and their teaching endeavors</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Humanism</th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Shows respect, compassion and empathy for others</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>* Honors the choices and rights of others</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>* Sensitive and responsive to culture, gender, age, disabilities and ethnicity of others</td>
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<td></td>
<td></td>
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<tr>
<td>* Able to establish cooperative relationships with others who have differences in opinion, philosophy, religion, creed, gender, sexual orientation, culture, ethnicity and language</td>
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<table>
<thead>
<tr>
<th>Accountability</th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
<th>Unsatisfactory</th>
</tr>
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<tbody>
<tr>
<td>* Punctual and prepared for all obligations</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>* Dependably completes assigned tasks</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Appears neat in grooming, dress and hygiene</td>
<td></td>
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<thead>
<tr>
<th>Altruism</th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
<th>Unsatisfactory</th>
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</thead>
<tbody>
<tr>
<td>* Responds to the needs of others without regard to self-interest</td>
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<tr>
<th>Ethical/Legal Understanding</th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
<th>Unsatisfactory</th>
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<tbody>
<tr>
<td>* Maintains confidentiality standards</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>* Truthful to patients and colleagues</td>
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<td></td>
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<tr>
<td>* Committed to ethical principals of the PA profession</td>
<td></td>
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<tr>
<td>* Possesses personal and academic integrity</td>
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<tr>
<th>Communication Skills</th>
<th>Satisfactory</th>
<th>Needs Improvement</th>
<th>Unsatisfactory</th>
</tr>
</thead>
<tbody>
<tr>
<td>* Able to effectively relate to patients, peers and colleagues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Establishes positive rapport with others</td>
<td></td>
<td></td>
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<tr>
<td>* Effectively identifies patient concerns</td>
<td></td>
<td></td>
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<tr>
<td>* Maintains composure during adverse interactions or situations</td>
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<tr>
<td>* Uses language appropriate to others’ level of understanding</td>
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**Clinical Competence**

* Committed to ongoing professional development
* Dedicated to providing the highest quality of care to patients
* Promotes the emotional and physical well-being of patients
* Uses a holistic approach to patient care

**Professional Concerns**

* Lacks Initiative
  - Needs excessive directions. Little self-directed learning
* Lacks Self-confidence
  - Performance is limited by a lack of self-confidence
* Does Not Know Limitations
  - Overestimates abilities
* Condescending
  - Makes demeaning comments about others
* Arrogant
  - Displays an attitude of superiority or self-importance
* Abrasive
  - Is overly aggressive in a manner that annoys others
* Sarcastic
  - Excessive use of sarcasm in inappropriate settings
* Impulsive/Reactive
  - Displays inappropriate behavior when frustrated or angry
* Disruptive
  - Socializes during lectures/class
* Uncooperative
  - Unable to cooperate or work well with others

Comments: 

______________________________________________________________

______________________________________________________________

Signature of Director for the PA Program Faculty __________________________ Date ______

Signature of Student __________________________ Date ______
APPENDIX C

Progress and Promotion Contract
APPENDIX C
GRAND VALLEY STATE UNIVERSITY

Physician Assistant Studies Department

PROGRESS AND PROMOTION CONTRACT

Date: ________________

Student Name: ________________________________

Deficiency (including course if applicable):

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Student Action plan agreed upon by student and Progress and Promotions Committee.

Date to be completed:

Signatures: ________________________________ (Student, Date)

______________________________ (P and P Chair, Date)

______________________________ (Department Chair, Date)

CC: Advisor
APPENDIX D

Progress and Promotion Flow Sheet
APPENDIX E

Health Screening Forms
The granting of a degree to a physician assistant student signifies that the holder is an individual prepared for employment as a PA. In such a professional role, the assistant can provide medical services with the supervision of a doctor of medicine or osteopathy in accordance with the applicable laws of medical practice. The services must, for the safety and welfare of the patient, be of the same professional quality that would be rendered by the supervising physician. The physician assistant must have the knowledge and skills to function in a broad variety of clinical and to render a wide spectrum of patient care.

Candidates for the physician assistant profession must have somatic sensation and the functional use of the senses of vision and hearing. Candidates' diagnostic skills will also be equilibrium, smell and taste. Additionally, they must have sufficient proprioceptive sense (position, pressure, movement, stereognosis, and vibratory) and sufficient motor function to permit them to carry out the activities described in the sections that follow. They must be able to integrate all information received by whatever sense(s) employed, consistently, quickly, and accurately, and they must have the intellectual ability to learn, integrate, analyze and synthesize data.

A candidate for the physician assistant profession must have abilities and skills of five varieties including observation, communication, motor, conceptual, integrative and quantitative, and behavioral and social. Technological compensation can be made for some handicaps in certain of these areas, but such a candidate should be able to perform in a reasonably independent manner.

I. Observation: The candidate must be able to observe demonstrations and experiments in the basic sciences, including but not limited to physiologic and pharmacologic demonstrations in animals, microbiologic cultures, and microscopic studies of microorganisms and tissues in normal and pathologic states. A candidate must be able to observe a patient accurately at a distance and close at hand. Observation necessitates the functional use of the sense of vision and somatic sensation. It is enhanced by the functional use of the sense of smell.

II. Communication: A candidate should be able to speak, to hear, and to observe patients in order to elicit information, describe changes in mood, activity and posture, and perceive nonverbal communications. A candidate must be able to communicate effectively and sensitively with patients. Communication includes not only speech, but also reading and writing. The candidate must be able to communicate effectively and efficiently in oral and written form with all members of the health care team.

III. Motor: Candidate should have sufficient motor function to elicit information from patient’s palpation, auscultation, percussion, and other diagnostic maneuvers. A candidate should be able to do basic laboratory tests (urinalysis, CBC, etc.) carry out diagnostic procedures (proctoscopy, paracentesis, etc.) and read EKGs and X-rays. A candidate should be able to execute motor movements reasonably required to provide general care and emergency treatment of patients. Examples of assistants are cardiopulmonary resuscitation, the administration of intravenous medications, the applications of pressure to stop bleeding, the opening of obstructed airways, the suturing of simple wounds, and the performance of simple obstetrical maneuvers. Such actions require coordination of both gross and fine muscular movements, equilibrium and functional use of the senses of touch and vision.

IV. Intellectual-Conceptual, Integrative and Quantitative Abilities: These abilities include measurement, calculation, reasoning, analysis and synthesis. Problem solving, the critical skill demanded of physician assistants, requires all of these intellectual abilities. In addition, the candidate should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

V. Behavioral and Social Attributes: A Candidate must possess the emotional health and stability required for full utilization of his intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the diagnosis and care of patients, and the development of mature, sensitive and effective relationships with patients. Candidates must be able to tolerate physically taxing workloads and to function effectively under stress. They must be able to adapt to changing environments, to display flexibility and to learn to function in the face of uncertainties inherent in the clinical problems of many patients. Compassion, integrity, concern for others, interpersonal skills, interest and motivation are all personal qualities that are assessed during the admissions and education processes.

I certify this PAS student to be free of communicable disease, free of any condition that might endanger the health and well being of other students and patients, meets the technical standards of the Physician Assistant Studies Program and is medically fit to undertake study at GVSU.
APPENDIX F

Permission Form
The Family and Educational Rights and Privacy Act of 1974 (as amended in December 1974) provides that the release of education records (or personally identifiable information therein, except for public directory information) without the written consent of the learner will not be made.

In order that GVSU may comply with the law, please provide the information requested below and sign this request form.

**PLEASE PRINT**

NAME: ___________________________ LEARNER NUMBER: __________________

First  Middle  Last

PERMANENT ADDRESS: __________________________________________

Number and Street  City, State  Zip

INFORMATION TO BE RELEASED: ______________________________________

________________________________________

________________________________________

________________________________________

________________________________________

PERSON TO RECEIVE INFORMATION: _________________________________

Name

________________________________________

Number and Street

City, State  Zip

Learner Signature ____________________________________  Date ____________
APPENDIX G

Request Forms
REQUEST FOR MAKE-UP EXAMINATION

All requests for make-up examinations must be submitted in writing to the professor within three (3) business days of the original examination. A medical excuse or documentation of personal/family circumstances may be required.

Name: ____________________________________________________________

Course: _________________________ Professor: _________________________

Date of Original Examination: ___ / ___ / _____________________________

Date of Make-up Examination: ________________________________

_______________________________________________________________
Signature of Professor

_______________________________________________________________
Date
Learner Request for Records/Examinations
Physician Assistant Studies Department
Grand Valley State University

Records/Examination requested: (please list item, date instructor, course)

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Name: __________________________ Date: ___________ Time: __________

Delivered by: __________________________ Date: ___________ Time: __________

Returned by: __________________________ Date: ___________ Time: __________
APPENDIX H

Guidelines
INTRODUCTION – AAPA ETHICS

The physician assistant profession has revised its code of ethics several times since the profession began. Although the fundamental principles underlying the ethical care of patients have not changed, the societal framework in which those principles are applied has. Economic pressures of the health care system, social pressures of church and state, technological advances, and changing patient demographics continually transform the landscape in which PAs practice.

Previous codes of the profession were brief lists of tenets for PAs to live by in their professional lives. This document departs from that format by attempting to describe ways in which those tenets apply. Each situation is unique. Individual PAs must use their best judgment in a given situation while considering the preferences of the patient and the supervising physician, clinical information, ethical concepts, and legal obligations.

Four main bioethical principles broadly guided the development of these guidelines: autonomy, beneficence, nonmaleficence, and justice.

Autonomy, strictly speaking, means self-rule. Patients have the right to make autonomous decisions and choices, and physician assistants 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 maybe 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.

Physician assistants 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 health care professional. Legal requirements and ethical expectations will not always be in agreement. Generally speaking, the law describes minimum standards of acceptable behavior, and ethical principles delineate the highest moral standards of behavior.

When faced with an ethical dilemma, PAs may find the guidance they need in this document. If not, they may wish to seek guidance elsewhere – possibly from a supervising physician, a hospital ethics committee, an ethicist, trusted colleagues, or other AAPA policies. PAs should seek legal counsel when they are concerned about the potential legal consequences of their decisions.

The following sections discuss ethical conduct of PAs in their professional interactions with patients, physicians, colleagues, other health professionals, and the public. The “Statement of Values” within this document defines the fundamental values that the PA profession strives to uphold. These values provide the foundation upon which the guidelines rest. The guidelines were written with the understanding the no document can encompass all actual and potential ethical responsibilities, and PAs should not regard them as comprehensive.
Statement of Values of the Physician Assistant Profession

- Physician assistant hold as their primary responsibility the health, safety, welfare, and dignity of all human beings.

- Physician assistants uphold the tenets of patient autonomy, beneficence, nonmaleficence, and justice.

- Physician assistants recognize and promote the value of diversity.

- Physician assistants treat equally all persons who seek their care.

- Physician assistants assess their personal capabilities and limitations, striving always to improve their medical practice.

- Physician assistants actively seek to expand their knowledge and skills, keeping abreast of advances in medicine.

- Physician assistants work with other members of the health care team to provide compassionate and effective care of patients.

- Physician assistants respect their professional relationship with physicians.

- Physician assistants share and expand knowledge within the profession.

The PA and Patient

PA Role and Responsibilities

Physician assistant practice flows out of a unique relationship that involves the PA, the physician, and the patient. The individual patient–PA relationship is based on mutual respect and an agreement to work together regarding medical care. In addition, PAs practice medicine physician supervision; therefore, the care that a PA provides is an extension of the care of the supervising physician. The patient–PA relationship is also a patient–PA–physician relationship.

The principal value of the physician assistant profession is to respect the health, safety, welfare, and dignity of all human beings. This concept is the foundation of the patient–PA relationship. Physician assistants have an ethical obligation to see that each of their patients receives appropriate care. PAs should recognize that each patient is unique and has an ethical right to self-determination. PAs should be sensitive to the beliefs and expectations of the patient, but are not expected to ignore their own personal values, scientific or ethical standards, or the law.

A PA has an ethical duty to offer each patient the full range of information on relevant options for their health care. If personal moral, religious, or ethical beliefs prevent a PA from offering the full range of treatments available or care the patient desires, the PA has an ethical duty to refer an established patient to another qualified provider. PAs are obligated to care for patients in emergency situations and to responsibly transfer established patients if they cannot care for them.
The PA and Diversity

The physician assistant should respect the culture, values, beliefs, and expectations of the patient.

Discrimination

Physician assistants should not discriminate against classes or categories of patients in the delivery of needed health care. Such classes and categories include gender, color, creed, race, religion, age, ethnic or national origin, political beliefs, nature of illness, disability, socioeconomic status, or sexual orientation.

Initiation and Discontinuation of Care

In the absence of a preexisting patient–PA relationship, the physician assistant is under no ethical obligation to care for a person unless no other provider is available. A PA is morally bound to provide care in emergency situations and to arrange proper follow-up. PAs should keep in mind that contracts with health insurance plans might define a legal obligation to provide care to certain patients.

A physician assistant and supervising physician may discontinue their professional relationship with an established patient as long as proper procedures are followed. The PA and physician should provide the patient with adequate notice, offer to transfer records, and arrange for continuity of care if the patient has an ongoing medical condition. Discontinuation of the professional relationship should be undertaken only after a serious attempt has been made to clarify and understand the expectations and concerns of all involved parties.

If the patient decides to terminate the relationship, they are entitled to access appropriate information contained within their medical record.

Informed Consent

Physician assistants have a duty to protect and foster an individual patient’s free and informed choices. The doctrine of informed consent means that a PA provides adequate information that is comprehensible to a competent patient or patient surrogate. At a minimum, this should include the nature of the medical condition, the objectives of the proposed treatment, treatment options, possible outcomes, and the risks involved. PAs should be committed to the concept of shared decision making, which involves assisting patients in making decisions that account for medical, situational, and personal factors.

In caring for adolescents, the PA should understand all of the laws and regulations in his or her jurisdiction that are related to the ability of minors to consent to or refuse health care. Adolescents should be encouraged to involve their families in health care decision-making. The PA should also understand consent laws pertaining to emancipated or mature minors. (See the section on Confidentiality.)

When the person giving consent is a patient’s surrogate, a family member, or other legally authorized representative, the PA should take reasonable care to assure that the decisions made are consistent with the patient’s best interests and personal preferences, if known. If the PA believes the surrogate’s choices do not reflect the patient’s wishes or best interests, the PA should work to resolve the conflict. This may require the use of additional resources, such as an ethics committee.
Confidentiality

Physician assistants should maintain confidentiality. By maintaining confidentiality, PAs respect patient privacy and help to prevent discrimination based on medical conditions. If patients are confident that their privacy is protected, they are more likely to seek medical care and more likely to discuss their problems candidly. In cases of adolescent patients, family support is important but should be balanced with the patient’s need for confidentiality and the PA’s obligation to respect their emerging autonomy. Adolescents may not be of age to make independent decisions about their health, but providers should respect that they soon will be. To the extent they can, PAs should allow these emerging adults to participate as fully as possible in decisions about their care. It is important that PAs be familiar with and understand the laws and regulations in their jurisdictions that relate to the confidentiality rights of adolescent patients. (See the section on Informed Consent.)

Any communication about a patient conducted in a manner that violates confidentiality is unethical. Because written, electronic, and verbal information may be intercepted or overheard, the PA should always be aware of anyone who might be monitoring communication about a patient.

PAs should choose methods of storage and transmission of patient information that minimize the likelihood of data becoming available to unauthorized persons or organizations. Modern technologies such as computerized record keeping and electronic data transmission present unique challenges that can make the maintenance of patient confidentiality difficult. PAs should advocate for policies and procedures that secure the confidentiality of patient information.

The Patient and the Medical Record

Physician assistants have an obligation to keep information in the patient’s medical record confidential. Information should be released only with the written permission of the patient or the patient’s legally authorized representative. Specific exceptions to this general rule may exist (e.g., worker’s compensation, communicable diseases, HIV, knife/gunshot wounds and/or abuse, substance abuse). It is important that a PA be familiar with and understand the laws and regulations in his or her jurisdiction that relate to the release of information. For example, stringent legal restrictions on release of genetic test results and mental health records often exist.

Both ethically and legally, a patient has certain rights to know the information contained in his or her medical record. While the chart is legally the property of the practice or the institution, the information in the chart is the property of the patient. Most states have laws that provide patients access to their medical records. The PA should know the laws and facilitate patient access to the information.

Disclosure

A physician assistant should disclose to his or her supervising physician information about errors made in the course of caring for a patient. The supervising physician and PA should disclose the error to the patient if such information is significant to the patient’s interests and well-being. Errors do not always constitute improper, negligent or unethical behavior, but failure to disclose them may.
Care of Family Members and Co-Workers

Treating oneself, co-workers, close friends, family members, or learners whom the physician assistant supervises or teaches may be unethical or create conflicts of interest. PAs should be aware that their judgment might be less than objective in cases involving friends, family members, learners, and colleagues and that providing “curbside” care might sway the individual from establishing an ongoing relationship with a provider. If it becomes necessary to treat a family member or close associate, a formal patient-provider relationship should be established, and the PA should be should consider transferring the patient’s care to another provider as soon as it is practical. If a close associate requests care, the PA may wish to assist by helping them find an appropriate provider.

There may be exceptions to this guideline, for example, when a PA runs an employee health center or works in occupational medicine. Even in those situations, PAs should be sure they do not provide informal treatment, but provide appropriate medical care in a formally established patient-provider relationship.

Genetic Testing

Evaluating the risk of disease and performing diagnostic genetic tests raise significant ethical concerns. Physician assistants should be knowledgeable about the benefits and risks of genetic tests. Testing should be undertaken only after the patient’s informed consent is obtained. If PAs order or conduct the tests, they should assure that appropriate pre- and post-test counseling is provided.

PAs should be sure that patients understand the potential consequences of undergoing genetic tests – from impact on patients themselves, possible implications for other family members, and potential use of the information by insurance companies or others who might have access to the information. Because of the potential for discrimination by insurers, employers, or others, PAs should be particularly aware of the need for confidentiality concerning genetic test results.

Reproductive Decision Making

Patients have a right to access the full range of reproductive health care services, including fertility treatments, contraception, sterilization, and abortion. Physician assistants have an ethical obligation to provide balanced and unbiased clinical information about reproductive health care.

When the PA’s personal values conflict with providing full disclosure or providing certain services such as sterilization or abortion, the PA need not become involved in that aspect of the patient’s care. By referring the patient to a qualified provider, the PA fulfills their ethical obligation to ensure the patient access to all legal options.

End of Life

Physician assistants have an obligation to optimize care and maximize quality of life for patients at the end of life. PAs are encouraged to facilitate open discussion with patients and their family members concerning end of life treatment choices.

PAs should involve the physician in all near-death planning. The PA should only withdraw life support with the supervising physician’s agreement and in accordance with the policies of the health care institution.
PAs should be aware of the medical, legal, social, and ethical issues in end of life decision-making. Advance directives, living wills, and organ donation should be discussed during routine patient visits.

**The PA and Individual Professionalism**

*Conflict of Interest*

Physician assistants should place service to patients before personal material gain and should avoid undue influence on their clinical judgment. Trust can be undermined by even the appearance of improper influence. Examples of excessive or undue influence on clinical judgment can take several forms. These may include financial incentives, pharmaceutical or other industry gifts, and business arrangements involving referrals. PAs should disclose any actual or potential conflict of interest to their patients.

Acceptance of gifts, trips, hospitality, or other items is discouraged. Before accepting a gift or financial arrangement, PAs might consider the guidelines of the Royal College of Physicians, “Would I be willing to have this arrangement generally known?” or of the American College of Physicians-American Society of Internal Medicine, “What would the public or my patients think of this arrangement?”

*Professional Identity*

Physician assistants should not misrepresent directly or indirectly, their skills, training, professional credentials, or identity. Physician assistants should uphold the dignity of the PA profession and accept its ethical values.

*Competency*

Physician assistants should commit themselves to providing competent medical care and extend to each patient the full measure of their professional ability as dedicated, empathetic health care providers. PAs should also strive to maintain and increase the quality of their health care knowledge, cultural sensitivity, and cultural competence through individual study and continuing education.

*Sexual Relationships*

It is unethical for physician assistants to become sexually involved with patients. It also may be unethical for PAs to become sexually involved with former patients or key third parties. Key third parties are individuals who have influence over the patient. These might include spouses or partners, parents, guardians, or surrogates.

Such relationships generally are unethical because of the PA’s position of authority and the inherent imbalance of knowledge, expertise, and status. Issues such as dependence, trust, transference, and inequalities of power may lead to increased vulnerability on the part of the current or former patients or key third parties.

*Gender Discrimination and Sexual Harassment*

It is unethical for physician assistants to engage in or condone any form of gender discrimination. Gender discrimination is defined as any behavior, action, or policy that adversely affects an individual or group of individuals due to disparate treatment, disparate impact, or the creation of a hostile or intimidating work or learning environment.
It is unethical for PAs to engage in or condone any form of sexual harassment. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature when:

Such conduct has the purpose or effect of interfering with an individual's work or academic performance or creating an intimidating, hostile or offensive work or academic environment, or

Accepting or rejecting such conduct affects or may be perceived to affect professional decisions concerning an individual, or

Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's training or professional position.

The PA and Other Professionals

Team Practice

Physician assistants should be committed to working collegially with other members of the health care team to assure integrated, well-managed, and effective care of patients. PAs should strive to maintain a spirit of cooperation with other health care professionals, their organizations, and the general public.

Illegal and Unethical Conduct

Physician assistants should not participate in or conceal any activity that will bring discredit or dishonor to the PA profession. They should report illegal or unethical conduct by health care professionals to the appropriate authorities.

Impairment

Physician assistants have an ethical responsibility to protect patients and the public by identifying and assisting impaired colleagues. “Impaired” means being unable to practice medicine with reasonable skill and safety because of physical or mental illness, loss of motor skills, or excessive use or abuse of drugs and alcohol.

PAs should be able to recognize impairment in physician supervisors, PAs, and other health care providers and should seek assistance from appropriate resources to encourage these individuals to obtain treatment.

PA—Physician Relationship

Supervision should include ongoing communication between the physician and the physician assistant regarding patient care. The PA should consult the supervising physician whenever it will safeguard or advance the welfare of the patient. This includes seeking assistance in situations of conflict with a patient or another health care professional.

Complementary and Alternative Medicine

A patient’s request for alternative therapy may create conflict between the physician assistant and the patient. Though physician assistants are under no obligation to provide an alternative therapy, they do have a responsibility to be sensitive to the patient’s needs and beliefs and to help the patient understand their medical condition. The PA should gain an understanding of the alternative therapy being considered or being used, the expected
outcome, and whether the treatment would clearly be harmful to the patient. If the
treatment would harm the patient, the PA should work diligently to dissuade the patient
from using it and advise other treatment.

**The PA and the Health Care System**

*Workplace Actions*

Physician assistants may face difficult personal decisions to withhold medical services
when workplace actions (e.g., strikes, sick-outs, slowdowns, etc.) occur. The potential
harm to patients should be carefully weighed against the potential improvements to
working conditions and, ultimately, patient care that could result. In general, PAs should
individually and collectively work to find alternatives to such actions in addressing
workplace concerns.

*Managed Care*

The focus of managed care organizations on cost containment and resource allocation can
present particular ethical challenges to clinicians. When practicing in managed care
systems, physician assistants should always act in the best interests of their patients and
as an advocate when necessary. PAs should actively resist managed care policies that
restrict free exchange of medical information. For example, a PA should not withhold
information about treatment options simply because the option is not covered by a
particular managed care organization.

PAs should inform patients of financial incentives to limit care, use resources in a fair and
efficient way, and avoid arrangements or financial incentives that conflict with the
patient’s best interests.

*PAs as Educators*

All physician assistants have a responsibility to share knowledge and information with
patients, other health professionals, learners, and the public. The ethical duty to teach
includes effective communication with patients so that they will have the information
necessary to participate in their health care and wellness.

*PAs and Research*

The most important ethical principle in research is honesty. This includes assuring
subjects’ informed consent, following treatment protocols, and accurately reporting
findings. Fraud and dishonesty in research should be reported so that the appropriate
authorities can take action.

Physician assistants involved in research must be aware of potential conflicts of interest.
The patient’s welfare takes precedence over the desired research outcome. Any conflict of
interest should be disclosed.

In scientific writing, PAs should report information honestly and accurately. Sources of
funding for the research must be included in the published reports.

Plagiarism is unethical. Incorporating the words of others, either verbatim or by
paraphrasing, without appropriate attribution is unethical and may have legal
consequences. When submitting a document for publication, any previous publication of
any portion of the document must be fully disclosed.
PAs as Expert Witnesses

The physician assistant expert witness should testify to what he or she believes to be the truth. The PA's review of medical facts should be thorough, fair, and impartial.

The PA expert witness should be fairly compensated for time spent preparing, appearing, and testifying. The PA should not accept a contingency fee based on the outcome of a case in which testimony is given or derive personal, financial, or professional favor in addition to compensation.

The PA and Society

Lawfulness

Physician assistants have the dual duty to respect the law and to work for positive change to laws that will enhance the health and well being of the community.

Executions

Physician assistants, as health care professionals, should not participate in executions because to do so would violate the ethical principle of beneficence.

Access to Care/Resource Allocation

Physician assistants have a responsibility to use health care resources in an appropriate and efficient manner so that all patients have access to needed health care. Resource allocation should be based on societal needs and policies, not the circumstances of an individual patient—PA encounter. PAs participating in policy decisions about resource allocation should consider medical need, cost-effectiveness, efficacy, and equitable distribution of benefits and burdens in society.

Community Well Being

Physician assistants should work for the health, well-being, and the best interest of both the patient and the community. Sometimes there is a dynamic moral tension between the well being of the community in general and the individual patient. Conflict between an individual patient's best interest and the common good is not always easily resolved. In general, PAs should be committed to upholding and enhancing community values, be aware of the needs of the community, and use the knowledge and experience acquired as professionals to contribute to an improved community.

Conclusion

The American Academy of Physician Assistants recognizes its responsibility to aid the PA profession as it strives to provide high quality, accessible health care. Physician assistants wrote these guidelines for themselves and other physician assistants. The ultimate goal is to honor patients and earn their trust while providing the best and most appropriate care possible. At the same time, PAs must understand their personal values and beliefs and recognize the ways in which those values and beliefs can impact the care they provide.
APPENDIX I

Additional References
ADDITIONAL REFERENCES

2014-2015 University Catalog

For additional information, the following sections of the University Catalog may be useful to students.

Calendar
Campus Services
Student Life
Student Services
Women’s Center
Admission to Grand Valley
Costs and Financial Aid
General Academic Policies and Regulations
Advising Resources and Special Programs
Office of Graduate Studies
Health Professions
Physical Therapy
Campus Maps

Student Code
(can be found at www.gvsu.edu/studentcode)

Students can refer to this University document for information on the following topics:
Student Rights and Responsibilities
Student Conduct
Rules and Regulations
Judicial Process
Student Grievance Procedures
Drug and Alcohol Policy
APPENDIX J

PA Competency
(Adopted from AAPA, PAEA, & NCCPA)
Physician Assistant Competencies: A Self-Evaluation Tool

Rate your strength in each of the competencies using the following scale:
1 = Needs Improvement 2 = Adequate 3 = Strong 4 = Very Strong

MEDICAL KNOWLEDGE
Medical knowledge includes an understanding of pathophysiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention. Physician assistants must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition, physician assistants are expected to demonstrate an investigatory and analytic thinking approach to clinical situations. Physician assistants are expected to:

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<td>• understand etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions</td>
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<td>• identify signs and symptoms of medical conditions</td>
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<td>• select and interpret appropriate diagnostic or lab studies</td>
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<td>• manage general medical and surgical conditions to include understanding the indications, contraindications, side effects, interactions, and adverse reactions of pharmacologic agents and other relevant treatment modalities</td>
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<td>• identify the appropriate site of care for presenting conditions, including identifying emergent cases and those requiring referral or admission</td>
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<td>• identify appropriate interventions for prevention of conditions</td>
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<td>• identify the appropriate methods to detect conditions in an asymptomatic individual</td>
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<td>• differentiate between the normal and the abnormal in anatomic, physiological, laboratory findings, and other diagnostic data</td>
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<td>• appropriately use history and physical findings and diagnostic studies to formulate a differential diagnosis</td>
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<td>• provide appropriate care to patients with chronic conditions</td>
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## Physician Assistant Competencies Self-Evaluation

1= Needs Improvement 2 = Adequate 3 = Strong 4 = Very Strong

### INTERPERSONAL & COMMUNICATION SKILLS

Interpersonal and communication skills encompass verbal, nonverbal and written exchange of information. Physician assistants must demonstrate interpersonal and communication skills that result in effective information exchange with patients, their patients’ families, physicians, professional associates, and the health care system. Physician assistants are expected to:

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<td>• create and sustain a therapeutic and ethically sound relationship with patients</td>
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<td>• use effective listening, nonverbal, explanatory, questioning, and writing skills to elicit and provide information</td>
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<td>• appropriately adapt communication style and messages to the context of the individual patient interaction</td>
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<td>• work effectively with physicians and other health care professionals as a member or leader of a health care team or other professional group</td>
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<tr>
<td>• apply an understanding of human behavior</td>
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<tr>
<td>• demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety</td>
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<tr>
<td>• accurately and adequately document and record information regarding the care process for medical, legal, quality, and financial purposes</td>
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</table>
Physician Assistant Competencies Self-Evaluation

1 = Needs Improvement 2 = Adequate 3 = Strong 4 = Very Strong

PATIENT CARE

Patient care includes age-appropriate assessment, evaluation, and management. Physician assistants must demonstrate care that is effective, patient-centered, timely, efficient, and equitable for the treatment of health problems and the promotion of wellness. Physician assistants are expected to:

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<th>Competency</th>
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<tr>
<td>• work effectively with physicians and other health care professionals to provide patient-centered care</td>
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<td>• demonstrate caring and respectful behaviors when interacting with patients and their families</td>
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<tr>
<td>• gather essential and accurate information about their patients</td>
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<td>• make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment</td>
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<tr>
<td>• develop and carry out patient management plans</td>
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<td>• counsel and educate patients and their families</td>
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<tr>
<td>• competently perform medical and surgical procedures considered essential in the area of practice</td>
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<tr>
<td>• provide health care services and education aimed at preventing health problems or maintaining health</td>
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</tbody>
</table>
Physician Assistant Competencies Self-Evaluation

1= Needs Improvement 2 = Adequate 3 = Strong 4 = Very Strong

PROFESSIONALISM
Professionalism is the expression of positive values and ideals as care is delivered. Foremost, it involves prioritizing the interests of those being served above one's own. Physician assistants must know their professional and personal limitations. Professionalism also requires that PAs practice without impairment from substance abuse, cognitive deficiency or mental illness. Physician assistants must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population and adherence to legal and regulatory requirements. Physician assistants are expected to demonstrate:

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<tbody>
<tr>
<td>understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant</td>
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<tr>
<td>professional relationships with physician supervisors and other health care providers</td>
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<tr>
<td>respect, compassion, and integrity</td>
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<tr>
<td>responsiveness to the needs of patients and society</td>
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<td>accountability to patients, society, and the profession</td>
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<td>commitment to excellence and on-going professional development</td>
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<td>commitment to ethical principals pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices</td>
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<td>sensitivity and responsiveness to patients’ culture, age, gender, and disabilities</td>
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<td>self-reflection, critical curiosity, and initiative</td>
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</table>
# Physician Assistant Competencies Self-Evaluation

1 = Needs Improvement 2 = Adequate 3 = Strong 4 = Very Strong

## PRACTICE-BASED LEARNING AND IMPROVEMENT

Practice-based learning and improvement includes the processes through which clinicians engage in critical analysis of their own practice experience, medical literature, and other information resources for the purpose of self-improvement. Physician assistants must be able to assess, evaluate, and improve their patient care practices. Physician assistants are expected to:

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<tr>
<td>• analyze practice experience and perform practice-based</td>
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<td>improvement activities using a systematic methodology in</td>
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<td>concert with other members of the health care delivery team</td>
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<td>• locate, appraise, and integrate evidence from scientific</td>
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<td>studies related to their patients’ health problems</td>
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<td>• obtain and apply information about their own population of</td>
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<td>patients and the larger population from which their patients</td>
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<td>are drawn</td>
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<td>• apply knowledge of study designs and statistical methods to</td>
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<td>the appraisal of clinical studies and other information on</td>
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<tr>
<td>diagnostic and therapeutic effectiveness</td>
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<td>• apply information technology to manage information, access</td>
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<td>on-line medical information, and support their own education</td>
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<td>• facilitate the learning of students and/or other health care</td>
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<td>professionals</td>
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<td>• recognize and appropriately address gender, cultural,</td>
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<td>cognitive, emotional, and other biases; gaps in medical</td>
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<tr>
<td>knowledge; and physical limitations in themselves and others</td>
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</table>
**Physician Assistant Competencies Self-Evaluation**

1= Needs Improvement 2 = Adequate 3 = Strong 4 = Very Strong

**SYSTEMS-BASED PRACTICE**

Systems-based practice encompasses the societal, organizational, and economic environments in which health care is delivered. Physician assistants must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that is of optimal value. PAs should work to improve the larger health care system of which their practices are a part. Physician assistants are expected to:

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<tbody>
<tr>
<td>• use information technology to support patient care decisions and patient education</td>
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<td>• effectively interact with different types of medical practice and delivery systems</td>
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<td>• understand the funding sources and payment systems that provide coverage for patient care</td>
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<td>• practice cost-effective health care and resource allocation that does not compromise quality of care</td>
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<td>• advocate for quality patient care and assist patients in dealing with system complexities</td>
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<td>• partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery of health care and patient outcomes</td>
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<td>• accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care</td>
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<tr>
<td>• apply medical information and clinical data systems to provide more effective, efficient patient care</td>
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<tr>
<td>• use the systems responsible for the appropriate payment of services</td>
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</table>
PHYSICIAN ASSISTANT COMPETENCIES ASSESSMENT PLAN

This plan is designed to assist learners in the development of professional behaviors and higher levels of cognitive and affective functioning. The plan will be facilitated by PAS Department faculty, and applies to all learners who matriculate in the Physician Assistant Studies Department.

1. All PAS learners will be responsible for the development of these physician assistant competencies as a part of their academic experience.

2. Each learner’s progress in the development of these physician assistant competencies will be reviewed by their advisor each semester, and recorded in the learner’s file.

3. Learners are expected to initiate a meeting with their assigned advisor, as part of their professional responsibilities each semester, during which the advisor will relate to them faculty feedback about their professional development.

4. Professional development assessment and goal setting will be done collaboratively by learners and their advisors at these regular meetings, documented, and signed by both the PAS learners and advisor.

5. Learners must maintain a satisfactory progression in physician assistant competencies development, as determined by the collaborative goal-setting and periodic faculty review.

6. Failure to maintain satisfactory progression in the area of physician assistant competencies development, as noted above, may result in academic probation or dismissal from the PA Program.

I understand and accept my responsibility for the development of the physician assistant competencies described in this document, which I have read, and I agree to abide by the conditions as set forth herein.

Learner Signature          Date

Advisor                    Date
APPENDIX K

PAS Curriculum
Grand Valley State University  
**Physician Assistant Studies Program**  
**PA PROFESSIONAL LEVEL CURRICULUM OUTLINE**

### FIRST PROFESSIONAL YEAR

<table>
<thead>
<tr>
<th>Fall – Semester 1</th>
<th>Winter – Semester 2</th>
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<tbody>
<tr>
<td>BMS 461 Regional Human Anatomy (4 cr)</td>
<td>PAS 502 Clinical Applications II (1 cr)</td>
</tr>
<tr>
<td>PAS 501 Clinical Applications I (2 cr)</td>
<td>PAS 512 Clinical Medicine I (6 cr)</td>
</tr>
<tr>
<td>PAS 511 Foundations of Clinical Medicine (4 cr)</td>
<td>PAS 522 Clinical Pathophysiology (1 cr)</td>
</tr>
<tr>
<td>PAS 521 Medical Physiology (3 cr)</td>
<td>PAS 532 Practical Therapeutics I (2 cr)</td>
</tr>
<tr>
<td>PAS 561 Clinical Applications Lab I (1 cr)</td>
<td>PAS 542 Clinical Problem Solving Sessions I (1 cr)</td>
</tr>
<tr>
<td>cr</td>
<td>PAS 551 Physician Assistant Profession Issues I (1 cr)</td>
</tr>
</tbody>
</table>

STA 610 Applied Statistics for Health Professions (3 cr)  
*Total Credits = 17 credits*

### Spring/Summer – Semester 3

<table>
<thead>
<tr>
<th>Fall – Semester 4</th>
<th>Winter – Semester 5</th>
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<tbody>
<tr>
<td>PAS 503 Clinical Applications III (1 cr)</td>
<td>PAS 610 Clinical Rotations I (12 cr)</td>
</tr>
</tbody>
</table>
| PAS 513 Clinical Medicine II (6 cr) | *Total Credits = 12 credits*
| PAS 523 Clinical Pathophysiology II (1 cr) | |
| PAS 533 Practical Therapeutics II (2 cr) | |
| PAS 543 Clinical Problem Solving Sessions II (1 cr) | |
| PAS 563 Clinical Applications Lab III (1 cr) | |
| PAS 573 Health Community Experience Lab II (1 cr) | |
| PAS 583 Evidence-Based Medicine II (2 cr) | |

*Total Credits = 15 credits*

### SECOND PROFESSIONAL YEAR

<table>
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<tr>
<th>Fall – Semester 4</th>
<th>Winter – Semester 5</th>
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<tbody>
<tr>
<td>PAS 504 Clinical Applications IV (1 cr)</td>
<td>PAS 610 Clinical Rotations I (12 cr)</td>
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</tbody>
</table>
| PAS 514 Clinical Medicine III (6 cr) | *Total Credits = 12 credits*
| PAS 524 Clinical Pathophysiology III (3 cr) | |
| PAS 534 Practical Therapeutics III (2 cr) | |
| PAS 544 Clinical Problem Solving Sessions III (1 cr) | |
| PAS 554 Physician Assistant Profession Issues II (1 cr) | |
| PAS 564 Clinical Applications Lab IV (1 cr) | |
| PAS 574 Health Community Experience Lab III (1 cr) | |
| PAS 584 Evidence-Based Medicine III (2 cr) | |

*Total Credits = 18 credits*

### THIRD PROFESSIONAL YEAR

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<tr>
<th>Fall – Semester 7</th>
<th>Winter – Semester 5</th>
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<tbody>
<tr>
<td>PAS 630 Clinical Rotations III (12 cr)</td>
<td>PAS 620 Clinical Rotations II (12 cr)</td>
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*Total Credits = 12 credits*

Total Physician Assistant Studies Program Credits = 103 credits
Professional Program Course Requirements for the M.P.A.S. Degree

BMS 461: Regional Human Anatomy  
PAS 501: Clinical Applications I  
PAS 502: Clinical Applications II  
PAS 503: Clinical Applications III  
PAS 504: Clinical Applications IV  
PAS 511: Foundations of Clinical Medicine  
PAS 512: Clinical Medicine I  
PAS 513: Clinical Medicine II  
PAS 514: Clinical Medicine III  
PAS 521: Medical Physiology  
PAS 522: Clinical Pathophysiology I  
PAS 523: Clinical Pathophysiology II  
PAS 524: Clinical Pathophysiology III  
PAS 532: Practical Therapeutics I  
PAS 533: Practical Therapeutics II  
PAS 534: Practical Therapeutics III  
PAS 542: Clinical Problem Solving Sessions I  
PAS 543: Clinical Problem Solving Sessions II  
PAS 544: Clinical Problem Solving Sessions III  
PAS 561: Clinical Applications Lab I  
PAS 562: Clinical Applications Lab II  
PAS 563: Clinical Applications Lab III  
PAS 564: Clinical Applications Lab IV  
PAS 572: Hospital Community Experience I  
PAS 573: Hospital Community Experience II  
PAS 574: Hospital Community Experience III  
PAS 551: Physician Assistant Profession Issues I  
PAS 554: Physician Assistant Profession Issues II  
PAS 582: Evidence-Based Medicine I  
PAS 583: Evidence-Based Medicine II  
PAS 584: Evidence-Based Medicine III  
PAS 610: Clinical Rotations I  
PAS 620: Clinical Rotations II  
PAS 630: Clinical Rotations III  
STA 610: Applied Statistics for Health Professions
PAS COURSE DESCRIPTIONS

PAS 501 Clinical Applications I. This is the first of four sequential courses designed to facilitate the development of medical history taking, physical examination skills, patient communication, clinical problem solving, clinical procedures, and ethical/legal considerations for the Physician Assistant. This first course focuses on history taking and physical examination in the healthy adult. (3-0-3). Offered Fall Semester, or other semesters as determined by the Department Chair. Prerequisite: Admission into the Physician Assistant Studies Department. Two credits.

PAS 502 Clinical Applications II. This is the second of four sequential courses designed to facilitate the development of medical history taking, physical examination skills, patient communication, clinical problem solving, clinical procedures, and ethical/legal considerations for the Physician Assistant. Focus is on physical examination skills and procedures that coincide with topics in Clinical Medicine I. (2-0-3). Offered Winter Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 501. Co-requisites: PAS 512, PAS 522, PAS 532, and PAS 542. Three credits.

PAS 503 Clinical Applications III. This is the third of four sequential courses designed to facilitate the development of medical history taking, physical examination skills, patient communication, clinical problem solving, clinical procedures, and ethical/legal considerations for the Physician Assistant. Focus is on physical examination skills and procedures that coincide with topics in Clinical Medicine II. (2-0-3). Offered Spring/Summer Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 502. Co-requisites: PAS 513, PAS 523, PAS 533, and PAS 543. Three credits.

PAS 504 Clinical Applications IV. This is the fourth of four sequential courses designed to facilitate the development of medical history taking, physical examination skills, patient communication, clinical problem solving, clinical procedures, and ethical/legal considerations for the Physician Assistant. Focus is on physical examination skills and procedures that coincide with topics in Clinical Medicine III. (2-0-3). Offered Fall Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 503. Co-requisites: PAS 514, PAS 524, PAS 534, and PAS 544. Three credits.

PAS 511 Foundations of Clinical Medicine. Designed as an introduction to clinical medicine topics, this Course will lay the foundation for future clinical medicine courses by helping the student understand and Apply fundamental concepts to patient care. Topics presented include historical medicine, epidemiology, oncology, infectious disease, laboratory studies, imaging, preventative, and genetic principles. (3-0-0). Offered Fall Semester, or as approved by the Department Chair. Prerequisite: Admission into the Physician Assistant Studies program. Three credits.

PAS 512 Clinical Medicine I. This course is the first of a three course sequence which provides students with a systematic approach to the etiology; epidemiology; manifestations; laboratory and diagnostic studies; prognosis and treatment of disease. This course will focus but is not limited to the hematological, cardiovascular, pulmonary, gastrointestinal, and renal systems. (6-0-0). Offered Winter Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 511, and successful completion of BMS 461. Co-requisites: PAS 502, PAS 522, PAS 532, and PAS 542. Six credits.

PAS 513 Clinical Medicine II. This course is the second of a three course sequence which provides students with a systematic approach to the etiology; epidemiology; manifestations; laboratory and diagnostic studies; prognosis and treatment of specific diseases. This course will focus but is not limited to the dermatologic, endocrine, neurologic, psychiatric, musculoskeletal, and rheumatologic systems. (6-0-0). Offered Spring/Summer Semester, or other semesters as approved by the Department Chair. Prerequisite: Admission into the Physician Assistant Studies Department and a letter grade of B or better in PAS 512. Co-requisites: PAS 503, PAS 523, PAS 533, and PAS 543. Six credits.
PAS 514 Clinical Medicine III. This course is the third of a three course sequence which provides students with a systematic approach to the etiology; epidemiology; manifestations; laboratory and diagnostic studies; prognosis and treatment of specific diseases. This course will focus but is not limited to women's health, pediatrics, ENT/ophthalmology/allergy, surgery, and emergency medicine. (6-0-0). Offered Fall Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 513. Co-requisites: PAS 504, PAS 524, PAS 534, and PAS 544. Six credits.

PAS 521 Medical Physiology. This course is designed for graduate students to learn and gain knowledge in the physiological principles. These concepts are essential for further progress in understanding mechanisms of disease and body systems. This understanding is essential for clinical medicine. Weekly problem solving discussions will emphasize clinical application of physiologic concepts. (3-1-0). Offered Fall Semester, or other semesters as determined by the Department Chair. Prerequisite: Admission into the Physician Assistant Studies Department or permission of instructor. Three credits.

PAS 522 Clinical Pathophysiology I. This is the first of three pathophysiology courses offered concurrently with the Clinical Medicine series. Pathophysiology at the molecular, cellular, organ, and total body levels will be applied in each organ system. Systems covered include, but are not limited to, hematologic, cardiovascular, pulmonary, gastrointestinal, and renal. (1-0-0). Offered Winter Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 521 Co-requisites: PAS 502, PAS 512, PAS 532, and PAS 542. One credit.

PAS 523 Clinical Pathophysiology II. This is the second of three pathophysiology courses offered concurrently with the Clinical Medicine series. Pathophysiology at the molecular, cellular, organ, and total body levels will be discussed in each body system. Systems covered include, but are not limited to, dermatologic, endocrine, neurologic, psychiatric, and musculoskeletal/rheumatologic. (1-0-0). Offered Spring/Summer Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 522. Co-requisites: PAS 503, PAS 513, PAS 533, and PAS 543. One credit.

PAS 524 Clinical Pathophysiology III. This is the third of three pathophysiology courses offered concurrently with the Clinical Medicine series. Pathophysiology at the molecular, cellular, organ, and total body levels will be applied in each body system. Topics covered include, but are not limited to, women's health, pediatrics, ENT/ophthalmology/allergy, and multisystem disorders. (3-0-0). Offered Fall Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 523. Co-requisites: PAS 504, PAS 514, PAS 534, PAS 544. Three credits.

PAS 532 Practical Therapeutics I. This is the first course in a series of three clinical pharmacology courses taught in a systems-based approach with the Clinical Medicine series. The course explores clinical implications of pharmacology for these topics (but not limited to) hematologic, cardiovascular, pulmonary, gastrointestinal, and renal. (2-0-0). Offered Winter Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 511. Co-requisite: PAS 502, PAS 512, PAS 522 and PAS 542. Two credits.

PAS 533 Practical Therapeutics II. This is the second course in a series of three clinical pharmacology courses taught in a systems-based approach with the Clinical Medicine series. The course explores clinical implications of pharmacology for these topics (but not limited to) dermatologic, endocrine, neurologic, psychiatric and musculoskeletal/rheumatologic. (2-0-0). Offered Spring/Summer Semester, or other semesters as determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 532. Co-requisites: PAS 503, PAS 513, PAS 523, and PAS 543. Two credits.

PAS 534 Practical Therapeutics III. This is the third course in a series of three clinical pharmacology courses taught in a systems-based approach with the Clinical Medicine series. The course explores clinical implications of pharmacology focusing on but not limited to these areas, women's health, pediatrics, surgery, ENT/ophthalmology/allergy, and emergency medicine. (2-0-0). Offered Fall semester, or other semesters as
determined by the Department Chair. Prerequisite: A letter grade of B or better in PAS 533. Co-requisites: PAS 504, PAS 514, PAS 524, and PAS 544. Two credits.

**PAS 542 Clinical Problem Solving Sessions I.** Designed for first year Physician Assistant Studies (PAS) students, this laboratory course is the first of three labs for development of PAS students’ clinical problem-solving and decision-making skills. Using problem-based learning methods, this course corresponds with modules of PAS clinical medicine and exposes students to an array of clinical health care issues. (0-0-3). Offered Winter Semester, or as approved by the Department Chair. Prerequisite: PAS 511, Co-requisite: PAS 512. One credit.

**PAS 543 Clinical Problem Solving Sessions II.** Developed for first year Physician Assistant Studies (PAS) students, this laboratory course is the second of three courses for development of PAS students' clinical problem-solving and decision-making skills. Using problem-based learning methods, this course supplements the modules of PAS clinical medicine and exposes students to an array of clinical health care issues. (0-0-3). Offered Spring/Summer Semester, or as approved by the Department Chair. Prerequisite: PAS 512 & PAS 542, Co-requisite: PAS 513. One credit.

**PAS 544 Clinical Problem Solving Sessions III.** Specifically for Physician Assistant Studies (PAS) students, this laboratory course will facilitate the development of PAS students’ clinical problem-solving and decision-making skills. Utilizing problem-based learning methods, this course encompasses all of the modules of the PAS clinical medicine series through active learning for an array of clinical health care issues. (0-0-3). Offered Fall Semester, or as approved by the Department Chair. Prerequisite: PAS 513 & PAS 543, Co-requisite: PAS 514. One credit.

**PAS 551 Physician Assistant Profession Issues I.** Designed for first year graduate Physician Assistant Studies (PAS) students, this introductory course is the first of two professional issues courses to develop PAS students' awareness and professional attributes. Professional history, certification, PA professional organizations, and other health delivery topics will be discussed. (1-0-0). Offered fall semester, or as approved by the Department Chair. Prerequisite: Admission into the PAS Department. One credit.

**PAS 554 Physician Assistant Profession Issues II.** Designed for second year Physician Assistant Studies (PAS) students, this course is the second of two professional issues courses to develop PAS students' skills in office and professional procedures prior to clerkships. Socioeconomic issues, billing and coding, risk management, and other legal issues in the PA profession will be explored. (1-0-0). Offered fall semester, or as approved by the Department Chair. Prerequisite: A letter grade of B or better in PAS 551. One credit.

**PAS 582 Evidence-Based Medicine I.** This course introduces students to evidence-based medicine and research design concepts, while emphasizing the examination of the best available evidence as a basis for clinical decision-making. Students will develop the skills to perform medical literature searches yielding evidence-based results. Methods for appraising the medical literature will be emphasized. Offered winter semester. Pre-requisite: Admission to the Physician Assistant Studies program, Three credits.

**PAS 583 Evidence-Based Medicine II.** This course builds upon the prerequisite evidence-based medicine (EBM) course (PAS 582) through continued implementation of the EBM strategies introduced in PAS 582. In PAS 583 the students will use concepts introduces in PAS 582 and apply them to help solve clinical problems. Methods for appraising the medical literature will be emphasized. Offered spring/summer semester. Prerequisite: Admission into the PAS Program. Two credits.

**PAS 584 Evidence-Based Medicine III.** This course builds upon the prerequisite evidence-based medicine (EBM) courses (PAS 582 and PAS 583) through continued implementation of the EBM strategies introduced. In PAS 584 the students will use concepts introduces in PAS 582/3 and apply them to help solve clinical problems. Methods for appraising the medical literature will be emphasized. Offered spring/summer semester. Prerequisite: Admission into the PAS Program. Two credits.
PAS 610 Clinical Rotations I. First course to transition students from didactic to clinical training. Students will be assigned to a combination of clinical rotations selected from: Family Practice, Internal Medicine, OB/GYN, Psychiatric Medicine, Emergency Medicine, Surgery, Rural/Underserved Medicine and clinical electives. Offered winter semester. Prerequisite: Successful completion of all professional didactic coursework. Twelve credits.

PAS 620 Clinical Rotations II. Second course in clinical training. Students will be assigned to a combination of clinical rotations selected from: Family Practice, Internal Medicine, OB/GYN, Psychiatric Medicine, Emergency Medicine, Surgery, Rural/Underserved Medicine and clinical electives. Offered spring/summer semester. Prerequisite: Successful completion of all professional didactic coursework. Twelve credits.

PAS 630 Clinical Rotations III. Final course to transition students from clinical training to clinical practice. Students will be assigned to a combination of clinical rotations selected from: Family Practice, Internal Medicine, OB/GYN, Psychiatric Medicine, Emergency Medicine, Surgery, Rural/Underserved Medicine and clinical electives. Offered fall semester. Prerequisite: Successful completion of all professional didactic coursework. Twelve credits.
Course Descriptions for Courses Outside of the Department

**STA 610 Applied Statistics for Health Professions** - Project-oriented overview of major statistical techniques commonly used in problems encountered in health professions. Students will learn to use a major statistical computing package. Hypothesis testing, t-tests, regression, analysis of variance, analysis of covariance, categorical data analysis, nonparametric statistics. Prerequisite: 215 or equivalent. Three credits. Offered fall, winter, and summer semesters.

**BMS 461 Regional Human Anatomy** This course involves study of the anatomy of the human body utilizing prosections. It is conducted at the Allendale Campus as part of the BMS department. Four credits.
APPENDIX L

CAMPUS MAPS
Please check www.gvsu.edu/opemtions for complete CHS Express shuttle schedule
Please check www.gvsu.edu/express for complete CHS Express shuttle schedule.
APPENDIX M

AGREEMENTS FORM
GVSU – PAS CLASS OF 2016

Student Handbook:
I read the "Student Handbook, August 2013", and agree to comply with program expectations. My questions regarding the handbook have been asked and answered to my satisfaction.

_________  ___________  _________
Printed name  Student Signature  Date

Application for Licensure:
I understand that the application for licensure as a physician assistant asks questions about felony conviction, misdemeanor conviction punishable by imprisonment for a maximum term of two years, misdemeanor conviction involving the illegal delivery, possession, or use of alcohol or a controlled substance (including motor vehicle violations), and treatment for substance abuse in the past 2 years. If any of the before are true, I understand that the individual state licensing boards will review my application for licensure and will decide about correct moral fitness. I understand that the individual state licensing board may refuse to grant a license to me.

_________  ___________  _________
Printed name  Signature  Date

If you have any questions, please get your questions answered from your advisor or the Department Chair before you sign this consent form.
APPENDIX N

References
Appendix N - REFERENCES

Appendix O

PAS DEPARTMENT PHILOSOPHY

The Physician Assistant (PA) is a health care professional who practices medicine with physician supervision. As a member of the health care team, the PA provides a broad range of medical diagnostic, therapeutic, and health promotion/disease prevention services. PAs are qualified by graduation from an accredited PA educational program and certification by the National Commission on Certification of Physician Assistants (NCCPA) to exercise a level of autonomy in the performance of clinical responsibilities within each state’s medical practice act-authorized scope of practice and the particular supervisory relationship they work. The clinical practice of the PA includes both primary care and specialty care roles, and spans a wide range of medical practice settings in both rural and urban settings. PA education also prepares physician assistants to deal with many medical emergencies. PAs often act as first or second assistants in major surgery, and provide pre- and post-operative care. The role of the physician assistant is centered on patient care responsibilities, including the social or psychological aspects of patient management, but may include educational, research, and administrative activities.

Our concern in educating PAs will remain:
1) Contribute to the learners’ broad educational background by including the humanities, natural and social sciences in the professional program and its prerequisites;
2) Develop the willingness of learners to actively and independently participate in their education;
3) Develop clinicians who understand the basis of all human health science and can utilize information from other disciplines of health science to improve the care in our particular area of expertise;
4) Develop clinicians who have a respect and basic understanding of all aspects of human development;
5) Develop professionals who are able to approach problems in health care and patient treatment from a problem solving perspective;
6) Develop health care experts who understand both the concepts of wellness and illness, and are able to instruct patients in the prevention of disease and disability as well as in the treatment of disease;
7) Develop clinicians who contribute to the body of knowledge in medicine through research activities;
8) Develop clinicians who have a commitment to continuing personal and professional growth;
9) Develop clinicians who are able to evaluate patients to determine the need for medical services and initiate appropriate referral to other professionals;
10) Develop clinicians who are able to assess therapeutic processes and outcomes using quantitative and qualitative data.

The PA world is a dynamic field with a bright future. Since its inception, the PA profession has evolved and adapted to meet changing needs in the health care delivery system.

VALUE STATEMENTS OF THE PHYSICIAN ASSISTANT PROFESSION
The Program expects learners to adopt and observe the Value Statements, which guide your new profession. Violations of this standard, in addition to deviance in ethics and integrity, will be regarded as professional misconduct and be subject to review as such (AAPA Code of Ethics).

Physician Assistants hold as their primary responsibility the health, safety, welfare, and dignity of all human beings.
Physician Assistants uphold the tenets of patient autonomy, beneficence, nonmaleficence, and justice.

Physician Assistants recognize and promote the value of diversity.

Physician Assistants treat equally all persons who seek their care.

Physician Assistants hold in confidence the information shared in the course of practicing medicine.

Physician Assistants assess their personal capabilities and limitations, striving always to improve their medical practice.

Physician Assistants actively seek to expand their knowledge and skills, keeping abreast of advances in medicine.

Physician Assistants work with other members of the health care team to provide compassionate and effective care of patients.

Physician Assistants use their knowledge and experience to contribute to an improved community.

Physician Assistants respect their professional relationship with physicians.

Physician Assistants share and expand knowledge within the profession.
Appendix P

STUDENT OUTCOME GOALS AND OBJECTIVES

Competencies for the Physician Assistant Profession

Preamble

In 2003, the National Commission on Certification of Physician Assistants (NCCPA) initiated an effort to define PA competencies in response to similar efforts being conducted within other health care professions and growing demand for accountability and assessment in clinical practice. The following year, representatives from three other national PA organizations, each bringing a unique perspective and valuable insights, joined NCCPA in that effort. Those organizations were the Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), the body that accredits PA educational programs; the Association of Physician Assistant Programs (APAP), the membership association for PA educators and Department Chairs; and the American Academy of Physician Assistants (AAPA), the only national membership association representing all PAs.

The resultant document, “Competencies for the Physician Assistant Profession,” is a foundation from which each of those four organizations, other physician assistant organizations, and individual physician assistants themselves can chart a course for advancing the competencies of the PA profession.

Introduction

The purpose of this document is to communicate to the PA profession and the public a set of competencies that all physician assistants regardless of specialty or setting are expected to acquire and maintain throughout their careers. This document serves as a map for the individual PA, the physician-PA team, and organizations that are committed to promoting the development and maintenance of these professional competencies among physician assistants.

The clinical role of PAs includes primary and specialty care in medical and surgical practice settings. Professional competencies* for physician assistants include the effective and appropriate application of medical knowledge, interpersonal and communication skills, patient care, professionalism, practice-based learning and improvement, systems-based practice, as well as an unwavering commitment to continual learning and professional growth, and the physician-PA team, for the benefit of patients and the larger community being served. These competencies are demonstrated within the scope of practice, whether medical or surgical, for each individual physician assistant as that scope is defined by the supervising physician and appropriate to the setting.

PHYSICIAN ASSISTANT COMPETENCIES

The PA profession defines the specific knowledge, skills, and attitudes required and provides educational experiences as needed in order for physician assistants to acquire and demonstrate these competencies.

Medical knowledge

Medical knowledge includes an understanding of patho-physiology, patient presentation, differential diagnosis, patient management, surgical principles, health promotion, and disease prevention. Physician assistants must demonstrate core knowledge about established and evolving biomedical and clinical sciences and the application of this knowledge to patient care in their area of practice. In addition, physician assistants are expected to demonstrate an investigatory and analytic thinking approach to clinical situations. Physician assistants are expected to:

- Understand etiologies, risk factors, underlying pathologic process, and epidemiology for medical conditions.
- Identify signs and symptoms of medical conditions.
- Select and interpret appropriate diagnostic or lab studies.
- Manage general medical and surgical conditions to include understanding the indications, contraindications, side effects, interactions, and adverse reactions of pharmacologic agents and other relevant treatment modalities.
- Identify the appropriate site of care for presenting conditions, including identifying emergent cases and those requiring referral or admission.
In 1999, the Accreditation Council for Graduate Medical Education (ACGME) endorsed a list of general competencies for medical residents. NCCPA’s Eligibility Committee, with substantial input from representatives of AAPA, APAP, and ARC-PA, has modified the ACGME’s list for physician assistant practice, drawing from several other resources including the work of Drs. Epstein and Hundert; research conducted by AAPA’s EVP/CEO, Dr. Steve Crane; and NCCPA’s own examination content blueprint.

- Identify appropriate interventions for prevention of conditions.
- Identify the appropriate methods to detect conditions in an asymptomatic individual.
- Differentiate between the normal and the abnormal in anatomy, physiology, laboratory findings, and other diagnostic data.
- Appropriately use history and physical findings and diagnostic studies to formulate a differential diagnosis.
- Provide appropriate care to patients with chronic conditions.

**Interpersonal and communication skills**

Interpersonal and communication skills encompass verbal, nonverbal, and written exchange of information. Physician assistants must demonstrate interpersonal and communication skills that result in effective information exchange with patients, their patients’ families, physicians, professional associates, and the health care system. Physician assistants are expected to:

- Create and sustain a therapeutic and ethically sound relationship with patients.
- Use effective listening, nonverbal, explanatory, questioning, and writing skills to elicit and provide information.
- Appropriately adapt communication style and messages to the context of the individual patient interaction.
- Work effectively with physician and other health care professionals as a member or leader of a health care team or other professional group.
- Apply an understanding of human behavior.
- Demonstrate emotional resilience and stability, adaptability, flexibility, and tolerance of ambiguity and anxiety.
- Accurately and adequately document and record information regarding the care process for medical, legal, quality, and financial purposes.

**Patient care**

Patient care includes age appropriate assessment, evaluation, and management. Physician assistants must demonstrate care that is effective, patient-centered, timely, efficient, and equitable for the treatment of health problems and the promotion of wellness. Physician assistants are expected to:

- Work effectively with physicians and other health care professionals to provide patient-centered care.
- Demonstrate caring and respectful behaviors when interacting with patients and their families.
- Gather essential and accurate information about their patients.
- Make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence, and clinical judgment.
- Develop and carry out patient management plans.
- Counsel and educate patients and their families.
- Competently perform medical and surgical procedures considered essential in the area of practice.
- Provide health care services and education aimed at preventing health problems or maintaining health.

**Professionalism**

Professionalism is the expression of positive values and ideals as care is delivered. Foremost, it involves prioritizing the interests of those being served above one’s own. Physician assistants must know their professional and personal limitations. Professionalism also requires that PAs practice without impairment from substance abuse, cognitive deficiency, or mental illness. Physician assistants must demonstrate a high level of responsibility, ethical practice, sensitivity to a diverse patient population, and adherence to legal and regulatory requirements. Physician assistants are expected to demonstrate:
- Understanding of legal and regulatory requirements, as well as the appropriate role of the physician assistant.
- Professional relationships with physician supervisors and other health care providers.
- Respect, compassion, and integrity.
- Responsiveness to the needs of patients and society.
- Accountability to patients, society, and the profession.
- Commitment to excellence and ongoing professional development.
- Commitment to ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practice.
- Sensitivity and responsiveness to patients’ culture, age, gender, and disabilities.
- Self-reflection, critical curiosity, and initiative.

Practice-based learning and improvement
Practice-based learning and improvement includes the processes through which clinicians engage in critical analysis of their own practice experience, medical literature, and other information resources for the purpose of self-improvement. Physician assistants must be able to assess, evaluate, and improve their patient care practices. **Physician assistants** are expected to:

- Analyze practice experience and perform practice-based improvement activities using a systematic methodology in concert with other members of the health care delivery team.
- Locate, appraise, and integrate evidence from scientific studies related to their patients’ health problems.
- Obtain and apply information about their own population of patients and the larger population from which their patients are drawn.
- Apply knowledge of study designs and statistical methods to the appraisal of clinical studies and other information on diagnostic and therapeutic effectiveness.
- Apply information technology to manage information, access on-line medical information, and support their own education.
- Facilitate the learning of students and/or other health care professionals.
- Recognize and appropriately address gender, cultural, cognitive, emotional, and other biases; gaps in medical knowledge; and physical limitations in themselves and others.

Systems-based practice
Systems-based practice encompasses the societal, organizational, and economic environments in which health care is delivered. Physician assistants must demonstrate an awareness of and responsiveness to the larger system of health care to provide patient care that is of optimal value. PAs should work to improve the larger health care system of which their practices are a part. Physician assistants are expected to:

- Use information technology to support patient care decisions and patient education
- Effectively interact with different types of medical practice and delivery systems.
- Understand the funding sources and payment systems that provide coverage for patient care.
- Practice cost-effective health care and resource allocation that does not compromise quality of care.
- Advocate for quality patient care and assist patients in dealing with system complexities.
- Partner with supervising physicians, health care managers, and other health care providers to assess, coordinate, and improve the delivery of health care and patient outcomes.
- Accept responsibility for promoting a safe environment for patient care and recognizing and correcting systems-based factors that negatively impact patient care.
- Use information technology to support patient care decisions and patient education.
- Apply medical information and clinical data systems to provide more effective, efficient patient care.
- Utilize the systems responsible for the appropriate payment of services.

See Appendix G for GVSU PA Studies Student Competency Checklist
See Appendix N for References