This clinical handbook has been developed by the faculty and administration of the Pace University-Lenox Hill Hospital Physician Assistant Program to provide the student with specific guidelines, rights, and responsibilities regarding the Physician Assistant Program. This handbook is designed to supplement rather than supplant existing University policies and procedures, including those set forth in University catalog and graduate Student handbooks. We encourage every student to become familiar with, and refer to, those and other University publications for further information.

Any questions regarding policies contained within this manual should be directed to the Director of the Physician Assistant Program. Although every effort has been made to make this handbook as complete and up-to-date as possible, it should be recognized that circumstances will occur that the handbook does not cover. Changes will also be necessary in the handbook due to changes in the Physician Assistant Program. Students will be notified of any changes or additions in writing and they will become effective immediately upon notification.

When the handbook does not cover a specific circumstance or the interpretation is ambiguous, the Director of the Program will make the necessary decision or interpretation. The fact that written policies are not in the handbook should not be interpreted as an absence of a policy or regulation. If students have questions regarding a situation, they should discuss them with the Director of the Physician Assistant Program.

Please note that if there is any conflict between the specific policies and procedures set forth in this handbook and general University policies and procedures, the policies and procedures in this handbook shall be controlling. We hope you find this manual helpful and wish you much success in your studies.

-- The Program Faculty

New policies approved after publication of this handbook may add to or supersede those contained herein.
All policies are derived from the
“Accreditation Standards for Physician Assistant Education”
Accreditation Review Commission on Education for the Physician Assistant, Inc.
(ARC-PA)

Accreditation Status

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

Accreditation remains in effect until the program closes or withdraws from the accreditation process or until accreditation is withdrawn for failure to comply with the Standards. The date for the next validation review of the program by the ARC-PA will be September 2020. The review date is contingent upon continued compliance with the Accreditation Standards and ARC-PA policy.

As part of the licensing process in most states, including New York, both successful completion of an accredited program and passage of the PANCE are required to practice. Specific information regarding the licensing process can be obtained by contacting the licensing authority in the state in which you intend to practice.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>GENERAL INFORMATION</td>
<td>1</td>
</tr>
<tr>
<td>MISSION STATEMENT</td>
<td>2</td>
</tr>
<tr>
<td>PROGRAM ADMINISTRATION</td>
<td>3</td>
</tr>
<tr>
<td>PROGRAM TECHNICAL STANDARDS</td>
<td>5</td>
</tr>
<tr>
<td>EXPECTED STUDENT LEARNING OUTCOMES</td>
<td>7</td>
</tr>
<tr>
<td>STANDARDS OF PROFESSIONAL CONDUCT FOR THE PHYSICIAN ASSISTANT STUDENT</td>
<td>7</td>
</tr>
<tr>
<td>CLINICAL EDUCATION LABS CODE OF CONDUCT</td>
<td>12</td>
</tr>
<tr>
<td>DESCRIPTION OF CLINICAL YEAR COURSES</td>
<td>12</td>
</tr>
<tr>
<td>LIST OF REQUIRED TEXTS</td>
<td>14</td>
</tr>
<tr>
<td>PROFESSIONAL PUBLICATIONS</td>
<td>15</td>
</tr>
<tr>
<td>NEW YORK STATE EDUCATION DEPARTMENT REGISTRATION AND NCCPA EXAMINATION</td>
<td>15</td>
</tr>
<tr>
<td>CRITERIA</td>
<td></td>
</tr>
<tr>
<td>DISEASE LIST AND CONTENT OUTLINE FOR NCCPA EXAM</td>
<td>16</td>
</tr>
<tr>
<td>PROFESSIONAL AGENCIES AND REGULATORY BODIES</td>
<td>21</td>
</tr>
<tr>
<td>STUDENT RESOURCES</td>
<td>25</td>
</tr>
<tr>
<td>CLASSROOMS</td>
<td>26</td>
</tr>
<tr>
<td>CLINICAL EDUCATION LABS</td>
<td>26</td>
</tr>
<tr>
<td>LIBRARIES &amp; TEXTS</td>
<td>26</td>
</tr>
<tr>
<td>COMPUTER RESOURCE CENTERS</td>
<td>27</td>
</tr>
<tr>
<td>FINANCIAL AID</td>
<td>27</td>
</tr>
<tr>
<td>CAREER SERVICES</td>
<td>27</td>
</tr>
<tr>
<td>INSTRUCTIONAL AIDS</td>
<td>27</td>
</tr>
<tr>
<td>STUDENT POLICIES</td>
<td>28</td>
</tr>
<tr>
<td>STUDENT RIGHTS</td>
<td>29</td>
</tr>
<tr>
<td>ADVISING</td>
<td>30</td>
</tr>
<tr>
<td>HEALTH CLEARANCE POLICY</td>
<td>32</td>
</tr>
<tr>
<td>PACE UNIVERSITY IMMUNIZATION POLICY</td>
<td>33</td>
</tr>
<tr>
<td>CLINICAL POLICIES</td>
<td>35</td>
</tr>
<tr>
<td>GENERAL GUIDELINES FOR HOSPITAL PRACTICE</td>
<td>36</td>
</tr>
<tr>
<td>ATTENDANCE</td>
<td>37</td>
</tr>
<tr>
<td>UNIVERSITY HOLIDAY</td>
<td>39</td>
</tr>
<tr>
<td>SNOW DAYS</td>
<td>39</td>
</tr>
<tr>
<td>REVIEW OF PROTOCOL FOR ABSENCES</td>
<td>39</td>
</tr>
<tr>
<td>DRESS CODE</td>
<td>39</td>
</tr>
<tr>
<td>IDENTIFICATION</td>
<td>40</td>
</tr>
<tr>
<td>PATIENTS’ RIGHT AND CONFIDENTIALITY OF MEDICAL RECORD HEALTH HISTORY</td>
<td>40</td>
</tr>
<tr>
<td>INFORMATION</td>
<td></td>
</tr>
<tr>
<td>PATIENT RECORDS, PHYSICIAN REVIEW, COUNTERSIGNATURE</td>
<td>41</td>
</tr>
<tr>
<td>CHARTING</td>
<td>41</td>
</tr>
<tr>
<td>PRESCRIPTIONS AND HOSPITAL ORDERS</td>
<td>41</td>
</tr>
<tr>
<td>INCIDENTS/ACCIDENTS IN THE CLINICAL SETTING INCLUDING BLOOD-BORNE PATH</td>
<td>42</td>
</tr>
<tr>
<td>EXPOSURE (EX. NEEDLE STICK)</td>
<td></td>
</tr>
<tr>
<td>UNIVERSAL PRECAUTIONS</td>
<td>42</td>
</tr>
<tr>
<td>LIVING ARRANGEMENTS</td>
<td>44</td>
</tr>
<tr>
<td>CLERKSHIP ASSIGNMENT POLICY</td>
<td>44</td>
</tr>
<tr>
<td>TRANSPORTATION</td>
<td>44</td>
</tr>
<tr>
<td>OPTIONAL STUDENT INITIATED CLERKSHIPS</td>
<td>44</td>
</tr>
<tr>
<td>EMPLOYMENT OPPORTUNITIES/OPERATIONAL POLICY REGARDING STUDENTS</td>
<td>45</td>
</tr>
<tr>
<td>Performing Service Work</td>
<td>45</td>
</tr>
<tr>
<td>SURVIVAL TIPS</td>
<td>45</td>
</tr>
<tr>
<td>PACKRAT EXAMINATION</td>
<td>46</td>
</tr>
</tbody>
</table>
INTRODUCTION

_Congratulations_ on your promotion to clinical year! You should all be extremely proud of yourselves as you have just completed an extremely vigorous didactic course load.

The clinical year is the critical link between the student and graduate physician assistant. Your preceptors, as well as other instructors, will provide a number of opportunities for you to apply your newly acquired knowledge and skills to actual patient activities. Seize this opportunity to enhance your education to its fullest by committing 100% to this experience. Take advantage of each and every opportunity available. Making the most of clinical rotations depends primarily on you and how much effort, work and dedication you are willing to put in. All clerkships will not be perfect but remember that learning experiences can and do exist under all circumstances. This year will provide you with tremendous growth, both personally and professionally.

This manual was designed to provide students with most of the information necessary to keep you on track in completing your requirement for clerkship assignments. Please keep this information where it will be easily accessible. If you have a question please refer to the information in this handbook, then contact the program for assistance.

Please know that the faculty and staff are available to support and to help guide you through this most exciting period. You will be representing our program and the PA Profession while out on clinical rotations. Continue to conduct yourself in a professional manner. We are all very proud of you and wish you the very best as you begin this most important component of your clinical education.
GENERAL INFORMATION
MISSION STATEMENT

The mission of the Pace University-Lenox Hill Hospital Physician Assistant Program is to conduct a quality education program that produces superior physician assistants who possess the requisite skills, knowledge, attitude and understanding to function in diverse communities, populations, and settings, and to treat all patients with dignity, respect and compassion.

PROGRAM VISION

The Pace University-Lenox Hill Hospital will create an academic environment that will attract faculty, staff and students who are dedicated to the Program’s mission to provide quality and culturally sensitive medical care.

PROGRAM GOALS

The Pace University-Lenox Hill Hospital Physician Assistant Program is deeply committed to:

- Developing within each student a strong foundation in the basic medical and clinical sciences to enable them to meet the life-long challenges inherent in the practice of medicine.

- Preparing students to function as primary care providers in the health care setting while providing enhanced training for those who wish to specialize.

- Teaching students to have an integrated, patient and family-centered view including treatment, education, prevention and health care management.

- Intensifying the program’s commitment to service in the community to augment the students’ abilities to provide culturally sensitive care.

- Equipping students to meet the changing needs of the health care system and to work as collaborative members of the health care team.

- Developing faculty who are regional, state, and national leaders in Physician Assistant and Healthcare delivery, policy, research, training, and education.

SPONSORSHIP

On July 31, 1996, the New York State Education Department registered the Pace University-Lenox Hill Hospital PA Program. The Commission on Higher Education Middle States Association of Colleges and Secondary Schools accredits Pace University. The most recent Commission action was March 2009. Pace’s clinical affiliate, Lenox Hill Hospital was awarded three-year accreditation by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) following its most recent survey in February 2011. The nineteen residency programs offered by Lenox Hill Hospital are accredited by their respective agencies.
PROGRAM ADMINISTRATION

The Pace University-Lenox Hill Hospital Physician Assistant Program is administered by the department personnel listed below. The Program administration is responsible for class selection, curriculum design and development, student and course evaluation, student advising, and other matters relevant to the Program. It is important to the faculty of the Pace University-Lenox Hill Hospital Physician Assistant Program that there is open communication between students, faculty and staff. It is our intention, therefore, that all department personnel be available for student consultation as required.

<table>
<thead>
<tr>
<th>Department Chair and Program Director</th>
<th>Medical Director</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Associate Clinical Professor</strong></td>
<td></td>
</tr>
<tr>
<td>Susan Cappelmann, MS, MT (ASCP), PA-C</td>
<td></td>
</tr>
<tr>
<td>Pace University</td>
<td></td>
</tr>
<tr>
<td>163 William Street, 5th Floor</td>
<td></td>
</tr>
<tr>
<td>New York, NY 10038</td>
<td></td>
</tr>
<tr>
<td>(212) 618-6045</td>
<td></td>
</tr>
<tr>
<td><a href="mailto:scappelmann@pace.edu">scappelmann@pace.edu</a></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Associate Director</th>
<th>Director of Didactic Education</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assistant Clinical Professor</strong></td>
<td><strong>Clinical Professor</strong></td>
</tr>
<tr>
<td>Gina Pontrelli, MS, PA-C</td>
<td>Jean M. Covino, DHSc, PA-C</td>
</tr>
<tr>
<td>Pace University</td>
<td>Pace University</td>
</tr>
<tr>
<td>163 William Street, 5th Floor</td>
<td>163 William Street, 5th Floor</td>
</tr>
<tr>
<td>New York, NY 10038</td>
<td>New York, NY 10034</td>
</tr>
<tr>
<td>(212) 618-6007</td>
<td>(212) 618-6047</td>
</tr>
<tr>
<td><a href="mailto:gpontrelli@pace.edu">gpontrelli@pace.edu</a></td>
<td><a href="mailto:jcovino@pace.edu">jcovino@pace.edu</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Director of Clinical Education</th>
<th>Director of Admissions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Associate Clinical Professor</strong></td>
<td><strong>Assistant Clinical Professor</strong></td>
</tr>
<tr>
<td>Alison Ismael, MS, PA-C</td>
<td>Kate Kunstel, MS, PA-C</td>
</tr>
<tr>
<td>Pace University</td>
<td>Pace University</td>
</tr>
<tr>
<td>163 William Street, 5th Floor</td>
<td>163 William Street, 5th Floor</td>
</tr>
<tr>
<td>New York, NY 10038</td>
<td>New York, NY 10038</td>
</tr>
<tr>
<td>(212) 618-6048</td>
<td>(212) 618-6044</td>
</tr>
<tr>
<td><a href="mailto:aismael@pace.edu">aismael@pace.edu</a></td>
<td><a href="mailto:kkunstel@pace.edu">kkunstel@pace.edu</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Academic Coordinator</th>
<th>Academic Faculty</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clinical Professor</strong></td>
<td><strong>Associate Clinical Professor</strong></td>
</tr>
<tr>
<td>Ellen Mandel, DMH, PA-C</td>
<td>Jennifer Hofmann, MS, PA-C</td>
</tr>
<tr>
<td>Pace University</td>
<td>Pace University</td>
</tr>
<tr>
<td>163 William Street, 5th Floor</td>
<td>163 William Street, 5th Floor</td>
</tr>
<tr>
<td>New York, NY 10038</td>
<td>New York, NY 10038</td>
</tr>
<tr>
<td>(212) 618-6042</td>
<td>(212) 618-6017</td>
</tr>
<tr>
<td><a href="mailto:emandel2@pace.edu">emandel2@pace.edu</a></td>
<td><a href="mailto:jhofmann@pace.edu">jhofmann@pace.edu</a></td>
</tr>
</tbody>
</table>
Academic Faculty
Assistant Clinical Professor
Tracey Kramar, MS, PA-C
Pace University
163 William Street, 5th Floor
New York, NY 10038
(212) 618-6043
tkramar@pace.edu

Clinical Coordinator
Assistant Clinical Professor
Tracy Van Ness, MS, PA-C
Pace University
163 Williams St, 5th Floor
New York, NY 10038
(212) 618-6019
tvanness@pace.edu

Clinical Coordinator
Assistant Clinical Professor
Shannon North, MS, PA-C
Pace University
163 William Street, 5th Floor
New York, NY 10038
(212) 618-6036
snorth@pace.edu

Senior Didactic Administrative Assistant
Sherylyne Toque
Pace University
163 William Street, 5th Floor
New York, NY 10038
(212) 618-6054
stoque@pace.edu

Program Administrative Assistant
Natasha Yukhnovskaya
Pace University
163 William Street, 5th Floor
New York, NY 10038
(212) 618-6053
nyukhnovskaya@pace.edu

Admissions Administrative Assistant
Towanna Alexander
Pace University
163 William Street, 5th Floor
New York, NY 10038
(212) 618-6052
talexander@pace.edu

Clinical Administrative Assistant
Kimya Gittens
Pace University
163 William Street, 5th Floor
New York, NY 10038
(212) 618-6051
kgittens@pace.edu

Program Website:
http://www.pace.edu/physician-assistant/

Program Fax: (212) 618-6055

In case of an emergency after normal office hours: Please contact the Clinical Coordinators via email addresses given above.
PROGRAM TECHNICAL STANDARDS

Pace University complies with the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, as well as state and local laws which prohibit institutions of higher education from discriminating against students with disabilities. Although all applicants and students are held to the same technical and academic standards, reasonable accommodations are provided to qualified individuals with a disability. In order to request a reasonable accommodation, applicants and students should read *Information for Students with Disabilities* which may be found at [http://www.pace.edu/counseling-center/node/22](http://www.pace.edu/counseling-center/node/22) and then contact the Coordinator of Disability Services for their campus.

The ability to meet the technical standards and educational objectives established by the program is essential for the fulfillment of the requirements for the Master of Science in Physician Assistant Studies degree. The academic and technical standards established by the faculty require that all students accepted by the Pace University – Lenox Hill Hospital PA Program possess the physical, cognitive, and behavioral abilities that insure that they will be able to complete all aspects of the curriculum. Students admitted to the Physician Assistant (PA) Program must have the intellectual, emotional and physical abilities to acquire the knowledge, behaviors, and clinical skills needed to successfully complete the entire curriculum and practice medicine as a physician assistant. The technical standards outlined below ("Technical Standards"), in conjunction with established academic standards, are followed by the Admissions Committee to select students who possess the intelligence, integrity, physical, and personal as well as emotional characteristics that are necessary to become an effective physician assistant. The Program and sponsoring institution must maintain the integrity of the curriculum and preserve those elements deemed essential to the education of a physician assistant. The program and sponsoring institution cannot compromise the health and safety of others and reserve the right not to admit any applicant who cannot meet the technical standards or who would constitute a direct threat to the health and safety of others, e.g., those individuals who are currently impaired by alcohol or substance abuse cannot meet the Technical Standards.

**Technical Standards:**

Granting of the PA degree signifies that the holder is a physician assistant prepared for entry into the practice of medicine. Therefore it follows that graduates must have the knowledge and skills to practice medicine as PAs in a broad variety of clinical situations and to render a wide spectrum of patient care. Candidates must also have the physical and emotional stamina to function in a competent manner in educational and practice settings that may involve heavy workloads and stressful situations. Accordingly, candidates for the degree must be able to perform specific essential functions that the faculty deem requisite for the practice of medicine. These functions, expressed as technical standards, fall into several broad categories, including: observation, communication; motor; conceptual, integrative and quantitative; and behavioral and social.

- **Observation:** Candidates must be able to observe demonstrations in the basic sciences, medical illustrations and models, microscopic studies of microorganisms and tissues in normal and pathological states. They must also be able to directly and accurately observe a patient’s demeanor, see a patient’s physical condition, and obtain a medical history and
perform a physical examination correctly on the patient in order to integrate the information derived from these observations in order to develop an accurate diagnostic and treatment plan. These skills require the functional use of vision, hearing, smell, and somatic sensation.

- **Communication:** Candidates must be able to speak, hear, and observe patients in a clinical setting and elicit information, perceive nonverbal communications and detect changes in mood. They must be able to record information accurately and clearly, speak fluent English, and communicate effectively and sensitively with patients and families. Candidates must also be able to communicate effectively with other members of the healthcare team in oral, written and electronic form, and provide accurate information in patient care settings in which decisions based upon those communications must be made rapidly.

- **Motor:** Candidates must have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other diagnostic maneuvers necessary to complete a full physical examination. They must possess motor function sufficient to perform basic laboratory tests (e.g., urinalysis, CBC, etc.) and carry out diagnostic procedures (e.g., venipuncture, arterial puncture, paracentesis, thoracentesis, lumbar puncture, etc.). These skills require coordination of gross and fine muscle movements, equilibrium, and sensation. Candidates must be able to execute the appropriate motor movements required to provide general care as well as emergency treatment to patients. Examples of emergency treatment reasonably required of physician assistants are cardiopulmonary resuscitation, administration of intravenous medication, the application of pressure to stop bleeding, the management of obstructed airways, the suturing of simple wounds, and the performance of simple obstetrical maneuvers. A candidate must be able to transport themselves from one location to another in a timely fashion in order to facilitate patient care responsibilities and receive educational training.

- **Interpretative, Conceptual and Quantitative:** Candidates for the degree must have effective and efficient learning techniques and habits that allow for mastery of the complex PA curriculum. They must be able to learn through a variety of modalities, including, but not limited to, classroom instruction, small group activities, individual study, preparation and presentation of reports, and use of computer technology. They must be able to memorize, measure, calculate, reason, analyze, and synthesize. They must also be able to comprehend spatial relationships and three-dimensional models.

- **Behavioral and Social Attributes:** Candidates must understand the legal and ethical aspects of the practice of medicine and function within the guidelines established by the law and by the ethical standards of the PA profession. They must be able to relate to patients and their families, colleagues, and other members of the healthcare team with courtesy, maturity, and respect for the dignity of individuals. This requires that they place the welfare of their patients foremost, and demonstrate honesty, integrity, dedication, compassion and nondiscrimination in the care of their patients. They must at all times demonstrate the emotional stability to be able to exercise good judgment, and carry out prompt completion of all the responsibilities attendant to the diagnosis and care of their patients in a sensitive and effective manner. This sensitivity includes self-examination of personal attitudes, perceptions, and stereotypes in order to avoid potential negative impact on relationships and patient care. Applicants must be able to adapt to changing environments, display flexibility and professional responsibility to their patients, and to
learn to function in an environment of uncertainty, in which changes may occur rapidly and without warning. A candidate must be able to accept criticism and respond by a modification of behavior. All of these personal qualities will be assessed during the admissions and educational process.

EXPECTED STUDENT LEARNING OUTCOMES

1. Elicit a complete or directed patient history.
2. Perform a complete or directed physical examination.
3. Recognize “normal” vs. abnormal findings on the history and physical examination.
4. Develop appropriate differential diagnoses, problem lists, and management plans.
5. Accurately record and orally present findings in an organized manner.
6. Perform, request, and/or interpret routine laboratory or diagnostic tests/studies.
7. Initiate treatment for common problems encountered in patient care including the writing of medical orders and prescriptions.
8. Perform routine therapeutic procedures, e.g. suturing and casting, and assist in surgical procedures.
9. Provide appropriate health education and counseling for patients.
11. Recognize the indications for patient/family referral and initiate such referrals.
12. Recognize the value of consultation with colleagues, physicians, and other health professionals.
13. Recognize the contribution of other health care professionals to the delivery of patient care and work effectively with them towards meeting patient care objectives in a variety of settings.
14. Maintain current knowledge of community health facilities, agencies, and resources.
15. Maintain and apply a critical, current operational knowledge of new medical information.
16. Recognize and respond appropriately to issues of diversity which impact on the delivery of patient care.
17. Practice in a manner consistent with the highest standards of ethical and professional behavior.

STANDARDS OF PROFESSIONAL CONDUCT
FOR THE PHYSICIAN ASSISTANT STUDENT

As health care practitioners, physician assistants are required to conform to the highest standards of ethical and professional conduct. Physician assistant students also are expected to adhere to the same high ethical and professional standards required of physician assistants.

The American Academy of Physician Assistants (AAPA) has identified four primary bioethical principles, i.e., autonomy, beneficence, nonmaleficence and justice, which form the foundation of the Statement of Values of The Physician Assistant Profession. The Statement of Values
provides a guideline for ethical conduct by physician assistants. A complete discussion of the ethical conduct required of physician assistants can be found at the AAPA website: http://www.aapa.org/workarea/downloadasset.aspx?id=815 In addition to the AAPA’s guidelines, The National Commission on Certification of Physician Assistants (NCCPA) recently adopted a code of conduct for certified and certifying physician assistants. NCCPA’s code of conduct “outlines principles that all certified or certifying physician assistants are expected to uphold.” A complete discussion can be found at: http://www.nccpa.net/CodeOfConductLEP.aspx

The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA), the accrediting body for physician assistant programs, recognizes that “[t]he role of the physician assistant demands intelligence, sound judgment, intellectual honesty, appropriate interpersonal skills and the capacity to react to emergencies in a calm and reasoned manner. An attitude of respect for self and others, adherence to the concepts of privilege and confidentiality in communicating with patients, and a commitment to the patient’s welfare are essential attributes.” (Further information may be found at the website of the Accreditation Review Commission on Education for the Physician Assistant, www.arc-pa.org.)

In addition to knowing and complying with the principles and standards promulgated by the American Academy of Physician Assistants, The National Commission on Certification of Physician Assistants, and the Accreditation Review Commission on Education for the Physician Assistant, physician assistant students are required to know and comply with the policies, procedures and rules of the Physician Assistant Program and the University (including, without limitation, the Guiding Principles of Conduct that found in the Pace University Student Handbook http://www.pace.edu/student-handbook/, the Rules of Conduct contained in the Lenox Hill Hospital Organization Standards Manual; and the policies, procedures and rules of each clinical site to which the student is assigned. Further, physician assistant students are required to conduct themselves in a manner that complies with the following principles and standards:

**Respect**

Physician assistant students are expected to treat all patients, faculty, staff, clinical preceptors, health care workers, and fellow students with dignity and respect. For example:

- Physician assistant students must recognize and embrace their role as a member of a team and interact with others on the team in a cooperative and considerate manner.

- Physician assistant students train closely with other students, including in physical examinations of fellow students and discussion groups that may reveal personal information. Students must maintain and exhibit respect for the privacy and confidentiality of fellow students.

- Students should offer criticism or suggestions in a thoughtful and reasoned manner that fosters respect and trust.

- When confronted with conduct by another member of the team that may be inappropriate, students are not to respond angrily; rather, they must remain calm and respectful and respond in accordance with the standards of professional
conduct required of physician assistant students.

Flexibility Although every effort is made to provide training activities at times and places scheduled in advance, physician assistant students often will be required to be flexible because of changes in the schedule. For example, instructors who are also practicing clinicians may not have a regular schedule and accordingly flexibility is required of physician assistant students. Lectures or clinical sessions may, at times, need to be rescheduled with short notice. In addition, clinical sites create the student schedules for the clinical year and such schedules may require physician assistant students to work weekends and nights.

Academic Integrity Physician assistant students are expected to comply with the University’s Academic Integrity Code which may be found in the Pace University Student Handbook and the Pace University Catalogue. In addition, physician assistant students must know and comply with the academic integrity policy of the Physician Assistant Program which includes, but is not limited to, the following:

• Students are not permitted to use notes or other materials during examinations unless expressly authorized in advance to do so by the instructor.

• Students are required to do their own work and, without prior approval of the instructor, may not submit work created by others (including such things as terms papers purchased from commercial enterprises) as their own work.

• Students are required to sit for examinations that are submitted to fulfill their own academic obligations; students may not have another student or person take an examination for them.

• The same academic work may not be submitted more than once for credit, honors or to fulfill the requirements of an academic exercise.

• Obtaining a copy of an examination or graded assignment (e.g., case presentation, patient education project) used in a previous year or completed by another person is prohibited.

• Prior to taking an examination or completing an assignment, students are not permitted to review prior related examination questions or answers and/or graded assignments completed by another person.

• A student may not knowingly allow another student to copy or use his or her work.

• A student must give proper attribution when using the words or ideas of another person, whether in a written or oral academic exercise. This includes, among other things, proper citation of quoted and paraphrased material.

• Knowingly presenting false information to Program faculty and staff, supervisors, patients and clinical preceptors is prohibited.
• Falsifying any information including, but not limited to, laboratory data and patient information, is prohibited.
• Falsifying any document is prohibited.
• Forging another’s name or signature is prohibited.
• Misrepresenting oneself as a graduate of the Program or one’s physician assistant student status as, for example, a physician assistant, nurse practitioner, medical resident, and the like, is prohibited.

**Honesty and Trustworthiness**  
Physician assistant students shall be honest and truthful in all respects. Students shall not intentionally mislead others.

**Student Role and Accountability**  
Physician assistant students have a unique role in health care delivery. In that role, students are accountable for such things as:

• Students shall perform only those procedures authorized by the Program, clinical site, supervisor and/or preceptor.

• Physician assistant students at clinical sites must always work under the supervision of a preceptor, and are prohibited from assuming primary responsibility for a patient’s care. For example, students shall not treat or discharge a patient without prior consultation with and approval of a clinical preceptor or supervisor.

• Students are responsible for timely completing all assignments and duties effectively and to the best of their ability.

• Students are responsible for identifying and reporting unprofessional, unethical and/or illegal behavior by health care professionals and students, faculty and staff of the Physician Assistant Program. If a physician assistant student has a reasonable belief that such conduct has occurred, he or she should report it to the Program Director, preceptor, supervisor or clinical coordinator, as may be appropriate under the circumstances.

• Physician assistant students are expected to accept and apply constructive feedback.

• Physician assistant students are always required to exercise sound judgment.

**Concern For The Patient**  
Physician assistant students must, by their words and behavior, demonstrate concern for the patient. Concern for the patient is manifested in many ways including, but not limited to, the following:
Physician assistant students must treat patients and their families with dignity and respect.

At all times the physical and emotional comfort of the patient is of paramount importance.

Students must use appropriate verbal and non-verbal communication to convey concern, pleasantness and professionalism to the patient.

The patient’s modesty should be considered at all times.

Students shall deliver health care services to patients without regard to their race, religion, national origin, age, sex, marital status, citizenship, sexual orientation, creed, disability, medical condition, socioeconomic status or political beliefs, or any status protected by law.

Students may not accept gifts or gratuities from patients or their families.

Sexual and romantic relationships with patients are prohibited and will not be tolerated.

**Professional Demeanor**  Physician assistant students must dress in professional, neat and conservative attire. Nametags or badges are required to be worn at all times. Good personal hygiene is always required. (More detailed information on the dress code applicable to physician assistant students may be found in this handbook under Student Policies/Dress Code).

**Maintaining Composure**  Physician assistant students must maintain a professional and calm demeanor at all times, even in emergency and other highly stressful situations.

**Drugs and Alcohol**  Physician assistant students must comply with the University’s Drug and Alcohol Policy and all other applicable policies and procedures concerning the use of drugs and alcohol at Lenox Hill Hospital and clinical sites. Students are prohibited from appearing at any clinical site while under the influence of alcohol or any drug that may affect performance or judgment. [http://www.pace.edu/student-handbook/alcohol-and-other-drug-policy](http://www.pace.edu/student-handbook/alcohol-and-other-drug-policy)

**Background Check**  All physician assistant students will have a background check completed through Certified Background at the beginning of their didactic year and a background check at the beginning of their clinical year. If a physician assistant student does not pass their background check, they are at risk of delaying or prohibiting graduation from the program.

**Timeliness and Lateness**  Attendance and timeliness are important aspects of professional behavior. Students must report to all classes, labs, seminars, call back days, clinical sites and other scheduled activities as scheduled and on time. Timely return from designated breaks is required. Students must return messages from Program staff, faculty, clinical preceptors, patients and clinical sites in a timely manner (i.e., in less than 36 hours). Students must submit all required assignments and forms on or before the designated date and/or time they are due.
The professional conduct of physician assistant students is evaluated on an on-going basis throughout the professional phase (i.e., the didactic and clinical years) of the Program. Violations of standards of conduct are subject to disciplinary actions administered by the University and by the Physician Assistant Program.

**CLINICAL EDUCATION LABS CODE OF CONDUCT**

The College of Health Professions Clinical Education Labs training facility contains simulation centers, laboratories, and classrooms for inter-professional collaboration and to permit students to hone their clinical skills in an environment focusing on patient safety and quality.

At the start of your didactic year an orientation of the training facility will be delivered along with a discussion of the formal Code of Conduct compliance agreement. The Clinical Education Labs are to be treated like a REAL clinical environment. The CEL provides a safe learning environment, and all simulations are for learning purposes only. Student performance during a simulation is not to be discussed outside of the course. As a healthcare professional, you are to treat the simulator like your patient.

More detailed information on the Code of Conduct form applicable to physician assistant students may be found in the Pace University-Lenox Hill Hospital Physician Assistant Program Student Handbook.

**DESCRIPTION OF CLINICAL YEAR COURSES**

**CLERKSHIP IN INTERNAL MEDICINE (PAS 701)**

This supervised clinical course provides the student with opportunity to see a variety of medical complaints or concerns primarily in the inpatient setting. The clerkship allows the student to become familiar with the in-house continuity of care of acute and chronic patients.

**CLERKSHIP IN PEDIATRICS (PAS 702)**

This supervised clinical course provides the student with the opportunity to participate in the care of a variety of pediatric medical complaints and concerns. Students will be exposed to not only the ill child, but also to the well child development and growth within the family unit and in peer interactions.
CLERKSHIP IN OBSTETRICS AND GYNECOLOGY (PAS 703)

This supervised clinical course provides the student with opportunities to participate in the care of a variety of patients with obstetric or gynecological complaints. The student will become proficient in accurate assessment of the obstetric patient with emphasis on pre- and post- natal care. The student will also become involved with the practice of “preventive” obstetrics and gynecology as well as common gynecologic disorders.

CLERKSHIP IN BEHAVIORAL MEDICINE (PAS 704)

This supervised course provides the student with opportunities to see a variety of patients with psychological problems. The clerkship will utilize the health care team approach to both psychological and medical complaints and concerns of the psychiatric patients.

CLERKSHIP IN PRIMARY CARE (PAS 705)

This supervised course provides the student with opportunities to participate in the care of a wide variety of patients. The student will work as a member of a health care team providing care for a variety of medical complaints or concerns both acute and chronic for children, adults and geriatric patients.

CLERKSHIP IN EMERGENCY MEDICINE (PAS 706)

This supervised clinical course provides the student with opportunities to participate in the care of a variety of patients with emergent medical complaints or concerns. This provides exposure to patients with medical and surgical emergencies as well as trauma.

CLERKSHIP IN SURGERY (PAS 707)

This supervised clinical course provides the student with opportunities to participate in the care of patients with surgical complaints. The student will, through rapid and methodical assessment, evaluate acutely ill and potential surgical patients. The student will work as a member of the medical team providing immediate pre- and post- op care as well as gaining hands-on experience in the operating room setting.

CLERKSHIP IN LONG TERM CARE/ELECTIVE I (PAS 708)

This supervised clinical course will provide training in the care of the patient in assisted living and/or nursing home settings. This clerkship emphasizes continuity of care for the elderly and those with disabilities or other conditions requiring long term care. In lieu of LTC rotations, students may be placed in an elective rotation. This is at the sole discretion of the clinical coordinators and it decided based on availability.

CLERKSHIP IN ELECTIVE AREA II (PAS 709)

This supervised clinical course is arranged by the PA student in conjunction with Program
faculty in a setting and specialty of choice. Experiences can range from private practices to inpatient and from general care/primary care to subspecialties.

**International Elective Rotation**

Students may choose to do their elective rotation abroad through Child Family Health International, [www.CFHI.org](http://www.CFHI.org). CFHI has special procedures and forms that need to be completed in order for students to begin their rotations. This paperwork MUST be submitted at least 6 months in advance of your scheduled rotation, and can be filled out online ([www.cfhi.org](http://www.cfhi.org)). The information needed to prepare for this process is posted on Blackboard under clerkship information. At your convenience, you should browse the website and decide on international locations that interest you. Please see Health Care Clearance Section for possible additional health clearance requirements.

**CLINICAL YEAR CAPSTONE COURSE (PAS 799C)**

This capstone course is designed to increase the physician assistant student’s appreciation of the impact of chronic disease upon patients and their families and to assist the student in developing appropriate attitudes necessary for managing patients who will not recover from their illness. The social-behavioral aspects of interaction and management, the natural history, prognosis, treatment and prevention of chronic diseases will be discussed, in addition to the incorporation of a general medicine review to further prepare the students for their upcoming role as practitioners.

This capstone course will also further develop and foster the physician assistant student’s ability to think critically through patient simulation experiences which culminate in a formal OSCE examination required to pass the course.

**RESEARCH METHODS/MASTER’S PROJECT (PAS 620)**

This course will provide students with the basic knowledge and skills needed to formulate research questions and hypotheses. All students are required to develop a quality clinical review paper in AMA style that meets the standards required for publication in a peer-reviewed professional journal. This is a non-thesis Master’s degree. Although the Master project is not a thesis, it is expected that the final paper will be thoroughly researched and well written and result in a clinical review or CME article suitable for publication.

**LIST OF REQUIRED TEXTS**

*Reading from the required textbooks is mandatory during the clerkships. Students are responsible for the rotation learning objectives and a comprehensive exam will be given following every clerkship with questions derived from these texts based on the objectives, as well as NCCPA objective standards. These textbooks are to be used for study throughout every clerkship. If a topic(s) is (are) on the learning objectives, but not covered in the listed textbook, you should seek the information from other texts. Continued learning and research is important to your professional growth. It is up to your individual preference what additional clinical handbooks you choose to assist you during your clerkships. Below is a list of Professional Publications for your reference.*
FOR ALL CLERKSHIPS: Please refer to the individual course syllabi and the complete textbook list from didactic year.

PROFESSIONAL PUBLICATIONS

*Journal of the American Academy of Physician Assistants*
Advanstar Medical Economics
5 Paragon Drive
Montvale, NJ 07645-1742
www.jaapa.com

*Clinician Reviews*
Clinicians Group
Jobson Publishing, LLC
100 Avenue of the Americas
New York, NY 10013-1678
www.clinicianreviews.com

*Advance for Physician Assistants*
Merion Publications Inc.
65 Park Avenue
Box 61556
King of Prussia, PA 19406-0956
advance@merion.com
www.advanceforPA.com

*Consultant*
CMP Healthcare Media
330 Boston Post Road, Box 4027
Darien, CT 06820-4027
www.ConsultantLive.com

*PA Professional*
American Academy of Physician Assistants
950 North Washington Street
Alexandria, VA 22314-1552

*The Clinical Advisor*
114 West 26th Street, 3rd Floor
New York, NY 10001
www.clinicaladvisor.com

NEW YORK STATE EDUCATION DEPARTMENT REGISTRATION and NCCPA EXAMINATION CRITERIA

Students should complete an application for registration with the New York State Education Department (NYSED) 3 months prior to graduation. Permanent registration in New York State requires obtaining a passing score on a certifying examination acceptable to the NYSED. Limited permits are also available. The Physician Assistant National Certification Examination (PANCE) is the current examination utilized by the NYSED.

Contact Information: http://www.op.nysed.gov/prof/med/rpa.htm

**Link to other state licensing & specialty boards:**
https://www.nccpa.net/StateBoard/Default.aspx
http://www.nccpa.net/StateBoards.aspx

PANCE

Only those students who graduate in good standing from a program approved by the Accreditation Review Committee for Physician Assistants (ARC-PA) may sit for the PANCE exam. Advance registration is required. Applications are not accepted by the NCCPA until 90
days prior to your expected graduation date. After a completed application is received from a candidate and confirmation of graduation is received from the Program, an “exam acknowledgement” is created by the NCCPA. The available testing dates for each candidate will begin seven days after the expected program completion date and end 180 days later. Please contact NCCPA at www.nccpa.net for more detailed information.

NCCPA complies with the Americans with Disabilities Act (ADA) and also offers special accommodations when testing for qualified examinees with medical conditions that may be temporary or are not otherwise covered by the ADA. The granting of special accommodations at the program does not automatically ensure approval of special accommodations for an NCCPA exam. The Special Accommodations Guidelines information is available on the website at (http://www.nccpa.net/SpecialAccommodations.aspx).

Graduation from the Pace University-Lenox Hill Hospital PA Program does not ensure that one can practice as a physician assistant. Graduates must successfully pass the PANCE examination and meet state registration requirements in order to become licensed to practice as a physician assistant.

**DISEASE LIST AND CONTENT OUTLINE FOR NCCPA EXAM**

The following material is drawn from the National Commission on Certification of Physician Assistant (NCCPA) content outline for the national certifying exam (PANCE). Use the outline to guide your preparation for the certifying exam. Successful completion of the exam is a requirement for licensure in most states, including New York.

The table below illustrates the approximate percentage of exam questions you'll encounter. Other content dimensions cross-sect these categories. For example, up to 20 percent of the questions on any exam may be related to surgery, and up to two percent may cover legal or ethical issues. Although not an exhaustive listing, the following will provide a sampling of the diseases and conditions the candidate may expect to encounter on the PANCE.

<table>
<thead>
<tr>
<th>Organ System</th>
<th>% of Exam Content</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiovascular</td>
<td>16</td>
</tr>
<tr>
<td>Pulmonary</td>
<td>12</td>
</tr>
<tr>
<td>Endocrine</td>
<td>6</td>
</tr>
<tr>
<td>EENT (Eyes, Ears, Nose and Throat)</td>
<td>9</td>
</tr>
<tr>
<td>Gastrointestinal /Nutritional</td>
<td>10</td>
</tr>
<tr>
<td>Genitourinary</td>
<td>6</td>
</tr>
<tr>
<td>Musculoskeletal</td>
<td>10</td>
</tr>
<tr>
<td>Reproductive</td>
<td>8</td>
</tr>
<tr>
<td>Neurologic System</td>
<td>6</td>
</tr>
<tr>
<td>Psychiatry/Behavioral</td>
<td>6</td>
</tr>
<tr>
<td>Dermatologic</td>
<td>5</td>
</tr>
<tr>
<td>Hematologic</td>
<td>3</td>
</tr>
</tbody>
</table>
# Cardiovascular System

<table>
<thead>
<tr>
<th>Cardiomyopathy</th>
<th>Hypertension</th>
<th>Valvular Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dilated</td>
<td>Essential</td>
<td>Aortic stenosis</td>
</tr>
<tr>
<td>Hypertrophic</td>
<td>Secondary</td>
<td>Aortic regurgitation</td>
</tr>
<tr>
<td>Restrictive</td>
<td>Malignant</td>
<td>Mitral stenosis</td>
</tr>
<tr>
<td><strong>Conduction Disorders</strong></td>
<td><strong>Hypotension</strong></td>
<td>Mitral regurgitation</td>
</tr>
<tr>
<td>Atrial fibrillation/flutter</td>
<td>Cardiogenic shock</td>
<td>Mitral valve prolapse</td>
</tr>
<tr>
<td>Atrioventricular block</td>
<td>Orthostatic hypotension</td>
<td>Tricuspid stenosis</td>
</tr>
<tr>
<td>Bundle branch block</td>
<td></td>
<td>Tricuspid regurgitation</td>
</tr>
<tr>
<td>Paroxysmal supraventricular</td>
<td></td>
<td>Pulmonary stenosis</td>
</tr>
<tr>
<td>tachycardia</td>
<td></td>
<td>Pulmonary regurgitation</td>
</tr>
<tr>
<td>Premature beats</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ventricular tachycardia</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ventricular fibrillation/flutter</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Congenital Heart Disease</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Atrial septal defect</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coarctation of aorta</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patent ductus arteriosus</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tetralogy of Fallot</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ventricular septal defect</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Heart Failure</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

# Pulmonary System

<table>
<thead>
<tr>
<th><strong>Infectious Disorders</strong></th>
<th><strong>Neoplastic Disease</strong></th>
<th><strong>Pulmonary Circulation</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute bronchitis</td>
<td>Carcinoid tumors</td>
<td>Cor pulmonale</td>
</tr>
<tr>
<td>Acute bronchiolitis</td>
<td>Lung cancer</td>
<td>Pulmonary embolism</td>
</tr>
<tr>
<td>Acute epiglottitis</td>
<td>Pulmonary nodules</td>
<td>Pulmonary hypertension</td>
</tr>
<tr>
<td>Croup</td>
<td>Obstructive Pulmonary Disease</td>
<td>Restrictive Pulmonary Disease</td>
</tr>
<tr>
<td>Influenza</td>
<td>Asthma</td>
<td>Idiopathic pulmonary fibrosis</td>
</tr>
<tr>
<td>Pertussis</td>
<td>Bronchiectasis</td>
<td>Pneumoconiosis</td>
</tr>
<tr>
<td>Pneumonias</td>
<td>Chronic bronchitis</td>
<td>Sarcoidosis</td>
</tr>
<tr>
<td>• Bacterial</td>
<td>Cystic fibrosis</td>
<td>Other Pulmonary Disease</td>
</tr>
<tr>
<td>• Viral</td>
<td>Emphysema</td>
<td>Acute respiratory distress syndrome</td>
</tr>
<tr>
<td>• Fungal</td>
<td>Pleural Diseases</td>
<td>Hyaline membrane disease</td>
</tr>
<tr>
<td>• HIV-related</td>
<td>Pleural effusion</td>
<td>Foreign body aspiration</td>
</tr>
<tr>
<td>Respiratory syncytial virus</td>
<td>Pneumothorax</td>
<td></td>
</tr>
<tr>
<td>infection</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuberculosis</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

# Endocrine System

<table>
<thead>
<tr>
<th><strong>Diseases of the Thyroid Gland</strong></th>
<th><strong>Diseases of the Adrenal Glands</strong></th>
<th><strong>Diabetes Mellitus</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hyperparathyroidism</td>
<td>Corticoadrenal insufficiency</td>
<td>Type 1</td>
</tr>
<tr>
<td>Hypoparathyroidism</td>
<td>Cushing's syndrome</td>
<td>Type 2</td>
</tr>
<tr>
<td>Hyperthyroidism</td>
<td>Neoplastic disease</td>
<td></td>
</tr>
<tr>
<td>Hypothyroidism</td>
<td>Diseases of the Pituitary Gland</td>
<td></td>
</tr>
<tr>
<td>Neoplastic disease</td>
<td>Acromegaly/gigantism</td>
<td></td>
</tr>
<tr>
<td>Thyroiditis</td>
<td>Diabetes insipidus</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dwarfism</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Neoplastic disease</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pituitary adenoma</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Lipid Disorders</strong></th>
<th><strong>Diabetes Mellitus</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hypercholesterolemia</td>
<td>Type 1</td>
</tr>
<tr>
<td>Hypertriglyceridemia</td>
<td>Type 2</td>
</tr>
</tbody>
</table>
### EENT (Eyes, Ears, Nose and Throat)

<table>
<thead>
<tr>
<th>Eye Disorders</th>
<th>Ear Disorders</th>
<th>Mouth/Throat Disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blepharitis</td>
<td>Acute/chronic otitis media</td>
<td>Acute pharyngitis</td>
</tr>
<tr>
<td>Blowout fracture</td>
<td>Acoustic neumroma</td>
<td>Aphthous ulcers</td>
</tr>
<tr>
<td>Cataract</td>
<td>Barotrauma</td>
<td>Diseases of the teeth/gums</td>
</tr>
<tr>
<td>Chalazion</td>
<td>Cholesteatoma</td>
<td>Dental abscess</td>
</tr>
<tr>
<td>Conjunctivitis</td>
<td>Dysfunction of Eustachian tube</td>
<td>Epiglottitis</td>
</tr>
<tr>
<td>Corneal abrasion</td>
<td>Foreign body</td>
<td>Laryngitis</td>
</tr>
<tr>
<td>Dacryoadeinitis</td>
<td>Hearing impairment</td>
<td>Oral candidiasions</td>
</tr>
<tr>
<td>Ectropion</td>
<td>Hematoma of external ear</td>
<td>Oral herpes simplex</td>
</tr>
<tr>
<td>Entropion</td>
<td>Labyrinthitis</td>
<td>Oral leukoplakia</td>
</tr>
<tr>
<td>Foreign body</td>
<td>Mastoiditis</td>
<td>Peritonsillar abscess</td>
</tr>
<tr>
<td>Glaucoma</td>
<td>Meniere's disease</td>
<td>Parotitis</td>
</tr>
<tr>
<td>Hordeolum</td>
<td>Otitis externa</td>
<td>Sialadenitis</td>
</tr>
<tr>
<td>Hyphema</td>
<td>Tympanic membrane perforation</td>
<td></td>
</tr>
<tr>
<td>Macular degeneration</td>
<td>Vertigo</td>
<td></td>
</tr>
<tr>
<td>Nystagmus</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Optic neuritis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orbital cellulitis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Papilledema</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pterygium</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retinal detachment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retinal vascular occlusion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retinopathy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strabismus</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Gastrointestinal System/Nutrition

<table>
<thead>
<tr>
<th>Esophagus</th>
<th>Pancreas</th>
<th>Rectum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Esophagitis</td>
<td>Acute/chronic pancreatitis</td>
<td>Anal fissure</td>
</tr>
<tr>
<td>Motility disorders</td>
<td>Neoplasms</td>
<td>Absses/fistula</td>
</tr>
<tr>
<td>Mallory-Weiss tear</td>
<td>Small Intestine/Colon</td>
<td>Fecal impaction</td>
</tr>
<tr>
<td>Neoplasms</td>
<td>Appendicitis</td>
<td>Hernia</td>
</tr>
<tr>
<td>Strictures</td>
<td>Celiac disease</td>
<td>Infectious and Non-infectious</td>
</tr>
<tr>
<td>Varices</td>
<td>Constipation</td>
<td>Diarrhea</td>
</tr>
<tr>
<td>Stomach</td>
<td>Diverticular disease</td>
<td>Nutritional Deficiencies</td>
</tr>
<tr>
<td>Gastroesophageal reflux disease</td>
<td>Inflammatory bowel disease</td>
<td></td>
</tr>
<tr>
<td>Gastritis</td>
<td>Intussusception</td>
<td>Metabolic Disorders</td>
</tr>
<tr>
<td>Peptic ulcer disease</td>
<td>Irritable bowel syndrome</td>
<td>Phenylketonuria</td>
</tr>
<tr>
<td>Pyloric stenosis</td>
<td>Lactose intolerance</td>
<td></td>
</tr>
<tr>
<td>Gallbladder</td>
<td>Neoplasms</td>
<td></td>
</tr>
<tr>
<td>Acute/chronic cholecystitis</td>
<td>Obstruction</td>
<td></td>
</tr>
<tr>
<td>Cholangitis</td>
<td>Polyps</td>
<td></td>
</tr>
<tr>
<td>Cholelithiasis</td>
<td>Toxic megalocolon</td>
<td></td>
</tr>
<tr>
<td>Liver</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Acute/chronic hepatitis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cirrhosis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neoplasms</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Genitourinary System

<table>
<thead>
<tr>
<th>GU Tract Conditions</th>
<th>Infectious/Inflammatory Conditions</th>
<th>Renal Diseases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benign prostatic hyperplasia</td>
<td>Cystitis</td>
<td>Acute renal failure</td>
</tr>
<tr>
<td>Congenital abnormaliteisis</td>
<td>Epididymitis</td>
<td>Chronic kidney disease</td>
</tr>
<tr>
<td>Cryptorchidism</td>
<td>Orchitis</td>
<td>Glomerulonephritis</td>
</tr>
<tr>
<td>Erectile dysfunction</td>
<td></td>
<td>Hydronephrosis</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Genitourinary System</th>
<th>Infectious/Inflammatory Conditions</th>
<th>Renal Diseases</th>
</tr>
</thead>
<tbody>
<tr>
<td>GU Tract Conditions</td>
<td>Cystitis</td>
<td>Acute renal failure</td>
</tr>
<tr>
<td>Benign prostatic hyperplasia</td>
<td>Epididymitis</td>
<td>Chronic kidney disease</td>
</tr>
<tr>
<td>Congenital abnormaliteisis</td>
<td>Orchitis</td>
<td>Glomerulonephritis</td>
</tr>
<tr>
<td>Cryptorchidism</td>
<td></td>
<td>Hydronephrosis</td>
</tr>
<tr>
<td>Erectile dysfunction</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hydrocele/varicocele</td>
<td>Prostatic cysts</td>
<td>Nephrotic syndrome</td>
</tr>
<tr>
<td>----------------------</td>
<td>-----------------</td>
<td>--------------------</td>
</tr>
<tr>
<td>Incontinence</td>
<td>Pyelonephritis</td>
<td>Polycystic kidney disease</td>
</tr>
<tr>
<td>Nephro/urothiasis</td>
<td>Urethritis</td>
<td>Renal vascular disease</td>
</tr>
<tr>
<td>Paraphimosis/phimosis</td>
<td>Neoplastic Diseases</td>
<td>Fluid and Electrolyte Disorders</td>
</tr>
<tr>
<td>Testicular torsion</td>
<td>Bladder carcinoma</td>
<td>Hypervolemia</td>
</tr>
<tr>
<td></td>
<td>Prostate carcinoma</td>
<td>Hypovolemia</td>
</tr>
<tr>
<td></td>
<td>Renal cell carcinoma</td>
<td>Acid/Base Disorders</td>
</tr>
<tr>
<td></td>
<td>Testicular carcinoma</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Wilms' tumor</td>
<td></td>
</tr>
</tbody>
</table>

### Reproductive System

<table>
<thead>
<tr>
<th>Uterus</th>
<th>Menstrual Disorders</th>
<th>Complicated Pregnancy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dysfunctional uterine bleeding</td>
<td>Amenorrhea</td>
<td>Abortion</td>
</tr>
<tr>
<td>Endometrial cancer</td>
<td>Dysmenorrhea</td>
<td>Abruptio placenta</td>
</tr>
<tr>
<td>Endometriosis</td>
<td>Premenstrual syndrome</td>
<td>Cesarean section</td>
</tr>
<tr>
<td>Leiomyoma</td>
<td></td>
<td>Dystocia</td>
</tr>
<tr>
<td>Prolapse</td>
<td></td>
<td>Ectopic pregnancy</td>
</tr>
<tr>
<td><strong>Ovary</strong></td>
<td><strong>Breast</strong></td>
<td>Fetal distress</td>
</tr>
<tr>
<td>Cysts</td>
<td>Abscess</td>
<td>Gestational diabetes</td>
</tr>
<tr>
<td>Neoplasms</td>
<td>Carcinoma</td>
<td>Gestational trophoblastic disease</td>
</tr>
<tr>
<td><strong>Cervix</strong></td>
<td>Fibroadenoma</td>
<td>Hypertension disorders in pregnancy</td>
</tr>
<tr>
<td>Carcinoma</td>
<td>Fibrocystic disease</td>
<td>Multiple gestation</td>
</tr>
<tr>
<td>Dysplasia</td>
<td>Gynecostasia</td>
<td>Placenta previa</td>
</tr>
<tr>
<td>Incompetent</td>
<td>Mastitis</td>
<td>Postpartum hemorrhage</td>
</tr>
<tr>
<td><strong>Vagina/Vulva</strong></td>
<td>Pelvic Inflammatory Disease</td>
<td>Premature rupture of membranes</td>
</tr>
<tr>
<td>Cystocele</td>
<td>Contraceptive Methods</td>
<td>Rh incompatibility</td>
</tr>
<tr>
<td>Neoplasm</td>
<td>Infertility</td>
<td></td>
</tr>
<tr>
<td>Prolapse</td>
<td>Uncomplicated Pregnancy</td>
<td></td>
</tr>
<tr>
<td>Rectocele</td>
<td>Normal labor/delivery</td>
<td></td>
</tr>
<tr>
<td>Vaginitis</td>
<td>Prenatal diagnosis/care</td>
<td></td>
</tr>
</tbody>
</table>

### Musculoskeletal System

<table>
<thead>
<tr>
<th>Disorders of the Shoulder</th>
<th>Disorders of the Hip</th>
<th>Infectious Diseases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fractures/dislocations</td>
<td>Avascular necrosis</td>
<td>Acute/chronic osteomyelitis</td>
</tr>
<tr>
<td>Soft tissue injuries</td>
<td>Developmental dysplasia</td>
<td>Septic arthritis</td>
</tr>
<tr>
<td><strong>Disorders of the Forearm/Wrist/Hand</strong></td>
<td>Fractures/dislocations</td>
<td>Neoplastic Disease</td>
</tr>
<tr>
<td>Fractures/dislocations</td>
<td>Slipped capital femoral epiphysis</td>
<td>Bone cysts/tumors</td>
</tr>
<tr>
<td>Soft tissue injuries</td>
<td><strong>Disorders of the Knee</strong></td>
<td>Ganglion cysts</td>
</tr>
<tr>
<td><strong>Disorders of the Back/Spine</strong></td>
<td>Fractures/dislocations</td>
<td>Osteoarthritis</td>
</tr>
<tr>
<td>Ankylosing spondylitis</td>
<td>Osgood-Schlatter disease</td>
<td>Osteoporosis</td>
</tr>
<tr>
<td>Back strain/sprain</td>
<td>Soft tissue injuries</td>
<td>Compartment Syndrome</td>
</tr>
<tr>
<td>Cauda equina</td>
<td><strong>Disorders of the Ankle/Foot</strong></td>
<td>Rheumatologic Conditions</td>
</tr>
<tr>
<td>Herniated nucleus pulposis</td>
<td>Fractures/dislocations</td>
<td>Fibromyalgia</td>
</tr>
<tr>
<td>Kyphosis</td>
<td>Soft tissue injuries</td>
<td>Gout/pseudogout</td>
</tr>
<tr>
<td>Low back pain</td>
<td><strong>Disorders of the Hip</strong></td>
<td>Juvenile rheumatoid arthritis</td>
</tr>
<tr>
<td>Scoliosis</td>
<td>Avascular necrosis</td>
<td>Polyarthritis nodosa</td>
</tr>
<tr>
<td>Spinal stenosis</td>
<td>Developmental dysplasia</td>
<td>Polymyositis</td>
</tr>
<tr>
<td></td>
<td>Fractures/dislocations</td>
<td>Polymyalgia rheumatica</td>
</tr>
<tr>
<td></td>
<td>Soft tissue injuries</td>
<td>Reactive arthritis (Reiter syndrome)</td>
</tr>
<tr>
<td></td>
<td><strong>Disorders of the Knee</strong></td>
<td>Rheumatoid arthritis</td>
</tr>
<tr>
<td></td>
<td>Fractures/dislocations</td>
<td>Systemic lupus erythematosus</td>
</tr>
<tr>
<td></td>
<td>Soft tissue injuries</td>
<td>Systemic sclerosis (Scleroderma)</td>
</tr>
<tr>
<td></td>
<td><strong>Disorders of the Ankle/Foot</strong></td>
<td>Sjögren syndrome</td>
</tr>
</tbody>
</table>

### Neurologic System
<table>
<thead>
<tr>
<th>Diseases of Peripheral Nerves</th>
<th>Movement Disorders</th>
<th>Other Neurologic Disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complex regional pain syndrome</td>
<td>Essential tremor</td>
<td>Altered level of consciousness</td>
</tr>
<tr>
<td>Peripheral neuropathies</td>
<td>Huntington disease</td>
<td>Cerebral palsy</td>
</tr>
<tr>
<td>Headaches</td>
<td>Parkinson disease</td>
<td>Concussion</td>
</tr>
<tr>
<td>Cluster headache</td>
<td>Cerebral aneurysm</td>
<td>Dementia</td>
</tr>
<tr>
<td>Migraine</td>
<td>Intracranial hemorrhage</td>
<td>Delirium</td>
</tr>
<tr>
<td>Tension headache</td>
<td>Stroke</td>
<td>Guillain-Barré syndrome</td>
</tr>
<tr>
<td>Infectious Disorders</td>
<td>Transient ischemic attack</td>
<td>Multiple sclerosis</td>
</tr>
<tr>
<td>Encephalitis</td>
<td></td>
<td>Myasthenia gravis</td>
</tr>
<tr>
<td>Meningitis</td>
<td></td>
<td>Post-concussion syndrome</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Psychiatry/Behavioral Science</th>
<th>Mood Disorders</th>
<th>Somatoform Disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety Disorders</td>
<td>Adjustment</td>
<td>Substance Use Disorders</td>
</tr>
<tr>
<td>Generalized anxiety disorder</td>
<td>Bipolar</td>
<td>Abuse</td>
</tr>
<tr>
<td>Panic disorder</td>
<td>Depressive</td>
<td>Dependence</td>
</tr>
<tr>
<td>Phobias</td>
<td>Dysthymic</td>
<td>Withdrawal</td>
</tr>
<tr>
<td>Posttraumatic stress disorder</td>
<td>Personality Disorders</td>
<td>Other Behavior/Emotional Disorders</td>
</tr>
<tr>
<td>Attention-Deficit/Hyperactivity Disorder</td>
<td></td>
<td>Acute reaction to stress</td>
</tr>
<tr>
<td>Autistic Disorder</td>
<td></td>
<td>Child/elder abuse</td>
</tr>
<tr>
<td>Eating Disorders</td>
<td></td>
<td>Conduct disorders</td>
</tr>
<tr>
<td>Anorexia nervosa</td>
<td></td>
<td>Domestic violence</td>
</tr>
<tr>
<td>Bulimia nervosa</td>
<td></td>
<td>Grief reaction</td>
</tr>
<tr>
<td>Obesity</td>
<td></td>
<td>Suicide</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dermatologic System</th>
<th>Verrucous Lesions</th>
<th>Bacterial Infections</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eczematous Eruptions</td>
<td>Actinic keratosis</td>
<td>Cellulitis</td>
</tr>
<tr>
<td>Dermatitis</td>
<td>Seborrheic keratosis</td>
<td>Erysipelas</td>
</tr>
<tr>
<td>Dyshidrosis</td>
<td></td>
<td>Impetigo</td>
</tr>
<tr>
<td>Lichen simplex chronicus</td>
<td>Insects/Parasites</td>
<td>Fungal Infections</td>
</tr>
<tr>
<td>Drug eruptions</td>
<td>Lice</td>
<td>Candidiasis</td>
</tr>
<tr>
<td>Lichen planus</td>
<td>Scabies</td>
<td>Dermatophyte infections</td>
</tr>
<tr>
<td>Pityriasis rosea</td>
<td>Spider bites</td>
<td>Other</td>
</tr>
<tr>
<td>Psoriasis</td>
<td></td>
<td>Acanthosis nigricans</td>
</tr>
<tr>
<td>Desquamation</td>
<td>Neoplasms</td>
<td>Burns</td>
</tr>
<tr>
<td>Erythema multiforme</td>
<td>Basal cell carcinoma</td>
<td>Hidradenitis suppurativa</td>
</tr>
<tr>
<td>Stevens-Johnson syndrome</td>
<td>Kaposi carcinoma</td>
<td>Lipomas/epithelial inclusion</td>
</tr>
<tr>
<td>Toxic epidermal necrolysis</td>
<td>Melanoma</td>
<td>cysts</td>
</tr>
<tr>
<td>Vesicular Bullae</td>
<td>Squamous cell carcinoma</td>
<td>Melasma</td>
</tr>
<tr>
<td>Bullous pemphigoid</td>
<td>Hair and Nails</td>
<td>Pilomidal disease</td>
</tr>
<tr>
<td>Acneiform Lesions</td>
<td>Alopecia</td>
<td>Pressure ulcers</td>
</tr>
<tr>
<td>Acne vulgaris</td>
<td>Onycomycosis</td>
<td>Urticaria</td>
</tr>
<tr>
<td>Rosacea</td>
<td>Paronychia</td>
<td>Vitiligo</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hematologic System</th>
<th>Coagulation Disorders</th>
<th>Malignancies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anemias</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Anemia of chronic disease
Aplastic anemia
Folate deficiency
G6PD deficiency
Hemolytic anemia
Iron deficiency
Sickle cell anemia
Thalassemia
Vitamin B12 deficiency

Clotting factor disorders
Hypercoagulable states
Thrombocytopenia
  • Idiopathic thrombocytopenic purpura
  • Thrombotic thrombocytopenic purpura

Acute/chronic lymphocytic leukemia
Acute/chronic myelogenous leukemia
Lymphoma
Multiple myeloma

**Fungal Disease**
Candidiasis
Cryptococcosis
Histoplasmosis
Pneumocystis

**Bacterial Disease**
Acute rheumatic fever
Botulism
Chlamydia
Cholera
Diphtheria
Gonococcal infections
Salmonellosis
Shigellosis
Tetanus

**Mycobacterial Disease**
Atypical mycobacterial disease
Tuberculosis

**Parasitic Disease**
Helminth infestations
Malaria
Pinworms
Toxoplasmosis

**Spirochetal Disease**
Lyme disease
Rocky Mountain spotted fever
Syphilis

**Viral Disease**
Cytomegalovirus infections
Epstein-Barr virus infections
Erythema infectiosum
Herpes simplex
HIV infection
Human papillomavirus infections
Influenza
Measles
Mumps
Rabies
Rickets
Rubella
Varicella-zoster virus infections

**PROFESSIONAL AGENCIES AND REGULATORY BODIES**

**ACCREDITATION REVIEW COMMISSION ON EDUCATION FOR THE PHYSICIAN ASSISTANT, INC. (ARC-PA)**

The Accreditation Review Commission on Education for the Physician Assistant (ARC-PA) is the recognized accrediting agency that protects the interests of the public and PA profession by defining the standards for PA education and evaluating PA educational programs within the territorial United States to ensure their compliance with those standards.

The ARC-PA encourages excellence in PA education through its accreditation process, by establishing and maintaining minimum standards of quality for educational programs. It awards accreditation to programs through a peer review process that includes documentation and periodic site visit evaluation to substantiate compliance with the Accreditation Standards for Physician Assistant Education. The accreditation process is designed to encourage sound educational experimentation and innovation and to stimulate continuous self-study and improvement.

[http://www.arc-pa.org](http://www.arc-pa.org)

**AMERICAN ACADEMY OF PHYSICIAN ASSISTANTS (AAPA)**

The AAPA is the national professional organization of physician assistants. Its membership includes graduate and student physician assistants as well as affiliate membership for physicians and physician assistant educators. The Academy provides a
wide range of services for its members from representation before federal and state
governments and health related organizations, public education, pamphlets and
brochures, insurance and financial programs, and employment assistance.

As an AAPA member, you also receive multiple publications, free record keeping and
reporting of CME requirements, and are entitled to a membership discount for the annual
spring conference. Student Physician Assistant Societies are an integral part of the
AAPA and make up a body referred to as the Student Academy of the American
Academy of Physician Assistants (SAAAPA). The Student Academy meets yearly at the
national spring conference to elect officers and representatives. The Pace University-
Lenox Hill Hospital Physician Assistant Program encourages each of you to take an
active interest in this process.

The national organization represents you and as such deserves your support during your
student years and as a graduate Physician Assistant. Membership to professional
organizations is another benefit also routinely covered by employers.

http://www.aapa.org

NEW YORK STATE SOCIETY OF PHYSICIAN ASSISTANTS (NYSSPA)
The NYSSPA is the state constituent chapter of the APAA. Currently all fifty states have
similar chartered constituent chapters. The NYSSPA mission is “to improve the quality
of health care services in NY State and to promote, address and represent the interests
and development of the Physician Assistant profession.”

NYSSPA provides continual representation of PA interests in both Washington, DC and
Albany with both federal and state health profession’s organizations as well as the State
Department of Health (DOH) and the State Education Department (SED). The Student
Affairs Committee of NYSSPA promotes student issues and interests within the Society.
Any student enrolled in a New York PA Program approved by the Board of Directors is
eligible for student membership. Student members may hold a place on the Board of
Directors and are also eligible for scholarship monies.

http://www.nysspa.org

NATIONAL COMMISSION ON CERTIFICATION OF PHYSICIAN ASSISTANTS
(NCCEPA)
All graduates of Physician Assistant Programs accredited by the Accreditation Review
Commission on Education for the Physician Assistant (ARC-PA) are eligible to sit for the
national certifying exam (PANCE) offered by the NCCPA.
Registration applications are completed during the senior year of the Physician Assistant
Program. Most states require graduates to take and successfully pass the national boards
to continue employment. Please refer to the link below for exam scheduling
requirements.
Once certified through the NCCPA, each graduate must obtain and report 100 hours of CME every two years. Recertification exams are also required every six years in addition to the CME requirement.

http://www.nccpa.net

STATE REGISTRATION
The majority of states have state regulations governing physician assistants. Each student who is considering employment in a specific state should review the regulations so they are familiar with them.

Many states require registration through the State Board of Medical Licensure prior to the start of employment. Students are encouraged to check with the specific State Board of Medicine for current requirements and an application.

http://www.nccpa.net/StateBoards.aspx
STUDENT RESOURCES
CLASSROOMS

All courses are administered by Pace University. The Program utilizes a designated classroom, Lecture Hall South, located at 1 Pace Plaza on the second floor. Students have access to all available facilities on campus, including but not limited to study rooms, computer labs, and additional classrooms as needed.

For clinical skills instruction including but not limited to physical diagnosis, patient care simulation, suturing, phlebotomy, and assessment, the Program utilizes the College of Health Professions Clinical Education Labs at 163 William Street on the 6th floor. The Birnbaum Electronic Classroom at Pace University may also be utilized in the professional phase for specific courses where computer learning is employed. Anatomy and the cadaver lab experiences are given at New York University Medical Center.

CLINICAL EDUCATION LABS

The Clinical Education Labs (CEL) offer state-of-the-art resources on the New York City (NYC) campus. The CEL offers a variety of clinical focused learning opportunities ranging from fundamental skills to high fidelity simulation. This is accomplished through the utilization of a wide array of state of the art methods including skill trainers, Human Patient Simulators and Standardized Patients (actors who play the role of patients). Hospital-like settings and clinic simulated environments provide students an opportunity to practice skills at basic and advanced levels across the curriculum. The CEL is outfitted with supplies and equipment that replicate healthcare setting including pediatrics, maternity, medical-surgical and critical care units. Human patient simulators (HPS) including METIman, SimMan Essential, SimMom, SimJunior, and SimBaby allow students to practice skills, develop critical thinking and improve performance in a safe and nurturing environment through scenario based educational experiences. Video capture allows student self-evaluation and opportunities to identify areas for improvement in small group debriefing sessions.

LIBRARIES & TEXTS

The Henry Birnbaum Library is located on the Pace University, New York City Campus at 1 Pace Plaza. In addition to required texts, the library holds many supplemental texts and periodicals. The library also provides students with access to a wide spectrum of electronic information resources, on-line information and document retrieval systems and the Internet. These services allow students to obtain books, articles, research papers, or government documents from scholarly journals to which the Pace library does not hold subscriptions. The service desk can provide an information sheet detailing library hours and circulation policies. The instructional services librarians can assist with interlibrary loans and daily passes to other libraries in New York City. Additional information about library services is available on the Pace University website http://appserv.pace.edu/library.
The library liaison for CHP has created a library information module and PA webpage to further assist students with medical literature resources and research and can be found at http://libguides.pace.edu/PAS

The Lenox Hill Hospital Health Sciences Library is available to all physician assistant students. This library’s holdings include many general and specialty medicine texts and periodicals. Online searches of the medical literature are also available. Please see the Medical Librarian for details regarding library hours. Additionally, various individual hospitals and clinical sites also offer electronic resources such as UpToDate, DynaMED, MDConsult, Access Medicine, Access Surgery and Access Emergency Medicine.

Required texts will be housed in each library as well as Program offices located on the Pace University campus. Students may have access to these texts during normal office hours. Other supplemental texts will also be available in the Program offices. Please inquire of the Program faculty to ensure the location(s) of a specific text as well as borrowing rules.

All required texts will be available through the Pace University Book Store located at 41 Park Row, adjacent to 1 Pace Plaza. A list of all required and recommended texts will be distributed during orientation and updated throughout the year via individual course syllabi.

**COMPUTER RESOURCE CENTERS**

The Computer Resource Centers (CRCs) at Pace University offer students a wide variety of resources including internet access from all lab computers, over 50 different software packages, and assorted hardware. http://www.pace.edu/student-handbook/student-computer-resource-centers

**FINANCIAL AID**

Pace Financial Aid provides a financial counselor liaison for PA students, Ms. Carina Sanchez, who can be reached at csanchez@pace.edu and she can provide information about financial aid services offered by the Office of Student Assistance/Financial Aid office. http://www.pace.edu/prospectivestudents/undergraduate/financial-aid/

**CAREER SERVICES**

Career Services provides a career counselor liaison for CHP students, Ms. Kim Porter, who can be reached at kporter@pace.edu and she offers students the opportunity to develop life-long career management skills and resources to obtain employment. http://www.pace.edu/career-services

**INSTRUCTIONAL AIDS**

The program has a number of models, and computer programs available to students. Holdings include breast exam and prostate exam models, Foley catheter male and female models, IV and suture arms, anatomy, dermatology, medicine and pharmacology CDs, heart sound tapes, EKG software, and history and physical exam videotapes.
STUDENT POLICIES
STUDENT RIGHTS

Basic Rights
Enrollment in the Physician Assistant Program provides the student with some basic rights.

The student has the right to competent, knowledgeable instructors who conduct themselves in a professional manner in their interactions with students in the work setting. A student who is experiencing difficulty with an instructor should contact the Program Director so that appropriate action may be taken.

Classrooms should be able to provide the proper educational environment for student learning. These classrooms or other appropriate facilities should also have available current instructional materials and modern equipment that meets the technical training needs of the physician assistant student.

Instructors must maintain a classroom environment that is conducive to and compatible with the learning environment. Students who disrupt that environment will be asked to leave the classroom or clinical area. If a particular student persists in disruptive behavior, disciplinary action may be initiated.

Rights to Privacy
Student records are protected from unauthorized access and release by the Federal Educational Rights and Privacy Act (FERPA) of 1974. Information on this can be found on the website: http://www.pace.edu/office-student-assistance/pace-university-ferpa-policy

Students are granted access to their own program files after completion of a Student Request For File Access form. Students may inspect and review files in the Physician Assistant Program office during regular office hours with a faculty member. At no time will information be removed from a student’s permanent file. Students who wish to challenge the content of records may do so in one of two ways:

- A letter may be placed in the student record indicating the student’s objections to a given entry.
- Students may request a review regarding an entry with the Academic Affairs Committee.

Release of student records by the Program (i.e., to potential employers) is granted only upon completion of a written Consent for Release of Confidential Information by the student. Program faculty and Pace University-Lenox Hill Hospital Physician Assistant Program employees, preceptors, and administrative staff who have direct involvement with the education of the student are provided access and may review student records without written consent of the student at the discretion of the Program Director.
ADVISING

Each student will be assigned to a faculty advisor. The advisor will communicate formally with the student a minimum of two times per year via phone, video chat, email, or in person. At this time progress in meeting the Program’s objectives, both academic and professional/behavioral, will be discussed. These sessions are an opportunity to frankly assess your strengths and identify areas for improvement, and to develop plans to capitalize on your strengths and improve your weaker areas. The advisor will also be available at other times to discuss issues of concern raised by you or others. The Program faculty believes participation in the advising process is consistent with the behavior of a successful student.

Prior to each scheduled session, the advisor will collect data concerning your performance. You will be asked to complete a self-assessment portion as a basis for discussion (forms for your review are appended to this handbook). Student input is critical for the success of this process. Both advisee and advisor have specific responsibilities.

Faculty Advisor Responsibilities
Each student is assigned a faculty advisor* for the duration of the program. The role and responsibilities of the advisor include but are not limited to the following:

1. Provide communication between the student and faculty;
2. Meet with student at least two times per year;
3. Meet with student if problems arise e.g. academic or professional difficulties;
4. Know the student advisee’s grades, skills and professional conduct;
5. Assist the student in meeting the educational objectives of the Program;
6. Discuss strengths and areas for improvement;
7. Suggest improvements in time management and study skills as needed;
8. Help plan in conjunction with a course coordinator remediation for deficiencies in skills or knowledge;
9. Discuss summative academic, clinical skills and professional/behavioral evaluations;
10. Identify additional faculty member(s) who will be easily accessible if a student wishes to discuss a problem of a personal or professional nature;
11. Record meetings with student advisee in student file;
12. Refer to appropriate services including but not limited to the Counseling Center,
Center for Academic Excellence, Health Care Unit etc., as needed;

13. Enable the student to identify the materials necessary to achieve the educational and objectives and professional standards of the Program.

Student Responsibilities

1. Discuss areas of strength and areas for improvement with the advisor;
2. Complete a self-assessment;
3. Help plan a course of action to remediate deficiencies and capitalize on strengths;
4. Meet with advisor at least two times per year;
5. Meet with advisor on an as-needed basis when problems arise;
6. Make an honest effort to follow the plans derived from the session.

Example of Output from Advising Sessions (Not Comprehensive)

1. Referral to Center for Academic Excellence
2. Referral to Counseling Center
3. Referral to Health Care Provider
4. Student assess time management skills/make changes to allow additional study time
5. Adjustment of Study Habits
6. Behavior Modification
7. Specific Remediation Program
8. Discuss Availability of Tutoring Services
9. Begin Exercise Program/Other Stress Reduction Techniques
10. Career Goal Reexamination

According to ARC-PA standards the advisor is unable to:

1. **ACT AS YOUR MEDICAL PROVIDER.** It is inappropriate for any for the Program faculty to try and provide your health care. If you have a medical problem, see the University Health Care Unit or an outside provider of your choice.
   

2. **ACT AS A COUNSELOR.** If you have problems that require counseling, you need the help of a professional counselor. Your advisor will refer you to the established system at the University to assist you in accessing mental health services.
   
   [http://www.pace.edu/counseling-center/](http://www.pace.edu/counseling-center/)

It is your responsibility to see your advisor and schedule a mutually convenient time for mid-semester advising. The advisor will not “track down” any student who does not make an appointment after initial notification by the PA Program. It is also your responsibility to act on the plan devised during the session.

The advising session can be a powerful tool for you to get the most from your education and in
your development as a health care professional. The process must be an active one to be effective and can help clarify options and devise a plan of action.

Remember that someone from the Program or Counseling Center at Pace University is available during normal office hours to provide you with help. In an emergency situation, your advisor or another faculty member can address your concern immediately. For emergencies taking place after normal office hours, please contact your community crisis center.

For non-emergent problems, make an appointment with your advisor. Please be advised that you can send an email or leave a phone message 24 hours a day.

HEALTH CLEARANCE POLICY

All students are required to have adequate health insurance. Students are responsible for their own health care while in school. Selected clinical agencies may require evidence of health insurance. If you are placed at such an agency, it will be necessary for you to provide this evidence. If a health condition arises during the course of study that would in any way alter a student’s ability to perform in the clinical setting, it is the student’s responsibility to notify the Director of the Physician Assistant Program immediately.

In order to ensure the safety of students, staff, clinical agency personnel, and patients, and to comply with clinical agency contract mandates, no students will be permitted to participate in clinical rotations unless they have been medically cleared. This may include but is not limited to facility mandated drug screening, background check, PPD testing, color blindness testing, physical exam, respirator mask fit testing, student interview, or facility orientation. It is the physician assistant students responsibility to ensure all requirements are meet. Failure to satisfy these requirements may result in student removal from the rotation site, rotation reassignment and a subsequent delay in graduation. Students must bring copies of all completed health clearance documents with them to every clerkship. Students must keep a copy of the completed health clearance documents for their own records.

Please also note that PPD status and some immunizations must be updated annually, so please check CP for specific clinical year requirements.

The student must complete an annual Medical Clearance form including a physical exam. The student should upload only the Medical Clearance Form to CP. DO NOT UPLOAD YOUR PHYSICAL EXAM OR ANY OTHER DOCUMENTS THAT CONTAIN YOUR MEDICAL HISTORY OTHER THAN THOSE REQUESTED BY CP. Please make sure to retain a copy of your actual physical exam form, as that is not uploaded to CP, but will be required to participate and rotate at all hospital locations.

In addition to the PA Program’s Health Care Clearance process, Pace University has its own immunization requirements which students must meet. A completed Pace University Immunization Requirement Form must be submitted to OSA – Immunization Compliance in order to be cleared by Pace University.
Detailed directions on how to set-up your CP account if found on the Accepted Students Page. Students may contact CP directly at cpservicedesk@certifiedprofile.com or 888-914-7279 with questions regarding the medical requirements, website or forms.

Health Care Clearance forms that must be completed & submitted through your CP account:

- Immunization Forms & necessary documentation
- Hepatitis B Declination Form
- Consent for Release Form
- Physical Exam Form

Health Care Clearance forms that must be completed & emailed to OSA at Immunization@pace.edu:

- Pace University Immunization Requirement Form

It is the student’s responsibility to read all of the instructions on each form and assure all paperwork is filled out correctly by health care providers.

Please note: some of these forms may require additional documentation to be submitted and the signature of the health care provider; students should read each form completely and carefully.

IT IS THE RESPONSIBILITY OF STUDENTS TO OBTAIN THE APPROPRIATE HEALTH CLEARANCE.

PACE UNIVERSITY IMMUNIZATION POLICY

Measles, Mumps, and Rubella (NYSDOH Public Health Law 2165)

Since August 1, 1990, students attending New York State colleges and universities have been required by law to show proof of immunity against measles, mumps and rubella. Persons born before January 1, 1957 are exempt from this requirement.

Immunity to measles is demonstrated by evidence that you have had either 1) two doses of measles vaccine on or after the first birthday and the second dose received at or after 15 months of age and at least 30 days apart, 2) physician documented history of disease, or 3) serologic evidence of immunization.

Rubella immunity is demonstrated by evidence that you have had either 1) one dose of rubella vaccine on or after the first birthday, or 2) serologic evidence of immunization.

Mumps immunity is demonstrated by evidence that you have had either 1) one dose of mumps vaccine on or after the first birthday, 2) a physician documented history of disease, or 3) serologic evidence of immunization.

Pace University Health Care Unit can provide these immunizations for a nominal fee; you need only call for an appointment.
Important Note: New York State immunization requirements may differ from those of other states and other countries. You may need to receive additional vaccinations in order to be in compliance. If you have not been immunized yet, make an appointment today. Your registration will be voided and you cannot attend class without proof of immunity.

Meningitis (NYSDOH Public Health Law 2167)
Since August 15, 2003, New York State Department of Health requires that all college students be educated about meningococcal meningitis and the benefits of pre-exposure vaccination. Pace University strongly encourages first-year resident students to receive the meningitis vaccination.

For more information or to make arrangements for vaccination, you may contact University Health Care Unit and/or consult with your health care provider.

Important Note: Completion of Part One and Part Two of the Immunization Requirement Form is required of all students. Your registration will be voided and you will be unable to attend class if you do not comply with NYSDOH Public Health Law 2167.

Submit documentation of immunity to the OSA/Immunization Compliance office. All hard-copy documentation will be retained for a period of two years. It will be maintained electronically for the duration of a student’s attendance at the University.
GENERAL GUIDELINES FOR HOSPITAL PRACTICE

1. General tenets of learning in hospital sites:

1.1 Students are not employees of the hospital and, therefore, work entirely under the preceptor’s supervision.

1.2 Learning is best achieved by student participation under guidance.

1.3 Learning by “trial and error” without supervision is unacceptable as it jeopardizes patient care and threatens all professional persons (physicians, nurses, administrators, and other technical workers).

2. Learning “under supervision” is defined in the following manner:

2.1 Eliciting a meaningful history – in this situation, the preceptor is in the institution or a nearby office.

2.2 Doing the physical examination – the preceptor is nearby, the nurse is on hand to give assistance if necessary.

2.3 Progress notes – dependent on policies of individual clinical sites.

2.4 Technical procedures – the appropriate professional support person will be at the student’s side or within immediate reach.

3. Supervising preceptor responsibilities:

3.1 Indicate clearly to the medical staff, the administration, and the nursing staff which doctor, PA or NP will be responsible for the activities of the student.

3.2 Respond to any and all questions as to the scope of the activities of the student.

4. Student responsibilities:

4.1 Learn unobtrusively from all hospital persons and hospital activities.

4.2 Make the patient the beneficiary of all the above activities.

4.3 Do not pose as a primary medical provider or advisor/counselor to the patient—except to relay information as directed by authorized professionals. Students may not misrepresent themselves as a MD, PA, RN or other health care provider other than a physician assistant student.

4.4 Fulfill all academic and behavioral obligations to the PA Program.
5. **PA Program responsibilities:**

5.1 Provide the preceptor with a set of learning objectives.

5.2 Provide the preceptor with a student fact sheet.

5.3 Maintain the official affiliation agreement.

5.4 Provide the preceptor with the health requirements required for the students in the clinical year.

5.5 Provide the preceptor with a copy of the liability insurance policy.

5.6 Continuous monitoring of students throughout their clinical year.

5.7 Evaluation and recruitment of new clinical sites.

**ATTENDANCE**

Motivation, enthusiasm and commitment to the study of medicine are directly reflected by regular attendance, punctuality and preparation for clerkships. Attendance of all rotations and activities during the clinical year are mandatory. The Program has an important obligation to maintain a positive rapport with clerkship sites, preceptors, visiting physicians and other health care professionals who make an essential contribution to the curriculum of the Program. These relationships are vital to the ongoing success and development of the Program and the support of the clinical rotation experiences. The Program will not allow individuals to jeopardize these relationships by displaying unprofessional and discourteous behaviors. Prompt attendance to a clinical clerkship and all related Program activities, is a minimum demonstration of this commitment. Attendance and preparation for all classes, labs, seminars, small group discussions, and clerkships, and any other activities designated by the Program faculty is required.

Violations of attendance during the clinical year are subject to disciplinary actions administered by the Physician Assistant Program.

**Clerkship Schedule**

In order to maximize the physician assistant student’s experience, it is strongly recommended that the student use the Clerkship Schedule Form in concert with the preceptor to outline rotation attendance expectations. This should be done the first week of rotation.

**Absences**

Although attendance and punctuality are required, on occasion it may not be possible for a student to attend his or her clerkship on a particular day. In such cases, if the absence may qualify as an excused absence, students should follow the procedure for excused absences described below. A student, who qualifies for an excused absence and follows the applicable
procedure, will be permitted to make up without any penalty, the clinical hours, assignments, examinations or other activities that were missed as a result of the student’s absence. A student with excessive excused absences will be required to meet with the Academic Affairs Committee and may be subject to disciplinary action.

All absences are required to be made up.

**Excused Absences**

Excused absences may be foreseen or they may result from unexpected circumstances. In order for either to qualify as an excused absence, the procedures described under Anticipated or Unanticipated Absences must be followed. If the below procedure is not followed, the student may incur an unexcused absence.

- **Anticipated Excused Absences**
  Students who know in advance they will be absent for such things as professional activities such as health fairs, professional meetings, or other activities authorized by the PA Program or religious observances that are not provided for in the University’s calendar qualify as anticipated absences. A student who expects to be absent and believes the absence qualifies as an excused absence must notify all clinical coordinators and the clinical administrative assistant as soon as practicable prior to the anticipated absence. This should be completed via email or telephone if needed, explaining the circumstances of the absence. The absence must be documented under the ‘My Leave’ section of Exxat, including how the student plans to make-up their missed rotation time. If an alternate rotation work schedule needs to be arranged, it needs to be pre-approved by the clinical coordinators before presentation to clinical site/preceptor. The clinical site reserves the right to decline schedule accommodations.

- **Unanticipated Excused Absences**
  Occasionally, a student is unable to attend class or other scheduled activities because of his or her own illness, the illness of an immediate family member, or an emergency involving the student or immediate family members. In such circumstances, the student must notify all clinical coordinators and the clinical administrative assistant by 9:00 am via email. The student must provide a detailed explanation of the circumstances of the absence. Additionally, students must contact the clinical preceptor prior to the beginning of their scheduled shift. The student must continue to contact clinical coordinators and the clinical preceptor by telephone or email each day that he or she is absent. The absence must be documented under the ‘My Leave’ section of Exxat including the schedule make-up dates. If a student misses more than 2 days of a rotation due to illness, they will need to provide an excuse note and/or medical clearance from an appropriate health care provider.

**Unexcused Absences**

A student who is absent for any reason that does not qualify as a basis for an excused absence, or who otherwise would be eligible for an excused absence but did not follow the applicable procedure, will incur an unexcused absence. Any student, who does not notify all clinical coordinators and the clinical preceptor, will incur an unexcused absence. Call Back Day attendance is mandatory. Any student who misses a Call Back Day for any reason, or leaves a
Call Back Day early/arrives to a Call Back Day late, will incur an unexcused absence, even if they have previously contacted the clinical coordinators. Any student who incurs two or more unexcused absences during the course of the clinical year will be placed on probation and will be required to meet with the Academic Affairs Committee.

All students who are absent, whether the absence is excused or unexcused, are required to arrange with the preceptor when missed time will be rescheduled, notify the clinical coordinators via email of the arrangements and document it in Exxat under “My Leave” section.

UNIVERSITY HOLIDAY

Clinical year students receive clinical experiences that parallel that of practicing physician assistants and therefore are expected to attend clerkships to the like. Students are only permitted to not attend clerkships on the dates specified under “Clinical Year Clerkship Schedule”. Students will be expected to attend clerkships on all other designated dates including University holidays. Should a clinical site be closed or a preceptor permits a student to be off on a particular holiday, the protocol for anticipated absences must be followed. If it is not followed, the student may incur an unexcused absence.

SNOW DAYS

Students are not obligated to attend clerkships when Pace University is closed for inclement weather. In such circumstances, the student must notify a clinical coordinator of the absence by 9:00 am via email, explaining the circumstances of the absence. Additionally, students must contact the clinical preceptor prior to the beginning of their scheduled shift. The student must continue to contact all clinical coordinators and the clinical preceptor by email or telephone each day that he or she is absent. Students must make-up missed clerkship hours.

REVIEW OF PROTOCOL FOR ABSENCES

1. Contact all clinical coordinators via email by 9:00 am for each day of absence
2. Circumstances of the absence must be explained
3. Students must contact the clinical preceptor prior to the beginning of the scheduled shift
4. The student must contact all clinical coordinators and the clinical preceptor by email or telephone each day that he or she is absent
5. This protocol applies to anticipated absences, unanticipated absences, snow days and holidays not designated as off by the program.
6. Should this protocol not be followed, the student is subject to unexcused absences and their consequences.

DRESS CODE

As health professionals, physician assistant students are expected to maintain the highest
possible standard of appearance. Students are expected to be conservatively and neatly dressed and groomed throughout all phases of their professional education. Students should comply with the following guidelines for appropriate dress in addition to honoring clinical site policies.

- Men should wear conservative slacks and shirts; ties are required.
- Women should wear slacks/skirts with shirts/blouses (skirts should be of a conservative length and shirts and blouses should also be conservative and not revealing).
- No sneakers or open toed shoes are permitted, shoes must be worn with socks or hose; heel height should be conservative.
- Jewelry, make-up and cologne are best if conservative and subtle.
- Hair for both men and women should be worn in a neat, conservative style.
- Half-length white lab coats with Program patches and Program ID tags clearly identifying the wearer as a student physician assistant are required unless otherwise directed by the clinical preceptor.

Clinical supervisors, preceptors or PA Program faculty reserve the right to remove any student from a clinical site/experience who is not appropriately dressed. If a student is sent home due to inappropriate attire, the student must make-up any clinical work, assignments or experiences for the missed day. Any such episodes will be documented in the student’s permanent record.

**IDENTIFICATION**

Physician assistant students should be identified by a clearly marked Program identification badge while in the Lenox Hill Hospital or on clinical experiences at other institutions. At minimum, students will introduce themselves as physician assistant students and sign all documentation with their legible full signature followed by ‘PA-S’ or ‘PA student’. Students should clearly display their current Pace identification on campus.

At no time should a student, either by virtue of his or her skills or knowledge attained while progressing through the Program, misrepresent him or herself as being other than a physician assistant student. While in the Program, students may not use previously earned titles (i.e. RN, MD, DC, PhD, etc.) Failure to identify oneself appropriately or misrepresenting oneself will result in immediate dismissal from the Program.

**PATIENTS’ RIGHT AND CONFIDENTIALITY OF MEDICAL RECORD**

1. All data gathered about the patient and his/her illness, including all items within a patient’s history, is CONFIDENTIAL information.

2. Students should not discuss a patient’s record in a manner or a situation which would reveal any information about that patient or his/her records to persons not involved in his/her healthcare.

3. Charts or contents, e.g., lab reports, etc., are not to be removed from the hospital or clinical setting. If photocopies of work are to be submitted to the program for evaluation,
all specific references to the patient (i.e., name, address, and identification number) must be deleted. Anything handed into the Program with any type of identifying information with result in a “0” (zero) grade for that assignment.

4. The American Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law that took effect on April 14, 2003. It established standards for privacy and security of patient information. Anyone involved in patient care must protect the confidentiality and privacy of patient information. Students are required to receive HIPAA training in order to be compliant with the regulations prior to beginning their rotations. Certificates documenting compliance with this requirement must be in the student file prior to beginning the clerkships.

Reference, at any time, to a patient in a dehumanizing or insensitive manner is not professional and will not be tolerated. Such an infraction will be reviewed by the Program Director and Clinical Coordinators, and is justification for recommendation of placement on professional probation.

PATIENT RECORDS, PHYSICIAN REVIEW, COUNTERSIGNATURE

All patients evaluated by the PA student must be evaluated by the supervising health care provider. It is the student’s responsibility to ensure that the supervising health care provider also evaluates all his/her patients. The supervising health care provider is required to review all student notes written in medical records and countersign these documents. If there is any doubt as to the correct format, students must consult with their preceptor.

CHARTING

Program policy permits students to document on chart, however hospital policy may differ. If students are not permitted to document on charts, they are required to practice documentation on a separate sheet and have them reviewed by preceptors. Students are reminded that the medical record is a legal document.

Whenever a student makes an entry into a patient’s medical record (i.e., H&P, progress notes, etc.), the student must indicate that s/he is a physician assistant student after signing the entry. Either of the following is acceptable:

JOHN/JANE DOE, P.A. – S
JOHN/JANE DOE, P.A. – STUDENT

PRESCRIPTIONS AND HOSPITAL ORDERS

Program policy doesn’t allow students to write prescriptions or inpatient hospital orders. Students are encouraged to practice writing prescriptions and orders on a separate sheet and have them reviewed by preceptors. Students may not sign a prescription for the physician and then write your initials after the physician’s name. Students may not write on prescriptions already signed by preceptors.
INCIDENTS/ACCIDENTS IN THE CLINICAL SETTING
INCLUDING BLOOD-BORNE PATHOGEN EXPOSURE (ex. needle stick)

Occasionally, accidents will occur on the clinical site or in the laboratory. Should a student, patient, or other staff member be injured as a result of an accident involving a student, the student must comply with all accident and injury protocols established at the institution. *If you have a needle-stick injury, or other work related injury, go directly to the emergency department or employee health office to receive the proper treatment and follow-up care.* It may also be required that students follow up with the Risk Management Department of the individual institution as well as any other offices deemed appropriate by the preceptor or precepting institution. The student has the right to refuse recommended medical treatment of clinical site.

Subsequently, the student must fax and or email the Physician Assistant Program Incident Report, which can be found in the back of this handbook and posted on Exxat, no later than 48 hours following the incident to a clinical coordinator and clinical administrative assistant. A copy of your discharge documentation from the treating medical provider or institution must be submitted with the Incident Report.

All students are required to have adequate health insurance. Students are responsible for their own health care while in school. Any expenses not covered by the institution where the injury/exposure occurred, are the responsibility of the student.

UNIVERSAL PRECAUTIONS

All PA students are required to complete a training session for healthcare professionals in infection control/universal precautions provided by the Medical Society of the State of New York and New York State Department of Health, before participating in patient contact activities. Documentation of compliance with this must be provided by the student and kept in their files prior to beginning the didactic year.

The principle of universal precautions has been adopted because any patient may be infected with microorganisms that could be transmitted to other persons. Of particular concern are the primarily blood-borne pathogens HIV (human immunodeficiency virus) and HBV (hepatitis B virus). However, body fluids other than blood, secretions, and excretions are included in universal precautions. Since infected patients may be asymptomatic, it becomes necessary to use basic precautions with every patient. Observance of universal precautions will help to provide better protection for every staff member. Students should also familiarize themselves with the hospital/clinical sites specific policies regarding universal precautions.

Universal Precautions Guidelines

1. Avoid direct contact with: Blood, Body Fluids, Secretions, Excretions, Mucous Membranes, Non-intact skin, Lesions.
2. Avoid injuries from all “sharps”.

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

4. Dispose of all “sharps” promptly in special puncture resistant containers.

5. Dispose of all contaminated articles and materials in a safe manner prescribed by law.

In practice, using Universal Precautions also requires:

1. Wash hands frequently and thoroughly, especially if they become contaminated with blood, body fluids, secretions, and excretions.

2. Depending on job duties and risk of exposure, use appropriate barriers, which can include: Gloves, Gowns, Aprons, Caps, Shoe covers, Leggings, Masks, Goggles, Face shields, Equipment such as resuscitation devices.

3. All specimens are bagged before transport to the laboratory.

   These barriers are to be used to protect:
   A. Skin, especially non-intact skin (where there are cuts, chapping, abrasions, or any other break in the skin).
   B. Mucous membranes, especially eyes, nose and mouth.

NOTE: These items of protective apparel, including gloves are removed after each use and are PROPERLY disposed of. Gloves, etc. are NOT to be worn from one patient or activity to another.

All injuries and other exposure having the potential for infection transmission must be reported to the preceptor and program immediately. If you have a needle-stick injury, or other work related injury, go directly to the emergency department or employee health office to receive the proper treatment and follow-up care. Fill out and submit the Physician Assistant Program Incident Report to the Program.

It may also be required that students follow up with the Risk Management Department of the individual institution as well as any other offices deemed appropriate by the preceptor or precepting institution. The student has the right to refuse recommended medical treatment of clinical site.

Subsequently, the student must fax and or email the Physician Assistant Program Incident Report, which can be found in the back of this handbook, no later than 48 hours following the incident to a clinical coordinator and clinical administrative assistant. A copy of your discharge documentation from the treating medical provider or institution must be submitted with the Incident Report.
All students are required to have adequate health insurance. Students are responsible for their own health care while in school. Any expenses not covered by the institution where the injury/exposure occurred, are the responsibility of the student.

Please use the link below to refer to the Pace University Bloodborne Pathogens Exposure Control Plan for more information.

**LIVING ARRANGEMENTS**

The students are responsible for the cost of temporary housing, meals, and transportation during the clinical year. It remains the student’s responsibility to take the initiative to complete housing arrangements prior to the beginning of the next assigned clerkship.

**CLERKSHIP ASSIGNMENT POLICY**

Clerkships are assigned according to their availability. Due to situations beyond the Program’s control, it is not unusual for changes in the clinical assignment to occur during the clinical year. It is necessary that you maintain flexibility when these situations arise.

When placing students in a clinical clerkship, the clinical coordinators take into account student interest, transportation, and geographical location. However, the student is required to attend clerkships where they are assigned. The cost of possible temporary housing, meals and transportation, remains the responsibility of the student. All clerkship schedule decisions rest with the clinical coordinators.

*Once the final clerkship schedule is compiled, student requests for changes will not be permitted.*

**TRANSPORTATION**

Transportation to all off-campus programs, including clinical placements, is the responsibility of the student. In addition, students are responsible for all parking fees. Students are encouraged to make arrangements among themselves to carpool to clinical sites.

**OPTIONAL STUDENT INITIATED CLERKSHIPS**

The procedure to be followed to initiate a new clerkship site is as follows:

a) The process must be initiated by November of the didactic year.
b) New clerkship site must be willing to allow additional students to rotate, otherwise new site will not be permitted.
c) The student makes initial contact with the physician(s) or other potential preceptor. Once the preceptor agrees to accept the students, the clinical coordinator must be notified.
d) The student will then provide the preceptor with program documentation. The student is responsible for following up to ensure the completion of these documents.
e) After the documents are complete, program staff will arrange a meeting with the preceptor and the clinical coordinator(s).
f) Students will be expected to follow up with any paperwork involved with initiated clerkships.

The final decision to pursue a particular student initiated clerkship rests with the clinical coordinators. Students are not required to initiate or acquire their own clerkship sites.

EMPLOYMENT OPPORTUNITIES/OPERATIONAL POLICY REGARDING STUDENTS PERFORMING SERVICE WORK

Participation in any clerkship is not to be construed as gainful employment. Accepting payment or gifts could result in the loss of malpractice liability coverage for the student. Once the clinical phase of the PA program has been accomplished and the student has graduated from the PA Program, s/he may then pursue a salaried position at the institution.

Please see the complete “Work Policy” in the Personal Policy section of this handbook for further information regarding outside employment and volunteer activities.

SURVIVAL TIPS

ASSESS THE CLINICAL SITE:
• You must contact the preceptor at least two weeks prior to starting a new clerkship, unless otherwise specified. Contact your senior year ‘Buddy’ for additional advice. Find out about parking, ID’s, etc.
• Every effort has been made to maintain and update appropriate contact information for clinical sites. Nevertheless, minor problems may occur. It is necessary to maintain professionalism and flexibility when faced with such changes. First try to resolve any discrepancies on your own. Call the Program if this is not possible. Notify the program of any errors in supplied instructions so corrections can be made.
• Find out what available conferences you might attend (grand rounds, daily/weekly conferences, CME presentations, etc.)

THINGS TO DISCUSS INITIALLY WITH YOUR PRECEPTOR:
• Confirm your work schedule and specific duties (when to report to your clerkship, on-call schedule, rounds, weekend hours, etc.)
• Identify special interests, whether it is procedures or particular cases relevant to the clerkship.
• Talk to preceptors about remaining mandatory technical procedures required and your
eagerness to complete them.

- Ask what is expected of you. Where you are to be and at what time.

THINGS TO BE AWARE OF:

- What you gain from the clerkship is equal to the effort you put forth.
- In general, preceptors will give students as much hands-on experience as the preceptor feels you are capable of handling.
- Be courteous to everyone.
- Develop and maintain a professional attitude.
- Be helpful to the preceptor and staff.
- Read about the disease processes you encounter each day.
- Take initiative.
- You may encounter harsh criticism at times. Try to learn from the feedback.
- Be prepared to discuss and answer questions about any disease or procedure encountered during your clerkship.
- Be prepared to study and read at least two hours per day.
- You may not always be permitted to write on charts. This is usually because of billing reasons. If this is the case at your site, practice writing notes on a separate sheet and have preceptors critique them.
- Students are not permitted to write prescriptions or orders. Practice prescription writing and order writing on a separate sheet and have preceptors critique them.
- While on rotations, actively look for work.
- Report early, stay late, volunteer for call.

If any concerns arise during clinical clerkships, please notify the clinical coordinators as soon as possible. If unable to contact a clinical coordinator, please contact your advisor or another faculty member.

PACKRAT EXAMINATION

The PACKRAT (Physician Assistant Clinical Knowledge Rating and Assessment Tool) examination is a self-assessment tool administered at the beginning and end of the clinical year and is a requirement for graduation. The results of the examination provide students with a report of their areas of strength and areas for improvement. The report may be utilized in formulating study plans for success in the PANCE exam. The report also allows the Program to compare student performance with national scores. Exam cost is the responsibility of the student.

COMPUTING CLINICAL CLERKSHIP COURSE GRADES

The following tables represent the grading distribution for your final grade for each individual rotation.

The components of the clinical clerkship grade for Primary Care (PC), Emergency Medicine (EM) and Pediatric (PEDS) includes:
The components of the clinical clerkship grade for **Internal Medicine, Surgery, Behavioral Med and OB/GYN** includes:

<table>
<thead>
<tr>
<th><strong>Internal Medicine (PAS 701), Surgery (PAS 707), Behavioral Medicine (PAS 704), OB/GYN (PAS 703)</strong></th>
<th><strong>Percentage of Final Grade</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Preceptor Evaluation</td>
<td>25%</td>
</tr>
<tr>
<td>End of Clerkship Examination</td>
<td>50%</td>
</tr>
<tr>
<td>Clinical Documentation – 1 SOAP Note (Internal Medicine requires full H&amp;P)</td>
<td>20%</td>
</tr>
<tr>
<td>Call Back Day Exam</td>
<td>5%</td>
</tr>
</tbody>
</table>

The components of the clinical clerkship grade for the **Long Term Care/Elective** includes:

<table>
<thead>
<tr>
<th><strong>LTC / ELECTIVE I (PAS 708)</strong></th>
<th><strong>Percentage of Final Grade</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Preceptor Evaluation</td>
<td>25%</td>
</tr>
<tr>
<td>Patient Education Project</td>
<td>50%</td>
</tr>
<tr>
<td>Clinical Documentation - 1 SOAP Note</td>
<td>20%</td>
</tr>
<tr>
<td>Call Back Day Exam</td>
<td>5%</td>
</tr>
</tbody>
</table>

The components of the clinical clerkship grade for the **elective** includes:

<table>
<thead>
<tr>
<th><strong>ELECTIVE II (PAS 709)</strong></th>
<th><strong>Percentage of Final Grade</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Preceptor Evaluation</td>
<td>25%</td>
</tr>
<tr>
<td>Case Presentation/CFHI Presentation</td>
<td>50%</td>
</tr>
<tr>
<td>Clinical Documentation - 1 SOAP Note</td>
<td>20%</td>
</tr>
<tr>
<td>Call Back Day Exam</td>
<td>5%</td>
</tr>
</tbody>
</table>

**Assignments**

Unless otherwise authorized by a clinical coordinator in advance of the date on which they are due, all assignments must be submitted on or before the due date (please see section on case presentations). **Five points will be deducted from the final grade of the assignment for each calendar day that it is past due.**
PATIENT LOGGING

Patient Logging:
Exxat is an online tracking system that will be used to log patient encounters and procedures. Students are required to log information regarding each patient seen daily. Every Monday at 9 am, patient logs in Exxat will be reviewed for the previous week’s encounters. Students must log their patient experiences prior to this time. If you do not have patients logged and hours submitted for each day you were scheduled, 1 point will be deducted from your final grade.

At the end of each rotation, the “case log totals (graphical)” in the Exxat system must be printed, signed off on by preceptors and uploaded to Exxat by 9:00 am on the Monday of Call Back Day week. (See section of this handbook titled “Submitting Call Back Day Materials”).

Clerkship Specific Logging Requirements
Students must log specific types of patient encounters in the clinical year: Pre-op, Intra-op and Post-op surgical encounters, Prenatal Care and Annual/Well Person exams. The minimum requirements for the clinical year are presented in the table below:

<table>
<thead>
<tr>
<th>Patient Encounter</th>
<th>Number Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgery (may also be fulfilled in elective or Ob/GYN when appropriate)</td>
<td>10 total</td>
</tr>
<tr>
<td>Pre-op</td>
<td>10 total</td>
</tr>
<tr>
<td>Intra-op</td>
<td>10 total</td>
</tr>
<tr>
<td>Post-op</td>
<td>10 total</td>
</tr>
<tr>
<td>Ob/GYN</td>
<td>5 total</td>
</tr>
<tr>
<td>Prenatal Care</td>
<td></td>
</tr>
<tr>
<td>Annual/Well Person exams</td>
<td>5 total</td>
</tr>
</tbody>
</table>

Each patient encounter that is logged into Exxat must have the ‘required fields completed’ (denoted in Exxat). There are also several fields that are not required by Exxat but are required by the program. For example, in Exxat there is a section titled “Surgical Management” that is not denoted as a required field but during your surgical clerkship this section must be filled out to fulfill the Pre-op/Intra-op/Post-op and Operating Room experiences as required by the above table. The other fields required by the program are Prenatal Care and Annual/Well Person exams.

Please be sure to fill out your Exxat logs completely (required and non-required fields) to ensure that you meeting program requirements. This is also important for ARC-PA accreditation standards.

CLINICAL PROCEDURES EXPECTED OF STUDENTS

During a clinical clerkship, students are required to perform the following diagnostic procedures as indicated by the supervising physician/preceptor with adequate supervision. The following
If there is concern about the appropriateness of any clinical procedure, contact a clinical coordinator.

During a clinical clerkship, physician assistant students shall perform and/or assist in the following procedures only under direct MD/DO/PA/NP supervision:

1. Endotracheal and/or naso-tracheal intubation
2. Paracentesis
3. Thoracentesis
4. Lumbar puncture
5. Joint aspiration or injection
6. Insertion of a central line
7. Peritoneal dialysis
8. Cutdown
9. Incision and drainage of abscess
10. Resuscitative measures
11. Assist in deliveries
12. Bone marrow biopsy

Clinical Procedure Logging
Clinical procedures will be tracked through the Exxat system and reviewed every Monday by 9 am. A certain number of each procedure must be completed to meet graduation requirements and is indicated in the Exxat system and in the chart above in the section “Clinical Procedures Expected of Students”. Please make sure to perform, rather than observe or assist, as many procedures as possible, as credit is given only for those logged “done”. If they are not complete,
you will not graduate. It is the student’s responsibility to keep track of the number of procedures completed. Difficulty in meeting these requirements should be brought to the attention of the clinical coordinator.

The “case log totals (graphical)” in the Exxat system must be printed, signed off by preceptors and uploaded to Exxat by 9:00 am on the Monday of Call Back Day week.

**ADVISOR SOAP NOTES**

In an effort to ensure sufficient experience in note writing and improve your note writing skills, we will ask you to submit one written SOAP note to your advisor by 9:00 am on the Friday of **week two of every rotation**. Please type this note in a word document and post on Exxat for your advisor to review. This note can be specific to each specialty (ex: behavioral medicine note during your Behavioral Medicine Clerkship, etc.).

**SITE VISIT FORMAT**

A faculty member will be performing on-site visits to assess the progress of each student and observe the interactions between student, patient and preceptor during the following clerkships:

- Pediatrics
- Primary Care
- Emergency Medicine

It is your responsibility to arrange/confirm the date and time of site visit with designated faculty at this time, the clinical coordinator/faculty will have an informal meeting with each student and discuss the overall clerkship. During the site visit, the clinical coordinator will observe a patient interaction including obtaining a medical history, performing an appropriate physical exam, collecting pertinent data specific to the case and an oral presentation of the case to the preceptor including a differential diagnosis and management plan.

In addition, the student is required to research 3 pharmaceutical agents for each clerkship (See section titled “Drug Cards”). The student is required to have all of these cards on the day of his/her site visit, as s/he will be quizzed on his/her research as part of the site visit grade. If pharmacology cards are not present at the time of the site visit, students will not receive credit for that portion of the site visit grade.

Site Visits for all other clerkships (Internal Medicine, Surgery, Ob/Gyn, Behavioral Medicine and both electives) may be arranged or done randomly at the discretion of the clinical coordinators and faculty. Site Visits may occur during any clerkship and may be unannounced.

All students must check Exxat for the site visit schedule regardless of clerkship type.

If a passing grade is not achieved, a repeat site visit must be performed either during another rotation or later in that particular clerkship. At times, multiple site visits may be necessary to assure student competency. The original grade will remain in the grade book.
DRUG CARDS

Students are required to research 3 pharmaceutical agents for each clerkship and make flash cards indicating the class of drug, mechanism of action, indications, contraindications, side effects, dosing and cost of medication. The student is required to collect these cards throughout the clinical year. The student is required to have all of these cards on the day of his/her site visit, as s/he will be quizzed on his/her research as part of the site visit grade (see section titled “Site Visit Format”). If pharmacology cards are not present at the time of the site visit, students will not receive credit for that portion of the site visit grade.

EVALUATIONS

Mid Clerkship Evaluations
Mid clerkship evaluations are designed to give the preceptor an opportunity to provide feedback to students on their performance during the mid-point of each clinical rotation. Students should take this information and opportunity to strengthen their skills. A portion of the mid clerkship evaluation is designed for you to self-reflect on your clinical experience and to identify areas of improvement as well as strengths. Students must complete this portion of the evaluation before submission.

One mid clerkship evaluation must be uploaded to your Exxat portfolio for each rotation. This evaluation must be submitted to the Program midway through the clerkship, no later than 9:00 am on the Friday of the third week of the rotation.

If a mid-clerkship evaluation is not submitted, you will receive an incomplete final grade for the course.

If any academic or clinically related problems arise from this interaction that is of concern it is in the students’ best interest to discuss this with a clinical coordinator. Do not sign the mid-clerkship evaluation and then hand it to your preceptor to be filled out. Your signature indicates your review of the evaluation. Only the assigned preceptor should fill out the evaluation.

Preceptor Evaluation
The program has adopted a standard evaluation form, which each preceptor completes online through the Exxat system. The preceptor is responsible for assessing student performance. Students will be evaluated on the basis of your general medical background, knowledge and ability to obtain a medical history and perform an appropriate physical exam. Included in the evaluation will be your ability to organize a database, propose a management plan, present cases, and demonstrate rapport with patients and co-workers. Dependability, attitude toward learning, and work habits are also part of the evaluation. The Preceptor Evaluation is a weighted grading process that assesses student professional issues and clinical performance.

The student evaluation should be completed by designated preceptor online through the Exxat system. All evaluations must be completed by the end of the clerkship. It is the student’s
responsibility to ensure the preceptor evaluation is completed by Call Back Day. If there are extenuating circumstances that cause a delay, the clinical administrative assistant must be notified prior to Call Back Day.

Please keep in mind that preceptors may request information from multiple other clinicians with whom you have interacted, in order to complete a composite evaluation.

**Student Evaluation of the Site**
The student evaluation is designed to provide the program with student feedback regarding each clinical site. It is used to evaluate and improve on the site and in turn the student’s clinical experience. A compilation of student evaluations, including comments written, is sent to and reviewed by clerkship sites and preceptors annually. All comments will be reviewed by program and preceptor and must be written in a professional and constructive manner.

A student evaluation of the clinical site must be uploaded to your Exxat portfolio by 9:00 am on the Monday of Call Back Day Week/5th week of your rotation.

**If it is not submitted, 5 points will be deducted from your final grade for the course.**

All student evaluations of the sites should be submitted using the Exxat system.

**Examinations**
Examinations are scheduled throughout the professional phase of the Physician Assistant Program, and students are required to take examinations when they are scheduled. On occasion, however, due to extenuating circumstances a student may be unable to take an examination at the time it is scheduled. If a student believes that due to extenuating circumstances he or she is unable to take an examination when it is scheduled, he or she must, prior to the time the examination is scheduled to begin, notify and receive approval from a clinical coordinator to be absent from the scheduled examination. Students who receive prior approval to be absent from an examination are required to take a make-up examination at a date and time to be determined by the course coordinator or any faculty member. The format of the make-up examination may differ from that of the original examination.

Students will be tested on the content of the course as described in the course syllabus. The formats of examinations are varied and may include multiple choice, true and false, matching, short answers, essays, oral presentations, practicals, simulated patient counters, and/or a combination of formats. A proctor or faculty member will administer each examination, give the instructions for taking the examination, and keep track of the time permitted for taking the examination.

All examinations (including make-up examinations) are subject to the following conditions:
- The majority of non-clinical skills examinations are hosted on the University Blackboard™ system. Length of examinations and types of questions vary from
multiple choice, multiple answer, fill-in, short answer, matching and other formats.

- Students are required to store all personal belongings, including but not limited to cell phones and other non-essential electronic devices in a personally secure location. Unless prior approval is given by the examination proctor, cell phones and other non-essential electronic devices need to be silenced or turned off. If a proctor or faculty member has concerns that a student impermissibly used an electronic device during an examination, the device will be confiscated and the student will be subject to disciplinary action.

- Students are required to bring and use a laptop privacy screen. Failure to use this screen during exams is considered a professionalism issue and the student may be subject to disciplinary action.

- A student who arrives after the examination has begun should enter the room quietly, sit down in the closest available chair, and wait for the examination materials to be given to him or her. Students who arrive late and therefore begin taking the examination after the other students began, will not be permitted additional time within which to complete the examination.

- Unless authorized by the proctor or faculty member prior to the examination, students are not permitted to talk for any reason during an examination.

- When the proctor or faculty member announces that the time for the examination has ended, every student must stop exam work immediately. If a student continues to work on the exam after the announcement that the examination has ended, the student will be subject to disciplinary action.

- In the event that a paper exam is used, students must include their names and any other required information on the examination, answer sheets, and/or scrap paper used during the exam. If answer sheets are used during examinations, only the answers on the answer sheets will be graded. Answers found on the paper exam will not be considered.

- All paper examinations, answer sheets, and/or scrap paper must be returned to the proctor or faculty member at the end of the examination. Removal of any of these items from the examination room will constitute cheating and students will be subject to disciplinary action.

- Students may not use the lavatory or leave the room in which the examination is being given for any reason unless permitted by a faculty or staff member. Electronic devices may not be used during such time.

- Students, who complete the examination early, may leave the examination room but will not be permitted to re-enter until the examination period has ended.

Except when taking an examination and during reviews of examinations (see Review of Examinations below), no student is permitted to have possession of an examination or answer sheet. Further, students are not permitted to copy (whether by hand or mechanically) examination questions or answers. This prohibition against possession and copying of examinations and answer sheets applies to current and previous examinations, and students who violate it will be subject to disciplinary action. Sharing of exam information with more junior PA students or those taking make-up examinations is a violation of Academic Integrity.
Review of Examinations
A review of examination questions and answers provides an opportunity to improve a student’s learning/knowledge of a subject matter. Therefore, after all students have taken an examination, a student may review an examination individually ONLY if they do not successfully complete the examination (score below 70%). An individual review of an examination is permitted only within the **seven days** following issuance of the examination. It is the student’s responsibility to schedule an exam review if they do not successfully complete the examination.

Students are not permitted to write during an examination review, or to copy, in any manner, the questions or the answers. Students are required to return their examinations and answer sheets at the conclusion of the examination review to the clinical coordinator who gave the review.

End of Clerkship Examinations
End of clerkship exams are administered on Call Back Day. Questions on these exams are based on the learning objectives for each clerkship.
In order to pass the examination, a student must receive a grade of no less than 70%. Anyone who is unsuccessful at meeting the minimum score requirement on the first attempt, will be allowed to take a remediation exam **only once**. If a student successfully remediates the exam by receiving a score of 70% or higher on the remediation clerkship examination, his or her grade for the exam will be changed to 70% and the original failing grade removed. If however, the student does not successfully remEDIATE the exam, the original failing grade remains, and in order to progress in the Physician Assistant Program, the student will be required to successfully repeat the clerkship.

A remediation exam will only be offered for two clerkship exam failures. If a student fails a third end of clerkship exam, the student automatically fails that clerkship and must repeat that clerkship. A fourth failure on an end of clerkship exam will result in automatic dismissal from the program. Please note that repeating any of the clerkships will delay graduation, may affect financial aid, and eligibility for the PANCE exam.

Students who miss examinations due to illness must comply with the policy regarding absenteeism and contact one of the clinical coordinators immediately to arrange for an alternate examination. Alternative administration and format of the examination is at the discretion of the clinical coordinators.

Call Back Day Quiz
There will be a separate quiz administered at each Call Back Day that covers material given to students during the lectures at the previous Call Back Day or any other material that would be considered as fundamental knowledge requiring competency prior to graduation. The first Call Back Day quiz will cover material presented to students during Clinical Orientation. Each Call Back Day quiz will consist of 5-25 questions. There is no failing grade policy or remediation for Call Back Day quizzes.

Clinical Documentation: SOAP/HPI Notes
Each student is to hand in one complete SOAP/HPI note for each 5-week clerkship that will be
graded.

- Although they are usually written in the SOAP/HPI note format, please **DO NOT** submit Progress Notes as a SOAP Note requirement.
- All notes must be handed in **along with a photocopy of the first page** of the original note written by you or someone else. Failure to do so will result in minus 20 points for that particular note.
- Notes should **NOT** have ANY identifying information on it. **If a note is submitted with any identifying information (name, medical record number, DOB, address) on it, you will receive minus 20 for that particular note.** (Violation of HIPAA regulations see above).
- All notes must be uploaded to your Exxat portfolio by 9:00 am on the Friday of the 4th week of your rotation (see submitting call back day materials). Failure to do this will result in a **5 point deduction** from the note grade for each day it is not turned in.
- Please refer to the H&P handbook for examples of proper note writing for specific rotations (ex: Behavior Medicine, etc.).

If a passing grade is not achieved or if a clinical coordinator deems necessary, the student must successfully remediate until passing grade of 80 is achieved. If the reason for the exercise was failure of the note, the original grade remains in the grade book.

**Case Presentation Project: Elective II Clerkship**

Each student is required to complete one case presentation project during their Elective II clerkship using a power point presentation.

The patient should be a **DIFFERENT** patient than the one used for any SOAP/HPI and include the patient face sheet with all identifying information blocked out or removed.

The case presentation project will utilize the student’s skills of article review, data collection, patient interview, formulation of differential diagnosis, reasoning for each differential diagnosis, use of resources such as texts, library and internet, presentation skills and overall organization of information. On Call Back Day (or another designated date and time) students will be expected to present a patient that they encountered during their rotation following the guidelines listed below. Case presentation projects will be graded and included in the final grade for that particular clerkship (see grading form in appendix). If a student is not prepared for this assignment on the designated date and does not notify clinical coordinators prior, they will receive a zero until they successfully complete the assignment. Additionally, five (5) points will be deducted from the student’s final grade for each day the assignment is late.

If the student presents the Patient Education Project during the rotation s/he is scheduled to present the Case Presentation Project, **five (5) points** will be deducted from your final grade.

Review and understand the program’s policy on plagiarism (see Student Handbook) before beginning this project. Your project must be properly referenced, therefore be sure that you understand how to properly footnote, quote and reference all materials.
Presentations should be no longer than **20 minutes** in length.

If a passing grade is not achieved, the student must repeat the assignment until competency is assured. Once the remediation assignment is acceptable, a passing grade will be documented in the grade book.

**Guidelines for the Case Presentation Project:**

**A power point presentation is required of the following information:**

The patient **history and physical** will be presented to faculty and fellow classmates. Classmates must take notes on each case, formulate a differential diagnosis, critique your presentation, and discuss historical or physical findings they would address in a small group discussion. A copy of the full history and physical with assessment and plan should be handed directly to faculty proctoring the session. Please utilize the following guidelines for this portion of the project:

- Be complete and focused
- Be Succinct
- Be Pertinent: provide pertinent negatives *and* pertinent positives
- Separate subjective information from objective information

The **Differential Diagnosis** will be discussed in groups. The student completing the project will be the group leader and must facilitate a discussion regarding the case. Discussion should include what classmates feel the differential diagnosis should include and why, what historical or physical findings they would address, assessment, plan as well as critique your presentation. The student completing the project must also type up an outline for 2 of the most likely diagnoses and discuss with the group. These must be distributed to faculty and classmates at the end of the session. Please utilize the following guidelines when completing this portion of the project:

- Include 2 of the most likely diagnoses with the first listed as the most likely.
- Give a *brief* overview of the etiology, signs and symptoms, epidemiology, risk factors, treatment options and complications of each differential diagnosis.
- Give reasoning for and against each differential diagnosis which includes historical, physical exam findings, results of lab and diagnostic studies.
- Give a thorough, logical and appropriate assessment of the patient with attention to both acute and chronic diseases
- Provide an appropriate management plan

**Patient Education** must be included in the group discussion. Patient education is documented under plan in a history and physical write-up. When discussing and documenting patient education please use the following guidelines while completing this portion of the project:

- Address acute and chronic conditions
- Include disease prevention based on risk assessment
- Address medications given and possible side effects
- Explain tests and procedures patient may be undergoing and why procedures are needed
- Give instruction on which symptoms the patient should notify their provider about
- Address psychosocial issues
- Must be properly documented

A discussion regarding a **Research Article** must occur during group discussions. Please use the following guidelines while completing this project:
• Must submit one research article that is related to presenting patient
• The research article must be a complete article and the original article
• The research article cannot be a review of multiple research articles
• Must present important points of research article in own words and succinctly
• The research article must be less than 5 years old
• Discuss what makes the research valid
• Identify bias and confounding factors within the research article
• Comment as to how the results of the article may change your practice.

Students presenting will be graded on their Podium Skills. Please use the following guidelines while completing this project:
• Interactive, cohesive delivery
• Glances but does not read from paper
• Rate, tone and pitch of speech
• Good movement, use of available space
• Organized with good transitions

Students presenting will also be graded on their Group Facilitator Skills. Please use the following guidelines while completing this project.
• Actively involves students within the group
• Includes all students in discussion within the group
• Creates a non-threatening atmosphere for group discussion
• Addresses all topics required

Please remember:
1. Choose a patient that you found to be interesting or possibly one that had a rare or unexpected outcome
2. Hand in a full H & P, outline of 2 differential diagnoses, and the research article on the day that you are scheduled to present. These materials should be handed directly to the faculty member proctoring the session.
3. The H & P submitted as part of this project is in addition to the other clinical documentation (note) required for the rotation.
4. All H & P’s must be neatly handwritten and stapled. All other informative materials may be typed and professionally submitted.
5. Review the program’s policy on plagiarism before beginning this project.

Hints for Case Presentation Projects
1) Pick a patient that you can formulate 2 differential diagnoses on
2) Make a copy of the H&P to give to faculty member before presentation begins
3) For each one of the differential diagnosis type up an outline discussing the following:

Etiology, s/s, epidemiology, risk factors, diagnostic work up, treatment options and complications.
Goal is to provide a “review” for classmates. Make enough copies of these to distribute to those listening to the presentation.
4) Don’t forget patient education!
5) Document patient education in plan
6) Be sure you understand what an original research article is. If it doesn’t address topics such as methods, objective, design, participants, results and conclusions, it is NOT a research article. Do NOT discuss reviews of multiple research articles (it must be the original study).

7) Look at the grading sheet we use to evaluate your project with.

8) Look at the clinical handbook

9) Contact a clinical coordinator if you have questions

10) **Students who elect to participate in one of the international rotations through CFHI please read section pertaining to project in lieu of Case Presentation.

**Patient Education Project: Long Term Care/Elective I Clerkship**

Each student will be assigned a patient education topic. Following the completion of the Long Term Care/Elective I clerkship, each student will present this project to the class on an assigned date. If a student is not prepared for this assignment on the designated date, they will receive a zero. The student must however, complete the assignment at an alternate time and date. If the student presents the Case Presentation project during the rotation s/he is scheduled to present the Patient Education Project, five (5) points will be deducted from your final grade.

The patient education project requires the student to create a unique plan to educate patients on their assigned topic. This may include but is not limited to: poster, pamphlet, creating a lesson plan or small group discussion. The student is then required to present to the class their education plan and educate their classmates on how to teach patients about their topic. Presentations should be no longer than 10 minutes in length.

Review and understand the program’s policy on plagiarism before beginning this project. Your project must be properly referenced therefore be sure that you understand how to properly footnote, quote and reference all materials.

If a passing grade is not achieved, the student must repeat the assignment until competency is assured. Once the remediation assignment is acceptable, a passing grade will be documented in the grade book.

**Guidelines for Patient Education Project:**

**Content**
- Address assigned topic
- Demonstrate good research base
- Educate classmates on how to teach patients about topic
- Demonstrate effective method for communicating material to patients
- Address how to identify those patients that require specific patient education
- Answer questions regarding topic

**Written and Other Material**
- Patient education materials should have the potential for use in a clinical setting
- May include, but is not limited to, poster, pamphlet, creating a lesson plan or small group discussion.
- Properly footnoted and referenced if needed
- Material should be presented in a creative fashion
- Materials should be meticulously completed and submitted professionally
Podium Skills
- Interactive, cohesive delivery
- Glances at written material but does not read from written material
- Rate, tone and pitch of speech
- Organized with good transition
- Good movement, use of available space

Submitting Call Back Day Materials: the following material must be uploaded to your Exxat portfolio
By 9:00 am on the Monday of the 2\textsuperscript{nd}, 3\textsuperscript{rd}, 4\textsuperscript{th} weeks of your rotation:
- Exxat patient/procedure logs from the previous week
By 9:00 am on the Friday of the 2\textsuperscript{nd} week of your rotation:
- Advisor SOAP
By 9:00 am on the Friday of the 3\textsuperscript{rd} week of your rotation:
- Signed Mid-Clerkship evaluation
By 9:00 am on the Friday of the 4\textsuperscript{th} week of your rotation:
- Graded HPI/SOAP
By 9:00 am on the Monday of Call Back Day week/Monday of the 5\textsuperscript{th} week of your rotation:
  - Print out of completed Student Evaluation of Clinical Site from Exxat
  - Signed Exxat Patient and Procedure Log

A five point deduction from your final rotation grade will be taken for any materials submitted late:

<table>
<thead>
<tr>
<th>SUMMARY OF PROJECT AND SITE VISIT BREAKDOWN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Medicine</td>
</tr>
<tr>
<td>Primary Care</td>
</tr>
<tr>
<td>Pediatrics</td>
</tr>
<tr>
<td>Ob/Gyn</td>
</tr>
<tr>
<td>Surgery</td>
</tr>
<tr>
<td>Free Elective</td>
</tr>
<tr>
<td>Behavioral Medicine</td>
</tr>
<tr>
<td>Internal Medicine</td>
</tr>
<tr>
<td>Long Term Care/Elective</td>
</tr>
</tbody>
</table>

CFHI Guidelines for Elective Rotation II
In lieu of the case presentation requirement you will be required to present a power point presentation that encapsulates your experience abroad. You will complete your presentation on a date to be determined by Clinical Coordinators. Your power point should introduce the rotation/country you visited, where/with whom you stayed. Why did you choose this country and area of medicine? What were the facilities like that you worked at, who was your patient population? Explain the differences, if any, of the medical health system you encountered and that of U.S. Some additional questions to consider to help guide your presentation: a moment/patient/situation that impacted you the most, any life lessons learned. Feel free to
include any information you feel would augment the presentation. Please use photos, videos etc. to enhance your presentation as well. Please plan on a 15 minute presentation. Students going to same country please compile one presentation amongst the group or ask Clinical Coordinators for guidance if needed. For students rotating in South Africa please divide the presentation groups not by country, but by facility in which you rotated.

Additionally, you will be required to hand in a one page, single spaced reflection paper summarizing the experience and its importance to you as a medical provider. Any information you provide the program may be used to print on Pace newsletters, program website or University website.

All required paperwork, such as, mid-clerkship evaluations, soap notes etc. can be handed in after your return if access to email is unavailable. Please retain ALL paper copies. You will be responsible for tracking and entering your patients into Exxat while abroad. Again, if you do not have internet access, please keep a written record of all patient information and enter patients into Exxat upon your return.

Objective Structured Clinical Examinations (OSCE)
Students will complete an Objective Structured Clinical Examinations (OSCE) as part of the Clinical Year Capstone Course (See Clinical Year Capstone Course Syllabus for complete details.) The OSCEs will focus on patient cases with chronic diseases or conditions. The dates and times of the OSCEs will be scheduled in the final semester of your PA education. Students who do not receive a passing grade of at least 75% on the OSCE will remediate by completing a comparable exam. If a student does not receive a passing grade of at least a 75% on their remediation exam, they will receive a failing grade and will consequently fail PAS 799. If a student fails the OSCE they will fail PAS 799C. Once competency is demonstrated, a grade of 75% will be entered for the student.

The Written Comprehensive Exam
Within the final three (3) months of the PA program, there will be a multiple choice written comprehensive examination which will reflect material from the entire PA program curriculum. The Written Comprehensive Exam is part of the Clinical Year Capstone Course (See Clinical Year Capstone Course Syllabus for complete details.) Questions will be derived from lectures, labs, required readings, patient cases, class discussions, and interactive exercises and reflect the National Commission on Certification of the Physician Assistant (NCCPA) Blueprint topic areas. It is meant to demonstrate competency to practice as a physician assistant. It is not a substitute for any other course or program examination such as the PACKRAT™ and is not predictive of your ability to successfully pass the PANCE.

Students who DO NOT receive a passing grade of 75% on the comprehensive written examination will be required to remediate in such ways as performing additional rotational work, written assignments, and/or additional written examination(s) as determined by the course director(s). Once competency is demonstrated a grade of 75% will be entered for the student.
POLICY FOR FAILURE OF CLINICAL CLERKSHIP

If a student fails a clinical clerkship he or she is required to meet with the Academic Affairs Committee. The Academic Affairs Committee may make the following recommendations including but not limited to the following:

- The student will be placed on probation.
- The student will be required to successfully repeat the failed clerkship.
- The student may be dismissed from the PA Program.

Please see the Academic Affairs Committee, Probation and Dismissal sections of this Handbook for further information regarding failure of clinical clerkships.
ACADEMIC AND BEHAVIORAL INTEGRITY POLICIES
ACADEMIC & BEHAVIORAL INTEGRITY POLICIES

PACE UNIVERSITY
Please refer to the Pace University policy regarding Academic Integrity located in the Student Handbook.

LENOX HILL HOSPITAL
Please refer to the Lenox Hill Hospital Organization Standards Manual contains the Rules of Conduct for employees. Although students in the PA Program are not considered employees of Lenox Hill Hospital, they should utilize this policy as a basis for professionalism while in the classroom or participating in clinical experiences within the hospital.

PROGRESSION
Progression and continuance in the Pace University-Lenox Hill Hospital Physician Assistant Program is not based solely upon scholastic achievement. It is also, necessarily, based on the personal qualities described in the Program Technical Standards and Standards of Professional Conduct for the Physician Assistant Student.

The Certificate of Completion from Lenox Hill Hospital is coincidental with the MS degree from Pace University. Neither the certificate nor the degree will be granted unless the requirements of both have been satisfied.

ACADEMIC STANDARDS

1. Students are required to maintain a cumulative QPA of 3.0 or higher to continue and/or graduate from the PA Program.

2. Students must obtain a minimum grade of “B-” in all PAS-level courses and must successfully complete all other requirements for each specific course.

REQUIREMENTS FOR SUCCESSFUL COMPLETION OF CLINICAL YEAR

A physician assistant student must complete the following requirements to successfully complete the clinical year and graduate the Physician Assistant Program.

1. Follow all rules and regulations published by the Pace University-Lenox Hill Hospital Physician Assistant Program.

2. Fulfill all tenets of policy set forth in the Clinical Handbook regarding Progression;

3. Maintain a professional demeanor as a physician assistant student, as evidenced by attendance and active participation in clerkships, call back days, lectures and clinical experiences.

5. Satisfactorily participate in Program Clinical Competency exams (summative evaluations), either written, practical or a combination of both.

6. Participate in the PACKRAT exam at the end of the clinical year.

7. Undergo and submit documentation of a complete physical examination and labs to establish a health database prior to the start of the clinical year.

8. Satisfactorily complete all 9 clinical clerkships, including end of clerkship examination, and end of clerkship evaluations with passing grades, and submitting all necessary clerkship forms.

9. Demonstrate required skills necessary for clinical practice and professional behaviors as determined by Program faculty.

**GRADUATION REQUIREMENTS**

The Physician Assistant Program and the University OSA office will review all student records prior to graduation. Any outstanding financial balance must be reconciled with the University prior to graduation. Students must fulfill all Department and University requirements, including compliance with academic integrity and disciplinary policies, before being awarded a diploma and certificate and to be eligible for the physician assistant national certifying examination. Specific requirements include:

1. Satisfactory completion of all Pace University required courses and courses for the Physician Assistant Program.
2. Satisfactory completion of all courses in the professional curriculum with a grade of 80% (B-) or better,
3. Satisfactory completion of all clinical rotations,
4. Satisfactory completion of all assignments,
5. Satisfactory completion of a comprehensive written examination at the end of the didactic year,
6. Satisfactory completion of a comprehensive physical exam and clinical skills practicum (CSP) or simulation at the end of the didactic year,
7. Satisfactory completion of a comprehensive written examination at the end of the clinical year,
8. Satisfactory completion of a comprehensive OSCE (Objective Structured Clinical Evaluation) at the end of the clinical year,
9. Completion of the PACKRAT examination in the clinical year,
10. Compliance with standards of conduct and guidelines for ethical conduct and professional performance standards as listed in the student handbook.
11. Submit a completed and signed “Application for Graduation” form to OSA/Degree Audit Office. This application is not for the graduation ceremony, but to have your
degree officially conferred by the University. Since you are considered August Graduates, your deadline to submit the application would be November 15th. This is not to be submitted to the Physician Assistant Program, but to the OSA/Degree Audit Office. You can call (877) 672-1830 or email OSA@pace.edu for any additional questions you may have.

APPLICATION FOR GRADUATION & DEGREE CONFERRAL

In order for your degree to be conferred, you must apply for graduation with the Office of Student Assistance (OSA) in the month of November prior to your August degree conferral date. The exact deadline to submit your Application for Graduation is posted on the Office of Student Assistance website.

The Office of the University Registrar conducts the final review of degree candidates' academic records to verify that all are on track to graduate in the term indicated on their application. The degree auditor will check every course record and every detail in the permanent student academic record to make sure all the degree requirements are met, minimum grade point averages have been achieved, and that enough total credits have been completed to award a degree.

Degree audit notifications are sent by e-mail to each candidate's Pace assigned student e-mail address upon completion of the review. Any discrepancies should be addressed with the degree auditor and your academic advisor immediately to prevent a delay in conferring the degree.

The University has commencement ceremonies in May of every year. If you’re planning to attend your campus’ commencement exercise, please go http://www.pace.edu/commencement. August graduates walk in the ceremony before their degree conferral date (i.e.; August 2013 graduates walk in the May 2013 ceremony)

VERIFICATION OF ENROLLMENT AND DEGREE CONFERRAL

Pace University subscribes to the National Student Clearinghouse. Companies interested in validating student enrollment or degree completion should visit www.studentclearinghouse.org to submit a request for verification. Companies should be prepared to submit the correct spelling of name and all names used while attending college, social security number, date of birth, campus attended and a signed release from the student to receive a timely response and verification.

National Student Clearing House can also be reached at 703-742-4200 by phone, at 703-742-7792 by fax and by email at service@studentclearinghouse.org.

THE ACADEMIC AFFAIRS COMMITTEE

The mission of the Academic Affairs Committee is to maximize a student’s learning opportunities and to ensure that each graduate of the Pace University-Lenox Hill Hospital Physician Assistant Program has the requisite skills and knowledge and, at the same time, to
maintain the integrity and standards of the Program and safeguard the welfare of patients.

The Academic Affairs Committee reviews the records and circumstances of students whose status in the Program is of concern or whose eligibility to remain enrolled in the Program is at issue, and makes recommendations to the Program Director concerning responsive actions. The Program Director will accept a recommendation of the Academic Affairs Committee unless the Program Director determines that there is no reasonable basis for the recommendation. The Program Director may, in consultation with the Academic Affairs Committee, modify a recommendation.

**Probation**

Students who have been placed on probation must appear before the Academic Affairs Committee. The meeting with the Academic Affairs Committee will provide the student with an opportunity to discuss any issues she or he may have that resulted in probationary status; it also permits the Academic Affairs Committee to assist in identifying appropriate remedial action and to ensure that the student understands the conditions of probation. The conditions of probation are final and may not be appealed. If the student fails to satisfy the conditions of probation, he or she will be automatically dismissed.

**Dismissal**

Students who have been dismissed from the Program and wish to be reinstated must petition the Academic Affairs Committee for readmission to the Program. The petition must be in writing and addressed to Jean Covino, DHSc, PA-C, Chair of Academic Affairs Committee, Pace University-Lenox Hill Hospital Physician Assistant Program, 163 Williams Street, 5th floor, New York, NY 10038 or to jcovino@pace.edu. In order to be reinstated the student must establish to the satisfaction of the Academic Affairs Committee that his or her unsatisfactory performance is due to (1) extraordinary and non-recurring circumstances and (2) is not representative of the student’s academic ability and/or usual professional conduct. Based on the written record alone, the Committee may recommend to the Program Director that the petition be granted with certain conditions of probation. Students not granted probationary reinstatement based on the written record alone will be permitted a personal appearance before the Academic Affairs Committee. At the meeting with the Academic Affairs Committee, the student may present additional evidence. The Committee may request additional evidence or materials from the student or such other sources as it may deem appropriate. After the conclusion of the student’s personal appearance, the Committee will deliberate and make a recommendation to the Program Director either to deny the petition or to grant the petition with certain conditions of probation.

If the petition for reinstatement is granted, the student will be readmitted and placed on probation with such terms and conditions as may be recommended to the Program Director by the Academic Affairs Committee and accepted by the Program Director. The conditions of probation may not be appealed. A student who is reinstated and who fails to satisfy the conditions of probation will be automatically dismissed without any further review or appeal.

Advisors (including attorneys), representatives, friends, classmates and family members of the student are not permitted to attend any meeting of the Academic Affairs Committee.
The members of the Academic Affairs Committee are determined on a case-by-case basis and may be drawn from among the following: the Medical Director of the Pace University-Lenox Hill Hospital Physician Assistant Program, the Associate Program Director, faculty members of the Pace University-Lenox Hill Hospital Physician Assistant Program, and appropriate representatives of the College of Health Professions, Pace University and Lenox Hill Hospital. The Academic Affairs Committee may convene with an odd number and a minimum of three members neither of whom shall be the Program Director, the Appeal Officer, or the faculty nor staff member whose evaluation of or complaint about the student resulted in the probationary status, dismissal or other issue before the Committee.

**PROBATION**

Probation provides a student with an opportunity to remedy deficiencies in academic standing and professional conduct. A student, whose academic status and/or professional conduct fail to meet certain standards, automatically will be placed on probation and given a specified period of time within which to satisfy the conditions of his or her probation. If the conditions of probation are satisfied within the time permitted, the student will remain eligible for enrollment in the Program. If, however, the student fails to satisfy the conditions of probation within the time permitted, the student will be dismissed automatically from the Program.

Although it is not possible to anticipate all of the circumstances, some of the circumstances that may result in a student being placed on probation include, but are not limited to, the following:

- During the didactic and clinical years the student:
  - Received a grade below “B-” in any PAS-level courses or an “F” in any PAS pass/fail graded courses; or
  - Did not maintain a cumulative grade point average (QPA) of at least 3.0 in each semester; or
  - Violated certain standards of professional conduct. Examples of conduct that will result in probation include, but are not limited to: violated the academic integrity standards of the Program; forged another person’s signature on any document related to the Program. (See the section entitled Standards of Professional Conduct for the Physician Assistant Student in the Pace University-Lenox Hill Hospital Physician Assistant Program Clinical Handbook and Student Handbook for a discussion of the standards of professional conduct applicable to physician assistant students.)

The Program Director will notify a student as soon as practicable that he or she has been placed on probation. The Academic Affairs Committee will meet with the student to discuss the student’s probationary status, the circumstances that may have resulted in his or her probationary status as well as possible conditions of probation. The Academic Affairs Committee will, after considering the relevant portions of the student’s record and the information provided during the meeting, recommend to the Program Director the conditions of probation and the time within
which the conditions must be satisfied. The Program Director will accept the recommendation of the Academic Affairs Committee unless there is no reasonable basis for the recommendation. In addition, the Program Director may, in consultation with the Academic Affairs Committee, modify the conditions of probation as may be appropriate under the circumstances. The Program Director or designee will notify the student in writing (usually by e-mail and/or mail) of the conditions of probation and the time within which the conditions must be satisfied. If the student has any questions about the conditions of probation, he or she should contact the Chair of the Academic Affairs Committee or the Program Director.

The conditions of probation (including the time period within which the conditions must be satisfied) are final and may not be appealed.

If the student fails to satisfy the conditions of probation, he or she will be dismissed automatically from the Program.

Students in the Program who have successfully completed two prior periods of probation and would, based on their current academic performance and/or professional conduct, otherwise be placed on probation for a third time, will be dismissed automatically from the Program.

Advisors (including attorneys), representatives, friends, classmates and family members of the student are not permitted to participate in this process.

DISMISSAL

A student may be dismissed automatically from the Program even if she or he has never been placed on probation. Circumstances that may result in a student being dismissed from the Program include, but are not limited to, circumstances in which the student:

- Qualified for probation more than twice while enrolled in the Program; or
- Failed to satisfy the conditions of probation within the time permitted; or
- Received a grade below “B-” in two or more PAS-level courses or an “F” in PAS pass/fail graded courses; or
- Failed more than one clinical clerkship; or
- Committed a serious violation of the standards of professional conduct. Examples of conduct that will result in dismissal include, but are not limited to: violated the academic integrity standards of the Program; forged another person’s signature on any document related to the Program; misrepresented one’s physician assistant student status as, for example, a physician assistant, a nurse practitioner, a physician, or a medical resident. (See the section entitled Standards of Professional Conduct for the Physician Assistant Student in the Pace University-Lenox Hill Hospital Physician Assistant Program Clinical Handbook and Student
Handbook for a discussion of the standards of professional conduct applicable to physician assistant students.)

The Program Director or designee will, as soon as practicable, notify a student in writing, usually by email and/or such other form of mail or delivery the Director determines is appropriate under the circumstances, that he or she has been dismissed from the Program.

Students who have been dismissed and wish to be reinstated must petition the Academic Affairs Committee for readmission to the Program. The petition must be in writing and may be mailed, delivered or sent by e-mail to: Jean Covino, DHSc, PA-C, Chair of the Academic Affairs Committee, Pace University-Lenox Hill Hospital Physician Assistant Program, Pace University, 163 Williams Street, 5th Floor, New York, NY 10038 or to jeovino@pace.edu. The written petition must be received by the Chair within seven (7) business days of the date of the Program Director’s written notice of dismissal.

A student may, at the sole discretion of the Program Director, be permitted to attend class pending a decision on the petition for reinstatement. Such approval must be in writing. If the petition for reinstatement is not granted, the student will no longer be permitted to attend class and dismissal will be effective as of the date set forth in the original letter from the Program Director informing the student he or she has been dismissed from the Program.

In order to be reinstated the student must establish to the satisfaction of the Academic Affairs Committee that his or her unsatisfactory performance is due to (1) extraordinary and non-recurring circumstance and (2) is not representative of the student’s academic ability and/or usual professional conduct. Based on the written petition alone, the Committee may recommend to the Program Director that the petition be granted with certain conditions of probation. Students not granted probationary reinstatement based on the written petition alone, will be permitted a personal appearance before the Academic Affairs Committee. At the meeting with the Academic Affairs Committee, the student may present additional evidence. The Committee may request additional information from the student or such other sources as it may deem appropriate. After the conclusion of the student’s personal appearance, the Committee will deliberate and make a recommendation to the Director either to deny the petition or grant the petition with certain conditions of probation. The Program Director will accept the recommendations of the Academic Affairs Committee unless there is no reasonable basis for the recommendation. In addition, the Program Director may, in consultation with the Academic Affairs Committee, modify the conditions of probation as may be appropriate under the circumstances.

If the petition is granted, the student will be readmitted on probation with certain conditions. The Program Director will inform the student in writing (usually by e-mail and/or mail) of the conditions of probation (including the time permitted within which the conditions of probation must be satisfied). The Academic Affairs Committee will meet with the student to review and discuss the conditions of probation. The conditions of probation (including the time period within which the conditions must be satisfied) are final and may not be appealed.

A student who is reinstated and who fails to satisfy the conditions of probation will be dismissed.
automatically from the Program without any further review or appeal.

If the petition for reinstatement is denied, the Program Director will notify the student in writing of the decision to deny the petition. The decision to deny the petition may be appealed to the Dean of the College of Health Professions in accordance with the Appeal Procedure described below.

A student who is dismissed a second time from the Program and whose petition for reinstatement is denied, may not appeal the decision of the Program Director denying reinstatement. Under these circumstances, the decision of the Program Director is final and not subject to further review.

Advisors (including attorneys), representatives, friends, classmates and family members of the student are not permitted to participate in this process.

**APPEAL PROCEDURE**

A decision to dismiss a student from the Program for reasons of academic standing or professional conduct may be appealed to the Dean of the College of Health Professions who will serve as the Appeal Officer. The appeal must be in writing and sent to the Appeal Officer by e-mail, mail or personal delivery. The written appeal must be received by the Appeal Officer within seven (7) business days of the date of the Program Director’s written notice of dismissal. Normally, appeals that are not timely received will not be considered and will be denied.

A student may, at the sole discretion of the Program Director, be permitted to audit classes pending a decision on the appeal. Such approval must be in writing. If the appeal is not granted, the student will no longer be permitted to attend class and dismissal will be effective as of the date set forth in the original letter from the Program Director informing the student he or she has been dismissed from the Program.

The appeal must include the following:

- The name, telephone number, address and e-mail address of the student appealing the decision of dismissal; and

- The reason the student was dismissed, e.g., academic standing, violation of the Standards of Professional Conduct for the Physician Assistant Student; and

- The grounds for appealing the decision of dismissal; and

- An explanation of the reasons the decision to dismiss should not be affirmed; and
• Identification of any extenuating circumstances that may have caused or contributed to the student’s conduct that resulted in his or her dismissal from the Program; and
• Actions the student will undertake immediately and long term to improve his or her academic performance and/or professional conduct; and
• A copy of the letter informing the student that he or she was automatically dismissed from the Program and a copy of the decision of the Program Director denying reinstatement.

At the sole discretion of the Appeal Officer, he or she may meet with the student in order to obtain clarification or additional information, and/or confer with the members of the Academic Affairs Committee who recommended the dismissal of the student, and/or the Program Director. In addition, the Appeal Officer, as he or she may determine is appropriate under the circumstances, may request information from the student’s record and other sources.

The Appeal Officer will deny the appeal unless he or she determines that there is no rational basis for the Program Director’s decision to dismiss the student. The Appeal Officer shall, to extent practicable, decide the appeal within seven (7) business days of his or her receipt of the appeal. The Appeal Officer shall, as soon as practicable, notify the student in writing (usually by e-mail and/or mail) of the decision on the appeal. The decision of the Appeal Officer is final and not subject to further review or appeal.

If the appeal is granted, the student will be readmitted on probation with certain conditions as may be recommended by the Appeal Officer and/or the Academic Affairs Committee and as accepted or modified by the Program Director. The Program Director will notify the student in writing (usually by e-mail and/or mail) of the conditions of probation (including the time period within which the conditions of probation must be satisfied). The Academic Affairs Committee will meet with the student to discuss the conditions of probation and to facilitate the student’s understanding of them. The conditions of probation are final and may not be appealed.

A student who is reinstated and who fails to satisfy the conditions of probation will be dismissed automatically from the Program without any further review or appeal.

A student who is dismissed a second time from the Program and whose petition for reinstatement is denied, may not appeal the decision of the Program Director denying reinstatement. Under these circumstances, the decision of the Program Director is final and not subject to further review.

Advisors (including attorneys), representatives, friends, classmates and family members of the student are not permitted to participate in the appeal process.

**COURSE GRADE APPEAL PROCESS**

Please refer to the grade appeal policy for Pace University as published in the graduate student
handbook. For Physician Assistant Program students, the chain of events to be followed in a course grade appeal policy varies slightly from the University-wide policy. The student should try to resolve the appeal process within the Program by starting with the Course Coordinator, moving to the Program Director, and finally to the Dean of the College of Health Professions. http://www.pace.edu/academic-catalogs/undergraduate/general-information-2/academic-policies-and-general-regulations/section-ii

REMEDICATION OF ACADEMIC DIFFICULTIES

Students who fail to demonstrate the requisite knowledge or skills may be required to remediate those deficiencies. Remediation is a process intended to correct a student’s academic deficiencies and may include but is not limited to such activities as assignments, examinations, tutoring, assessment and development of study skills and deceleration. A student whose knowledge or skills may require remediation will be contacted by his or her faculty advisor, the course coordinator or the Academic Coordinator to discuss the need for remediation and the appropriate remedial activity.

Remediation of Written Examinations. See End of Clerkship Exam policy.

Remediation of Assignments and Practical Examinations. In order to pass an assignment or practical examination, a student must receive a grade of no less than 75%. Generally, a student who fails an assignment or practical examination (receives less than 75%) must remediate the failure by successfully repeating the assignment or practical examination as determined by the course coordinator. If a student does not successfully remediate the assignment or practical examination, he or she may, at the sole discretion of the PA Program, be required to repeat, in whole or in part, the remediation.

Remediation of PAS-Level Courses.
A student, who fails a PAS-level course, may be permitted to remediate a maximum of one (1) PAS level course during the entire duration of the PA Program. Failure of a second PAS level course at any time during the PA Program will result in automatic dismissal. The student will be required to remediate the course by completing a remediation assignment as designated by the Course Coordinator/Instructor. This may take the form of a comprehensive remedial examination, oral examination or other assignment designed to demonstrate the requisite knowledge and skills required to successfully complete the PAS-level course.

If a student successfully remediates the PAS-level course by receiving a score of 80% or higher on the comprehensive examination, his or her grade for the course will be changed to a “B-” and the original failing grade removed. Nevertheless, even though the student may successfully remediate the course, when determining whether the student qualifies for probation or dismissal from the PA Program, it will be counted among the courses the student failed. (Please see Probation and Dismissal section in this Handbook for additional information.)

If, however, the student does not successfully remediate the PAS-level course, the original failing grade remains and, in order to progress in the Physician Assistant Program, the student will be decelerated and required to successfully repeat the course when it is offered the following year, provided he or she has not failed one PAS-level course previously.
Deceleration.
A student who has been notified they have been decelerated must file for an academic leave of absence from the University with the Office of Student Assistance (OSA). The procedures to be followed for a leave of absence (LOA) may be found on the Office of Student Assistance (OSA) website under University Policies. For any leave students must file the appropriate LOA forms with OSA which can be located on the website under Forms. Signed documentation of the approval of the leave from the College of Health Professions (CHP) Dean must be provided to the PA Program and the Office of Student Assistance (OSA).
The semester prior to your return to repeat a failed course(s) you must complete and file the necessary paperwork to resume your studies with OSA and CHP and provide completed and signed off copies to OSA and the PA Program offices. The appropriate resumption of studies form may be found at http://www.pace.edu/office-student-assistance/forms
( Please see Leave of Absence, Withdrawals, Resumption of Studies section in this Handbook for additional information.)

Students whose usual course of study is decelerated in order to repeat a course are required to demonstrate their current competency in certain PAS-level courses prior to resuming their studies or progressing in the program. (Please see Demonstration of Current Competency section in this Handbook for additional information.)

EVALUATION

Evaluation of Students in the Didactic and Clinical Years
Students are evaluated by various methods to ensure that they meet the requirements contained in the “Standards and Guidelines for an Accredited Educational Program for the Physician Assistant” and the Terminal Training Objectives. The following instruments and processes are used in this effort:
○ Didactic and clinical year written or computer-based examinations
○ Head-to-Toe Physical Exams
○ Physical Exam Simulations (CSP’s/OSCE’s)
○ Graded Interactive Case Studies
○ Observation by faculty in class, small groups, clinical experiences, and clinical clerkships
○ Performance of Clinical Procedures
○ Clinical Experiences
○ Faculty Advisory Reviews
○ Evaluation of H & PE write-ups
○ Oral Patient Presentations
○ PACKRAT Examination
○ Professional Evaluations
**PA Program Grading ad Quality Point System**

- **A** = 94 - 100%
- **A-** = 90 - < 94%
- **B+** = 86 - < 90%
- **B** = 83 - < 86%
- **B-** = 80 - < 83%
- **C+** = 76 - < 80%
- **C** = 73 - < 76%
- **C-** = 70 - < 73%
- **D+** = 67 - < 70%
- **D** = 60 - < 67%
- **F** = < 60%

Any PAS course grade below a ‘B-’ is not considered a passing grade by Program standards.

Failure to comply with all aspects of the course requirements and to achieve the learner characteristics may adversely affect the student's grade. The Instructor or Course Coordinator will make all decisions regarding student grades.

**Physician Assistant Program Evaluation**

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

Methods of Program evaluation that may employ student input:

- Didactic Course Evaluation
- Instructor Evaluations
- Director’s Hour
- Student Self-Assessment
- Focus Groups/Surveys
- Self-Study Committees
- Admission Committee
- Curriculum Committee
- Student Class Representatives
- Clinical Committee

Additional methods of Program evaluation include:

- Quarterly Report to the Executive Committee
- Assessment of student performance on NCCPA exam
- Assessment of student performance on PACKRAT exam
- Assessment of data collected in graduate surveys

*All Pace University-Lenox Hill Hospital Physician Assistant Program students are obligated to participate in ALL ongoing Program evaluation efforts.*
ADDITIONAL STUDENT POLICIES
E-MAIL/Blackboard

E-mail is the preferred mode of communication between the Program Faculty/Staff and students. Emails regarding the program will be sent to each student's Pace email address. Students must check their e-mail accounts daily for posts from Program Faculty or Staff. Additionally, students should empty mailboxes to allow for regular email from Program staff and faculty. “Not checking an account” is not an allowable excuse for missing a Program event or notification.

In general and unless otherwise indicated, emails will be answered within 48 hours with the exception of emails that arrive after 5pm on Friday and during the weekend; these emails will be answered on Monday.

PROHIBITION AGAINST RECORDING AND DISTRIBUTING

This lecture is provided for your personal study and use only. It may not be recorded or reproduced in any form or distributed to anyone without the prior express consent of the instructor.

For example, without the instructor’s prior express consent, video and audio replications as well as photographic images of this lecture may not be recorded on any device including, but not limited to, audio recorders, video recorders, cellular phones, digital cameras, MP3 players, computers and other handheld devices that record images and/or sound.

A breach of this requirement may subject you to a disciplinary action in accordance with the Physician Assistant Graduate Program, the College of Health Professions and/or the University’s applicable policies.

SOCIAL MEDIA POLICY

It is strictly prohibited to take photographs of patients, including in the operating room, even if the patient is not identified. Similarly the accessing of diagnostic imagines or any form of patient data for the purpose of transmission on a social media platform such You Tube, Face Book, iTunes, LinkedIn, Twitter and Blogs is strictly prohibited. Violation of this policy will result in being called before the Academic Standing Committee and possible dismissal from the program. Witnessing any violation of this policy should be immediately reported to the clinical coordinator or program director.

PROFESSIONAL MENTORS

The Pace University-Lenox Hill Hospital Program recognizes the importance of professional role modeling. To this end, the Program recommends and fosters relationships between its students and many of the physician assistants who work at Lenox Hill Hospital outside of the Program. This relationship may take various forms from a one-time professional advisement session to
shadowing or participation in an elective clerkship. The Program conducts scheduled social events during which students may meet and network with a larger group of physician assistants.

The program encourages students to join the Student Academy of American Academy of Physician Assistants at [http://www.aapa.org/your_pa_career/pa_students.aspx](http://www.aapa.org/your_pa_career/pa_students.aspx) and the New York State Society of Physician Assistants, NYSSPA, which has an online section [http://www.nysspa.org/students/index.html](http://www.nysspa.org/students/index.html) dedicated to students. Students and faculty also attend professional NYSSPA and AAPA conferences; these conferences provide students additional opportunities to meet and network with physician assistants and other healthcare practitioners.

MALPRACTICE LIABILITY INSURANCE

The Physician Assistant Program has assumed the cost of providing you with blanket malpractice liability insurance coverage through Arthur J. Gallagher (Certificate of Insurance-Copy available in Physician Assistant Program Office).

TRANSPORTATION

Throughout the professional phase of the Physician Assistant Program students are required to attend clinical rotations and participate in clinical experiences in a variety of community medical settings throughout the Tri-State area, including but not limited to NY, NJ, and CT.

Students are required to provide their own transportation (which may include a car) to hospital and clinical sites during the professional phase. Transportation to various hospitals, clinical experiences and other events will be the student’s responsibility. Clinical year students are responsible for transportation to all clinical rotation sites and to the Program on call back days.

INFORMATION FOR STUDENTS WITH DISABILITIES

The same rigorous standards for admission apply to students with and without a disability. In order to support the continued success of students with disabilities, the University prohibits discrimination on the basis of disability and is committed to ensuring equal access for students with disabilities to its facilities, programs, and activities. The University’s commitment to equal educational opportunities for students with disabilities includes providing reasonable accommodations for the needs of students with disabilities.

Disabilities and Accommodations

Federal law, including the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, as well as state and local laws prohibit institutions of higher education from discriminating against students with disabilities. The Americans with Disabilities Act defines an individual with a disability as a person who has a physical or mental impairment which substantially limits one or more major life activities of the individual; has a record of such an impairment; or, is regarded as having an impairment.
Students with, among others, visual, hearing and mobility impairments, psychological disorders (including, but not limited to, specific learning disabilities, organic brain syndrome, attention deficient disorder, emotional or mental illness), and chronic health disorders such as diabetes, heart disease, and HIV infection (whether asymptomatic or symptomatic) may be disabled and therefore eligible for a reasonable accommodation. Each student diagnosed with a particular disability will have a different level of functioning even within the same disability category. Further, compensation skills will also vary from one student to another and in the same student over time. Therefore, accommodations are determined on a case-by-case basis according to a student’s documented needs, guidelines suggested by federal and state law, and criteria developed by the University.

Identifying and implementing a reasonable accommodation for a student with a disability is an interactive process that includes shared responsibility between the University and the student. Accommodations include adjustments to make the campus, residential housing, transportation and parking accessible, academic adjustments or modifications, and auxiliary aids and services. Examples of academic adjustments that may be made available to eligible students include priority registration, substitution of one course for another, a leave of absence, and extended time to complete an assignment or test. Auxiliary aids and services that may be provided to eligible students include, for example, note takers, recording devices, sign language interpreters, and computers equipped with voice recognition or other adaptive software.

The University is required to provide a reasonable accommodation; it is not required to provide the specific accommodation requested by the student. In providing accommodations, the University is not required to lower or effect substantial modifications to essential requirements or to make modifications that would fundamentally alter the nature of the service, program or activity. Thus, for example, although the University may be required to provide extended time within which to complete a test, it is not required to change the substantive content of the test. Personal attendants, individually prescribed devices, readers for personal use or study, wheelchairs, hearing aids, and other devices or services of a personal nature are the responsibility of the student, not the University. Finally, the University is not required to make modifications or provide auxiliary aids or services that would result in an undue burden on the University.

Funding for auxiliary aids and services may be available from certain state agencies such as, for example, the New York State Office of Vocational and Educational Services for Individuals with Disability. For those auxiliary aids and services that are likely to be funded by a state agency, the University may require the student to apply to the agency for funding. The University may provide assistance with the application for funding.

**Request for an Accommodation**

To request an accommodation for a qualifying disability, a student must self-identify and register with the Disability Services Office for his or her campus. The Office of Disability Services is housed in the Counseling Center on the New York City and Pleasantville campuses. The Coordinator of Disability Services for the New York City campus, Jenna Cler, LMSW, may be contacted at 212-346-1526. The Coordinator of Disability Services for the Westchester campuses, Ms. Elisse M. Geberth, may be contacted at the Counseling Center in the
Administration Center at 861 Bedford Road, Pleasantville, New York 10570, 914-773-3710 or by e-mail, egeberth@pace.edu. Notifying other University offices, faculty or staff does not constitute giving notice to the University of a request for an accommodation. No one, including faculty, is authorized to evaluate the need and arrange for an accommodation except the Coordinator of Disability Services. Moreover, no one, including faculty, is authorized to contact the Coordinator of Disability Services on behalf of a student.

It is the student’s responsibility to request an accommodation. Because some accommodations may take considerable time to arrange, students are urged to contact the Coordinator of Disability Services in order to request an accommodation as soon as possible after receiving notice of admission to the University. Untimely requests may result in delay, substitution, or an inability to provide an accommodation. If a request for an accommodation is submitted late, the Coordinator of Disability Services will, nevertheless, make every reasonable effort to process the request for an accommodation.

Before an accommodation will be provided, the student may be required to submit medical and/or other diagnostic information concerning the student’s disability and limitations. If the information provided is unclear or incomplete, the student may be required to provide additional information or participate in further evaluations. In addition, the University may, at its expense, arrange for its own evaluation of the disability and needs of a student.

The Coordinator of Disability Services will, in conjunction with others as may be appropriate, evaluate the information provided by the student and health care providers; refer the student for additional testing and evaluation as may be necessary; make recommendations for the accommodations to be provided to the student; and, assist in arranging for the implementation of the accommodation to be provided.

If a student experiences difficulties with the implementation of the accommodation or, if after it has been implemented, a student has concerns that the expected results of the accommodation are not being met, the student must promptly notify the Coordinator of Disability Services. The Coordinator of Disability Services will, as may be appropriate, endeavor to remedy the situation.

If a student disagrees with the accommodation recommended by the Coordinator of Disability Services, he or she should promptly appeal the recommendation to the Vice President for Student Affairs, who may be contacted at 212-346-1228 and 914-773-3705.

Depending on the nature of the disability and the accommodation provided, a student may be required periodically to submit medical and/or diagnostic information demonstrating the current status of the disability and/or to renew the request for an accommodation.

Any questions about the services offered by the University to students with disabilities or the procedures for requesting an accommodation should be directed to the Coordinator of Disability Services at 212-346-1526 or 914-773-3710.
Confidentiality

The information and documents provided to the University in support of a student’s request for an accommodation shall be maintained as confidential. Individually identifiable information will not be disclosed except as may be required or permitted by law or pursuant to a release signed by the student.

Complaints of Disability Discrimination

If a student has concerns that he or she has been discriminated against because of a disability, he or she should contact the University’s Affirmative Action Officer at 212-346-1310 or 914-773-3856.

Additional Services Offered by the Counseling Center

The University’s Counseling Center offers psychological services to all students. To make an appointment, call the Counseling Center at 212-346-1526 or 914-773-3710.

ILL/IMPAIRED STUDENT

The stresses of a demanding program such as the Physician Assistant Program may cause the student to suffer from symptoms of various psychosocial difficulties. The following mechanisms have been established to deal with the impaired student:

Identification and Prevention

- Student input (Student Representative, and Director’s Hours)
- Required faculty advising sessions
- Discussion and observation by clinical preceptors
- Discussion and observation by Program faculty
- Discussion of ‘Student Concerns’ in Program meetings

Treatment

- Pace University Health Care Unit
- Pace University Counseling Center
  [http://www.pace.edu/counseling-center/](http://www.pace.edu/counseling-center/)
- Community Resources
  - Mental Health Line – 1-800-LIFENET
    - free, confidential help line for New York City residents
    - 24 hours per day/7 days per week
    - trained mental health professionals help callers find mental health services
  - Crime Victims – 212-577-7777
Students who are directed to seek psychiatric or psychological services or other counseling by the Academic Affairs Committee, Program Director, or Dean may be required to present documentation of attendance at said sessions and/or submit a letter certification of fitness to return to duty as a Physician Assistant student. Students are responsible for providing payment for services rendered by any agencies.

**SEXUAL HARASSMENT POLICY**

Pace University reaffirms the principle that its students, faculty, interns and staff shall be free from discrimination on the basis of sex. Sexual offenses such as rape, sexual abuse, or discrimination in the form of sexual harassment, will not be tolerated. Please refer to the Pace University student handbook for details regarding sexual harassment.


Sexual harassment in any situation is reprehensible. It is particularly damaging when it exploits the educational or professional dependence and trust between individuals with different levels of authority. When the authority and power inherent in such relationships are abused, whether overtly, implicitly, or mistakenly, there is potentially great damage to the individual, the alleged offender, and to the educational and professional climate of the University.

Both institutions have established grievance policies. Any student who believes he/she has been or is being sexually harassed should report this incident to the Program faculty immediately. The faculty can then direct the student through the appropriate channels. Any complaints will remain confidential. No student will be placed in a clinical experience that jeopardizes his or her educational and personal welfare.

**STUDENT GRIEVANCE POLICIES**

The University views students as responsible citizens who are integral members of the academic community. Policies and practices pertaining to student relations and services should reflect this point of view. All University officers will make every effort to ensure that this philosophy is implemented.

It is recognized, however, that regardless of how well intentioned people may be, complaints and misunderstandings are bound to arise. It is the purpose of the Student Grievance Procedures to ensure that these disagreements are expressed, explored, and resolved promptly and confidentially. The Student Grievance Procedures shall apply to student grievances relating to the following:

- Student Programs, Facilities, and Services: Allegations of violations of University policies and procedures with respect to programs, services, activities or facilities.
The Student Grievance Procedures shall not apply to claims relating to academic standing, grading or discipline, except where discrimination is alleged. Such matters are within the jurisdiction of the Academic Standing Committee and the Dean of the school.


WORK POLICY

The Program advises against students holding outside employment while participating in the professional phase of the Physician Assistant Program. The faculty does recognize that a need for employment may be an issue that some students will face. However, Program obligations will not be altered due to a student’s work obligations. The program faculty expects that work obligations will not interfere with the student’s learning progress or responsibilities while in the Program. Working often interferes with learning opportunities during rotation activities. The schedule of clinical experiences and clerkship hours are set by the Program in conjunction with the preceptor and are not negotiable. The Program also discourages the student from working clinically at the same site where they are completing clinical experiences or clerkships.

Students who are involved in, or commence, volunteer or paid work during the course of their Physician Assistant training cannot use their affiliation with the Physician Assistant Program in any aspect of that job. Work outside the Physician Assistant Program undertaken by the student, independent of the Program, is not covered by the liability insurance offered for clinical work associated with the educational experience. Additionally, students may not represent themselves as a physician assistant student in such contexts.

In addition, students are not required to work for the Physician Assistant Program, either as a volunteer or as a paid employee.

DROP/ADD POLICY

If a student needs to drop/add a class during their clinical year, they should email the clinical coordinators and the clinical administrative assistant with the correct drop/add form (found in the Forms section at the end of this handbook) and the correct CRN numbers that the student is both dropping and adding. Once the clinical coordinator has completed the form, they will email both the student and the PA Program’s OSA Liaison, Tanya Joseph, t joseph@pace.edu. Ms. Joseph will then follow-up with the student going forward to make sure it is done.

LEAVE OF ABSENCE, WITHDRAWALS, RESUMPTION OF STUDIES

Generally, a student must complete the Physician Assistant Program in three years, including any leaves of absence. The maximum time allowed from matriculation to the conferring of the
MSPAS degree in accordance with the Pace University Graduate catalog is 5 years.

Occasionally, for a variety of reasons, a student may find it necessary to take a leave of absence from the PA Program or to withdraw before the end of a semester in which the student is enrolled. To request a leave of absence as a reasonable accommodation for an eligible disability, students should contact the Coordinator of Disability Services.

Students who wish to take a leave of absence should file a request in writing to the Program Director. Additionally, they must notify the PA Program’s OSA Liaison, Tanya Joseph, tjoseph@pace.edu in the Office of Student Assistance.

The procedures to be followed for a leave of absence (LOA) whether medical, military or academic may be found on the Office of Student Assistance (OSA) website under University Policies. For any leave students must file the appropriate LOA forms with the Office of Student Assistance which can be located on the website under Forms. Signed documentation of the approval of the leave from the College of Health Professions (CHP) Dean must be provided to the PA Program and the Office of Student Assistance (OSA).

Students contemplating a leave of absence or withdrawal should also consult the Tuition Cancellation Policy, both of which are in the Pace University Academic Catalog. A student who is unable to complete the semester and applies for a leave of absence must withdraw from the courses in which he or she currently is enrolled and will receive a “W” for each course from which the student withdrew.

A registration action form may be required and can be found at: http://www.pace.edu/office-student-assistance/sites/pace.edu.office-student-assistance/files/files/Forms/registration_action.pdf

Please be advised that a leave of absence is considered a withdrawal for financial aid purposes and will therefore affect a student’s full time status and financial aid packages. Consequently, loan repayment obligations may be triggered. It is strongly suggested that all students consult a financial aid advisor in an expeditious manner about all leaves of absence and withdrawals for detailed information about the status of their financial aid prior to submitting a Leave of Absence Application.

The semester prior to your return you must complete and file the necessary paperwork to resume your studies with OSA and provide completed and signed off copies to OSA and the PA Program office. The appropriate resumption of studies form may be found at http://www.pace.edu/office-student-assistance/forms

**TUITION CANCELLATION POLICY**

The Pace University-Lenox Hill Hospital Physician Assistant Program adheres to the Tuition Cancellation Policy stated in the University Academic Catalog. http://www.pace.edu/academic-catalogs/undergraduate/general-information-2/tuition-and-fees/tuition-cancellation-policy
DEMONSTRATION OF CURRENT COMPETENCY

Students whose usual course of study is interrupted either because of a leave of absence or the need to repeat a course, are required to demonstrate their current competency in certain PAS-level courses prior to resuming their studies or progressing in the program. To demonstrate current competency, a student may be required to take a written, oral or practical examination, or to perform clinical activities. A grade of 80% or higher is required in order to demonstrate current competency. Remediation of competency examinations is not permitted. If a student fails a competency examination, he or she will be required to repeat the course, even if the student successfully passed the course prior to the interruption of his or her studies.

If taken previous to a leave of absence the courses in which current competency must be demonstrated prior to the resumption of studies or progression in the professional phase of the PA Program can include but are not limited to: Pathophysiology (PAS 534-535), Clinical Medicine (PAS 601-603), Basic Sciences and Clinical Laboratory Medicine (PAS 604, 605), Clinical Applications (PAS 606,607), and Medical Pharmacology (PAS 547, 648).

READMISSION

Students who are dismissed for poor academic performance may not register for any PAS-level courses for at least one full academic year. After this time, students may apply for readmission to the PA Program. Students may be readmitted only once to the PA Program after academic dismissal.

PROGRAM CLOSURE/LOSS OF ACCREDITATION

In accordance with federal law and Pace University’s accreditation through the Middle States Association of School and Colleges, in the unanticipated event of either program closure, or loss of accreditation, Pace University would fulfill its obligation to currently matriculated students and continue to provide the necessary didactic and clinical experiences for them to complete the program.

EXPENSES

Current tuition and fees are available from the Office of Graduate Admissions and can be found at [http://www.pace.edu/prospectivestudents/graduate/tuition-fees](http://www.pace.edu/prospectivestudents/graduate/tuition-fees) All costs are subject to change at any time.

Other costs to be considered by the student are books, rent and utilities, food, transportation, and personal medical insurance costs. All students will be required to purchase medical diagnostic equipment and supplies, and lab jackets for the clinical year. Students need to also consider costs for Infection Control Certification, HIPAA Certification, Medical Terminology Certification, BLS/ACLS Certification, patient tracking software, immunization tracking software, PACKRAT and PANCE examinations. Any student who must repeat a clerkship for any reason will be
responsible for any fees and applicable credit hours. Please refer to our website for the most up-to-date information regarding program tuition and fees.

http://www.pace.edu/physician-assistant/tuition-and-financial-aid

The Program is not responsible for any changes in the tuition or financial aid of students who must repeat a course/semester for academic or behavioral reasons. Nor is it responsible for changes made while a student is on a leave of absence.
FORMS
PA PROGRAM STUDENT ADVISEMENT FORM

Student Name: ___________________________________________ Date: ___________

Didactic     Clinical          Fall     Spring       *Summer

*final summer advisement session must occur after 5/1 of the clinical year

Student Academic Self-Assessment: (To be completed by student)

Please circle the appropriate letter A-E in accordance to your answer
A= Strongly agree; B= Agree; C= Neutral; D= Disagree; E= Strongly Disagree

1. I understand the PA Program expectations.                A  B  C  D  E
2. I am able to manage class load, complete assigned tasks and keep up with Program studies and expectations. A  B  C  D  E
3. I am able to manage my stress level well.                A  B  C  D  E
4. My time management and study skills are adequate.       A  B  C  D  E
5. My professional performance is appropriate.              A  B  C  D  E
6. I am comfortable with my overall level of ability and knowledge. A  B  C  D  E

Student Professional Self-Assessment: (To be completed by student)

7. I show respect for other students, faculty, administrative personnel and preceptors/other medical personnel (if applicable) A  B  C  D  E
8. I am able to act appropriately in stressful situations.   A  B  C  D  E
9. I understand and respect cultural diversity and lifestyle changes. A  B  C  D  E
10. I maintain academic integrity at all times.              A  B  C  D  E

My concerns are:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Faculty Academic Assessment: (To be completed by faculty advisor)

<table>
<thead>
<tr>
<th>Student Current QPA (&gt;3.0)</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is student failing or in danger of failing any PAS level course?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Comments:
**Faculty Professional Assessment:** (To be completed by faculty advisor)

Please rate the student’s professional behavior over the past semester:

| Treats classmates, faculty and administrative personnel with respect, dignity and compassion | Satisfactory | Unsatisfactory |
| Maintains professional appearance and hygiene | Satisfactory | Unsatisfactory |
| Maintains academic integrity | Satisfactory | Unsatisfactory |
| Is punctual and attentive in classroom and clinical rotations (if applicable) | Satisfactory | Unsatisfactory |
| Able to adapt to stressful situations both in the classroom and on clinical rotations (if applicable) | Satisfactory | Unsatisfactory |
| Submits assignments on time and in professional format | Satisfactory | Unsatisfactory |
| Able to accept, apply and offer constructive criticism | Satisfactory | Unsatisfactory |
| Maintains professional behavior during classroom activities and on clinical rotations (if applicable) | Satisfactory | Unsatisfactory |
| Understands and respects cultural diversity and lifestyle changes | Satisfactory | Unsatisfactory |
| Adheres to institutional policies and procedures and respects negotiated decisions | Satisfactory | Unsatisfactory |
| Takes personal responsibility for own learning and personal choices | Satisfactory | Unsatisfactory |

**Advisement Discussions:** (academic, professional, or personal issues discussed):

- [ ] Graduating Clinical Year Student ONLY: Student has met programmatic standards required for graduation regarding professionalism

**Plans and Recommendations:**

---

**Student Signature:** _______________________________ **Date:** ______________

**Advisor Signature:** _______________________________ **Date:** ______________
PACE UNIVERSITY-LENOX HILL HOSPITAL
PHYSICIAN ASSISTANT PROGRAM

INCIDENT REPORT

Student Name (PRINT)    Year/Class    Date

Date Incident(s) Occurred    Time Incident Occurred

Institution/Office    Preceptor Name

Has an incident Report been filed at the Institution/Office?    Yes _____    No _____

If yes, who filed the report?
________________________________________________________________________________________

Describe incident in detail. Give times, names of other personnel present, etc.    Attach additional sheets as necessary
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Student Name (Signature)    Date

Please make three copies and submit:

Original for Program Faculty file    Copy for Student file
Copy to Department Chair    Copy to Program Director

89
PACE UNIVERSITY-LENOX HILL HOSPITAL
PHYSICIAN ASSISTANT PROGRAM

CLINICAL YEAR HEALTH CLEARANCE
CONSENT FOR RELEASE OF CONFIDENTIAL HEALTH INFORMATION

______________________________  _________________________
Student Name      Date

______________________________  ______________________________
Student ID      Date of Birth

I, _____________________________________, understand that Lenox Hill Hospital and other
clinical sites to which I am assigned may require information regarding my health status. I hereby
authorize Lenox Hill Hospital or The Pace University-Lenox Hill Hospital Physician Assistant
Program faculty and staff to release all or part of my medical record to the clinical sites in which I
am assigned. I hereby authorize the Pace University-Lenox Hill Hospital Physician Assistant
Program faculty and staff to maintain and release immunization and tuberculosis screening results.
I understand that all other medical records will remain confidential and will not be accessible to or
reviewed by program faculty or staff and will remain on file at the Lenox Hill Hospital Employee
Health Department.

______________________________  _________________________
Student Signature      Date

Do not write below this line for LENOX HILL HOSPITAL use only

**Medical Clearance**

After a review of all health information I certify that this student is found to be in good physical and
mental health and appears able to perform senior year physician assistant student responsibilities with
______ or without _____ accommodations.

Lenox Hill Hospital Practitioner’s name
(print): ________________________________________________

Lenox Hill Hospital Practitioner’s
signature: ______________________________________________
CLINICAL STUDENT EVALUATION OF DOCUMENTATION FORM
The Pace University-Lenox Hill Hospital
Physician Assistant Program

CLINICAL STUDENT EVALUATION OF DOCUMENTATION

Student Name: _____________________________                            Date:___________
Rotation Number: _______                                                            Rotation:___________

History:                                                                                                     (20)  __________
________________________________________________________________________

Physical Exam:                                                                                        (20)  __________
________________________________________________________________________

Assessment:                                                                                              (20)  __________
________________________________________________________________________

Plan:                                                                                                          (20)  __________
________________________________________________________________________

Organization, Professionalism, Timeliness:                                          (20)  __________
________________________________________________________________________

Final Grade___________________

Faculty Signature_________________________________________________________

92
CASE PRESENTATION
GRADING RUBRIC
CASE PRESENTATION GRADING SHEET

Student Name: _________________________________                                                                  Date:____________________
Rotation:    Surgery     Free Elective                                                                                  Rot#_____________________

Patient History and Physical Examination
  • Complete and focused, succinct
  • Thorough, logical appropriate assessment
  • Addresses both acute and chronic disease
  • Appropriate Management Plan  _________( 30 )

Differential Diagnosis:  You must include all of the following for each differential diagnosis that you considered for the acute problem of the patient you are presenting:
  • Gives brief overview of the etiology, signs and symptoms, epidemiology, risk factors, treatment options, and complications of each differential diagnosis.
  • Gives reasoning for and against each differential diagnosis which includes historical, physical exam findings, results of lab and diagnostic studies.

Differential Diagnosis #1  __________( 10 )
Differential Diagnosis #2  __________( 10 )

Patient Education
  • Addresses acute and chronic conditions
  • Includes disease prevention based on risk assessment
  • Addresses medications given and possible side effects
  • Explains tests and procedures patient may be going for and why
  • Gives instruction on symptoms to notify staff of
  • Psychosocial issues  __________( 20 )

Podium Skills:
  • Interactive, cohesive delivery, glances but DOESN`T READ from paper
  • Rate, tone and pitch of speech
  • Good movement, use of available space.  __________( 10 )

Group Facilitator Skills:
  • Actively involves students within the group
  • Includes all students in discussion within the group
  • Creates on non-threatening atmosphere for group discussion
  • Addresses all topics required  __________( 10 )

Research Article
  • Research article current (<5 years)
  • Articles summarized in students own words  __________( 10 )

Faculty: ____________________________________________                Final Score:                            _________(100%)

94
PATIENT EDUCATION PROJECT
GRADING FORM
PATIENT EDUCATION PROJECT GRADING FORM

Student Name ___________________________  Date: _____________________

Rotation: Behavioral Medicine  Rotation Number_________________

Content
- Addresses topic assigned to student
- Demonstrates good research base
- Educates classmates on how to teach patients about topic
- Demonstrates effective method for communicating material to patients
- Addresses how to identify those patients that require specific patient education
- Is able to answer questions regarding topic

__________(40)

Written and Other Material
- Materials potentially able to be used as patient education materials in a clinical setting
- May include but is not limited to poster, pamphlet, creating a lesson plan or small group discussion.
- Is properly footnoted and referenced if needed
- Material is presented in a creative fashion
- Materials are meticulously completed and submitted professionally

___________(30)

Podium Skills
- Interactive, cohesive delivery
- Glances at written material but DOESN’T READ from written material
- Rate, tone and pitch of speech
- Organized with good transition
- Good movement, use of available space

___________(30)

Final Score:

___________(100%)

Faculty:______________________________________
SITE VISIT EVALUATION
SITE VISIT EVALUATION

Student Name: ___________________________ Date: ______________

Preceptor Name: _________________________ Rot#: ______________

Evaluator Name: __________________________

Clerkship Site: ___________________________ Clerkship Specialty: ___________________________

Please rate each of the following areas on a scale of 1 (worst) to 20 (best):

1) Rate the student’s ability to perform histories:
   • Obtains all patient data
   • Interviewing technique
   • Obtains history in reasonable amount of time

   Rating (out of 25) _____________

2) Rate the student’s ability to perform physicals:
   • Organized and directed to chief complaint
   • Respects feelings of comfort
   • Explains procedure to patient

   Rating (out of 25) _____________

3) Rate the student’s ability to perform oral presentation:
   • Focused, concise and organized
   • Thorough
   • Logical Flow

   Rating (out of 20) _____________

4) Rate the student’s ability to formulate a differential diagnosis and management plan:
   • Fund of knowledge of disease process
   • Can formulate DDx and management plan
   • Patient education

   Rating (out of 20) _____________

5) Pharmacological fund of knowledge:
   • Was prepared and had adequate knowledge of pharmacology therapeutics

   Rating (out of 10) _____________

☐ Student is dressed appropriately including short white lab coat with PA Program patch on sleeve and Pace ID
☐ Student acts in a professional manner

TOTAL: ______________
CLINICAL CLERKSHIP EVALUATION FORMS
STUDENT EVALUATION OF CLERKSHIP
Please complete all the following questions. Please remember that professionally written comments are of utmost importance. After you have submitted this evaluation electronically, please print a copy and place it in the manila "Call Back Day" envelope.

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preceptor understood the PA concept</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>My role as a PA student was accepted by physicians, residents, nurses and technicians</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor or staff provided orientation to the clinical site</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor provided feedback on performance</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor delivered a formal progress report at mid- clerkship</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor held formal progress evaluation session at end of clerkship</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor helped student to identify strengths and areas of improvement</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor assigned appropriate tasks</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor adequately supervised student during patient encounters</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor allowed student opportunity to present patients</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preceptor gave student the opportunity to discuss diagnostic studies and treatment options</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor was available for consultation when needed</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor reviewed student clinical documentation</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor provided feedback on history and physical examinations</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Preceptor provided adequate formal and/or informal teaching discussions</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>The clerkship allowed students to achieve stated objectives</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
<tr>
<td>Classroom materials were adequate to prepare me for this clerkship</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
<td>◦</td>
</tr>
</tbody>
</table>
2. Please list the site's STRENGTHS:

3. Please list the site's WEAKNESSES
MID CLERKSHIP EVALUATION
Mid-clerkship evaluations are designed to give the preceptor an opportunity to provide feedback to students on their performance during each clinical rotation. Evaluations should be reviewed with students. Students should use this information to strengthen their skills. Students also have an opportunity to reflect on their own strengths and weaknesses by filling out the student response portion of the evaluation. Students must fax this evaluation to 212-618-6055 by the end of the 3rd week of each clerkship.

Student Name: ___________________________ Date: ________________
Preceptor Name: ___________________________ Rot#: ________________
Clerkship Site: ___________________________ Clerkship Specialty: ___________________________

**PART A (Student Response)**

<table>
<thead>
<tr>
<th></th>
<th>Excellent (A)</th>
<th>Good (B)</th>
<th>Below Average (C)</th>
<th>Poor (D)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>6</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>7</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

**Student Self Assessment:**

What am I doing well? (strengths)

How can I improve? (weaknesses)
## PART B (Preceptor Response)

<table>
<thead>
<tr>
<th>Question</th>
<th>Excellent (A)</th>
<th>Good (B)</th>
<th>Below Average (C)</th>
<th>Poor (D)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.) How would you rate the student’s ability to perform histories?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>2.) How would you rate the student’s ability to administer physicals?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>3.) How would you rate the student’s oral presentations?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>4.) How would you rate the student’s ability to formulate a differential diagnosis?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>5.) How would you rate the student’s ability to formulate and implement a management plan?</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>6.) How would you rate the student’s ability to perform clinical procedures? (e.g. administer I.V.’s, venipunctures, etc.)</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>7.) Professional behavior/ attendance</td>
<td>4</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

### Preceptor Assessment:

How can the student improve?

Additional comments/suggestions:

---

Student Signature

Preceptor Signature & Stamp
END OF CLERKSHIP EVALUATION
End of Clerkship Eval
Completed by the Preceptors, regarding the Students (Class of 08/2013), answered on a As needed basis. Before beginning an evaluation, the preceptors will be asked to select which student they are evaluating, followed by the date of the evaluation period.

1. Clerkship Site:
   -SELECT ONE-
   (ANSWER REQUIRED)

2. Clerkship Specialty:
   -SELECT ONE-
   (ANSWER REQUIRED)

3. Rotation Number
   -SELECT ONE-
   (ANSWER REQUIRED)

4. Please assess the PA student in each of the categories based on the level of proficiency evident at the end of the rotation.

5. Examination Skills
<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Excellent (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
</table>
   Medical Interview -- Elicits patient history in an organized, concise & professional manner
   Additional Comment: ____________________________
   Physical Examination -- Performs accurate, organized exam with respecting patient's privacy & comfort
   Additional Comment: ____________________________

6. Reporting & Procedure Skills
<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Excellent (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
</table>
   Oral Presentation -- Presents a clear, concise, organized statement of patient problems
   Additional Comment: ____________________________
   Written Patient Report -- Writes patient information in a legible, accurate & organized manner
   Additional Comment: ____________________________

108
**Laboratory Test Knowledge -- Demonstrates understand & indications for common laboratory tests**

<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Excellent (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Comment:  

---

**Clinical Procedures -- Performs procedures with skills & confidence**

<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Excellent (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Comment:  

---

**Knowledge & Assessment Skills**

**Outstanding (A+)**

- Problem Solving & Critical Thinking -- Correctly synthesizes & analyzes clinical data
  
<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Excellent (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Comment:  

---

- Factual Knowledge -- Correlates basic & clinical sciences with clinical application
  
<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Excellent (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Comment:  

---

- Assessment/Differential Diagnoses -- Formulates & justifies differential diagnoses
  
<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Excellent (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Comment:  

---

**Management Skills**

**Outstanding (A+)**

- Ability to Form Management Plan -- Formulates effective management plans including patient education, pharmacologic & nonpharmacologic treatment
  
<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Good (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Comment:  

---

- Chronic Disease Management -- Formulates effective management plans for patients with chronic disease
  
<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Good (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Comment:  

---

- Ability to Implement Management Plan -- Implements plan appropriately & arranges for follow up
  
<table>
<thead>
<tr>
<th>Outstanding (A+)</th>
<th>Good (A)</th>
<th>Good (B+)</th>
<th>Average (B)</th>
<th>Below Average (C)</th>
<th>Unacceptable (D)</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional Comment:  

---
### Outstanding (A+)
### Excellent (A)
### Good (B+)
### Average (B)
### Below Average (C)
### Not Applicable (D)
### Not Observed

**Relating to Colleagues -- Works effectively with nurses & other health professionals**

Additional Comment: 

**Relating to Patients -- Relates & communicates effectively with patients**

Additional Comment: 

**Understanding of PA Role -- Acts appropriately within the role of a PA**

Additional Comment: 

**Self-Confidence -- Demonstrates appropriate confidence in own abilities**

Additional Comment: 

---

### Professionalism

**Excellent (A/A-)**

**Good (B+/B)**

**Below Average (B-/C)**

**Not Observed**

Reliability -- Is punctual, assumes responsibility & is attentive to duties

Additional Comment: 

Professionalism -- Maintains professional attitudes & demonstrates ethical behavior

Additional Comment: 

Attitude -- Responds appropriately to supervision & constructive criticism

Additional Comment: 

Appearance -- Dresses appropriately & maintains a clean, kempt appearance

Additional Comment: 

---

### Overall competence -- Exhibits overall competence, taking above factors into account

**Excellent (A/A-)**

**Good (B+/B)**

**Below Average (B-/C)**

**Not Observed**

Additional Comment: 

---
Suggestions for improvement/comments:
DROP/ADD FORM
OFFICE OF STUDENT ASSISTANCE
REGISTRATION ACTION FORM

STUDENT ID NUMBER          LAST NAME                                  ...     FIRST NAME                                              MIDDLE
If this is a new address/phone #, please indicate what you would like to be updated on your record

☐ Address     ☐ Telephone

STREET ADDRESS/P.O. BOX                  CITY                                              STATE                                             ZIP

DAY TELEPHONE NUMBER                                  EVENING TELEPHONE NUMBER                                                 MOBILE/CELL NUMBER                                                                    E-MAIL ADDRESS

*IF YOU HAVE FILED FOR GRADUATION, PLEASE NOTIFY THE DEGREE AUDIT OFFICE OF THESE CHANGES*

YEAR : _______

PLEASE COMPLETE: IF YOU ARE MAKING A CHANGE TO YOUR ORIGINAL REGISTRATION, PLEASE STATE THE REASON FOR CHANGE:
(Changes to your credit load may have an impact on Financial Aid, Health Insurance, etc.)

SECTION A – COURSE(S) TO DROP

<table>
<thead>
<tr>
<th>REG CODE</th>
<th>SUBJECT</th>
<th>COURSE NO.</th>
<th>COURSE REFERENCE NO.</th>
<th>CR.</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACC</td>
<td>103</td>
<td>10603</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

TOTAL CREDITS:

SECTION B – COURSE(S) TO REGISTER / ADD

<table>
<thead>
<tr>
<th>REG CODE</th>
<th>SUBJECT</th>
<th>COURSE NO.</th>
<th>COURSE REFERENCE NO.</th>
<th>CR.</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACC</td>
<td>104</td>
<td>10608</td>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

TOTAL CREDITS:

I agree to be governed by the conditions that are prescribed in the current Pace University catalog (which I have had the opportunity to read) with respect to the registration of students, scholarship, attendance, payment or abatement of fees, and other policies relevant to Pace University students. To the best of my knowledge, I have answered all foregoing questions truthfully and accurately.

STUDENTS’S SIGNATURE     DATE

HOME CAMPUS: [ ] New York (1)    DIVISION: [ ] Undergraduate (01) [ ] Doctoral (05) SEMESTER: [ ] SPRING (2) [ ] SUMMER 1 (4) YEAR: _______
[ ] Pleasantville (2) [ ] Graduate (02) [ ] Law – LLM (06) [ ] FALL (7) [ ] SUMMER 2 (5)
[ ] White Plains (3) [ ] Law (03) [ ] Law – SJD (09) [ ] OTHER

OFFICE USE ONLY
[ ] CHECK FOR HOLDS
[ ] ORIGINAL REGISTRATION
[ ] UPDATE TSASPAY (IF PAYMENT MADE )

OSA SIGNATURE DATE
PERMISSION TO REGISTER FOR EXCEPTIONS

Graduate students please refer to your school catalog for academic policy regarding exceptions.

If you are requesting permission to register for exceptions (see list below), this form must be completed, along with the reverse side, and submitted to the appropriate dean, chairperson, or advisor for approval. Once written approval has been granted, you are required to register in person with this form after your registration appointment time at the O.S.A. office at your home campus. Additional forms are available at OSA office.

Degree/Major: ___________________________   Expected Date of Graduation: ___________________________

◆ CLOSED CLASS  * If you are currently registered for a different section of the closed class, please indicate.

<table>
<thead>
<tr>
<th>COURSE REFERENCE NO.</th>
<th>SUBJECT</th>
<th>COURSE NO.</th>
<th>CURRENTLY REGISTERED C.R.N.</th>
<th>ACADEMIC APPROVAL/DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

◆ OUT OF MAJOR COURSE

<table>
<thead>
<tr>
<th>COURSE REFERENCE NO.</th>
<th>SUBJECT</th>
<th>COURSE NO.</th>
<th>CURRENTLY REGISTERED C.R.N.</th>
<th>ACADEMIC APPROVAL/DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

◆ OUT OF DIVISION COURSE

<table>
<thead>
<tr>
<th>COURSE REFERENCE NO.</th>
<th>SUBJECT</th>
<th>COURSE NO.</th>
<th>CURRENTLY REGISTERED C.R.N.</th>
<th>ACADEMIC APPROVAL/DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

◆ EXCEEDS MAXIMUM CREDIT HOURS

<table>
<thead>
<tr>
<th>TOTAL CREDITS APPROVED FOR CURRENT SEMESTER</th>
<th>ACADEMIC APPROVAL /DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

◆ SOPHOMORE, JUNIOR OR SENIOR STANDING REQUIRED

<table>
<thead>
<tr>
<th>COURSE REFERENCE NO.</th>
<th>SUBJECT</th>
<th>COURSE NO.</th>
<th>CURRENTLY REGISTERED C.R.N.</th>
<th>ACADEMIC APPROVAL/DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

◆ TIME CONFLICT (Please include both courses that are conflicting)

<table>
<thead>
<tr>
<th>COURSE REFERENCE NO.</th>
<th>SUBJECT</th>
<th>COURSE NO.</th>
<th>CURRENTLY REGISTERED C.R.N.</th>
<th>INSTRUCTOR APPROVAL/DATE</th>
<th>CHAIR APPROVAL /DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

◆ UNSCHEDULED COURSE (Tutorial)

<table>
<thead>
<tr>
<th>COURSE REFERENCE NO.</th>
<th>SUBJECT</th>
<th>COURSE NO.</th>
<th>CURRENTLY REGISTERED C.R.N.</th>
<th>DEAN APPROVAL/DATE</th>
<th>CHAIR APPROVAL/DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

◆ INSTRUCTOR OR CHAIRPERSON SIGNATURE REQUIRED (ex. Internships, travel, etc.)

<table>
<thead>
<tr>
<th>COURSE REFERENCE NO.</th>
<th>SUBJECT</th>
<th>COURSE NO.</th>
<th>CURRENTLY REGISTERED C.R.N.</th>
<th>INSTRUCTOR APPROVAL/DATE</th>
<th>CHAIR APPROVAL /DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>